

# Trauma Healing

Adapted from the Strategies for Trauma Awareness and Resilience (STAR) in the Center for Justice and Peacebuilding at Eastern Mennonite University

# Goals for Today

- Better understanding of high stress and trauma and how it affects us. Normalizing it.
- Present possible tools for reflection (brain session and v/o cycle).
- In the least a common language for talking or relating to others.

# Remember

- Today is not therapy. The hope is to create a learning environment
- You know the basic principles of the information shared today
- If something today triggers thoughts and feelings that are difficult, talk with someone. The Program Coordinator and counselors over at IHS are here for you.

Trauma

# Trauma

- Experiencing or witnessing an event or events involving actual or threatened death, serious injury, or threat to the physical or psychological integrity of oneself or others.
  - What is happening within us during high stress situations or trauma?

# Symptoms

- Emotional
- Cognitive (thinking)
- Behavioral (doing)
- Physical
- Spiritual
- Societal Effects

These are normal or  
common reactions to  
difficult or abnormal  
situations

# COMMON SHOCK

- Common Shock is when our chronic exposure to the violence and violation of everyday life takes a traumatic toll on us physiologically, psychologically and spiritually. -Kaethe Weingarten

*Common Shock: Witnessing Violence Every Day*

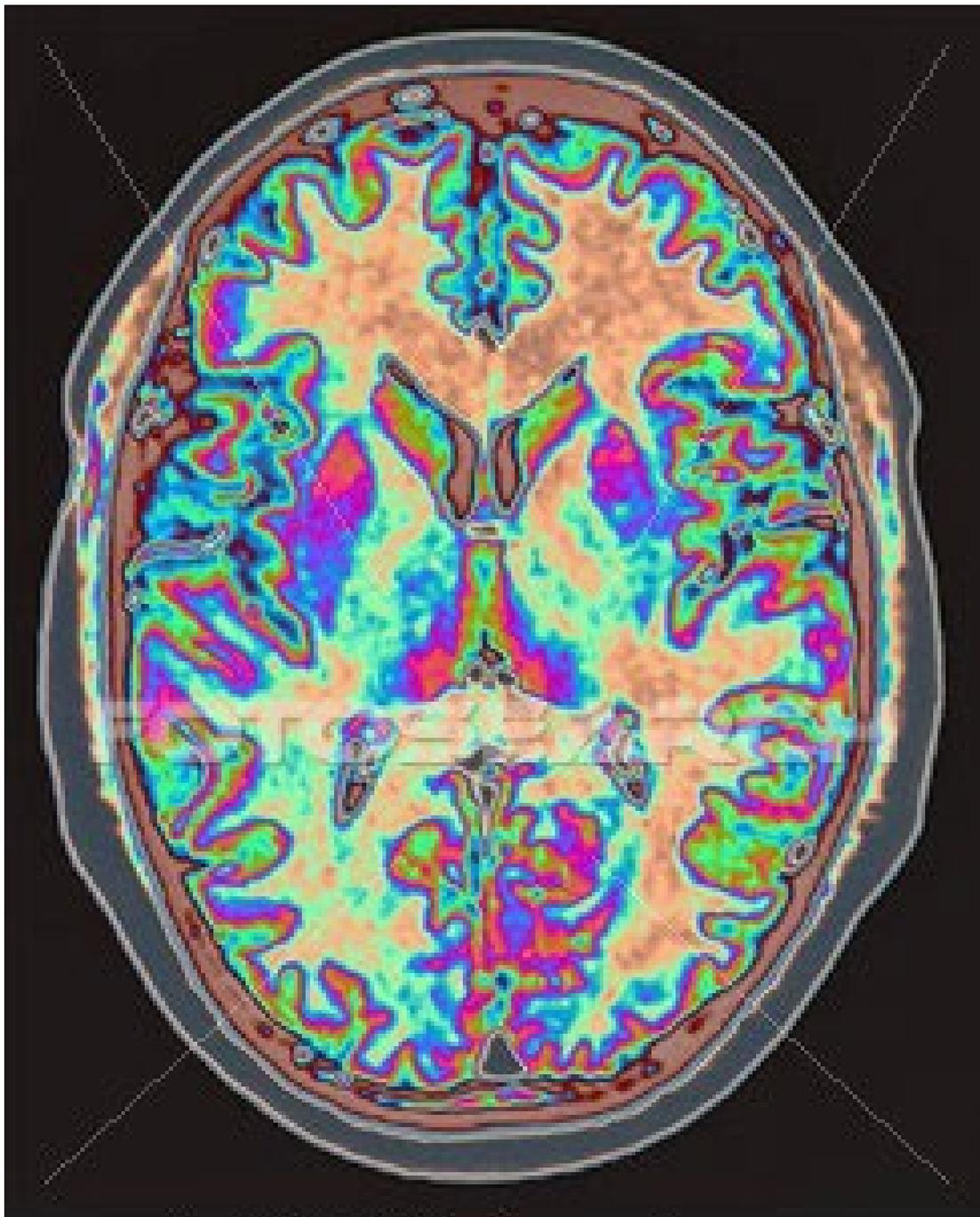
common shock— the biological and psychological responses that are triggered when we witness violence or violation. It is common, because it happens all the time, to everyone in any community. It is a shock, because whether our response is spaciness, numbness, distress, or bravado, it affects our mind, body, and spirit.

