

The Intersection of Trauma and Addiction: A Trauma- Informed Approach to Recovery

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My Story: Trauma, Addiction, and Recovery

The importance of trauma-informed care for individuals experiencing substance misuse in their journey toward treatment and recovery



What is Trauma?

- Trauma is a stressful or dangerous event that can have lasting negative effects on a person's physical, emotional, and social well-being. It can be caused by experiencing or witnessing physically or emotionally harmful or threatening events.

Self Love Rainbow

Examples of Trauma

Sexual or physical abuse/assault	Bullying or abuse from peers/teachers/bosses
Child abuse, neglect, & abandonment	Unexpected/traumatic death of a loved one
Life-threatening events	Prolonged incidents of abuse
Religious abuse/trauma	Forced displacement
Racial and minority trauma	Generational/family trauma
Medical trauma	Combat situations
System-induced trauma	Natural disasters or collective trauma
Violence and crime	War and terrorism

(Your experiences are valid)

Trauma and Addiction: Key Statistics

Adverse Childhood Experiences (ACEs) in Tennessee:

- According to a 2019 Tennessee Department of Health report, 61.2% of adults in the state reported experiencing at least one Adverse Childhood Experience (ACE). ACEs include various forms of childhood abuse, neglect, and household dysfunction that are linked to a higher risk of developing substance misuse later in life.
- 24.1% of Tennessee adults have experienced three or more ACEs, which significantly increases the likelihood of addiction and mental health issues.

Trauma and Addiction in Women:

- National studies estimate that as many as 80% of women in treatment for substance use disorders have experienced trauma, with sexual abuse and domestic violence being the most common forms. Given Tennessee's high rate of human trafficking and domestic violence, these figures are likely similar or even higher in the state.
- Human Trafficking in Tennessee: The Tennessee Bureau of Investigation (TBI) has identified multiple trafficking "hotspots" across the state. Human trafficking survivors are highly vulnerable to developing addictions as a means of coping with the intense trauma they endure.

Trauma and Addiction: Key Statistics

Substance Use Disorder (SUD) Statistics:

- **Opioid Use:** Tennessee remains one of the states hardest hit by the opioid epidemic. In 2022, Tennessee had an opioid prescription rate of 62.7 prescriptions per 100 persons, one of the highest in the country (compared to the national average of 43.3 per 100 persons).
- **Overdose Deaths:** In 2022, Tennessee reported more than 3,800 drug overdose deaths, with opioids involved in nearly 75% of these cases. Many of these individuals had a history of trauma, particularly childhood abuse, neglect, or domestic violence.

Mental Health and Trauma:

- In 2022, 20% of Tennesseans reported struggling with mental health issues, which are often linked to unresolved trauma. The prevalence of depression and anxiety is much higher among individuals with a history of trauma, which can also increase their risk of addiction.

Trauma-Informed Care: The Tennessee Department of Mental Health and Substance Abuse Services (TDMHSAS) promotes trauma-informed approaches in addiction treatment. Research shows that these approaches improve treatment engagement and recovery outcomes for people with substance misuse, emphasizing the critical link between trauma and addiction in Tennessee.

6 GUIDING PRINCIPLES TO A TRAUMA-INFORMED APPROACH

The CDC's [Office of Public Health Preparedness and Response \(OPHPR\)](#), in collaboration with SAMHSA's [National Center for Trauma-Informed Care \(NCTIC\)](#), developed and led a new training for OPHPR employees about the role of trauma-informed care during public health emergencies. The training aimed to increase responder awareness of the impact that trauma can have in the communities where they work. Participants learned SAMHSA'S six principles that guide a trauma-informed approach, including:



Adopting a trauma-informed approach is not accomplished through any single particular technique or checklist. It requires constant attention, caring awareness, sensitivity, and possibly a cultural change at an organizational level. On-going internal organizational assessment and quality improvement, as well as engagement with community stakeholders, will help to imbed this approach which can be augmented with organizational development and practice improvement. The training provided by [OPHPR](#) and [NCTIC](#) was the first step for CDC to view emergency preparedness and response through a trauma-informed lens.

