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Complex Trauma

Trauma is one of those terms everyone has heard, but not many people can define. Some people reserve "trauma" for very specific situations, while others use it in a broader way. Both perspectives are valid, so it is important to recognize what kind of experiences may be traumatic.

After hearing my patients talk about their experiences and studying what other experts the literature on trauma, my working definition of trauma is:

Trauma is an experience that overwhelms our capacity to regulate our emotions and results in fragmentation and dissociation.

I think this definition captures three important ideas:

1. Trauma is an experience

This can be understood in at least two ways:

- The origins of trauma: What defines whether a situation is traumatic or not, is not the situation itself but the individual's subjective experience of it. Particularly when we are adults, what can become traumatic varies widely, based on our past experiences, our upbringing, how we feel about ourselves and others, etc.
- 2. The effects of trauma: This is the most important aspect of trauma. What defines trauma is not something that happened in the past, but the ways in which it stays with us and is experienced today. The details of what happened are not as important as what they mean for us, how we were able to cope with it, and what happens in our body and our mind when those feelings come back today.

Read more about trauma as an experience, not an event, in this post.

2. Trauma impairs our capacity to regulate our emotions.

When we experience trauma and there is a situation that triggers it, it becomes very hard not to react as if the traumatic situation was happening again. We don't really "remember" trauma: we live it all over again.

When we experience a situation, consciously or not, as threatening or dangerous, we feel unsafe, worried, or anxious. As a result, our body will get into one of three modes, or a combination of them:

- 1. **Fight:** We might be in fight mode when we respond to an impending threat by reacting with irritation, anger, aggression, or even violence.
- 2. **Flight:** We might be in flight mode when we feel we need to stop talking about it, or when we need to leave the place or situation that feels unsafe.
- 3. **Freeze:** When a situation is experienced as *too* overwhelming to even react, we freeze. We may experience this as being paralyzed, unable to move, to say anything, to make decisions, or we may suddenly feel sleepy and fatigued. This is also the experience of dissociation, when our mind becomes numb or we have to mentally remove ourselves from the situation.

The "fight/flight" response is called *hyper-arousal*, because our body gets too activated, while "freeze" is called *hypo-arousal*, because our body and our mind shut down. The space in between, sometimes called the <u>window of tolerance</u>, allows us to process our feelings and thoughts, make sense of what is happening, and connect with others.

Fight, flight, and freeze responses make it difficult to regulate our emotions.

These are reactions programmed in our brain to try to keep us alive, so we don't really *choose* to respond this way. They are activated in the original traumatic experience, but also each time that experience comes back to haunt us. Trauma is not remembered, but reenacted.

3. Trauma creates fragmentation and dissociation

Fragmentation refers to the process of "splitting" parts of the overwhelming traumatic experience, in order to make it more manageable, to be able to move on, or to try to maintain a unified sense of "self" without falling apart. It is as if we need to break down parts of our experience and distance ourselves (or dissociate) from some of them. This is not an intentionally conscious decision, and we may live for a long time without being aware of it.

While fragmentation and dissociation may have been necessary to deal with traumatic experiences, they present multiple challenges, including:

- We live a fragmented life, with parts of us we are not aware of, or that we deny, dislike, or even hate.
- We feel we cannot acknowledge, accept, and love ourselves completely.

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 We have a hard time getting in touch with our feelings, leaving us numb and empty.

- We find it difficult to be in honest and vulnerable relationships with ourselves and with others.
- We sometimes feel certain situations are unreal, like a dream, and we don't feel we can be ourselves.

I believe it is important to distinguish between two types of dissociation:

A. Neurological dissociation

Our brain's main goal is to ensure our survival. As a result, when confronting or reliving a traumatic experience, parts of our brain will either become hyperactive or shut down. For example, the part of our brain in charge of detecting danger (called the amygdala) becomes hypersensitive, making us overreact to relatively small things, like a specific sound or the feeling of rejection. In contrast, one of the parts of the brain responsible for language (called the Broca area) typically shuts down during trauma. This makes it difficult for people to tell a story of what happened, that really captures the extent of the experience.

