

# The Thirteen R's Of Trauma-Informed Healing From Childhood Trauma

Linda Yang, MD

- I. **Referral** to a trained (Christian) Life Coach or Trauma-Informed Coach or Counselor or Therapist early in the healing process can be beneficial. Coaches are not medical professionals, though, and do not treat or diagnose. They must know when it's appropriate to refer a trauma survivor to a licensed Trauma Therapist. A trauma therapist is a licensed mental health professional with explicit training, supervision, and clinical experience working directly with trauma.

There are no scientific studies of mental health issues from the time of the Bible. Therefore, the Bible does not explicitly mention counseling by a psychologist, psychiatrist, or counselor. However, many types of counseling and psychiatric care are available today, just like antibiotics and physical therapy. Various illnesses require different methods of diagnosis and treatment. There is no sin in pursuing specialized paths to care for our minds and bodies. On the contrary, maintaining our mental health is a meaningful way to care for what God has given us (1 Corinthians 6:19-20, 1 Corinthians 3:9, 1 Corinthians 9:17). Consider keeping prayer and God's Word in mind when looking for Christian mental health professionals.

Please refer to my discussion on "Is It Biblical for Christians to Seek Counseling or Therapy?" at the end of Module 1.

- II. **Realize *the*** widespread impact of childhood trauma. We learned in Module 2 that childhood trauma is much more pervasive than we had imagined. Sin mingles within the stories of all children growing up. This is a quote from Kenny Weiss, "No matter what kind of childhood we've had, nobody escapes trauma while growing up." Any sinful act inflicted on a child can be traumatizing. Ecclesiastes 7:7 says, "Surely oppression destroys a wise man's reason."

When a child experiences a crisis, it does not necessarily mean that the child will develop toxic stress and become traumatized. Rather, how the child's body and brain respond to different levels of stress and whether the child is nurtured in a supportive environment can have lasting positive or negative physical and emotional effects. But first, we must understand how our bodies and brains respond to trauma. Furthermore, only by understanding how our bodies respond to stress can we see potential paths for treatment and recovery.

- III. **Recognize** signs and symptoms and risk factors of adverse childhood experiences in different age groups. In Module 3, we learned what adverse childhood experiences are. I provided evidence that adults with ACEs can have an increased risk of substance abuse disorder, mental health problems, chronic physical health issues, and a shorter life span. We now understand why adverse childhood experiences are considered the single greatest unaddressed public health threat facing our nation today. We also learned that ACEs can be prevented. One way to help prevent ACEs is to identify children and families at risk of experiencing ACEs and provide them with the support they need. We talked about risk factors on individual, family,

and community levels. Early recognition of signs and symptoms of ACE and its risk factors can lead to early identification of at-risk children and ensure early intervention.

Many families experience risk factors for ACE, some of which are beyond their control. Still, many sinful behaviors against children are damaging and must be cut off and discarded.

Matthew 18:6-9 says, "If anyone causes one of these little ones - those who believe in me- to stumble, it would be better for them to have a large millstone hung around their neck and to be drowned in the depth of the sea. Woe to the world because of the things that caused people to stumble! Such things must come, but woe to the person through whom they come! If your hand or your foot causes you to stumble, cut it off and throw it away. It is better for you to enter life maimed or crippled than to have two hands or two feet and be thrown into eternal fire. And if your eye causes you to stumble, gouge it out and throw it away. It is better for you to enter life with one eye than to have two eyes and be thrown into the fire of hell. "

As Christians, we need to be willing to give a biblical correction to those we love who are in sin or error. Without "cutting off and throwing away" sinful behavior, children can experience adverse childhood experiences (ACEs) that will significantly impact their emotional and social development into adulthood. In 2 Timothy 2:23-26, Timothy shows us how to carry out the gentle art of correction.

"Have nothing to do with foolish, ignorant controversies; you know that they breed quarrels. And the Lord's servant must not be quarrelsome but kind to everyone, able to teach, patiently enduring evil, correcting his opponents with gentleness. God may perhaps grant them repentance leading to a knowledge of the truth, and they may come to their senses and escape from the snare of the devil, after being captured by him to do his will."

We're often afraid to correct others because we're worried about how they'll react. If we know Christ, we are the Lord's servants and should correct those in sin or error. He will hold us accountable for our faithfulness to Him. We must fear God more than people and be willing to help them change course if we see them headed for a cliff.

- IV. **Refuge (safety)** must always be a top priority before any intervention occurs. Provide a safe and supportive environment where people can talk about their trauma. Many people affected by trauma find it challenging to feel emotionally, physically, and spiritually secure. When people feel insecure, they distrust others and tend to become defensive and isolated, focus only on survival, exhibit aggressive behavior, or withdraw. Social isolation can make people reluctant to seek the services they need because they don't feel safe. Security comes when one can trust another person. We help others build trust by being consistent, understanding, supportive, and patient.

Isolation causes harm. God knew this in Genesis 2:18 – "And the LORD God said, "It is not good that man should be alone."

The church, as the body of Christ, can be a safe place for trauma survivors to heal, as well as a source of positive and supportive relationships. As disciples of Christ, we are called to minister to trauma survivors and help them find hope and experience healing in God.

A report from the American Bible Society showed that many people suffering from trauma are open to the church's help, even if they are not regular churchgoers. Pastors who show that they are willing and able to help traumatized people tend to see an increase in the number of people who come to them for help. Most pastors believe that trauma is a problem for the church to address. They also believe that the church should extend care to its neighborhoods and communities, even if those in need are not members of its congregation.

Be a **safe** listener. Allow people to talk about their trauma openly and without any hindrances. Talking about one's trauma can help one process what happened and make sense of it. This isn't about a pity party; it's about assisting them to connect with their emotions and allow their wounds to heal.

Romans 15:1-3 – "We who are strong ought to bear with the failings of the weak and not to please ourselves. Each of us should please our neighbors for their good, to build them up. For even Christ did not please himself but, as it is written: "The insults of those who insult you have fallen on me."

When listening, we try to understand the person rather than get them to avoid talking about their pain. It is crucial that the individual feels heard and understood and that their concerns are given equal weight. They won't feel heard or taken seriously if they don't feel validated. Validating doesn't mean you agree with them or are siding with them; it just means you are taking a stand to listen to and acknowledge them.

Scripture promotes listening. James 1:19 – "So then, my beloved brethren, let every man be swift to hear, slow to speak, slow to wrath; for the wrath of man does not produce the righteousness of God."

Let the person know you are present for them, and you will do your best to listen in a way that honors, respects, and support them. You are letting them know that you care about them and are invested in who they are as a person.

Galatians 6:2 – "To Bear one another's burdens, and so fulfill the law of Christ."  
Bearing a person's burden is not telling them to keep it to themselves, but allowing them to unload it on you, which is listening and helping them process and heal from it.

Share with them The Safe Listener's Promise.

#### The Safe Listener's Promise

I will listen to understand.

I will keep what you share private.

I will not minimize your pain.

I will not compare your pain with my own.

I will not give quick solutions.

I will listen again when you want to share more.

- V. **Respond** with empathy and compassion, being concerned about them, and valuing their concerns and feelings. What's most important is that you are authentic and sincere.

