



THE RHYTHM AND PROCESSING (RAP) TECHNIQUE: Group RAP Technique Manual

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Objectives

- Effectively explain RAP technique and flash approaches to doing deep level trauma work
- Articulate the proposed working mechanisms from a memory reconsolidation and predictive processing perspective.
- Identify the core safety concerns in group RAP and how to address them.

The Need for New Approaches

The field of psychotherapy is at a critical juncture. Due to social media, technological advances, and the changing geo-political landscape, we need to advance our capacity to promote healing. Traditional models of "talk therapy" often fall short when addressing the deep, unconscious nature of trauma. This is especially true when that trauma is compounded by systemic oppression, racism, and identity-based stresses.

We have understood for quite some time that trauma resides not just in the narrative (explicit/declarative) memory but also deep in the nervous system (implicit/action urges) itself. However, the tools we have historically used did not always meet the moment. Asking clients to relive their worst moments in detail can be re-traumatizing for the victims and even those of us who sit with it. Witnessing the unburdening also contributes to vicarious traumatization.

This manual introduces the Rhythm and Processing (RAP) Technique, a methodology developed to resolve the problems we discuss in our workshop. It was developed to answer the question: How do we help clients heal from complex trauma without suffering and in ways that are consistent with their interests and agency? How do we address the unique wounds of racial trauma while using some of the most up-to-date neurobiological knowledge we have available? How can we help people heal their past, improve their present, and bring their future to reality?

The RAP Technique offers a path forward that honors the client's cultural context, utilizing their innate creativity, while utilizing the latest understanding of predictive processing and memory reconsolidation theories to promote efficient recovery.

Let's move beyond managing symptoms and transform complex trauma.

David Archer's Biography:



David Archer, PSW, MFT, MSW, a Black Jamaican African Canadian father and husband from Montreal, Canada (Tiohtià:ke). He is a professional social worker, couple and family therapist, anti-racist psychotherapist, and EMDRIA Certified Approved EMDR Trainer. He is currently pursuing a PhD at Concordia University and has received several awards, including a full scholarship through the Canadian federal government's SSHRC doctoral fellowship.

With over 17 years of experience, David has treated diverse client populations, including those suffering from substance use disorders, eating disorders, and other challenging health concerns. In his private practice, he specializes in treating complex PTSD and complex racial trauma using Africentric principles, predictive processing theory, and memory reconsolidation-based approaches. He provides consultation to therapists, groups, and organizations internationally.

David is the recipient of the Emerging Leader Award from EMDRIA and the developer of Rhythm and Processing (RAP) Strategies, an integrative therapeutic approach for treating complex PTSD and racial trauma. He is the author of five books relating to anti-racist psychotherapy, mindfulness, complex trauma treatment, and revolutionary healing methods. As a keynote speaker and regular conference presenter, he offers workshops to help therapists integrate anti-racist principles into their practice and to teach people of all backgrounds to recognize their awesomeness.

EMDRIA Approved trainings available here:
<https://www.archertherapy.com/training/emdr-basic/>

RAP and EMDR group consultations here:
<https://archertherapy.com/training/consultation/>



About David Archer and the Origins of RAP

David Archer is an anti-racist psychotherapist. He is driven by a commitment to social justice and the belief that mental health care must be radically altered within our lifetimes.

- **Ancestors of RAP**

- Eye Movement Desensitization and Reprocessing (EMDR) therapy was developed by Francine Shapiro in the 1980s.
- The Flash Technique was developed by Phil Manfield in 2017.
- Thomas Zimmerman developed the Four Blinks approach to Flash in 2021.
- Archer was trained in EMDR in 2016, trained by Manfield in 2018, and first met Zimmerman in 2021.
- The first Rhythm and Processing (RAP) training occurred in 2022 and the book *Racial Trauma Recovery* was published in the same year.
- To this day he and Zimmerman work closely on developing transformative approaches to healing based on the predictive processing framework.

- **Development of RAP**

- The RAP Technique emerged from David's clinical practice in Montreal, Toronto, and the Indigenous communities of these regions.
- Working with diverse populations including racially diverse, gender expansive, and immigrant communities, he recognized that existing modalities failed to account for the complexities of a social structure that at times was the oppressor rather than a specific individual or circumstance.
- This necessitated the need for culturally responsive and explicitly anti-racist interventions designed for radical and systemic change.

- **Mission**

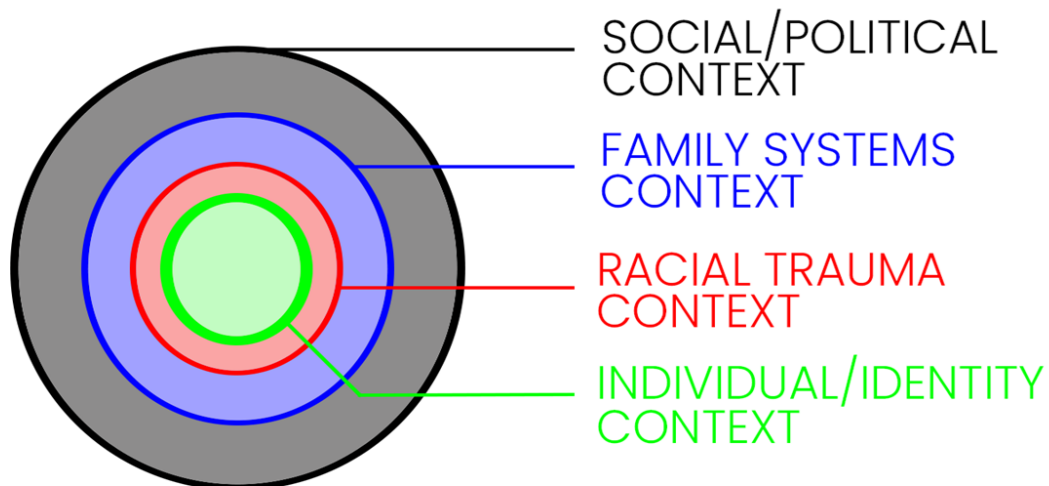
- Because complex trauma, dissociation, and racial trauma are both intertwined, it is up to us to put our full focus on the most effective ways of healing in the context of a hostile social structure.
- Archer advocates for building solidarity across all identities and fulfilling the belief that **all people deserve to heal**.

