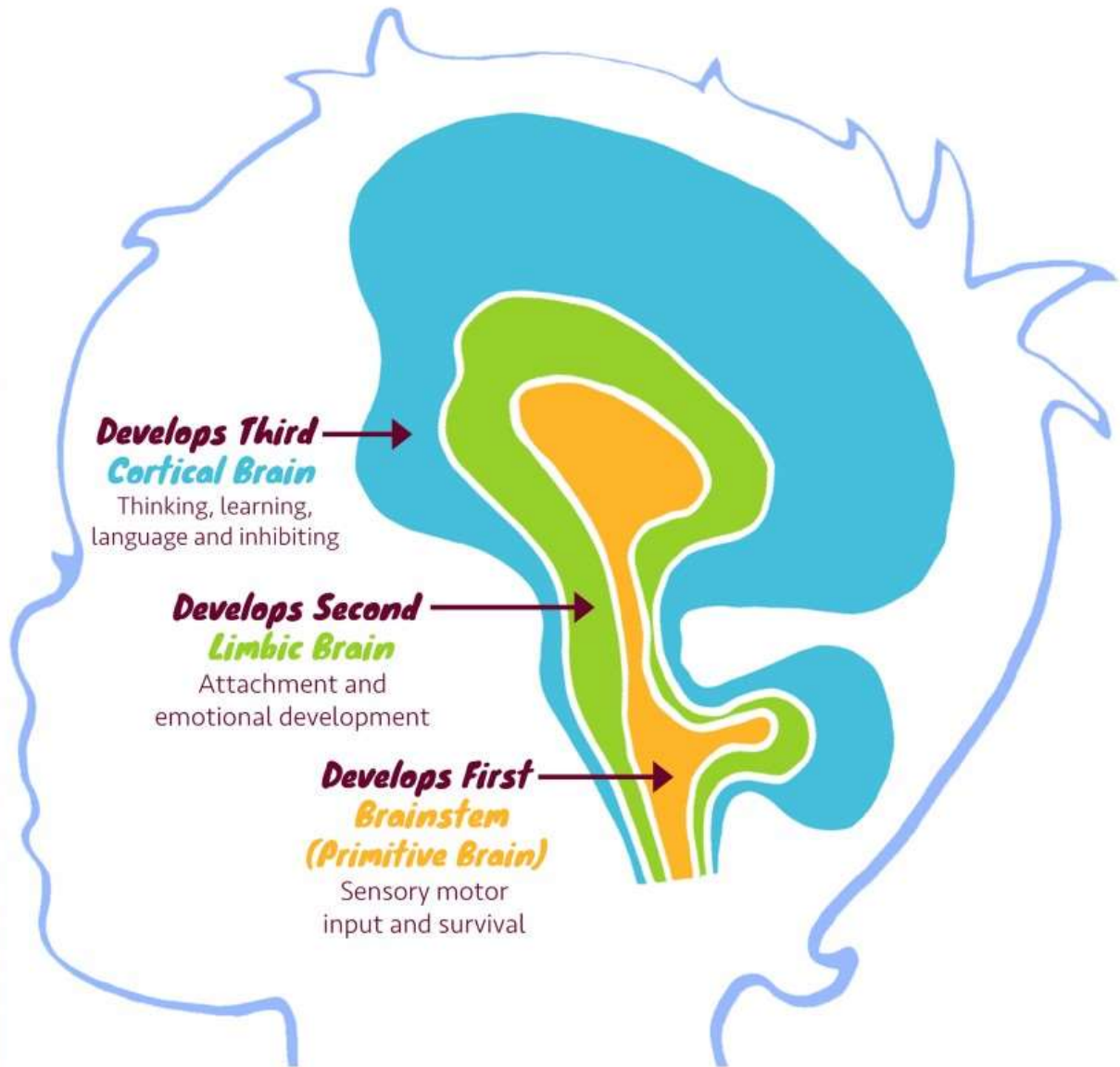


3 Stages of Brain Development



Beacon House

Therapeutic Services and Trauma Team



Children's brains develop
from the bottom up.



8 Things to Remember about Child Development

Building on a well-established knowledge base more than half a century in the making, recent advances in the science of early childhood development and its underlying biology provide a deeper understanding that can inform and improve existing policy and practice, as well as help generate new ways of thinking about solutions. In this important list, featured in the [From Best Practices to Breakthrough Impacts](#) report, the Center on the Developing Child sets the record straight about some aspects of early child development.

1) Even infants and young children are affected adversely when significant stresses threaten their family and caregiving environments.

[Adverse fetal and early childhood experiences](#) can lead to physical and chemical disruptions in the brain that can last a lifetime. The biological changes associated with these experiences can affect multiple organ systems and increase the risk not only for impairments in future learning capacity and behavior, but also for poor physical and mental health outcomes.

2) Development is a highly interactive process, and life outcomes are not determined solely by genes.

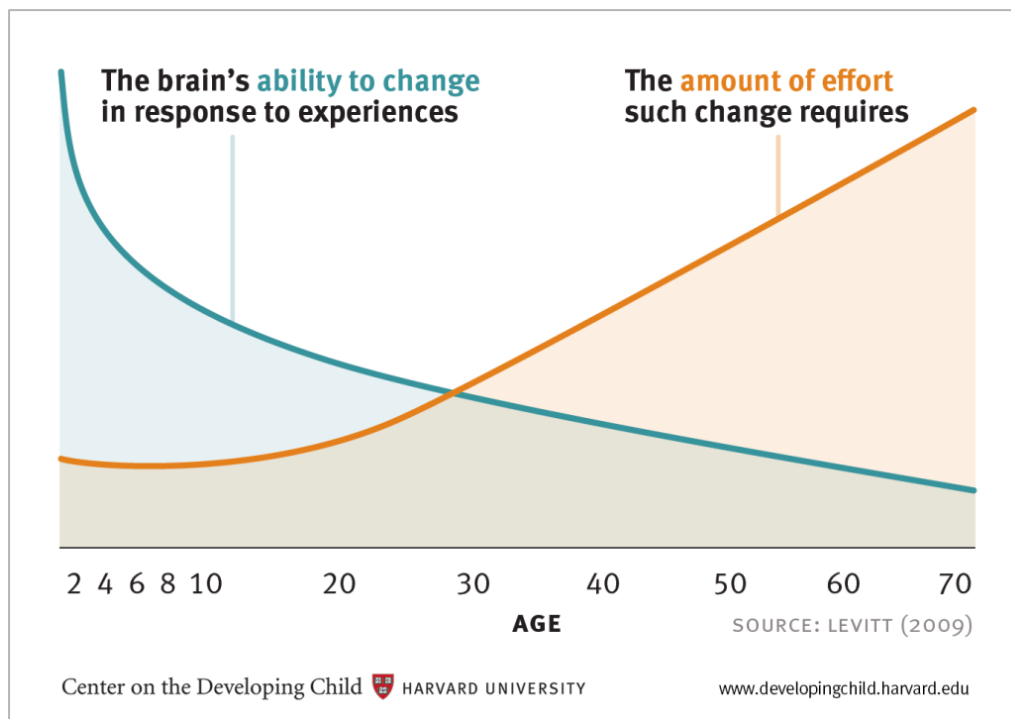
The environment in which one develops before and soon after birth provides powerful experiences that [chemically modify certain genes](#) in ways that then define how much and when they are expressed. Thus, while genetic factors exert potent influences on human development, environmental factors have the ability to alter family inheritance. For example, children are born with the capacity to learn to control impulses, focus attention, and retain information in memory, but their experiences as early as the first year of life lay a foundation for how well these and other [executive function](#) skills develop.