Ask the right questions to allow the trauma survivor to talk about their trauma because it helps them process what happened.

### 3 Questions To Ask Someone Who Is Hurting

What happened?

How did it make you feel?

What was the hardest part for you?

**\*\*\*DO NOT SAY, "What's wrong with you?" INSTEAD, SAY, "What happened to you?"\*\*\***

"What's wrong with you?" implies judgment, blame, shame, and punishment. It is saying the person) is the problem instead of the behavior. It also equates to telling God that there is something wrong with what He created.

Psalm 139:14 – "I praise you because I am fearfully and wonderfully made; Your works are wonderful, I know that full well."

Genesis 1:27 – " So God created mankind in his own image, in the image of God he created them; male and female he created them."

Instead, we should focus on saying, "Can you tell me what happened to you?" This question shows empathy, compassion, understanding, and nurturing.

Here are some suggestions about how to respond after they share. These responses can be helpful because they are non-judgmental, compassionate, and can reduce shame. They meet the person's need to be heard and offer words of comfort and an apology that the victim has probably never heard before.

"Thank you for trusting me enough to share such a personal and difficult story."

"I appreciate the courage it took to share that with me."

"I don't even know what to say right now, I'm just grateful you told me."

"I want you to know that what happened wasn't your fault. You did whatever you had to do to survive."

“I am so sorry you were hurt/mistreated/harmed.”

“You deserve support. You deserve a witness for your pain. You deserve to learn strategies that can help you to heal.”

Instead of saying “you need help,” which can be misinterpreted as “there is something wrong with you,” saying, “you deserve support” can enhance ego-strengthening and empowerment.

“You are not alone. You don’t have to be alone in your healing.”

“You’ve just taken the first step. It would be my privilege to help you take the next one.”

Sometimes, it may be enough just to respond with a few words:

“I hear you.” When said with sincerity, that meets a person’s need to be heard.”

“Wow.” When said softly, that gives the speaker a sense you are listening.

After any of these initial responses, they can be encouraged to share more.

“Tell me more.” When said with sincerity, that shows you are really interested.

It is equally important to allow for silence so those messages can be absorbed.

Also, let them know you are willing to listen again.

Romans 12:15 – “Rejoice with those who rejoice, and weep with those who weep.”

Respond with positive encouragement – Highlighting the accomplishments that God has accomplished through them, pointing out the strengths and gifts God has given them, comforting them, and building them up.

1 Thessalonians 5:11 – “Therefore encourage one another and build each other up, just as in fact you are doing.”

VI. **Respect**, structure, and boundaries help create a trusting and safe environment.

Unfortunately, people who have been abused often were not respected, or their boundaries were intentionally crossed. Many times the abuse came to the survivors unexpectedly.

Matt 22:37-40 – “Jesus replied, “‘Love the Lord your God with all your heart and with all your soul and with all your mind.’ This is the first and greatest commandment. And the second is like it: ‘Love your neighbor as yourself.’ All the Law and the Prophets hang on these two commandments.”

This verse means that we are to teach children and adults to love themselves as they wish to be loved and love others the same way. Setting healthy boundaries means knowing when they need to take care of themselves and when they need to take care of others. They should always try to do both equally well. Respect the boundaries of others and value their privacy as much as their own. When they love others as they love themselves, they also treat them the way they want to be treated. This is true for children and adults alike. To learn to respect others and their boundaries, begin by cultivating love, respect, and healthy boundaries at home.

Luke 6:31 – “Do to others as you would have them do to you.”

Lack of respect and boundaries usually come from a lack of understanding of how trauma affects individuals. Therefore, we should help others understand the impact of childhood trauma and not judge them for wanting to maintain their boundaries.

Matt 7:1-2 – “Judge not, that you be not judged. For with what judgment you judge, you will be judged; and with the measure you use, it will be measured back to you.”

- VII. **Relationship(s)** is the **MOST IMPORTANT** healing factor behind healing from trauma. A **positive relationship** is **how we tip the scale from negative to positive outcomes in people who have experienced ACE. ONE loving relationship** in the chaos of trauma can provide enough emotional strength for a child or adult to survive, **even just one!**

1 Corinthians 13:4-7 - Love is patient and kind; love does not envy or boast; it is not arrogant or rude. It does not insist on its own way; it is not irritable or resentful; it does not rejoice at wrongdoing but rejoices with the truth. Love bears all things, believes all things, hopes all things, endures all things.

Hebrews 10:24-25 - And let us consider how to stir up one another to love and good works, not neglecting to meet together, as is the habit of some, but encouraging one another, and all the more as you see the Day drawing near.

- VIII. **Resilience** *is the antidote to childhood trauma*. Refer to Module 7. It is the ability to bounce back from adverse experiences or the process of adapting well in the face of adversity, trauma, tragedy, threats, or significant sources of stress.

Resilience is the biblical norm for Christians. The Bible contains many admonitions to press on (Philippians 3:13-15), overcome hardship and temptation (Romans 12:21), and persevere in the face of trials (James 1:12). It also gives us numerous examples of people who suffered greatly but continued to follow God’s plan for their lives. Proverbs 24:16 could be seen as the theme verse for the resilient:

Proverbs 24:16 - “Though the righteous fall seven times, they rise again, but the wicked stumble when calamity strikes.”

James 1:2-4 – “Consider it pure joy, my brothers and sisters, whenever you face trials of many kinds because you know that the testing of your faith produces perseverance. Let

perseverance finish its work so that you may be mature and complete, not lacking anything.”

Children are not born with resiliency; they learn how to be resilient. Develop self-regulation and executive function in children to help them meet their expectations. Proverb 22:6 says, “Train up a child in the way he should go, and when he is old, he shall not depart from it.” This involves training, teaching, and instructing a child. Thus you are teaching them the skills to meet academic and societal expectations. Teaching someone how to do something is an invaluable part of their development. The Bible contains many verses about teaching, instruction, and guidance for children. Begin by setting standards for what a person can do and enforcing them. Next, set higher standards; meeting those standards will give people a sense of empowerment and control. Teaching and guiding children in the most effective way for their brain development is the key to ensuring their success.

Having structure, consistency, and predictability are helpful because they ensure clear directions that the children can follow and expectations are met. Organizational (for example, at school) or relational guidelines (like at home) make people feel safe because they are consistent, unambiguous, and predictable. Consistency and predictability aid the development and strengthening of new neural pathways in the brain, and strengthen the connection between the upstairs and downstairs brains.

- IX. **Regulation** is what we do to help regulate a child’s emotions or teach adults to self-regulate. Show them how to reconnect their primitive brain to their thinking brain so they can **relate, reason, focus, and learn**. Refer to Module 8. Help the child or adult reframe their thinking.

In Proverbs 23:7, Solomon tells us there is an intrinsic link between our minds and actions.

For as he thinks in his heart, so *is* he. “Eat and drink!” he says to you, but his heart is not with you.

We do what the mind says to do. The mind is the control center of our existence. If the mind is broken, then the whole person is broken. If the mind is organized, it is strong, and the whole person is strong. Remember that your thoughts are not who you are but what you think. Your body is like a car, and your mind is like the steering wheel. The steering wheel is responsible for directing the car. That’s why it’s so helpful to help the other person be self-regulated and “take captive every thought to make it obedient to Christ” (2 Corinthians 10:5).

