

NEWSLETTER



Mission Statement

The New England Society for the Treatment of Trauma and Dissociation (NESTTD) is a nonprofit organization devoted to providing professional training and education for the effective treatment of psychological trauma, complex trauma and dissociation.

Founded in 1984, NESTTD is incorporated as a nonprofit organization. The society has its headquarters in Massachusetts and has members from Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont.

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Letter from the President

Spencer Nineberg, LICSW



This is my last letter as President. It amazes me that 2 years have gone already. On July 1, Carolinda Sterczala will take over as President and I will move on to other NESTTD jobs. One of the main things I have learned is how important the mission of NESTTD continues to be. Although trauma is now taught in many graduate schools, unlike the era in which NESTTD was founded,

the treatment of the dissociative disorders is still under-taught. And there continues to be a need for ongoing education and training about trauma. I am really proud that we produce programs that continue to be top quality, fascinating and practical.

Many thanks to the hardworking crew who perform this feat again and again. We now put on 7 programs a year, 3 more than when I joined. In addition to the Fundamentals program, which gets better every year, we now have the new and very well-received Friday Afternoon Series, which meets twice a year and features local speakers on topics that we expect to draw a somewhat smaller crowd than our Saturday presentations.

I want to give a special thanks to Isa Mattei who is leaving the board in June and to Roger Abdell, who left recently. We will miss your good humor, your willingness to pitch in, and your creative contributions in our meetings. And another goodbye to Wendy Forbush after 11 years as Program Co-Chair extraordinaire. There is so much to say about her that I have written a separate piece about her in the column to the right.

I want also to thank Janice Herndon, who rescued us after our new Member Services Director resigned after 6 months. She is amazingly organized, competent and good-natured, and we are so lucky to have her as our Member Services Director.

And finally I want to thank Roberta Fortgang who, as past president, was my guide and supporter all through my tenure, most especially at the beginning. She is wise, generous and kind, and I am so grateful. I am hoping that we can continue to have dinner at Full Moon on the occasional Tuesday.

Warmest regards,
Spencer Nineberg

Wendy Forbush

On June 30th, 2018 Wendy Forbush will step down from her role as co-chair, with Rina Dubin, of the Program Committee, and she will be sorely missed even though she will continue to help with registration and CE's. She has been co-chair of Program for almost 11 years. In that time NESTTD, led by her committee, has produced meeting after meeting of top quality, cutting-edge programs.

It all began in the late 1990's. Wendy knew quite a lot about trauma and dissociation but didn't quite get DID. She was working in a new agency in New Bedford at the time and she inherited a so-called "problem patient," someone no one had been able to help. Before long she realized that this person had DID. As she began to educate herself about DID she eventually discovered a total of 8 clients in her agency's caseload that had DID. She was driven to learn all she could about it. She started going to the ISSTD annual conferences in 1997. There she met a number of people from NESTTD, which she joined in 2002. Wendy says that she had felt "saved" by ISSTD and NESTTD and, motivated by a desire to give back, she joined the Program Committee and became co-chair in the fall of 2007. Wendy was instrumental in developing the Fundamentals event that NESTTD holds every year to teach the basics about recognizing and treating trauma and dissociation. At Fundamentals Wendy has been teaching a popular workshop called "Recognizing and Assessing Dissociative Phenomena in Your Office." Talk about "giving back"!

On the board Wendy has been an historian and organizer, especially during this slightly chaotic year where we unexpectedly lost our Member Services Director. She is a detail person and likes things to be spelled out clearly, an attribute of hers I have come to admire and rely on. She usually knows what to do when there is some glitch. And she seems cheerful even when she has every reason not to be. We will really miss her. Thank goodness she is not disappearing completely. In addition to her Program committee hat Wendy also handles CE's and the "back table" at registration and so we will still see her.

Wendy, deep gratitude for all you have given to NESTTD.

