



# Overcoming Trauma

**The Science of Safety and Recovery**

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# Trauma

- Psychological trauma can be defined as “intense fear, helplessness, loss of control and fear of annihilation”

*Comprehensive Textbook of Psychiatry*

- Occurs when:
- *Action is of no avail -*
- *Resistance is futile -*
- *Escape is impossible –*





# The Impact of Trauma

- Traumatic reactions are adaptive responses ingrained in a survival process that is entered into automatically
- Compromises our ability to connect with others by replacing patterns of connection with patterns of protection
- It happens when the drive to survive competes with the longing to connect

# Neurobiology of Traumatic Memory

- When the brain detects threat through incoming sensory information the amygdala acts as a fire alarm through the hypothalamus
- If the cortex detects no threat the adrenalin response is gated and the system calms down
- If the threat is immediate and serious the flight or fight response is set off before the threat even reaches consciousness
- Neurochemical release including heart-rate and respiration, rush of energy to muscle tissue and inhibition of frontal lobes and suppression of non-essential systems

# What Happens in Trauma?

- **Amygdala is the alarm centre of the brain**
- **Lays down templates of trauma**
- **No sense of context or history**
- **Anything close to trauma template triggers full alarm response**
- **Language centres in the cerebral cortex close down**
- **Full stress response activates flight, fight, freeze**
- **Neurochemicals adrenaline and noradrenaline and cortisol released**
- **Hippocampus affected**
- **Leads to time distortions, memory distortions and a lack of cohesive narrative of the trauma**

