



Understanding

TRAUMA

A SURVIVOR'S GUIDE

problems chronic anxiety hopelessness difficulty making decisions addictions
chaotic trouble relaxing feeling unreal or out of body problems with relationships
disorders panic attacks trouble keeping friends insomnia numbing little or
memory overwhelming feelings hypervigilance flashbacks headaches little or no memories

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Studies show that many more symptoms than we previously realized originate in trauma.

Which ones apply to you?

Adverse Childhood Experiences (ACE) Study, Kaiser Permanente 1995-1997,
Dissociative Experiences Scale (DES)

Symptoms Checklist

HISTORY OF:

- Attachment failure
- Childhood neglect
- Community violence
- Criminal violence
- Discrimination
- Divorce
- Domestic violence
- Early loss (death of caretaker, adoption)
- Family separation
- Hate crime
- Medical trauma
- Physical abuse
- Sexual assault

EMOTIONAL SYMPTOMS:

- Anger/Aggression
- Anxiety/Panic attacks
- Can't relax
- Chronic loneliness/isolation
- Chronic self-criticism
- Depression
- Overwhelming emotions
- Fears/phobias
- Mood shifts/Irritability
- Hopelessness

- Night Terrors/Nightmares
- Numb/Detached
- Overwhelmed
- Painful indecision
- Unresolved grief
- Difficulty being alone
- Difficulty feeling close
- Difficulty making/keeping friends
- Difficulty with boundaries
- Frequent conflict with others

BEHAVIORAL SYMPTOMS:

- Addictions
- Can't motivate
- Can't slow down
- Eating disorders
- Impulsiveness/ Manic symptoms
- Inability to manifest
- Self harm
- Sexual difficulties
- Social isolation
- Suicidal ideation
- Underemployed

COGNITIVE SYMPTOMS:

- Can't make decisions
- Chronic self criticism

- Difficulty concentrating
- Frequent confusion
- Memory problems
- Negative/anxious rumination
- Negative beliefs about self/others

SOMATIC/PHYSICAL SYMPTOMS:

- Autoimmune disease
- Chronic back pain
- Chronic exhaustion/fatigue
- Headaches
- Insomnia
- Irritable bowel syndrome
- Lack of appetite
- Unexplained physical symptoms

SENSORY SYMPTOMS:

- Hallucinations: visual, auditory, sensory, olfactory
- Lost time (inability to account for hour/day/week/year)
- Parts of the body feel unreal
- World feels unreal

Window of Tolerance

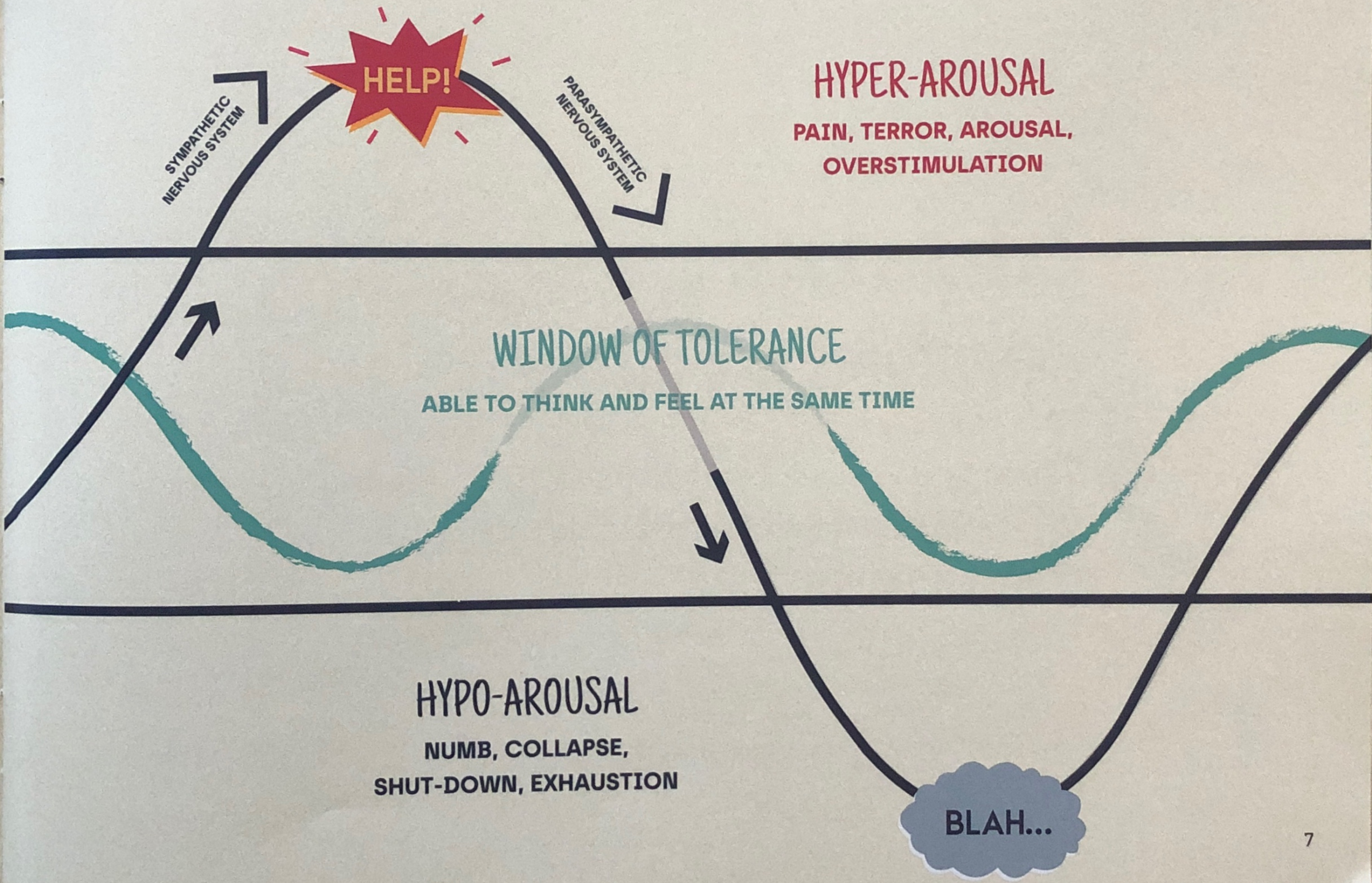
Emotions go up and down. When we can think and feel at the same time, we are in our Window of Tolerance.

