



Hosted by Dr. Diane Poole Heller...

Beyond the Therapy Room

**An Integrative Approach to
Healing through Psychotherapy,
Neuroscience, and Coaching**

LIVE Masterclass with Q&A

Featuring Frank Anderson, M.D.



Welcome

- ▶ This meeting is being recorded—the replay will be sent out within 24 hours. Watch your inbox for a link.
- ▶ Once we start, all audience members will be muted, and cameras will be turned off.
- ▶ There will be Q&A at the end, where Frank and Diane will answer as many of your questions as possible.
If you have questions or comments, please type them in the “Q&A Box” at the bottom of your screen.
- ▶ If you’re having technical problems, please reach out to help@traumasolutions.com for assistance.



Frank Anderson, M.D.

- ▶ Harvard-trained psychiatrist and psychotherapist, specializing in trauma
- ▶ Co-founder of *Trauma-Informed Media* and board member of the *Trauma Research Foundation*
- ▶ Faculty member at Harvard Medical School and author of several acclaimed books including *To Be Loved: A Story of Truth, Trauma, and Transformation* and *Transcending Trauma: Healing Complex PTSD*
- ▶ Learn more at FrankAndersonMD.com

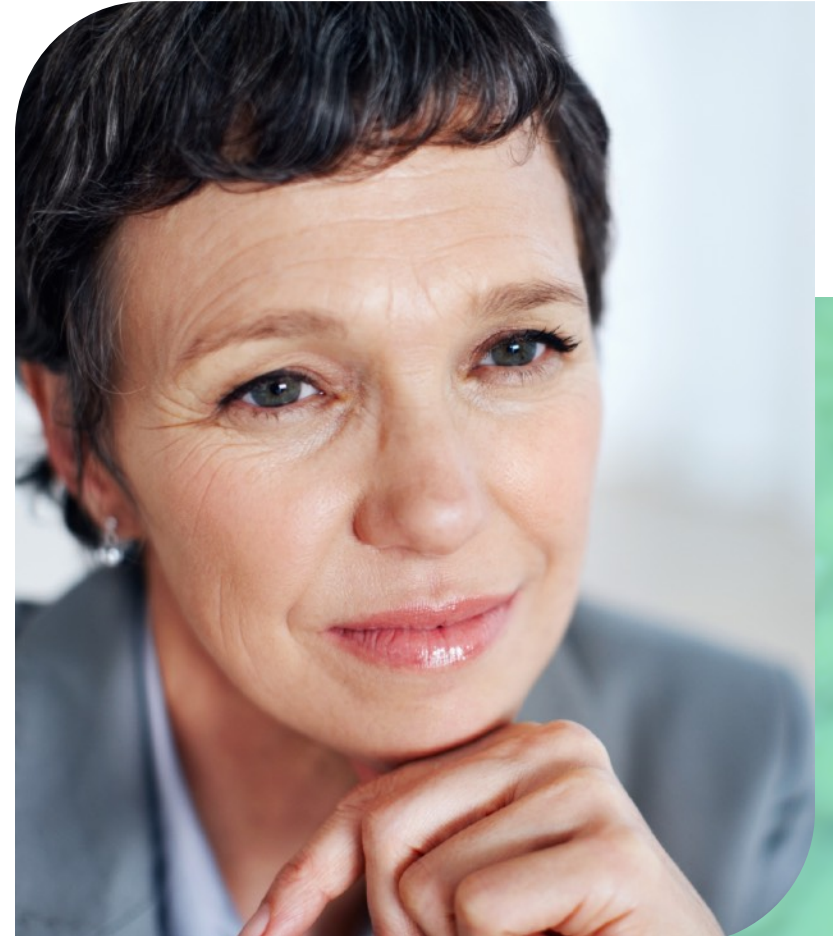


Diane Poole Heller, PhD

- ▶ Internationally recognized speaker, author and teaching expert in the field of adult attachment theory and trauma resolution
- ▶ Signature model—**DARe**—facilitates healing from attachment and trauma wounds, while building resilience and secure connection
- ▶ Author of *The Power of Attachment: How to Create Deep and Lasting Relationships* and *Healing Your Attachment Wounds*
- ▶ Learn more at [TraumaSolutions.com](https://www.TraumaSolutions.com)

What is Trauma?

