I recently traveled to Washington DC to attend the "Dare To Transform" Conference sponsored by the Center For Mental Health Services. The conference brought together those with an interest in trauma from across the country. I attended the conference to present TIP in a workshop and to learn what I could learn. I'm pleased to report that TIP was very well received and in fact a number of people at the conference had heard of us before. One of the things about the conference that jumped out at me is that the attendees were about 90% women. One of the speakers commented on this and observed that the woman's movement has been a great influence of bringing the subject of trauma to the forefront particularly in the areas of sexual assault and domestic violence. There were also many consumers (formerly called patients) of mental health services there. There is a major movement in mental health programs to involve consumers in the planning of services and in providing treatment (peer support).

Although I learned quite a bit, I realized that much of what was presented as "cutting edge" we have been doing for a long time. It was also gratifying to hear that our Volunteer Training Academy embodies many of the latest findings from the field of research on trauma.

Here are 5 major messages from the conference I would like to share with you:

1. Most "mental illnesses" can and should be viewed as a result of past traumas and not in terms of "illness."
2. The focus of treatment of those with mental illness should be on resolving past traumas and not on symptom reduction.
3. Human beings have a tremendous capacity to "self heal." Most victims of traumatic events around the world will never see a therapist (or TIP Volunteer, for that matter) but they will nevertheless heal. Helpers should be careful not to interfere with this self-healing process.
4. Treatment of trauma survivors should be based on the principles of Connectivity and Empowerment. These are fancy words for conveying that if we want to help trauma survivors, we need to connect with them and help them get back their power.
5. Treatment of trauma survivors should be on their strengths, recognizing that the traumatic event is just one part of the entire landscape of a survivor's life.

One of the workshops I attended was called eCPR or Emotional CPR. A psychiatrist was rolling out this "cutting edge" way of helping those who have been traumatized. It turned out to be a very rudimentary version of our well-developed Emotional First Aid model. I came away determined that at the next conference I would roll out "the real thing."

I wish all of you could have been at the conference. You would have come away grateful for what you learned and proud of being part of the TIP organization which is on the forefront of the trauma movement.