In hyper-arousal we are above the Window—overstimulated.
In hypo-arousal we are below the Window—shut-down.

Trauma survivors spend too much time above and below the Window of Tolerance.

How do you know when you are above your Window?

How do you know when you are below your Window?



HELP!

HYPER-AROUSAL
PAIN, TERROR, AROUSAL,
OVERSTIMULATION

WINDOW OF TOLERANCE
ABLE TO THINK AND FEEL AT THE SAME TIME

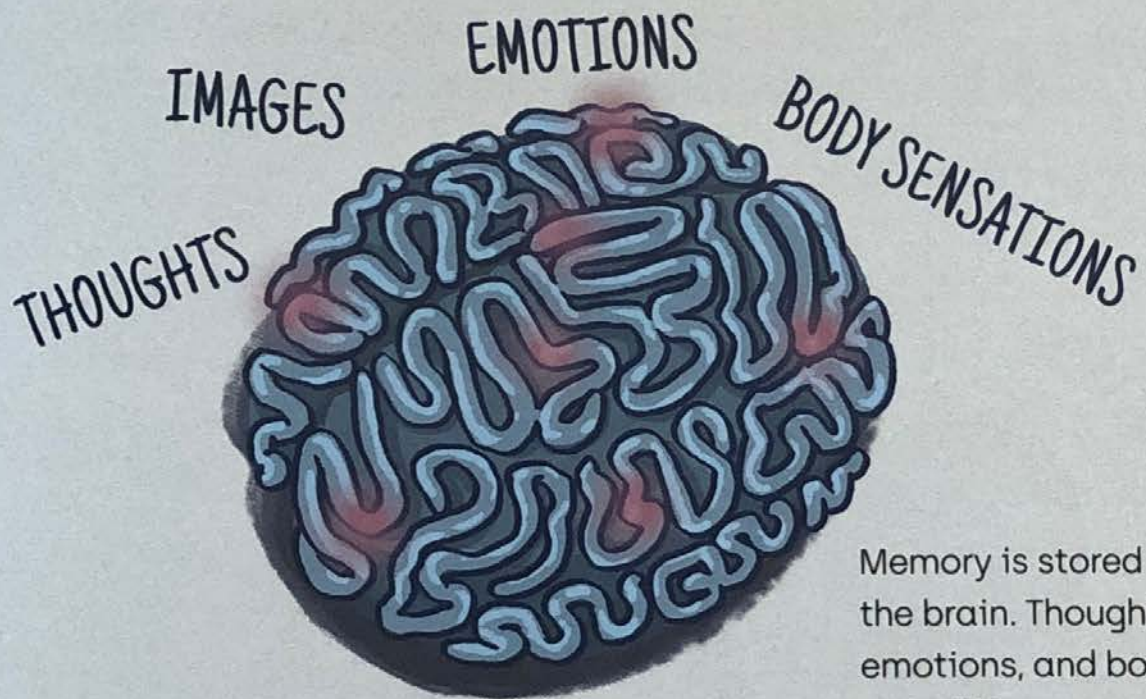
HYPO-AROUSAL
NUMB, COLLAPSE,
SHUT-DOWN, EXHAUSTION

BLAH...

