

Clinical Competency in Trauma

Presented by:

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-

What city was the last ACCA Conference held?

Tampa, FL

Charlotte,
NC

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TX

Washington,
DC

Using the Body to Regulate Emotions from Trauma

Most of the materials and information in the presentation are adapted from the books “**Sensorimotor Psychotherapy: Interventions for Trauma and Attachment**” by Pat Ogden and Janina Fisher and “**The Body Keeps the Score**” by Bessel van der Kolk

- Pat Ogden is the Founder/Education Director of the Sensorimotor Psychotherapy Institute.
 - Dr. Bessel van der Kolk is the past President of the International Society for Traumatic Stress Studies, Professor of Psychiatry at Boston University Medical School, and Medical Director of the Trauma Center at Justice Resource Institute.
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Trauma and the Body

“The body speaks clearly to those who know how to listen. Nonverbal expression visibly reveal what words cannot describe: the “speechless terror” (van der Kolk, 1996, p. 517) of trauma and the legacy of early or forgotten dynamics with attachment figures.” Ogden, 2015, p. 25

Victims of traumatic events are more likely to:

Talk about the event right away

Provide details of the event in sequential order

Have a hard time talking about the details of the event

Be calm and focused when discussing the event

Speechless Horror



- All Trauma is preverbal
 - “Victims of assaults and accidents sit mute and frozen in emergency rooms.”
 - “Traumatized children lose their tongues and refuse to speak.”
 - Photographs of combat soldiers show hollow-eyed men staring mutely into a void.”
 - -van der Kolk, 2014, pg. 43
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Speechless Horror

- **Information from Brain Scans**
 - Found that when people have a flash back their language center of the brain shuts down temporarily
 - This means that people wouldn't be able to put their thoughts and feelings into words
 - Surprised to find that raw images were registered in the visual cortex after such a long period of time
 - Normally the raw images are diffused to other areas of the brain that interpret the meaning of what has been seen
 - Revealed that during flashbacks, the brain was only lit up on the right side
 - Deactivation of the left side of the brain has a direct impact on being able to organize experiences into logical sequences and to translate our shifting feelings and perceptions into words

Alexithymia

- **Not Having Words for Feelings**
 - Many traumatized people can't describe what they're feeling because they can't identify what their physical sensations mean.
 - For example: When asked, "How would you feel if you saw a speeding car swerve toward you?"
 - Most people might reply, "I would be terrified." or "I would be shocked with fear."
 - Alexithymic people might reply, "I don't know...I'd get out of the way."
-

Pause for Baby Goats



An individual remembers past trauma through:

Dysregulated Arousal

Emotions

Defensive Responses

Mysterious Physical
Symptoms

All of the Above

Traumatic vs. Regular Memory

- **Regular Memory-** body does not react
 - The individual can tell a story verbally
 - **Traumatic Memory-** your body relives it
 - “The individual ‘remembers’ past trauma through sensorimotor reliving non-verbal iterations of the historical traumatic event (dysregulated arousal, emotions, defensive responses) and through mysterious physical symptoms that seem to have no organic basis” Ogden et al 2006
 - What individuals feel is real- but misplaced- cognition is missing so they react to safe things because they FEEL threatened
-

Dr. Bessel van der Kolk- 3 Ways Trauma Affects the Brain



Effects of Trauma

- Brain Stem- Regulates Sleeping, Breathing, Appetite
 - Traumatized people have a difficult time regulating their sleeping and eating habits and often have irregular or anxious breathing patterns
 - Pre-Frontal Cortex- Executive Functioning
 - Traumatized people have difficulty forming plans, setting priorities and postponing reward seeking
-

Effects of Trauma

- Trauma messes with the circuits in the brain that help someone experience themselves in relation to others
 - Traumatized people tend to react to things rather than being able to think them through

**“THERE IS NO GREATER
AGONY THAN BEARING
AN UNTOLD STORY
INSIDE YOU.”**

MAYA ANGELOU

WWW.QUOTEPICTURE.COM

Trauma is too overwhelming to be stored correctly in the brain. Instead it is stored
as:

Sensations

Words

Reactions in
the Body

A & C

Effects of Trauma

- Trauma is too overwhelming to be stored correctly in the brain
 - Instead is stored as sensations, impulses and reactions in the body
 - This is why it can be hard for people to verbally talk about the trauma
 - Just like you can't stop hunger or tiredness by analyzing or talking about it, you also can't stop trauma reactions
 - Why CBT doesn't always work
-

Pause for Baby Goats



“As I remembered from anatomy, the vagus nerve (cranial nerve x) innervates the diaphragm but what failed to register in class is that the vagus nerve also innervates much of our viscera. It supplies parasympathetic fibers to these organs, meaning that the vagus nerve is a “rest and digest” nerve, not a fight or flight nerve. This is, of course, why our guts react strongly to our emotional state. Throat gets dry, voice cracks, skin flushes, heart rate increases, stomach hurts...”

Van der Kolk quotes from Darwin’s work, “the heart, guts and brain communicate intimately via a nerve” – the pneumogastric or vagus nerve – “the critical nerve in the expression and management of emotions in both humans and animals.... When the mind is strongly excited it instantly affects the state of the viscera.”

***“what makes life unbearable is not emotions
but physical sensations.”***

Bessel van der Kolk

Body-Brain Connection

- **Three Levels of Safety**

- Social Engagement-

- Whenever we feel threatened, we'll call out for help, comfort and support from people around us

- Fight or Flight-

- If no one comes to our aid, the body tries to either fight off the attacker or run to a safe place

- Freeze or Collapse-

- If we can't get away, we'll try to preserve ourselves by shutting down and expending as little energy as possible





**He did special exercises to stay calm
during his evaluation.**

The Body is Important Because:

- “The individual ‘remembers’ past trauma through dysregulated arousal, emotions, defensive responses AND through mysterious physical symptoms that seem to have no organic basis.”

Ogden et al 2006

**TRAUMA LEAVES
'FINGERPRINTS' ON
THE VICTIM. THESE
DON'T FADE WHEN
THE BRUISES DO.**

Dr. Bessel van der Kolk- How to Detoxify the Body from Trauma



Trauma In Children and Adolescents

- **Most Frequent Exposure Types**

- Emotional Abuse- 59.3%
- Loss of Primary Caregiver- 55.6%
- Impaired Caregiver- 47.1%
- Domestic Violence- 45.8%
- Sexual Abuse- 40.8%
- Neglect- 33.8%
- Physical Abuse- 28.1%



Trauma In Adolescents

- **Most Frequent Difficulties**

- Attachment- 69.4%
- Affect Dysregulation- 61.5%
- Attention/ Concentration- 59.2%
- Negative Self-Image- 57.9%
- Impulse Control- 53.1%
- Depression/ Risk-Taking- 45.8%

Older Way of Thinking- Bad things happened to you, that bad thing is over. But if you resolve that bad thing, things will get better

Newer Way of Thinking- Bad things have happened to you, that bad thing is over. But, that bad thing has rewired your brain on how you see the world, yourself, and how your brain is organized

* the issue, the brain and the mind live in a different world now

What is **ONE** word you would use to associate with trauma?

Pause for Baby Goats and a Break!!



A study conducted after 9/11 showed which therapy to be the LEAST effective when working with trauma patients?

EMDR

Yoga

Talking

Acupuncture

Massage

Trauma Treatment

- **Dr. Bessel van der Kolk - “Our brains come online with rhythmic and synchronized movement with each other.”**
 - Can be why yoga, martial arts, tai chi, music classes, and/or sports can be therapeutic for adolescents and adults
 - Therapists can be a calming force in the room, but healing comes from movement and rhythms with others
 - Even bouncing a ball back and forth while talking can be more helpful than just talking alone



Trauma Treatment

- Trauma can be inaccessible to verbal recall
 - The traumatic memory typically remains unintegrated and unaltered by the course of time and leads to a variety of disruptive symptoms
- Treatment for trauma is about building new capacity
 - Can't change what happened
 - But can change the experience of remembering the past