Theoretical Framework: Anti-Racist Psychotherapy

RAP is the application of Anti-Racist Psychotherapy (ARP). ARP challenges the **assumptions** of Western/Eurocentric models of therapy as well as challenging how healing is traditionally understood by conventional practices. The basis of ARP is that it is a trauma-focused approach meant to address the reality of systemic anti-Black racism, the dynamic of complex trauma/dissociation in a social context, and how to bring about transformative change using memory reconsolidation and predictive processing.

ARP is built upon four foundational pillars, or "cores," which the therapist must constantly hold in mind.

ANTI-RACIST PSYCHOTHERAPY: FOUR CORES



The Four Core Contexts

1. **Social/Political Context:** This core requires the therapist to consider the world and surrounding environment of their client.

We must ask:

What is the political climate? Is the environment hostile to the client's race, gender, sexuality, or religion? How does the rise of anti-immigrant rhetoric or legislation directly impact the safety and mental health of immigrant communities?

Acknowledging this context validates the client's reality. They are not going crazy; it's just that the justifications for their oppression are irrational.

2. **Family Systems Context:** Trauma rips through families and its consequences can impact our interpersonal experiences. This core examines how systemic oppression and historical trauma impact our social experiences.

We must ask:

What are the common communication patterns, how does homeostasis impact the client, and are their relationships characterized by imbalance or reciprocity? Does the client's workplace provide them with opportunities where they can express agency, or are they confined to exploitation? Do they have a voice in their families or intimate relationships?

No individual is an island, and understanding the constellations of relationships can help the client find their way.

3. **Racial Trauma Context:** Because race is socially constructed yet has deep consequences, we must take into account how other identity-based wounds take shape.

We must create a thorough "trauma history list" that includes not just singular events (like a car accident) but the cumulative impact of microaggressions, discrimination, and systemic injustices survived by the client. How do homophobia, sexism, poverty, and xenophobia impact the client (even if they are not of these social locations)?

Men often underreport sexual violence in part because we don't ask them as much. There are people who are white-passing, looking as if they do not experience racial trauma, but secretly holding the same wounds. What we don't ask is what they don't tell.

4. **Individual/Identity Context:** Understanding what is around the client is important. Their clinical presentation and intake forms are necessary, but here's a key question.

We must ask: Who is this person without their suffering?

This core focuses on "utilization." The presenting problem brings in problems, but sometimes these problems are the key to healing from the problem. This is where using the client's unique strengths, interests, hobbies, and "infinite creativity" come into play. It is about the client being at peace with all parts of themselves. Ultimately it is for them to recognize they are the resource they have been waiting for.

Understanding Racial and Identity-Based Trauma

Racial trauma is similar to PTSD in its symptoms (direct exposure to a threat, intrusions, avoidance, hypervigilance, fracture in personality structure), but its cause is rooted in real or perceived experiences of discrimination. This means your nervous system gives the final determination for what is and what isn't trauma. Even if the therapist doubts systemic oppression, the client's cortisol responses couldn't care less about a therapist's so-called rationale for denying the client's humanity.

From the ARP lens, in addition to being caused by real or perceived stresses, racial trauma also involves:

- Multigenerational legacy (e.g., the epigenetic impact of racial trauma events)
- Present-day oppression (ongoing systemic inequality which taxes the nervous system)
- Social acceptance of suffering (where violence against certain groups is normalized or ignored by society, leading to the client needing to negate their own reality, likening it to dissociation).

Effective anti-racist therapy must address all these dimensions.

The Neurobiology of Healing

The RAP Technique and how it works is connected to neuroscientific theories. It relies on the brain's ability to update and create change given the right conditions.

From Andrew Clark's Predictive Processing perspective, there are two ways to create change:

- Update your model of reality
- Take action.

From this perspective, the following leads us to see how we can use advanced methods to heal from deep-rooted trauma.

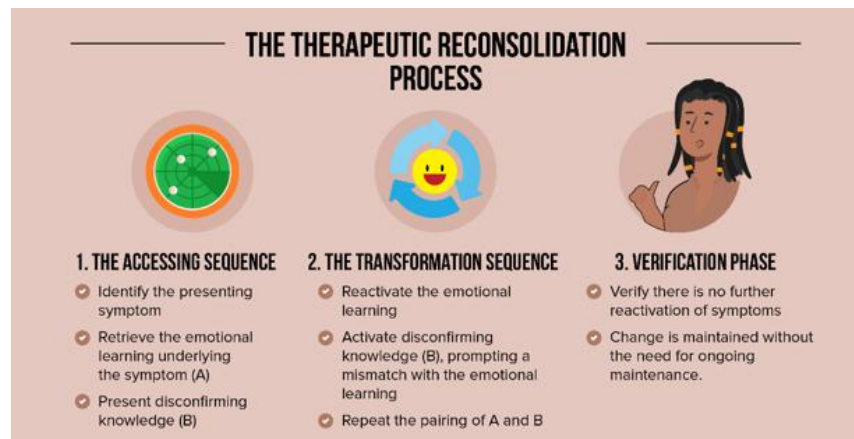
Memory Reconsolidation

In the past, it was believed that once a memory was stored in long-term memory, it was permanently etched in, and that its contents were indelible. This is incorrect. Memory

Reconsolidation is the process by which a stored memory can be "unlocked," made temporarily changeable (labile), and then "re-saved" and updated with more relevant information.