Self-regulation is a skill that allows people to control their emotions and thoughts and strengthens their self-image. It helps us build resilience, perseverance, or forbearance under trials. Galatians 5:22-23 says that being perseverant and controlling your own behavior are good fruits of the Spirit.

Keeping a clear mind for yourself and your child can be challenging. An actual battle is going on in the brain when it's dysregulated. Hold on to God's truth and let it give you the strength you need.

Psalm 28:7-8 - The LORD is my strength and my shield; my heart trusts in him, and he helps me. My heart leaps for joy, and with my song I praise him. The LORD is the strength of his people, a fortress of salvation for his anointed one.

- X. **Reconstructing the trauma story in a safe environment is essential in healing.** Every traumatic experience has a story. People who have experienced trauma tend to have difficulty understanding and processing emotions. When people are stressed, they only use their reptilian brain, which is the part of their brain focused on survival. During extreme stress, their thinking brain is not accessible, and many details are left out or inaccurate in their stories. Reconstructing helps the trauma survivor better understand the traumatic event and can help them identify incorrect or unhelpful thoughts.

Reconstructing helps unpair fearful associations between innocuous stimuli and actual danger or trauma. This can be helpful in cases where a person fears certain stimuli, for example, a mother cooking and the smoke alarm sounding off. However, the alarm triggers memories of her son almost dying in the intensive care unit.

Reconstructing may also help trauma survivors forgive themselves and those who have harmed them.

Matthew 5:7 - "Blessed are the merciful, for they will be shown mercy."

Matthew 6:12 - "And forgive us our debts, as we have forgiven our debtors."

Colossians 3:13 - "Forbearing one another and, if one has a complaint against another, forgiving each other; as the Lord has forgiven you, so you also must forgive."

Take comfort in knowing that Jesus promises in Colossians 3:25 that, "the wrongdoer will be paid back for the wrong he has done, and there is no partiality."

A Christian trauma specialist should guide the reconstruction process because it is delicate and sensitive. To change their beliefs, a person must first address their deeply held beliefs about themselves in the world. They must challenge those beliefs and create a meaningful narrative that reflects their true identity in the world and the image of Christ. A therapist can help them work through their feelings and feel more in control of their lives. If the trauma story is not reconstructed in the correct order, the memories of the trauma can feel like a chaotic mess of images, sounds, and emotions.

- XI. **Restore** the connection between survivors and their community. Refer to Module 1. People who have experienced trauma often feel isolated or alone. They need to know that others care about them and want to help. Coming back into a community after being away for a while can be a stressful and fearful experience, as they are stepping back into a space of vulnerability and hope. The benefits of a welcoming church community and a network of friends are greater than any individual can do on their own. This is a critical time for the church to be supportive of survivors.



Isolation can cause harm. God knew this when He stated back in....

Genesis 2:18 – “And the LORD God said, “It is not good that man should be alone.”

God created us to be communal beings. From the moment humanity was created, God noted that it was not good for us to be alone.

Scripture tells us that community is essential for many reasons:

1. It is evidence that we walk in the light (1 John 1:7). We fulfill Christ’s commands by helping those in our faith community (Galatians 6:2).
2. It provides us with prayer support for our healing, which is not found elsewhere (James 5:16). It is where we can challenge each other and help each other grow to maturity (Proverbs 27:17).
3. It is where Christ promises His presence would be (Matthew 18:20). It is where we can be encouraged by each other’s faith in times of abundance, as well as in times of difficulty (Romans 1:11-12).
4. We are not just individuals but part of the Body of Christ, and part of our calling is to show concern for the other members of that Body (1 Corinthians 12:25-27).
5. Christ calls us to this one Body, and He expects us to be in unity with that Body (Ephesians 4:2-6). We can use God’s gifts, loving and serving others without complaining or resentment (1 Peter 4:8-11).

XII. **Resist** Re-Traumatization. Refer to Module 8. Trauma can cause deep wounds. We need to be cautious so that we don’t cause more wounds in our attempts to help people heal. “Re-traumatizing refers to inadvertently recreating some conditions of a person’s previous trauma, causing them to relive it at the moment.”

XIII. **Regeneration** (or post-traumatic growth) is the process of creating and experiencing positive outcomes following a traumatic event. They can experience a sense of new possibilities, change in relationships, increased personal strength, a new-found purpose, a heightened appreciation for life in general, and a religious awakening and awareness.

There are five possible growth results from post-traumatic growth:

1. An increased appreciation of life and a sense of what is truly meaningful.  
The person develops increasing existential awareness and experiences a heightened perception of commonplace experiences. They pay more attention to things previously seen as "small" or "insignificant," such as the color of the sky.

Ecclesiastes 6:9 - Enjoy what you have rather than desiring what you don’t have. Just dreaming about nice things is meaningless—like chasing the wind.

Hebrews 13:5 – Keep your life free from love of money, and be content with what you have, for he has said, “I will never leave you nor forsake you.”

1 Timothy 6:6-8 - Now there is great gain in godliness with contentment, for we brought nothing into the world, and we cannot take anything out of the world. But if we have food and clothing, with these we will be content.

2. Closer and more meaningful relationships.

Because of trauma, the person may need to reach out to others in new ways to receive support. This process can open up the person to new ways of relating, specifically, increased emotional connection and sharing of negative experiences. In addition, the person may strengthen existing relationships.

God's will is for us to reach out to others and bear one another's burdens.

Hebrews 13:16 – “Do not neglect to do good and to share what you have, for such sacrifices are pleasing to God.”

Philippians 2:4 – “Let each of you look not only to his own interests but also to the interests of others.”

1 Thessalonians 5:11 – “Therefore encourage one another and build each other up, just as in fact you are doing.”

Romans 15:5 – “May the God of endurance and encouragement grant you to live in such harmony with one another, in accord with Christ Jesus.”

3. A sense of greater personal strength.

Some trauma survivors can identify differences between their perceived skills and strengths before and after the trauma.

When we believe and trust in Jesus Christ and what He did on the cross for us, and by accepting His abundance of grace and His gift of righteousness through faith, we can heal through His strength and do everything through Christ who gives us strength.

Philippines 4:13 – “I can do all things through him who strengthens me.”

Isaiah 41:10 – “Fear not, for I am with you; be not dismayed, for I am your God; I will strengthen you, I will help you, I will uphold you with my righteous right hand.”

4. An identification of new possibilities for a person's life and a sense of purpose.

The person discovers new possibilities in life. This discovery creates a new life path and perception or philosophy about life that changes that person's past assumptions and beliefs.

Research shows better mental health in trauma survivors when they perceive one or more positive outcomes from a traumatic event. People who found a purpose for what they experienced had lower levels of depression and a higher perception of well-being.

Some survivors find purpose in helping others who have experienced similar trauma.

***God wants to use us to guide others to Himself. In loving others and as we heal, we will discover the incredible satisfaction of helping others who are also lost and hurting be found and healed.*** Incredible passion and joy come from seeing a life transformed through the Spirit working in us.