“Clinicians have only one obligation: to do whatever they can to help their patients get better”. Bessel van der Kolk

Sensorimotor Psychotherapy

- Sensorimotor Psychotherapy draws from somatic therapies, neuroscience, attachment theory, and cognitive approaches.
 - Sensorimotor Psychotherapy is a body-orientated talking psychotherapy that specifically addresses trauma and attachment wounds, emphasizing the body as an avenue for exploration and vehicle for change... A bottom up approach- Dr. Pat Ogden
 - [Pat Ogden- Sensorimotor Psychotherapy](#)
-

Sensorimotor Psychotherapy

- Implications of Neuroscience Research for Treatment- Fisher 2004; Ogden 2006
 - “Talking about” often re-activates the implicit memories, (without resolution) causing dysregulated physiological and emotional arousal and animal defenses
 - Instead of “talking about”, therapists can learn to “work with”
 - Physical action and body sensation rather than only with the story
 - Somatic Interventions that stabilize arousal rather than only with interpretation and social-emotional interventions
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Window of Tolerance

Window of Tolerance

Hyperarousal Zone

2. Sympathetic "Fight or Flight" Response

Increased sensations, flooded
Emotional reactivity, hypervigilant
Intrusive imagery, Flashbacks
Disorganised cognitive processing



Window of Tolerance Optimal Arousal Zone

1. Ventral Vagal "Social Engagement" Response

State where emotions can be
tolerated and information
integrated



Hypoarousal Zone

3. Dorsal Vagal "Immobilisation" Response

Relative absence of sensation
Numbing of emotions
Disabled cognitive processing
Reduced physical movement

Adapted from Ogden, Minton, & Pain, 2006, p. 27, 32; Corrigan, Fisher, & Nutt, 2010, p. 2

Keeping Clients within the Window of Tolerance



- You can keep clients within the window of tolerance by focusing on body sensations
 - Keeps them more present until they can tolerate images or emotions
-

Keeping Clients within the Window of Tolerance

- Differentiate between body sensations and emotions
 - Helps clients from escalating with their emotions
 - Sensorimotor processing interrupts cycle of escalating arousal
 - As attention is turned exclusively to sensations, emotion is disregarded until arousal has subsided.

“Attending exclusively to sensation, limits the amount and intensity of information to be processed so that it becomes more manageable” Ogden, 2006

Pause for Baby Goats



Directed Mindfulness

- “**Directed Mindfulness** is defined as paying attention to particular elements of internal experience (body sensation, movement, emotion, 5-sense perception, cognition) considered important to therapeutic goals”
Ogden 2006



Four Skills to Encourage Mindfulness

- **Tracking-** Noticing present experience, especially somatic experience
 - [Dr. Pat Ogden- Tracking the Body](#)
- **Contact Statements-** Naming what you notice
- **Mindfulness Questions-** Questions that patients must be mindful to answer
- **Experiments-** “What happens when...?”

Kurtz 1996; Ogden 2004

Somatic Resources

- **Somatic Resources reside within the body**
 - They are physical functions, actions, and capacities that provide a sense of well-being and competency on a physical level and in turn positively affect how we feel
 - Highly unique and should be tailored to a client's needs



Somatic Resources

- **Centering Resources**
 - Regaining a sense of being connected with ourselves when we are distressed or ‘off center’
- **Containment Resources**
 - Help us sense the actual physical container of our bodies, especially the skin and superficial muscles
- **Movement Resources**
 - Help regulate emotions by using all different types of movement that may feel comforting or relaxing

Trauma Sensitive Yoga

- **Trauma Sensitive Yoga** does not attempt to make meaning out of a body experience, in other words, there is no ‘because’
 - The point is simply have and to notice the body experience as it is right now, to choose what to do with it once it is felt, and then to take action based on your choice
 - A person does not “process” the emotional content during yoga, they just have an experience in their body

David Emerson, “Trauma Sensitive Yoga in Therapy” 2015



Trauma Sensitive Yoga works best with which types of clients?

