

Bringing the TSM trauma triangle into action

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Introduction

The Therapeutic Spiral Method, TSM as it is commonly called, is a clinically modified form of psychodrama that is anchored in neurobiology research on trauma and in attachment theory. It supports people with a history of trauma to safely and deeply heal their wounds and experience developmental repair (*Hudgins & Toscani, 2013*). One of its cornerstones, the TSM trauma triangle, serves as a clear structure to bring light into the hidden dynamics that people with a history of trauma often experience, both internally and externally.

The paper at hand provides a framework of how to center an entire protagonist drama around the TSM trauma triangle, thereby supporting the client to actively transform the triangle's vicious trauma cycle into new and creative ways of relating and being in the world. To begin with, the paper briefly explains how the triangle describes the internalization of trauma by using role theory. This is followed by a detailed description of three action steps: preparation, getting started, and moving into action.

Since this is working with core trauma material, prerequisites for directing such a drama are a thorough understanding of the trauma triangle itself and the ability to provide adequate containment and ready-to-use resources for the protagonist and the group (please see the requirements of the *TSI International Certification in Trauma Therapy* at www.drkatehudgins.com).

The internalization of trauma

A traumatic experience usually causes specific changes within the personality structure. Using role theory the TSM trauma triangle illuminates these internal changes by identifying three internalized roles that developed from the trauma, namely the *victim*, the *perpetrator*, and the *abandoning authority*.

The *victim* is that internalized part that holds the fear, the sadness, and the helplessness that was experienced during the traumatic event. As it is very difficult for many trauma survivors to acknowledge this part, we usually re-name it early on and call it the *wounded child*. This helps people to feel empathy for this part and makes working with it much easier.

The *perpetrator* is the part that holds the brutality and hatred of the traumatic event. In later life it can be either acted out towards others or against oneself.

The *abandoning authority* takes account to the fact that during the traumatic event no-one came to help and stopped the violence. This is of major importance as it creates a part within the psyche that feels unworthy. In later life this role will lead to an inability to self-care and to set healthy boundaries, thus to abandon oneself.

These three roles keep one another alive, they are dependent on one another. That is why we chose the image of a triangle, which is a closed form and represents this binding dynamic nicely.

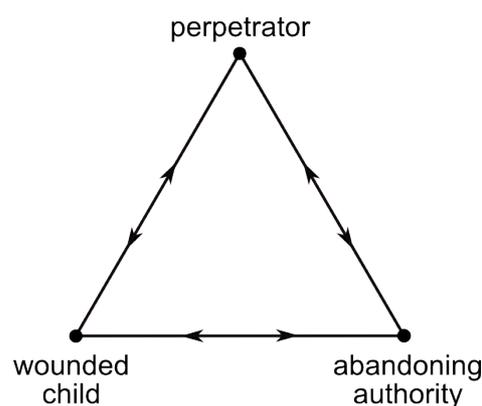


fig.1: the trauma roles of the TSM trauma triangle

A person suffering from a history of trauma has internalized all (!) three roles as part of his/her personality structure. However, each person is inclined to act from one role or another more often. Experiencing oneself and the world around from these roles leads to disrupted and unsatisfying lives and can also be the reason for a wide variety of problems like eating disorders, depression, co-dependency or suicidal tendencies.

Preparation

When we at TSM use the trauma triangle as a structure for a protagonist drama, we have three cardboards with the three trauma roles *wounded child*, *perpetrator*, and *abandoning authority* printed onto them. To support our protagonist even better in externalizing his/her experience, we have additional cardboards which symbolize the feelings from the trauma roles.

That means for the *wounded child* role we have cardboards with shame, pain, sadness and helplessness; for the *perpetrator* role with rage, hatred and annihilation; and for the *abandoning authority* role with abandonment and despair.

Moreover, we have one last cardboard which stands for the *appropriate authority*. This TSM role is very significant since it anchors a place in the room from which new and healthy action can be taken in order to break the twisted dynamics that binds the three trauma roles.

Getting started

To begin with, we ask our protagonist to place the cardboards of *wounded child*, *perpetrator* and *abandoning authority* in a triangle and to connect them with scarfs not from the circle of safety. Those scarfs should be left with positive projections only (for more information on the circle of safety and other TSM safety structures see *Hudgins & Toscani, 2013*). Next, we ask him/her to place the remaining cardboards intuitively, but inside the circle of safety. Here it is interesting to notice how the emotions interact with the roles, which emotions our protagonist can place easily and which ones s/he has trouble with. The shame in particular is of great interest as this sensation is often difficult for people with trauma to acknowledge.

