



# Complex Trauma and Body Centered Healing, Part 3

Trauma vulnerability and resilience / Kinds of trauma

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**Recovery can take place only within the context of relationships:** it cannot occur in isolation. In... renewed connection with other people, the survivor recreates the psychological facilities that were damaged by the traumatic experience. These faculties include the basic operations of trust, autonomy, initiative, competence, identity, and intimacy.

The first principle of recovery is empowerment of the survivor. Others may offer advice, support, assistance, affection, and care, but not cure. No intervention that takes power away from the survivor can possibly foster recovery, no matter how much it appears to be in (their) immediate best interest.

*Dr. Judith Lewis Herman,  
Trauma and Recovery: the aftermath of violence -  
from domestic abuse to political terror*







Sometimes learning about trauma can feel overwhelming;  
during this presentation please feel welcome to take care of yourself as needed.



If you like, you might take a moment or two here,  
to breathe, stretch, and notice how you feel, before going on.





## Vulnerability to trauma



Usually, experiences of harm  
do not create trauma in the nervous system.

What can make trauma more likely?





A person's nervous system may be more vulnerable to trauma if:



- Biological parents or ancestors experienced trauma (you can inherit changes in how genes are expressed)
- Biological mother experienced stress or trauma during pregnancy

*These things can affect a person's developing nervous system so that it's oriented towards chronically preparing for danger*





A lack of safety with a primary caregiver in childhood also impacts the development of the nervous system, and can affect the ability to:

- trust people
- self regulate
- be resilient







While safe, responsive relationships with primary caregivers in childhood support development of a resilient nervous system.

This increases the ability to:

- trust others
- regulate emotions
- understand yourself, others
- explore and connect with the world

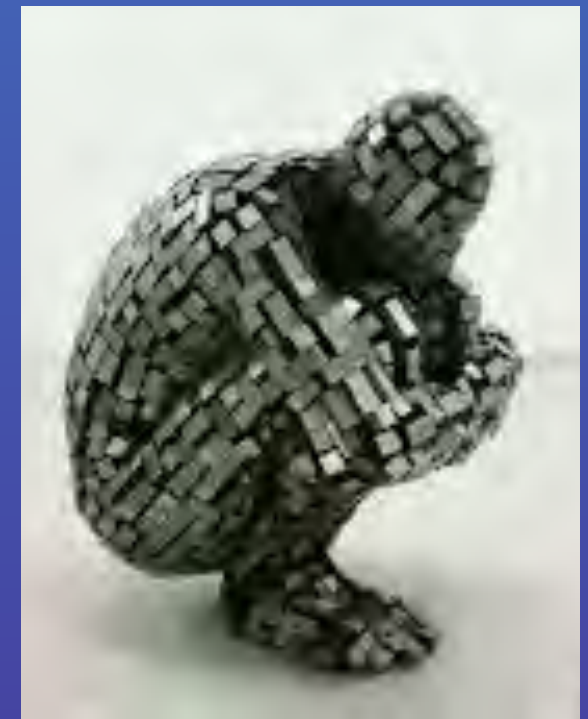






However a person can still develop trauma if they have physical or emotional experiences that:

- Feel threatening to self or survival
- Are repeated, chronic, cumulative... or
- Cause overwhelming physical or emotional harm







## The Adverse Childhood Experiences (ACE) Study

- Begun in 1996, by Kaiser Permanente and the Center for Disease Control
- Surveyed 17,337 adult HMO members about adverse childhood experiences: neglect, abuse, violence, sexual assault, etc, before age 18.







## The ACE study found strong correlation between ACEs and later:

- depression
- anxiety
- alcoholism
- drug abuse
- sexual promiscuity
- domestic violence
- cigarette smoking
- physical inactivity
- suicide attempts
- obesity
- heart disease
- cancer
- auto-immune disorders
- stroke
- diabetes
- skeletal fractures
- liver disease







**Developmental Trauma** can occur after overwhelming harm in early childhood, affecting development of the brain and the rest of the nervous system. People with developmental trauma are more prone to develop other trauma later in life.