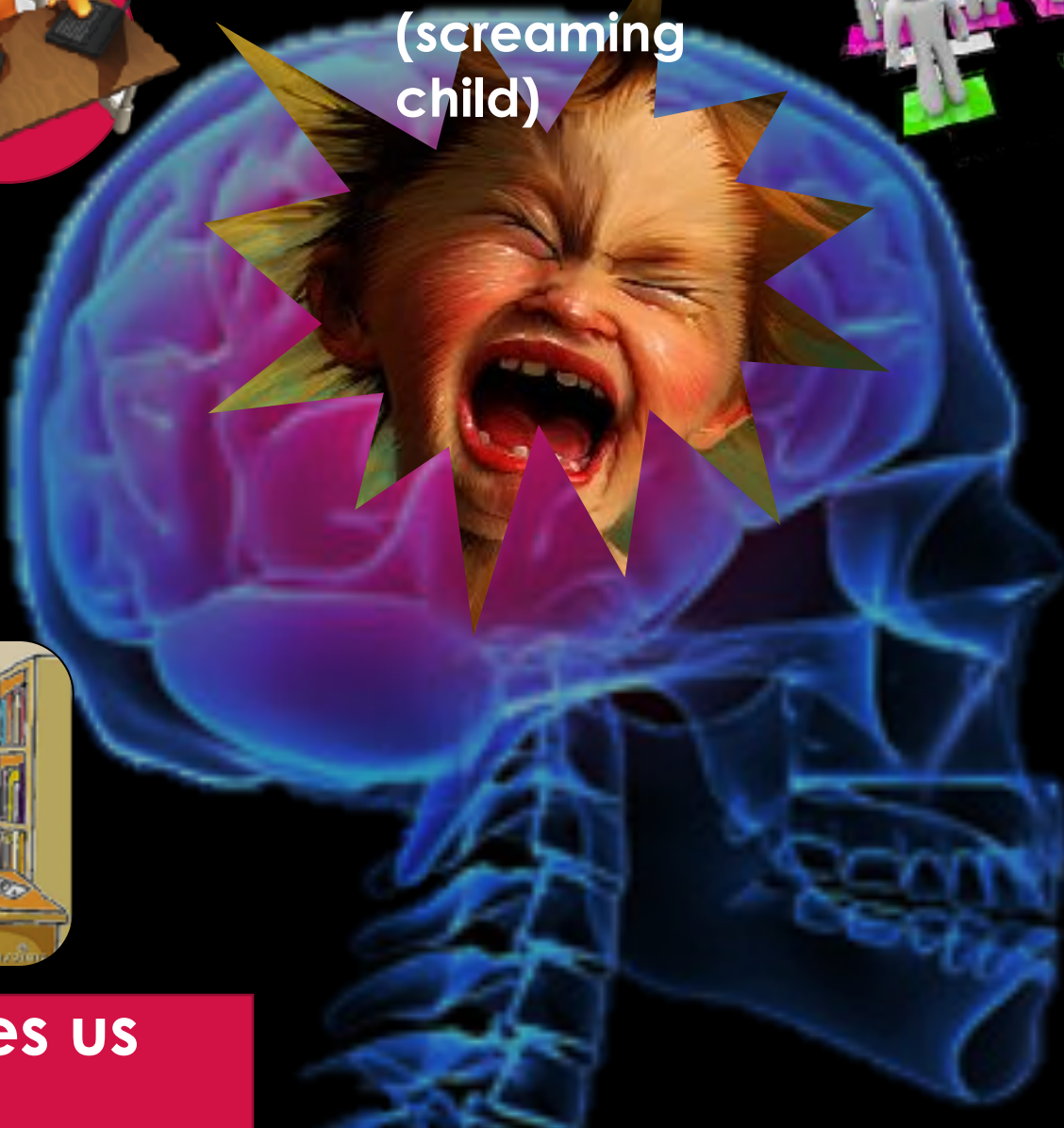




Amygdala  
(screaming  
child)

Pre-frontal cortex (manager)

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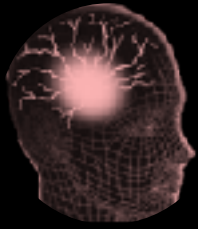


Trauma makes us  
stupid!

# The Impact of Trauma

- Trauma doesn't just terrify or horrify
- Forces profound biological adaptations in how the brain operates
- Brain detects serious threats and traumatic stressors to our bodily survival
- Brain's alarm system activated
- Hijacks brain's higher operations
- Puts all systems in emergency mode until the threat is escaped or overcome.



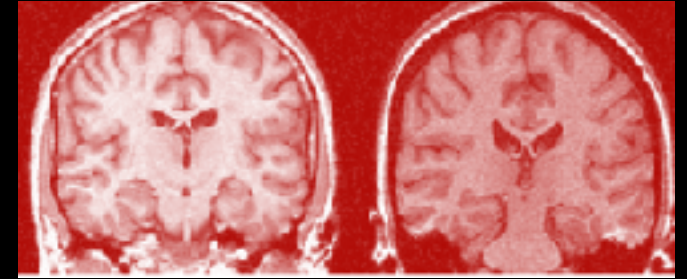


# THE IMPACT OF TRAUMA

- May seem like a simple shift in brain functions that leads to a temporary fight-flight reaction or adrenaline rush
- Intense but quickly passes - in many cases the alarm reaction in the brain rapidly subsides.
- We're left somewhat shaken or jangly, but with a brain that re-sets automatically to its normal modes.
- PTSD is what happens when the brain's alarm system doesn't automatically or rapidly re-set itself. When the brain's alarm continues to signal danger even though safety has been restored, the brain's overall functioning remains in an altered state that is the chronic stress response. Survival trumps self-regulation in this case



