

Trauma and Resilience of Individuals and Groups



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Outline



- Definitions of Trauma
- Traumatic Events
- Diagnoses of Acute Stress and PTSD
- Group Reactions
- Risk and Protective Factors
- Resilience
- Group Exercise

Defining Trauma



- Trauma: An event in which the person witnesses or experiences a threat to his or her own life or physical safety or that of others and experiences fear, terror, or helplessness. The event may also cause dissociation, confusion, and a loss of a sense of safety. Traumatic events challenge an individual's view of the world as a just, safe, and predictable place. Traumas that are caused by human behavior (e.g., rape, assault, toxic accidents) commonly have more psychological impact than those caused by nature (e.g., earthquakes).
 - From the APA Dictionary of Psychology

Defining Complex Trauma



- **Complex Trauma:** The term complex trauma describes both children's exposure to multiple traumatic events, often of an invasive, interpersonal nature, and the wide-ranging, long-term impact of this exposure. These events are severe and pervasive, such as abuse or profound neglect. They usually begin early in life and can disrupt many aspects of the child's development and the very formation of a self. Since they often occur in the context of the child's relationship with a caregiver, they interfere with the child's ability to form a secure attachment bond. Many aspects of a child's healthy physical and mental development rely on this primary source of safety and stability.
 - From The National Child Traumatic Stress Network

Examples of Trauma

• Trauma

- Community violence (e.g., shooting, mugging, burglary, physical or sexual assault, bullying)
- Sexual and/or physical abuse
- Natural disaster such as a hurricane, flood, fire, or earthquake
- Being in or witnessing a serious car accident
- Sudden unexpected or violent death of someone close (e.g., suicide, accident)
- Serious injury (e.g., burns, dog attack), major surgery (e.g., heart surgery), or life-threatening illness (e.g., childhood cancer)
- Domestic or family violence, dating violence
- War or political violence (e.g., civil war, terrorism, refugee)

• Complex Trauma

- Concentration camps
- Prisoner of War camps
- Hostage situations
- Long-term domestic violence
- Long-term child physical and/or sexual abuse
- Human trafficking and slavery

Personal Account of Va Tech Shooting



- [**Va. Tech Shooting Survivor Recounts 2007 Massacre and Urges Obama, Romney to Address Gun Violence**](#)

Acute Stress Reaction



- In response to exceptional physical and mental stress
- Usually subsides within hours or days.
- An initial state of "daze". Affects consciousness, narrows attention, inability to comprehend stimuli, and disorientation.
- Further withdrawal from the surrounding situation, or by agitation and over-activity (flight reaction or fugue).
- Autonomic signs of panic anxiety (tachycardia, sweating, flushing) are commonly present.
- Symptoms usually appear within minutes of the impact of the stressful stimulus or event, and disappear within two to three days (often within hours).
- Amnesia for the episode may be present.
- Individual vulnerability and coping capacity play a role in the occurrence and severity of acute stress reactions.

DSM V Definition of PTSD



- **Criterion A: stressor**

- The person was exposed to: death, threatened death, actual or threatened serious injury, or actual or threatened sexual violence, as follows: **(1 required)**
- Direct exposure.
- Witnessing, in person.
- Indirectly, by learning that a close relative or close friend was exposed to trauma. If the event involved actual or threatened death, it must have been violent or accidental.
- Repeated or extreme indirect exposure to aversive details of the event(s), usually in the course of professional duties (e.g., first responders, collecting body parts; professionals repeatedly exposed to details of child abuse). This does not include indirect non-professional exposure through electronic media, television, movies, or pictures.

DSM V Definition of PTSD continued



- **Criterion B: intrusion symptoms**
 - The traumatic event is persistently re-experienced in the following way(s): **(1 required)**
 - Recurrent, involuntary, and intrusive memories. Note: Children older than 6 may express this symptom in repetitive play.
 - Traumatic nightmares. Note: Children may have frightening dreams without content related to the trauma(s).
 - Dissociative reactions (e.g., flashbacks) which may occur on a continuum from brief episodes to complete loss of consciousness. Note: Children may reenact the event in play.
 - Intense or prolonged distress after exposure to traumatic reminders.
 - Marked physiologic reactivity after exposure to trauma-related stimuli.

DSM V Definition of PTSD continued



- **Criterion C: avoidance**

- Persistent effortful avoidance of distressing trauma-related stimuli after the event: **(1 required)**
- Trauma-related thoughts or feelings.
- Trauma-related external reminders (e.g., people, places, conversations, activities, objects, or situations).

