

THE TRUTH ABOUT TRAUMA

Anxiety Stress Depression & PTSD



Stephen H Gardiner - Trauma Therapist



Why are animals in the wild, even though threatened routinely, rarely traumatised?

By understanding the dynamics that make wild animals virtually immune to traumatic symptoms, the mystery of human trauma is revealed.

INTRODUCTION

This book has been written to give the reader an idea of trauma and stress, their associated symptoms, and how they can be overcome.

Mainstream medicine often treats the effects of psychological and emotional stress and trauma with drugs. The patient is given drugs, and the expectation is that they must take them for the rest of their lives. Whilst this is great for the drug manufacturers, it's not so great for the patient. There may be some respite for the patient, but this treatment often has side effects. I have had patients in my office who have been on anti-depressants for 5 or 10 years, and they are still depressed!

Mainstream medicine also says that overcoming the effects of stress and trauma takes a long time, and **talk therapy** is often used in the hope that you will become desensitised. In most cases, you are re-traumatised.

The number of people diagnosed with the effects of anxiety, stress and/or trauma is growing every year. Currently, over 24% of our population is on medication, and this is becoming an epidemic in our society, affecting everyone from children and teenagers to adults and pensioners. The official diagnosis may be depression, anxiety, stress, traumatic stress or PTSD (Post Traumatic Stress Disorder) or an addictive habit, such as drinking, smoking, self-medicating with legal or illegal drugs or gambling.

Beyond Blue statistics show a decline in the mental wellbeing of our youth:

- **One in four young Australians currently has a mental health condition.**
Breakdown: 26.4% of Australians aged 16 to 24 currently have experienced a mental health disorder in the last 12 months.⁵ This figure includes young people with a substance use disorder. This is equivalent to 750,000 young people today.
- **75% of Children living with Domestic Violence** have ongoing mental health issues such as depression, separation anxiety, and uncontrolled anger into adulthood.
- **Suicide is the biggest killer of young Australians and accounts for the deaths of more young people than car accidents**
Breakdown: 324 Australians (10.5% 100,000) aged 15-24 died by suicide in 2012. This compares to 198 (6.4% 100,000) who died in car accidents (the second highest killer).
- **Evidence suggests three in four adult mental health conditions emerge by age 24 and half by age 14**
Breakdown: Half of all lifetime cases of mental health disorders start by the age of 14 years, and three-quarters by the age of 24 years.

It's A Scary Reality That Is Getting Worse

The Australian Bureau of Statistics reported in 2013 the following:

Anxiety disorders, affecting **14% of all people aged 16-85 years**, were the most common mental disorders reported. Anxiety disorders generally involve feelings of tension, distress or nervousness. Specific anxiety disorders such as Panic Disorder, Agoraphobia and Generalised Anxiety Disorder have some common symptoms, such as a pounding heart, sweating, trembling, shaking and difficulties with breathing. The most common anxiety disorder for both men and women was Post-Traumatic Stress Disorder.

As many as **800,000 Australians suffer from Post-Traumatic Stress Disorder (PTSD)** at any given time, making it the second most common mental health disorder, with women being almost twice as likely as men to experience this disorder. Females were more likely than males to have experienced anxiety disorders in their lifetime (32% compared to 20% for men).

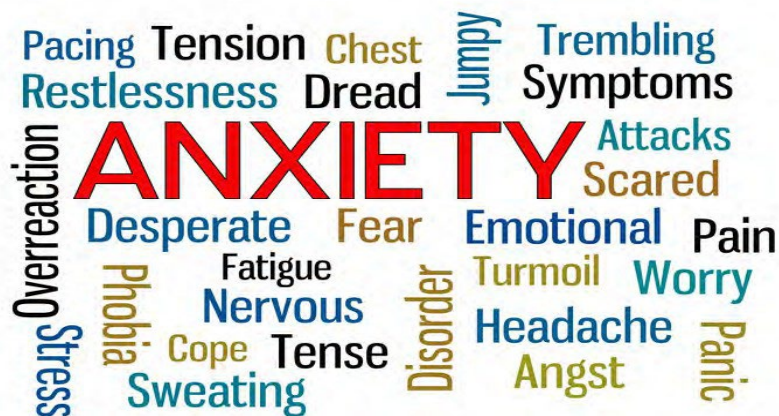
Affective disorders (also known as Mood disorders), such as Depression, Dysthymia and Bipolar affective disorder, affect 6% of people aged 16-85 years. Again, a higher proportion of females reported Affective disorders than males both in the 12 months before being interviewed and over their lifetime (18% compared to 12%).

In Australia, it's estimated that 45 per cent of people will experience a mental health condition in their lifetime.

In any one year, around 1 million Australian adults have depression, and over 2 million have anxiety. Add in 800,000 with PTSD, and we have 12 ½ % of our population medicated for a mental illness, and these figures are nearly 4 years out of date!

