

‘DON’T MAKE ME VOMIT SLOWLY’ – MY EXPERIENCE OF PHASE TWO WORK



by Carolyn Spring

THE THREE PHASE APPROACH

When I first started therapy in 2006, I didn’t know much about trauma and nothing about ‘the three-phase approach’. My counsellor didn’t know much more. So although I’d like to say that we started by carefully doing the phase 1 work of safety and stabilisation, the reality was a great deal messier than that. It took a few years for us to settle into a pattern of work that I can now look back and identify as ‘phase 2’. For several years I hopped from week to week, like a bear on hot coals, backwards and forwards between phases 1 and 2. It certainly wasn’t textbook, but somehow it was effective.

One of the things that surprised me most about processing trauma was not the feelings of dread, terror, hopelessness, horror, grief and despair that swirled around like a Canadian snowstorm. It

was the more unexpected feelings – specifically the aloneness. It washed up over me and drenched me through. Back then, when I was a child, I evidently felt so alone in it all. There was no one – literally no one – to reach out to for comfort, for support, for protection, for love. Those memories would wash back over me in intense spasms of aloneness in the here-and-now, and it took me some time to realise that they were memories, my subjective experience of the trauma, rather than feelings from the here-and-now. The presence therefore of this ‘other’, the therapist, an actual someone in the room, at times perfectly attuned, at times misattuned, but always there, was in itself probably one of the most restorative and reparative experiences I had during that work. It was awful to ‘go there’, to revisit that material. But it shifted something profoundly not to do it alone.



The backdrop to much of my therapeutic work in phase 2 was the various therapists I have worked with helping me to learn to contain my feelings. I grew up believing that feelings were wrong, shameful, and weak. I stuffed them down, or I dissociated from them. But then, in this therapy room, they were allowed to be. They could come, we could notice them, they could rise, we could notice them, they could form into a fist wanting to hit or tears wanting to fall, we could notice them, and we could let them be.

I learned gradually to let feelings come, to notice them, to tolerate them: and all the time in the presence of another person – without shame taking over. That was a long, hard process. It felt so shameful to be feeling feelings, let alone expressing them. I was stuck for a long time in procedurally-learned habits of hiding my feelings in order to survive. That took a lot of relearning: I wanted to apologise for my feelings, I wanted to do them on my own, alone at night, so that I wouldn't do them in therapy; I wanted to be sensible and clever and clear-thinking and rational, not shuddery and tearful and hopeless and enraged.

But ultimately, in 'going there' with these traumatic memories, I had to learn to feel my feelings and then not be overwhelmed by them. Whatever the memory, whatever slice of the traumatic pie we were cutting open, the aim was learning to feel feelings rather than dissociating away from them, and

learning to contain and manage them, rather than being overwhelmed by them. As my tolerance to distress grew, so we could look at deeper levels of trauma without me being completely destabilised by it.

MINOR ISSUE FOCUS VS. MAJOR ISSUE FOCUS

Even after many years' work, I still felt by default that I couldn't 'go there'. I automatically avoided it all. I got busy with work, I let minor issues be the focus of my session, I scurried from the therapeutic relationship, I argued theory or danced around the issue – anything other than 'going there'. The instinct to avoid was burned deep in me. And then at other times – usually with other parts of me – the trauma was imminent, and we were in it, steeped thick up to our necks in it, and we couldn't hold back, couldn't avoid, couldn't think about anything else, couldn't do anything other than explode it all out of our heads in a frantic, desperate collapse of defences. We wanted to get it all out, and we wanted to get it all out, now. 'Don't make me vomit slowly,' is what I would say when we were in this state of mind. 'Let's just do it – I don't care – I can't stand this – I need to get it out.'

And so I would proceed to vomit this trauma out of my deep unconscious, and by the end of the session not only was I retraumatised by the reliving, but my therapist very probably was too. It took me a long time to accept that slow is fast,



and that being destabilised by the telling achieves nothing at all. It was always a difficult balance to attain: too much avoidance versus too much flooding. I'm not sure anyone gets that balance right all the time – perhaps not even most of the time. All I know is that when I blurted out too much stuff too fast, I achieved nothing, because I just switched and dealt with it by dissociating – so none of it was integrated, none of it was done in a 'window of tolerance' where I could still think and feel. It was wild catharsis without any form of resolution.

