

PAPER BIRDS: GUIDED CLINICAL QUESTIONS FOR THE FILM

PRE-VIEWING CLINICAL INVENTORY

1. How do you currently conceptualize amnesia or ‘repressed memories’, delayed recall or ‘recovered memories’, and trauma-associated memory gaps in your clinical framework(s)? What theoretical models most influence your view (neurobiological, psychodynamic, cognitive, somatic, etc.)?
2. What biases—skeptical or affirming—do you bring into work with clients who report what may be implicit trauma symptoms without explicit memory?
3. How comfortable do you feel working with ambiguity in trauma memories and narratives? Where do you notice discomfort arises clinically?

TRAUMA, MEMORY & NEUROBIOLOGY

1. Dr. Hopper discusses “central details” based on attentional narrowing and significance attributions during traumatic events. How does this align with your understanding of stress neurobiology and state-dependent memory encoding?
2. The film distinguishes between implicit and explicit memory. How do you observe (potential) implicit memories presenting in your clients (somatic symptoms, affective states, relational patterns)? What clinical risks arise when implicit material is prematurely treated as explicit memory?
3. Alli describes bodily responses (trembling, dissociation, autonomic reactions). How would you conceptualize these responses within trauma physiology frameworks?

ASSESSMENT AND DIFFERENTIAL CONSIDERATIONS

1. What differential diagnoses would you consider early in Alli’s presentation (eg. anxiety disorders, dissociative disorders, trauma-related disorders, mood disorders)? How would you ethically assess without promoting or reinforcing narrative certainty?
2. What clinical indicators in the film suggest trauma-related pathology versus normative distress responses?
3. How would you pace assessment when clients present with strong somatic/emotional activation but very limited and fragmented autobiographical memory?

CLINICAL ETHICS & MEMORY CONTROVERSY

1. The film references historical backlash against the realities of amnesia and delayed recall and recovered memory discourse. How do you navigate the balance between validating client experience while avoiding suggestibility or memory contamination?
2. What ethical responsibilities do clinicians have when clients seek meaning for symptoms but lack clear episodic recall?
3. How do you protect therapeutic neutrality while still providing emotional support and validation?

TREATMENT APPROACH & INTERVENTION

1. Alli references EMDR as pivotal in symptom reduction. What factors would guide your decision to use EMDR, somatic therapies, or stabilization-focused approaches first? How do you assess readiness for trauma processing?
2. What role do resourcing, grounding, and affect regulation play in cases involving high ambiguity and dissociation?
3. How would you measure treatment success in a case where symptom relief occurs without full narrative reconstruction?

SOCIAL CONTEXT & PUBLIC PERCEPTION

1. The film highlights stigma surrounding recovered or partial memories. How does public misinformation impact client shame, disclosure, and treatment engagement?
2. How can clinicians help clients navigate disbelief from family members without reinforcing polarization or invalidation?

APPLICATION TO PRACTICE

1. What practical changes might you make in your own clinical work after viewing this film?
2. How could this documentary be used in clinical training, psychoeducation, or group therapy contexts?
3. What unanswered clinical questions did the film raise for you?