Chances are that you are reading this book because you, or someone you know, is suffering from the effects of psychological or emotional trauma.

If you are looking for a way to beat the effects of this without the use of drugs, then you have come to the right place.



What is Trauma?

Trauma can be defined as:

- a. Serious injury to the body, as from physical violence or an accident.
- b. Severe emotional or mental distress caused by an experience.
- c. An experience that causes severe anxiety or emotional distress, such as rape or combat:
These are memories that persist long after a trauma occurs.

From the definition, you can see that trauma causes physical symptoms such as a broken leg but also psychological symptoms such as depression. This book is concerned with emotional and psychological symptoms and its effects.

Common occurrences can produce traumatic aftereffects that are just as debilitating as those experienced by veterans of combat or survivors of childhood abuse. Traumatic effects are not always immediately apparent after the incident. The symptoms may take many years to appear and can appear without warning.

The Reality of a Traumatized Person

When asked about the traumatic experience, often the person will say, “You had to be there”. Words are inadequate to describe the experience and feelings associated with the horrible and traumatic event.

Many traumatized people feel that they are in a position in which nobody can share. While this is not entirely true, some elements are.

Because the symptoms and emotions associated with trauma are so intense, most people will try to suppress them. This can prevent the healing process. What does not help is the lack of tolerance in our culture to a traumatized person’s experience. The very act of freezing is thought of as “a weakness” when, in fact, it is just the body going into survival mode.

Trauma can ‘present’ in the body as neck stiffness or aches; headaches; stomach and bowel problems; recurring illness – constant illness; immune disorders; eating disorders; inability to lose weight; addictive behaviours such as smoking, gambling, drinking, drugging; and issues with concentration, anger, rage, impatience. These are all common symptoms, which, along with the obvious depression, stress, anxiety and lack of interest in life, that we hear about daily.

Who becomes traumatised?

The ability to handle or not handle a traumatic situation depends on several factors:

The event – How threatening is it? How long does it last? How often does it occur? Threatening events that are intense and continuous are probably the ones most likely to cause trauma. War, domestic violence and childhood abuse are the three most common.

The circumstances of the person's life – the family's actions (support or lack of support) can have a dramatic effect. Poor health, ongoing stress, lack of food, etc., can also help to traumatise an individual.

Characteristics of an individual – some people are more genetically resilient to stressful events than others. Things that contribute to resilience are strength, age, health and physiological development. When left alone, it can be overwhelming to a baby, mildly distressing to a toddler and only mildly uncomfortable to a grown-up.

Learning capabilities – infants and children do not have the learnings or skills to handle threatening situations and are, therefore, more likely to be traumatised. This is often the reason that trauma can be traced back to early childhood.

Symptoms of Trauma

There are many symptoms associated with trauma, and these are:

- Shock, denial, or disbelief.
- Anger, irritability, mood swings.
- Guilt, shame, self-blame.
- Feeling sad or hopeless.
- Depression
- Anxiety

Apart from depression and anxiety, you will often hear the term “traumatic stress” and/or PTSD (post-traumatic stress disorder), so what are these illnesses?



Post-Traumatic Stress Disorder (PTSD)/Traumatic Stress

PTSD is defined as a psychological reaction occurring after experiencing a highly stressful event (such as wartime combat, physical violence, domestic violence or a natural disaster).

It is characterised by:

- Reliving the event through upsetting thoughts, nightmares or flashbacks or having very strong mental and physical reactions if something reminds the person of the event.
- Avoiding activities, thoughts, feelings or conversations that remind the person of the event; feeling numb to one's surroundings; or being unable to remember details of the event.
- Having a loss of interest in important activities, feeling all alone, being unable to have normal emotions or feeling that there is nothing to look forward to in the future may also be experienced.
- Feeling that one can never relax and must be on guard to protect oneself, trouble sleeping, feeling irritable, overreacting when startled, angry outbursts or trouble concentrating.
- Constant hypervigilance. On alert in case Happens!
- Uncontrolled and/or sudden rage or anger followed by remorse, depression and silence.
- Uncontrolled reaction to sudden noises or surprises.
- Uncontrollable sadness or tears watching TV or movies, even the news.

The Mechanism of Trauma

We all suffer from traumatic experiences in our lives, and the body has a great survival response to enable us to survive these experiences. This survival response is called the Flight, Fight or Freeze response.

Flight, Fight, Freeze Response

When we encounter situations that cause extreme stress or trauma, the brain produces chemicals that are sent out into the body. These chemicals, such as cortisone, cause more blood to go to the muscles; blood is diverted from the digestive system and other systems that are not immediately needed.

This, in turn, prepares the body's muscles to go into flight (run away), fight (face up to the threat and fight back), 'shut down', or freeze. There are no good or bad choices; they are just options we choose based on the information we have in that 'split second'.

The uppermost thought is always: 'Survival!'

