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esponding to Trauma

whether large or small, trauma affects us all

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9/11, Columbine, the shootings in Arizona.

These names are synonymous with national traumas. 'Trauma' is a term that describes what happens to us when we experience a very stressful event. Originally thought to apply only to life-threatening experiences, we now know trauma may be experienced not only by those who lived through the trauma firsthand, but also those who have witnessed or heard about the trauma or been involved with those immediately affected.

In fact, psychologists describe two types of trauma – “Big T” and “Little T” trauma. We all know what “Big T” traumas are: rape, childhood abuse, robbery, earthquake and other natural disasters, war and its effects, to name a few. “Little T” traumas are especially damaging because they occur over time and their effects are cumulative. Examples of “Little T” traumas include being shamed or neglected as a child, repeated emotional abuse, being bullied, growing up gay or having otherwise experienced prejudice or discrimination, repeated moves or multiple losses. Given the extent of media coverage of traumatic events, most of us have the potential for being personally affected by the trauma.

Basically, a trauma can be defined as “*a unique individual experience that shakes the foundations of our beliefs about our safety and shatters our assumptions of trust*”.

In trauma, the individual feels so overwhelmed that he or she has difficulty integrating the emotional experience. Traumas, whether “Big T” or “Little T”, change the way we feel in the world. Thus, the definition of trauma can also include violations and betrayals by people or institutions we must depend on. Although not life-threatening, such events as divorce, job loss, and abandonment can share similar reactions to more physically threatening experiences.

Karen (name/information fictionalized), a 49-year old teacher, came to see me as her 50th birthday approached. She told me an uncle had exposed himself to her when she was eight years old and this single event significantly impacted her life. She described some of the responses common to those coping with trauma: frequent physical pain, fear and anxiety accompanied by panic attacks (heart palpitations), a dependence on alcohol to help



her cope & little interest in sex. In addition, she described typical emotional reactions to trauma, including: flashbacks, feelings of helplessness, attempts to avoid anything associated with the trauma, difficulty trusting, strong feelings of anger and rage.

Karen doubted a single experience such as this could really have such a huge impact on the quality of her life. She was told by some therapists it was not possible. However, Karen's experience fit within the definition of trauma. She wanted to be free to live her life fully as she moved into mid-life. I told Karen my goal was to build a bridge from past to present so that her life in the present could be improved.

Many people who have experienced trauma have not had the opportunity to tell their story and to have that story believed. Our initial work gave Karen room to tell her story without judgment. Recent research indicates the importance of incorporating physical and emotional experiences in addition to ‘talking about’ the trauma as a necessary component of healing. Part of the healing work we utilized as a treatment modality is called Eye Movement Desensitization and Reprocessing (EMDR). EMDR is a rapid therapeutic

approach that helps individuals process the information about the trauma that has been stored in their bodies and minds. It attends to past events, current situations which trigger emotional distress, physical symptoms and the positive beliefs needed to imagine and experience optimal functioning. When trauma occurs, the sights, sounds, emotions, memories and physical symptoms are frozen in time. Like a bad meal, aspects of the trauma remain undigested. When triggered, the ‘victim’ often re-experiences these sensations as if they were occurring in the here and now. It is believed EMDR heals by stimulating both sides of the brain so the trauma can become fully digested. Frequently, following EMDR, clients either have little recall of the upsetting memories, or can remember them without strong emotion.

Within two sessions, Karen's level of distress about the traumatic incident receded into the background. She was amazed to find she had more energy for her life and began taking small steps to move forward. She took an interesting class, redecorated her house and found she enjoyed being with people socially more than ever before.

And for the rest of us, how can we best cope with the traumas and tragedies of our times? Here is a short list:

- Connect with others, especially those who've shared the same stressful event;
- Commit to something personally meaningful and important every day;
- Express yourself through music, art, writing;
- Hug those you love, pets included;
- Pray and meditate; participate in relaxing exercise;
- Cry; talk with empathic people;
- Take proactive steps toward personal and community safety;
- If symptoms persist, see a mental health professional. ❁

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