3) While attachments to their parents are primary, young children can also benefit significantly from relationships with other [responsive caregivers](#) both within and outside the family.

Close relationships with other [nurturing and reliably available adults](#) do not interfere with the strength of a young child's primary relationship with his or her parents. In fact, multiple caregivers can promote young children's social and emotional development. That said, frequent disruptions in care and high staff turnover and poor-quality interactions in early childhood program settings can undermine children's ability to establish secure expectations about whether and how their needs will be met.

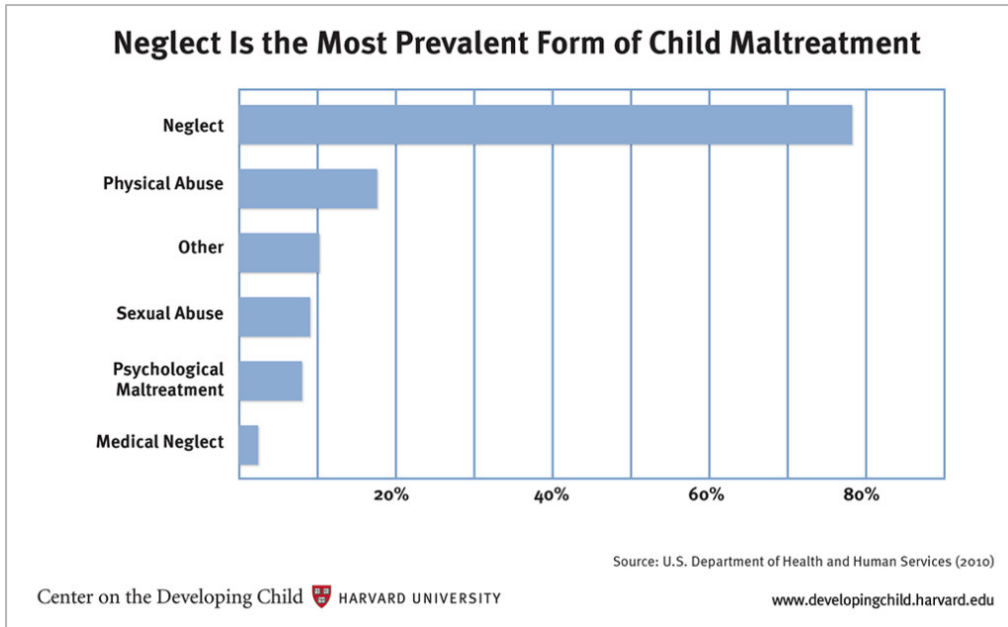
4) A great deal of brain architecture is shaped during the first three years after birth, but the window of opportunity for its development does not close on a child's third birthday.

Far from it! Basic aspects of brain function, such as the ability to see and hear effectively, do depend critically on very early experiences as do some aspects of emotional development. And, while the regions of the brain dedicated to higher-order functions—which involve most social, emotional, and cognitive capacities, including multiple aspects of [executive functioning](#)—are also affected powerfully by early influences, they continue to develop well into adolescence and early adulthood. So, although the basic principle that “earlier is better than later” generally applies, the window of opportunity for most domains of development remains open far beyond age 3, and we remain capable of learning ways to “work around” earlier impacts well into the adult years.



5) Severe neglect appears to be at least as great a threat to health and development as physical abuse—possibly even greater.

When compared with children who have been victimized by overt physical maltreatment, young children who experienced prolonged periods of [neglect](#) exhibit more serious cognitive impairments, attention problems, language deficits, academic difficulties, withdrawn behavior, and problems with peer interaction as they get older. This suggests that sustained disruption of serve and return interactions in early relationships may be more damaging to the developing architecture of the brain than physical trauma, yet it often receives less attention.



Each state defines the types of child abuse and neglect in its own statute and policy, guided by federal standards, and establishes the level of evidence needed to substantiate a report of maltreatment. The data above, from the National Child Abuse and Neglect Data System (NCANDS), reflects the total number of victims (defined as a child for whom the state determined at least one report of maltreatment was found to be substantiated or indicated) as reported by all 50 states, the District of Columbia, and Puerto Rico, between Oct. 1, 2009, and Sept. 30, 2010. "Other" includes abandonment, threats of harm, and drug addiction. Click image for full-size, shareable version.

6) Young children who have been exposed to adversity or violence do not invariably develop stress-related disorders or grow up to be violent adults.

Although children who have these experiences clearly are at greater risk for adverse impacts on brain development and later problems with aggression, they are not doomed to poor outcomes. Indeed, they can be helped substantially if [reliable and nurturing relationships with supportive caregivers](#) are established as soon as possible and appropriate treatments are provided as needed.

7) Simply removing a child from a dangerous environment will not automatically reverse the negative impacts of that experience.

There is no doubt that children in harm's way should be removed from dangerous situations immediately. Similarly, children experiencing severe neglect should be provided with responsive caregiving as soon as possible. That said, children who have been traumatized need to be in environments that restore their sense of safety, control, and predictability, and they typically require therapeutic, supportive care to facilitate their recovery.

8) Resilience requires relationships, not rugged individualism.

The [capacity to adapt and thrive despite adversity](#) develops through the interaction of supportive relationships, biological systems, and gene expression. Despite the widespread yet erroneous belief that people need only draw upon some heroic strength of character, science now tells us that it is the reliable presence of at least one supportive relationship and multiple opportunities for developing effective coping skills that are the essential building blocks for strengthening the capacity to do well in the face of significant adversity.

MEDICINE

CHILDHOOD TRAUMA CAN CAUSE ILLNESS IN ADULTHOOD

Margaret Buranen / Winter 2013

Journalist Donna Jackson Nakazawa often found herself lying on the stair landing of her house, resting to regain enough strength to climb upstairs. For years, Nakazawa had been plagued by illnesses: Guillain-Barré syndrome that left her temporarily paralyzed (twice), thyroiditis, nerve damage, severe eczema, dangerously low red and white blood cell counts, and more. Then Nakazawa got lucky. She was referred to Anastasia Rowland-Seymour, a Johns Hopkins internist and assistant professor of internal medicine at the School of Medicine. Rowland-Seymour asked a question no doctor had asked Nakazawa: Had she suffered unusual emotional or physical trauma as a child?