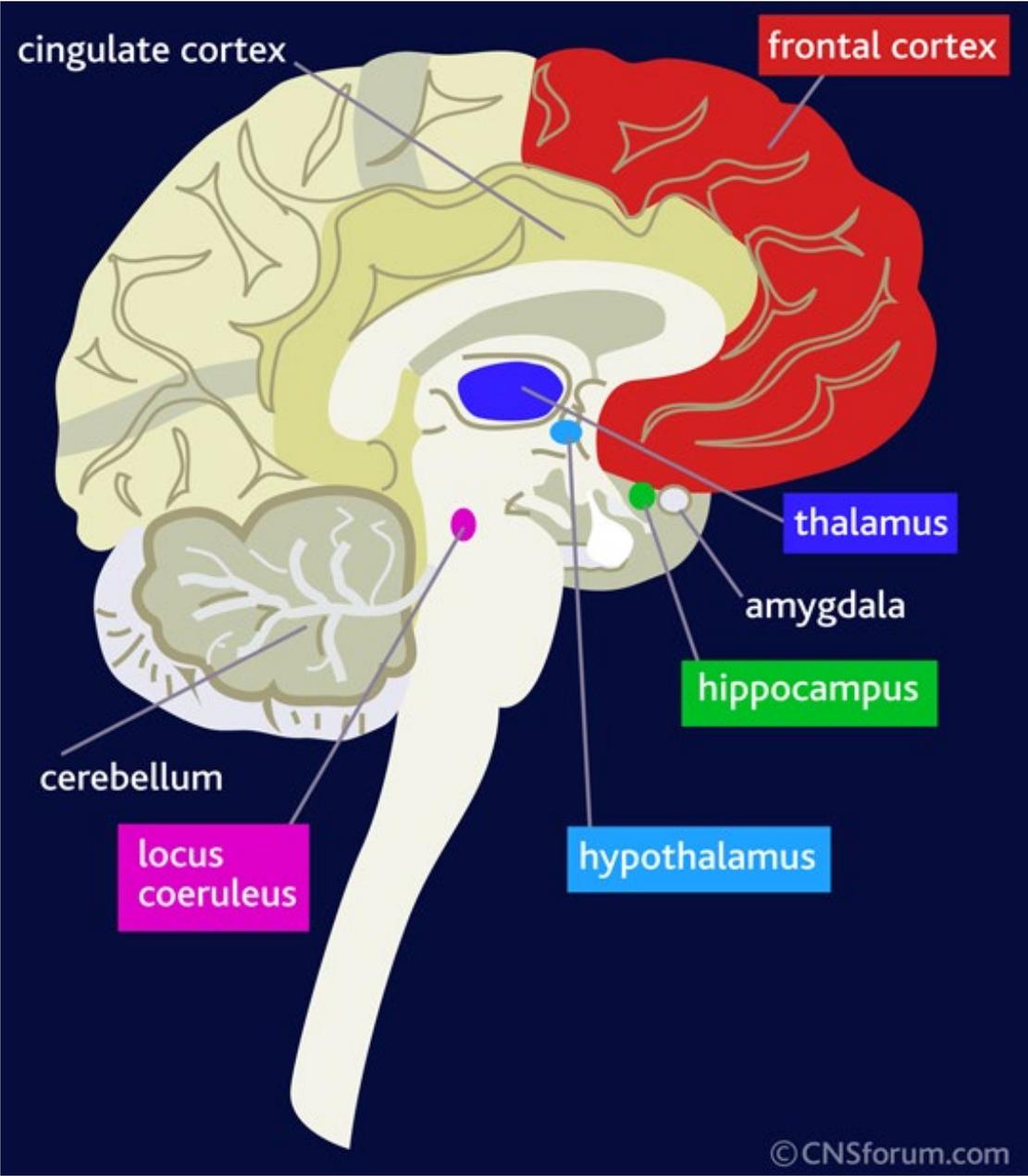
# Common Shock examples

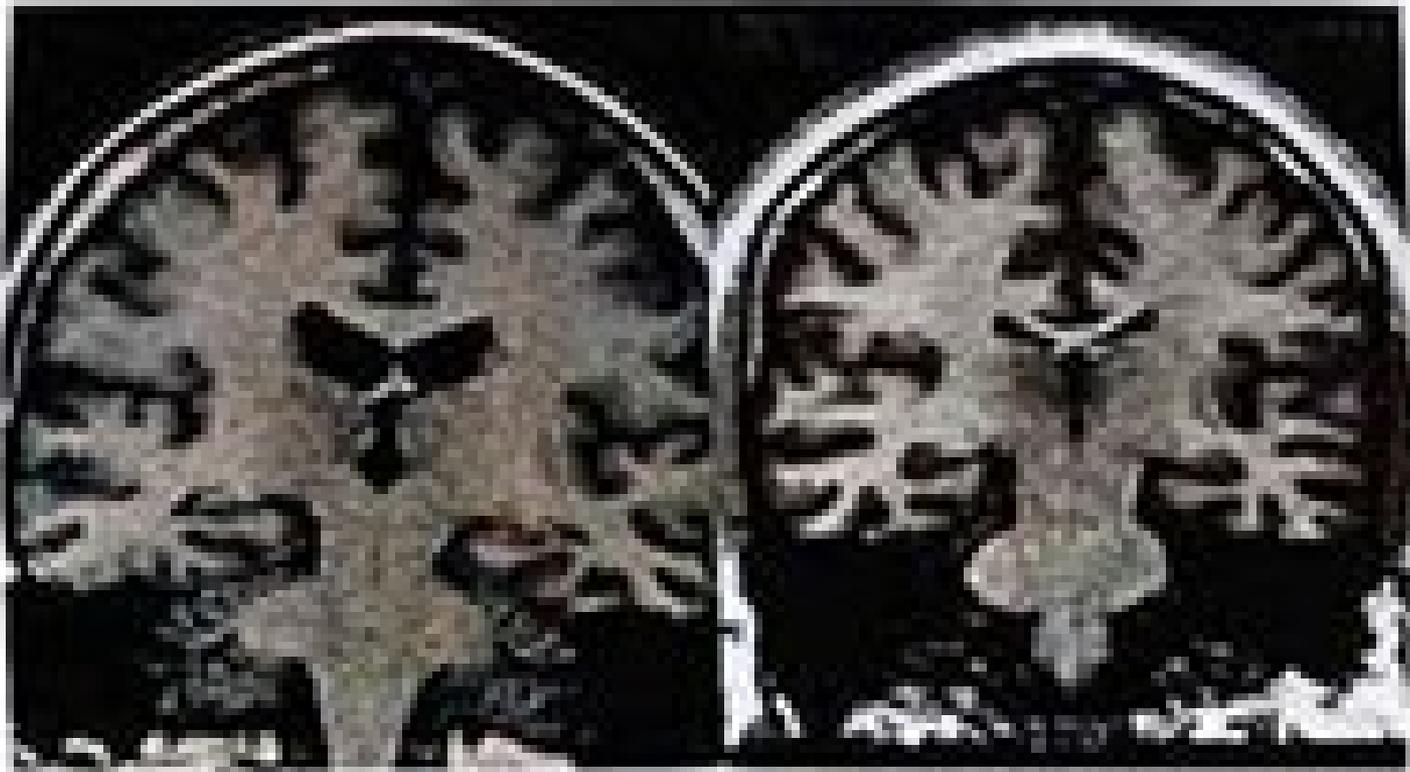
- Witnessing Violence on TV and in movies
- News Papers and websites
- Internet
- Witnessing Violence & Violation in everyday life (domestic, traffic, neighbors, etc.)
- Poverty
- Racism
- Criminal Justice System/School System
- Antagonism