I eventually learned that this stuff would only shift – the trauma would only be processed and metabolised – if at least to some extent I was able to own it as mine, rather than disowning it into the various traumatised parts of me. I had to work at integrating, at making associations, rather than dissociating – 'This is me, and this is my trauma; these things happened to me; I am me; I am still me now remembering what happened to me.' Owning it, accepting it, was (still is) hard – I've had a lifetime of coping with it by disowning it, by disremembering it, so it's a new way to live, a new way to think and to be.

Shame kept me away from a lot of it for a long time – a desperate, overwhelming shame that said, 'That can't have happened to me, it can't have' because I felt so horrifically tainted and contaminated by what I was

remembering. But shame eventually gave way to anger, once I felt safe enough to feel it: 'That's so wrong that that happened to me!'

Only once I had sufficient physical and emotional distance from the people who abused me could I begin to touch the edges of that anger. Previously I had avoided my anger through the shame that says, 'I don't deserve to be angry, because I deserved the bad things that happened to me.' That had kept me safe from them as a child – anger would have been met with the most severe punishment! But it was unhelpful now as an adult, where I continued to pay the price of shame rather than being able to straighten my spine and lift my eyes and walk purposefully into life. I had to feel safe enough to feel that anger towards them rather than directing it instead towards me. So physical safety and emotional distance from them was important before I could even begin to 'go there' with much of this stuff.

MEMORIES AND AMNESIA

Working through the amnesia was not what I expected. I don't really know what I expected – I suppose I imagined that a 'memory' would just pop back into my head and that I'd say, 'Oh I remember now ... this happened.' But it wasn't like that at all. It was a gradual seeping, through every medium in my brain, with the 'visual' memory last, if it came at all. It would be dreams and nightmares that

hinted. It would be body memories that built to a crescendo over a period of weeks – pain in my shoulders, pain in my pelvis, pain in my genitals; strange feelings of suffocation or tightness or not being able to run. It would be sudden, out-of-the-blue waterfalls of emotion – of terror and dread and panic and stuckness. It would be little things that jarred my attention. And it would be that relentless sense that if I didn't work really hard, mentally, to keep this stuff at bay, then it would overwhelm me.

I 'disappeared', in fugue states, to try to run from it. I wanted to die. I wanted anything and everything other than to look at this 'thing' that was emerging into my consciousness. It brought with it such a state of overwhelm and terror that everything in me wanted to twist away from it and never go back to therapy again. Eventually I learned – with much encouragement and many reminders – that it couldn't kill me, that it was an echo, not a repeat, and that if I could direct my attention towards it rather than trying to dissociate from it, I could face it and process it and the feelings would abate.

Much of that 'facing' was done in therapy, with the gentle prompts, the and-then-whats, matched with the breathing in, the breathing out, the lets-take-a-moment, the keeping me somewhere within a window of

tolerance. But some of it was outside too, in journalling, in 'diagramming': big sheets of A3 artists' paper, with collections of phrases or thoughts or memories, written randomly on different parts of the page, in different colours, and then lines linking them, questions in purple, emotions in green, stand-out sensations in red. Just filling up the page with everything that came to me, with everything that came to other parts of me, and then seeing what sense arose out of it, what it was that I didn't want to see, what it was that I didn't want to feel.

I've always been amazed at what ink on paper can achieve in the psyche: it's the doing it, the engaging with it, the choosing to focus on it, that makes the shift. The end result to an outsider was just a seemingly meaningless jumble of words, but to me it meant that I had thought about things that I could never think about, and that I'd stood back from it and mentalised, and brought it then into the space of a therapy room, to let it sit between me and another person: admitting things for the first time, accepting things for the first time – letting things be, rather than running from them or obliterating them.

'Processing' doesn't happen with flashing blue lights and a two-tone siren. There's nothing to announce, often, that it's taken place. It's only in retrospect that I realise that there is something



now from my past that I can talk about, that it's 'something that happened' and 'something that happened to me'. It doesn't plague me so badly in my dreams anymore, or force its way out through my body. It has become part of my narrative history that stops threatening to kill me. I've never had a moment of thinking, 'Ah, that's that then – that's processed, that's changed.' It takes a lot of small steps to add up to a big journey, and at no point was the journey achieved in just one stride. It's only when you look behind that you realise how far you've come.

