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INTRO TO TRAUMA & THE LINK TO ADDICTION

Presented by Dion MacArthur, MSW, RSW



Goals of this Session

- Provide a definition of trauma
- Learn about the threat response system and common reactions of trauma
- Understand the post traumatic stress disorder (PTSD) diagnosis
- Explore trauma/addiction (avoidance) cycle
- Identify strategies for symptom management

Talking About Trauma

- Can be triggering
- Might bring up memories of traumatic experiences
- Might bring up thoughts of what past experiences may have had an impact on us
- Can help us understand ourselves, our experiences, and others with more compassion

Skills to Remember:

1. Physical grounding (feel your breath, plant your feet)
2. Emotional grounding (safety statement)
3. Mental grounding (5 sight, 4 touch, 3 hear, 2 smell, 1 taste)
4. TIPP (grab an ice pack, take a brisk walk, do some deep breathing)
5. Take breaks if needed and come back when you can

“Trauma, by definition, is the result of exposure to an inescapably stressful event that overwhelms a person’s coping mechanism.”

- van der Kolk (1987)

What Makes an Event Traumatic?

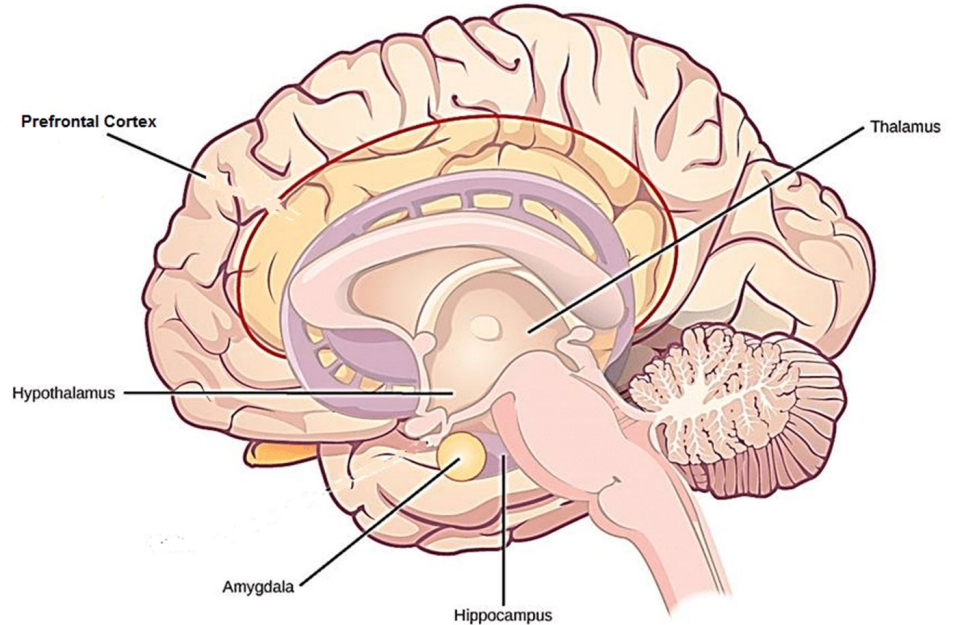
- The degree of emotional response experienced (anger, fear, stress, confusion)
- Sense of helplessness, powerlessness, horror
- Your perception...
- Time for heart rate variability to stabilize post event