DSM V Definition of PTSD continued



- **Criterion D: negative alterations in cognitions and mood**
 - Negative alterations in cognitions and mood that began or worsened after the traumatic event: **(2 required)**
 - Inability to recall key features of the traumatic event (usually dissociative amnesia; not due to head injury, alcohol or drugs).
 - Persistent (and often distorted) negative beliefs and expectations about oneself or the world (e.g., "I am bad," "The world is completely dangerous.").
 - Persistent distorted blame of self or others for causing the traumatic event or for resulting consequences.
 - Persistent negative trauma-related emotions (e.g., fear, horror, anger, guilt or shame).
 - Markedly diminished interest in (pre-traumatic) significant activities.
 - Feeling alienated from others (e.g., detachment or estrangement).
 - Constricted affect: persistent inability to experience positive emotions.

DSM V Definition of PTSD continued



- **Criterion E: alterations in arousal and reactivity**
 - Trauma-related alterations in arousal and reactivity that began or worsened after the traumatic event: **(2 required)**
 - Irritable or aggressive behavior.
 - Self-destructive or reckless behavior.
 - Hypervigilance.
 - Exaggerated startle response.
 - Problems in concentration.
 - Sleep disturbance.

Personal Accounts of PTSD



- www.veteransfamiliesunited.org
 - [Joe Collins](#)

Group Reactions



- Communities as a whole can also experience trauma.
- A community-threatening *event*, have a shared *experience* of the event, and have an adverse, prolonged *effect*.
 - a flood, a hurricane or an earthquake or usurping homelands, forced relocation, servitude, or mass incarceration
- Transmitted from one generation to the next (often referred to as historical, community, or intergenerational trauma).
- Communities can *collectively* react to trauma in ways that are very similar to the ways in which individuals respond.
 - They can become hyper-vigilant, fearful, or they can be re-traumatized, triggered by circumstances resembling earlier trauma, whether recognized or unrecognized.
 - Trauma can be built into cultural norms and passed from generation to generation.
- From the Substance Abuse and mental Health Service Administration (<http://www.samhsa.gov/traumajustice/traumadefinition/definition.aspx>)

Examples



- Can you think of groups that are categorically fearful or hyper-vigilant?
- Can you identify the historical group trauma?

Risk Factors for Developing PTSD



- ***The nature and intensity of the traumatic event***
- ***The length of exposure to stressful and traumatic situations***
- ***The number of other stressors being experienced at the same time***
- ***The nature and intensity of traumatic events experienced in the past***
- ***History of previous psychiatric illness***
- ***Lack of social support***
- ***Temperament and personality***

Protective Factors Against Developing PTSD



- ***Social support***
- ***Optimism and healthy self-esteem***
- ***Spirituality***
- ***Adaptability***
- ***Tendency to seek meaning***
- ***Ability to mentalize***
- ***Curiosity and openness to experience***
- ***Aptitude***

- ***Risk and protective factors adopted from: The Headington Institute,***

Resilience



- Defining Resilience: The process and outcome of successfully adapting to difficult or challenging life experiences, especially through mental, emotional, and behavioral flexibility and adjustment to external and internal demands. A number of factors contribute to how well people adapt to adversities, predominant among them (a) the ways in which individuals view and engage with the world, (b) the availability and quality of social resources (c) specific coping strategies
 - From the APA Dictionary of Psychology



RESILIENCE TRAINING

Formerly Battlemind

Resilience TRAINING...

Offers strength-based, positive psychology tools to aid Soldiers, Leaders and Families in their ability to grow and thrive in the face of challenges and bounce back from adversity. Training and information is targeted to all phases of the Soldier deployment cycle, Soldier life cycle and Soldier support system.

Read [More](#) about Resilience Research and Training.

CHOOSE YOUR AREA OF INTEREST:



INSTITUTIONAL RESILIENCE

Institutional (Life-Cycle) Resilience Training Modules provide Initial Military Training (IMT) and progressive Professional Military Education (PME) Resilience Training timed to the specific phases of the Soldier's career. Soldiers and Leaders are trained in the principles and skills that enhance Soldier and organizational resilience and reduce the barriers to seeking behavioral health care.

[Go to Institutional Resilience](#)



OPERATIONAL RESILIENCE

Operational (Deployment-Cycle) Resilience Training Modules train Soldiers and Leaders in preparing for and managing the realities of the deployment and the transition back home.

[Go to Operational Resilience](#)



FAMILY

Family Resilience Training Modules train the Soldiers' Families in preparing for and managing the realities of the deployment and the transition back home.