I know I have more work to do when the tell-tale signs re-emerge of unprocessed, unintegrated content: when shadows loom large in my mind, when my body complains, when my sleep is fragmented, when unutterable terror begins to vomit, deep from within me. I never know what it is that I'm 'processing'. I don't turn up and say, 'Today I'd like to talk about what happened to me when I was six ...' – it's not clear enough for that, not verbal. It is the trauma that resides in the body and the unconscious. It needs to emerge and to be given shape, for words to be hung on it and an outline to emerge. It's hard work, because everything in me tells me that I will be safest if I just avoid it, ignore it, suppress it, dissociate from it. But I've been doing that all my life, and it's just like the brown envelope that gets buried under a pile of others: out of mind, but still needing to be paid.

Phase 2 work is like picking up a stash of unopened mail and working through it methodically, intentionally, at a pace that is manageable, until the full horror of the contents is laid bare and a new plan for life is formed. It's good when it's over, but it takes courage to do. I don't regret doing any of it – I do regret trying to rush it, trying to vomit quickly, as if I could speed through it to avoid feeling anything as I ripped open the envelopes.

But I have learned, gradually, that it's only by thinking and feeling, only by bringing those two aspects together, that this stuff can shift. But I've also learned that it does shift, and the process, painful though it is, is worth it.

WHAT HELPED – WAYS WE 'PROCESSED' TRAUMA

How do you process trauma when you can't even remember it? That was the struggle I faced, like so many other survivors. But what I eventually realised was that it was not a case of 'all or nothing' – that I either remembered it or I didn't. Usually, the bigger problem was that I couldn't face recalling it, at least not all in one go, and what I did remember was not 'integrated': it was not joined up. There was a fragment here, a visual image there, a feeling here, an automatic flinching there. The hard work of phase 2 was actually bringing all of those things into consciousness and then starting to join them together. There were a few different 'techniques' that we used to do this:



INSTALLING A 'RESOURCE'

A typical traumatic memory for me usually involved some horrific act of abuse, and me feeling overpowered, helpless, stuck and frozen. And that is exactly what it was like for me as a child. But as we worked it through, we started to look for 'resources' that we had at the time too. How had I survived? Some horrendous things were done to me, things that were unbelievable and unthinkable, and yet I survived them. How? What had I done?

Usually my survival had been achieved by things that I had always considered shameful – not fighting back, not running, not screaming for help, not doing anything at all. But then I began to understand: the way I shrunk myself down and became small and subservient and didn't move – that wasn't pathetic. It was smart. It meant that I didn't ignite their wrath. It meant that the abuse was over and done with more quickly. I had always seen it as weakness and my compliance as consent. But I began to be able to reframe it as my best attempt to survive.

So in re-running through that memory, it was important to focus on what I did to survive, and to feel good about that, and strong, and competent, rather than the shame I'd felt up to that point. And sometimes we added on a 'new ending': something totally fictional, made up, but something that tricked

my mind and helped to free it from its frozen, overwhelmed state. Most of my memories had very little of an epilogue to them – they were snatches of memories of being overwhelmed, but very little of the 'what happened next' to get free.

So we created an imaginal ending, one where the police came with their sirens blaring, and all the baddies arrested and taken away. Or where I ran around the house with a meat cleaver like some kind of mini-girl-Rambo, chopping off the offending body parts of my abusers. This competing memory of efficacy, strength, resilience and autonomy seemed to neutralise some of the trauma of the original memory, and for years, whenever the memory swam into my mind, so did the picture of the meat cleaver and my ravenous delight of exacting revenge.

We 'installed' this resource by pausing the narrative and noticing how different I might feel in my body if I had a meat cleaver, or the police had arrived. We paused on that, let the feeling of power and freedom nestle down into my guts and inflate every muscle, and then 'practised' that mental state for the next few days and weeks until every time we thought of that particular incident, instead of the terror and humiliation, the competing emotions of strength, anger and righteous revenge came through instead.