# PTSD & PITS

- Post Traumatic Stress Disorder
- Perpetration (or Participation) Induced Traumatic Stress
  - From U.S. government data on its Vietnam veterans, those who say they killed have more severe PTSD than those who say they did not. (even in light combat)







PTSD

CONTROL

# Dignity Violations

- Dignity threats call up a reaction from our ancient emotion center as if our lives were on the line even when they are not.
- ...our instincts do not know the difference between a physical threat and a psychological threat
- Dignity is our inherent value and worth as human beings; everyone is born with it. Respect, on the other hand, is earned through one's actions.

*(Dignity, Donna Hicks)*

# ACE

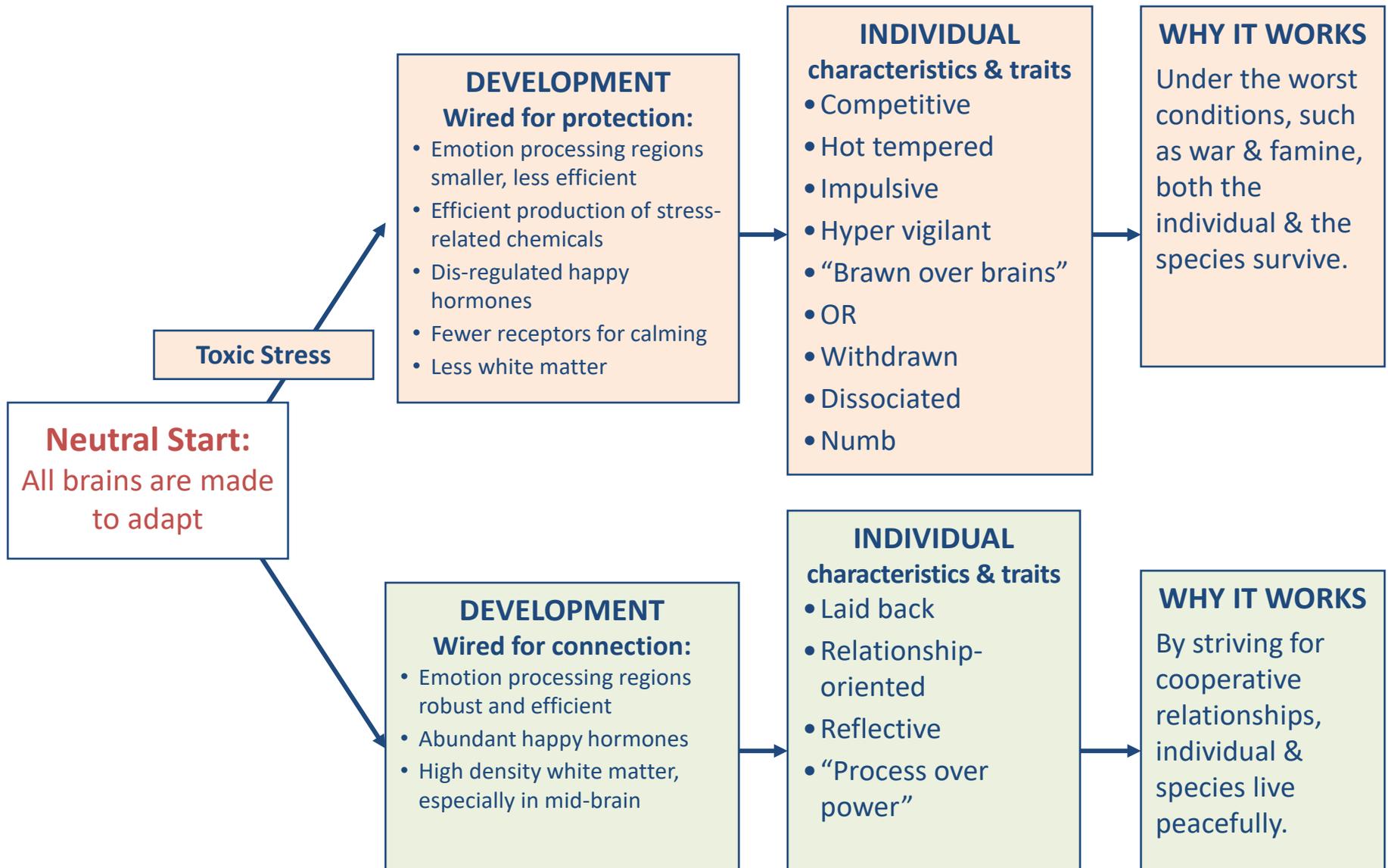
- Adverse Childhood Experience(s)
  - Kids are tough
  - The brain and the body remember
- The CDC-Kaiser Permanente Adverse Childhood Experiences (ACE) Study is one of the largest investigations of childhood abuse and neglect and later-life health and well-being (17,500 adults).