Editor's Corner

Barbara Phillips, PhD, LICSW

“Not so long ago, if someone called me a racist, I would have kicked and screamed in protest, ‘But I’m a good person!’ I would have insisted, ‘I don’t see color! I don’t have a racist bone in my body!’ I would have felt insulted and misunderstood and stomped off to lick my wounds. That’s because I thought being a racist meant not liking people of color or being a name-calling bigot.” (Debby Irving, *Waking Up White*)

A good number of we White therapists share similar feelings of race-related confusion and anxiety. While we care deeply for our clients and our colleagues, and uphold the ethical mandates of our professions assiduously, we may also have parts intent on defending us against appearing ignorant or racist.

Unknowingly, this may perpetuate a profound silence. Along with Debby Irving, I believe most White people would take a stand against racism if only we knew how or if we imagined a role that we might have. At this point, the only thing needed for racism to continue is for good people to do nothing.

As I reflect on the predominance of a mono-racial presence in NESTTD, I am ready to contribute what I can of my own experience so that others might share in this meaningful adventure of personal and political growth. In the late '80's, I immersed myself in Deaf culture and American Sign Language because a Deaf client chose me as her therapist. Admittedly, I felt more than a bit threatened as I waded out beyond my cultural and language depths. But I was eager to learn about the Deaf world and so dove head on. To my surprise, what emerged was a deeper knowing of myself.

I believe that by grappling with the ways that racism has affected all of us, we can make a measurable impact not only on the lives of people of color, but on our own lives, as well. We can do this! But as the most studied minds on this topic have repeatedly said, we have to start with ourselves.

Don't know where to begin?

See www.debbyirving.com/21-day-challenge/ For **21 days**, do one action to further your understanding of power, privilege, oppression, and equity.

“When we walk to the edge of all the light we have and take a step into the darkness of the unknown, we must believe that one of two things will happen. There will be something solid for us to stand on or we will be taught to fly.” (Patrick Overton, *The Leaning Tree*)

UPCOMING EVENTS!

Save the following dates for our upcoming events! Additional details will be posted on the website as information becomes available.

***Nancy Napier, MSW, LMFT:
Unblocking What's Stuck:
Using Somatic Experiencing®
and Body-Based Parts to
Support Trauma Resolution
20 Oct 2018 • 9:00 AM**

***Nancy Napier, MSW, LMFT:
Intensive Program
20 Oct 2018 • 1:15 PM**

***Friday Afternoon Series
9 Nov 2018 • 1:00 PM**

***Diane Poole Heller, PhD:
All-day Program
1 Dec 2018 • 9:00 AM**

***Gary Bailey, MSW: Half-day
Program
9 Feb 2019 • 9:00 AM**

***Gary Bailey, MSW: Intensive
Program
9 Feb 2019 • 1:15 PM**

***Bethany Brand, PhD:
Half-day Program
6 Apr 2019 • 9:00 AM**

***Bethany Brand, PhD:
Intensive Program
6 Apr 2019 • 1:15 PM**

Committee Updates

Nomination Committee

The Nomination Committee would like to extend our appreciation to all members who voted in our last election at Dolores Mosquera's presentation in April. We're very pleased that you re-elected two outstanding Board members: Jessica Reed, LICSW, our Treasurer, and Deborah Hughes, LICSW, one of our Members-At-Large. You also endorsed our newest nominee, Sandrine Aegerter, MS, LMHC, for Member-At-Large. All three bring a great deal of energy and commitment to our board, and we're very fortunate to have them.

*Roberta Fortgang, LICSW
Chair, Nomination Committee*

Outreach and Publicity Committee

Dear Members,
This past fall, I had the pleasure of experiencing the continuously welcoming atmosphere facilitated by Mark Nickerson, organizer and host of a 3-day training/presentation by Dolores Mosquera in Natick, MA. As Chairperson of OP (Outreach and Publicity Committee), this experience has since inspired me to address an essential element of the mission of OP.

Drawing on this "reMARKable" experience, I have developed a continual and persistent awareness of Outreach and Publicity as going beyond the written word, the visual appeal of a flyer, or the invitational quality of an informational email. To this end, we at OP are

committed to increasing the presence of diversity at NESTTD, as well as to increasing a warm interactive presence for NESTTD newcomers at our various presentations.