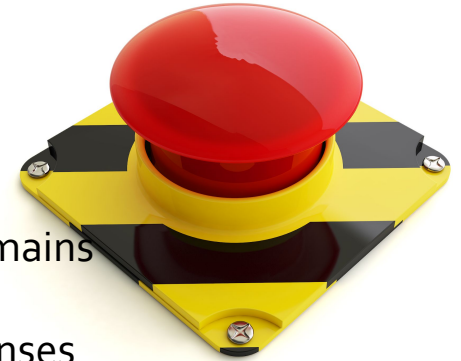
Trauma Response Process

1. Sensory Perception
2. Brain Processing
3. Messages to Body
4. Physiological Response

PTSD and the Brain



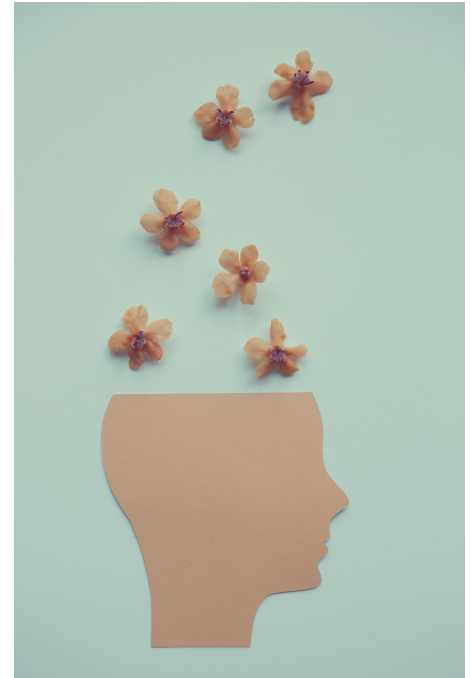
1. Sensory Perception



- Threat Response Activation
 - Despite our human evolution, the primary task of the brain remains self-preservation, to sense and respond to danger
 - The brain receives data from the outside world through the senses and this information then gets directed towards the limbic system or the cortex
 - If threat is perceived, the sensory input goes first to the limbic system
- In this case the limbic system attempts to match the data against information and patterns that have been stored from past experience
- If threat is perceived or if the data matches a template for danger, the **alarm response of the brain is activated!**

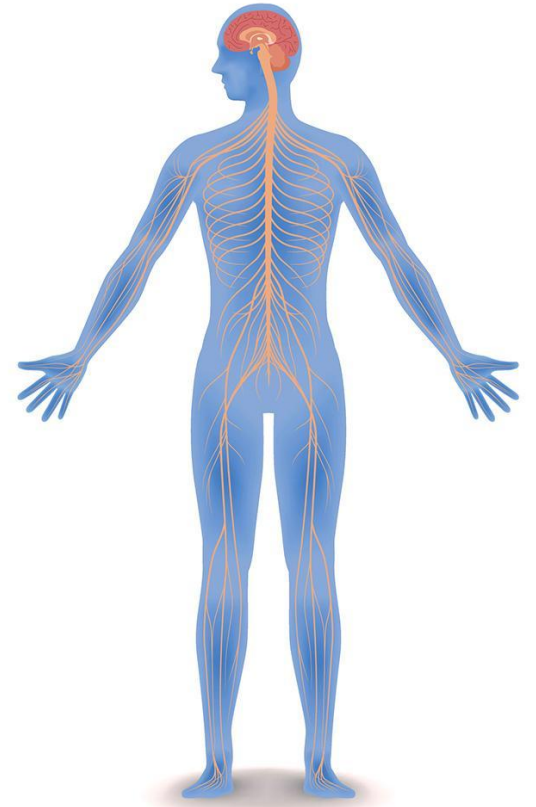
2. Brain Processing

- If the amygdala perceives threat, it immediately springs into action and does not wait around for the cortex to analyze data
 - In other words, there is no analyzing or “thinking” about the threat once the alarm response is activated.
- The amygdala also determines the best response to a threat, including **Fight / Flight / Freeze** responses



3. Messages to Body

- If adequate time, distance and strength to allow for escape are perceived, then **flight** will be chosen
- If the limbic system perceives that there is enough strength to defend oneself, then **fight** is chosen
- In these 2 determinations, the **sympathetic branch** of the Autonomic Nervous System responds by providing the body increased respiration, heart rate, oxygenation of the blood and blood flow to the muscles for mobility and strength



Freeze Response

- If time, strength and distance are not determined to be sufficient or if death could be imminent, then the **Parasympathetic Nervous System** is activated
- The parasympathetic branch is associated with and leads to the **freeze** response
- **The freeze response is not a thinking process**, it comes from an instinctive part of your brain that is very old and programmed to protect you from avoidable danger
- During the freeze response, your body also tries to reduce both physical & emotional pain

Fawn Response

- The fawn response involves trying to appease or please a person who is both a care provider and a source of threat.
- The fawn response involves people-pleasing to the degree that an individual disconnects from their own emotions, sensations, and needs.
- When engaging a fawn response, an individual bypasses their own needs and in some cases, sense of identity, for the sake of attending to the needs of others.

“I hoped that by caring for them they might care for me.”

“I never showed my true feelings for fear of retaliation.”

“I was always walking on eggshells; I never knew when they would explode”

“I had to shapeshift myself depending upon their mood.”





4. Physiological Response

- The activation of the Autonomic Nervous System, increases heart rate, blood pressure, respiration, etc.
- In response to danger this a normal, adaptive and protective, biological function
- However, trauma may occur when the Autonomic Nervous System continues to engage once the threat is no longer present, leaving the body in an active state of arousal
- This may occur if trauma is ongoing or when a person is somehow unable to return to a sense of homeostasis, calm and balance after exposure to trauma
- Due to the mind-body connection, the amygdala may also interpret danger when the ANS is aroused for some other reason
- i.e. heart rate elevation during a traumatic event and later acceleration of the heart rate during exercise can signal danger to the amygdala



TRAUMA:

A Challenge for the Body

Trauma: A Challenge for the Body

- Under normal circumstances our bodies and nervous system are used to being activated to deal with threat and naturally return to a healthy relaxed normal within a fairly short period of time
- Overwhelming traumatic life events have lasting psychological and physical effects on the body
- It is possible for our nervous system to become overwhelmed and thus struggle to return to its healthy relaxed, normal setting
- It is as if our nervous system has not realized that the danger is over
- This can eventually result in symptoms ranging from anxiety, panic attacks to physical pain conditions such as back pain, migraines, jaw pain, chronic fatigue, irritable bowel syndrome, fibromyalgia, skin disorders and psychosomatic illnesses

Traumatic Stress

- Traumatic stress is a psychological phenomena involving a certain cluster of symptoms
- Many people will experience events in their lifetime that are traumatic
 - Most will experience post-traumatic stress symptoms for 3-6 months after the event
- If symptoms occur beyond that time frame, they may be diagnosed with PTSD

PTSD Symptom Categories

Re-experiencing symptoms - flashbacks, nightmares, intrusive thoughts

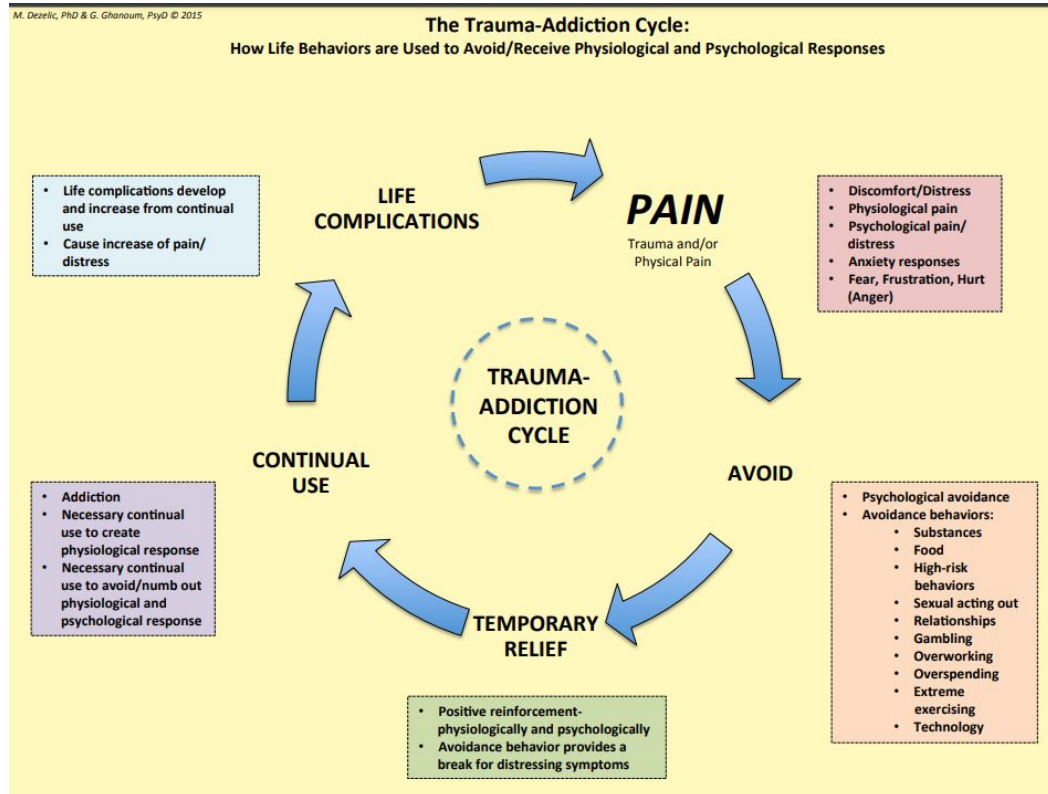
Exaggerated physiological arousal - hyper vigilance, exaggerated startle response, sleep problems, irritability, anger, difficulty concentrating

Negative mood and beliefs - guilt, self blame, numbing, detachment from others, dissociation, lack of interest, "I can't manage, I will never get better, I can't trust others."

Avoidance - efforts to avoid thoughts, feelings, memories, situations, and activities that are reminders of the trauma

*To diagnose PTSD, these symptoms would be persistent and present for over 6-months

Linking Trauma and Addiction



How do we exit the cycle?

Understanding how the trauma (pain)-addiction/avoidance cycle can happen is an important step in building knowledge and awareness. In order to stop going back to unhealthy ways of coping, we need to build new brain reward pathways and allow our brains to heal so that the production of hormones and neurotransmitters can return to normal.

Some first steps include:

- Becoming more aware of what emotions you are experiencing
- Becoming more familiar with physiological signs of stress in your body
- Establishing a healthy routine that includes exercise, good nutrition, and sleep
- Taking things slow

QUESTIONS?

Thank you!