In Mark 12:31, Jesus said, "Love your neighbor as yourself." Ephesians 5:1-2 says, "Follow God's example, therefore, as dearly loved children and walk in the way of love, just as Christ loved us and gave himself up for us as a fragrant offering and sacrifice to God." Acts 26:16 says, "Now get up and stand on your feet. I have appeared to you to appoint you as a servant and as a witness of what you have seen and will see of me."

Whatever our purpose is, God has a plan for us, and it will be fulfilled. We need to have faith in God that what He started in our lives will be completed. God will never abandon or forsake us. The good work God is doing in us aligns with His purpose for our lives.

1 Peter 5:10 – "And after you have suffered a little while, the God of all grace, who has called you to his eternal glory in Christ, will himself restore, confirm, strengthen, and establish you."

Know that God is always in control and is always with you. Jeremiah 29:11 says, "For I know the plans I have for you, declares the LORD, plans for welfare and not for evil, to give you a future and a hope."

Philippians 1:6 – "And I am sure of this, that He who began a good work in you will bring it to completion at the day of Jesus Christ."

## **5. Drawing closer to God.**

Post-traumatic growth could be called "with-Jesus transformation." As Christians, we can listen compassionately to trauma survivors and help them reinterpret God's presence in their experiences because we have the Holy Spirit in us. Jesus sees, hears, and understands their pain. Jesus experienced the most horrific pain through the crucifixion, suffered alienation from the Father, and experienced death. Yet, Christ responded to the most horrendous pain with honest grief, faith, and love—love for his Father and us.

Romans 8:28 says, "And we know that God causes everything to work together for the good of those who love God and are called according to his purpose for them." Jesus' crucifixion and resurrection helped believers to put their faith and hope confidently in God. "Through Christ you have come to trust in God. And because God raised Christ from the dead and gave him great glory, your faith and hope can be placed confidently in God" (1 Peter 1:21 NLT).

We can model Christ's response to trauma and be examples of how trauma survivors can believe in God's promise and be on a faith-fueled path of resiliency. We can guide them to grow in knowing who Jesus is and understand that their pain becomes His. His resilience, faith, and love become theirs in a process that promotes wholeness and healing. In leaning on Jesus, their burdens become lighter. His power allows them to choose a different path and experience true transformation.

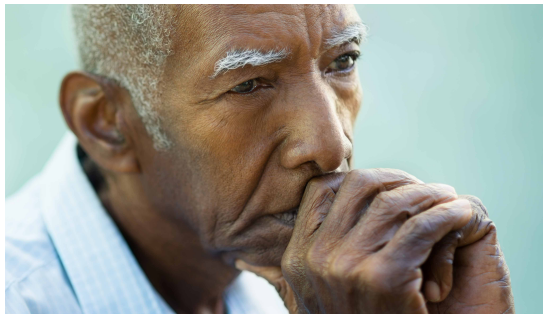
**Look at what Jesus has done:** His life, death, and resurrection are models for our lives! When we look at ourselves (our weaknesses) and our unfavorable circumstances, it is easy to feel anxious, afraid, and discouraged. That's why God wants us to focus on Jesus rather than on ourselves. In the eyes of God, because he puts us in Christ, the reality of Jesus is our reality today – “As he is so are we in this world!” Don't focus on our weaknesses or how we are lacking in life – instead, be grateful for what we have. Jesus is at the Father's right hand, full of life, peace, joy, and favor. All of heaven's resources are at his disposal. He is greatly blessed, highly favored, and deeply loved by the father, and so are we! To be Jesus-occupied means to see things from God's perspective. When we view life from the perspective of God, we will find that his abundant grace and provision always cover any need we have.

Ephesians 2:4-6 says, “But because of His great love for us, God, who is rich in mercy, made us alive with Christ even when we were dead in transgressions - it is by grace you have been saved. And God raised us up with Christ and seated us with Him in the heavenly realms in Jesus Christ.”

1 Peter 1:3 says, “Praise be to the God and Father of our Lord Jesus Christ! In His great mercy He has given us new birth into a living hope through the resurrection of Jesus Christ from the dead.”

The gospel of new life in Christ can enable people to respond to sin done against them and horrific circumstances by seeking God for comfort, strength, and wisdom to obey and trust Him. Christ is their hope of glory, and His power allows them to choose a different path. By the doctrine of Christ's cross, the dominion of sin is broken in them, and they are fortified against that which feeds their pain and sorrow.

This is *true* post-traumatic growth!



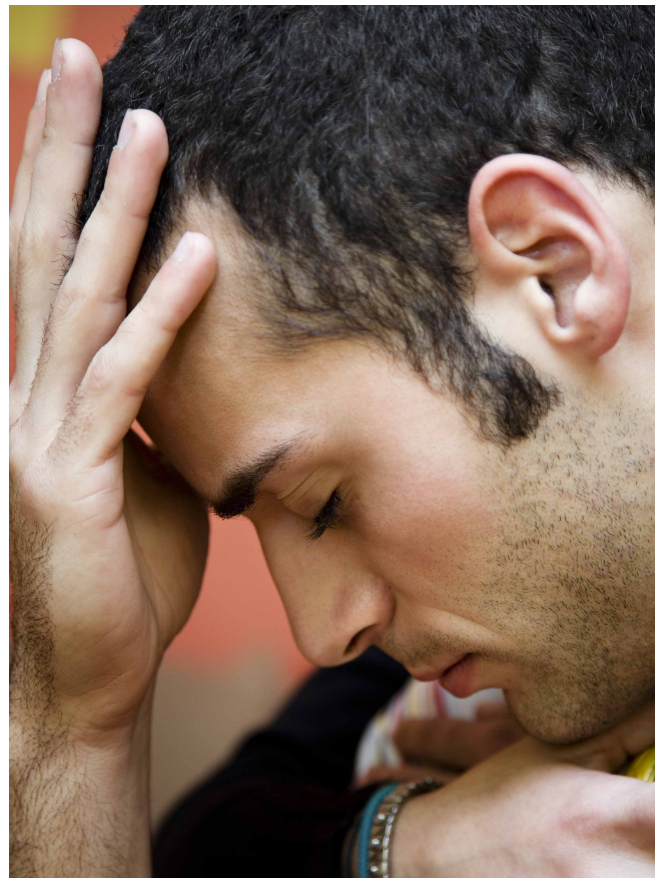
## Tips for Survivors of a Disaster or Other Traumatic Event: COPING WITH RETRAUMATIZATION