Did you know your symptoms are memories?

If you find yourself overwhelmed, many trauma survivors find it helpful to remind themselves, "This is a memory."

Shapiro, 1995, Fisher, 2016

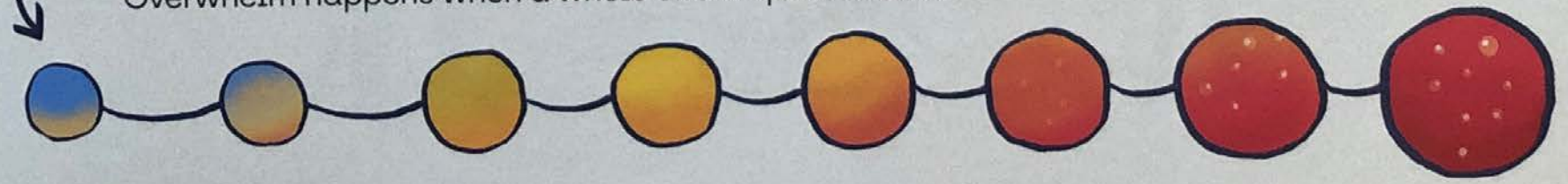


Memory is stored all over the brain. Thoughts, images, emotions, and body sensations can all be memories.



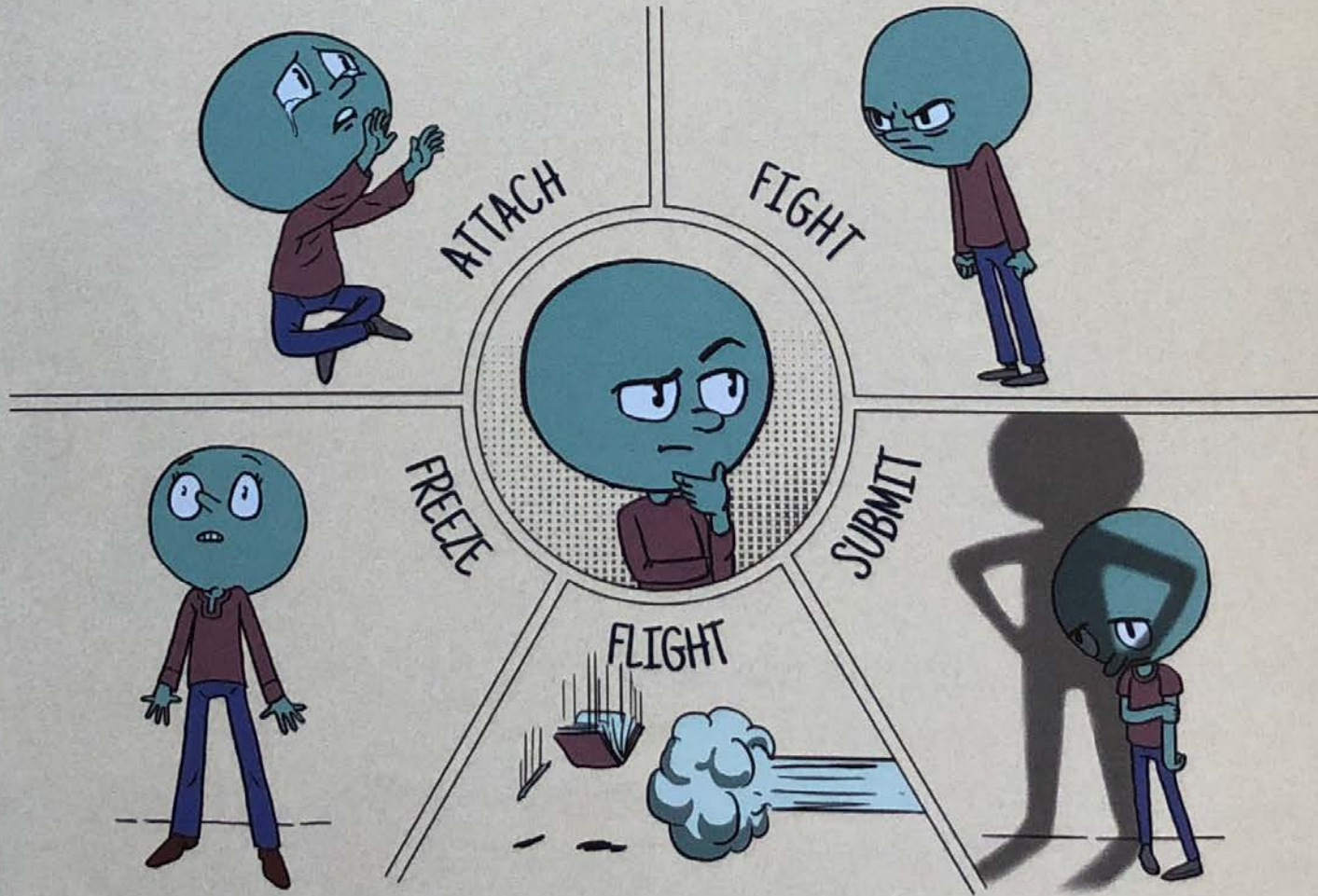
TRAUMA MEMORIES EXIST IN CHAINS.