# DSM V: DIAGNOSIS OF PTSD



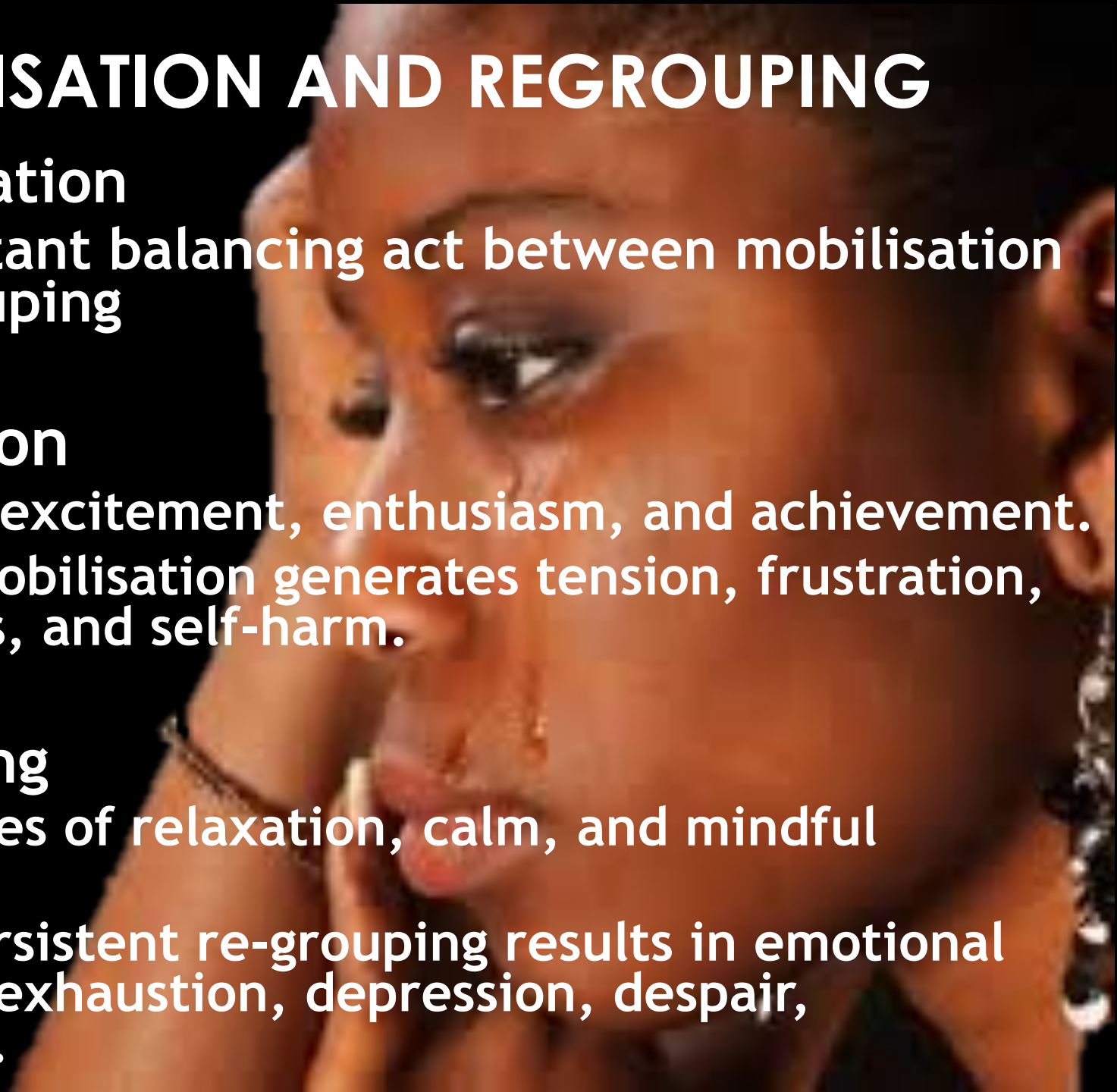
- PTSD is a disorder of persistent reactivity in all domains of self-regulation
- Not just troubling memories/ chronic anxiety
- Distressing memories of past traumatic events/intense stress reactions to reminders in current life is still the cornerstone of PTSD.
- “Intrusive re-experiencing” of traumatisation play out across the full range of self regulation: emotions, body functions and health, thinking, motivation, behaviour, relationships, and ultimately our sense of self.