Such trauma, termed adverse childhood experiences, or ACE, includes emotional or physical neglect or abuse; contact sexual abuse; living with someone who was mentally ill, incarcerated, or abused alcohol and/or drugs; living with a mother who was treated violently; and losing a biological parent. Studies published in journals like *Circulation and Archives of Internal Medicine* correlate ACE with higher adult incidences of heart disease, fibromyalgia, lupus and other autoimmune diseases, alcoholism, cancer, and suicide. How childhood trauma impacts adults' health on a cellular level is still unknown; for now, what researchers have is the correlation and the realization of how children's immature immune systems can be vulnerable to damage that will affect them as adults.

Once she has established the particulars of an ACE patient's illness, Rowland-Seymour treats the physical symptoms through standard medical protocols, but she also recommends therapies such as meditation, yoga, and acupuncture. These therapies ease the ongoing stress that triggers excess cortisol and other inflammatory hormones that keep the immune system malfunctioning. Rowland-Seymour relies on lab tests and patients' own accounts to determine which therapies seem to be working best.

Her biggest challenge, she says, is "taking the time required to set up the relationship so it's comfortable for patients to delve into their experiences and see they have some ability to change. A patient feels safe, feels heard, so [then] he can look closely at those experiences."

Nakazawa's answer to Rowland-Seymour's profound question was yes: Her father had unexpectedly died after surgery when she was 12. The loss devastated her mother and fractured her family. As detailed in her book, *The Last Best Cure: My Quest to Awaken the Healing Parts of My Brain and Get Back My Body, My Joy, and My Life* (Hudson Street Press, 2013), under Rowland-Seymour's care Nakazawa embarked on a yearlong effort to regain the health that tragedy had taken from her. Improvement was gradual, but after a year, tests showed her stress biomarkers significantly lowered and her red and white blood cell counts in the normal range for the first time in a decade. And she had regained vitality—she no longer needed the stair landing for rest.

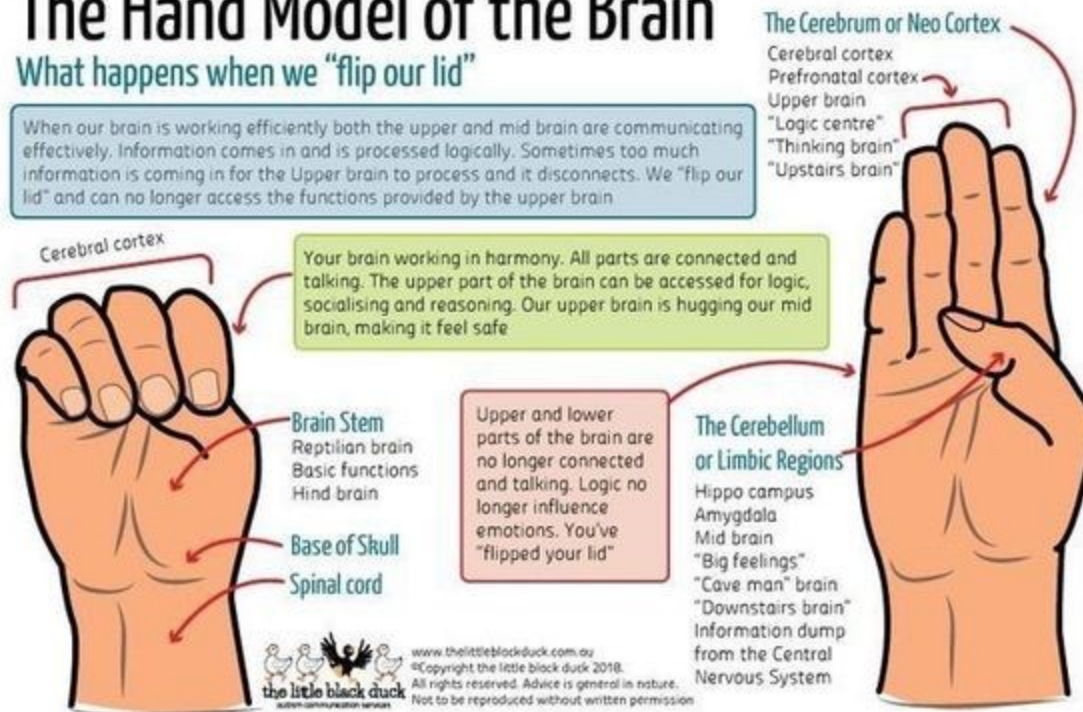
Posted in Health

Tagged medicine, adverse childhood experiences, childhood trauma

The Hand Model of the Brain

What happens when we "flip our lid"

When our brain is working efficiently both the upper and mid brain are communicating effectively. Information comes in and is processed logically. Sometimes too much information is coming in for the Upper brain to process and it disconnects. We "flip our lid" and can no longer access the functions provided by the upper brain



TTT

Trauma Tapping Technique®

By Gunilla Hamne and Ulf Sandström



TTT - Trauma Tapping Technique

Trauma is a big problem for the individual as well as for the society, especially in conflict and post-conflict areas. Although there are several approaches to treat trauma ranging from traditional psychology and psychotherapy to medication we here want to teach you a very simple method that we have personally proven works during four years of training and treating in DR Congo and Rwanda. The treatment takes only 15 minutes, there are no side effects and anybody can learn how to do it. The method can easily be combined with other forms of counseling or psychotherapy.

This treatment is called TTT – Trauma Tapping Technique. It is a different approach compared to traditional psychotherapeutic methods since it is a body based treatment, i.e. you treat specific points on the body to relax the mind. You will find it very helpful. It will make it clear that the body and mind are not separate, but completely connected.

Somatic (body based) methods like TTT and others called TFT, EFT, SET etc have been used successfully for many years in the USA, Australia and Europe as well as in Africa since it was introduced there. In the USA it has shown very efficient for treating so called war veterans, ie traumatized soldiers.

A colleague of ours, who came to DR Congo and Rwanda, Dr Carl Johnson, professor of Clinical Psychology and Psychiatry from Virginia in the USA says: "For 25 years I have treated American war veterans suffering from trauma. For long time me and my patients waited for something like TFT. In my opinion this gentle technique is the best approach to get thorough and enduring relief from this crippling psychological problem of trauma."

After working several years in the Great Lakes Region we have seen that TTT is

very efficient to heal the traumas of rape and other acts of psychological and physical violence in the society. Here are some comments from participants in trainings that we have held:

"I'm very happy to address to you this letter in order to appreciate this kind of trauma treatment. My personal experience is that this treatment is very easy to learn and it can also be used to prevent trauma. It doesn't demand many skills and therefore it can spread in all the country in short time without a lot of budget.