When the events are too overwhelming, the body freezes and becomes almost catatonic. You can see this when a cat catches a mouse. The mouse becomes limp and looks as if it is dead. Most predators want live prey, so the freeze response mimics death in the hope that the predator will lose interest. Unfortunately, we humans often regard the freeze response as a sign of weakness. It's not—it's a **survival mechanism!**

Normal Response to Emotive Events

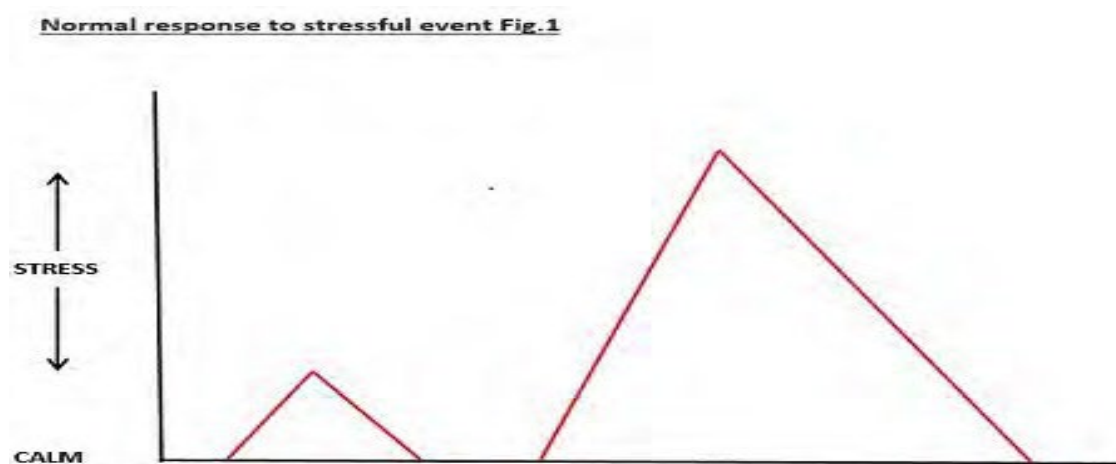
When a person is exposed to a stressful or traumatic event the body drops into the primitive survival mode of Fight Flight Freeze. We are given three ways to respond:

1. Flight – we can run away
2. Fight – We can fight back against the situation or person
3. Freeze – when an event is so overwhelming the mind cannot comprehend what is happening because it is too horrible, too confronting, or cannot accept what is happening – we freeze.

As a result of trauma or highly stressed events, our bodies are flooded with anxiety and stress and blood is pumped rapidly into our extremities. When the event is over, the brain triggers the self-regulation mechanism, which releases the chemicals that turn the event into a memory.

This self-regulating process occurs constantly during our normal daily activities. We experience little stress every day. It is a normal part of living. Stress and anxiety are necessary to keep us safe.

NORMAL STRESS REACTION



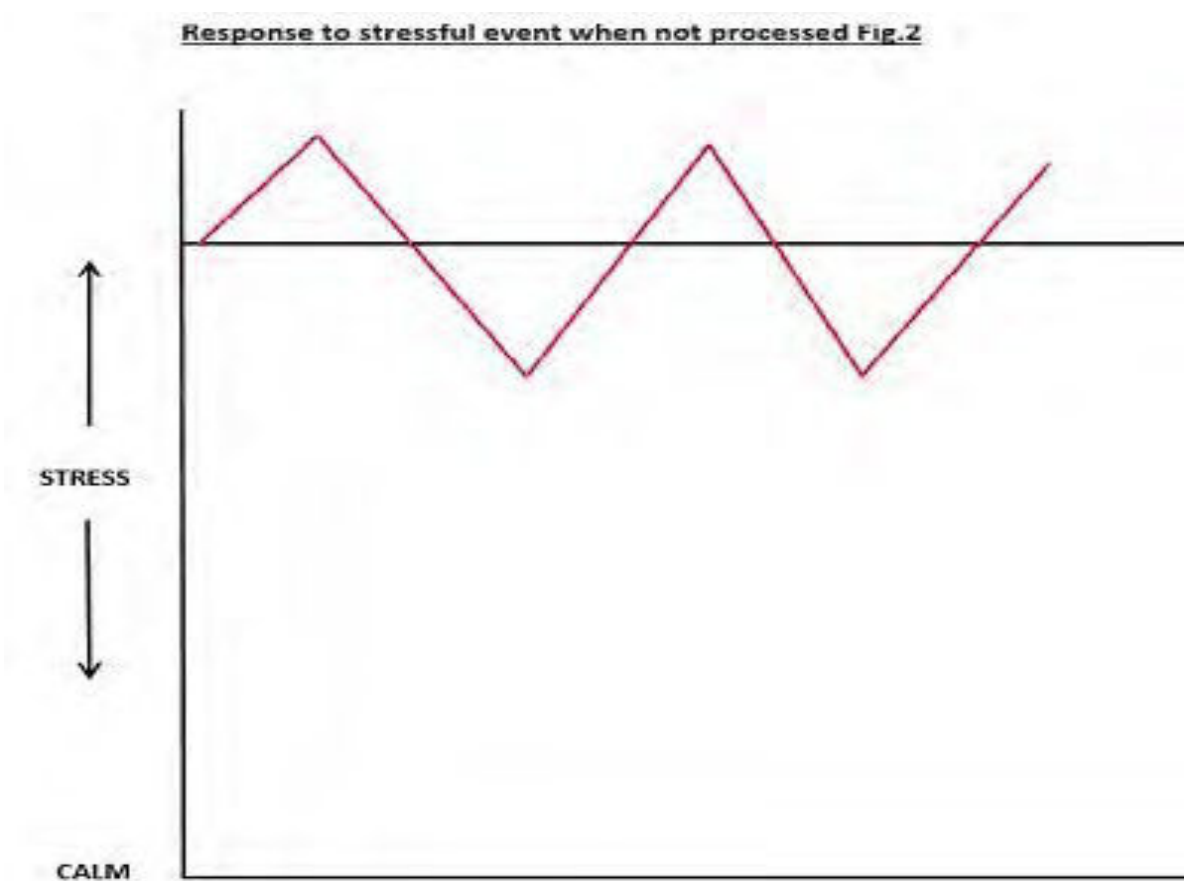
As soon as the 'danger' is passed, the "shut-down chemicals" are released, and everything reverts to 'normal' and calm! This is normal living. We react to 'stress' every day.