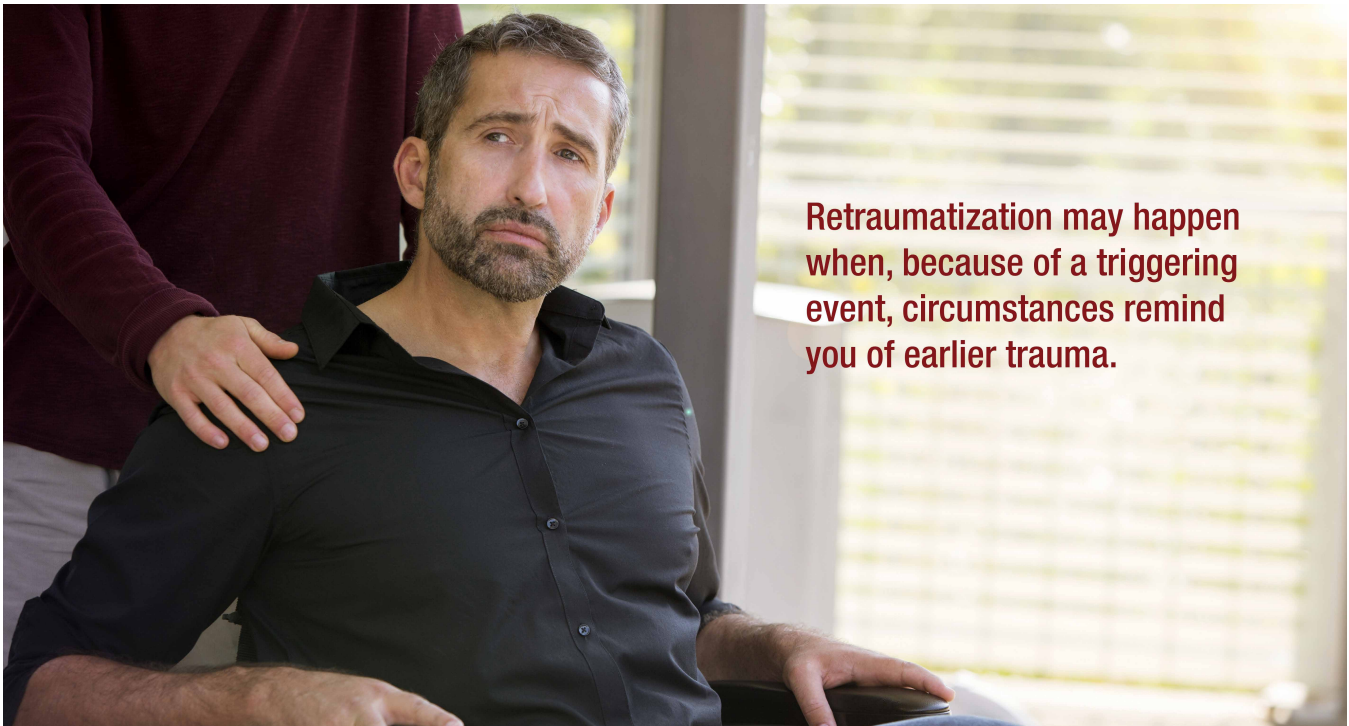
### Introduction

According to National Comorbidity Survey data, more than half of men and women had experienced one or more traumas over the course of their lives, with experience of a natural disaster the second most common trauma type (Kessler et al., 1999). For some, traumatic stress reactions to a new event can feel as intense as they were when the original event occurred. This is known as retraumatization. Retraumatization is reliving stress reactions experienced as a result of a traumatic event when faced with a new, similar incident. However, as the result of the passing of time many people do not realize the stress they are experiencing is related to an earlier trauma in their lives. A current experience is subconsciously associated with the original trauma, reawakening memories and reactions, which can be distressing. This type of reaction is common and survivors should realize there are steps that can be taken to manage or relieve symptoms.

This tip sheet covers signs and symptoms of retraumatization, as well as how to know if you may benefit from more help and guidance on how to manage it. The tip sheet also lists resources for support and identifies ways you can build resilience, which is your ability to tap into your skills and access the resources around you when you are going through stressful experiences.

Most survivors of a disaster or other traumatic event are able to work through their traumatic experiences, return to their regular activities, and enjoy their lives. Some people, however, experience retraumatization and could benefit from recognizing trauma symptoms, learning how to manage them, and seeking additional help as needed. If you are experiencing retraumatization and need additional help, try using some of the recommendations noted in this tip sheet, or see the Helpful Resources section of this tip sheet for information about locating a trauma-informed professional.





**Retraumatization may happen when, because of a triggering event, circumstances remind you of earlier trauma.**

## Triggering Events

A triggering event is something that immediately reminds you, your family, or your community of a fear that was experienced during a previous traumatic event, such as a disaster. Retraumatization may happen when, because of a triggering event, circumstances remind you of earlier trauma.

Here are some examples of triggering events that may contribute to retraumatization:

- Anniversary dates or news stories of similar traumatic incidents
- Similar disasters, such as a tornado, hurricane, earthquake, flood, wildfire, or the threat of these disasters
- Events such as an oil spill, mass shooting, or terrorist attack
- Distressing events reported by the media, such as car accidents, physical, sexual, and emotional abuse
- Witnessing a traumatic event or hearing about one that happens to someone else

If you repeatedly experience stress reactions to these events, you may benefit from trauma-informed care to help you overcome retraumatization.



## Risk Factors for Retraumatization

There are risk factors that can help you determine the likelihood of experiencing retraumatization. Knowing them can help you determine your risk for retraumatization as well as help you prepare to address potential signs and symptoms of distress. The following are risk factors:

- Having a high frequency of life trauma, such as abuse or neglect
- Being emotionally disconnected from or not feeling love and support from others, such as family members, peers, colleagues, friends, or other loved ones
- Living or working in unsafe situations, such as combat zones or other dangerous environments



- Using unhealthy coping styles, such as practicing avoidance or being in denial of past traumatic events, mismanaging stress (e.g., misusing alcohol, prescription medication, or illegal substances)
- Having a lack of economic and social supports or a lack of access to health and mental health care services

## Retraumatization Signs and Symptoms

If you have survived a traumatic experience, you can relive it in any of the following ways:

### *Thoughts*

- Negative thoughts that are associated with fear or other emotions experienced during the trauma
- Flashbacks and nightmares
- Trouble concentrating
- Dissociation (separation of normally related parts of awareness, such as thoughts, perceptions, memories, and identity)

### *Physical Signs and Symptoms*

- Feeling “on edge,” very anxious and tense, or easily startled
- Trouble falling or staying asleep

- Significant changes in appetite and/or weight
- Fatigue and lack of energy
- Experiencing strong reactions to triggers (e.g., fast breathing and heartbeat, sweating)

### *Behaviors*

- Social withdrawal and isolation
- Increasing intake of alcohol and other substances following an incident
- Avoidance of people, places, and situations related to the traumatic event

### *Emotions*

- Intense feelings of guilt, anger, fear, anxiety, horror, sadness, shame, or despair
- Intense distress in reaction to triggers, or circumstances you link to present or past trauma
- Feeling distant from other people
- Feeling unable to control your emotions, such as not being able to calm yourself down, a decreased sense of security and inability to feel love

## Tips for Managing and Developing Resilience for Retraumatization

Retraumatization can feel like reopening a wound that has not quite healed. Once you recognize that you are experiencing retraumatization, you may wish to consider dedicating time and effort to your recovery from the traumatic event. The following suggestions can help you manage retraumatization:

- Appreciate the impact of the original trauma. Do not underestimate what you have been through, but also recognize that you are strong and able to recover.
- Understand how and why the event happened.
- Connect with people who understand and help you through trigger events.
- Ensure that you have a support system that is easily accessible and consists of people who know, accept, and care for you.

- Develop effective coping skills (e.g., stress management, self-care, and social support, especially peer support).
- Have a self-care plan that includes strategies for building resilience (e.g., get regular exercise, set aside quiet time for meditation or relaxation).
- Practice your spiritual beliefs or reach out to a faith leader for support.
- Seek care from a trained, trauma-informed provider who can recognize your retraumatization symptoms and offer evidence-based treatment and guidance.