Overwhelm happens when a whole chain opens at once.



Autonomic Defenses

Under threat, your body is wired to protect you!
Survival depends on Autonomic Defenses.



Van der hart, Nijenhuis & Steele, 2006

you!

**AS WE GROW UP, OUR AUTONOMIC DEFENSES
BECOME MORE SOPHISTICATED AND HABITUATED.**

ATTACH

[BEGINNING 0-4 YEARS]

- Crying out for help
- Neediness
- Longing
- Loneliness
- Waiting by the phone
- "Talk to me!"
- Clinging
- Terror of being abandoned

SUBMIT

[BEGINNING 5-8 YEARS]

- Steeped in shame
- Compliant
- Trouble saying no
- People pleasing
- Passive
- Feeling worthless or "bad"
- Self critical
- Self sacrificing
- Excessive care taking
- Subjugated
- Submissive
- Subservient

FREEZE

[BEGINNING 6-11 YEARS]

- Terrified
- Guarded
- Panic attacks
- Frozen
- Unable to think/act
- Heart racing
- No voice

FLIGHT

[BEGINNING 11-13 YEARS]

- Need to escape
- Ambivalent
- Lost in fantasy
- Addictions
- Eating disorders
- Compulsions
- Numbing behaviors
- Spacing out
- Foggy
- Smart phone checking
- Binge watching

FIGHT

[BEGINNING 12 - TEEN YEARS]

- Controlling
- Explosive
- Hostile
- Judgmental
- Rigid
- Hyper-vigilant
- Suicidal

What did we learn about being close?



CARETAKERS WHO ARE...

- Punishing
- Violent
- Derisive
- Critical
- Interfering
- Intrusive
- Cold
- Exhibit hostile control



CARETAKERS WHO ARE...

- Overprotective
- Too disclosing
- Emotionally enmeshed
- Over-involved
- Exhibit poor boundaries
- Exhibit anxious control



CARETAKERS WHO ARE...

- Absent
- Unreliable
- Self-centered
- Addictive
- Neglectful
- Make-and-break promises



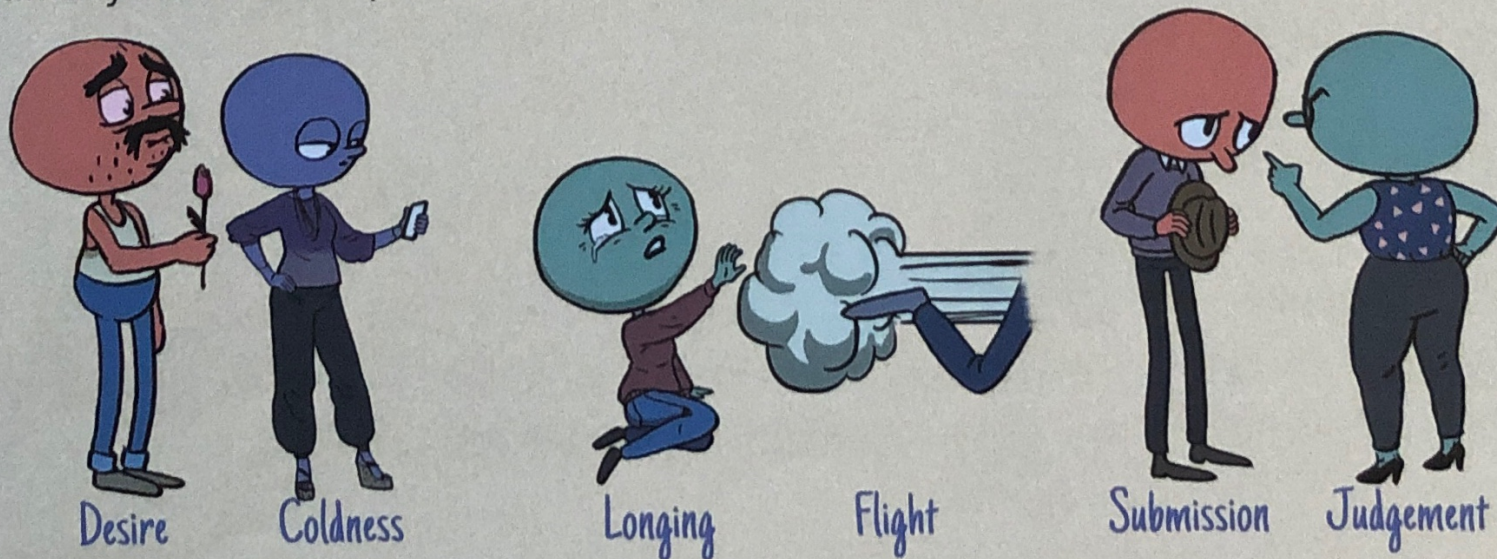
CARETAKERS WHO ARE...