- ▶ Beyond our human capacity to handle.
- ▶ Think frequency, intensity and duration.
- ▶ What happened to you?
- ▶ How you perceived it?
- ▶ How you respond to it?
- ▶ Who was with you during and after?



Goals of Trauma Treatment



- ▶ Repair the internal chasm
- ▶ Release the energy that doesn't belong to you
- ▶ Relational health, safety and connection in the present
- ▶ Move forward differently

Trauma treatment is often a reenactment of trauma

Clients have little control over
their care



What if...



- ✓ Clients were educated about trauma
- ✓ They mapped out their behaviors and traumas
- ✓ They learned to embody, not relive their trauma
- ✓ Delivery methods were fused, not fragmented
- ✓ Models of therapy were integrated not siloed
- ✓ Relational support and connection was an essential part of the treatment
- ✓ Decisions were made by the clients—not the therapists, coaches, or agencies

Education is essential in this new paradigm

- ➔ The various types of trauma
- ➔ The difference between therapy and coaching
- ➔ The different models of therapy
- ➔ The neurobiology of PTSD and dissociation



Types of Trauma

- ▶ Acute
- ▶ Chronic PTSD
- ▶ Relational Trauma (*Complex PTSD*)
- ▶ Preverbal/Attachment/Developmental
- ▶ Family Legacy (*Transgenerational*)
- ▶ Identity/Marginalized (*Race, Gender, Orientation, Neurodivergence....*)
- ▶ Grief and Loss
- ▶ Financial
- ▶ Institutional (*Medical, Religious, Work, School*)
- ▶ Cultural/Societal/War
- ▶ Global



Psychotherapy and Coaching

Psychotherapy addresses mental and emotional distress through past-oriented, healing-focused interventions by a licensed professional

Coaching focuses on future-oriented personal development, goal-setting, and performance enhancement for individuals with non-clinical concerns

Key differences include...

The scope of issues treated
(clinical vs. non-clinical)

The timeframe
(healing vs goal completion)

The provider's qualifications
(licensed vs unlicensed)

Models of Therapy for Trauma



- ▶ **DARE:** Attachment-based work to uncover and heal relational trauma and early developmental patterns
- ▶ **TIST:** Safety stabilization model for extreme traumas
- ▶ **CBT/DBT:** Addresses the relationship between thoughts, feelings and behaviors
- ▶ **BRAINSPOTTING:** Uses eye position and focused attention to process trauma held in the brain and body
- ▶ **EMDR:** Memory processing, connects emotion, body, and beliefs
- ▶ **SP/SE:** Bottom-up body-focused therapy, addresses implicit memories, prioritizes sensations and processing of trauma
- ▶ **EFIT/AEDP:** Focuses on emotional processing, attachment and relationships
- ▶ **CI:** Compassionate inquiry using deep listening to uncover and heal traumatic wounds
- ▶ **IFS:** Protection, permission, Self-energy, and healing wounds.



Mapping Traumas



Mapping Systems and Systemic Traumas



Embodying Love and Trauma Responses

Hyper- and Hypo-aroused

Fusion PNC

- ▶ **Psychotherapy** should be about *visiting* the past
 - ▶ Not staying or getting stuck there
 - ▶ It should end!
- ▶ **Neuroscience** brings truth and validity to treatment
- ▶ **Coaching** helps people move forward with actionable steps
 - ▶ It challenges old beliefs and assumptions



