Treatment of Complex Trauma: A Sequenced, Relationship-Based Approach

by Christine A. Courtois and Julian D. Ford; New York, Guilford Publications, 2013, 378 pages

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Christine Courtois and Julian Ford are well-known, well-published, and well-respected trauma treatment leaders. These experts bring credibility, strength, and significant power to their new text, *Treatment of Complex Trauma*. The compelling foreword by John Briere affirms the significance of this new contribution to the field by recognizing that the authors have bridged the gap between empirically focused and relational trauma treatment approaches and provided an "excellent example of the next stage in the evolution of trauma therapy."

The chapters that follow Biere's introduction are clustered into three parts. Each part, like the theme of the text, leads the reader through a sequential process of understanding. The first provides an overview of complex traumatic stressors and their sequelae. The second part reviews treatment of complex traumatic stress reactions and

Dr. LeBel is director of System Transformation, Commonwealth of Massachusetts Department of Mental Health, Boston. disorders and outlines a three-phase, relationship-based treatment model with the overarching principle to strive to "do no *more* harm." The third part discusses advanced treatment considerations and complex relational issues. Each section is comprehensive, detailed, and well cited and covers a range of related topics.

Dr. Courtois and Dr. Ford effectively straddle imparting information that educates the new-to-trauma clinician and advancing the knowledge and understanding of the seasoned expert. How do they do this? The authors weave historic information and contemporary literature and thinking with pragmatic and process elements of treatment; they demonstrate the efficacy of sequenced therapy through different methods, including case vignettes and two composite clients, Hector and Doris, who are discussed throughout the book. All of this creates rich complex trauma context and content. In addition, essential pragmatics are provided, such as evidenceinformed assessment instruments paired with treatment goals, screening questions and ground rules for groups, sample treatment policy and informed-consent statements, and vivid trauma vocabulary. But Courtois and Ford go even further and offer supplementary resources on the publisher's Web site, including self-reflection questions for each chapter, self-help resources, workbooks, useful Web sites, and an extensive bibliography of trauma-related publications.

If there is a limitation in this work, it is the greater systemic limitation of failing to acknowledge or recognize the impact of trauma, the pace of trauma treatment evolution, the continual lag from "science to service," and the ongoing collision with rapidly changing funding streams that do not always appreciate evidenced-based practice or practice-based evidence. As payers shift from purchasing services to paying for outcomes, the demand for datainformed trauma treatment is clear. Courtois and Ford recognize this imperative and give new and experienced clinicians a critical, practical guide to complex trauma treatment. This is the stated goal of their book. To that end, the authors have achieved their goal and delivered a must-read for mental health practitioners.

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