- Alternately frightened and frightening
- Intermittently non-responsive and overreactive
- Alternately functional/non-functional
- Internally preoccupied



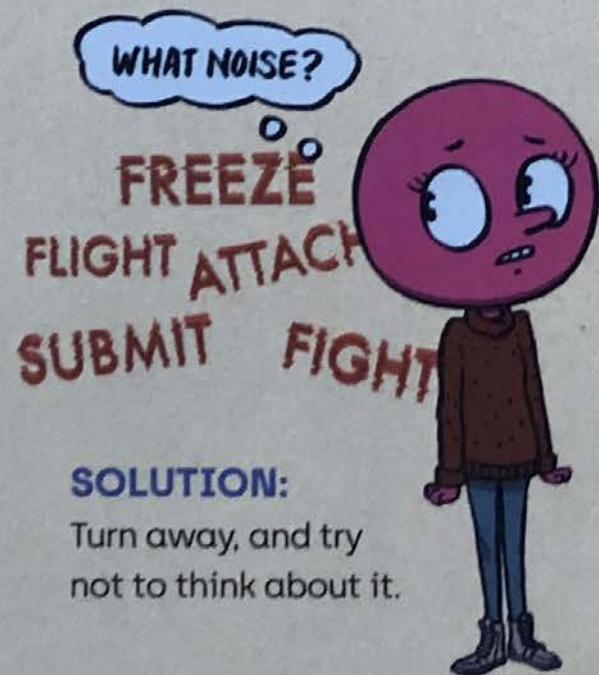
WHEN EARLY ATTACHMENTS ARE UNSAFE, CONFUSING, ICKY, OR COLD...

Our drive to be close gets wired together with our drive for safety and survival. This means intimacy can become problematic as we grow. Some examples:



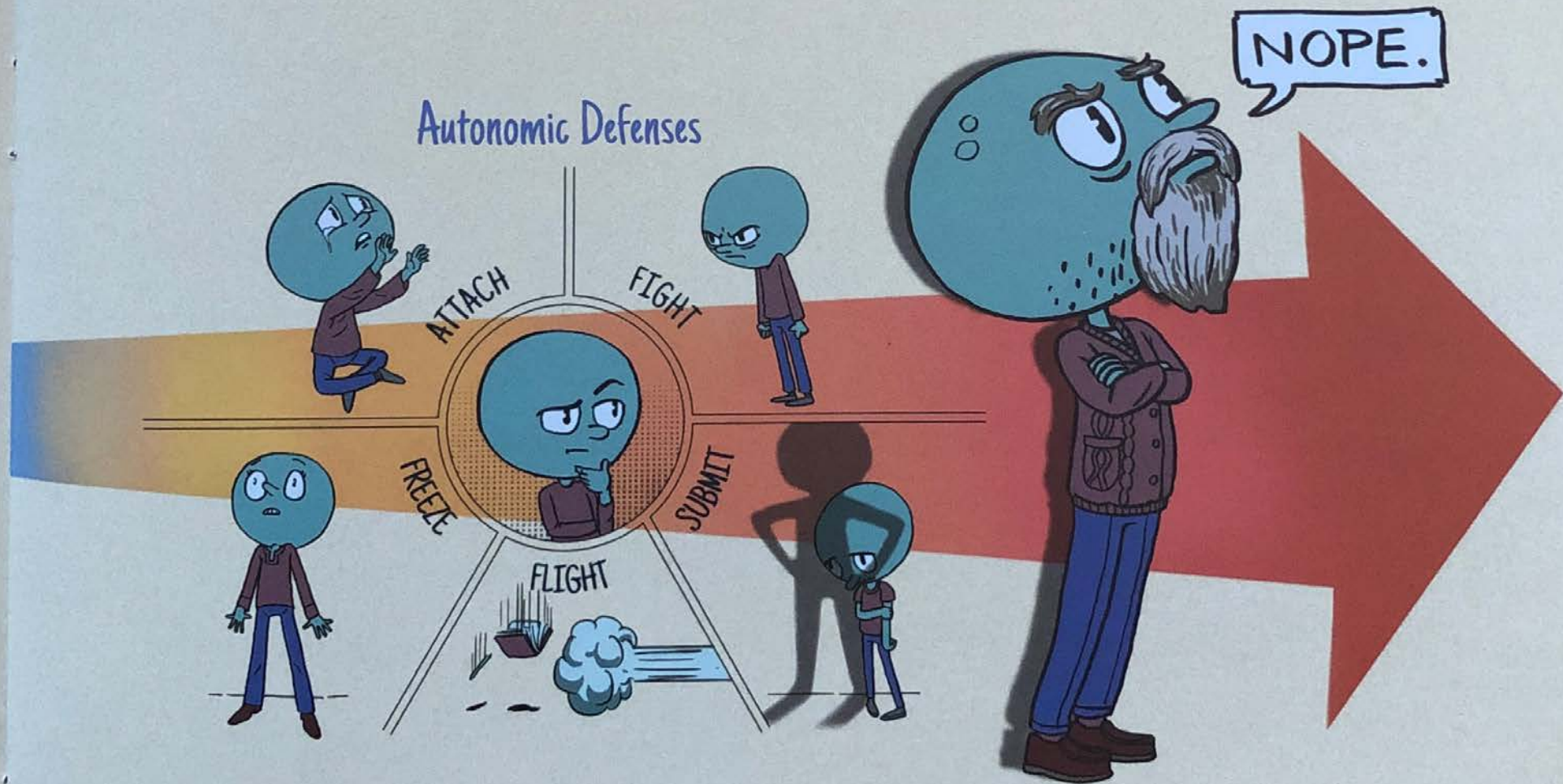
Autonomic Noise

DILEMMA: Too much autonomic noise makes it hard to think, function and go on with daily life.



**IT WORKS! [MOSTLY]—
NOW IT'S EASIER TO
FOCUS ON DAILY LIFE.**





THE PROBLEM IS THAT TURNING AWAY IS A STRATEGY THAT GROWS OVER TIME—AND THIS CREATES NEW SOCIAL, EMOTIONAL, COGNITIVE AND PHYSICAL SYMPTOMS

(see symptom checklist, pg. 5).

What now?

If turning away from bad memories, autonomic defenses, and vulnerable feelings creates new problems, yet thinking about them interferes with daily life—then what?

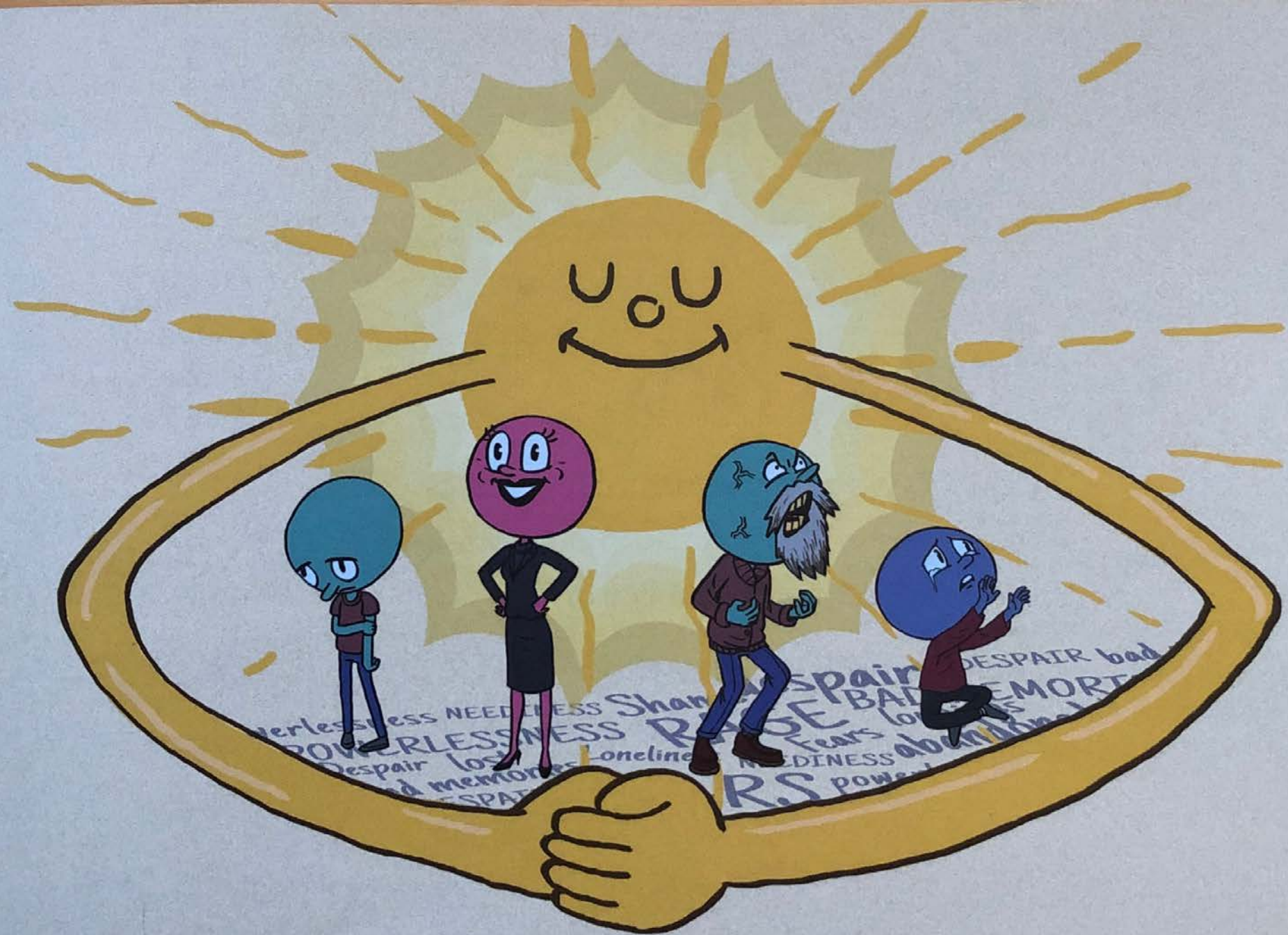
We need a new strategy!