The process follows a specific sequence:

1. **Accessing:** The target memory must be briefly recalled.
2. **Mismatch/Disconfirmation/Prediction Error:** An experience must take place which contradicts the expectation of the memory.
3. **Re-encoding:** When both one and two are combined and paired, this creates a contradictory experience from what is typically expected. The memory becomes reconsolidated. The narrative has not changed ("I was hurt"), but the negative belief ("I cannot protect myself") has now faced a challenge. When repeated, the brain has no choice but to understand that this present moment is a disconfirmation of the past experience of suffering.



Predictive Processing and the Brain

Our brains function as "prediction machines." We are constantly generating and checking in with our internal models of the world to anticipate what will happen next. The brain makes predictions based on our level of thirst, hunger, or anxiousness as to whether this will require a corrective action to maintain homeostasis and promote survival.

When a client recalls a traumatic memory, a series of interoceptive responses gets their brain to predict "danger," "pain," or even "death."

RAP works by generating a prediction error in the face of trauma narratives and patterns.

1. **Prediction:** "I am thinking about the trauma, so I WILL feel terror/heartache/death."
2. **Disconfirmation (Multiple exposures of this in RAP):** "I am thinking about the trauma, BUT right now... I am physically safe, I see cats with hats on their heads (I am enjoying a funny video), and I am able to smile."
3. **Result:** The brain cannot reconcile these two realities. The "surprise" of feeling safe while *briefly* touching the trauma creates the opportunity for challenging the expected pattern for how things are typically supposed to be. This prompts the memory reconsolidation. The brain now updates its model: "That memory no longer predicts certain danger".

The Role of Rhythm and Bilateral Stimulation

Why do we use blinking, tapping, or action in RAP? This relates to Precision Weighting.

Visual perception involves rapid eye movements called saccades. It's not that we just look; it's that we are constantly "looking". The saccades allow for micromovements so we are never just looking and being still; we are constantly adjusting to make sure we still "see" what is in front of us.

These movements allow the brain to "sample" the environment and verify that reality is what we think it is. When we are consumed by a traumatic memory or a flashback, we are literally watching and stepping into the past. The visual sampling of the present moment diminishes, and the sights, sounds and feelings of the past become present. This is why we must take action to be present.

By instructing the client to blink or tap or take action while maintaining a central focus on a positive, calming, or neutral stimulus (the "Focus"), we force saccades. The brain now must actively sample the present safe environment.

Doing this increases the "weight" or precision of the current sensory input (safety), which then prioritizes the internal prediction (danger). The present experience of safety becomes more "important." Which disconfirms what should typically happen. Rather than having a part of them becoming dissociated or lost to the past, we can get them to tune into the present moment of their choosing.



The RAP Technique: An Overview

Comparing EMDR and Different Approaches to Flash

While RAP is a descendent of EMDR and the Flash Technique, it has evolved to meet specific needs:

- **EMDR therapy:** Requires that the client focus on the traumatic image at the same time that they are engaging in bilateral stimulation. They need to focus on the suffering, and this can promote abreaction (where it seems as if the client is reliving the distress). Although this can be highly distressing, skilled EMDR therapists know ways of reducing the risk of re-traumatization for complex trauma survivors. However, some less experienced EMDR therapists lose confidence and can stop using EMDR due to its complexity and most often because they lack support using this deep psychotherapy.
- **Flash Technique:** Originally **designed** to assist with the second phase of EMDR and now an evidence-based practice in its own right. It is focused on taxing working memory, keeping the traumatic material in the background without needing to intensely focus on the distress. Through the use of a "Positive Engaging Focus" and bilateral stimulation and being cued to blink by the therapist, clients can reduce the vividness and intensity of traumatic memories.
- **Four Blinks:** Allows for the use of micro activation, a set of resources, and the ability to use calm, motivating or neutral resources in order to reconsolidate memories. The structure and use of it was meant to be closely linked to memory reconsolidation.
- **RAP:** Builds on Four Blinks Flash but explicitly incorporates cultural responsiveness and embodied rhythm. It emphasizes the use of culturally relevant stimuli (music, videos specific to the client's identity) and encourages rhythmic movement (tapping, dancing, blinking) that aligns with Africentric principles of healing. It also integrates a specific framework for addressing systemic and racial trauma that is absent in standard protocols.
- **Predictive Processing Flash:** This is the next level where the client is focused on a searching task while noticing the calm scene. This is the latest model under development which you will experience in this workshop.

Step-by-Step Protocol: The RAP Process

The RAP protocol is designed to be simple, efficient, and safe. It consists of four core steps.

Step One: Choose your Target

Goal: Identify the stressor.

Ask the client to identify the target stressor (a memory, a worry, a physical sensation).

1. Ask for a Subjective Units of Distress (SUD) rating from 0 to 10 (0 = calm, 10 = worst possible). Note: For training/learning, start with a level 4 stressor.
2. Instruct the client to locate the discomfort. But only for a millisecond. No need to sit in it.