For Rwanda, this treatment is very important. It is also not expensive if we consider other treatments which demand the experts or high education in the domain. I see this treatment method as answer of the problem of trauma in Rwanda because many people can be trained and assist their colleagues." Mr Naphtal Ahishakyie, (After training with members of AOCM, orphans of the genocide in Rwanda)

"Many students continue to use the method of TTT for detraumatization and the results are good according the testimonies of the beneficiaries. From my point of view I have also found that the level of aggression among the students have diminished after applying the technique."

Dr Nabino Victor, ULPGL (After training with the students at the ULPGL–University in Bukavu, Eastern DR Congo)

"Before I got this treatment I did not sleep for almost four years. The traumatic memories after what I had experienced in the war here was haunting me also in the day but especially in the night. But after this treatment I sleep well and I have become big and strong again. Also the headache I used to have is gone and I no longer get so easily angry at my children. I now treat others in my neighbourhood. They get so

happy! I have become like a healer.“
Mme Miriam, survivor of sexual violence
(After training and treatments of the women survivors at Ushindi Center, Bukavu, DR Congo)

1. Trauma

How we become traumatized

Traumatic experiences shake the foundations of our beliefs about safety, and shatter our assumptions of trust. For a trauma to occur, all we need is a situation where we feel helpless and there seems to be a threat to our survival, ie you experience a very strong fear – you get “scared for life”. In those moments we want to fight or take flight, but you feel as if there is no way out. Others get like paralyzed in a frozen state of mind. The traumatic experience is relative to how we are able to deal with the situation. What becomes a trauma for one person will not be it for somebody else. To a child bad words from a parent can be enough to be traumatized since they are totally dependant on their parent that such a “betrayal” can feel life-threatening. As the trauma occurs, it is as if something freezes, stops or get stuck. Some explain it as if the time suddenly halts. It can be felt like an electrical chock and affects the whole system, ie the body and the mind and the energy system gets out of balance.

Everywhere and all the time people get traumatized from experiences such as conflict in the family, robbery, traffic accidents, natural disasters, illnesses, surgery, difficult deliveries etcetera. But in conflict and post-conflict areas a big number of people have gotten or get traumatized by extreme experiences such as war, genocide, being forced to escape their home, incurable diseases (like hiv/aids), hunger, poverty, rape and sexual violence etcetera.

What happens in the body?

When we experience a severe threat to our lives the body reacts instantly. The center of the reaction starts in the brain where chemical and electrical reactions initiate a process

that affects the whole body as well as the mind. This is what happens:

- The body/mind react like at an electrical shock.
- Amygdala, an almond shaped part of the brain, initiate a fight or flight response, ie sending out signals that mean: Danger!
- The sympathetic* nervous system releases adrenaline (a hormone that puts the body on alert) through the blood system. (* The sympathetic nervous system is the part of the autonomous nervous system that is activated when a person is under physical or psychological stress.)
- The heart rate and blood pressure goes up – to make the body ready to run or fight.
- Hypothalamus - “the brain of the brain” - sets off a chain reaction which results in production of cortisol a hormone that gives a reaction of stress such as a burst of energy for survival. It is often called the “stress hormone”.
- The memory of what happened gets stuck in the body and mind.
- All these effects normally disappear and go back to normal within some hours.
- For some people this state of emergency stays for a long time and they develop different symptoms of PTSD – Post Traumatic Stress Disorder – reliving the event through nightmares, flash-backs etc.

Symptoms of trauma

When somebody has experienced a strongly fearful situation, what we call a traumatic event (see above), it is possible to develop certain symptoms that stays in the body and mind shorter or longer time. When working in a conflict or post conflict area you will find many people with different symptoms that can come from their experiences. Some only developed few symptoms, others many. It is all very individual and depends on the persons respons to what has happened and what has happened in the persons life before. What is traumatic for one person does not have to be traumatic for somebody else.

The symptoms can be divided in two groups:

1. Psychological / Social

- difficult to sleep
- nightmares
- anxiety
- fear without reason
- anger without reason
- aggression towards others
- guilt and/or shame
- feelings of revenge
- easily forget things
- difficult to concentrate (on studies, learning new skills etc)
- flash backs – intrusive memories
- feeling isolated
- feeling worthless
- lack of self confidence
- not able to think about the future
- feeling sad or depressed
- difficult to trust anybody
- dissociation from the body

2. Physical

- stomach ache, headache and other kind of physical pain
- hypertension
- palpitation
- difficult to breathe
- tension in muscles
- feeling weak
- constantly feeling tired
- digestion problems

It is important to know that trauma is not a life sentence. It can be healed. Many of these symptoms can be relieved after treatments with TTT. Sometimes symptoms disappear after one treatment, sometimes it takes two or more.

Trauma affects the daily life

There are many problems that everyone is trying to deal with every day. But for the traumatized person taking decisions and solve problems becomes overwhelming because of the trauma the person cannot act in the present. They might know how they should think – but they cannot. They might know things they would like to do, but they cannot. Trauma can cause a lot of unwanted inabilities that affect life.

This state of mind and body has to be worked on. The traumatic experience have to be processed and become memories – without the emotional charge. This is done with for example the body/mind exercises we are going to learn here.

Trauma keeps the mind locked and prevents the person from living a good life. It is difficult to learn new things like the programs that are set up for survivors, studies at school or university or other kinds of trainings. A person that has been traumatized and is treated can very soon:

- be happier
- be more successful at work, school or trainings
- take better care of the family
- take better decisions

Different ways of treating trauma

When somebody shows symptoms of trauma there are different approaches that can be applied for the healing. We can in a generalized way describe it by dividing them in three different branches:

1. Psychiatry – main component for treatment is medicines. Some psychiatric clinics use more medicines than psychotherapy, others more opposite with more psychotherapy than medicines. The most common medicines are so called Beta-blockers, diazépines, antidepressive and sedatives like Valium. Medicines makes some of the symptoms less active but do not heal the trauma itself. Some of the medicines have side effects numbing, low

2. Psychotherapy and counseling - main component for treatment is talking/listening. There are many different approaches like for example active listening, cognitive behaviour therapy, psychoanalyses etc.

3. Somatic Treatments– main component for treatment is using the body to relax the mind. In this branch we find TTT (Trauma Tapping Technique)– which is the method we will teach you here, and others like TFT (Thought Field Therapy), EFT (Emotional Freedom Technique), TAT (Tapas Acupressure Technique) , EMDR (Eye

Movement Desensitization and Reprocessing , TRE (Trauma Release Exercise), SE (Somatic Experience).

Secondary trauma

Secondary trauma – also called “compassion fatigue” or vicarious trauma - occasionally happens to those who listen to many testimonies of traumatized patients. By listening to explicit details of patients’ traumatic experiences, caregivers witness the traumatic realities of their patients which can lead to the caregiver being traumatized as well. Treating survivors of rape and sexual violence can be more demanding than treating other traumas, especially for women caregivers who face the same trust and safety issues as their patients.