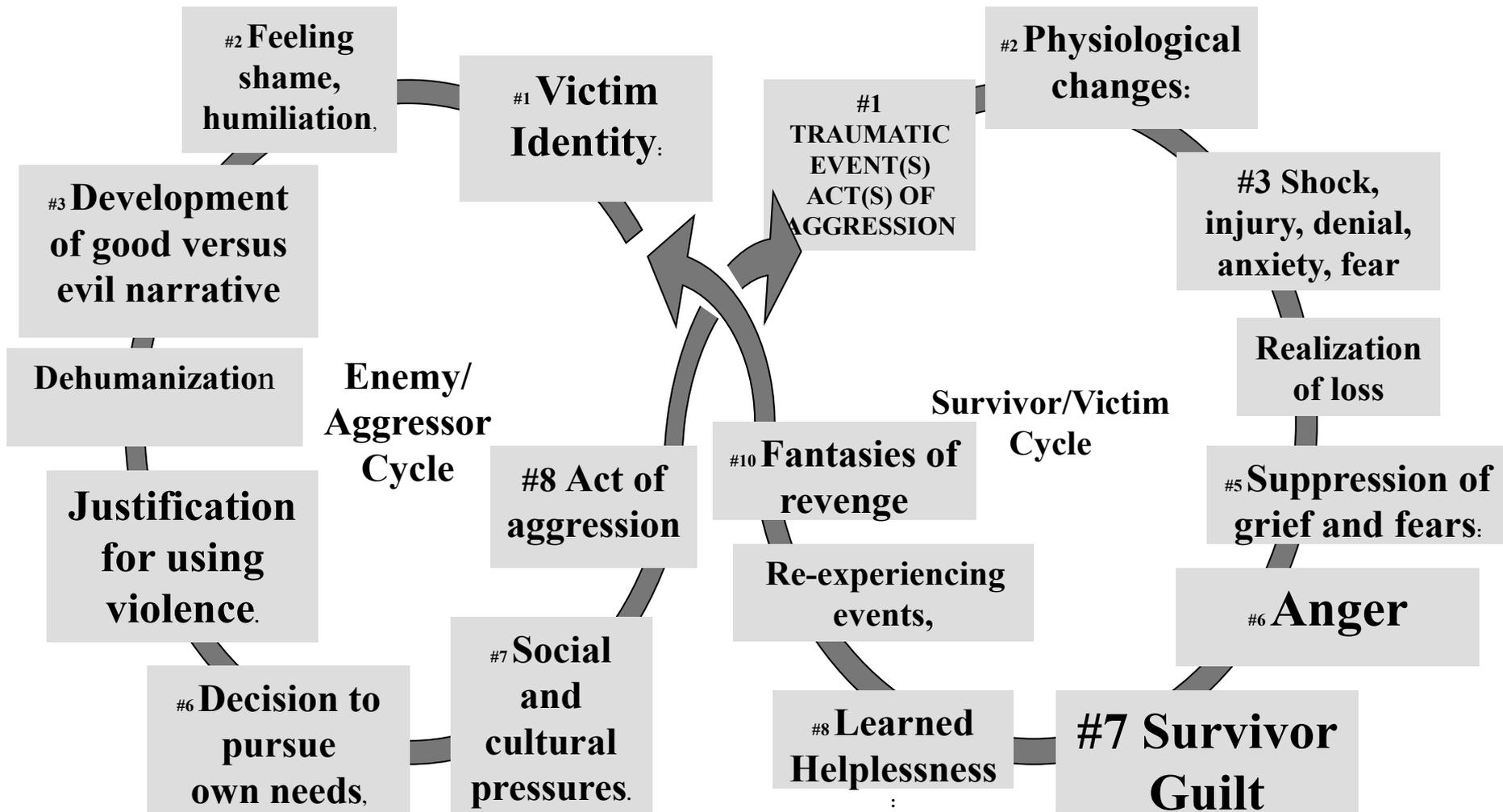
- Lived with a parent or guardian
  - 1) who got divorced or separated;
  - 2) who died;
  - 3) who served time in jail or prison;
- Lived with anyone
  - 4) who was mentally ill or suicidal, or severely depressed for more than a couple of weeks;
  - 5) who had a problem with alcohol or drugs;
- 6) Witnessed a parent, guardian, or other adult in the household behaving violently toward another
- 7) Was ever the victim of violence or witnessed any violence in his or her neighborhood; and
- 8) Experienced economic hardship “somewhat often” or “very often” (i.e., the family found it hard to cover costs of food and housing).