*Barbara Phillips, PhD, LICSW
Chair, Outreach and Publicity Committee*

Friday Afternoon Series Committee

NESTTD Friday Afternoon Series workshops are designed for smaller audiences than attend our Saturday presentations, and may include interactive opportunities for experiential exercises as well as videos of clinical sessions and demonstrations of specific skills.

Our new Friday Afternoon Series Committee was very pleased at the response to the second program in our series, which was presented on April 27th. The program (Three Therapeutic Models: Concepts and Demonstrations of Working with Traumatic Experiences: EMDR, IFS, AEDP) was very well received and the speakers were illuminating and inspiring. Our next program is scheduled for November 9th – details to follow. If you haven't already joined us for this series, we hope you will consider taking this next opportunity to do so.

*Roberta Fortgang, LICSW
Committee Chair, Past President*

NESTTD Presentation Review: Dolores Mosquera

Barbara Phillips, PhD, LICSW

Editor

We, at NESTTD, are extremely fortunate to have had the opportunity to experience the 2-day Presentation given by Dolores Mosquera in April. Dolores, who came to us from Spain, teaches and lectures internationally. She is also a published writer several times over. Extremely knowledgeable on the subject matter of the application of EMDR across diagnostic categories, the combination of her multifaceted teaching style, as reported by members in attendance, together with her relational approach, made for effortless learning.

In addition to presenting material by means of lecture, Dolores is also extremely generous in sharing her clinical work by means of numerous video segments that illustrate salient points, by visual, auditory, and intellectual means. Dolores's teaching style does not end there. Instead, she episodically weaves in discretionary admissions of feeling stumped or her own clinical errors of pacing, responses, and/or utterances, as therapist. We laugh with her. We resonate with her. In turn, we grant ourselves permission to be clinically vulnerable. We forgive ourselves for the errors made and bask in the non-hierarchical container that she has facilitated towards our learning.

In the Saturday program, Dolores addressed some of the difficulties in the application of EMDR standard protocol across diagnostic categories, owing in part, but not limited to, memory networks that may be stored in different parts of the personality and not accessible in the 1st phase of EMDR; and varying degrees of client unawareness/inaccessibility of missing pieces of experience that may in turn eclipse trust in the therapist relationship. On numerous occasions, Dolores emphasized: nonrealization



Dolores Mosquera

of trauma is a crucial aspect of severe traumatization. Therefore, it is imperative to both pace and adapt the clinical process to a client's timing.

Going forward, Dolores endorsed, explained, and demonstrated by means of annotated videotaped sessions, the use of an imagined Safe Space with a variety of clients: "A new space where you can take care of your entire mind, body, and spirit." Working towards aspects of time orientation was also addressed as crucial by means of Presentification: separation of the past, the present, and the future – aka "That was then, this is now;" and Personification: separation of inside and outside worlds –aka "It happened to me."

In the Sunday presentation, among the topics addressed and expanded is the following "thumbnail" account: Understanding the Language of Dissociation; Working with the Internal System of parts; Understanding the Internal Conflict in adults with dissociative disorders – How to Begin the Work; The Phobia of Traumatic Memories; and Grounding Techniques towards expanding the Window of Tolerance for positive affect and the capacity to stay present.

Feedback evaluations from members and attendees were exemplary in their response to the material conveyed in Dolores's presentation, as well as to her teaching style.

Members Area

Member Spotlight

By Gail Hardenbergh, LICSW
NESTTD Member-at-Large

Amanda Curtin, LICSW runs long-term experiential groups for Trauma Survivors in Cambridge. She has been a NESTTD member for a few years. “I didn’t know about NESTTD until a few years ago. It helps so much with the isolation. I’m so glad I found it. The trainings are wonderful.”

Marianne Mostowitz, LMHC, ATR practices Art therapy and EMDR. She is a clinician at Eliot Community Human Services in Everett. “I have been coming to trainings for several years and I am just about to join NESTTD. I am looking forward to participating more in the community.”

Greta Schnee, LMHC works with complex trauma in private practice in Arlington. “NESTTD draws the best and brightest in the field. They offer topics that are the pulse of what’s important. Trainings are very reinforcing. And I enjoy the connections I make at the trainings.”



