

# Coping, Trauma, and Resiliency

---

Priscilla Benites, LMFT

# Trauma

Some people's lives seem to flow in a narrative; mine had any stops and starts. That's what trauma does. It interrupts the plot.....It just happens, and then life goes on. No one prepares you for it.

-Jessica Stern, *Denial: A Memoir of Terror*

Research by the Centers for Disease Control and Prevention indicates that 1 in 5 Americans was sexually molested as a child; 1 in 4 was beaten by a parent to the point of leaving a mark on their body; and 1 in 3 couples engages in physical violence. Many of us grew up with alcoholic relatives, and 1 out of 8 witnessed their mother being beaten or hit.

Trauma can be defined as any experience in which a person's internal resources are not adequate to cope with external stressors (Hoch, Stewart, Webb, & Wyandt-Hiebert, 2015). Some traumatic experiences occur once in a lifetime, and others are ongoing. Many people have experienced multiple traumas, and for far too many, trauma is a chronic part of their lives.

Many people have experienced multiple traumas, and for far too many, trauma is a chronic part of their lives. Trauma can happen to both individuals and communities, and sometimes the effects of trauma can even be passed down to younger generations (Brave Heart, 2003; Denham, 2008). Earlier conceptualizations of trauma tended to focus on the actual traumatic event(s), but researchers and practitioners now recognize that the same event(s) can be experienced differently based on a range of cultural contexts, as well as social and psychological variables, unique to individuals and communities (Elliott & Urquiza, 2006).

### 3 types of Trauma:

**Acute trauma:** This results from a single stressful or dangerous event

**Chronic trauma:** This results from repeated and prolonged exposure to highly stressful events.

**Complex trauma:** This results from exposure to multiple traumatic events.

Interpersonal trauma: is defined as involving any of the following traumatic experiences: emotional abuse, emotional neglect, physical abuse, physical neglect, and/or sexual abuse in childhood and/or adulthood.

**PTSD or Posttraumatic stress disorder** is an anxiety disorder that results from being exposed to a traumatic event. Difficulty recovering after experiencing or witnessing a terrifying event. PTSD symptoms may start within a month or years after the traumatic event and cause significant problems in social, or work situations, relationships and interfere with your day-to-day functioning.

Common symptoms of PTSD include flashbacks, anxiety, depression, recurring nightmares, inner and external violence, hypervigilance, uncontrollable thoughts about the event.

PTSD symptoms are grouped into four types: intrusive memories, avoidance, negative changes in thinking and mood and changes in physical and emotional reactions. Symptoms can vary over time and can differ from person to person.

# Traumatic life experiences

- Physical or sexual abuse
- Abandonment, neglect, or betrayal of trust (such as abuse from a primary caregiver)
- Death or loss of a loved one
- Caregiver having a life-threatening illness
- Domestic violence
- Poverty and chronically chaotic housing and financial resources

- Automobile accident or other serious accident
- Bullying
- Life-threatening health situations and/or painful medical procedures
- Witnessing or experiencing community violence, including shootings, stabbings, or robberies
- Witnessing police activity or having a family member incarcerated
- Life-threatening natural disasters • Acts or threats of terrorism (viewed in person or on television)
- Military combat
- Historical trauma

Sources: Hoch et al., 2015; National Child Traumatic Stress Network, 2008.

## Prevalence of trauma statistics:

- ❑ By the time they reach college, 66 to 85 percent of youth report lifetime traumatic event exposure, with many reporting multiple exposures (Read, Ouimette, White, Colder, & Farrow, 2011; Smyth, Hockemeyer, Heron, Wonderlich, & Pennebaker, 2008).
- ❑ Sixty percent of adults have reported experiencing abuse or other difficult family circumstances during childhood (National Center for Mental Health Promotion and Youth Violence Prevention, 2012).
- ❑ College students are particularly vulnerable to experiencing a new potentially traumatizing event (PTE); as many as 50 percent of college students are exposed to a PTE in the first year of college (Galatzer-Levy et al., 2012).
- ❑ Female college students with a history of sexual trauma are at higher risk for repeated trauma (Griffin & Read, 2012).
- ❑ Ethnic minority status and low socioeconomic status have been shown to be risk factors for trauma exposure (Read et al., 2011).
- ❑ Trauma increases susceptibility to depression, and trauma symptoms are more likely to co-occur with depression symptoms (Kilpatrick et al., 2003; O'Donnell, Creamer, & Pattison, 2004; Rytwinski et al., 2013).