[Go to Family.](#)



MRT/Facilitators

Master Resilience Trainer (MRT) and MRT Facilitator (MRT-F) Course Training Materials and References.

[Go to MRT/Facilitators](#)



Behavioral Health (MEDCOM) Resources

Information, training products and resources designed for behavioral health and primary care providers.


[Go to Behavioral Health \(MEDCOM\) Resources](#)

Examples of Resilience in the Military



- Strong at the Broken Places: Portraits of Reintegration and Success
 - US Dept of Veteran Affairs initiative (<http://www.blogs.va.gov/strongatbrokenplaces/>)

An Example of Personal Resilience

HOME SEX/LOVE JANE BEAUTY ISSUES CLOTHES IHTM ENTERTAINMENT MORE **xoJane** 

NOW ON JANE'S PHONE I'M GETTING ALL FANCIED UP TO MEET YOU TODAY October 9, 2013 at 12:19PM


xoJane

IT HAPPENED TO ME: I Went From A Promising Journalist To A Knocked Up, Unmarried Waitress


It Happened To Me: My Twin Sister Begged Me To Let Her Kill Herself And I Said Yes

I'M DAISY COLEMAN, THE TEENAGER AT THE CENTER OF THE MARYVILLE RAPE MEDIA STORM, AND THIS IS WHAT REALLY HAPPENED


You may have heard my story, thanks to Anonymous who trended #justice4daisy. I'm not done fighting yet.


 **Daisy Coleman**
Oct 18, 2013 at 9:00am | 1033 comments


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May We Suggest

DIY 
How Not To Be A Dick To Your Celiac-Suffering, Gluten-Sensitive, Gluten-Intolerant Or Avoiding-Gluten-Because-it's-Trendy Friend

Clothes 
OPEN THREAD: What Do You Wear To Work? Do You "Dress For The Job You Want?" 255


Issues 
Children Need To Fail Sometimes: Why You Shouldn't Overparent Your Kids 47

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Read Jane's Diary 

Subscribe to the weekly newsletter Out every Friday!

The Good and Bad News About Resilience



- [Dr. Donald Bosch, Director of Clinical Services at The Headington Institute](#)

Group Exercise:

Building Resilience at CMA and Beyond




- Forms groups of 5-6 members
- Brainstorm and discuss ways to build greater resilience among CMA students/cadets
 - Consider the material covered in class today
 - ✦ Reducing risk factors; increasing protective factors and resilience
 - Consider how and where it can be best applied in the CMA community
 - ✦ Academic life, student life, on/off campus, clubs sports and organizations, through faculty/staff, etc.
- Generate three areas/ideas for intervention
- Share with the class

Treatment and Healing



- **Formal psychological treatments**
 - Cognitive Behavioral Therapy
 - ✦ Prolonged Exposure Therapy
 - Eye Movement Desensitization Reprocessing Therapy (EMDR)
- **Peer-based services**
 - Independent and community based
 - Part of the Department of Veterans Affairs
 - Mentors organized as part of a veteran's treatment court program or other jail diversion initiatives

Vet-to-Vet (<http://vet2vetusa.org/>)



VET to VET
Gladly Teach, Gladly Learn


USA

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Welcome!

Vet to Vet is a consumer/provider partnership program that utilizes veterans in recovery in a peer-counseling capacity to help other veterans. Vet to Vet is administered by veterans who themselves have been consumers of VA mental-health services.

Vet to Vet provides a six-week, peer-facilitator training program that teaches veterans how to facilitate peer group sessions and introduce program learning topics. We welcome your support!