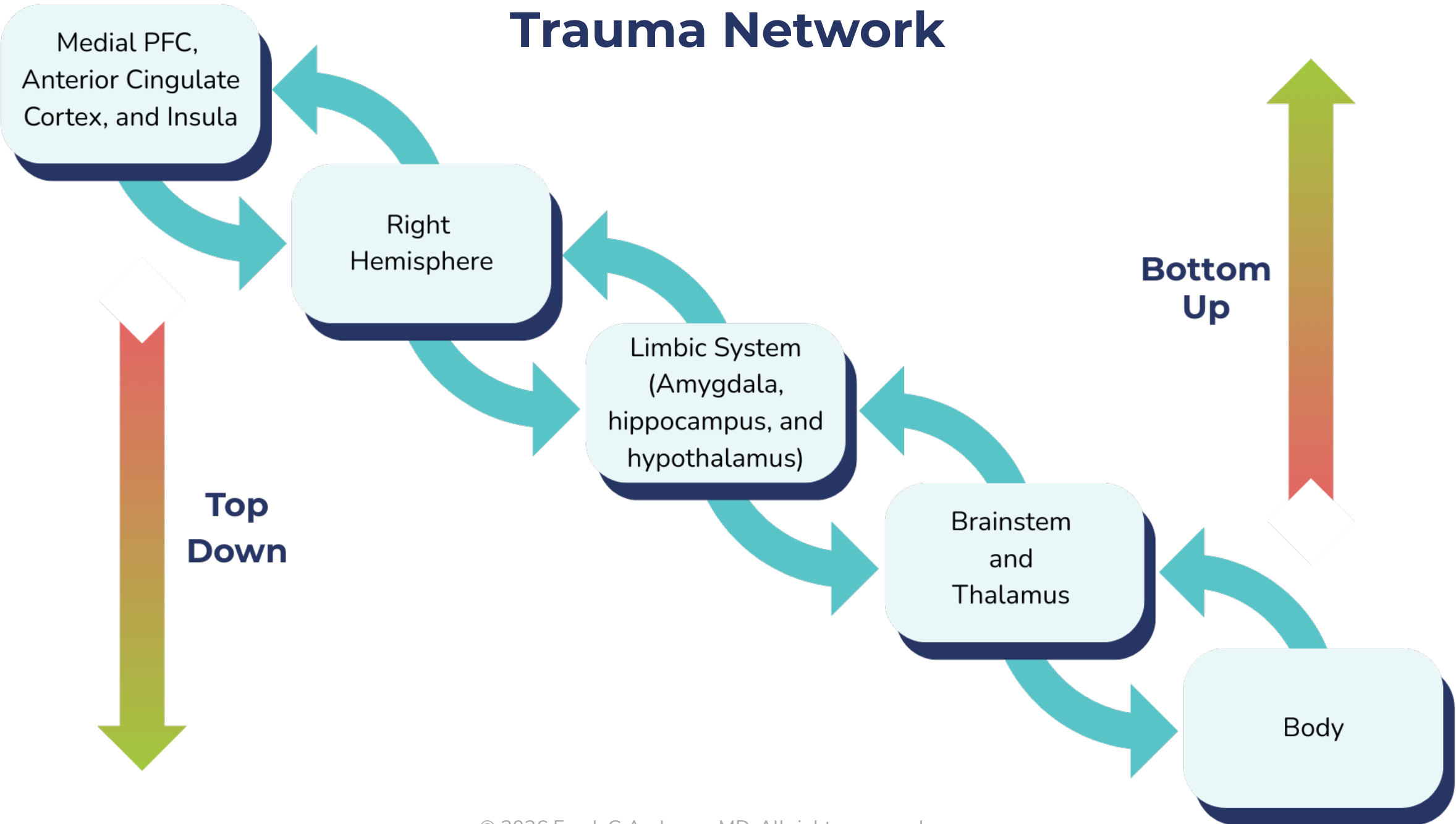


Neuroscience Informed Decision Making



**What if clients knew
there was a neural
network that gets
dysregulated in trauma?**

Trauma Network





**What if clients knew that
their sense of self and
their trauma get linked?**

Self and Trauma

- ➔ Default Mode Network (DMN)
 - Self reflection, introspection, self-awareness
 - In trauma, this only connects to the past
- ➔ Periacqueductal Grey (PAG)
 - Raw emotional states originate in the PAG
 - Regulates the autonomic nervous system
- ➔ In trauma, the PAG drives the DMN
- ➔ Trauma and sense of self get connected
- ➔ Uncouple the PAG and the DMN to heal trauma





What if clients knew which hormones, chemicals, and structures are affected in PTSD and what medications could help them?