- ❑ Four of every 10 children in the United States said they experienced a physical assault during the past year, with one in 10 suffering an assault-related injury (Finkelhor, Turner, Shattuck, & Hamby, 2013).
- ❑ Two percent of all children have experienced sexual assault or sexual abuse, and the rate for 14- to 17-year-old girls approaches 11 percent. Nearly 14 percent of children have been repeatedly maltreated by a caregiver, including nearly 4 percent who were physically abused. One in four children has been the victim of robbery, vandalism, or theft within the previous year, and one in five children has witnessed violence in their family or neighborhood in the previous year (Finkelhor et al., 2013).
- ❑ Twenty-six percent of children in the United States witness or experience a traumatic event before age 4 (National Center for Mental Health Promotion and Youth Violence Prevention, 2012)



# Trauma's impact on the brain

When a person experiences a traumatic event, brain scans show the biggest brain activation as a red dot on the right lower center of the brain. Intense emotions activate the Limbic system or the emotional brain, in particular an area within it called the Amygdala. The Amygdala warns us of impending danger and activates the body's stress response—fight, flight, and freeze response.

When a person experiences a traumatic event, brain scans show a white spot (decreased brain activity) in the left frontal lobe of the cortex in a region called Broca's area which is responsible for motor functions involved with speech and language production. Broca's area is affected in stroke patients when the blood supply to that region is cut off. Without a functioning Broca's area you can't put thoughts and feelings into words. Broca's area goes offline whenever a person experiences a flashback. This proves that the effects of trauma are not different from and can overlap with the effects of physical lesions like strokes (Van der Kolk, 2014).

When traumatized people are presented with images, sounds or thoughts related to their particular experiences, the Amygdala reacts with alarm. Activation of this fear center triggers a cascade of stress hormones and nerve impulses that drive up blood pressure, heart rate, and oxygen intake preparing the body for Fight or Flight (Van der Kolk, 2014).

Brain areas implicated in the stress response include the amygdala, hippocampus, and prefrontal cortex. Traumatic stress can be associated with lasting changes in these brain areas. Traumatic stress is associated with increased cortisol and norepinephrine responses to subsequent stressors (Bremner, 2006).

Our brain's adaptive response to stress leads to action; however, trauma can overwhelm this healthy adaptive response.

The brain moves toward health just like the rest of the body, unless blocked or hindered.

Traumatized people become stuck, stopped in their growth because they can't integrate new experiences into their lives (Van der Kolk, 2014).

Copyright © The McGraw-Hill Companies, Inc. Permission required for reproduction or display.

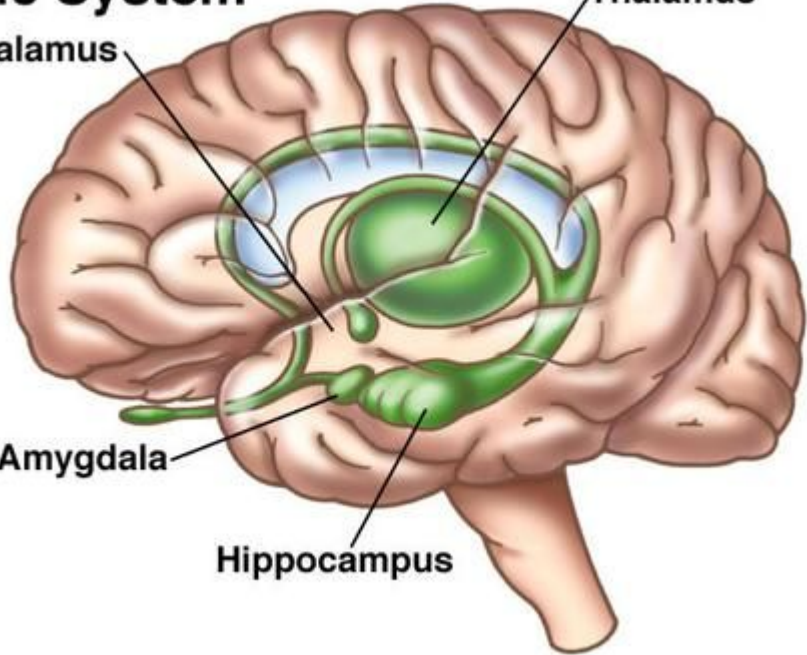
# Limbic System

Hypothalamus

Thalamus

Amygdala

Hippocampus



### Sensorimotor cortex

Function: Coordination of sensory and motor functions  
In PTSD: Symptom provocation results in increased activation