*Symptoms:*

- Mistrust of adults
- Assumption that others will not like me
- Fear and pessimism about the future
- Feelings of hopelessness, lack of control
- Belief that bad things will happen *and they are usually my fault*



*Healing may emphasize self regulation, also non-coercion, safe boundaries, and attachment*



# PTSD can come from violence, war, accidents


## Symptoms for diagnosis:

- Re-experiencing event
- Hyperarousal
- Avoiding reminders of experience
- Feeling detached or estranged
- Having intrusive thoughts



*Healing often emphasizes learning skills for self-regulation and calming*





**Complex Trauma** is usually caused by repeated harm from other human beings: neglect; emotional, physical, or sexual abuse; sexual, domestic, or structural violence; experiences of domination or discrimination, including systemic oppression from racism, sexism, homophobia, etc.

*Symptoms:*

- Feeling worthless, ashamed
- Personal scrutiny, self-blame
- Mood swings, extreme emotions
- Dissociation
- Difficulty initiating or sustaining relationships



*Healing may emphasize non-coercion, empowerment, connections*

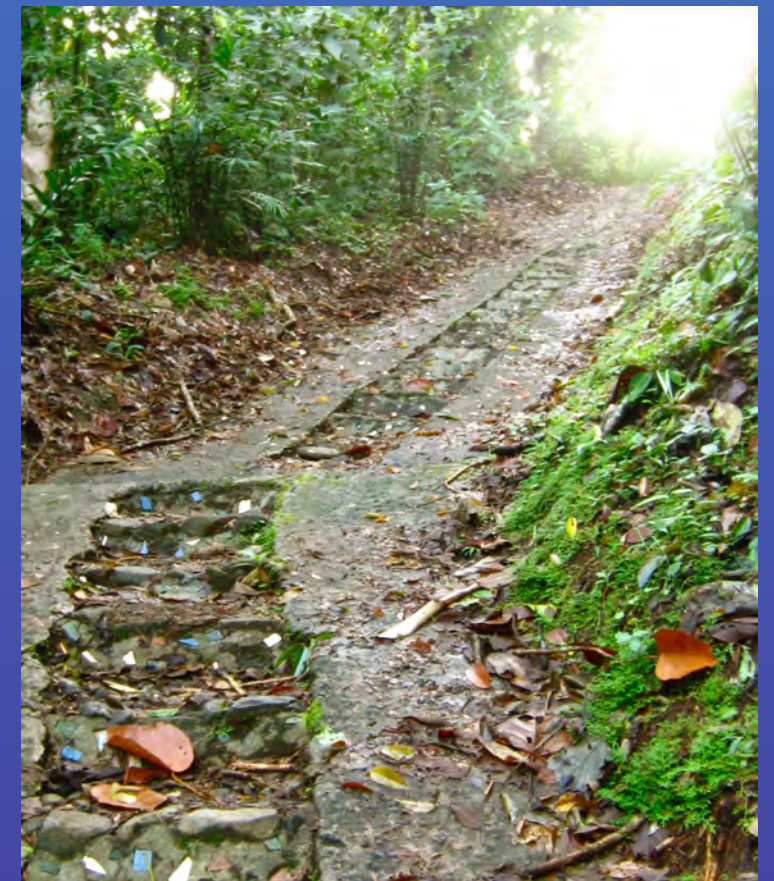




## Some other causes of complex trauma

*Recognized by the Substance Abuse and Mental Health Services Administration*

- **Historical trauma** *(affecting social groups across generations)*
- **Trauma from neglect in adults** *(lack of food, housing, etc)*
- **Trauma caused by systems and institutions**  
*(police, religions, health systems, schools...)*







# Secondary Trauma

from overwhelming contact with other people's trauma

*Symptoms:*

- Feeling helpless, hopeless, never enough
- Hypervigilance
- Minimizing own suffering
- Chronic exhaustion / physical ailments
- Fear, anger and cynicism
- Numbing, loss of empathy

## Vicarious Trauma prevention ABC's

- Awareness** – being attuned to one's needs, limits, emotions and resources; practice self-acceptance.
- Balance** – maintaining balance among activities, especially work, play and rest.
- Connection** – maintaining supportive relationships; communication is part of connection and breaks the silence of unacknowledged pain; these connections help prevent isolation and increase validation and hope.