Hormones Released by the HPA Axis



Serotonin (5HT)

- Overall calming
- Decreased in PTSD
- SSRIs help by increasing 5HT

Norepinephrine (NE)

- Primary neurotransmitter in the stress responses
- Increased in PTSD
- Beta blockers and alpha-2 agonists help decrease NE

Dopamine (DA)

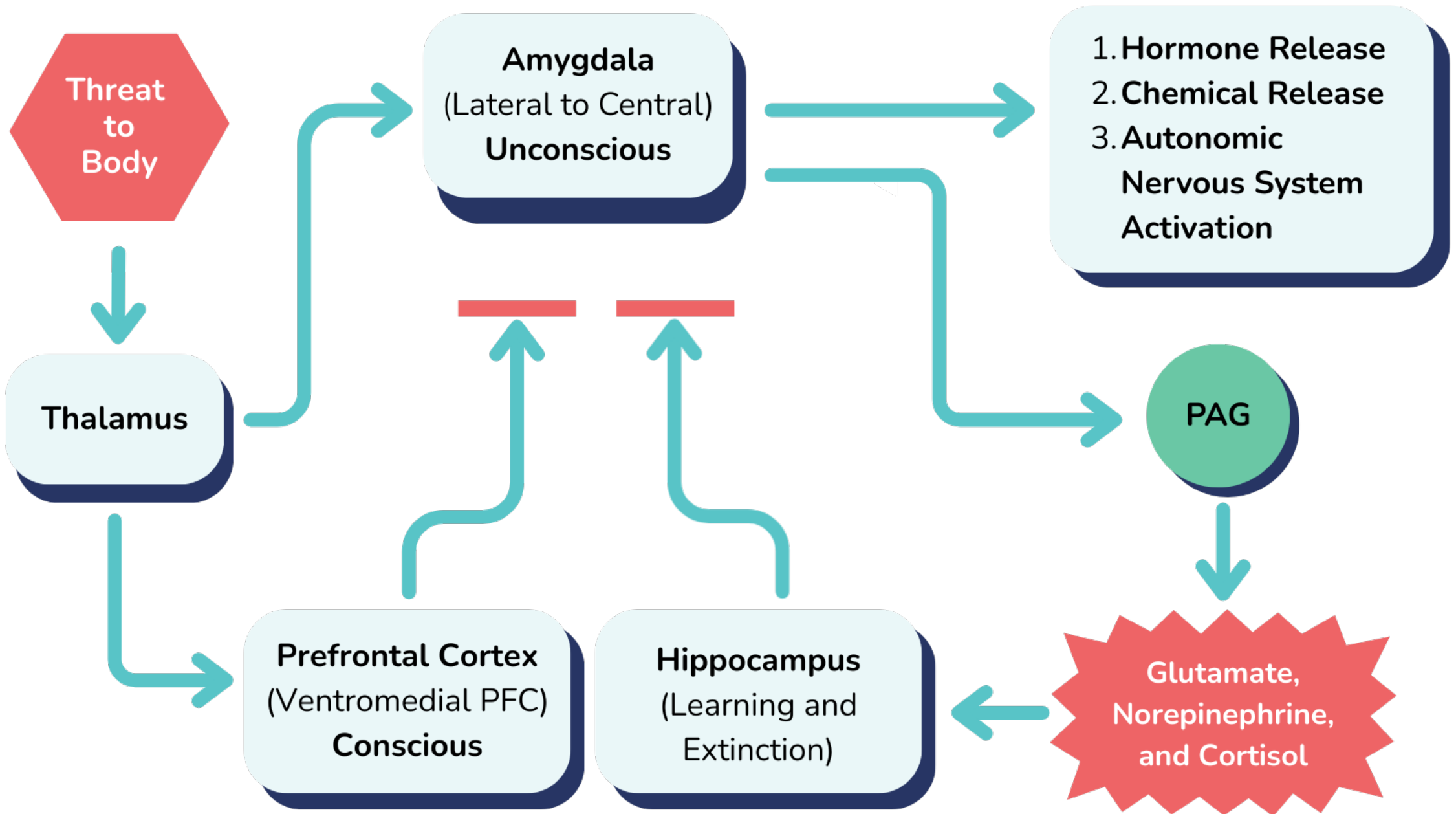
- Overall excitatory
- Increased in PTSD and dissociation
- Antipsychotics help by decreasing dopamine

Glutamate

- The main excitatory neurotransmitter in the brain
- Increased in PTSD and dissociation
- Mood stabilizers help by decreasing glutamate

Gamma-aminobutyric acid (GABA)

