RTR SOCIOMETRICS
Relational Trauma Repair

Embodied, Experiential Processes for Working with Adult Relational Trauma Addiction and Adverse Childhood Experiences

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It’s all your fault, if only you were better, bigger, smarter, nicer, cuter…different ……I wouldn’t have to hurt you.
Trauma in the home has a lasting impact:

- When those we rely on for our basic needs of trust, empathy, and dependency become abusive or neglectful, it constitutes a double whammy.

- Not only are we being hurt, but the very people we’d go to for solace are the ones who are hurting us.

- Our nervous system braces for danger in those moments, ready to flee to safety or stand and fight. (Porges)

- But if we can do neither, if escape seems impossible because we are children growing up trapped by our own size and dependency, then we freeze, withdraw, shut down.

- We remain present physically but absent psychically and emotionally, we withdraw or dissociate.
The residue of the painful or distressing experiences then lives in our body/mind in an unconscious state.

We have absorbed experience through our senses (sights, sounds, textures, smells etc) but the sense impressions have no story attached to them, no meaning has been made out of them.

Because the thinking mind temporarily shuts down we do not make sense of the experience as it is happening, there is no meaning or consciousness around what occurred.
- The “memories” live within us without a context, without an understanding of time or place.

- Because they are scattered, body memories and wordless sense impressions, we feel fragmented.

- Memories stay unthought about, unprocessed, out of our conscious awareness.

- These experiences live in us beneath the level of our awareness….until something triggers them back into being.

They get triggered through PARENTING and PARTNERING

The pain-filled feelings around dependence and vulnerability from our early intimate relationships, act as triggers for unprocessed, unconscious pain.

THEN WE PROJECT THAT PAIN FROM YESTERDAY ONTO OUR RELATIONSHIPS OF TODAY……
PAIN BECOMES INTERGENERATIONAL.
Developing Emotional Literacy: Learning to Talk out Rather than Act Out

- Unresolved emotional and psychological pain that is never elevated to a conscious level, thought about, reduces our ability to tolerate strong, intense or stressful situations.
- We can’t make sense of what’s getting triggered.
- We don’t know what we don’t know and we don’t know that we don’t know.
- We explode, implode or self medicate to shut them down.

- The ability to tolerate feeling intense emotions without exploding, imploding or self medicating and to translate those intense states into words so they can be thought about, processed and understood is emotional literacy that leads to emotional intelligence.

- We grow, we change, we have choices as to how we live.
That’s why we need experiential methods so that we can *stimulate* and *get in touch* with the feelings that have been shut down.

We need new EXPERIENCES of relating and reconnecting with ourselves and others.
**SOCIOMETRICS ARE…..**

**EXPERIENTIAL and EMBODIED**

They offer countless opportunities for group members to reconnect with themselves and each other in authentic, spontaneous ways.

They get groups out of their chairs and engaging with each other, reducing isolation and facilitating engagement, bonding and connection. They heal each other through meaningful connection.

In working with adult relational trauma we’re often working with how those dysregulated often child-like states get triggered by adult relationships.

The combination of floor checks and The Trauma Timeline help clients to come into awareness about what they’re carrying inside and to give those parts of themselves a voice and embodiment….
Move clients from states of dysregulation to coregulation, and from co-regulation to self-regulation. Self regulation emerges from successful co-regulation.

Build resilience, clients are on their feet, moving and oriented in the room. They exercise their own volition, choice-making,

Take the guess work out of treating relational trauma experientially. They do not rely on interpretation by the therapist, they rely on the actual experience of group members opening up and sharing each other through a structured, experiential, embodied process.

Group size is not an issue: More people – more possibilities for identification and connection.

Group Make Up is not an Issue: Criterion questions, commands and cards can be made relevant to any group, gender, population, situation or age.

Intra-personal and Inter-personal, clients develop internal skills of managing thought and emotion and interactional skills of relating

Group members are motivated and inspired, through witnessing others doing the same. It’s relational.
**My Program Basics are…..**

**Floor Checks:** TRANSLATE frozen or hidden feelings into words, make them conscious. SHARE with others, LISTEN as others share.

