The gestalt of trauma treatment

Draft syllabus · A four-month clinical mentorship

Program in development. This document describes the proposed first cohort. Dates, tuition, final eligibility, and any credit arrangements are not confirmed. It is not an enrollment offer.

The client does not arrive organized by modality.

We will look at the whole clinical situation: the person's history and present circumstances, what happens in the therapeutic relationship, and the reasoning behind treatment choices. EMDR will be part of the conversation, alongside Gestalt-informed, somatic, and relational perspectives.

The proposed mentorship follows clinicians' learning goals through case formulation, rehearsal, and feedback. Individual meetings complement the work of a consistent small group.

Proposed format

Duration
Four months

Cohort
Six clinicians

Group meetings
Eight live meetings, 90 minutes each

Individual meetings
Two 45-minute meetings per participant

Learning and professional boundaries

Individual meetings focus on learning goals and a review of professional development. Case discussion requires appropriate deidentification and safeguards. Rehearsal should use fictional scenarios unless a separately reviewed arrangement permits otherwise.

This is a proposed professional-development program, not basic EMDR training, formal supervision, or certification consultation. Discussion of a modality does not establish competence to practice it. Participants remain responsible for working within their actual training and scope of practice.

DRAFT COURSE OF STUDY / EIGHT MEETINGS

Clinical decisions, in context.

The sequence and learning activities below are proposed. They are educational topics, not treatment protocols.

MEETING 1

The whole clinical situation

History, current context, strengths, safety, and alternative explanations.

Learning work: Draft an initial formulation and define a personal learning goal.

MEETING 2

The therapist in the room

Presence, contact, power, cultural context, and the therapist's responses.

Learning work: Reflect on an encounter and rehearse a relational response using a fictional scenario.

MEETING 3

Readiness, pacing, and uncertainty

Readiness and the need for assessment, consultation, or referral.

Learning work: Explain the reasoning behind a proposed pace of treatment.

MEETING 4

Awareness and therapeutic experiments

Purpose, consent, and evaluating the client's response to an experiment.

Learning work: Design a bounded fictional exercise and explain when not to use it.

MEETING 5

EMDR within the treatment plan

EMDR decisions within the broader formulation and actual training.

Learning work: Explain a treatment choice and its limits without relying on protocol language alone.

MEETING 6

Considering other perspectives

Somatic, relational, or parts-oriented perspectives, evidence limits, and competence boundaries.

Learning work: Compare plausible options and identify further training needs.

MEETING 7

When the work stalls

Formulation, ruptures, therapist assumptions, and treatment or referral changes.

Learning work: Revise the original formulation using feedback and newly considered information.

MEETING 8

Integration and continued development

Clinical reasoning, feedback, and unresolved questions.

Learning work: Present a revised formulation and a realistic continuing-learning plan.