Step Two : Gather and Place the Stress (Vacuum/Container)

Goal: Move the distress rapidly out of their body or mind.

We do not need to sit in suffering to heal it. Instruct them to "Gather it up QUICK" as a physical movement or visualization and place it into a secure container.

Gathering:

This could be a vacuum cleaner or even using your hand in a pushing motion. The key thing is we are signaling that we are moving the stress differently.



Placing:

This must be a strong, secure visualization chosen by the client. Examples include:

- A steel shipping container.
- A sci-fi wormhole that transports the stress to another dimension.
- A heavy chest at the bottom of the ocean.



Key thing is that it is being placed in a place that is not where it typically should be (such as in the body or mind).

Script:

"Notice the stress related to that event. Now, Gather it up and place it wherever it needs to be. Move that container far away, out of your awareness."

Step Three: Choose Your Focus (Calm/Motivating Scene)

Goal: To establish a Focus that serves as a contradictory experience to generate prediction error.

The Focus:

It can be visual, auditory, sensory, or even a physical thing. It must be something the client genuinely "cares" about or finds pleasant.

- Examples: A funny YouTube video, a clip of a favorite video game (e.g., Street Fighter, Super Mario), a video of nature, gospel music, or even a cherished photo.
- *Warning:* The focus **MUST NOT** be related to the trauma. If the trauma happened in a car, do not use a video of a racing video. If it happened at a beach, do not use ocean sounds. We avoid cross-contamination.



Action:

Once the stress is contained (Step 1), guide the client to engage fully with this focus. "Good. Now what's the awesome video you would like to see today?" The key element is that they should have something they care about. Not selected by the therapist but by the client.

Step Three: The "RAP" Signal (Blinking & Action)

Goal: To introduce the therapist's action that facilitates processing. This forces the brain to verify presence in the safe "now."

Action:



1. While the client is absorbed in the Focus (Step 2), the therapist prepares to give the signal.
2. **The Signal:** The therapist says the word "RAP".
3. **The Action:** Upon hearing the signal, the client performs a specific action 3 to 4 times.
 - *Blinking:* Quick, intentional blinks of the eyes (most common).
 - *Tapping:* Tapping the thumb to the index finger or tapping feet.
 - *Movement:* A small dance move or anything else.
4. **Timing:** The signal is given roughly every 4-5 seconds while the client continues to watch or listen to the focus.



Script: "While noticing your focus, every few seconds I am going to say the word 'RAP.' When I say 'RAP,' blink your eyes quickly two to four times [or tap your fingers]. Keep looking at the video and enjoy. If you feel any discomfort whatsoever interrupt me so we vacuum it".

Step Four: Enjoy, Appreciate, and Repeat

Goal:

To allow the nervous system to be optimized for the memory to be reconsolidated.

Action:

Between the RAP signals, the client observes or appreciates the focus.

The RAP process:

The session proceeds in a cycle:

1. **Check:** Briefly bring the target stress to mind ("The stress is there").
2. **Notice:** Is there any discomfort? (If yes, proceed.)
3. **Contain:** Immediately gather/vacuum it up and put it away ("It's in the box").
4. **Focus:** Engage with the disconfirmation.
5. **RAP:** Therapist says "RAP," Client blinks/taps (this is repeated 4 times for about 30 seconds).
6. **Check:** Return to the target. Ask: "Any remaining disturbance?"
7. **Repeat:** If distress remains, repeat the loop from step three. If the body activates, re-contain immediately.

Completion: The process is finished when the client can recall the original stressor with little to no distress (SUD = 0) and reports a feeling of calm or neutrality regarding the event.

If there is no remaining disturbance, typically the client can be asked to do a deeper scan where they would assess whether there is any remaining visual, auditory, or sensory disturbance. Then we would once again return to the previous loop, starting at step 3 to contain and proceeding once more until they can think of the disturbance without any remaining discomfort.

Predictive Processing Flash

This process is similar but different. Designed by Thomas Zimmerman in 2026, it is no longer necessary for blinking. Rather than blinking, the client engages in "epistemic foraging" where they search and then find something and return to looking at the focus of their choice.

In our example, we will use numbers written on a page. But please note you can also use colors on a page, or objects in a room. This often provides a more subtle and natural reduction and can be less abrasive than most methods, RAP technique included.

The Predictive Processing Flash Loop:

The session proceeds in a cycle:

1. **Check:** Briefly bring the target stress to mind ("The stress is there").
2. **Notice:** Is there any discomfort? (If yes, proceed.)
3. **Contain:** Immediately gather/vacuum it up and put it away ("It's in the box").
4. **Focus:** Engage with the disconfirmation.
5. **Search:** Therapist identifies the search term, client looks at it in her environment, and then returns to watching the focus. (This is repeated 4 times for about 30 seconds).
6. **Check:** Return to the target. Ask: "Any remaining disturbance?"
7. **Repeat:** If distress remains, repeat the loop from step three. If the body activates, re-contain immediately.

Completion: The process is finished when the client can recall the original stressor with little to no distress (SUD = 0) and reports a feeling of calm or neutrality regarding the event.

Grounding

Quick note:

At any point during the cycle if the participant becomes stressed, they must use a way of grounding themselves. Stress can come up for a variety of reasons, but it is usually linked to not being in the present moment. The individual may not be interested in the video, thoughts from the trauma are coming up, etc. Here are recommendations for grounding.