Imagine for a moment: if everyone was given a 'balloon' when they were born.... Every time we have a stressful event air is puffed into the balloon. But every time we have a happy event air is released from the balloon. Small puffs for small events, big puffs for larger.

If we continually have emotional/stressful events, whether large or small, sooner or later, the 'balloon' will burst. This happens with the 'Mind's' ability to deal with trauma. The events may be small, but they accumulate and repeat over time, and the unconscious can no longer cope. "The balloon" bursts and overwhelms the person.

When the Brain Gets Overwhelmed

Occasionally, the brain does not, or cannot, produce the chemicals to shut down the fight, flight, or freeze response and so doesn't process the event as a memory, thereby leaving the body in a highly aroused state. The baseline does not return to calm, and the person oscillates at a high level of stress.



Overwhelm can occur when the event is so horrible that the mind cannot comprehend it or when a person has had ongoing or repeated exposure to stress and has become 'frozen' in time and space.

So, although 'consciously' moving on – unconsciously, that event (or series of events) keeps the person trapped by triggering off the "Flight, Fight, Freeze" and constantly flooding the body with stress hormones.

High levels of stress and anxiety, followed eventually by depression, become a 'normal' part of living. Until the event is resolved and the brain can finish the process of converting the event into a memory, the anxiety and stress will continue to be triggered unconsciously.

It's About Energy

Traumatic symptoms are not caused by the event but rather by the energy that is not resolved or discharged. This energy is responsible for depression, anxiety, hypervigilance and other symptoms that are seen with trauma.

We have all seen the scene when a cat catches a mouse, and the mouse appears to be dead. Inside, the cat's nervous system is racing—it's like placing your foot on the brake of a car and pushing down on the accelerator at the same time. This tornado of energy causes the symptoms of traumatic stress.



A threatened human must discharge this energy that has

been mobilised by an event, or it will become a victim. The energy does not simply go away, it persists in the body and will even increase in magnitude. The result is a wide variety of symptoms, which is how the body handles this undischarged stress. Animals instinctively discharge this stress, usually by shaking or trembling. If you observe an attacked dog, it will shiver and shake after the event, which releases this energy.

In our unsuccessful attempts to discharge these energies, we may become fixated on them. We may unknowingly and repeatedly create situations in which the possibility of releasing ourselves from the trauma trap exists, but without the proper tools and resources, most of us fail.

Many victims of a traumatic event will spend months or even years talking about their experiences, expressing their anger, fear and sorrow, but without releasing the residual energy, they will remain trapped in their traumatic experience.

Fortunately, the same incredible energies that create the symptoms of trauma, when properly engaged and mobilised, can transform trauma and help in the healing and mastery of it.

We, as humans, have the capacity to heal not only ourselves but our world from the effects of trauma.

You Can Heal...

Although human beings have experienced trauma for thousands of years, it is only recently that it has attracted widespread professional and public interest. PTSD is now a widespread, if not misunderstood, term that many of us use.

More and more people are diagnosed with depression and traumatic stress or PTSD. Some of the diagnoses are due to more understanding of trauma. However, awareness has also been heightened as celebrities are now openly talking about their battles with depression, long-term anxiety and other mental illnesses. This openness has created a 'tolerance and acceptance' and 'social proof' that it is OK to ask for help and even admit to these symptoms.