# ACEs

- 67% had at least one ACE
- 12.6% had four or more ACEs
  - Hepatitis and COPD (chronic obstructive pulmonary disease) 2.5 times higher than zero
  - Depression 4.5 times
  - Suicidality 12 times
  - More likely to develop heart disease and cancer
    - Repeated stress activation
      - Brain structure and function
      - Developing immune system

# Brains to Fit the Life We'll Live





	<b>Person Harmed</b>	<b>Community</b>	<b>Person who harmed</b>
<b>Who has been Harmed?</b>			
<b>What are the Needs?</b>			
<b>Whose Obligations?</b>			

# Homework?

- Think back to your homework and what we have discussed so far to answer the following questions.
  - Were there significant parts of the videos for you? What were they?
  - What are things necessary for breaking the Victim/Offender cycle?
  - What might a healing path look like?
    - What are the steps on that healing path?

Sticky Message

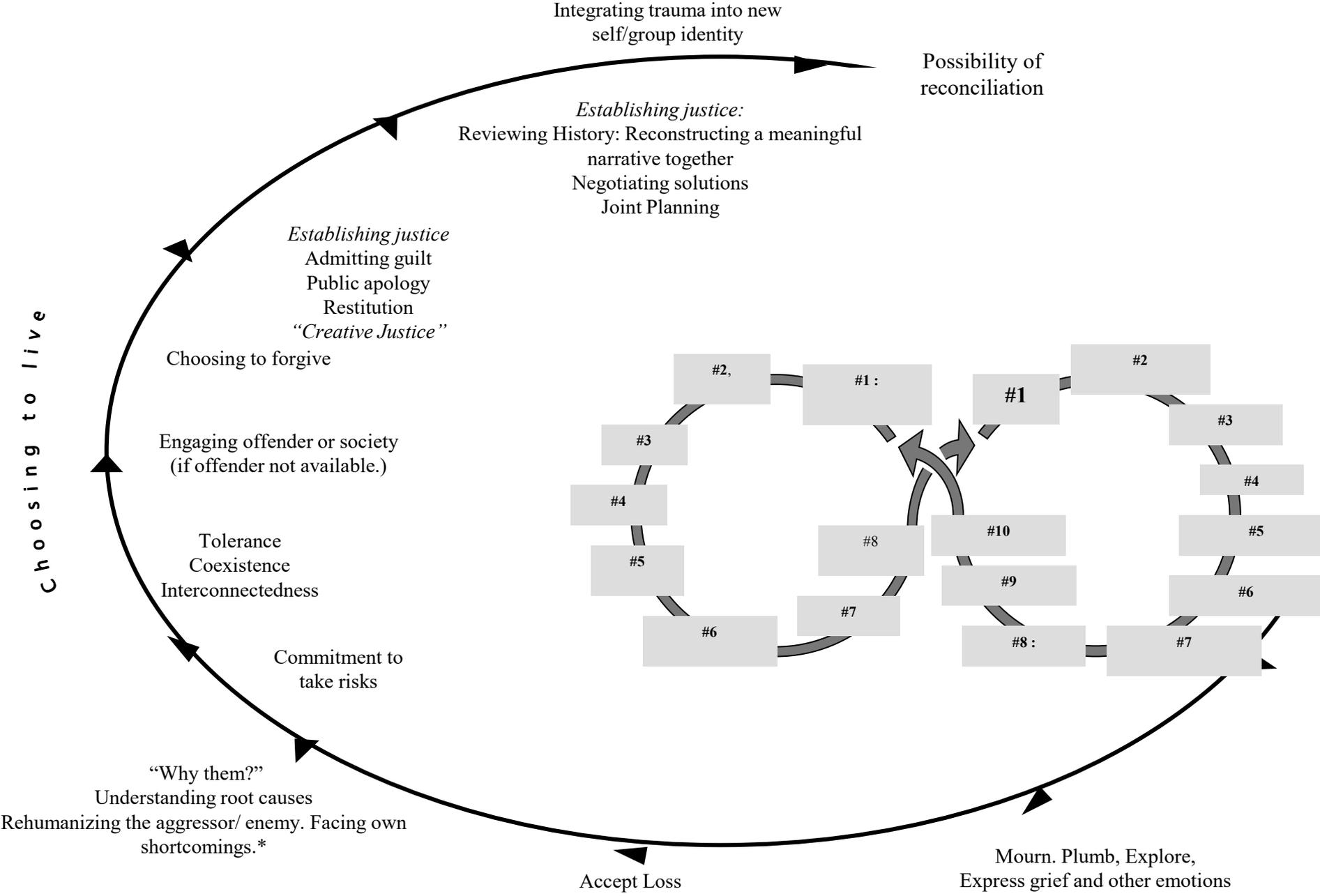
TRAUMA

NOT

TRANSFORMED

IS

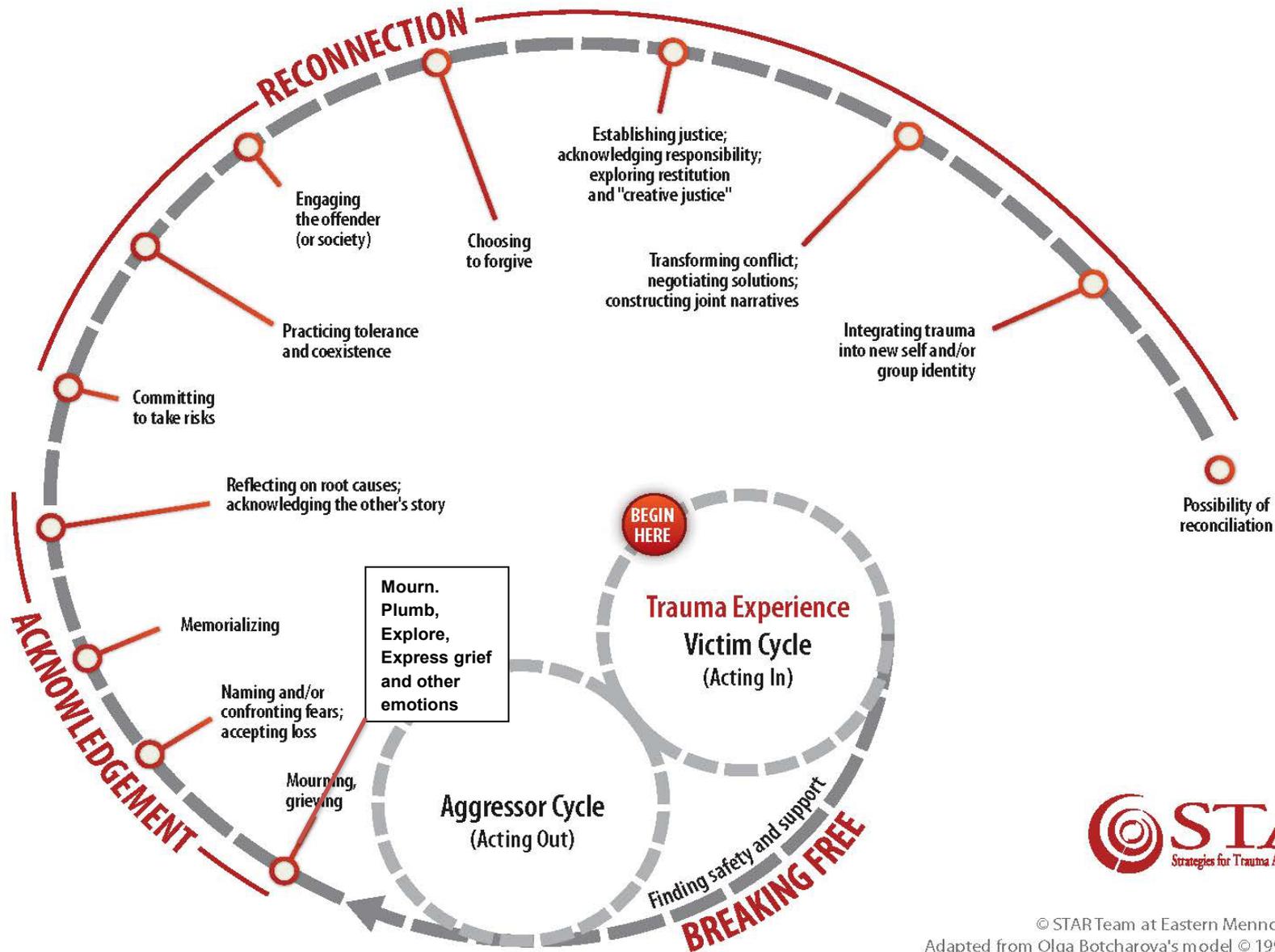
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\*This does not apply to all cases; for example, child abuse.

# Trauma Healing Journey: Breaking the Cycles

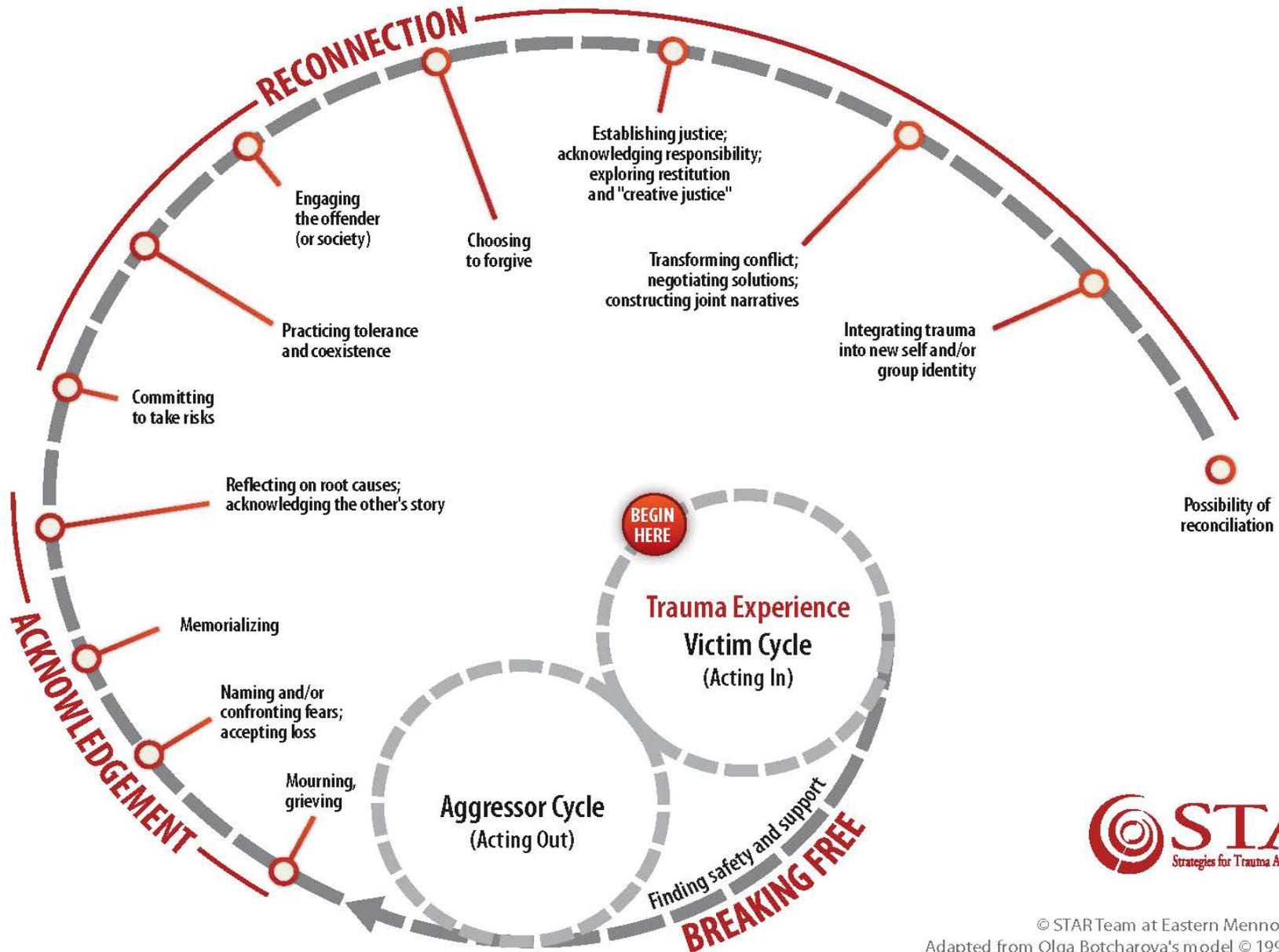
# Breaking Cycles of Violence • Building Resilience