1. Gathering and placing: Use step two.
2. Physical: Physically interacting with something nearby, like a plush toy or blanket
3. Movement: Standing up or moving one's body
4. Visual: Notice something in your environment
5. Smell: Have a specific scent that helps for grounding
6. Hear: focus your senses on your immediate environment
7. Breath: cleansing breath, breathe in through nose and out through mouth/nose
8. Taste: If you have water or something you can interact with ground yourself.

THE MOST IMPORTANT INFORMATION

(adapted from Zimmerman's FAQs)

THE MOST IMPORTANT INFORMATION To use this safely, be sure of your gathering/placing (vacuum/container), focus (calm scene), and grounding.

Core rules:

- If distress comes up, STOP. Do not push into suffering. This technique is meant to be done without pain.
- Change your focus at any time if it's not working.
- If bad feelings come up, gather and place. Use your grounding techniques.
- Do not cross-contaminate. The calm scene should be different from the trauma.
- Work on only one memory at a time. If another thing comes up, contain it and return back to the one you have chosen to work on. You can deal with that one later.

PROBLEMS WITH ACTIVATION

I'm feeling a lot of distress. I'm overwhelmed. If you feel that you are overwhelmed by the memory, then use grounding. Be compassionate to yourself.

OTHER MEMORIES ARE COMING UP.

You may need to adjust your gathering. You can use a shop-vac, or a black hole. Make sure you use something that is appropriate for who you are, not what you think I would expect or authorize you to use.

THE BAD MEMORY INTRUDES INTO MY CALM SCENE.

You have to stop and shift course. The last thing we want is for you to build a new association to this method of healing. Use your resources and stop. Take a break.

THE CALM SCENE ITSELF IS DISTRESSING ME

Use resources and switch gears. If the calm scene is causing stress, it is not calm. Use something that has no trauma link. **Do not** use anything relating to dissociation (bad videos, sad music, being in room where arguments take place in). Get up, move around, do something different. When you are ready, try again. Think of nature, music, or an object in your environment. Let me know if you need help.

I CAN NO LONGER FIND DISTRESS, WHAT DO I DO?

If you can't find any distress—Great. You now need to do a deeper level scan. Play back the memory and see if there are other elements that were skipped over. Feel free to start another one if you would like. Or just chill in your calm scene, and appreciate your focus until the group is done. You can even turn off your video and just wait, but let me know. Don't turn off your video without me knowing you're OK!

I HAVE PROBLEMS WITH THE CALM SCENE

If you don't like it, then switch it off. You do not need to push through suffering. Move it out of awareness and choose something you would prefer. Use resources if **necessary**. Pick a more tolerable memory if necessary and let's get back to business.

IT'S NOT WORKING

If it's not working, are you sure that you have chosen a focus that you like? Remember the goal is not to think about the problem while enjoying the focus. We need to make sure your focus is something you really care about or enjoy seeing. Be sure to gather and place any remaining discomfort because if you are feeling stress while doing this, it is sure not to work. We want a disconfirmation, not a confirmation of stress.

THIS IS MAKING ME TIRED

Is the tiredness relaxation or is it you tuning out? Change up your calm scene any time. You can try even to get up, move around and come back. Have a nice warm or cool drink before continuing.

MY EYES ARE IRRITATED/ TROUBLE WITH THE BLINKING

If you have eye problems, or get migraines because of your blinking, don't blink. Tap your fingers. You can tap your feet. It can be any other motor movement that briefly interrupts the process. Try the predictive processing choice. Visually search for something (numbers, an item in your room) instead and return to the video each time I say RAP.

WHY CAN'T I USE MY CONTAINER FROM EMDR OR RESOURCE FROM (INSERT OTHER THERAPY)

No. Use your beginner brain. This is different. Do not cross contaminate. Your containers and resources from other modalities serve different goals. Just because it has bristles and it's in your bathroom, do not use it for your teeth. The focus, gathering, and containers are unique here.

The Group Four Blinks Protocol (Adapted from Zimmerman's)

Group reprocessing can take approximately 20-30 Minutes

We will start with two rounds in your calm scene and then we will select the target memory to work on. For now, just load up your calm scene and notice it.

[Wait 10-15 seconds until it appears people are engaging in their calm scene]

RAP... Good. Notice your calm scene. [Wait 5 seconds.]

RAP [Wait 5 seconds.]

RAP [Wait 5 seconds.]

RAP [Wait 5 seconds.]

RAP [Wait 5 seconds.]

If that went okay, let's do another round.

Load up your calm scene. [Wait 5 seconds.]

RAP... Good. Notice your calm scene. [Wait 5 seconds.]

RAP [Wait 5 seconds.]

RAP [Wait 5 seconds.]

RAP [Wait 5 seconds.]

RAP [Wait 5 seconds.]

Instructions for Target selection

Good. Let's select the memory you would like to work on. Make sure it is an individual memory that happened at a specific place and time. Do all parts of you think that working on this memory today is a good idea? [Wait a few seconds] If so, **good**.

But if **NOT**, just push it out of awareness. If **NOT**, work with that part until you can find something safer to work on. Again, push that memory out of your awareness, look at a blank wall if you need to or use your resources if you need to.

When it is gone, load up your calm scene and just notice it.

Calm scene. [Wait 10 seconds.]

RAP. [Wait 5 seconds.]

RAP [Wait 5 seconds.]

RAP [Wait 5 seconds.]

RAP [Wait 5 seconds.]

RAP [Wait 5 seconds.]

Good.