As such, secondary trauma is a normal consequence of working with trauma survivors. Secondary trauma should not be considered a result of personal weakness or emotional inadequacy on the part of the caregiver. Central to secondary trauma are negative changes in trust, feelings of losing control, issues of intimacy and self-esteem, safety concerns, and intrusive imagery.

To avoid secondary trauma it is important that the caregivers have the possibility to meet and share their experiences and treat themselves with relaxing exercises like TTT and others. We call it peer counselling. If the caregivers can relieve themselves from the tension that the stories they listen to create inside themselves, their wellbeing will increase and their professional capacity as well.

2. Trauma Tapping Technique - TTT

In TTT we use the body to heal the mind. TTT is an efficient and gentle way to treat trauma and other psychological problems. It was founded in the US in the beginning of the 1980s.

We can describe the technique in an easy way like this:

While the person/client/beneficiary activates the mind on the traumatic memory, ie thinks about the problem, but just a little bit, the treater/therapist tap with gentle fingers on certain healing points in the face, on the chest and on the hand. This tapping sends signals to the mind and makes it relax.

The healing points that we use in TTT are situated on energy channels in the body. These channels are called meridians and were discovered by the Chinese at least 5 000 years ago. In the Traditional Chinese Medicine this energy system of the body has been used ever since to heal people from all different kind of physical problems and illnesses.

It was in the beginning of 1981 that a clinical psychologist in the USA, Dr Roger Callahan, established a treatment using this energy system and its healing points to treat psychological problems. He called the treatment Thought Field Therapy- TFT. He had been treating a lot of traumatized clients with psychotherapy before but didn’t find the results very satisfying. That is why he started looking for an alternative way. He studied the Chinese medicine and discovered that the healing points used by the traditional Chinese Medicine were very potential also for psychological problems.

Since then these kind of treatments have expanded over the world and are called as one term Energy Psychology. In the USA Energy Psychology has with great success been used for treating traumatized former soldiers from the wars in Vietnam, Afghanistan and Iraq. In many other countries Energy Psychology is used more and more since it has shown to be one of the most efficient ways to heal trauma and phobias. Few kinds of treatments can so gently give relief from difficult and deep traumas. Also most other psychological problems can be treated such as phobia, anxiety, depression, stress.

Advantages of treating with TTT

After several years of conducting trainings in TTT and treating survivors and perpetrators of violence we have seen that there are some specific advantages with applying and using the TTT for healing trauma.

Some advantages are:

Easy, cheap and thorough

- healing often takes place after one or a couple of sessions.
- each session takes 10-15 minutes.
- often relieves the symptoms of trauma permanently.
- has no bad side effects.
- easy to learn.
- can be used at any place at any time by anyone.
- can be done in groups or individually.
- can be used as a self-help method.
- and (because of the facts mentioned above) it is cost efficient.

Contact, integrity and empowerment

- can be used in combination with other kinds of treatments or/and counseling.
- gives good contact between the caregiver and the person treated.
- the treated person does not have to tell her/his story/problem/the traumatic event. But can do, if she/he wants to.
- touching gives not only comfort but it also releases the hormone for well being called oxytocin.
- empowers people by changing them from victims/survivor into healers since they can treat others after being treated and trained themselves. This is possible because the treatment is easy to learn.
- gives caregivers a tool to de-traumatize themselves from secondary trauma and other kind of work related or personal stress.

Happiness, acceptance and distance

- after the treatment people often feel some kind of relief, relaxation and happiness in their heart and mind. The acceptance of what has happened comes by itself from being relieved from the trauma. The traumatic events feels more distant and possible to think about without getting upset.

Who can be treated with TTT?

Anybody can be treated with TTT. He or she does not have to be traumatized and/or diagnosed with PTSD (Post Traumatic Stress Disorder). Any kind of psychological problem or stress can be relieved with TTT.

We have experience in treating and training different so called vulnerable groups and individuals as well as professionals working with these groups. It is worthwhile training all these groups in TTT since this will enhance the wellbeing of the beneficiaries and make the development programs work much better. The groups we have trained and treated are:

- Widows of war and genocide
- Women subjected to rape and/or other kind of sexual violence
- Children born of rape
- Orphans of war and genocide
- Former child soldiers
- Persons living with hiv/AIDS
- Perpetrators of violence

We have also given trainings to professionals and volunteers working with these groups, for example:

- Psychiatrists, Psychotherapists
- Medical Doctors, Nurses
- Counselors
- Psychosocial assistants
- Peace and reconciliation activists

TTT can also be used to release stress related to work or other circumstances in life. We all encounter problems from time to time. And for those who work with traumatized clients the need for a deep relaxation is very important since it is easy to develop secondary trauma (see p.5).

Different ways of using TTT

When you have learnt TTT and start practicing you will find that it is a very practical tool to be used by it self or to be included in the activities you already have initiated. TTT does not exclude other kind of treatments or counselling - rather the opposite - it can be included in any existing activity. If this is done it can make development programs and counseling work

much smoother, because when people are relieved from their traumas they can concentrate, learn, take decisions and be present here and now. All those things are difficult when you are traumatized because your mind is occupied with painful past events.

From our experience we can suggest some different ways of using TTT:

Individual

You can use TTT in individual counselling as a basic tool or as a complementary tool. This means that if you are having somebody in counseling and you reach a point when it is too difficult for the person to relate what has happened you can use TTT to "open" a way. The treatment de-charges the painful feelings from the memory.

Groups of beneficiaries

If you are working with for example a group of women survivors or ex-child soldiers you can teach them TTT all at one time. We have done this a lot and it is very rewarding. In this way everybody is treated the same, ie like saying "We all have problems" and nobody is singled out as different. We usually first show how to do the treatment on yourself and then the participants do the treatment on each other two by two. The result is often smiles and laughter since the treatment is different from what people are used to. And to most it is surprising that it really helps!

Peer counseling

Working as a counselor or caregiver is a very important but also a very heavy work. To listen to many sad and difficult testimonies of the beneficiaries can give secondary effects in the caregiver (see p.5). To avoid this it is important to have peer counseling, ie meeting other counselors/caregivers and discuss problems and also treat each other. Then TTT is a tool to use for healing the secondary effects and prevent burnout. And when meeting in the peer groups it is a good opportunity to practice together and exchange experiences of using the treatment for the beneficiaries.

3. The Trauma Tapping Technique in practice

How to approach the client/beneficiary
Like in all kind of counselling the most important is to establish a good relationship with the client. Make the person feel safe in your company. Prove to them that you respect and care for them. Show that you are there for the client and care for her/his wellbeing. We are working for the person, not for our own satisfaction of helping. This is what we call Client Centered Approach.