### Thalamus

Function: Sensory relay station  
In PTSD: Decreased cerebral blood flow

### Parahippocampal gyrus

Function: Important for memory encoding and retrieval  
In PTSD: Show stronger connectivity with medial prefrontal cortex; decreases in volume

### Fear response

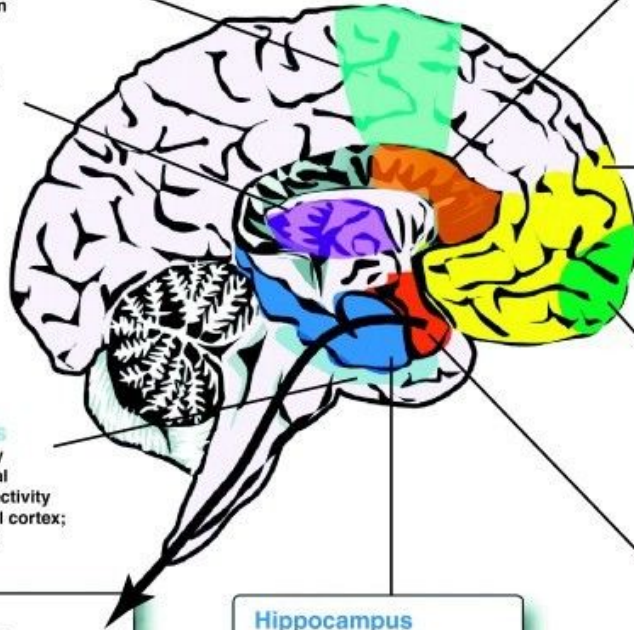
Function:  
- Evolutionary survival

In PTSD:  
- Stress sensitivity  
- Generalization of fear response  
- Impaired extinction

### Hippocampus

Function:  
- Conditioned fear  
- Associative learning

In PTSD:  
- Increased responsiveness to traumatic and emotional stimuli



### Anterior cingulate cortex

Function: Autonomic functions, cognition  
In PTSD: Reduced volume, higher resting metabolic activity

### Prefrontal cortex

Function:  
- Emotional  
- Regulation

In PTSD:  
- Decreased gray and white matter density  
- Decreased responsiveness to trauma and emotional stimuli

### Orbitofrontal cortex:

Function: Executive function  
In PTSD: Decreases in volume

### Amygdala

Function:  
- Conditioned fear  
- Associative learning

In PTSD:  
- Increased responsiveness to traumatic and emotional

# Coping

Trauma has to be revisited in more than the logical brain “The fundamental issue in resolving traumatic stress is to restore the proper balance between the rational and emotional part of the brain.” (Van der Kolk, 2014)

Finding a way to become calm through exercise, belly breathing, mental grounding, progressive muscle relaxation, and visualization. Neurofeedback has also been effective for resetting the brain to calmness.

Learning to maintain that calm and focus when triggered with past thoughts, emotions, reminders, etc through physical grounding and belly breathing.

Finding a way to be fully alive, in the present, and engaged with others through Mindfulness, Yoga, Dance and any movement.

Finding a therapist that specializes in trauma or EMDR.

Connect with others through support networks.

# Resiliency

“As human beings we belong to an extremely resilient species.” (Van der Kolk, 2014)

“Soft is stronger than hard; water is stronger than rock, love is stronger than violence.”

-Herman Hesse

## Resilience

1. The capacity to recover quickly from difficulties; toughness

Mental Health professionals define resilience as the process of adapting well in the face of adversity, trauma, tragedy, threats, or significant sources of stress.

## Five Pillars of Resilience

- Self-awareness
- Mindfulness
- Self-care
- Positive relationships
- Purpose

By strengthening these pillars, we in turn, become more resilient.

Characteristics of resilient people:

- They are able to detect the cause of their problems
- They know how to handle their emotions
- They keep calm in stressful situations
- They are realistic
- They trust themselves
- They are empathetic
- They are able to motivate themselves
- They don't ask why, they ask how