## Understanding the Nature of PTSD

- **Essential to understand what the brain and body do to "self-regulate" under ordinary circumstances**
- **This is what is lost in PTSD and must be regained in recovery.**
- **Self-regulation is a delicate and complicated balancing act in which the brain and body constantly adjust to maintain a balance between mobilising (being highly activated) and re-grouping (down shifting into less activated states).**

# MOBILISATION AND REGROUPING

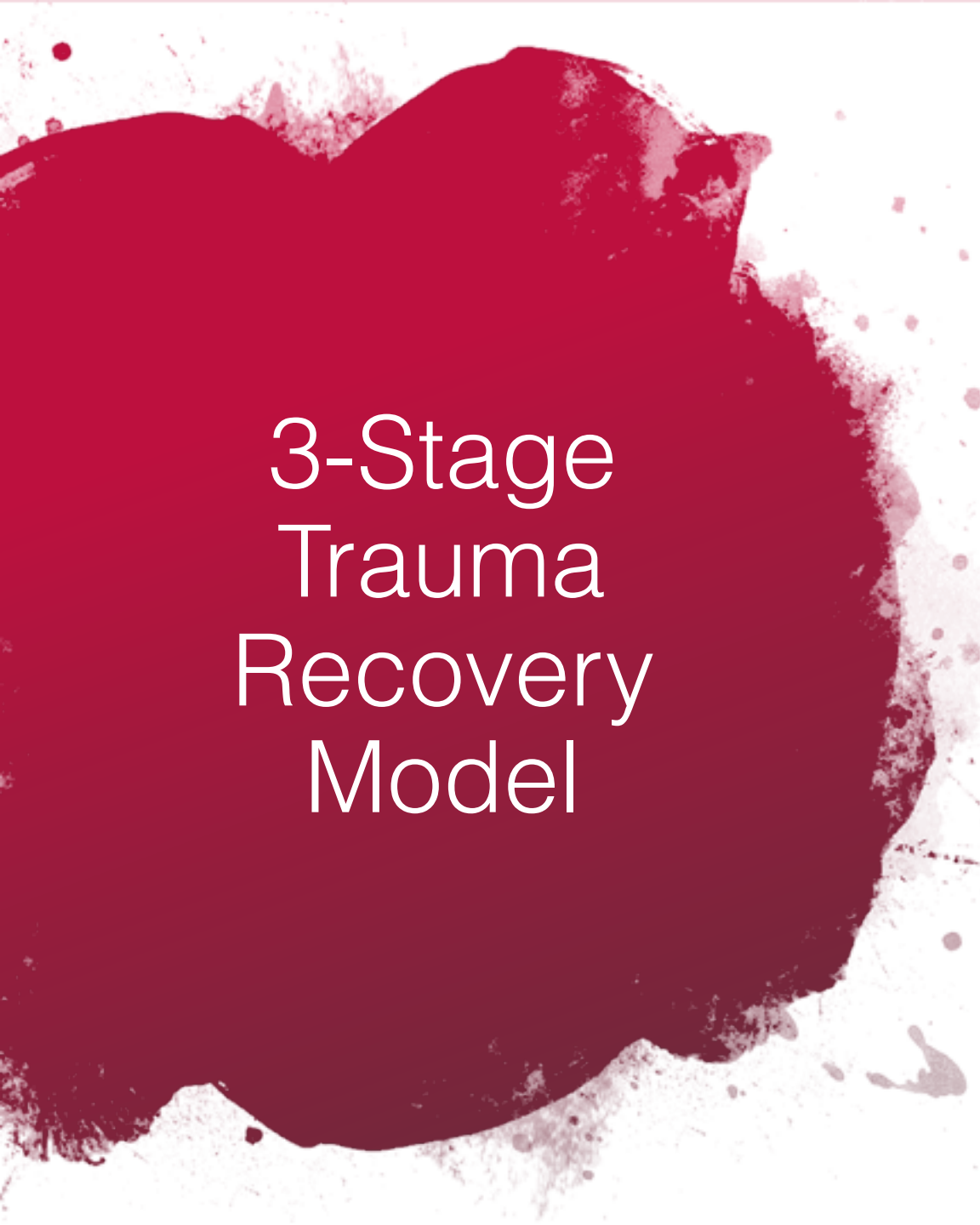
- **Self-Regulation**
    - is the constant balancing act between mobilisation and re-grouping
  - **Mobilisation**
    - pleasurable excitement, enthusiasm, and achievement.
    - Excessive mobilisation generates tension, frustration, recklessness, and self-harm.
  - **Re-Grouping**
    - healthy states of relaxation, calm, and mindful acceptance.
    - Extreme/persistent re-grouping results in emotional shut-down, exhaustion, depression, despair, dissociation.
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# TRAUMA AND PTSD