- The main calming neurotransmitter in the brain
- Altered in PTSD
- Benzodiazepines and mood stabilizers help by increasing GABA



Activated PTSD

Reexperiencing and Sympathetic Hyperarousal



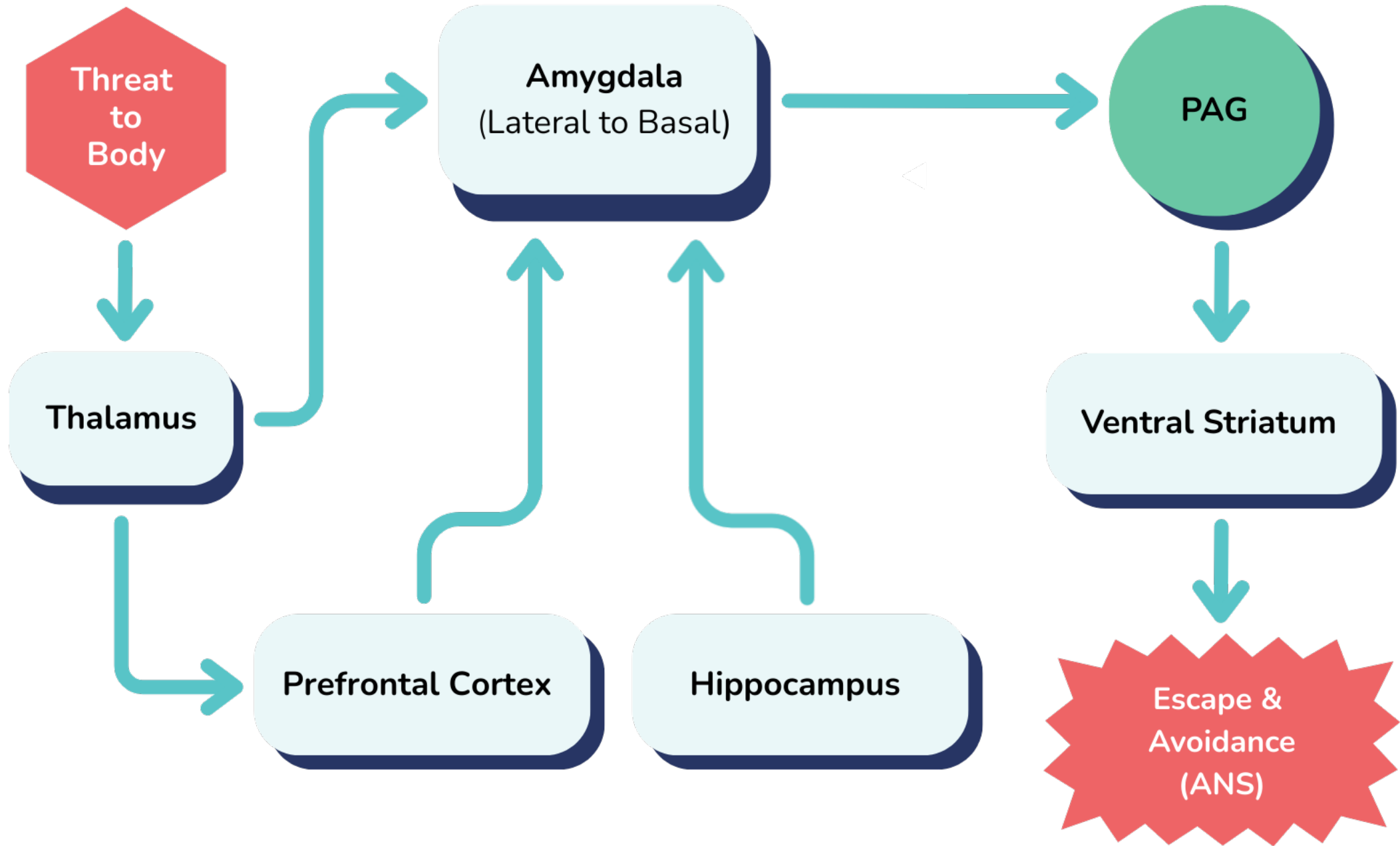
Low
Cognition

High
Emotion

High
Physical
Sensation

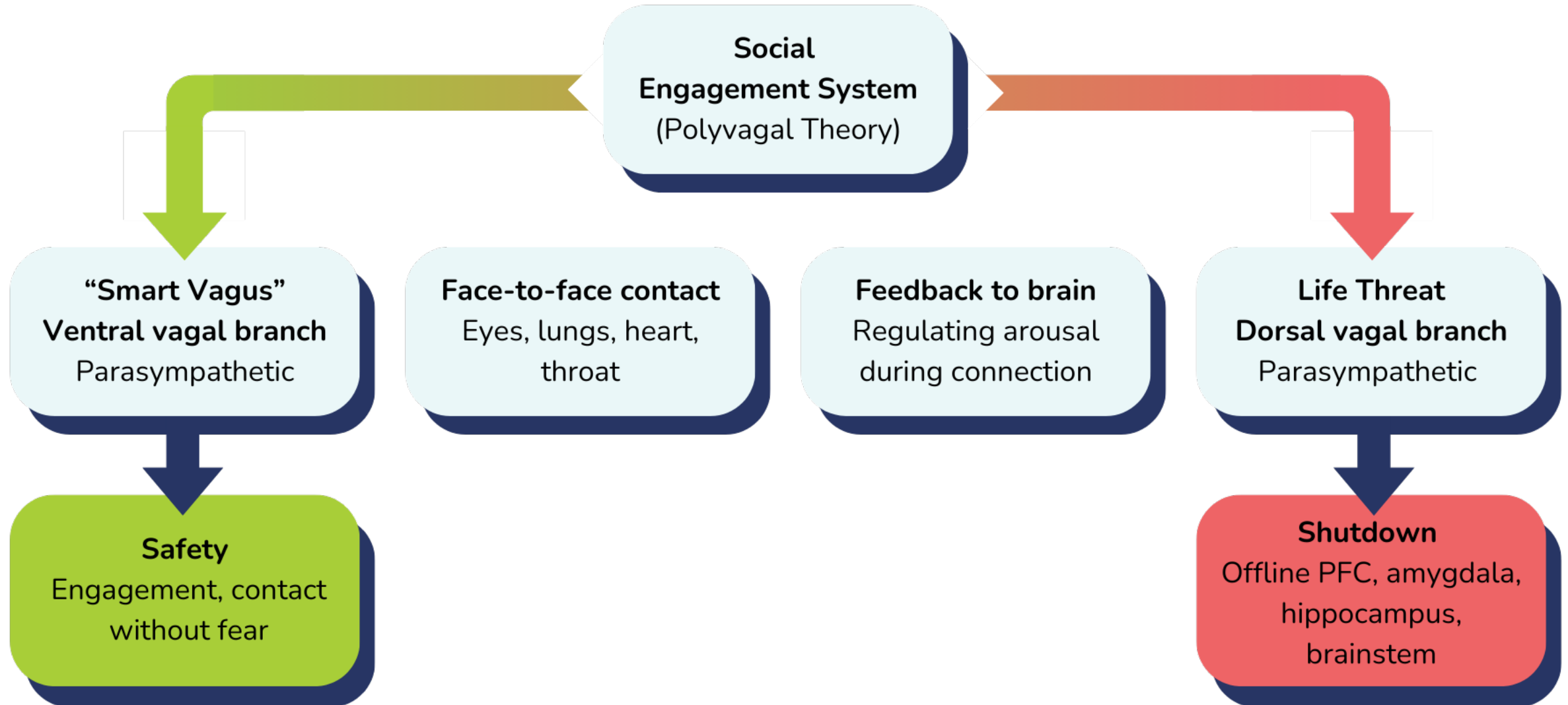


**What if clients knew that
the brain and body
were connected to
dissociation?**



Connection & Danger

—Dr. Stephen Porges



Blunted PTSD

Numb, Dissociation, Parasympathetic Hypoarousal



High
Cognitive
Suppression

Low
Emotion

Low
Physical
Sensation



**Compassion for
Activation**



**Empathy for
Dissociation**



**What if one model wasn't
enough to heal trauma?**

**What if there was a
framework for
integrating different
models of therapy?**

Distorted Thoughts and Beliefs

- EMDR, CBT, DBT

Overwhelming Feelings

- EFIT, TIST, IFS

Physical Sensations

- SE, SP Body Centered Therapies

Repairing Relationships

- AEDP, EFIT, DARE, CL Attachment Therapies

Nervous System Dysregulation

- PVT, Memory Reconsolidation, Medications



**What if connection,
community, and
relationships were a key
aspect of healing
trauma?**



What if clients made the decisions about their care?

