



Understanding Trauma

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Take a moment...

- Ground in the present
- Trauma is an unpleasant topic...
- If you are triggered...



Agenda

- Define trauma
- Types of trauma
- Impacts of trauma
- Barriers
- What to do

What is Trauma?

- Trauma is in the nervous system, not the event
- Overwhelms ability to cope
- Inescapable
- Profoundly negative
- Automatic motor response
- Automatic neural response
- Adaptive in the moment
- Cannot be integrated into the ongoing story of who they are
- Become stuck, frozen in place

Types of Trauma

Big T Trauma

- Life-threatening
- Events that threaten our life or a loved one
- Examples: MVA, combat, serious assault, natural disasters

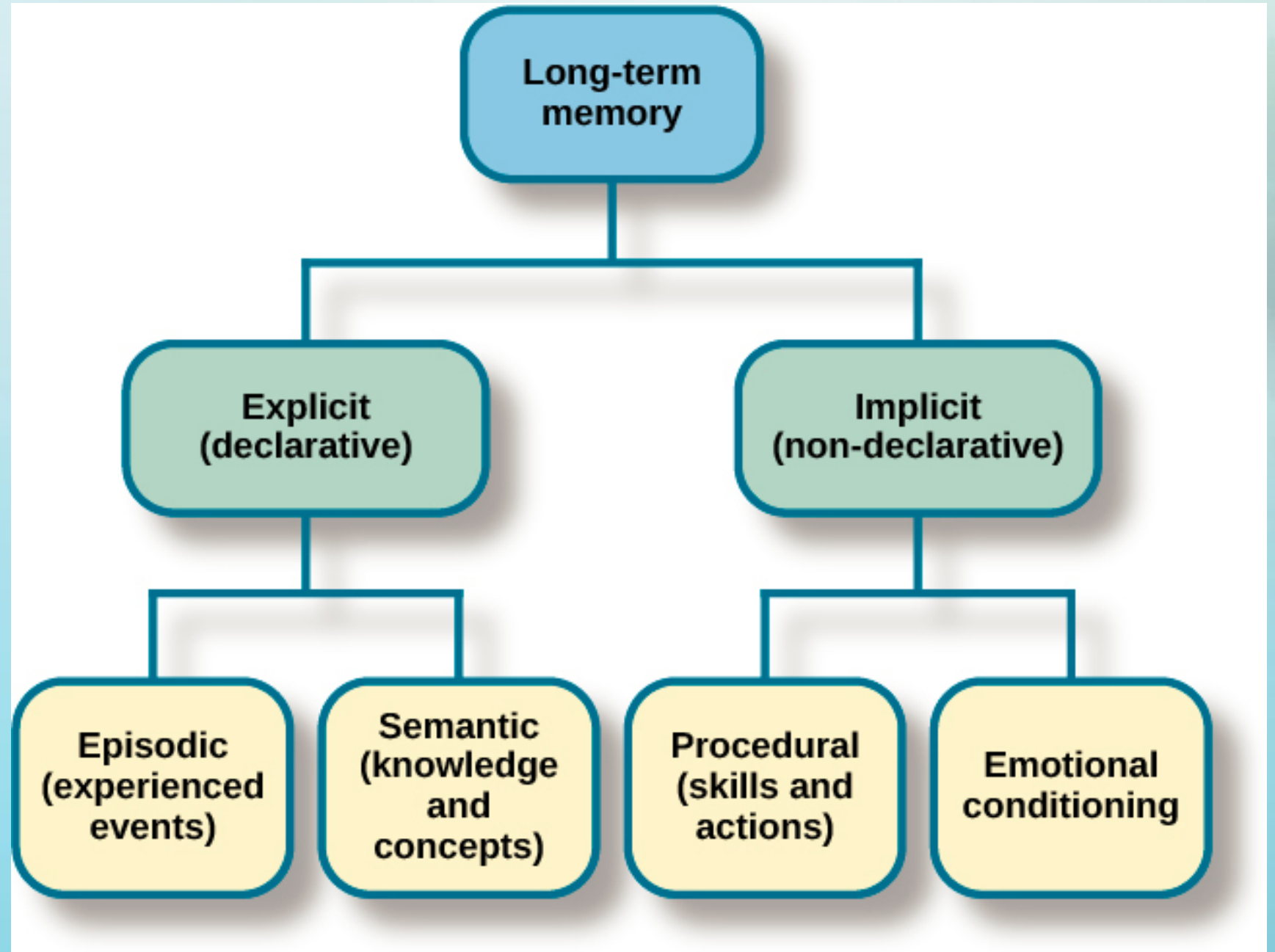
Little t Trauma

- More personal and relational
- No less influential
- More common
- Violations of personal safety, autonomy, sense of self, basic trust
- Examples: sexual abuse/assault, physical/emotional neglect, betrayal

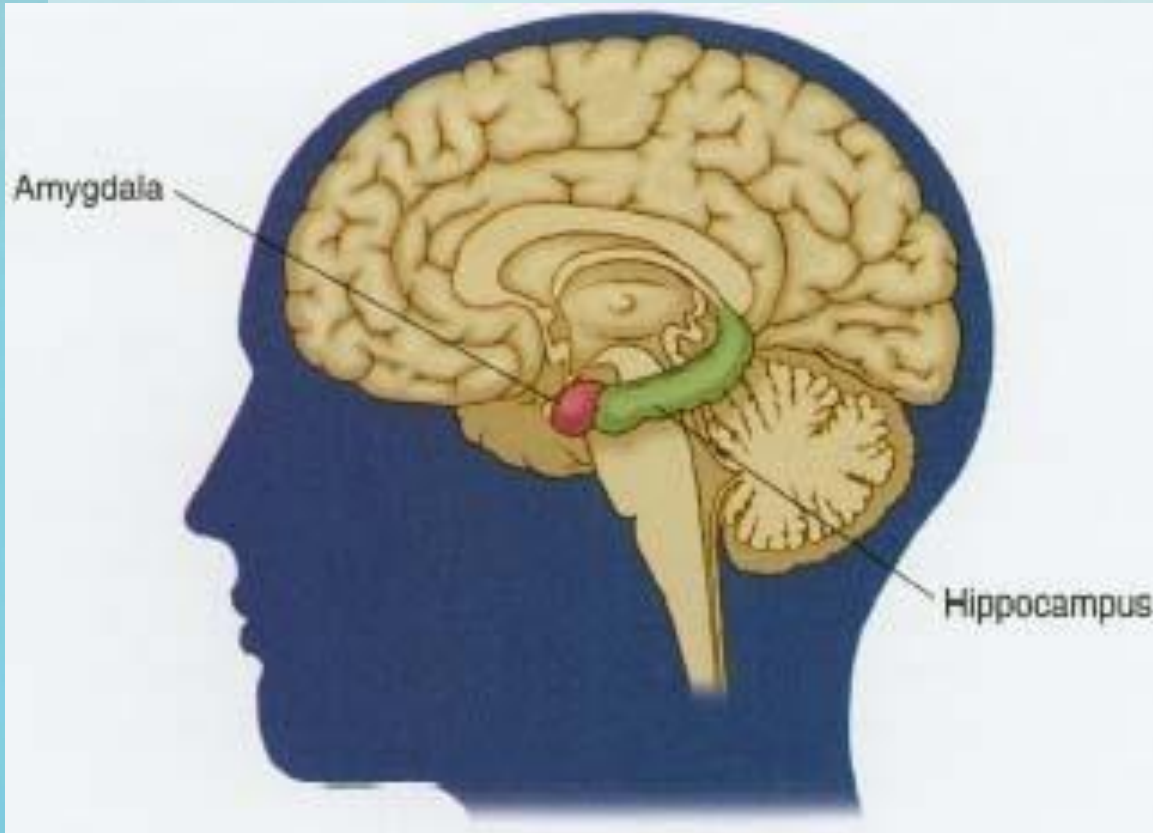
Impacts of Trauma: Psychological

- Shattered Assumptions
 - Beliefs about how the world works
 - Beliefs about what to expect from people – known and unknown
 - Beliefs about who they are fundamentally
- Trauma calls all of these beliefs into question
- How can God/Creator exist?
- Am I a bad person and being punished?
- The world is not safe
- I can't trust anyone
- I can't trust myself

