

Moving Past Fear, Powerlessness, and Trauma: A Neuroscience Perspective

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Everyone has had moments of fear and moments of powerlessness. But, when these two feelings are felt together they combine to create a powerful experience called trauma. And, unless trauma is addressed quickly it can lead to clinical issues, including Post-Traumatic Stress Disorder (PTSD). Then, the daily crisis of survival mode becomes a reality with which those suffering have to live. Healing begins when the person suffering from trauma begins to recognize that something is not right and that help is necessary.

A powerful option for healing involves developing an understanding of brain anatomy and functioning. When a person experiences trauma, the brain responds exactly as it was designed to – survive at all costs! Survival is done through three primary responses – fight, flight, or freeze. These originate in the limbic system, or the “downstairs brain” (Dr. Daniel Siegel). The downstairs brain is a small part of the brain that can rule over the rest.

In a stressful situation the downstairs brain is activated. It receives signals from the rest of the body almost instantaneously and takes over to ensure survival. It can be activated by anything that causes us stress – anything from a baby crying to war. This puts us into “triggered-brain”. Ideally, the downstairs brain kicks in, keeping us safe from the danger, then the danger ends, we process and make sense of the experience, and then our brains return to a “calm-brain” state. When a person experiences extreme trauma through one or repeated events and never has the opportunity to process it, this person will remain in triggered-brain. Symptoms can include tense muscles, rapid heartbeat, shortness of breath, and many more. They may become a way of life while some may come and go. The always-triggered symptoms include all of the above plus hypervigilance, jumpiness, nightmares/“daymares”, and all the other symptoms listed in the PTSD diagnostic criteria (which can be found with a simple online search). It could be too that some symptoms are unique. Maybe every time a child throws a temper tantrum the sufferer wants to drink or when a spouse gets too close to the pain through a gentle touch or a critical word the sufferer wants to run. Now, if that’s the difficult reality here’s the hopeful reality – a brain that is constantly triggered, or “switch on”, can be “switched off.”

There are several effective therapies, including two that specifically utilize neuroscience concepts to switch off the triggered-brain. These are called Brainspotting and EMDR. These therapies involve very little talking, in contrast to traditional “talk therapy” methods.

Help is nearer and simpler than you think.

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