You are not 'broken', you are just out of balance !!

Who Does Trauma Affect?

In the past, trauma was associated with sexual abuse or with soldiers, but we now know that trauma occurs over a wide range of people and professions and forms. Do You fit one of these profiles?

Battle-scarred?

Are you a member of the Defence Force, or are you just home from active duty in a war zone overseas? Happy to be home, but discovering that although you are 'off active duty', the horrible experiences you witnessed or engaged in have formed a 'prison around your soul', preventing you from enjoying life. Perhaps you believed that once you were back home, 'the horrors' and the 'nightmares' would disappear, and you'd be safe emotionally as well as physically! Or perhaps you expected the love of family and friends would allow you to integrate into the community easily, and the memories would melt away into the past, just like 'last year's holiday.' But they haven't.... the movies keep running....



disappear, and you'd be safe emotionally as well as physically! Or perhaps you expected the love of family and friends would allow you to integrate into the community easily, and the memories would melt away into the past, just like 'last year's holiday.' But they haven't.... the movies keep running....

Or are you.....

Living in Fear, heartbroken and alone, running from domestic violence....

Are you trying to come to terms with a broken relationship? A survivor of domestic violence? Perhaps you are still being 'bullied emotionally' by an ex-partner, but you are trying to 'move on', to find a new lease on life, but the past is still nagging at you!

Mentally, you are still stuck in that toxic, violent relationship – you can't go back.... But you can't move forward, either! "What if you are 'damaged goods' and you were to blame?" Too scared to do anything, in case you make things worse.....



Or perhaps you.....

Have had a car accident a burglary at home a sudden death of a loved one lost your job Been molested, raped or beaten or witnessed a tragic event, such a robbery, a shooting,



These scenarios are the cause of emotional trauma resulting in panic attacks, anxiety, long-term depression and often post-traumatic- disorder – PTSD!

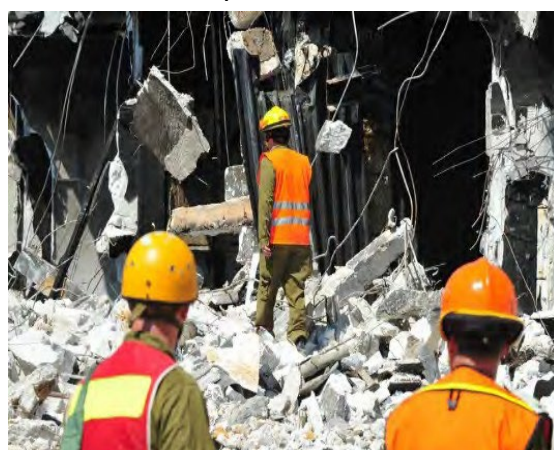
In fact, in Australia, one of the largest areas of trauma is the result of Domestic Violence. This affects partners and children, but children are often impacted more than adults. Domestic trauma does not have to be violent. In fact, neglect, mental abuse, abandonment, lack of love, and not feeling good enough, not being able to feel safe are all traumatic to a child and adults. These may not be deliberate but are all a form of abuse.

First Responders

Suppose you are a ‘first responder’ in an emergency service such as police, paramedic, nurse, doctor, mid-wife, ambulance crew, army, SES, etc.. You experience ‘stress-related trauma’ frequently, just by the nature of your job. Eventually, it will ‘overwhelm’ you. It must be treated and cleared regularly.

If you have flashbacks, difficulty sleeping, neck pain, stomach problems or feeling ‘you can’t cope,’ please ask for assistance to clear out the trauma.

Unfortunately, there is still a stigma around mental health and a genuine ‘fear’, especially within the ranks of our ‘first responders’ of the repercussions that will occur if they admit to suffering from stress or trauma. So, they don’t seek help when it affects their work and life until they ‘finally’ break down. Often, it is they who are so traumatised that they never return to the work they loved.



Causes of Trauma

There are a broad range of events and reactions that can cause the effects of trauma. Many events can cause traumatic reactions late in life, depending on how a person experienced them and when the event occurred. Some of the more common causes of traumatic reactions are:

- Foetal trauma
- Birth trauma
- Loss of parent or close family member
- Illness
- Physical injury
- Sexual, physical and emotional abuse
- Domestic Violence
- Abandonment
- Witnessing violence
- Bullying – school yard; cyber, workplace, road rage
- Natural disasters
- Medical or dental procedures
- Surgery



(Waking The Tiger: Peter A Levine)

Trauma happens even during surgery. Even though you know why and what the surgery is for, we still react or respond to ‘what we think’ at the primal level. If the body remembers a past event where it perceived a wound as harmful to survival, then even the smell of disinfectant or the sight of a needle can send the stress hormones into overdrive! You are back ‘there’ again!

The perception of the instinctual nervous system carries much more weight, and that is why surgery can often produce a post-traumatic reaction.