*Healing may emphasize self-regulation, empowerment, connection*





Traumatic stress can diminish  
a person's ability to feel resilient, calm, and connected,  
leaving them with a narrow window of tolerance.

This creates many cravings and aversions as the body seeks ways  
to return to the tolerable, resilient zone and a sense of well-being.

Activation  
**High Zone**  
*Sympathetic NS*

Calm alertness and connection  
**Resilient Zone**  
*Upper Parasympathetic NS*

Deactivation  
**Low Zone**  
*Lower Parasympathetic NS*







The stress from living outside of one's resilient zone can trigger terrible sensations in a person's body and mind.

To numb or override these feelings, people may come to depend on things like:

- alcohol
- drugs
- sex
- over eating
- anorexia
- intentional self-harm
- harmful relationships
- gambling / other high-risk activities
- intensive internet / social media use
- shopping / insatiable consumption
- non-stop work or activity
- depressive withdrawal



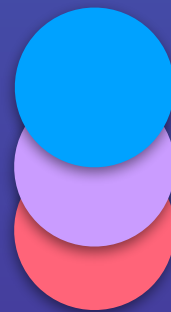




With trauma, many survivors also develop habits of  
**not breathing for periods of time**

—stuck in a freeze or shut-down response  
with their breath

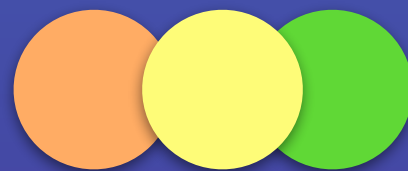
Lack of oxygen can make it hard to think well,  
and can add to feelings of anxiety or depression.







Gentle breathing practices can help many people  
return to an upper Parasympathetic response  
of calm, equilibrium, and resilience.







But for others whose breathing tends to freeze or shut down  
even paying attention to breath may activate the Sympathetic  
Nervous System, with feelings of fear or anger.







After a freeze or shut down response, some people may need to pass through Sympathetic Nervous System activation before returning to a sense of calm.

Learning to breathe slowly and deeply may eventually help them feel more peaceful.

But for some survivors it can feel frightening along the way. It's important to respect their own sense of when and how they feel ready to move through this.



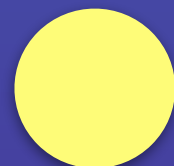




Trauma resilience can also be supported by learning to notice and feel various physical responses in the Autonomic Nervous System.

“When a person learns to distinguish between sensations of distress and those of well-being, (they develop) a greater capacity to return to their resilient zone by intention.”

—Elaine Miller-Kaaras, *Building Resilience to Trauma*







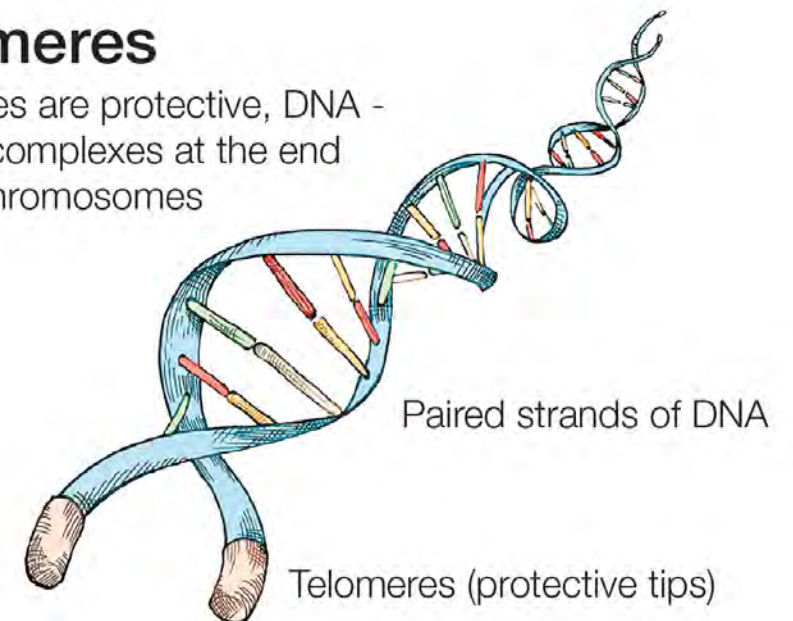
There are other benefits to this kind of body-centered mindfulness as well:

Telomeres are laces at the ends of your chromosomes that protect your health. With ACEs, trauma, and other kinds of stress, telomeres become damaged.