Moving into action

Now we want to support our protagonist to safely (!) discover, experience and transform his/her personal trauma patterns. Hence, we divide this part further into:

1. our protagonist gets a better cognitive understanding of how the trauma affects his/her life and how s/he has internalized the different roles,
2. our protagonist activates his/her *prescriptive roles* for support and safety,
3. our protagonist starts to address and experience the various roles and patterns in action and finds healthy ways to create new roles in his/her life.

1. Instructions for supporting the cognitive understanding

We invite the protagonist to walk the triangle and explore the different roles on a cognitive level through the psychodrama technique of soliloquy. As the person moves around the TSM triangle spontaneously, s/he soon recognizes certain repetitive patterns in the simple action of walking from one role to the other - like moving from *wounded child* to *abandoning authority* back and forth, or from rage to shame to *abandoning authority*. Such patterns should be labeled and laid out on the ground with additional scarfs so that the patterns become even more visible.

If the protagonist is triggered very easily, it might instead be reasonable to take him to his/her observing ego card (another TSM safety structure) and let him/her share from there about the different roles.

It is also possible to put either team auxiliaries or group members into the various roles. Sometimes they can spontaneously increase the action demand for emotional recognition and thereby uncover hidden dynamics that the protagonist was unable to notice.

A role reversal into the *appropriate authority* role is recommended early on. As always in TSM, our first concern is safety. So having a role readily on stage that can take appropriate action is a good thing to have when beginning to focus on direct trauma repair.

Good questions that we can ask our protagonist are:

- How do you see yourself in the *wounded child*, *perpetrator*, and *abandoning authority* role?
- When something triggers you, how are you reacting?
- Where is the right place for you to start?

2. Instructions for setting up the prescriptive roles

Now that we know what trauma patterns we are going to address in action, we first ask our protagonist what support s/he needs in order to feel safe, to stay present, and to stay capable of acting. For this purpose TSM has established the *prescriptive roles* which help a protagonist to stay in a state of spontaneous learning and to find an adequate and healthy response when facing the old trauma roles (*Hudgins & Toscani, 2013*). There are three categories of *prescriptive roles*: observation, restoration, and containment. Every protagonist chooses his/her own set of *prescriptive roles* and they are enacted by either team auxiliaries or other group members. Through role reversal the protagonist brings his/her chosen roles into life and a strong bond develops between them.

These roles will accompany him/her and together they will move into the emotional experience of the triangle. The people enacting the roles are prepared to take healthy and supportive action in case the protagonist might dissociate, regress or get stuck in an old pattern. They will help the protagonist to consciously address his/her trauma patterns and to actively create new ways of relating to the old trauma roles.

Good questions for setting up the *prescriptive roles* are:

- Ok, now that we know what we are going to address, what support do you need?
- That could be an inner quality like courage or wisdom, or an interpersonal support like a good friend, or a spiritual support like mother earth, Jesus, Buddha, god etc. What feels right for you?
- Or do you need more support in staying present and would like a containing double by your side?

3a. Instructions for experiencing the trauma and prescriptive roles in action

Now we are ready to move our protagonist safely into the emotional experience of the trauma triangle. We might say:

- Please go into the different roles and express their feelings.
- Which pattern do you want change and what do you want it to be like?
- Where is the right place to start?

During this part it is absolutely crucial (!) that we as directors point out any subtle changes inside our protagonist and ask him/her to move into the respective roles. For instance:

- Oh look, all of a sudden your voice changed and you started talking badly to your *wounded child*. So let's move to the *perpetrator* role and speak from there. What are the right words from that role?
- I see you are ashamed of what you do. Please move to the shame place and give it a voice.

In addition we must constantly re-arrange the scarfs according to how our protagonist moves through his/her issues. For instance:

- From the shame place the protagonist might give back the shame to the *perpetrator*. Then we would ask him/her to also give the shame-cardboard back to the *perpetrator*.
- The *abandoning authority* might have been taught how to take appropriate care of the *wounded child*. Then we would ask the protagonist to move that role's cardboard towards the *wounded child* and re-arrange it.
- From *appropriate authority* role our protagonist might step in-between the *wounded child* and the *perpetrator* and say "Stop!" to the *perpetrator*. Then we would ask the protagonist to now break the line of scarfs on the floor as well.