Ellen McCarthy, Greta Schnee, Vita Golub, Jessica Reed, Sandrine Aegarter

Cathleen Grant, LICSW is in private practice in the Back Bay and in Raynham and works with Complex trauma, DID and substance abuse. “I love NESTTD. It nourishes me and my work. There are wonderful presenters. It’s good to be with my tribe!”

Jennie Knott, LICSW works at Mass Art in Boston and the Psych Garden in Belmont with complex trauma. “After grad school I was relieved to learn NESTTD existed. Presenters are very high quality. There is a balance of academic competence coupled with therapeutic expertise and compassion. Topics are so important and relevant to working with complex trauma. These can be tough subjects – some seem to be taboo anywhere else.”



Susan Liebowitz & Sandrine Aegarter



Albert Cagganello

Peggy Wirth & Eileen Reich



Jessica Hamman & Regina McCaffrey

Why a Trauma Therapist Recommends Chessy Prout's *I Have the Right To: A High School Survivor's Story of Sexual Assault, Justice and Hope*

Peter Pruyn, LMHC
NESTTD Member

As a psychotherapist who works with trauma survivors, I was deeply moved by Chessy Prout's recent memoir, *I Have the Right To: A High School Survivor's Story of Sexual Assault, Justice and Hope*. Written with *Boston Globe* reporter Jenn Abelson, *I Have the Right To* chronicles Chessy's journey from being sexually assaulted as a 15-year-old freshman at St. Paul's boarding school in Concord, New Hampshire, through her recovery and present-day advocacy. Throughout the book, Chessy's relentless honesty provides the rest of us with a gift: intimate insight into the world of trauma and the arc of trauma recovery. Because her recovery is ultimately so successful, her narrative is a rich source for our clients to learn about many elements of trauma recovery, as well as a source of inspiration for clients and therapists, alike. Here I will summarize just a few of the features of trauma recovery that Chessy's honesty allows us to witness, including: secure attachment,

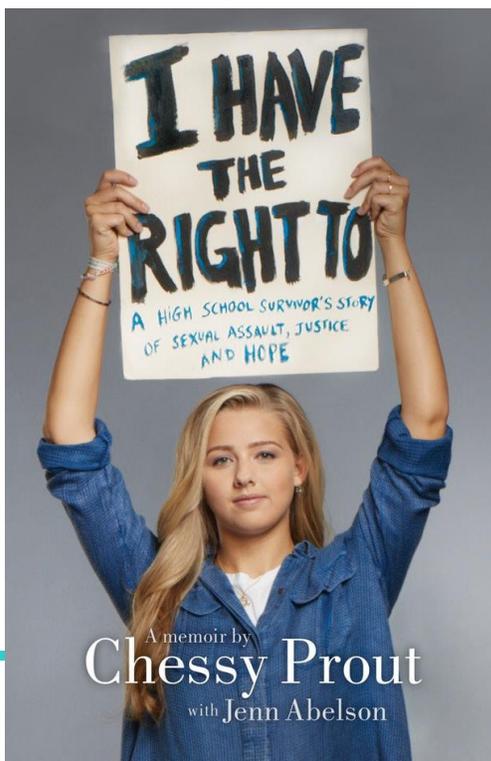
counseling and psychotherapy, supports, shame, dissociation, emotional regulation, and post-traumatic growth.

Secure Attachment

A critical element of healthy human development is a safe and reliable relationship between caregiver and child. This results in what is called secure attachment. Secure attachment provides two things. First, as the name implies, it gives the child a sense of safety in the world by the parent acting as a refuge to which the child can always return. In this way, the parent becomes a trusted "base of operations" from which to explore the world. Second, the parent models healthy emotional regulation, thereby teaching the child to develop an independent capacity to regulate their emotions. Secure childhood attachment is a key factor in how resilient we become later in life.

It is clear that one of Chessy's many assets in her journey is secure attachment with her parents, Susan and Alex Prout. Two days after her assault, Chessy had not yet told her parents.