- Trauma hijacks the brain and body in order to achieve the one goal that is a higher priority than being effective or satisfied: survival.
- PTSD is a disorder *because the brain and body have become trapped on a roller coaster of dysregulation.*
- PTSD involves rocketing into extreme states of stress reactivity (mobilisation - terror, rage uncontrollable impulses) and plunging into equally extreme states of regrouping (exhaustion, emotional numbing, despair, and dissociation)







# 3-Stage Trauma Recovery Model

- **Stage One - establishment of safety, stabilisation, mastery of symptoms**
- **Stage Two - establishment of goals - transformation of trauma**
- **Stage Three - re-connection, establishment of meaning, taking action**



# STAGED RECOVERY MODEL

- **Stage 1 addresses SAFETY**
- **No recovery possible without this**
- **Reducing removing threats**
- **Establishing Routines**
- **Consistency and predictability**
- **Working with strengths**
- **Practical and solution-focused**



# The Autonomic System

**Ventral Vagal**

- **Safe**
- **Social**

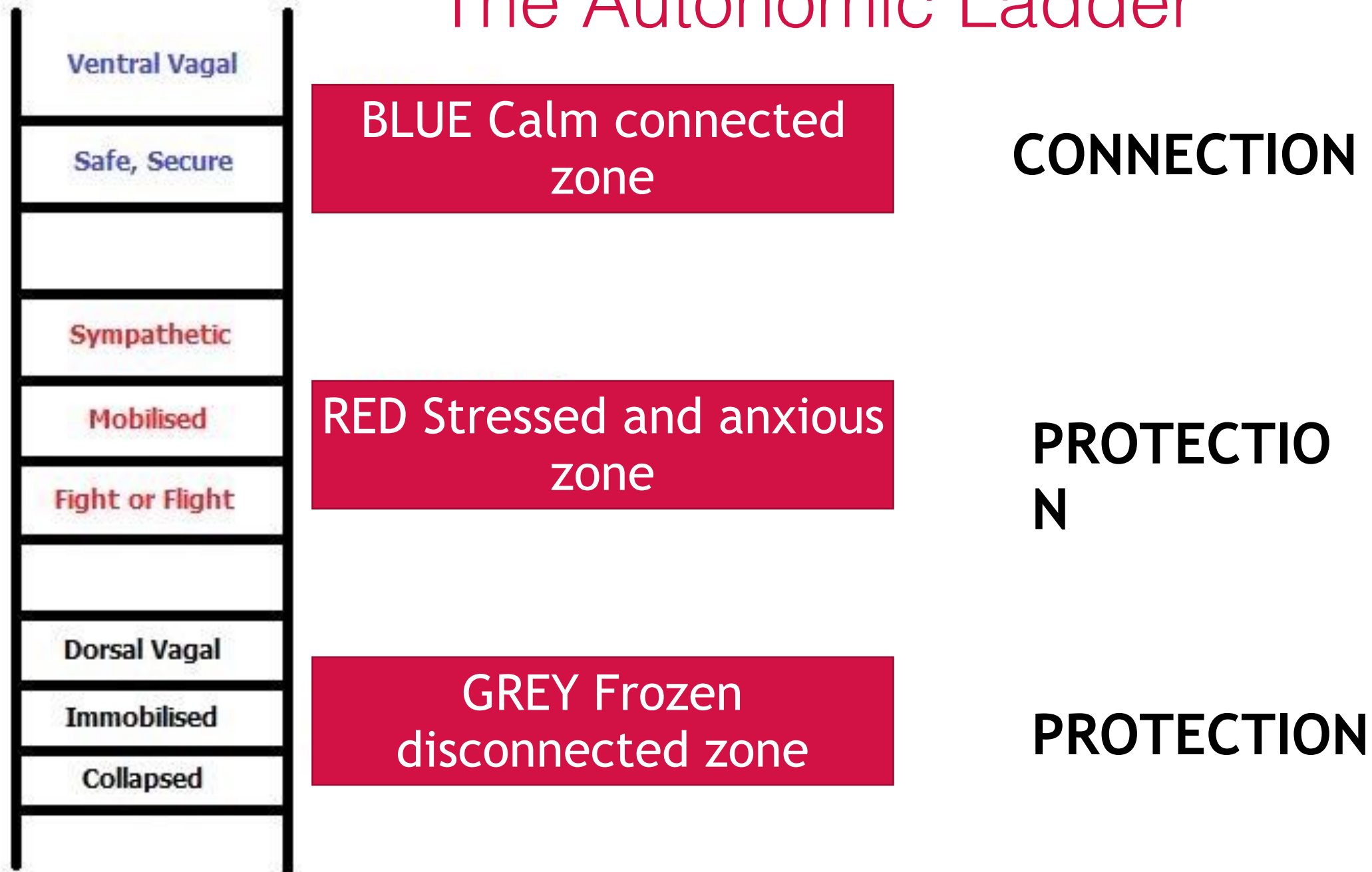
**Sympathetic**

- **Mobilised**
- **Flight or Fight**

**Dorsal  
Ventral**

- **Immobilised**
- **Collapsed**

# The Autonomic Ladder



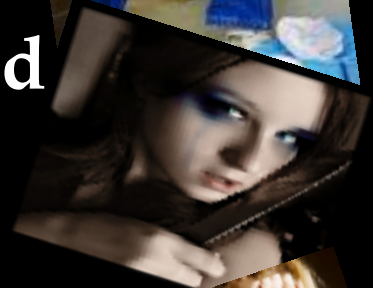
# Polyvagal Theory

- Recognise the autonomic state
- Respect the alternative survival response
- Regulate or co-regulate into a ventral vagal state
- Re-story



# HYPER-AVOIDANCE

- Experience of continuous terror and distress is psychologically overwhelming
- Use a variety of coping strategies to avoid feeling the feelings
- These behaviours are the individual's solution to the problem
- Agencies mistakenly focus on alarming behaviour
- Intervention goal = behaviour change
- Cannot change behaviour until healthy alternatives are in place







# Recovery

- The process should be gentle
- The process may be very slow -survivors need time to establish safety
- Disclosure is NOT the desired outcome
