

If Not Biomedical Psychiatry, *Then What?* Trauma-Informed Care

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What I'll Be Covering:

- Elements of a Trauma-Informed Paradigm
- Trauma-Informed Care & Psychotherapy
- Trauma-Informed Care & Society

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Toppling The Biomedical Paradigm *Two Pillars Falling:*

X Drugs: Often ineffective and harmful
X Genes: More myth than science

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Where Evidence Exists: Adverse Childhood Experiences (ACEs):

- Recurrent physical abuse
- Recurrent emotional abuse
- Contact sexual abuse
- An alcohol and/or drug abuser in the household
- An incarcerated household member
- Someone chronically depressed, mentally ill, institutionalized, or suicidal
- Witnessing a mother treated violently
- One or no parents
- Emotional or physical neglect

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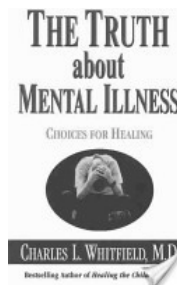
ACE Study (See <http://www.cestudy.org/>)

- Kaiser Permanente of San Diego & CDC
- 9500 replies to survey
- Half of respondents: At least one ACE
- One-fourth of respondents: More than two ACEs
- Four or more ACEs:
 - 4- to 12- fold increase in alcoholism, drug abuse, suicide attempts
 - Increased risk for ischemic heart disease, cancer, chronic lung disease, skeletal fractures, and liver disease

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History of Childhood Abuse and/ or Neglect Correlates With:

- PTSD, including complex PTSD
- Personality Disorders
- Depression
- Anxiety
- Dissociative Disorders
- Substance Abuse Disorders
- Eating Disorders
- ADHD, Behavioral Disorders
- Psychoses and Schizophrenia



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Why Have ACEs Been Ignored?

- Taboo against speaking about ACEs
- Shame (often a survival-based defense response)
- Lack of non-stigmatizing discourse
- Failure of professionals to address their own ACEs
- Perceived as permanently damaging

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Features of Trauma-Informed Care

Shift from:

POWER → LOVE
GENES → NEUROSCIENCE

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Trauma-Informed Care

- Mental Health Workers → “Wounded Healers”
- Attachment (Love) Fosters Mental Health
 - Identity
 - Affect Regulation
 - Affect Tolerance
 - Relating to Others
- Mindfulness is Critical
- “Neuroplasticity” → Body’s Natural Healer

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Recovery Focused

- Phase One: Symptom Reduction & Stabilization
- Phase Two: Treatment of Traumatic Memories
- Phase Three: Integration (Self & Community)

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Concept of Trauma is BROAD

- Trauma is
 - Karlin Lyons-Ruth: “An event or series of events or set of enduring conditions in which the individual’s abilities to cope and integrate the experience are overwhelmed. He or she experiences a subjective sense of threat to life or sanity and/or psychological integrity.”
- Types of Trauma
 - Big “T” Trauma
 - Attachment Trauma
 - Maladaptive Attachment (Little “t” trauma)

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How We Survive As Children

- #1: Attachment to safe caregivers
- #2: Body’s natural response to trauma
- If #1 isn’t reliable, then by default #2
- When reliance on #2 is chronic or emerges in extreme circumstances → ‘psychiatric’ symptoms

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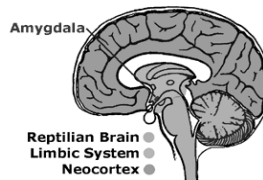
How the Body Remembers

- Depression
- Irritability
- Decreased interest
- Numbing
- Decreased concentration
- Insomnia
- Physiological hyperarousal
- Self-destructive behavior
- Dissociation
- Eating disorders
- Foreshortened future, hopelessness
- Amnesia
- Intrusive memories
- Startle response, hypervigilance
- Nightmares
- Shame, self-hatred
- Anxiety, panic
- Chronic pain
- Substance abuse

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How the Brain Processes Trauma

The Evolution-Designed Brain



From <http://www.wisdompage.com/roleofvalues.html>

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Implicit Memories Become Symptoms

(Fisher, 2008: See <http://www.janinafisher.com/resources.php>)

- Feelings of desperation, despair, yearning to die
- Feelings of panic, terror, anxiety attacks, "post-traumatic paranoia," social anxiety, agoraphobias
- Ashamed, depressed & submissive states (e.g., numb, spacey, paralyzed, hopelessness, helplessness, self-loathing)
- Yearning for contact, painful loneliness, felt sense of abandonment
- Fight-flight responses (e.g., rage, impulses to run or "get out,," violence turned against the body)

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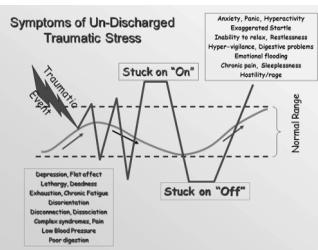
Treating Trauma: Somatic Experiencing



<http://www.bergoata.org/fe/divers02/10.htm>



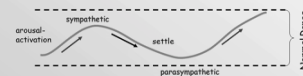
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From <http://www.traumahealing.com/>

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A Healthy Nervous System



From <http://www.traumahealing.com/>

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When my Nervous System is balanced and my activation is low I feel:

Open, curious	Relaxed yet alert
Embodied	Appropriately reactive
Available for connection	Able to be present
Fluid, resilient	Emotionally stable
Competent - a sense of mastery	Healthy - symptoms are manageable


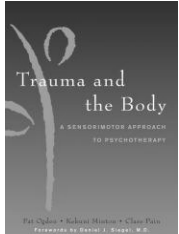
I have choices and options

I recognize when I am moving out of my functional range and have tools to return to stability and stabilization
 I know when to reach out for support when I can't do it on my own

From <http://www.traumahealing.com/>

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Sensorimotor Psychotherapy

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Sensorimotor Psychotherapy Combination of:

- Somatic Experiencing
- Attachment Theory
- Hakomi Experiential Psychotherapy

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Core Organizers of Experience

- Thoughts, beliefs, cognition
- Emotions
- Five-sense perception
- Movement
- Inner body sensations

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Trauma-Focused Care & Today's World

- US: Worst child abuse record in the industrialized world
- Natural disasters: 430% since 1975
- 1.7 million returning veterans
- 7-fold increase in terrorist attacks since start of Iraq War
- Increased poverty correlates with increased family violence

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Trauma-Informed Care Offers:

- Mindfulness
- Emotional Regulation
- Greater Empathy
- Adaptability vs. Chronic Illness

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