All the people we are working with need some kind of change, but it is they who should decide if they want it to be done or not. We earn the right to assist the person to change. Some important suggestions around the treatment:

- Let the client tell what he/she wants to tell about his/her experiences. Follow and listen carefully and with respect. Some people prefer to keep the problem or the traumatic event to themselves. That is perfectly fine since the TTT treatment only needs the person to think about his/her problem. When we tell the person that he does not have to tell about the traumatic event, this doesn't mean that we are not interested or don't care. We just want to leave them in privacy if they like.
- Say for example: "You suffered a lot. You have struggled and tried so hard to get better. You have done a good job. It is on my shoulders now to try to help you relieve something."
- Explain how the treatment is done. This is important since TTT is a different kind of treatment than what people are used to. Be aware of that some will think that it looks like a joke and too simple to be of any use.
- Tell the person that you will touch some healing points on the body and show on yourself where they are.
- Ask permission to treat the person. If he/she says "Yes" then we go on, but we must always respect a "No" or a hesitation. The client is the one who decides.
- Give the patient time to think it over. Don't rush.
- Don't promise that you will heal or cure

the person since we never know what will happen even if we have had a lot of success. Instead, just offer to give a treatment. Say for example: "This treatment has helped many people – perhaps it will help you too."

- Have a sensitive ear – listen to and feel what the client needs. For example if you are tapping too loose or too hard, if she or he is comfortable etc. When somebody cares it affects the healing in a positive way and the possibilities to get well increases.

- The client is the Boss and decides if you should treat him/her or not, when to stop or when to continue etcetera

- Ask the client to come back to you if the problem bothers him/her again (which seldom happens).

How to do TTT

(Illustrations on p. 13-14)

In TTT - Trauma Tapping Technique we use the body to treat and relax the mind. We can call it a psychological exposure technique.

The client is asked to think about his/her problem – to tune it in like finding the right frequency or station on the radio. To avoid suffering the client only has to think lightly about the problem, ie like having the volume of the radio on low level. He or she do not need to go deep into the problem. This is very important. And to prepare if it should happen you can say: "If you suffer – may I have the permission to change the subject?" (find out what they like for example flowers, football etc).

When the client thinks about his/her problem the therapist will tap on certain specific points on the body: in the face, on the chest and on the hand. These are healing points on the energy channels/meridians that connect all parts of the body and the mind.

This is how we do the treatment:

1. Establish contact with the person who wants to be treated.
2. Explain the treatment – how it is done.
3. Ask the person to think about his/her problem – just a little bit, not deeply.
4. Treat the Sequence of Points (see

below)

5. Ask the person to take two deep breaths.
6. Treat the Trauma Treatment Sequence of Points once again.
7. Ask the person to take some deep breaths and rest for a while.
8. Ask the person how she/he feels – ask if something changed.
9. If the person says that nothing has changed – do the treatment again.
10. If the person says that something has changes – take the hand and congratulate him or her.

The sequence of treatment points

Tap 10-15 times on the following points in the following order. Tap gently, but firmly, with two or three fingers:

1. The karate chop point /side of the hand under the little finger
2. Beginning of eyebrow/s
3. Outside of the eye/s
4. Under the eye/s
5. Under the nose
6. Under the mouth
7. Under the collarbone
8. Under the arm/s
9. The little finger (on the inside, at the bottom of the nail)
10. The ring finger -"
11. The middle finger -"
12. The index finger -"
13. The thumb -"
14. Under the collarbone

During the treatment the mind will relax and so will the body. Surprisingly to most people the problem will decrease or disappear. When the client tries to get back to the original feeling he does not get upset about it anymore Even though he/she will still remember what happened.

The suffering is removed, but values and awareness remain. A faint memory of the trauma remains, but the person has full control of it. The healing is often both total and permanent. The treatment takes approximately 15-25 minutes.

After finishing the treatment ask the person how she or he feels in that very moment (we can only say how things are right now. We don't know anything about the future). If the person says that some-

thing has changed, even the smallest little change: congratulate her or him and give words of strength to encourage him or her. It is not you as a Trauma Tapper who heals the person – it is the energy of the person treated that starts the healing process.

Counseling and moving forward

After the healing has taken place it is possible to work on and reflect on the possibilities that the beneficiary now can see in her/his life. That means integrating earlier experiences and counseling. Let the person search in her mind after the possibilities.

We have seen that the client often feel different in relation to earlier experiences in life after the treatment. They will often express this if the therapist or counselor just listens and asks "How are you doing? What is happening?" The answer could be: "I feel something has changed in me, I would like to..." or something like that. Here the person now can fill herself with a good feeling and the spirit of who she is: i.e a loving human being.

After using TTT any kind of counseling or therapy will work much better, because the person is no longer stuck in the trauma and can move forward. They can now take responsibility for the activities of their daily life. All the things that they have tried to learn and accomplish before without succeeding, they will now be able to do.

Possible reactions after a TTT session:

After a treatment with TTT most people feel relieved in one way or another. Because even if it looks simple the treatment has a strong effect on the body/mind system. The most common reactions are:

- feeling light, relaxed or tired. These reactions come because when the tension of the trauma leaves the body the person feels how tired he or she actually is. The tension of the trauma has taken a lot of energy. This means that the client might need to rest after the treatment. Some even feel a bit dizzy. That is also completely normal.

- feeling as if the trauma has decreased and become more distant.

- accepting what has happened, like "Well, that was then, it is over. But now I am here. I have to move on with my life."

- a laughter, smile and feeling happy. These reactions are also signs of relaxation. It also shows that behind the trauma lies happiness just ready to get out and show itself.

- tears and/or cry of relief.

- feeling kind of empty. When the trauma leaves it can feel like an empty space inside the person because the trauma has taken so much space before. It is very important to fill this empty space with something good. Tell the person to fill it with love and light which is every person's true identity. You can also do the treatment again while the person is thinking about these good things and "tap" it into the body and mind or tell her/him to do it themselves.

4. Body awareness and dissociation

The importance of body exercises

In connection with the TTT treatment we often include other body exercises like for example the one called Do-In which is a kind of self massage (see page with Do-In instruction). We do this for two reasons:

1. Psychological tension often shows in the body. To treat and relax the body with this kind of exercises can be very helpful.
2. Often there is a dissociation from the body after a traumatic event. This means that the person is not completely "at home" in their body, because they unconsciously hide from the painful memory by "leaving the body". With different body exercises you can bring the person back to the body and make him/her responsible for their own bodies again.

Apart from Do-In also breathing exercises and other kinds of massage are good to include for the well being of the beneficiaries and the caregivers. Together with the TTT treatment these are also tools for selfcare. So instead of being helpless with their memories and their body response they can help themselves. Feeling good

enhance their well being. This will translate into other areas of their life. You can call it shifting energy.