Impact of Trauma: Physical

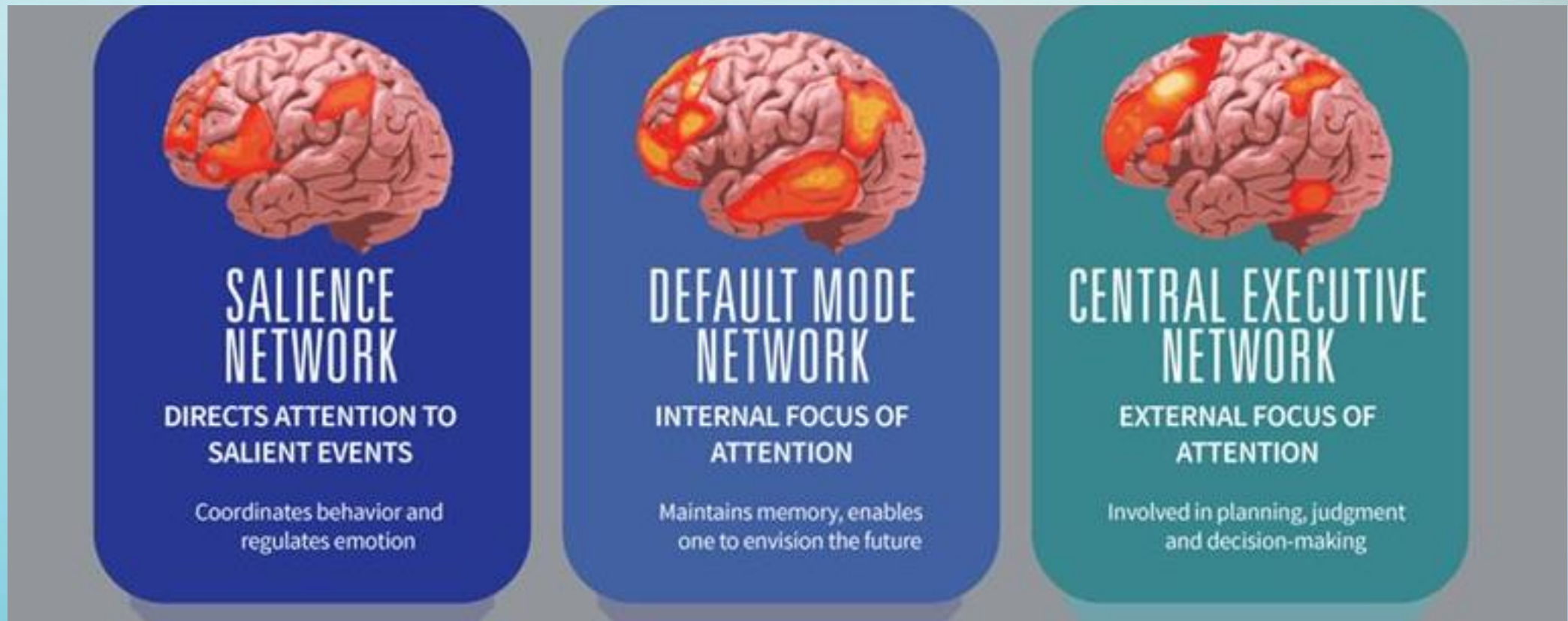


Impact of Trauma: Physical



- Cortisol decreases activity of hippocampus (memory)
- Adrenaline increases activity of amygdala (emotions)
- Event carries heightened emotional charge
- Cannot be consolidated into declarative memory

Brain Networks Affected by Trauma



The infographic consists of three vertical panels, each featuring a brain with highlighted regions. The first panel (left) has a dark blue background and shows the Salience Network. The second panel (middle) has a medium blue background and shows the Default Mode Network. The third panel (right) has a teal background and shows the Central Executive Network. Each panel includes a brain image, a network name, a primary function, and a secondary function.