**Timelines:** Reconnect with self along developmental continuum, warm-up and focus attachment dramas.

**Experiential Letter Writing:** Offer embodied role plays, doubling and role reversal.
Small Embodied Role Plays can be Incorporated into Relational Trauma Repair RTR/ Sociometrics

- Allows for smaller role plays to be done within a larger sociometric group process

- The protagonist focuses their trauma work and is warmed up so the work itself is less wear and tear on the protagonist, the group and the director.

- The warm-up and focusing on a particular role play/drama has already occurred
Trauma can lead to extreme emotional responses (explosion or shut down/implosion) over reaction vs under reaction ……imbalanced inner states

When in a triggered state, a previously traumatized person may have trouble regulating their emotional responses and reactions. Dysregulated overwhelming inner states can lead to….
Mental health issues such as depression, anxiety and cPTSD

Addiction to substances such as drugs, alcohol, food….

Process/Behavioral addictions such as sex addiction, work, spending, gambling, internet….

Physiological pain and disease. See ACE studies….on the long term physical and mental health impact of adverse childhood experiences……
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Trauma Timeline

- Allows clients to fill in the holes in their memories as to who, what, when; to provide context around pain-related memories that feel foggy, ill defined.

- To connect around ages where group members share common ground.

- To talk to “the right person, at the right place, at the right time”.
• Focuses *attachment dramas* according to the age at which a problematic, relational dynamic may have gotten set up.

• Offers easy entry in talking from the child self to the parent they had at any particular time along their development continuum.
Next….our protagonist having talked to herself as a small child continued to walk her timeline and came upon an age where she felt discouraged in her recovery…..where in spite of doing all of the “right” things she still felt bad on the inside……

We’re strengthening a connection between the more mature self and parts of the self that may be silent, shut down, immature or hidden…..

We’re creating a dialogue between the adult self and the child self….
Role play allows us to EXPERIENCE OURSELVES WITHIN A RELATIONAL DYNAMIC with OURSELVES or OTHERS:

• And then to reverse roles and experience standing in the ROLE OR IN THE SHOES OF THE OTHER.

• We can see ourselves in action first and reflect later/second.

• It can allow us to reveal and rework power imbalances, express withheld pain, fear and anger…as well as withheld love, need and vulnerability.
The group initially participates by doing their own Trauma Timeline, sharing it, then connecting with each other around specific ages.

The group then witnesses individuals doing their work and participated through playing roles, and doubling during the process.

They then identify and share.

Does anyone have questions or something they’d like to share?

Next we’ll do a Trauma Timeline or a Resilience Timeline of our own and we’ll share it…..
Experiential Letter Writing

- Offers the easiest way to add an embodied role play experience to your programming.

- Clients can write letters to a part of themselves, their inner child, teenager or young adult, to themselves somewhere in the future, to another person, to their addiction, depression or ideal self. In other words they can write a letter to virtually anything.
• Clients can write a letter to another person saying what they couldn’t say before, expressing blocked anger, grief or love.

• Read it to an empty chair or a role player representing recipient or sender.

• Can be done in one-to-one, in groups, or on zoom.

• Clients can write a letter that they wish they would receive from another person.

• Add doubling and role reversal if desired.

Dear ________________.

________________________________________
________________________________________
________________________________________
________________________________________
________________________________________
________________________________________
________________________________________
________________________________________
________________________________________
________________________________________
________________________________________
________________________________________

☐ From ☐ Warmly ☐ Very Yours ☐ Regards ☐ Lovingly
Resilience Timeline

• Helps clients formally consolidate their gains and celebrate their strengths.

• To talk to their inner child, teenager, young adult, in a way that is loving, encouraging and supportive.

• To access the part of themselves that feels a sense of survivor’s pride.
• To thank or express gratitude to themselves or others through a role play.

• To remember, thank and feel grateful for those who helped along the way.

• To talk to a future self they may wish to become.