Body Awareness exercise

Do - In (self massage) is a body awareness exercise. Giving the body this attention will benefit the well-being and make you feel more awake. While doing the exercise thank your body for carrying you around in this life. Gratitude is a good medicine.

Preparation: Stand with your feet shoulder width apart. Take two deep breaths and close your eyes. Scan your body from head to feet, i e examine how the different parts of your body feels by using your thought and attention. Take two deep breaths and open your eyes.

1. Take one hand in the other and massage the palm with the thumb thoroughly.
2. Massage the backside of the same hand by passing the thumb in the valley between the bones leading to the knuckles.
3. Place your hand on your belly and rotate each finger separately. Do the same with the other hand.
4. Shake your hands up in the air.
5. With relaxed wrists tap with your fingertips all over the head.
6. Place the thumbs on the temples and with the rest of the fingers somewhat curled "open" the forehead, i e pull the fingers from the middle of the forehead to the sides three or more times.
7. With your thumb press along the bone above the eye.
8. With the index finger press along the bone under the eye.
9. Press with the fingertips along the roots of your upper row of teeth. Do the same with the lower row of teeth and along the chin bone.
10. Massage the whole face.
11. Pull your ears in all directions as if you were trying to make them bigger.

12. Caress the throat on the front side.

13. Squeeze the neck muscles, first with one hand and then the other.

14. With the right hand clap on the inside of the left arm from the shoulder down towards the hand. Clap hands, and then return by clapping on the outside of the arm going up. Do the same on the other arm with the left hand. On the inside down, outside up.

15. Put the right hand on the left shoulder while supporting the elbow with the left hand. Clap the shoulders with the palm reaching as far down as possible. Squeeze the shoulder muscle. Change to the other side.

16. Tap and pound the front side of the chest with your fingertips or clap with open hands like a proud gorilla presenting himself. Do it thoroughly.

17. Tap under the arm, from the armpit down to the hip. Use the right hand while raising the left arm and vice versa on the other side.

18. Massage the belly by softly circulating the palms clockwise.

19. Bend forward and tap the back - especially along the spine. Try to reach as high up as possible.

20. Tap/clap the waist and the bottom.

21. Tap/clap along the legs on the outside going down and on the inside going up.

22. Take your kneecaps in your hands and make a circular movement with the legs, like dancing or twisting. Both directions.

23. Walk on the spot (or around) first on the toes, then on the heels, then on the outside of the foot and finally on the inner side of the foot. Repeat three times.

Finally: Stand still, take two deep breaths and close your eyes. Scan your body like in the beginning. Notice if you feel any difference in the body. Take two deep breaths and open the eyes again.

Testimonies

(from participants and clients who have experienced treatment with TTT)

“I feel new, as if my mind was reformatted”
(former sex-slave and child soldier, DRC)

“I feel as if I have been walking up a mountain for many years. Now finally I can sit down and rest and even enjoy the view. This treatment is really a medicine. And it is for free!”
(Widow of the genocide, Rwanda)

“Before I felt as if there was not enough space for my heart to beat and it was difficult to breathe. But after this treatment the heart beats normally and I can breathe without problem.”
(Survivor of rape, DR Congo)

“I used to be like a street boy even though I am old. I could not work because of all the bad memories. I used to beat my wife to get the money she earned and go to the bar and get drunk with my friends. But now after the treatment I even found a work and my wife and I are good friends and share even the work at home. We have become like role models in our community. We treat our neighbours too.”
(Survivor of genocide, Rwanda)

Finally

Start teaching people TTT now!
Have courage! Try it on every kind of problem! It is easy and has no bad side effects.

Dare to fail and don't overdo your inability.
You have nothing to lose, but a lot to win!

The world will become a more peaceful place if people can learn how to treat traumas and inner tension.

Some links

www.peacefulheart.se
www.emofree.com
www.innersource.com
www.energypsych.com
www.eftdownunder.com
www.tatlif.com