Network Name	Primary Function	Secondary Function
SALIENCE NETWORK	DIRECTS ATTENTION TO SALIENT EVENTS	Coordinates behavior and regulates emotion
DEFAULT MODE NETWORK	INTERNAL FOCUS OF ATTENTION	Maintains memory, enables one to envision the future
CENTRAL EXECUTIVE NETWORK	EXTERNAL FOCUS OF ATTENTION	Involved in planning, judgment and decision-making

Impact of Trauma: Developmental



Beacon House

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Developmental Trauma

Brain Area:
Brainstem (Primitive brain)

Developmental Trauma:
1. Somatic/Sensory

Examples:

- Sensory processing difficulties
- High or low arousal (fight/flight/freeze/submit)
- Impulsivity and pervasive anxiety
- Impaired sleep patterns
- Poor muscle tone and co-ordination
- Taste and texture preferences
- Heart rate difficulties
- Abnormal breathing
- Unexplained medical symptoms
- Body flashbacks to states of fear

Moves up to



Brain Area:
Limbic Brain

Developmental Trauma:
2. Attachment
3. Emotional regulation
4. Behavioural regulation

Examples:

- Clinging
- Oppositional
- Rejecting
- Distrustful
- Overly compliant
- Loss of expectancy of protection by others
- Loss of trust in social agencies
- Heightened emotions: anger, rage, fear, sadness, excitement, joy
- Deadened emotions: numbness, emptiness, low mood
- Re-creating traumatic situations
- Self-harming
- Aggression
- Running
- Hiding

Attachment
Emotional Regulation
Behavioural Regulation

Moves up to



Brain Area:
Cortical Brain

Developmental Trauma:
5. Self esteem
6. Dissociation
7. Cognitive problems

Examples:

- Information processing impairments
- Executive dysfunction (problems in planning, organising and executing)
- Inadequate problem solving
- Remembering and recalling information
- Identity confusion
- Flashbacks
- Disorientation
- Memory lapses
- Self hate
- Self blame
- Self loathing
- Self doubt
- Worthlessness
- Helplessness

Cognitive problem
Dissociation
Self esteem



Impact of Trauma: Behavioural

- Fragmentation
 - Incoherent sense of self
 - Developing goals and following through
 - Planning, organizing, decision-making impaired
- Anger, frustration, aggression
- Problems with authority
- Giving up, dropping out – escape and avoidance
- “Negative” symptoms – lack of energy, initiative, affect
- Zoning out
- Physical complaints, memory problems, over-reactions

Barriers

- Lack of safety (physical/psyc)
- Hyper- or Hypoarousal
 - Narrow window of tolerance
- Disrupted social engagement skills
- Triggers – authority, coercion, bullying, environmental sensitivity, kindness
- Impaired brain functioning
- Impaired integration of differentiated parts and systems
- Interfering coping/soothing strategies (addictions, depression, anger/hostility)
- Right brain/Left brain
- Hopelessness, helplessness

NOT INCLUDED HERE: LACK OF MOTIVATION

What To Do:

- Create safety
 - Power and Choice
 - Consider physical space and relational safety
- Adjust expectations
- Promote neural integration
 - Promote awareness of thoughts, feelings, and body sensations
 - Encourage left brain/right brain activities
- Instill hope
- Bury the words “resistant” and “unmotivated”. Think BRAIN.
- Know your own triggers and do your own work