name
POWERLESSNESS
RAGE
longings
Fears
abandoned
EMPTINESS
Despair
lost memories
Loneliness
NEEDINESS
BAD MEMORIES
LOST
powerlessness

New strategy: turn towards
all parts without overwhelm.

Sometimes on your own and sometimes with
the help of a therapist, we can begin to learn...



Tracking Parts

How do we turn towards all parts of ourselves without getting overwhelmed?
We learn to 'track' our parts.

Some people like to write.

**YOUR INSIDE EXPERIENCE
OF THIS PART (THOUGHTS,
EMOTIONS & BODY SENSATIONS)**

- I'm stupid
- I feel so bad about myself
- My stomach is hot
- My chest is tight

**HOW LONG HAS THIS PART BEEN
HELPING IN THIS WAY?**

- As long as I can remember

**TRIGGER?
DAY/TIME IT HAPPENED?**

- My friend got mad at me on Tuesday night

**HOW OLD DOES THE PART
THINK YOU ARE?**

- Kindergarten (maybe 5?)

**HOW IS THIS PART TRYING
TO HELP YOU?**

- Make peace as soon as possible
- Don't risk her anger again

**CAN YOU TELL IF IT IS
FIGHT, FLIGHT, FREEZE,
SUBMIT, OR ATTACH?**

- Feels like submit

**WHAT HELPS THIS PART TO
CALM—EVEN 5%?**

- Saying, this is a part of me, not all of me
- Telling myself, I'm having a memory
- Getting reassurance I'm not in danger now

Tracking Parts

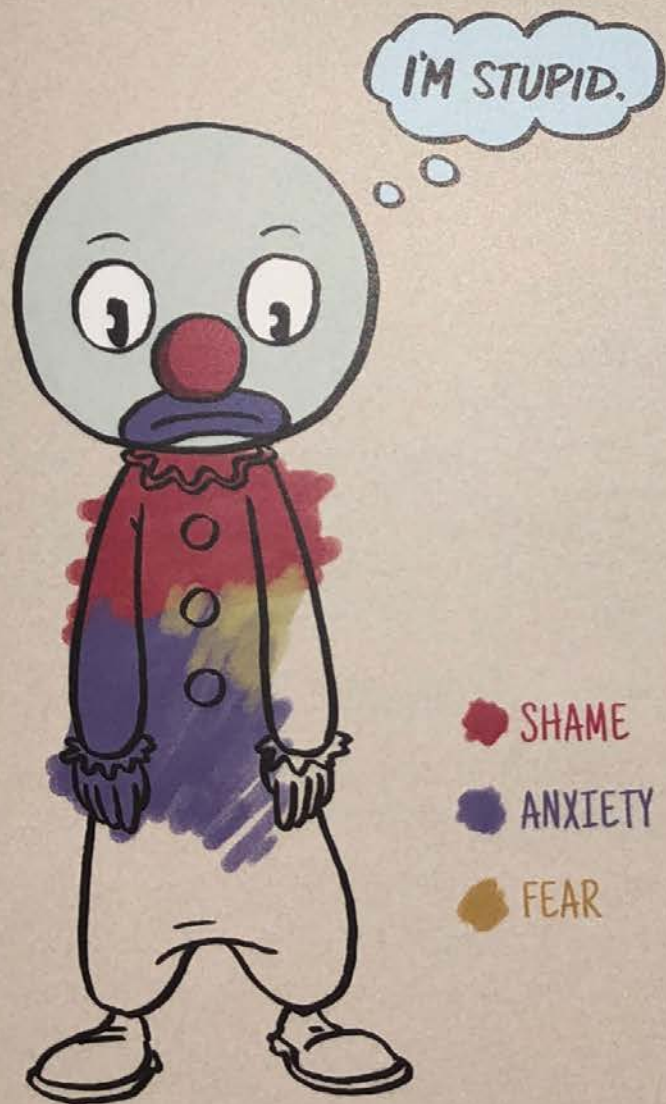
Some people like to draw.