But mindful yoga and meditation practices—focusing in the present-moment—have been found to lengthen telomeres, protecting your DNA and your health.

### Telomeres

Telomeres are protective, DNA - protein complexes at the end of our chromosomes





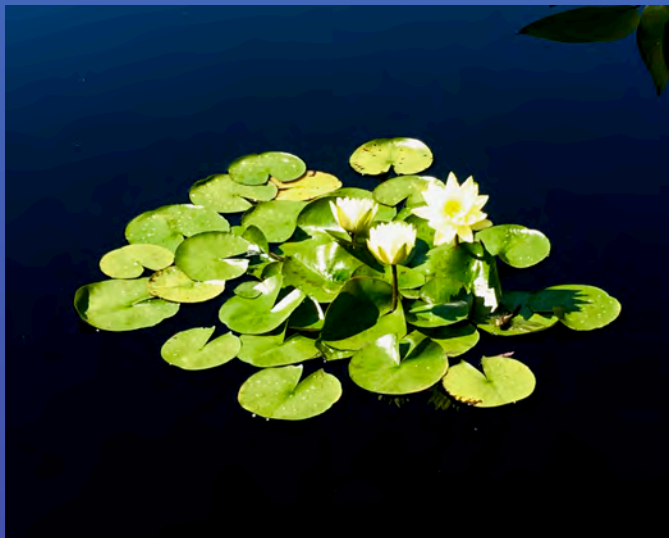


Support within a therapeutic relationship that is respectful, genuine, non-coercive and collaborative can:

- Help heal wounds from loss and betrayal in early childhood and beyond
- Encourage a sense of having choices and being able to choose
- Broaden the window of tolerance for different sensations and experiences, alleviating some cravings and aversions
- Strengthen resilience for managing future stress or trauma







If you like, you could take another moment or two now  
to breathe, stretch, and notice how you feel





## Thank you for your interest in this presentation.

*It was created out of a desire to make information on complex trauma and body-centered healing as accessible as possible. If you share that intention, then you're welcome to share material from the presentation with others—but please acknowledge the sources, out of respect for the work involved.*

*I am grateful to the trauma researchers listed at the end of this presentation for their research and insights into trauma and healing; and still more grateful to my clients, who teach me so much.*

*I offer various versions of this presentation in person (in English and in Spanish), and also facilitate TCTSY sessions for large groups, small groups, and individuals.*

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## This presentation is based on the work of:

**David Emerson** E-RYT, author of *Overcoming Trauma Through Yoga*, and *Trauma-Sensitive Yoga in Therapy*

**Bud Craig** PhD, author of *How Do You Feel? Interoception: the sense of the physiological condition of the body*

**Stephen Porges** PhD. Author of *Polyvagal Theory : Neurophysiological Foundations of Emotions, Attachment, Communication, and Self-Regulation*

**Laura van Dernoot Lipsky**, social justice activist and author of *Trauma Stewardship: An Everyday Guide to Caring for Self While Caring for Others*

**Elaine Miller-Karas** LCSW, author of *Building Resilience to Trauma: The Trauma and Community Resiliency Models*

And **trauma researchers** with the NICABM Treating Trauma Master Series: **Pat Ogden** PhD., **Dan Siegel**, MD. **Ruth Lanius**, MD, PhD, **Ron Siegel** PhD, **Ruth Buczynski** Phd., **Peter Levine** PhD., and **Bessel van der Kolk** MD; also **Wendy D'Andrea** PhD.

And, yoga teacher-trainers **Hala Khouri** MA, E-RYT and **Marlysa Sullivan** MPT, C-IAYT E-RYT

*Thank you to all of these people for their work supporting trauma prevention and healing.*