The treatment of trauma is, in many ways, poorly understood and it is easier to dish out pills to treat it rather than understand it. Unfortunately, with Medical Practices being run as a ‘business’, the medical profession seems to have become more about profit than the patients’ health. Doctors often lack the time or knowledge to understand patients’ real needs.

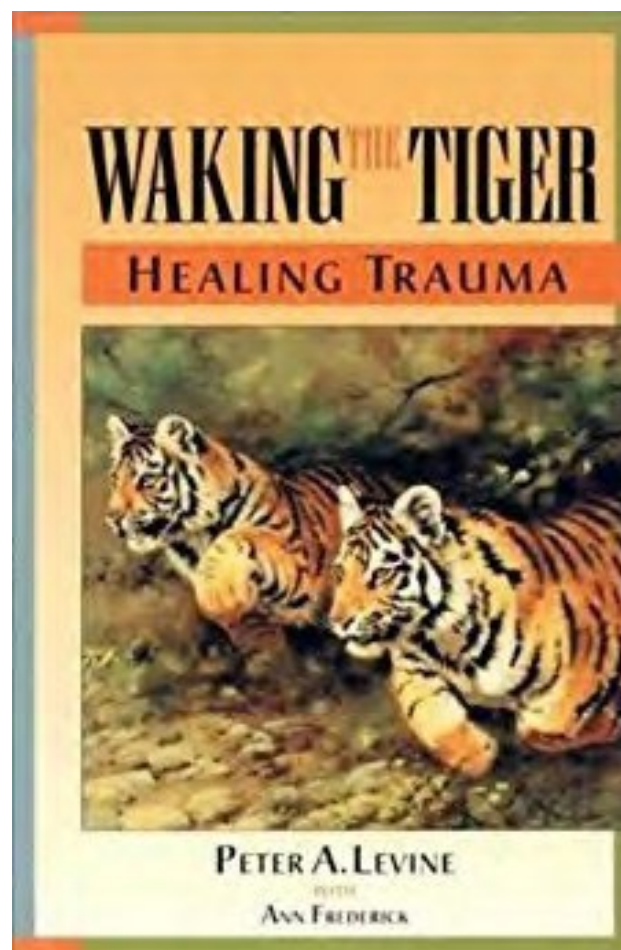
The pharmaceutical companies love this, as ultimately, they make a lot more money from having people taking their drugs for a long period of time.

When people identify themselves as victims of trauma, they will stay as victims. Well-intentioned support groups may inadvertently keep people in this 'victim' thinking as people become their stories. Every 'telling of the trauma' traumatises the person, and, to me, it doesn't make sense to re-traumatise someone as a treatment.

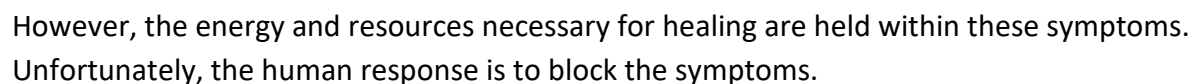
What does help is to create a positive framework and begin denying people the experience of identifying themselves as victims and survivors.

It is through our bodies, but more particularly, through our unconscious minds, that we can discover the key to healing trauma. Each of us has a choice, perhaps one of the greatest in our lives. Healing trauma is a natural process that can be accessed through the unconscious mind. It does not require years of psychological therapy and retrieval of traumatic memories.

Peter Levine, in his book "Waking the Tiger", says post-traumatic symptoms are an incomplete physiological response suspended in fear. Reactions to life-threatening situations remain symptomatic until they are completed. Until these responses are completed, the symptoms will not go away.



When we are unable to release the energy associated with the fight, flight freeze response, we often go into a downward spiral, which is characterised by symptoms such as depression, stress, PTSD, etc.



These energies and resources can be blocked in many ways. Doctors will prescribe drugs to suppress symptoms by adjustment or control or by denial of feelings and sensations. However, many people will suppress the symptoms by self-medicating with drugs, alcohol, smoking, eating, or gambling. Any addictive behaviour usually will have at its source a past unresolved event that triggers the addictive behaviour until it becomes a habit, part of life.

The Role of Therapy in Healing Trauma

As with most things in life, “nothing changes until YOU decide to Change.” This is true for overcoming or resolving long-term anxiety, stress, depression and PTSD.

Occasionally, there is a secondary benefit being derived from ‘suffering the effects of trauma’. What does that mean? Think about a lady, 60 years old, receiving a medical disability pension due to workplace bullying. If the ‘trauma is resolved, she becomes well and off medication’ – what happens to her medical pension? The secondary benefit is the “income stream”. The desire to be well, travel, and enjoy life must be greater than the fear of losing her ‘income stream’; otherwise, change will not happen.

The “decision to change” is essential. Decide – ‘Enough is enough’ and things change.

The environment that you are in has a huge effect on traumatic symptoms.