Find a part of yourself and ask, what is your inside experience of this part?
Then draw the experience on a piece of paper.

- Where do you feel it in your body?
- What emotions does it have?
- What thoughts does it have?

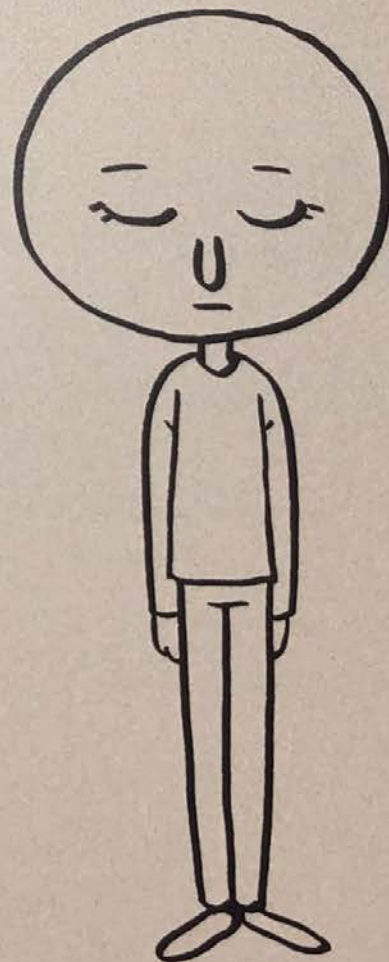
Now look at your drawing and ask:

- How is this part trying to help you?
(Remember: all parts originate as survival or life-enhancing strategies—
they are all trying to help in some way!)
- How long has this part been helping in this way?
- How old does this part think you are?
- What helps this part to calm, even 5%?



- SHAME
- ANXIETY
- FEAR

(Example)



(You!)

All Parts Welcome

A DAILY PRACTICE OF WELCOMING...

- Sit quietly at the same time each day.
- Welcome all parts who wish to come, to a safe, neutral meeting place.
- Ask: What do you want to let me know about your worries or fears?
- Send the message: You are no longer alone. I am here.

Fisher, 2017, Schwartz 2001



First aid for triggered parts...

Fisher, 2017, Schwartz 2001

Notice: I'm triggered.

Say: "This is a memory."

Say: "These must be the thoughts, feelings and emotions of a part."

Notice: It feels like all of me.

Say: "Some part of me is overwhelmed."

Ask: "Who is overwhelmed?"

Think: If I was in my wisest Self, what would I tell myself?

Think: If someone I love [a niece/nephew, a friend's child] was experiencing this same thing, how would I counsel them?

When all else fails...

Okay—I've tried all of that and I'm **STILL** triggered (blended with a part)
Give yourself credit for trying—you are reading this book, right?

Know the part that is blended with you has some positive intent, even if
it's hard to fathom what that intent might be.

Call someone who supports you, even if you only talk about the
weather. Know, this too shall pass.

A note from the authors:

This book is our response to so many clients who come to therapy with hope, only to leave disappointed when talking about their problems seems only to make them worse. We hope this approach will help therapists guide their clients through the process of recovery with more ease, clarity and care. The methods here are proven, though the work is neither easy nor fast. For survivors of childhood trauma—who are looking for a map to better understand their journey to wholeness—this book is for you too.

About the Authors



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Colleen West has a trauma-informed private practice in the San Francisco Bay Area. She is a Licensed Marriage & Family Therapist, and an EMDR Approved Consultant. She employs a number of parts models, including Internal Family Systems and EMDR, in her work with clients and clinicians. For Colleen, the book you are holding is the result of a two-decade search for a truly effective way to heal the troubled souls of highly traumatized people.

More at colleenwest.com



RACHEL WALKER, LMFT

Rachel Walker is a trauma-informed psychotherapist and EMDR Approved Consultant with a full-time private practice in Oakland, CA. She is passionate about integrative approaches to treating trauma and provides professional training and consultation in this approach. Rachel's therapeutic training began in the arts where she learned to apply play, metaphor, creativity, and spontaneity to the work. Her deepest and most heartfelt desire is to inspire trauma survivors, and the therapists who treat them, to hope! With perseverance, patience, curiosity, and humor to human connect—recovery is absolutely possible!

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Steven is an animator and artist living and working in Los Angeles. He has worked on a variety of projects including murals, illustrations, and has created animation for commercials and a video game in development. He enjoys soccer, surfing, and walking his dog Charlie.

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