People who have experienced complex trauma

People who are very flexible

People who have had experience with yoga

People who have experienced a single-incident trauma

Trauma Sensitive Yoga

- **Trauma Sensitive Yoga – Shared Authentic Experience**
 - Works best with people who have experienced complex trauma, not a single-incident trauma
 - Works better for those who were hurt and abused continually within relationships
 - TSY involves both parties (therapist and client) engaging simultaneously with the material
 - Both parties are doing the form at the same time
 - This kind of approach adds integrity to the practice
 - By engaging with a client like this you're letting them know they are not alone
-

Trauma Sensitive Yoga

- **Interoception**
 - Awareness of what is going on inside of our own skin
 - Uses the word “notice” to help client just become more aware
 - [Interoception- Feeling the Surface Beneath You](#)
 - **Choice Making**
 - Focus is on immediate body experience and the time frame is the present moment
 - Related to what to do with our body right now
 - **Taking Effective Action**
 - The self-motivated kind
 - Actions we choose for ourselves
-

Trauma Sensitive Yoga

- **Rhythm-**
 - **Immobilization versus Movement**
 - Many trauma victims AVOID to cope
 - “The overarching experience of a person who is traumatized is a physical one of chronic constriction and immobilization, experienced in the body, not the mind.” David Emerson, 2015, p. 137
 - Using rhythmic motions to help clients accept that physical movement alone without the intellectual association with trauma can be enough to allow healing
 - **Passage of Time**
 - It is not to expose people to parts of their body that cause them distress as a way to reframe their relationship with that body part
 - The purpose is to be able to help the client feel things begin and to feel things end
 - **Isolation versus Connection with Others**
 - Judith Herman has written that “helplessness and isolation are the core experiences of psychological trauma. Empowerment and reconnection are the core experiences of recovery” (1992, p. 197)
 - The counselor and client share space and practice the rhythm together
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Pause for Baby Goats



Eye Movement Desensitization and Reprocessing

What is EMDR?

- The core of EMDR treatment involves activating components of the traumatic memory or disturbing life event and pairing those components with alternating bilateral or dual attention stimulation. This process appears to facilitate the resumption of normal information processing and integration. This treatment approach can result in the alleviation of presenting symptoms, diminution of distress from the memory, improved view of the self, relief from bodily disturbance, and resolution of present and future anticipated triggers.
 - EMDRIA (Eye Movement Desensitization and Reprocessing International Association)
-

Eye Movement Desensitization and Reprocessing

EMDR

Developed by Francine Shapiro



- “EMDR is an integrative psychotherapy approach that has been extensively researched and proven effective for the treatment of trauma. EMDR is a set of standardized protocols that incorporates elements from many different treatment approaches.”
 - EMDRIA (Eye Movement Desensitization and Reprocessing International Association)
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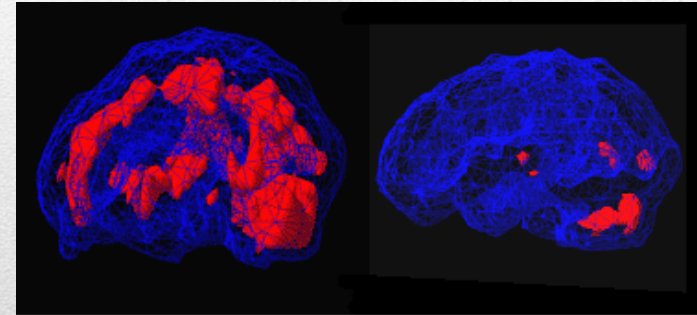
Eye Movement Desensitization and Reprocessing

- **Why EMDR is used with Trauma**
 - “When someone experiences a severe psychological trauma, it appears that an imbalance may occur in the nervous system...Due to this imbalance...the information acquired at the time of the event, including images, sounds, affect, and physical sensations, is maintained neurologically in its disturbing state.”
 - “In EMDR when we ask a client to bring up a memory of the trauma, we may be establishing a link between consciousness and the site where the information is stored in the brain...the bilateral stimulation appears to activate the information processing system and allows processing to take place.” Shapiro, 2001, pg. 31
-

Eye Movement Desensitization and Reprocessing

- **EMDR therapy targets the unprocessed memories that contain the negative emotions, sensations and beliefs.**
 - “By activating the brain’s information processing system, the old memories can then be ‘digested’. Meaning what is useful is learned, what is useless is discarded, and the memory is now stored in a way that is no longer damaging.”