LOOP:

Very quickly, glance at the target and whatever is distressing in this millisecond, gather and place it, and push it far, far away. When it's gone, calm scene.

[Wait 10 seconds.]

RAP. [Wait 5 seconds.]

RAP [Wait 5 seconds.]

RAP [Wait 5 seconds.]

RAP [Wait 5 seconds.]

RAP [Wait 5 seconds.]

Good.

After 20 minutes

If you are having trouble finding the distress when looking quickly at the bad memory, do a deeper level scan. Any remaining visual, auditory, or feelings that remain? Play the memory

back keep doing this until there is no remaining distress in any part of the memory.

Before winding down

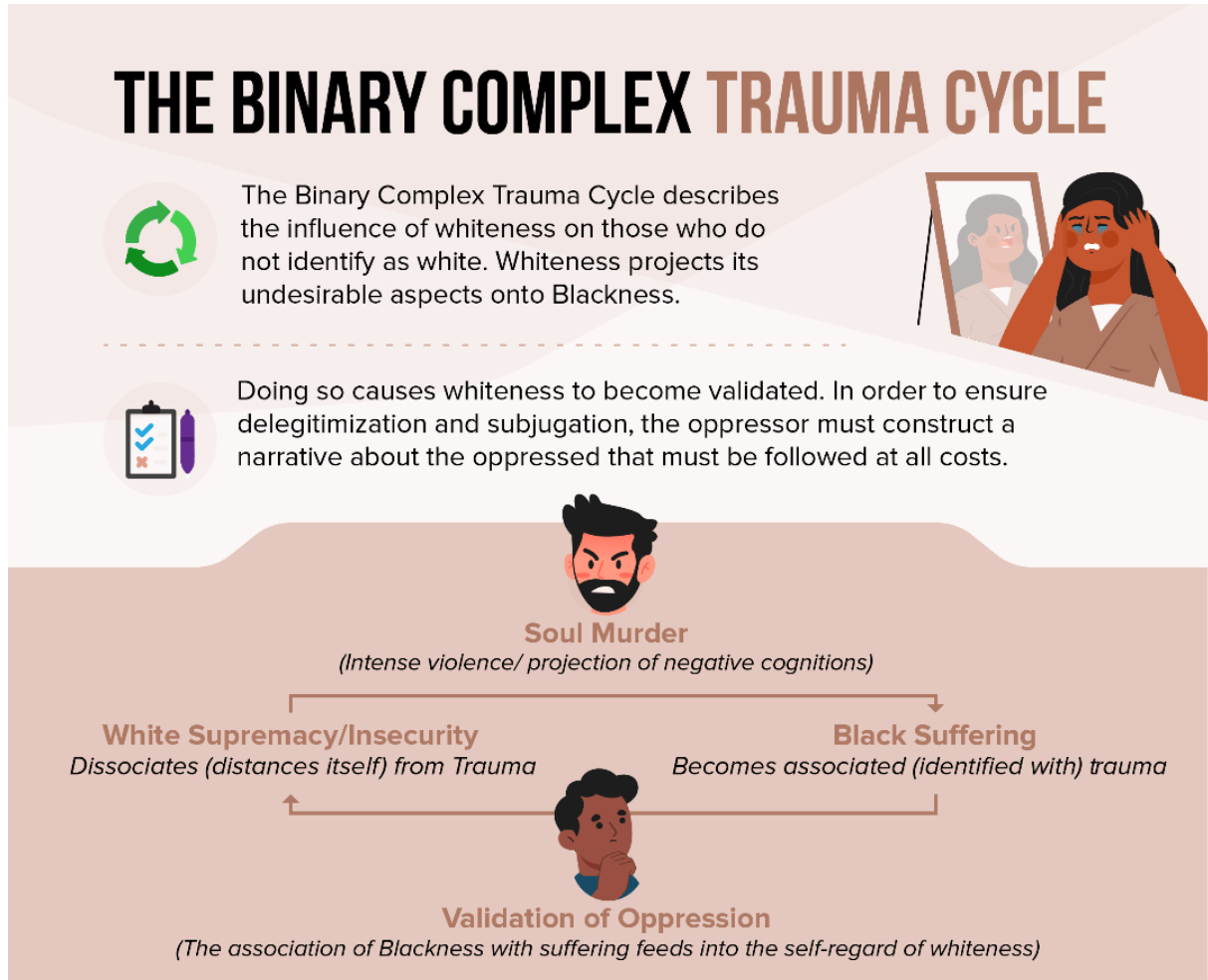
We have [3,2,1] more rounds before we will need to go to closure.

Closure

Good. I hope that went okay. If you did not get to finish your memory, please feel free to scoop it up and put any residue into the container and we can work on that next time. Also, remember that you have your calm scene (which you can load up anytime without blinking), you have a container if other memory or sensations appear, your Shop-Vac resource, and sensory grounding. Use all of these resources as needed to manage any residual distress.

Racial Trauma Recovery Reference Material

The Binary Complex Trauma Cycle



FRANCES CRESS WELSING'S DEFINITION OF WHITE SUPREMACY

A local and global power system of systemic racism conducted in all areas of people activity. The goal: preventing white genetic annihilation on Earth.



ANDREA SMITH'S THREE PILLARS OF WHITE SUPREMACY



ANTI-BLACK RACISM

Anchoring capitalism:
all bodies must be commodified and placed in a racial hierarchy.



GENOCIDE

Anchoring colonialism:
Indigenous people must be relegated to the past.



ORIENTALISM

Anchoring war: the West must be superior. Foreigners are permanent threats.