As she sat alone on the floor of a dorm room at midnight debating whether to call her mother and tell her, the thought that gets Chessy to actually make the call is "Mom always made things better." Months later, just before entering the courtroom on the first day of her assailant's trial, Alex says to Chessy, "Listen, Chessy, anytime you need me, I am right here. I am sitting ten feet away from you. You can keep your eyes on me." Chessy then writes "Dad was my hero."



A memoir by
Chessy Prout
with Jenn Abelson

Such secure attachment at home later enables Chessy to form additional supportive attachments with others along the way, including therapists.

Counseling and Psychotherapy

A key feature of Chessy's successful recovery was that she and her family had a preexisting relationship with the school counselor. As a result, Susan knew who to call after Chessy told her about the rape, and Chessy knew who to go to for support. Her counselor provided a crucial nonjudgmental oasis within an institution that was about to become abusive, itself. Chessy also gained specific tools for self-soothing and psycho-education about trauma.

After leaving school for the summer, Chessy then engaged with a psychotherapist near her home on a longer-term basis. This engagement eventually provided a forum for the family to discuss difficult ongoing choices, such as the gut-wrenching decision of whether Chessy should return to the school in the fall. By advocating for Chessy's autonomy in this choice, this therapist planted seeds for Chessy's ongoing sense of empowerment.

Supports

Time and time again, Chessy emphasizes how the ongoing support of her family saved her life during her recovery. The first family member she told about her assault was her older sister, Lucy, who was graduating from St. Paul's that same week. After Chessy told her, Lucy's first words were, "*It's not your fault.*"

Throughout her ordeal, Chessy reports how critical hearing those words were to her, both in that moment as well as over the next two years. Similarly, when Chessy tells her mother about the assault on the phone the next day, Susan's first words are, "It's going to be O.K. Are you safe right now?"

Tragically, such supportive initial responses from loved-ones are atypical. Victims often delay telling loved-ones out of shame—if they tell them at all. It is far more common for family members to respond with "Why didn't you tell me?!" or victim-blaming, such as, "Why did you go out with him?!" Sadly, these only result in heightening the victim's shame. Over time Chessy's support network gradually extends well beyond her family, connecting her with other survivors and advocacy organizations, some of whom she is working with as an advocate today. No one survives alone.

Shame

Shame is central to the sexual abuse survivor experience. Meanwhile, shame is so powerful that most of us are ashamed ... to even talk about shame! As a result, the shame persists.

I define shame, and it's close-cousin, guilt, for my clients in the following way. Guilt is the emotion we feel when we know we've done something wrong. Shame is the emotion we feel when *other people* know we've done something wrong. It includes the fear of being found out and cast out by others. It is the opposite of a sense of belonging and acceptance.

Lucy and Susan's initial responses to Chessy laid the foundation for the sense of belonging and acceptance that her family provided throughout. This served as a potent antidote to the subsequent deliberate shaming by the school and her classmates. One could frame Chessy's journey over the next two years as successfully shedding that shame.

Dissociation

A little-known aspect of trauma is the capacity for our brains to make us "check-out" during moments of trauma. This hardwired response allows us to survive the pain. If being fully aware of our five senses and what is happening to us is being fully associated with reality, the opposite is being dissociated. Sadly,

dissociation is frequently overlooked and misunderstood by even members of the mental health profession. Chessy does an enormous service by offering an intimate description of her experience of dissociation in terms that anyone can understand.

During the assault, she writes that she repeatedly tried to resist verbally, “but the pipeline that delivered words to my mouth was gone.... I felt paralyzed.... I...felt myself float above my body.... I was lifeless.... I couldn’t feel my body anymore.” Such muteness, freezing and numbness during trauma has *nothing to do* with lack of courage, will, or vocabulary. It is a result of the brain switching into survival mode. This includes the area of prefrontal cortex that is responsible for speech processing going off-line.

Such basic brain science can help survivors feel less guilt and shame over their response during an assault.

Emotional Regulation

It’s normal to have a complicated relationship with our feelings. But in the end, feelings are nothing more than feedback, messages in a bottle that offer guidance about our needs and choices—if we’re willing to listen to them. Meanwhile feelings are a lot like the weather: sometimes they’re sunny, sometimes they’re cloudy, but they never last forever. Healthy families foster healthy emotional regulation by modeling the appropriate expression and processing of feelings. This is facilitated by what is called emotional attunement between family members, that is, the experience of “feeling felt” by others on an ongoing basis.