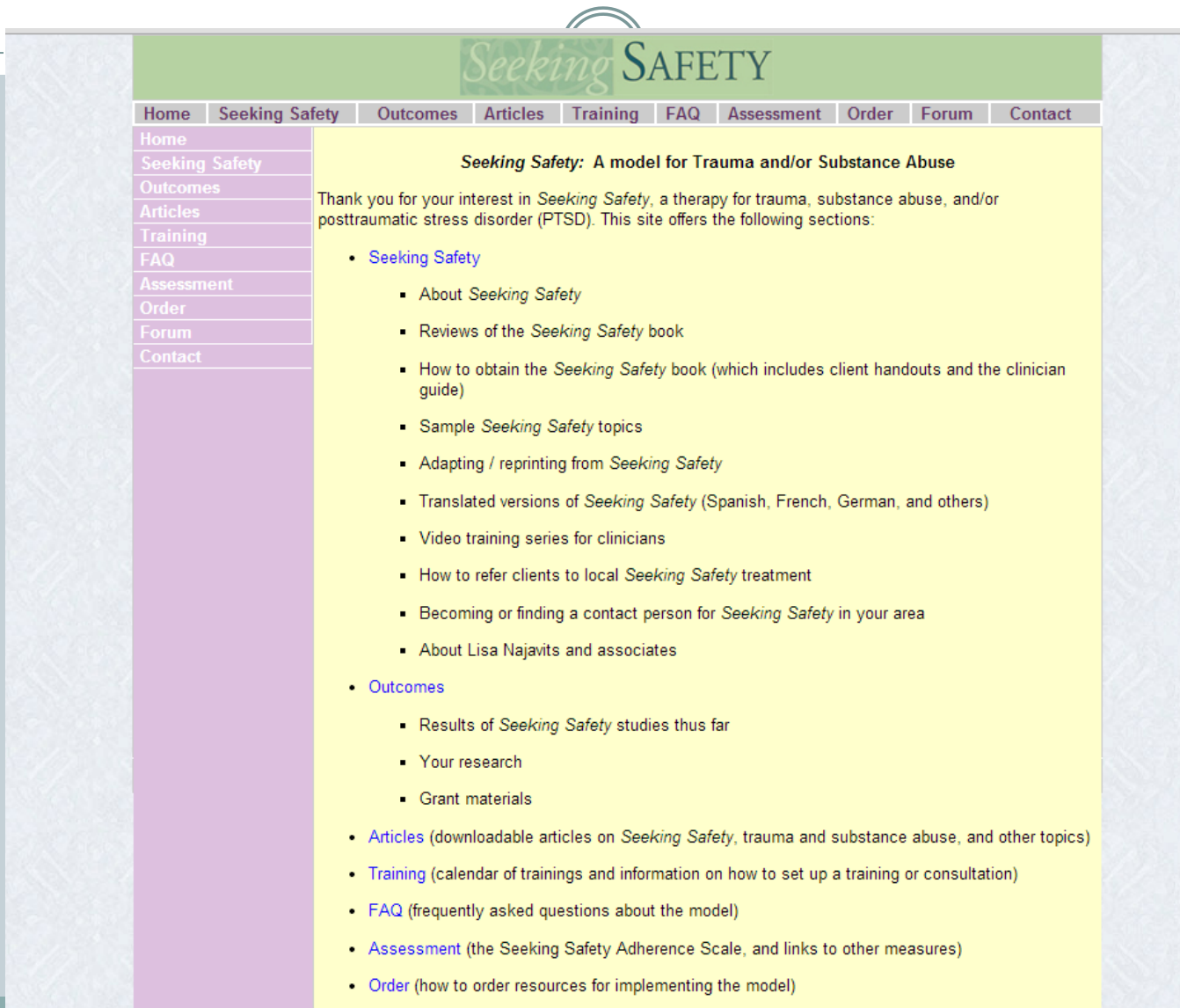
Social Network of Care



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Seeking Safety (<http://www.seekingsafety.org/>)



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Seeking Safety: A model for Trauma and/or Substance Abuse

Thank you for your interest in *Seeking Safety*, a therapy for trauma, substance abuse, and/or posttraumatic stress disorder (PTSD). This site offers the following sections:

- **Seeking Safety**
 - About *Seeking Safety*
 - Reviews of the *Seeking Safety* book
 - How to obtain the *Seeking Safety* book (which includes client handouts and the clinician guide)
 - Sample *Seeking Safety* topics
 - Adapting / reprinting from *Seeking Safety*
 - Translated versions of *Seeking Safety* (Spanish, French, German, and others)
 - Video training series for clinicians
 - How to refer clients to local *Seeking Safety* treatment
 - Becoming or finding a contact person for *Seeking Safety* in your area
 - About Lisa Najavits and associates
- **Outcomes**
 - Results of *Seeking Safety* studies thus far
 - Your research
 - Grant materials
- **Articles** (downloadable articles on *Seeking Safety*, trauma and substance abuse, and other topics)
- **Training** (calendar of trainings and information on how to set up a training or consultation)
- **FAQ** (frequently asked questions about the model)
- **Assessment** (the Seeking Safety Adherence Scale, and links to other measures)
- **Order** (how to order resources for implementing the model)

Community and Group Healing



- Making sense of the trauma experience and telling the story of what happened using the language and framework of the community is an important step toward healing community trauma.