- Will retraumatise the individual especially if attempted in the early stages



# Messages Survivors Need to Hear

- You cannot overwhelm me
- You are valuable
- You are needed
- There's hope
- You have choices
- Others have been there too
- You make a difference
- This is a safe space (limits of confidentiality)
- It's not your fault (this is a process, not a comment)
- You are not a bad person



## Tools of Stage 1 Recovery

- **Safety**
- **Practical**
- **Focus on the present**
- **Information about trauma**
- **7-11 breathing**
- **Boundaries wheel**
- **Sleep hygiene**
- **Words of Evil; should, must, ought, have to, need, try, yes but,**
- **Mindfulness**





# FOCUS ON THE BODY

- Primary task
- Care and control of the body
- First point is establishing rhythms of sleep/wakefulness - no left frontal lobe function in absence of sleep!
- Dependencies - detox *must* occur prior to recovery work
- Health care - need physical checks

# Physical Movement and Exercise

- It has been established that trauma is stored in the body
- Exercise is at least as effective as anti-depressants
- Shaking
- Dancing
- Yoga, Tai Chi and qigong
- Fencing





*So how do you sit with a shattered soul?  
Gently, with gracious and deep respect.  
Patiently, for time stands still for the shattered, and  
The momentum of healing will be slow at first.  
With the tender strength that comes from an openness to your own deepest wounding,  
And to your own deepest healing.  
Firmly, never wavering in the utmost conviction that  
Evil is powerful, but there is a good  
That is more powerful still.  
Stay connected to that goodness with all your being,  
However it manifests itself to you.  
Give freely. Take in abundantly.  
Find your safety, your refuge, and go there as you need.  
Words won't always come;  
Sometimes there are no words  
In the face of such tragic evil.  
But in your own willingness to be with them,  
They will hear you;  
From soul to soul  
They will hear that for which there are no words.”*