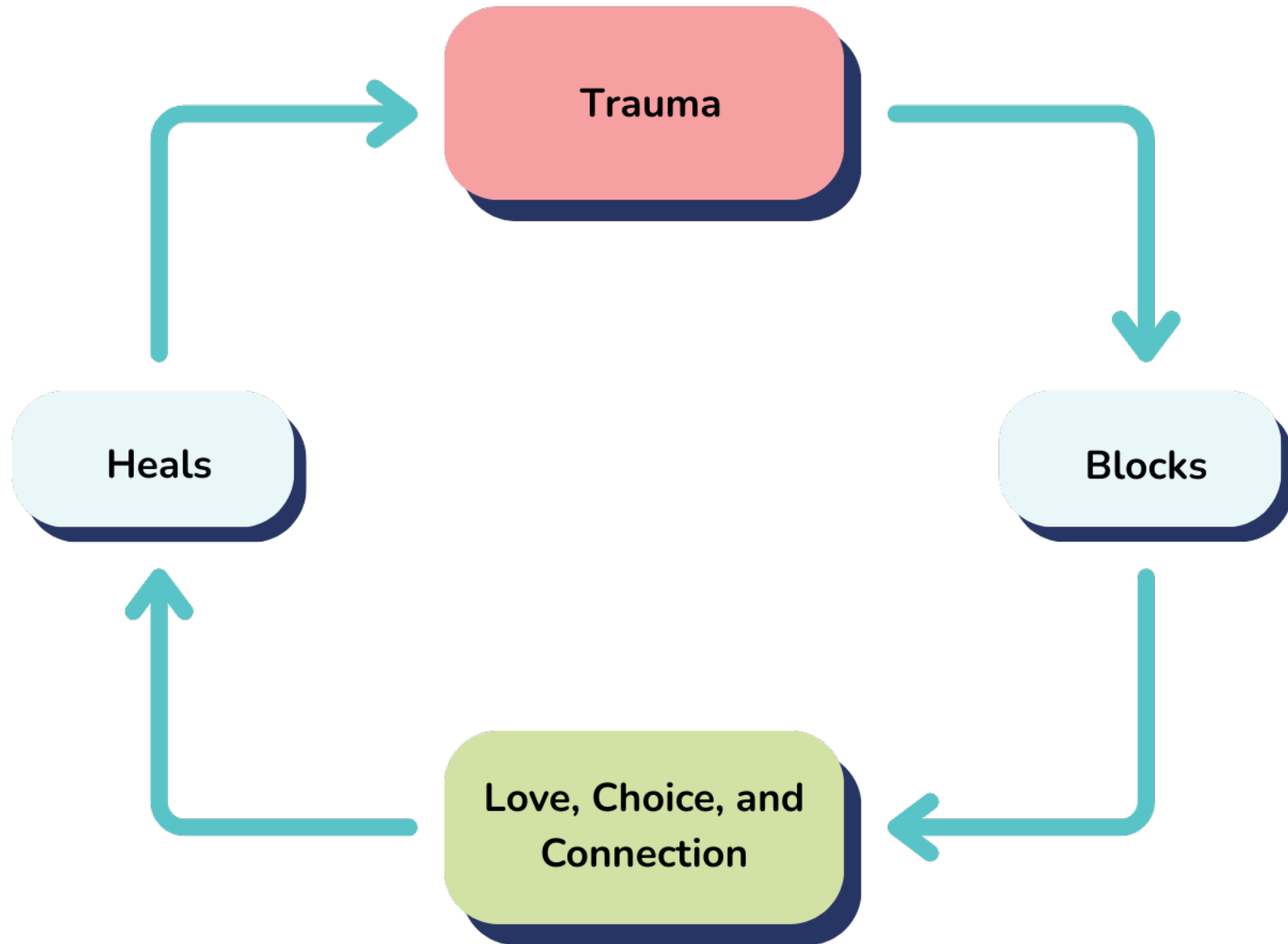
**An integrative path to
trauma transformation**

Clients learn the key elements of healing..