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The Cycle of Consolidation

THE CYCLE OF CONSOLIDATION

The focus of resolving the internalization of oppression must be on the **center** rather than the unlimited external triggers or numerous **internal experiences of adversity**. When we can repair **the hub**, the rest of the cycle comes to a halt.

CENTRIFUGAL REACTION

Not really a force. Due to inertia. Because the wheel has been moving it continues to move. Survivor has limiting beliefs that the problem will always continue.

CENTRIPETAL FORCE

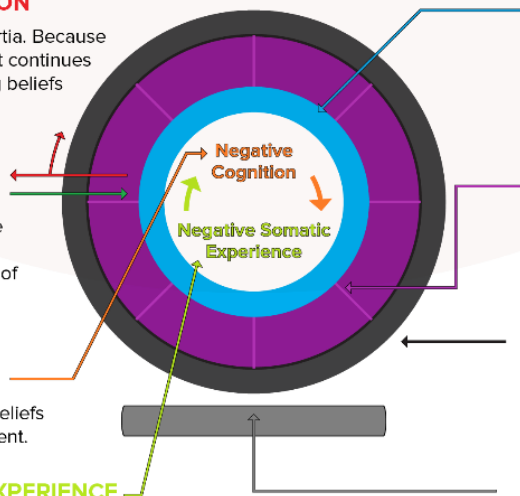
The force pushing toward the center. Conditions in society encourage the consolidation of negative beliefs and somatic experiences.

NEGATIVE COGNITION

Conscious or preconscious beliefs acquired due to traumatic event.

NEGATIVE SOMATIC EXPERIENCE

The mind and body's involuntary, unpleasant reaction, linked to experiences stored in implicit memory.



THE HUB

Cycles constantly between the negative cognition and negative feelings about the cognition.

THE SPOKES

Near limitless connections to and from the hub and the internal experiences.

THE TIRE

Internal thoughts, abstract and concrete thought forms connected to trauma reminders.

THE ROAD

Near limitless external events and experiences that can trigger associations to internal experiences.

THE THERAPEUTIC RECONSOLIDATION PROCESS



1. THE ACCESSING SEQUENCE

- ✓ Identify the presenting symptom
- ✓ Retrieve the emotional learning underlying the symptom (A)
- ✓ Present disconfirming knowledge (B)



2. THE TRANSFORMATION SEQUENCE

- ✓ Reactivate the emotional learning
- ✓ Activate disconfirming knowledge (B), prompting a mismatch with the emotional learning
- ✓ Repeat the pairing of A and B



3. VERIFICATION PHASE

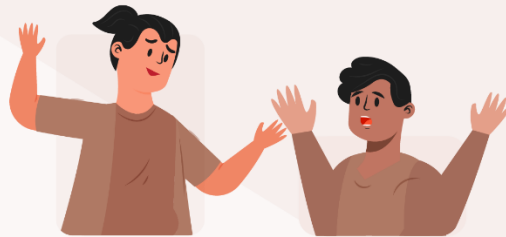
- ✓ Verify there is no further reactivation of symptoms
- ✓ Change is maintained without the need for ongoing maintenance.

The Internalization of Anti-Black Racism

THE INTERNALIZATION OF ANTI-BLACK RACISM

Process of Inferiorization

These consequences of being on the receiving end of violence and exposure to repeated instances of social defeat leads to further delegitimization. The process is initiated by the oppressor.



Dissociation of undesirable traits by oppressor



Projection of negative beliefs and violence onto the oppressed



Vulnerability to violence results in more social delegitimization

Internalized Oppression

Once the oppression becomes internalized, the oppressed person identifies with the negative messages of the perpetrator, consolidating negative cognitions about the self and their cultural group.



Consolidation of negative beliefs about self and other group



Reinforces internalization of shame and lack of safety



Internalization of negative cognitions



Trauma survivors often engage in substitute actions or negative self-talk to justify the violence and pain. They may generalize beliefs about inferiority to other members of their group.



This prevents people from fully recognizing their potential. Once people regain confidence they can break the cycle of suffering

For a detailed discussion see Archer, D. (2021). *Anti-Racist Psychotherapy: Confronting Systemic Racism and Healing Racial Trauma*. Each One Teach One Publications.

Rhythm and Processing Technique

RHYTHM AND PROCESSING TECHNIQUE

Setup and Self-Care

The following is the setup for using RAP technique.



1

Choose a **CONTAINER** that can be used to contain any stress

- Create a container that is robust enough to contain any stress in the body and mind



2

Choose a **VACUUM** that can put your stress in a **CONTAINER**

- Make sure that it is reliable and large enough to vacuum up any stress



3

TEST it out

- See if it can work with a mild disturbance (subjective disturbance of less than 3/10)
- Vacuum up the stress (use your hands if that helps or just imagine it)
- Place the container as away as far as it needs to be from you (e.g. visualize it being sent down the street, underground, etc.)
- Check that you feel clear in the body before continuing. If not, upgrade your container or vacuum.



4

If you're **OK** with the vacuum/container, go to the next step. Otherwise, return to step 1.



5

Choose a **COM** (Calm or Motivating) Video

- Can be anything that makes you feel good or relaxed (e.g. beaches, forests, animals, etc.)
- You can use YouTube or any other streaming video platform. You can also use your immediate environment if there are things (e.g. pets) or sceneries (e.g. nature) that are also COM.
- Video is recommended because it has both audio and visual components, but you can even use an image or a painting if you would like.