# Reflect

- Find a partner
- Share at least one thing that you are going to take away from today.
- Why does that one thing stand out to you?

# Breaking Cycles of Violence • Building Resilience



**TRAUMA  
TRANSFORMED  
IS HEALING  
TRANSFERRED**

Come up with three questions about the healing path (but not about forgiveness).

1. What keeps you from forgiving?
2. Forgive and Forget?
3. How do we, as victims, acknowledge the victim in our offender?
4. What role, if any, does forgiveness play in healing our traumas?
5. Talk about self-forgiveness.
  - What is it?
  - How to do it?

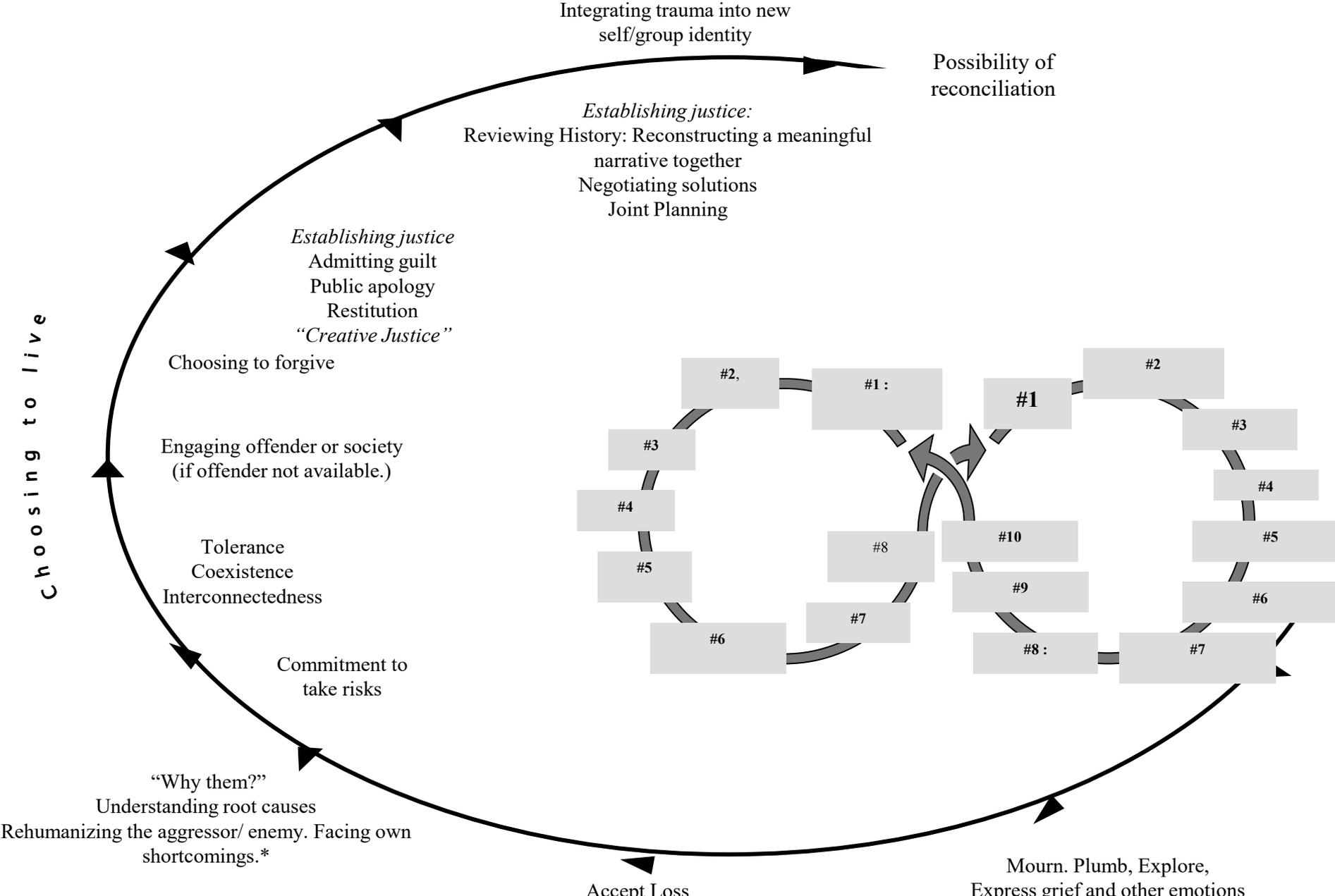
# Group Work

- **Talk about a time you forgave someone else.**
- **Talk about a time you were forgiven.**
- **How do you forgive violations created by systems (corporations, government, etc.) and society?**

**RED**

**BLUE**

**GREEN**



\*This does not apply to all cases; for example, child abuse.