It’s no good to change if you are going to go back into the environment that has caused or precipitated the trauma.

As Bruce Lipton says, “It’s the environment stupid.”



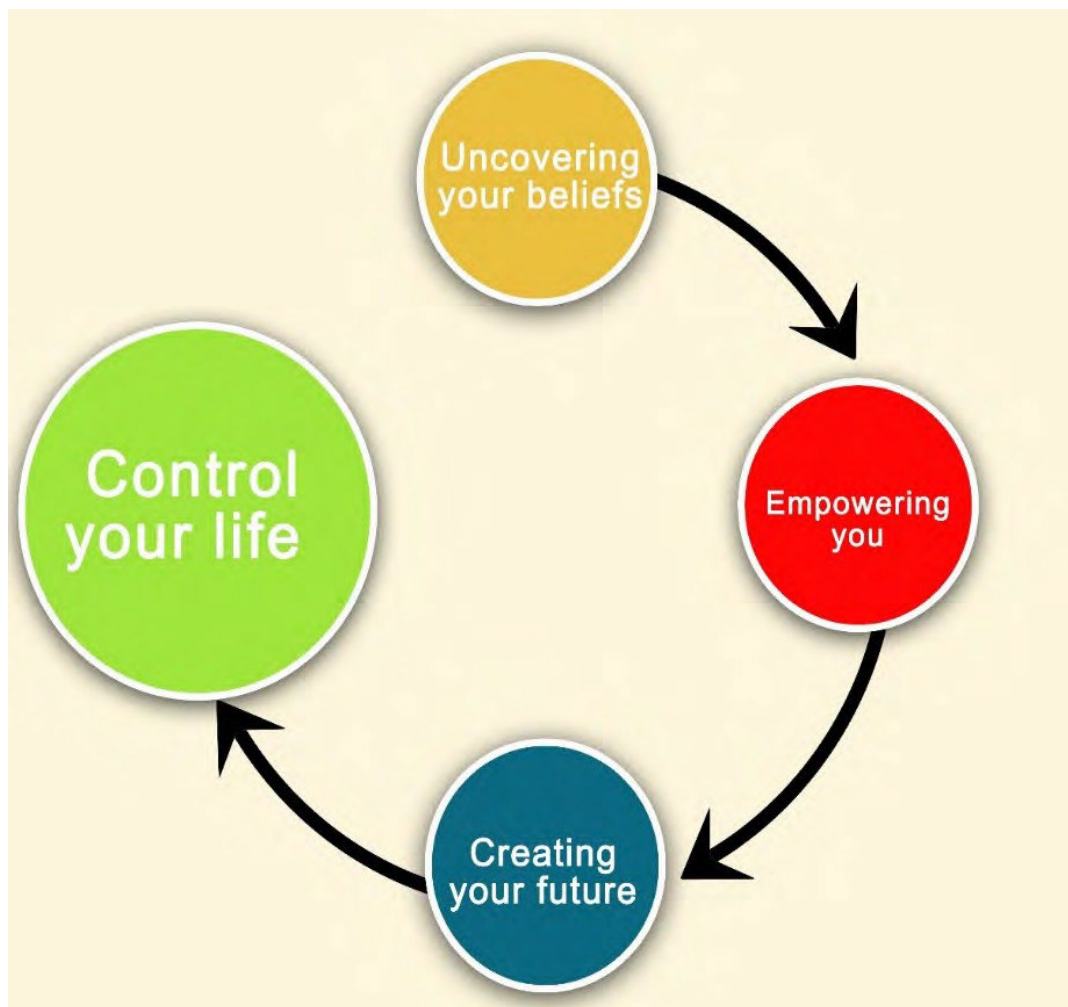
At Transformations Coaching and Hypnotherapy, we have used TRTP Therapy with great success to resolve long-term anxiety and severe trauma. Depression, anxiety, traumatic stress, PTSD and all the other effects of trauma can be healed with the use of dynamic re-imagining - the core of TRTP therapy.

Trauma Therapy Process

Our therapists at Transformations Coaching use **TRTP™** exclusively with our clients who present with issues of long-term anxiety or depression. We use it because it is fast, effective and there is no need for drugs.

The process consists of three one-hour appointments over a period of three weeks.

Each session includes dynamic re-imagination to change the perceptions and programs in the unconscious mind.



Three Sessions “To Resolve Long-term Stress, Anxiety, depression and PTSD”

The Process

Appointment 1: Change Limiting Beliefs. We all have these. We pick limiting beliefs up from others, our past experiences and our perception of events. Generally, these beliefs are not true. However, by the time we are 7 years of age we have gathered sufficient of these to form the foundation of our identity. Going forward, every decision we make runs through these beliefs, before it is actioned.

Think About Your Limiting Beliefs

Think about a recent decision you had to make and that 'little voice' that popped into your head with some negative comment.... 'You can't do that!' "Who do you think you are?" or the most common "What will people think?" How hard is it to follow through with your action when the little voice (limiting belief) is chirping in your ear?