Shapiro, 2012, pg. 6

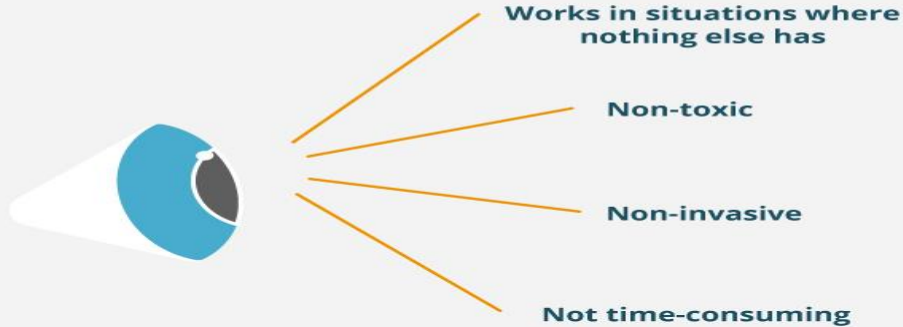


Before and after EMDR brain scans.

Left photo shows woman with Post Traumatic Stress Disorder. Right photo shows same woman after four ninety minute EMDR sessions. The red areas indicate over-activity in the brain. Photo by Dr. Daniel Amen

What are some benefits of EMDR therapy?

Benefits of EMDR Therapy:



Works quickly compared to more traditional approaches; clients can see relief in as little as five sessions.



of subjects treated with EMDR for **five sessions** had no signs of PTSD following treatment



of adult trauma victims exhibited no symptoms of PTSD after **eight sessions**

EMDR is highly recommended by:

The National Institute for Health (NIMH)

The World Health Organization

The American Psychiatric Association

The U.S. Department of Veterans Affairs and

The U.S. Department of Defense

Biofeedback

- A training technique in which people are **taught** to improve their **health and performance** by using **signals from their own bodies...**
 - **Goals of Biofeedback**
 - Technology assisted mindfulness
 - Not “relaxation training”
 - Target the “**Mastery Zone**”
 - **Self-Regulation** of the monitored system.
 - **Methods of Biofeedback**
 - Temperature
 - **Heart Rate Variability (HRV)**
 - Respiration
 - Electromyogram (EMG)
 - Electroencephalogram (EEG)
 - Electrodermal
-

Biofeedback

- **What is the Mastery Zone?**

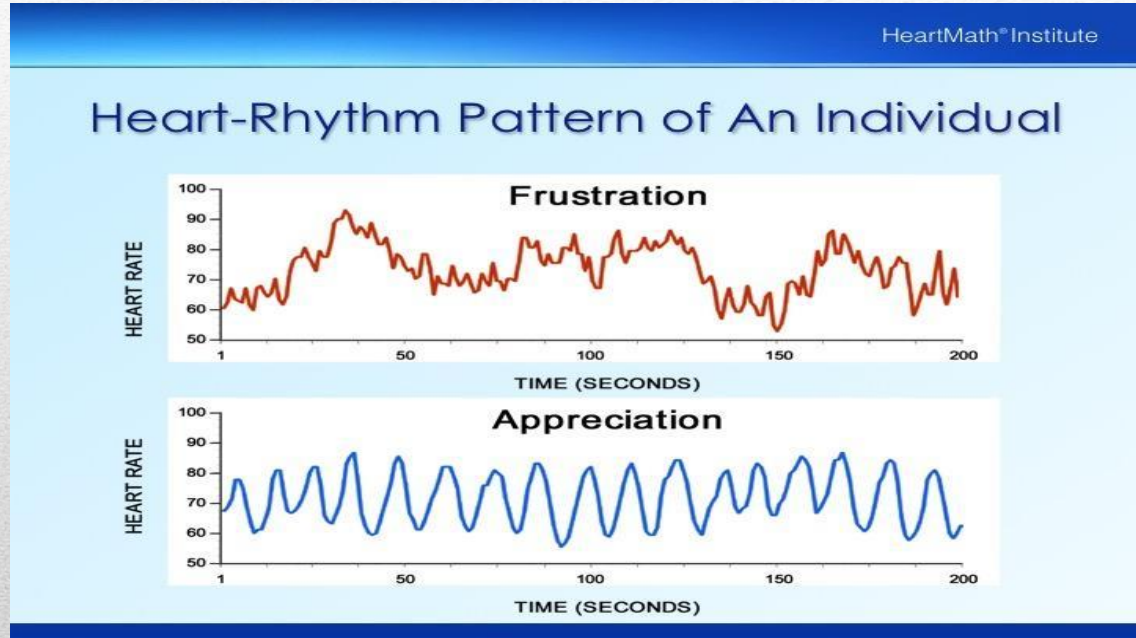
- The mastery zone is a state of being in which you increase your physical regulation by decreasing your body's natural desire toward "fight or flight". You are in control.