6

Be prepared to blink

- While looking at the COM Video
 - Count to 4 then blink 4-5 times RAPIDLY
 - Count to 5 then blink 4-5 times RAPIDLY
 - Count to 4 then blink 4-5 times RAPIDLY
 - Count to 5 then blink 4-5 times RAPIDLY



7

Check in and notice yourself

- Upgrade the vacuum, container or video to your liking
- Reduce the intensity of the stress to 0.
- Repeat steps 5 and 6 until stress is zero



8

ENJOY!

- It is highly recommended to do this with a therapist as the effects are stronger when someone else can hold space and do it with you. But it is also a way of self-soothing when used in conjunction with other resources.



RAP Technique: DeepScan

RHYTHM AND PROCESSING TECHNIQUE DEEPSCAN

Here is the second step. We use the DeepScan typically after using the GeneralScan. This allows us to remove any specific or remaining disturbances in the target memory.

Initiate DeepScan



Step 7

Client is asked to imagine that the problem has a beginning and an end like a movie. Then ask them to scan through every unique scene in the movie to check if there is any remaining disturbance when they imagine the target.



Step 8

Client scans memory searching for any remaining disturbance

If disturbance = true

Begin the following loop

1 Therapist elicits SUD for this specific part of the target

3 Verify the client was calm, present and within window of affect tolerance

2 Vacuum and reinitiate loop

4 Re-evaluate the SUD (Scale of 0 to 10)



If SUD > 0

Reinitiate this Loop



If SUD = 0 Exit this Loop

Return to step 8

If disturbance = false



Re-evaluate the SUD once more when client revisits the whole target.



If SUD > 0

Because there is still some remaining disturbance, scan again and return to step 8



Else

Now that there is no longer any remaining disturbance, the DeepScan process is complete.

After completing the DeepScan Program, the most difficult part of the target will be completed. The negative cognition has lost its strength



References

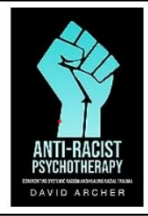
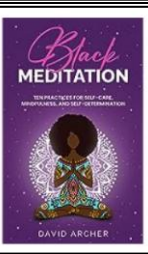
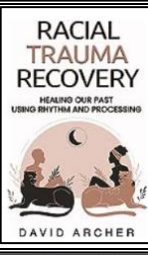


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Publications

To increase knowledge and consciousness for PTSD, complex/racial trauma, and recovery.

	<p><u>Anti-Racist Psychotherapy: Confronting Systemic Racism and Healing Racial Trauma</u></p> <p>From an EMDR therapy perspective, Archer takes on the intricacies of treating racial trauma, introducing topics relating to critical race theory, mindfulness, and how to change our perspective on the social consequences of identity-based oppression on mental health.</p>
	<p><u>Black Meditation: Ten Practices for Self-Care, Mindfulness, and Self-Determination</u></p> <p>A compilation from the perspectives of multiple meditators, coaches and caring practitioners in his local community, Archer lists ten guiding principles that can be practiced as meditations which relate to issues of concern impacted by racial trauma survivors to cultivate a positive racial identity. Practical steps and scripts are included to provide to your clients.</p>
	<p><u>Racial Trauma Recovery: Healing Our Past Using Rhythm and Processing</u></p> <p>RAP was developed after a racially motivated mass shooting in Buffalo, New York in 2022. Therapists of different races and cultures were seeking a way of implementing Anti-Racist Psychotherapy. RAP is the result. Racial Trauma Recovery has since been used as a training manual to teach therapists how to use the RAP Framework for individuals and groups. Designed for addressing the challenges in treating complex trauma, complex racial trauma and dissociative disorders.</p>
	<p><u>Black Mountain: Fight for the Future</u></p> <p>Fight for the future is not a clinical text. It is a science fiction novel written to introduce important topics to audiences who otherwise wouldn't encounter them. An Afrofuturistic science-fiction narrative that covers anti-fascism, climate change, martial arts and trauma resolution, Black Mountain is an action-packed novel that is based on trauma resolution, friendship, and discovering one's purpose and responsibility to their ancestors.</p>
	<p><u>Transforming Complex Trauma: Reflections on Anti-Racist Psychotherapy</u></p> <p>A book designed for general audiences which summarizes the key principles from Archer's previous works and explores RAP, the RAP technique and why we need to treating CPTSD and racial trauma. It addresses the four cores of Anti-Racist Psychotherapy, Africentric principles of change, and memory reconsolidation. It describes advanced healing methods that address the systemic oppression while advocating for change in the mental health field.</p>

THANK YOU

WE HOPE YOU ENJOYED THE PRESENTATION. THANK YOU FOR ATTENDING AND FOR YOUR INTEREST IN ANTI-RACIST PSYCHOTHERAPY, RHYTHM AND PROCESSING, AND THE FOURBLINKS AND PREDICTIVE PROCESSING APPROACH TO FLASH.

GOT QUESTIONS, FEEDBACK OR INSIGHTS ABOUT OUR WORK?
CONTACT ME THROUGH THE LINKS BELOW.
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https://calendly.com/archertherapy/rap_group_learning

https://calendly.com/archertherapy/rap_community_care

Facebook Group

<https://www.facebook.com/groups/rhythmandprocessing>

Anti-Racist Psychotherapy: Confronting Systemic Racism and Healing Racial Trauma

<https://amzn.to/3pSBfZX>

Racial Trauma Recovery: Healing Our Past Using Rhythm and Processing

<https://amzn.to/3C8HY89>

EMDR therapy trainings

<https://archertherapy.com/training/emdr-basic/>

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