## Hope for Your Future

If you experience retraumatization, you may feel discouraged, but remember you can take steps toward feeling better and returning to a full and satisfying life. The past will always be with you, but you can learn new ways to manage triggers, trauma, and stress.

Most importantly, understand that your perceptions can affect your reactions. Be patient with yourself, and keep in mind that people recover from all kinds of setbacks. Take the opportunity to take control of your reactions and your life by determining the best ways to recover.

## References

Kessler, R. C., Sonnega, A., Bromet, E., Hughes, M., Nelson, C. B., & Breslau, N. N. (1999). Epidemiological risk factors for trauma and PTSD. In R. Yehuda (Ed.), *Risk factors for PTSD*. (pp. 23–59). Washington, DC: American Psychiatric Press.



## Helpful Resources

### Hotlines

#### SAMHSA's Disaster Distress Helpline

Toll-Free: **1-800-985-5990** (English and español)

SMS: Text **TalkWithUs** to **66746**

SMS (español): "Hablanos" al **66746**

TTY: **1-800-846-8517**

Website (English): <https://www.samhsa.gov/find-help/disaster-distress-helpline>

Website (español): <https://www.samhsa.gov/find-help/disaster-distress-helpline/espanol>

#### SAMHSA's National Helpline

Toll-Free: **1-800-662-HELP** (24/7/365 Treatment Referral Information Service in English and español)

Website: <https://www.samhsa.gov/find-help/national-helpline>

#### National Suicide Prevention Lifeline

Toll-Free (English): **1-800-273-TALK (8255)**

Toll-Free (español): **1-888-628-9454**

TTY: **1-800-799-4TTY (4889)**

Website (English): <https://www.suicidepreventionlifeline.org>

Website (español): <https://suicidepreventionlifeline.org/help-yourself/en-espanol/>

### Treatment Locator

#### Behavioral Health Treatment Facility Locator

Website: <https://www.findtreatment.samhsa.gov>

### Trauma-Related Resources

#### Center for the Study of Traumatic Stress, Uniformed Services University

Phone: **301-295-2470**

Email: [cstsinfo@usuhs.mil](mailto:cstsinfo@usuhs.mil)

Website: <https://www.cstsonline.org>

#### National Center for Child Traumatic Stress

Phone: **310-235-2633**

Phone: **919-682-1552**

Website: <http://www.nctsn.org>

#### National Center for Trauma-Informed Care and Alternatives to Seclusion and Restraint (NCTIC)

Toll-Free: **1-866-254-4819**

Email: [NCTIC@NASMHPD.org](mailto:NCTIC@NASMHPD.org)

Website: <https://www.samhsa.gov/nctic>

#### SAMHSA Disaster Technical Assistance Center

Toll-Free: **1-800-308-3515**

Email: [DTAC@samhsa.hhs.gov](mailto:DTAC@samhsa.hhs.gov)

Website: <https://www.samhsa.gov/dtac>

*\*Note: The views, opinions, and content expressed in this publication do not necessarily reflect the views, opinions, or policies of the Center for Mental Health Services (CMHS), the Substance Abuse and Mental Health Services Administration (SAMHSA), or the U.S. Department of Health and Human Services (HHS).*



# The Transformative Powers of Pain: Healing from Abuse

By [Emily Stroia](#)



**“Freedom is what you do with what’s been done to you.” ~Jean Paul Sartre**

We all have stories of how people have wronged us and caused us pain. Allow me to tell you mine.

I’m a survivor of abuse: mental, emotional, physical, and sexual. I was born into a family of abusers and witnessed it from the day I was born until age sixteen.

As a child, I thought my family was perfect. However, when I was twelve years old, I realized just how truly dysfunctional my family was. It was as if a light bulb had gone off, and the image of my “perfect family” was crushed.

**This realization led me into a deep spiral of depression and rebellion, which entailed running away from home, hanging out with the wrong crowd, and experimenting with drugs.**

My future was looking bleak, and my behavior was worsening.

I had no one to turn to, and my home life only worsened. As I developed into a woman, my father started to make sexual advances. When I was fifteen, he openly admitted that he was in love with me.

My mother was another story. She disconnected and completely isolated herself from communicating with anyone in the house, including my brother, father, and me.

While my parents’ relationship ultimately fell apart, the physical, emotional, and sexual abuse in the house became more frequent. I witnessed my mother stabbing my father, and constant fistfights happened between them.

The police were constantly being called, and one if not both of my parents were arrested for domestic violence numerous times.

**It wasn’t easy growing up in an abusive home, but eventually, I found new ways to cope and deal with the circumstances I was born in. I realized that if I couldn’t change my home life that at least I could work on my life outside of it.**

Tenth grade was the year that changed my life forever.

I signed up for many after-school clubs and programs, joined the soccer team, and started to focus more on my studies. I tried to fill my schedule as much as possible to avoid going home.

One day I came home to find my parents arguing, which eventually turned into a fistfight, and my brother and I got the brunt of it. I remember my father punching me straight in the face, and I yelled at my brother to call the police.

**The experience was unlike all the other fights. This time it felt like something was going to change. Sure enough, the police came and arrested my parents.**

That day led to a year of social services involved in my home life. My father was forced to attend anger management classes mandated by the state, and my entire family had to be in therapy.

A part of me felt truly relieved that this had happened. My parents weren't so happy with the results, but it finally felt like something was being done to change my living circumstances.

Eventually, I moved out of my parents' home. At age sixteen, I was emancipated and lived with my friend's family until I was eighteen, when I joined the military and later moved to New York.

I'm twenty-five now and still maintain communication with my parents. My relationship with them will never be amazing, but I am learning how to accept them for who they are rather than wish they were different people.

The painful memories and experiences of growing up in an abusive home will never be erased. At one point in my life, I wished that I could. However, I couldn't be more grateful that I had the opportunity to experience this way of life.

**I allowed my pain to teach me something rather than blame someone or something for it happening to me.**

I realized that regardless of what has been done to you, it's up to you to decide what to do with it.

I have found gifts in my traumatic experience of abuse. It has taught me how to be humble, compassionate, and empathetic to others. If anything, I have learned more about connecting with the human species.

**Pain can have strong transformative power and lead people in the right direction. It has for me. Allow it to be your compass to find the light at the end of the tunnel.**

I know it's easier said than done. Amid a painful experience, one often feels like there isn't a way out. I know that for years I felt as though I was helpless and scared of what would happen if I spoke up about the abuse.

I was concerned about what people would say, if they would judge me or think I deserved it. These doubts and fears can stop a person from moving forward and believing in possibilities.

These fears kept me from speaking up for sixteen years. However, I realized that my happiness and overall well-being were more important than anything and that it was time to start believing in myself and who I was.

Here are a few lessons I learned from my experience of abuse:

**Don't blame yourself for what has happened.**

When abused, we can often ignore what the person has done to us and think we are at fault. This is not the case at all. No one deserves to be abused.

Remember, it's not you; it's them.

### **Recognize your worth and value yourself.**

Think about all the things that make you great and use those characteristics to give you strength and motivation. If this is difficult, seek support from a close friend, confidant, or someone who knows you well and can help you believe in yourself again.