Before reading Chessy’s book, I had various clinical ways of describing a healthy family. After reading the book, here is how I

would describe a healthy family. Each phrase is derived from a scene in the book.

A healthy family is a family where: when someone is afraid, they say so, and someone is there to hold their hand; when someone is sad, they cry, and someone is there to hug them; when someone is angry, they vent, and someone is there to hear them; when someone needs solitude, they say so, and others give them space; and when someone is joyful, they celebrate, and someone is there to cheer them on.

Post-Traumatic Growth

Post-traumatic growth describes the personal growth that occurs—sometimes with startling speed—once someone has recovered from trauma. At first this term may sound like an oxymoron. How can trauma cause growth? Such growth occurs because healing from trauma releases the survivor from the shackles of shame and the avoidance of the people, places, and things that used to be triggering. Once liberated from these, the world becomes their oyster once again.

I can’t think of a more compelling example of post-traumatic growth than Chessy Prout. Her inspiring journey from victim to survivor to thriver and impassioned advocate contains all the elements of successful trauma recovery.

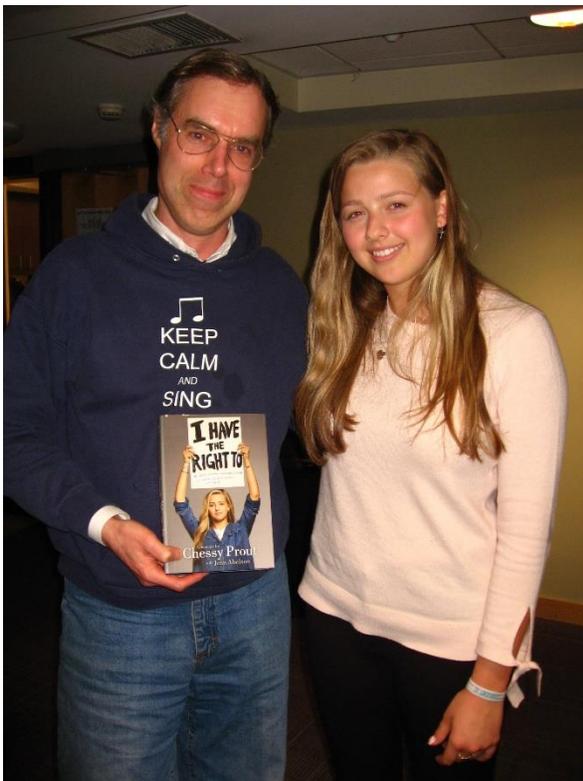
In Vulnerability, Strength

These are only a fraction of the lessons *I Have the Right To* offers. In addition to Chessy’s narrative, the book ends with a heartfelt open letter by Susan and Alex to other parents, including an ample list of resources.

Trauma pioneer Judith Herman characterized the essence of trauma as the experience of disempowerment and disconnection. Trauma recovery, therefore, is a process of cultivating empowerment through a sense of connection. This is the essence of Chessy’s journey.

Nothing dismantles stigma like a first-person narrative of success. At a recent author talk at Simmons College, Chessy ended the Q&A with this: “I’m no longer afraid to speak my mind. I don’t care if I’m called a bitch or bossy. When men speak their minds, they’re called ‘confident’, they’re called ‘leaders’. And I’m not going away.”

On behalf of my clients and colleagues, Chessy, I’m so very glad.



Peter Pruyne, LMHC, is a psychotherapist in Cambridge, MA, and a member of the New England Society for the Treatment of Trauma and Dissociation.

A Note to Our Members

We, at NESTTD, wish everyone a very happy upcoming summer. Please know that we are available to answer your questions, help navigate your way through the website, or set up your directory profile. Moreover, we want to connect with you, so please keep in touch by means of our NESTTD Members Area. We look forward to receiving your professional updates via email. Thank you so much for your continued support through Membership.