**Clients choose which behaviors/
traumas they're working on, in
what order, with what type of
community, reaching out to
coaches and therapy as needed.**







Up next—Q&A
But first, a look at...

Healing Trauma Through an Integrative Lens

Five Essential Pathways
for Clinicians

All-New Training is NOW OPEN!



Frank Anderson, MD

Healing Trauma Through an Integrative Lens

Five Essential Pathways for Clinicians

Join Dr. Anderson for five sessions of in-depth teaching, clinical examples, and practical strategies, enabling you to work confidently with diverse trauma presentations

- Five 2-hour LIVE training sessions
- Experiential practices and live demonstrations
- Includes 8 CE credits for qualified professionals

www.HealingBrokenConnections.com

Here's everything you get in...

Healing Trauma Through an Integrative Lens

Five Essential Pathways for Clinicians



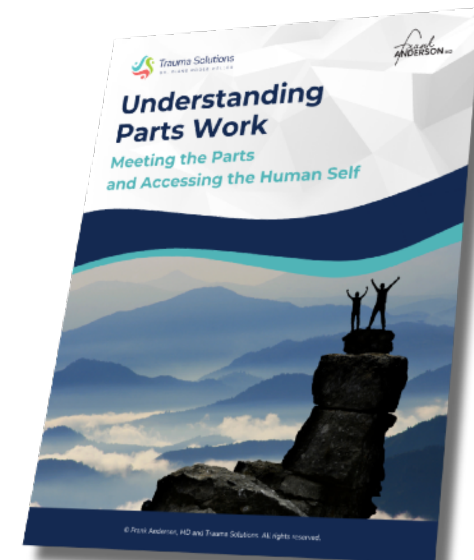
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8 CE Credits! **Only \$347!**

- + **5 LIVE Interactive Training Sessions with Frank**, that include core teaching, real client demos, practice exercises, corrective techniques, PLUS time for Q&A.
- + **Live Participant Demos + Debriefs**, where Dr. Anderson works with real participants in real-time, explaining his techniques and decision-making process throughout.
- + **Downloads, Audio, Transcripts, Demos & Additional Resources** with *lifetime* access to a private learning portal, so you can continue learning and revisit the course material whenever you like.

PLUS, you'll also get these special COURSE BONUSES!



- + BONUS #1: Introduction to Parts Work—Pre-Recorded Training**
Jumpstart your learning with this 60-minute foundational training, where Dr. Frank Anderson introduces the core principles of working with parts to facilitate trauma healing.
- + BONUS #2: Understanding Parts Work—Clinical Handout**
A printable introduction to key concepts of parts work, and actionable steps to “meet the parts” and contact Self energy with your clients.
- + BONUS #3: Parts Work & Attachment Reference Guide**
Parts work and attachment go hand in hand. This clinician-friendly resource explores how attachment trauma can shape protective parts and how parts work can help clients heal early relational wounds.



This is the **ONLY** time this course will be offered LIVE.
Be sure to save your spot today...



Session 1: April 7, 2026

The Shock and the Echo: Working with Acute and Chronic PTSD

Session 2: April 9, 2026

The Wound Within the Relationship: Healing Relational Trauma

Session 3: April 16, 2026

Before There Were Words: Attachment Trauma and Preverbal Wounds

Session 4: April 21, 2026

Trauma of Identity: Healing Wounds Related to Marginalization, Race, Gender, Orientation, and Neurodiversity

Session 5: April 23, 2026

When the Wound Is Shared: Understanding and Treating Collective Trauma

****8 CE credits are included for eligible professionals who attend the live sessions.**

All 5 LIVE sessions meet online for 2 hours from 11 am - 1 pm MT and will be recorded.
PLUS! Stay for optional 30-minute breakout groups after each class to practice with peers, deepen your understanding, and build lasting connections.

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ONE PAYMENT

\$347

Includes 8 CE credits!

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Most Flexible

3 MONTHLY PAYMENTS

\$119/EACH

Includes 8 CE credits!

JOIN NOW

Can't attend live? All training is recorded

Our first session begins on April 7, 2026

All-New Training is NOW OPEN!



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ENROLL NOW



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