Friends and close loved ones may be your saving grace and strongest form of support, especially if you are in need of encouragement or motivation to push forward.

Remember, you are a human being who is worthy of being loved in a healthy way. Abuse is *not* love.

### **Challenge fears, negative self-talk, and doubts.**

Fear will be your #1 enemy in trying to change anything in your life. Surround yourself with positive quotes, books, inspirational messages, and people who love you to get through.

### **Believe.**

Believe in yourself and trust that you have a life purpose here. Don't let anyone tell you otherwise.

### **Be aware of whom you fall in love with and become friends with.**

As a survivor of abuse, I found that I would attract people with qualities like my parents. It's easy to fall for and attract people who will be or feel familiar to you from your past.

After getting out of an abusive situation, the last thing you think to happen or want is another abusive experience. However, this is common and happens often.

I found that intense and frequent therapy sessions helped me to identify key beliefs about myself linked to being abused. These beliefs were ones like fear of being judged, low self-esteem, and not knowing what a healthy relationship should be like.

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The first step in changing anything in your life is always the hardest. My life is still a work in progress, but I am happy with my decision to change it.

It all starts with one step and a little courage. As the wise Buddha once said, "You yourself, as much as anybody in the entire universe, deserve your love and affection." Trust that you deserve it, and don't look back.



Feature

## Growth after trauma

Why are some people more resilient than others—and can it be taught?

By Lorna Collier

November 2016, Vol 47, No. 10

Print version: page 48

8 min read

As Kay Wilson struggled to make her way through a Jerusalem forest after being repeatedly stabbed by a Palestinian terrorist, she distracted herself from her agony by playing the song "Somewhere Over the Rainbow" in her mind, composing a new piano arrangement while she fought for breath and forced herself to put one bare foot in front of the other.

Wilson, then 46, had been working as a tour guide when, on Dec. 18, 2010, she and a friend were ambushed by terrorists. Wilson witnessed her friend's murder and was herself viciously stabbed with a machete, ultimately playing dead as her attacker plunged his knife into her chest a final time.

She eventually recovered from her severe physical wounds and is healing from her psychological trauma. She now speaks to global audiences about her survival, hoping to "dispel hatred, whether toward Arabs or Jews."

The work "helps me make meaning out of something so senseless," says Wilson, who is also writing a book about her experiences.

After the attack, Wilson had flashbacks and deep survivor's guilt. But like many people who have survived trauma, she has found positive change as well—a new appreciation for life, a newfound sense of personal strength and a new focus on helping others.

Post-traumatic growth (PTG) is a theory that explains this kind of transformation following trauma. It was developed by psychologists Richard Tedeschi, PhD, and Lawrence

Calhoun, PhD, in the mid-1990s, and holds that people who endure psychological struggle following adversity can often see positive growth afterward.

"People develop new understandings of themselves, the world they live in, how to relate to other people, the kind of future they might have and a better understanding of how to live life," says Tedeschi.

How can clinicians use PTG theory to help patients? How has new research helped refine understanding of it? Here's a look at developments in the field.

## Signs of post-traumatic growth

PTG can be confused with resilience, but the two are different constructs (see "The post-traumatic growth inventory" below).

"PTG is sometimes considered synonymous with resilience because becoming more resilient as a result of struggle with trauma can be an example of PTG—but PTG is different from resilience, says Kanako Taku, PhD, associate professor of psychology at Oakland University, who has both researched PTG and experienced it as a survivor of the 1995 Kobe earthquake in Japan.

"Resiliency is the personal attribute or ability to bounce back," says Taku. PTG, on the other hand, refers to what can happen when someone who has difficulty bouncing back experiences a traumatic event that challenges his or her core beliefs, endures psychological struggle (even a mental illness such as post-traumatic stress disorder), and then ultimately finds a sense of personal growth. It's a process that "takes a lot of time, energy and struggle," Taku says.

Someone who is already resilient when trauma occurs won't experience PTG because a resilient person isn't rocked to the core by an event and doesn't have to seek a new belief system, explains Tedeschi. Less resilient people, on the other hand, may go through distress and confusion as they try to understand why this terrible thing happened to them and what it means for their world view.

To evaluate whether and to what extent someone has achieved growth after a trauma, psychologists use a variety of self-report scales. One that was developed by Tedeschi and Calhoun is the Post-Traumatic Growth Inventory (PTGI) (*Journal of Traumatic Stress* (<http://www.ncbi.nlm.nih.gov/pubmed/?term=the+posttraumatic+growth+inventory%3A+measuring+the+positive+legacy+of+trauma>), 1996). It looks for positive responses in five areas:

- Appreciation of life.
- Relationships with others.
- New possibilities in life.
- Personal strength.
- Spiritual change.

The scale is being revised to add new items that will expand the "spiritual change" domain, says Tedeschi. This is being done "to incorporate more existential themes that should resonate with those who are more secular" as well as reflect cross-cultural differences in perceptions of spirituality.

## A predisposition for growth?

How many people experience PTG? Tedeschi prefers not to put a hard number on it.

"It all depends on the trauma, the circumstances, the timing of the measurement ... [and] on how you define growth using the PTGI, looking at total score, means, factors or individual items," he says. However, he estimates that about one-half to two-thirds of people show PTG.

Some PTG researchers have tried to corroborate self-reported growth by questioning friends and family members about whether growth "sticks."

"We are getting more studies that show that PTG is generally stable over time, with a few people showing increases and a few showing decreases," Tedeschi says. "It is now up to us to learn what is going on with those who change over time, but the evidence is for stability in general, and also corroboration by others."

There appear to be two traits that make some more likely to experience PTG, says Tedeschi: openness to experience and extraversion. That's because people who are more open are more likely to reconsider their belief systems, says Tedeschi, and extroverts are more likely to be more active in response to trauma and seek out connections with others.



Women also tend to report more growth than men, says Tedeschi, but the difference is relatively small.

Age also can be a factor, with children under 8 less likely to have the cognitive capacity to experience PTG, while those in late adolescence and early adulthood—who may already be trying to determine their world view—are more open to the type of change that such growth reflects, says Tedeschi.

There also may be genetic underpinnings for PTG, but researchers are just beginning to tease this out. In a 2014 study in the *Journal of Affective Disorders* (<http://www.ncbi.nlm.nih.gov/pubmed/24161451>), for example, Harvard social and psychiatric epidemiologist Erin Dunn, ScD, and a team of researchers examined data previously collected from over 200 Hurricane Katrina survivors and found that variants in the gene RGS2 significantly interacted with levels of exposure to the hurricane to predict PTG. RGS2 is linked to fear-related disorders, such as post-traumatic stress disorder, panic disorder and anxiety.

Dunn calls the results "very interesting" but notes that "we have to be somewhat cautious in interpreting it because we were unable to find a similar sample to replicate that finding."

Sarah Lowe, PhD, of Montclair State University, who worked with Dunn on the research, says one difficulty with gene studies for PTG is the concept's complexity. "If you look at what predicts PTG, it is often psychological stress and dysfunction—but also more positive personality traits like optimism and future orientation, which you'd expect would have a very different genetic basis," she says.