# Trauma Healing Journey: Breaking the Cycles

## For Reflection

1. Reflect on the model in relationship to your life experience with your own healing path. With your partner, invoke *facts, feelings, thoughts, physiological reactions, behaviors, tools, and anything else* that resulted.
2. Consider the entire model in light of your life philosophy and/or faith tradition.
3. What understandings would you add to the model that reflect your understandings---and where? For example: confession, vindication, mercy, etc.
4. Have you experienced something that is not presented in the model? How would that change the model?
5. How might your life philosophy or faith practice alter the model? What changes would you make?
6. **How do you work with your own common shocks?**
7. How might this healing model be used in some of our own common shocks?

What does it take to break free  
of the cycle of  
victim/offender?

What are tools you have used  
for transformations?

- **Safety: emotional, spiritual and/or physical**
  - **The danger here is when safety is a substance.**
- **Choice/decision of victim/survivor;**
- **An awareness of healing options (seeing hope).**
- **An understanding of trauma and what it does to us**
- **Available support:**
- **Ways victims/survivors memorialize: Hero's story**
- **Willingness to break patterns of learned helplessness and hopelessness**
- **Pain (facing it is better than re-cycling)**
- **Willingness to break patterns of learned helplessness and hopelessness**
- **Leadership**

- An awareness of healing options (seeing hope)

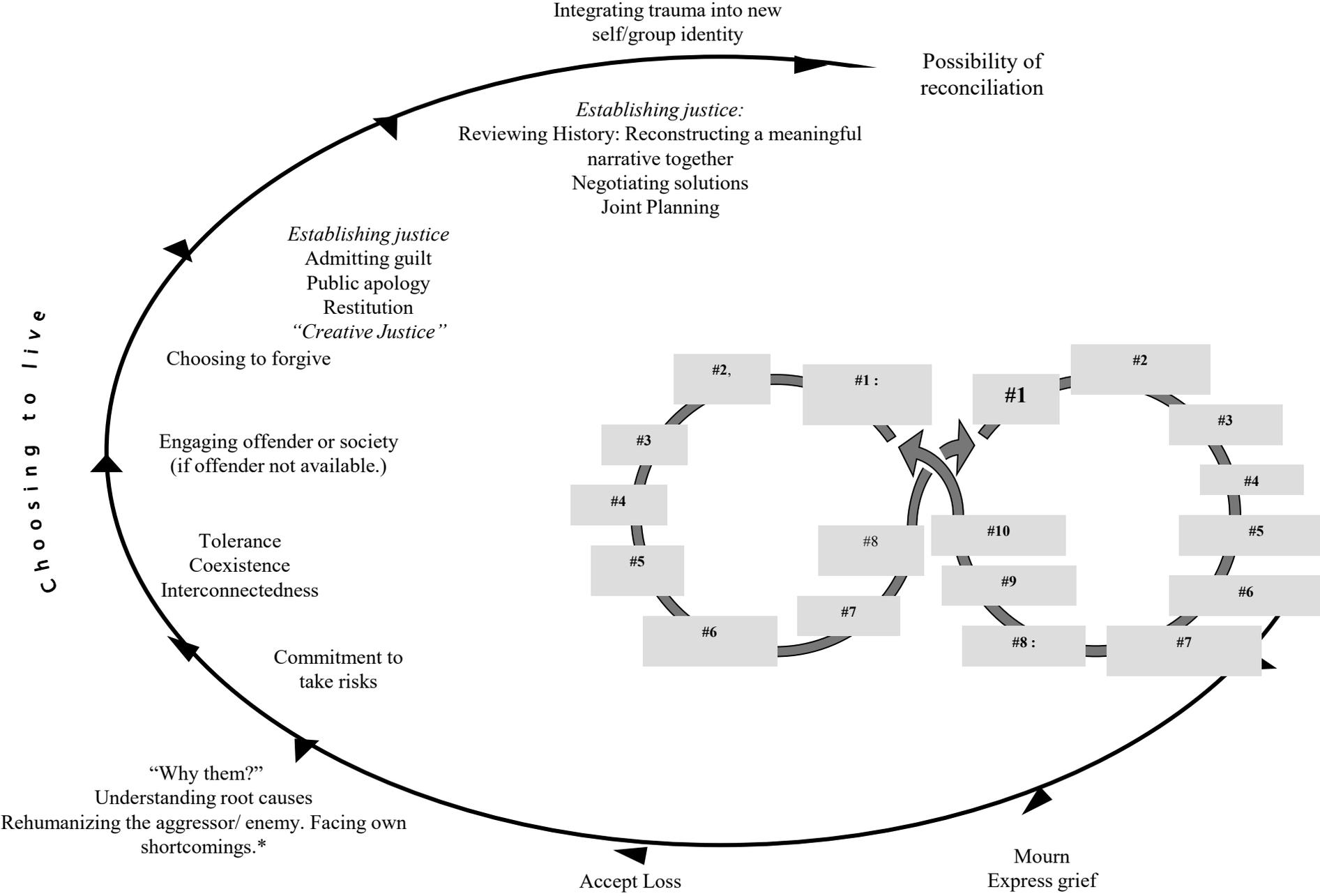
- An understanding of trauma and what it does to us

- Leadership  
(for communities, and  
individuals)

- Ways victims/survivors memorialize

- Pain (facing it is better than recycling)

- Willingness to break patterns of learned helplessness and hopelessness



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# Trauma Healing Journey: Breaking the Cycles