It is very powerful to constantly re-arrange the scarfs and cardboards since this makes any changes visible and anchors them more deeply into the psyche. Moreover, this is what the work is all about, to break the vicious cycle that binds the three trauma roles. Hence, at the end of the drama there

should not be a triangle anymore. But instead, now there should be a new-found structure that mirrors what our protagonist has just found: new and healthy ways of relating and being in the world.

3b. Transformation: a case study

The aim of moving through the trauma triangle in action is that when the *prescriptive roles* meet the *trauma roles* new and healthy ways of responding to traumatic patterns will arise spontaneously. To illustrate this more clearly a case study will be presented here (name of protagonist changed):

The protagonist (let us call him Martin) realized during the first part of his drama (cognitive understanding) that he easily slips into dissociation and nervous laughter, when his partner accuses him unjustly. Rather than feeling his sadness and fear about it (*wounded child*) he abandons himself. During the second part of his drama (*prescriptive roles*) he chose a *containing double* and *courage* for his *prescriptive roles*. Now supported by his *containing double* and his *courage* he wants to address this dynamic and learn how to stand up for himself. The roles of the *abandoning authority*, the *wounded child* (both internal parts of Martin) and the *perpetrator* (his partner) are being enacted by team auxiliaries and other group members.

Martin stands on the side with his *prescriptive roles*. However, when he sees the three trauma roles interact with one another, he freezes and slips into dissociation. He got caught in his old traumatic response. In that moment his *containing double* becomes active and says:

“Oh, I am feeling dizzy and I can hardly move my body right now. But wait, I can take a deep breath. I can look around and see that I am at a safe place right now, at a TSM workshop. I can see my *courage* standing next to me. Maybe together with my *courage* I can move a little closer and speak to my *abandoning authority*.”

This helps Martin to get out of his dissociation and he becomes more present again. But still, he is not yet in a state of actively engaging, so his *courage* speaks up:

“Martin, I am your *courage* and I see how this part of yours (points at the *wounded child*) is

being offended unjustly. And look, this other part over there (points at the *abandoning authority*) is just looking away and freezing. He needs our help so he can protect the *wounded child*. Let us do something.”

This brings Martin further back into an active and present state and now he spontaneously says:

“Yes, you are right! Let us go there and together we can teach him how to stand up and stop that *perpetrator*!”

At this moment, I as director point out to Martin that he now speaks like an *appropriate authority* and I ask him to take the respective cardboard with him. Next Martin walks to his *abandoning authority* and says:

“I am your *appropriate authority* and this is your *courage*. We want to show you how you can stand up for yourself and speak your truth, so that you can protect your *wounded child*.”

They step in-between the *wounded child* and the *perpetrator* and demonstrate appropriate boundary setting. Bit by bit the *abandoning authority* participates, thereby transforming itself into a healthy functioning role. As director I ask Martin to now also re-arrange the scarfs and he immediately breaks the line between the *perpetrator* and the *wounded child* role.

This case study nicely illustrates the power of the *prescriptive roles* and how they can transform old trauma roles into new and healthy functioning roles. It demonstrates how to use the physical structures of the TSM trauma triangle (cardboards and scarfs) to deepen the learning experience further. Moreover, it presents the very common phenomenon, that the *abandoning authority* role is crucial and often the first role to be transformed.

The drama helped Martin a lot, but he did not work with his core trauma material yet. His strong dissociative reaction signaled that there was more to it. This drama about his current relationship was an important first step for him. During later TSM workshops he was ready to address his traumatic experiences from childhood in a very similar way and experienced deep developmental repair (please see *Hudgins, 2002* for examples of TSM trauma dramas with developmental repair).

Conclusion

The TSM trauma triangle is a powerful tool for supporting people with a history of trauma. Using role theory it illuminates the internalization of trauma and identifies the three trauma roles of *wounded child*, *perpetrator* and *abandoning authority*. It serves as a clear action structure to heal and transform old trauma patterns into healthy and creative ways of relating and being in the world.

The paper at hand provided a framework of how to center an entire protagonist drama around the TSM trauma triangle. It described how the triangle can be used as an action structure for identifying cognitive and emotional trauma patterns as a warm up for deeper trauma repair work. It also demonstrated how the trauma triangle can be used for full TSM trauma dramas with developmental repair and transformation.

literature

Hudgins & Toscani (Eds.), 2013, *Healing World Trauma with the Therapeutic Spiral Model*

Hudgins, 2002, *Experiential Treatment for PTSD*

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