



TRUST Resilience Strengthening Protocol

The therapist will briefly explain the process of the procedure:

"The activation of personal resources can assist you in finding new perspectives in handling your problem. I will explain how we will work on your ability to have these new experiences. Please remember that this is not about changing reality, but about changing the way in which you experience your current distress. Please now describe your current problem to me."

The individual steps:

1. Describing the current problem

The patient describes a current distress. The therapist assesses the extent of the distress, the SUD (subjective units of disturbance) value, on a scale from 0 to 10, where 0 = no distress at all and 10 = maximum distress.

2. Exploring helpful attributes/competencies

The therapist explores three to four attributes or competencies which appear helpful and appropriate for dealing with the distress. Competency experiences/ attributes that appear helpful will be empathetically explored and the three that appear most suitable selected and noted. Note: It is helpful to provide active support for the search for attributes that appear suitable.

3. Activating and anchoring resource experiences from the past

For each attribute, the patient should now remember one or two situations in which s/he has experienced this attribute or competency in the last few years or in recent time. The patient will be requested to describe each situation/experience, including all details of the situation and sense modalities, e.g. images, smells, body sensations. Note: It is important to enrich the situation with plenty of details. This will provide maximum stimulation of the resource network. Each memory that comes up will be graphically "activated", using all sense modalities, where possible, and then anchored as a resource using bilateral stimulation (patient taps knees/thighs or uses butterfly hugs by crossing his/her arms in front of his/her chest and tapping his/her shoulders). This is done after each intensive activation of a situation.

4. Validating the new experience

In conclusion, the initial distress is again referred to. What now comes up is explored, and a further assessment of the SUD value is requested. The SUD value is now usually significantly reduced. As a result of the activation of "ego states" that are linked to coping competence, perception of the problem changes. The current distress is reduced or the problem may no longer appear distressing when viewed from another angle. Finally, bilateral stimulation is again used to anchor this strengthened experiencing of competency. If the distress is still relatively high, finding another suitable attribute/ competency with the corresponding experience may also activate other ego states, which help to further modify the way in which the current distress is experienced.

5. Symbolizing and anchoring the new way of experiencing

In conclusion, the therapist request the patient to find a metaphor, a symbol or a word for the strengthened experiencing, which can then be used as an anchor stimulus in the concrete situation, or occasionally to further facilitate the experiencing of competency in dealing with the distress. Finally, bilateral stimulation can then be used again to anchor this symbolization of the new experience.