Or imagine someone who tried to learn a second language at school and failed miserably. The belief could now be that he or she cannot learn another language. This belief has been built on one incident. Usually, it isn't true and if given the right circumstances, that person can and would learn another language. But..... the limiting belief will make it so difficult that it's doubtful the person will even try to learn.

Trying to move forward with Unconscious Core Beliefs holding you back is like jumping with a 'ball and chain' tied to your leg.....

So, in this appointment, we identify the clients' limiting Unconscious Core Beliefs and use imagination to break or reframe them. Once the UCB 'limits' are removed, the normal reaction is that the client's confidence, self-esteem and worthiness change.



So, what would you do, if You Knew You Couldn't Fail?

Appointment 2: Resolving the Past

This appointment is often called “pulling the teeth”. People who have had traumatic events that affected them are victims of the trauma. The event has disempowered them.

Taking a person back to the event and having them relive it re-traumatises them. Why would you do that?

With dynamic re-imagination, the person revisits the most traumatic events of their lives. They **revisit** (the past event) after it happened as AN “empowered person”, in control of themselves and the situation and where they can deal with the event. Notice I say **revisit** rather than **relive**.

It’s a bit like having an argument with a person, and as you walk away, you begin to think about all the things you should have done or said. In appointment 2, you get a chance to do and say ‘everything’ that you need to do to ‘rewrite’ the event safely and from a position of ‘power and strength.’



In many traumatic events, there can be guilt associated (in fact, this may even be a source of anxiety). This relates to the “should of, would of, could of, why didn’t I? scenarios we replay in our mind... over and over.... and it is in this appointment that we resolve ‘all that stuff’ and any guilt, shame or blame associated with the event.

Can You IMAGINE..... Your Life Without Anxiety.....

Appointment 3: Is all about Your FUTURE:

One of the most essential parts of our unique process is helping our clients see the future they would like to live—the life they can have without the debilitating effects of trauma. Imagine your life in six months; all of this is behind you. Imagine, dream.... What would that feel like? Look like?

We help our clients to build the ‘picture’ of their ideal lives, in their minds, then on a Dream Board. Then, we use Dynamic Imagination to create an image in their subconscious mind... this can be anything they want to be, have, or do. Any image that gives meaning to their Dream Board – to their future – to the Life they Choose to Live.



Our philosophy is that ‘No-One’ is broken..... just a little out of balance.

Our Trauma Therapy Process is designed to bring you back into balance, help you see the world from another perspective, and get you back to enjoying your life!

Life is a GIFT.... But you need to live in the ‘present’ to truly... LIVE!

Your Life Your Choice!



SERVICES

- **Counselling – Relationships (Individuals and Business)**
- **The Richards Trauma Process – TRTP**
- **Quit Smoking in 60 Minutes – Guaranteed**
- **Quit Gambling**
- **Phobias**
- **Confidence, self-esteem, self-worth issues**
- **Exam stress, Competition stress**
- **Values - What is Driving Your Life?**

If you would like to know how to Break the Cycle of Stress and Trauma,

BOOK Your 30 Minute Complimentary Strategy session

PH: 1300 64 53 54

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A Little about Stephen Gardiner...

Steve was born in Harare, Zimbabwe, and started working as an Agronomist (Crop Scientist). For the first four years after university, his work life alternated “work with farmers” with monthly “two-week army call-ups.”

Steve was an Army medic on constant active duty. Zimbabwe was in the middle of a terrorist war, a war of Independence.

Steve’s “normal” work vehicle was an armoured jeep, and he carried his medic kit and rifle everywhere.



Because it was accepted as normal behaviour, Steve did not notice or even understand the cause of why he was “always angry”, why “sudden sounds” made him drop to the ground or “freeze”, or why he was constantly ‘hyper-vigilant and always “on alert”, just watching, almost waiting for ‘something to happen!’

Steve had classical PTSD and never knew it. It took 30 years to figure it out and a lot of personal development to sort through the effects. Through his journey, Steve discovered the power of hypnosis and, finally, The Richards Trauma Process. TRTP changed Steve’s life. As a result of his own struggle and because of his own ‘life-changing transformation, Steve now dedicates his life to helping people overcome PTSD, anxiety, stress and depression, allowing his clients ‘to get their life back!’

Steve is Head Mentor and Senior Trainer for TRTP, working alongside Ms Judith Richards, the creator of TRTP, training psychologists, psychiatrists, counsellors and Life Coaches across Australia to be practitioners and ensuring more people have access to this amazing process.

SPECIALTIES

Classical PTSD (Post-Traumatic-Stress-Disorder) Anger, Trauma, Stress, Anxiety, Depression, Confidence, low self-esteem, Pain Management, Grief and Loss, Phobias, Smoking Cessation, Panic Attacks, Family/relationship issues.