- **Coherence**

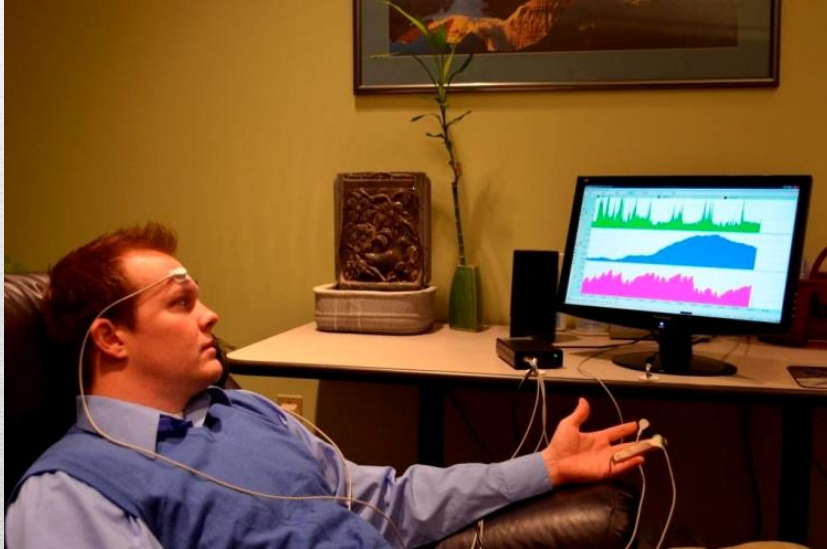
- Shifting into coherence brings your body systems into synchronous operation which provides many benefits:
 - Minimizes the body's normal stress response and its negative repercussions on the brain and body.
 - Facilitates higher cognitive faculties and emotion regulation abilities that are normally compromised during stress and negative emotional states.
 - Sharpens our discernment and increases creativity, intuition, and resourcefulness.
 - Allows for a broader, more emotionally balanced perspective.
-

Biofeedback

- These actual heart-monitor readouts contrast the heart-rhythm pattern of someone experiencing frustration, then appreciation.



Biofeedback



- Heart-focused, sincere, positive feeling states boost the immune system, while negative emotions can suppress the immune response for up to six hours.
 - The smooth heart rhythm, measured by heart-rate variability (HRV), is what scientists call a highly ordered or coherent pattern and is a sign of good health and emotional balance.
-

What is ONE new technique you learned today that you hope to use in future therapy sessions?

Questions??

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Website Resources

- Sensorimotor Psychotherapy Institute-
<https://www.sensorimotorpsychotherapy.org/home/index.html>
 - The National Child Traumatic Stress Network-
<http://www.nctsn.org/>
 - Trauma Center at Justice Resource Center-
<http://www.traumacenter.org/>
 - Trauma Sensitive Yoga-
<http://www.traumasensitiveyoga.com/>
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