CHANGING THE IMAGE

Borrowing techniques from Neuro-Linguistic Programming and Parks Inner Child Therapy, we would often pause the narrative of the trauma and, again in our imagination, place it as a black-and-white image on a TV in the corner of the room; or imagine the abusers as cartoon characters, or dressed in fairy costumes – anything to break up the automatic trauma-reaction to those images, and to gain back a sense of control over the memory.

I began to understand that memory is fluid and that it doesn't have to control us. We can press pause, stand back, change the channel, change the colour, make it bigger, make it smaller, mute the sound, invite 'snow' and interference, and a whole host of other interventions. It was like graphically editing – Photoshopping! – my memories. It gave me a sense that I can control my memories, rather than them controlling me. The key wasn't so much what was on the 'screen', but the reaction in my body, so I had to change the picture until my body settled, and then I could proceed to the next frame. It was like retraining my brain, one image at a time.

ENGAGING THE BODY

Much of the Sensorimotor Psychotherapy that I went through focused relentlessly on the body: 'Just notice where you're feeling that in your body'; 'What does your body want

to do?'; 'Let's just notice what your breathing is doing now.' The focus was on learning to take mastery over traumatic responses by calming the body, by switching attention away from the left-brain narrative into the 'noticing' front middle brain. We considered the actions I could employ to change my response. When I was recalling traumatic incidents of sexual abuse where I was frozen and nauseous, what did my body want to do? It certainly didn't want to do what it had been made to do. It wanted to get up, push back, get away, hit out. So we paused the narrative and let my body do that.

You can feel really daft, pushing against a wall and focusing on how strong you feel, but it does work. It is about not trying to change the mind until we've changed the body. Let the body feel strong and powerful and then we will have a different relationship with ourselves, instead of feeling, eternally, that we need to make ourselves small and submit.

I learned to stand up – to really stand up. To feel strong and powerful and competent and brave standing up, rather than the automatic weakness and impulse to collapse that I had at first. We identified that being told to stand up was often a prelude for me of abuse, hence my automatic reaction of crumpling and terror. But when I learned, slowly, to stand up and notice that nothing bad happened – to pause



and think and reflect and feel it in my body that nothing bad was happening – it began to transform my bodily reactions.

‘CHRONICLING’

Sometimes the trauma narrative, especially when I switched to a ‘younger’ part of me, came tumbling out all breathless and disjointed and full of stammering terror. So we invented ‘chronicling’ – a term we used to describe something that we tried just once as an experiment and which was so effective that it became the go-to-technique for much of our phase 2 work. It involved sheets of paper and my therapist writing, verbatim, what I was saying. It worked – I think! – because it slowed things down. It allowed the parts of me that didn’t want to ‘vomit slowly’ to feel that they were being heard and listened to, but it also made them pause to the speed of my therapists’ writing. And in the pauses they learned to breathe, to calm a little, to just nudge down slightly, back into the far edges of their window of tolerance. And then move onto the next sentence.

Even though a lot of the time it was all feeling and no thinking, it did get it out. And then the next session, or in the second half of the same session, back it would come to me as thinking, reflecting, adult-me, and we would go through it, line at a time, and try to stop and pause and face it and listen to it without dissociating. I was very rarely

successful in staying present to read it the first time around. But it stopped me avoiding it completely, and bit by bit, in sessions and outside of them, I could sidle up to this stuff and just take a glance at one or two lines of it. And then work on my breathing and notice what I was feeling – notice in my body what I was feeling – and breathe through the panic-response, and the shame-response and the terror-response, until I could think about it maybe just a little.

In mentalising it, I tried then to develop some self-compassion for it: to offer myself the comfort and empathy that I so desperately needed. It was a slow process, but it meant that traumatic content wasn’t just splurged or vomited out into the air, in a kind of ‘I’m not looking, I’m not listening’ kind of a way, but that it was put down on paper for me to go back to at a later point, to approach slowly, and to finally own as ‘This is me.’

See also:

- [The three phase approach: part one – safety and stabilisation](#)
- [The three phase approach: part two – treating trauma](#)
- [The three phase approach: part three – consolidation, integration and reconnection](#)
- [My experience of phase three work](#)