As a result of this process, physical sensations (like sounds or images) are dissociated from the experience, as well as thoughts and feelings. This doesn't mean that they are no longer present, though. They are stored in our body, in the form of fight, flight, or freeze reactions. As such, they still impact our life today, defining our feelings, thoughts, and behaviors. In this post you can read about the impact of trauma on the brain.

B. Dissociation of meaning

I believe there is much more to the experience of trauma than what happens in the brain. When I use the term "dissociation of meaning," I refer to the way in which trauma disconnects us from the true meaning the experience had for us. The objective facts are not as important as the meaning, conscious or not, that we give to our experience. This subjective reality might be too painful, confusing, dangerous, or overwhelming.

Our mind sometimes goes to great lengths to defend itself from being flooded by the feelings triggered by trauma. For example, we discount our experience, believe it is not important, that it never happened, or that it was not that bad. In order to do this, we sometimes discount, deny, or shut down

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our feelings, our needs, our wishes, and our hopes. As a result, we don't know what we need or who we are, because we may have learned not to think about it. Or we may not be able to accept some of our feelings, like the part of us who loves the ones we hate and hates the ones we love. We live in a distorted world, denying our feelings or projecting them onto others.

Types of Trauma

There are multiple types of trauma, but I think it is very important to distinguish between two of them:

1. Traditional, acute, or "shock" trauma

The most common understanding of trauma relates to the "official" definition of Post Traumatic Stress Disorder (PTSD), provided by the Diagnostic and Statistical Manual of Mental Disorders (DSM). The latest version of the DSM states that PTSD may occur when someone is exposed to a traumatic event, such as "actual or threatened death, serious injury, or sexual violence." Some people who fall in this category include war veterans, policemen or firefighters, as well as survivors of violent crimes, natural disasters, serious accidents, or rape.

All these situations are potentially traumatizing, as they are overwhelming and create fragmentation and dissociation. The symptoms of this type of trauma may include nightmares, intrusive or obsessive thoughts, hypersensitivity to external stimuli (e.g., a particular sound or the way someone treats us), increase irritability, anxiety, or depression.

2. Complex developmental trauma

This type of trauma does not require exposure to a single particular event, but is the result of chronic and ongoing experiences during childhood.

Complex developmental trauma is characterized by an upbringing defined by patterns of inconsistency, neglect, rejection, abandonment, or emotional and psychological abuse. These experiences may arrest our emotional and psychological development, and add up to each other, making it a complex phenomenon.

One of the most painful outcomes of complex developmental trauma is that we feel unseen and unheard by physically or emotionally absent parents. Specific traumatic patterns experienced during childhood may include:

Growing up in a home where feelings were not expressed, not allowed,

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or even punished. As a result, we learn to keep them to ourselves, ignore them, deny them, or not even feel them at all.

- Living in constant fear that our parents' love and attention will be withdrawn, or was conditional to us behaving in certain way. We may learn that being ourselves is not enough, and that we must "perform" in order to feel loved.
- Having to be a parent to our parents from an early age, needing to attend to their needs and their mood. When we are parentified children, it is more difficult to recognize our own needs and we start believing they will never be met.
- Not feeling that we could count on our parents, or anyone else, to help
 us process, soothe, and heal painful emotions or experiences. As a
 result, we may have developed destructive ways to self-soothe with
 thoughts, behaviors, or substances.

Complex developmental trauma is a very insidious form of trauma. It is cumulative and it is hard to identify as traumatic because we could not know any better: that is just how life was at home. In fact, people who have experienced complex trauma do not typically come seeking help for trauma, and may not even consider they had any traumatic experiences. Many of the feelings people bring to therapy might be expressions of complex developmental trauma: depression, anxiety, irritability, addictions, relationship issues, a sense of emptiness, feelings of worthlessness, low self-esteem, feeling stuck, and so on.

Many times our relationships as adults trigger traumatic responses based on past painful experiences. Many times we live in denial about our needs, our wishes, or parts of our identity, because we learned to ignore them or to keep them at bay. Many times we engage in patterns of thoughts, feelings, or behaviors that we learned in the past in order to cope or survive, but that are no longer functional today. These are some of the effects of trauma that therapy can help with, by creating a space to develop awareness, understanding, self-compassion, and unconditional love for every part of ourselves.