

A WHITE PAPER · EXECUTIVE SUMMARY

Beyond Regulation

Why symptom-focused therapy isn't enough — and how the Becoming Method® supports full-spectrum trauma recovery

<p>18–44%</p> <p>of patients receiving first-line PTSD therapy remain non-responders post-treatment</p>	<p>31.6%</p> <p>of Veterans drop out before treatment even begins</p>	<p>94%</p> <p>of Canadian nurses report burnout symptoms</p>	<p>6.9%</p> <p>lifetime PTSD prevalence in Canadian adults</p>
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Sources: Semmlinger et al. (2024); Sripada et al. (2022); CFNU (2022); Statistics Canada (2023).

The Clinical Gap

Standard trauma-focused therapies — prolonged exposure, cognitive processing therapy, EMDR, and trauma-focused CBT — produce reliable symptom reduction for single-incident PTSD. For the developmental, relational, and complex presentations that dominate real-world clinical caseloads, the picture is more sobering. Even when patients achieve diagnostic remission, the ICD-11 “disturbances of self-organization” cluster — affect dysregulation, negative self-concept, and relational disturbances — frequently remains unaddressed. The field’s own consensus, formalized in the 2018 ISTSS guidelines, recommends phase-based, multi-component treatment for complex PTSD rather than single-modality stabilization or exposure.

The Becoming Method® is a phase-based, consciousness-grounded framework for the work that follows stabilization: identity reconstruction, meaning-making, purpose clarification, and embodied contribution. It does not displace existing trauma treatment. It articulates the territory beyond it.

THE FOUR FOUNDATIONAL QUESTIONS

1. What do I need to forgive?
2. What intergenerational pattern am I here to interrupt?
3. What did I feel that I couldn't express at the time of the trauma?
4. What lie did I come to believe about myself — and what is the truth that will set me free?

THE FIVE STAGES

- 1 · Traumatic Wounding. The rupture: dysregulation, somatic imprinting, fragmentation of self-concept.
- 2 · Existential Inquiry & Identity Reconstruction. Reassessing belief systems and moving toward deeper internal coherence.
- 3 · Self-Discovery & Narrative Integration. Trauma-informed storytelling, truth-telling, and shadow work restore congruence.
- 4 · Purpose Clarification. Clarity emerges. Clients sense core values, gifts, and contribution.
- 5 · Functional Integration & Embodied Contribution. Insight becomes action; purpose is expressed in daily life.

WHAT THE BECOMING METHOD® OFFERS

A New Paradigm for Trauma Recovery

Trauma as Disconnection. Healing as Reconnection.

The Becoming Method® offers a profound reorientation: trauma is not simply an event or diagnosis — it is a state of disconnection from the self. Healing, then, is the process of reconnection — to the body, to truth, to others, and to the universal whole. This framing is consistent with the peer-reviewed evidence on what symptom-focused treatment leaves unaddressed. The ICD-11 disturbances of self-organization cluster — affect dysregulation, negative self-concept, relational disturbances — is precisely a description of disconnection: from one's own internal states, from a coherent sense of self, and from others.

Three Domains of Integrative Care

Traumatic Wound Healing. Grounded in somatic therapy, relational attunement, and evidence-informed modalities, this domain supports nervous system regulation, emotional stabilization, and reconnection to the body (Levine, 1997; Ogden et al., 2006; van der Kolk, 2014; Porges, 2007).

Self-Discovery and Transformation. Practitioners guide clients through narrative reframing, forgiveness processes, and identity reconstruction (White & Epston, 1990; Schwartz, 1995; Jung, 1969; Yalom, 1980).

Purpose Discovery and Integration. Clients embody purpose through service, leadership, creative expression, or caregiving (Maslow, 1962; Wilber, 2000; Kegan, 1994; Loevinger, 1976).

Why This Matters Now

Canadian nursing and allied health professionals are experiencing structural moral injury at a population scale. The Canadian Federation of Nurses Unions reports that 94% of nurses experience burnout symptoms (CFNU, 2022). Statistics Canada places lifetime PTSD prevalence in Canadian adults at 6.9% (Statistics Canada, 2023). Adverse Childhood Experiences are widespread in the general population, and the developmental, intergenerational, and morally injurious trauma that workforce members carry into clinical settings is rarely the trauma that single-modality treatment was designed to resolve. The Becoming Method® was developed to meet that workforce, those clients, and that clinical territory.

“Healing is not about fixing what is broken. It is about reuniting what has been separated. It is about remembering who we were before the wound — and choosing who we now become.”

— DR. JOAN SAMUELS-DENNIS

Key References

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