# Theory into practice

Is it possible to prepare people for PTG, to pave the way should tragedy or trauma strike? Yes, says Tedeschi, noting that psychologists can "allow people to understand that this may be a possibility for themselves" and is a "fairly normal process" if and when trauma occurs.

More often, though, therapists will become involved not before adversity has occurred, but afterward. In this context, they can introduce PTG concepts but need to take care doing so.

H'Sien Hayward, PhD, cautions that therapists should not "jump right into the possibility of growth," which she says can "often be construed as minimizing someone's pain and suffering and minimizing the impact of the loss."

Hayward, who works with veterans at VA Long Beach Medical Center in Long Beach, California, knows about such growth firsthand: She was paralyzed in a car accident when she was 16, ending a competitive athletic career. She overcame that trauma through the help of supportive family and friends, went on to study social psychology at Harvard and has traveled to more than 42 countries, often on humanitarian missions providing counseling and other support to trauma victims. Today, she credits the accident for increasing her strength of character "exponentially" by forcing her to overcome challenges. She also appreciates life and relationships with others—including the near-daily support in the small tasks of daily living that she gets from friends and strangers alike: "those interactions warm my heart."

Yet Hayward is careful not to preach the potential for upside to her patients before they are ready. Instead, she waits for them to express "some positive reaction to the event."

She also helps patients discover what's meaningful in their lives and then helps them schedule activities involving these interests, such as spending more time with family members or doing volunteer work.

Tedeschi says sometimes traditional therapy for trauma patients gives people short-fix solutions to help them resume daily functions, such as sleep or work, but may not



provide them with a way of living "beyond just getting by .... We've got to attend to their experience of life and how meaningful, satisfied and fulfilling it is."

One veterans' care facility that takes a nontraditional, PTG approach to trauma treatment is Boulder Crest Retreat in Bluemont, Virginia. The private, donor-supported institute provides free, weeklong nonclinical exercises and activities for vets seeking recovery from combat stress. The treatment is led primarily by veterans who have themselves gone through trauma and achieved growth. Vets are encouraged to deal with past traumas while also discovering their underlying strengths, as well as forging connections with others and ultimately finding ways to give back.

After the intensive program, vets are followed for 18 months with regular Skype check-ins.

Kevin Sakaki, a former Marine and intelligence/special operations veteran, entered Boulder Crest's Warrior program last September and found it transformative. He's noticed such changes in himself as better communication with his family, less anger ("Things don't get to me as much"), a deeper appreciation of "the little things," more generosity and a stronger connection to other people.

Tedeschi is among the psychologists studying the Boulder Crest program's efficacy as part of a research grant funded by the Marcus Foundation.

He hopes that as vets go through the process at Boulder Crest, they "develop new principles for living that involve altruistic behavior, having a mission in life and purpose that goes beyond oneself, so that trauma is transformed into something that's useful not only for oneself but for others."

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**Find this article at:**

<https://www.apa.org/monitor/2016/11/growth-trauma>

## MAIN TAKEAWAYS FROM EACH MODULE

### MODULE 1

- We defined trauma, childhood trauma, and developmental trauma.
- Jesus modeled trauma healing.
- 988 is the dialing code for the National Suicide Prevention Lifeline.
- We started adding tools to our calming toolbox.

### MODULE 2

- We must see people through trauma-informed lenses.
- Toxic stress can derail healthy development.
- Key to healing from traumatic experiences is supportive relationships, even if it's just one!

### MODULE 3

- Adverse childhood experiences (ACEs) are common in all populations, with at least two-thirds of people having at least one ACE.
- ACEs have lifelong damaging effects on physical and mental health, society, and spirituality.
- Adults with ACEs can have an increased risk of substance abuse disorders, mental health problems including suicide attempts, chronic physical health issues including cancer, and a shorter life span by as much as 20 years.
- Without interventions, ACEs can be passed on to future generations.
- Early recognition of risk factors for ACEs can lead to early identification of at-risk children and ensure early intervention.
- Five protective or anti-risk factors that may reduce ACEs are parental resilience, social connections, concrete support in times of need, social and emotional competence of children, and knowledge of parenting and child development.
- Everyone can play a role in preventing ACEs.
- ACEs do not define people.
- Individuals can be highly resilient when provided with positive relationships and experiences.

## MODULE 4

- Adverse Babyhood Experiences are also common in all populations.
- ABEs occur during the first three years of brain development compared to ACEs occurring over the first 18 years.
- Understanding ABEs can decrease the risks of ACEs and their transgenerational impact.
- By preventing ABEs, we may avoid ACEs and vice versa.

## MODULE 5

- We have a beautiful brain created by God, but the beautiful brain can be broken by developmental and childhood trauma.
- Childhood trauma can significantly impact brain development as early as in the womb.
- Our body keeps score of our traumatic experiences even when we don't remember.
- It is crucial to understand that the brain develops and processes information from the bottom up.
- Understanding the bottom-up brain model allows us to communicate with others successfully.
- A brain injured by childhood trauma does not necessarily result in a poor outcome.
- Healing from childhood trauma can start at any age, and positive experiences can overcome negative experiences due to neuroplasticity, the brain's ability to change.

## MODULE 6

- Multiple studies have shown that ACEs can be passed from generation to generation.
- Mirroring is the primary way of transmission, followed by epigenetics and possibly via telomeres.
- The consequences of ACEs are more devastating and far-reaching than we had ever imagined because the transmission of trauma to future generations is possible through epigenetics.

- We must remember that our actions today have long-term consequences for the lives of our children and unborn (and yet-to-be-conceived) children.

## MODULE 7

- The excellent news is that epigenetic changes are reversible. Just as threat and trauma can lead to epigenetic changes, so can nurturing interactions and positive lifestyle change reverse those.
- Levels of stress hormones can be lowered by strengthening the parasympathetic arm of the autonomic nervous system through activities like mindfulness, meditation, and yoga.
- Resilience is the antidote to trauma.
- Relationships are everything!
- The single most common factor for children who develop resilience is at least one stable and committed relationship with a supportive parent, caregiver, another adult, or other adults. It just takes one!

## MODULE 8

- Dr. Anda, the principal investigator for the ACE study, said, “We need to get our kids out of their brain stems and back into learning and life.”
- Regulation is the key to creating a safe connection.
- The sequence of first regulating, then relating, before reasoning is critical and applicable to children and all of us in all circumstances and forms of communication.
- The importance of seeing people through trauma-informed lenses.
- Avoid asking, “What is wrong with you?” Instead, ask, “What happened to you?”
- The use of trauma-informed language can create empathy, hope, and connection instead of blame, hopelessness, and disconnection.
- By seeing people through trauma-informed lenses and using trauma-informed language, we focus on the behavior rather than the individual.

## MODULE 9

- We covered The Thirteen R's of Trauma-Informed Care and Healing from Childhood Trauma. The thirteen R's are Referral, Realize, Recognize, Refuge, Respond, Respect, Relationships, Resilience, Regulation, Reconstruct, Restore, Resist re-traumatization, and Regenerative growth.
- Download The Thirteen R's of Trauma-Informed Healing from Childhood Trauma
- Proposal for a Book Club on the book "What Happened To You" by Dr. Bruce Perry and Oprah Winfrey.