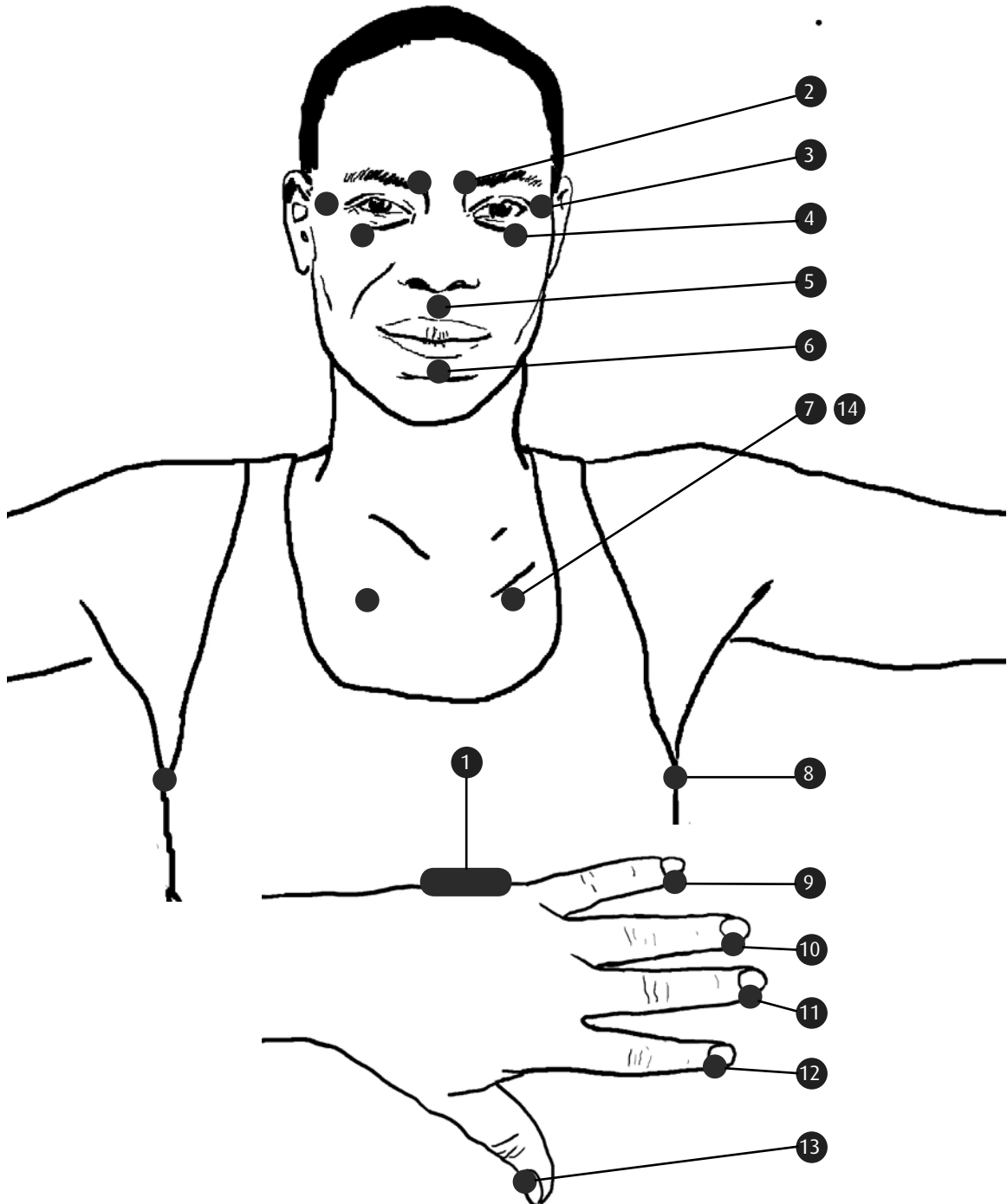
Litterature

- ✿ Gunilla Hamne, Ulf Sandström, Resolving Yesterday
- ✿ Ronald Ruden, When the past is always present
- ✿ The Promise of Energy Psychology, Feinstein, Eden & Craig
- ✿ Energy Tapping and Energy Tapping for Trauma, Fred P Gallo
- ✿ Healing Trauma: Peter Levine

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www.peacefulheart.se
www.selfhelpfortrauma.org

TTT
Trauma
Tapping
Technique



How to do the Trauma Tapping Technique - TTT

1. Establish contact.
2. Explain how the technique is done.
3. Ask the person to think about his/her problem - but just a little bit - not deeply. You may ask them to rate their feeling 0-10 - where 0 is nothing.
4. Do the Tapping Technique sequence of points as described below.
5. Then ask the person to take two deep breaths.
6. Repeat the Tapping Technique sequence.
7. Ask the person to take two deep breaths again and rest while holding his/her hand.
8. Ask how much it has changed, from 0-10. If it is above 2-3 do the Tapping again. If the person says that something did change - congratulate him/her.

The Trauma Tapping Technique sequence of points

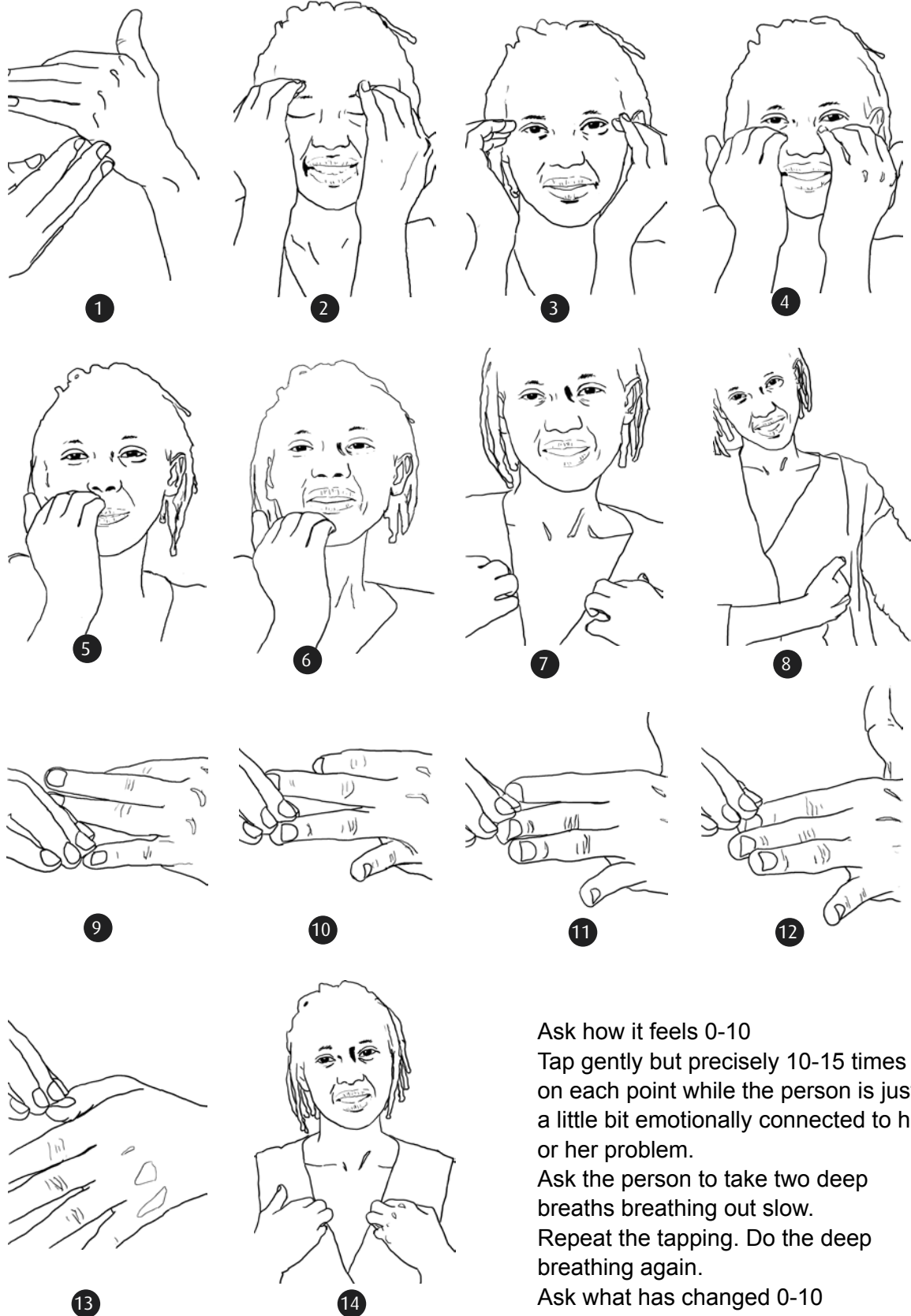
Tap gently but precise 10-15 times on each of the following points using two or three fingers:

1. The karate chop point on side of the hand under the little finger
2. At the beginning of the eyebrow/s
3. Outside the eye/s, on the bone
4. Under the eye/s, on the bone
5. Under the nose
6. Under the mouth
7. On the chest, under the collarbones
8. Under the arm/s, one hand below the armpit
9. On the little finger (on the inside, above the first joint
10. On the ring finger -”-
11. On the middle finger -”-
12. On the index finger -”-
13. On the thumb -”-
- 14 Repeat on the chest under the collarbones

TTT

Trauma Tapping Technique

for releasing emotional and traumatic stress



Ask how it feels 0-10
 Tap gently but precisely 10-15 times on each point while the person is just a little bit emotionally connected to his or her problem.
 Ask the person to take two deep breaths breathing out slow.
 Repeat the tapping. Do the deep breathing again.
 Ask what has changed 0-10