Why Trauma-Informed Care Matters

Trauma-Informed Care (TIC) is an approach that recognizes the widespread impact of trauma and seeks to create a safe, supportive environment by understanding, recognizing, and responding to the effects of trauma.



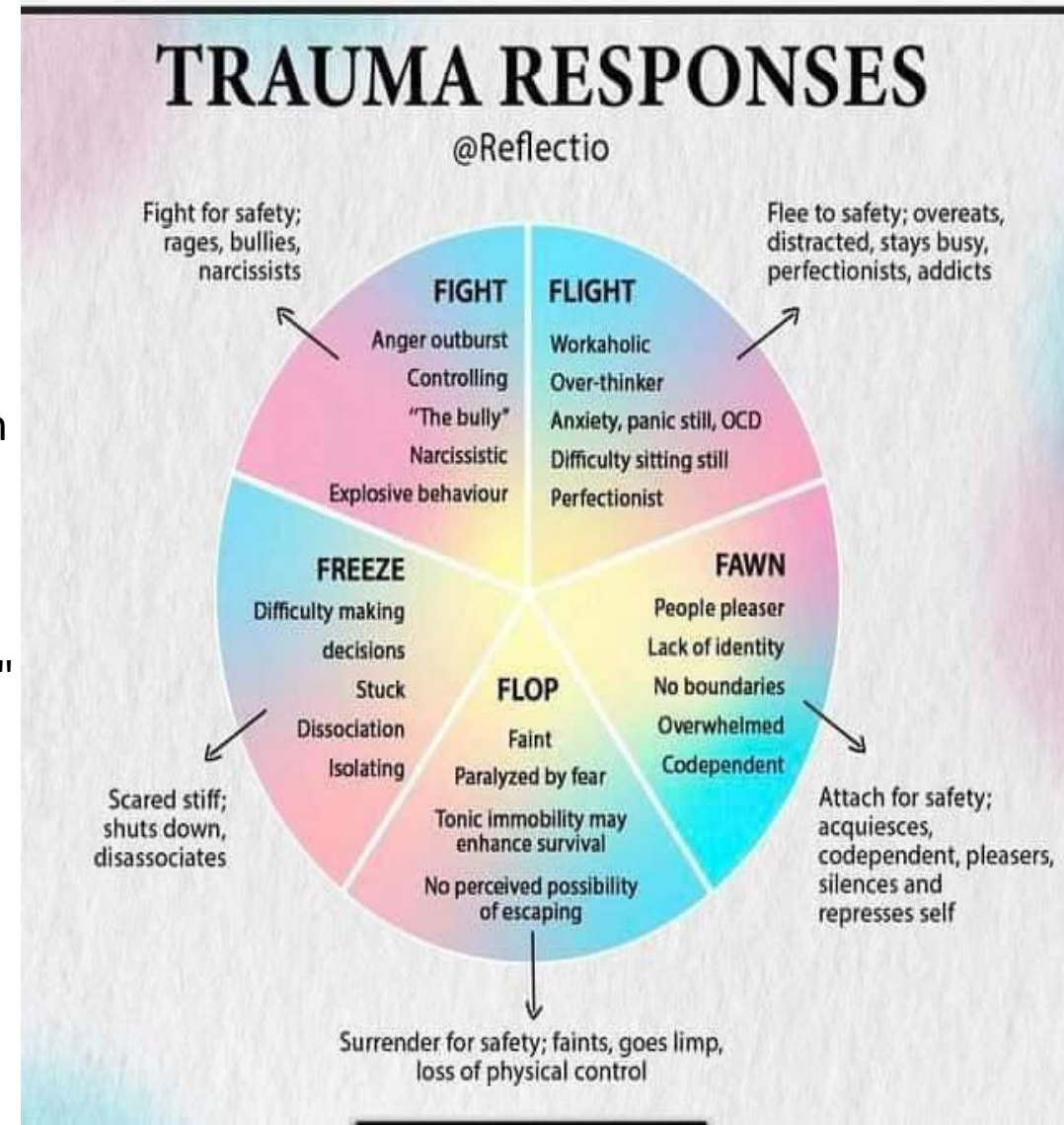
Unprocessed Trauma and Addiction



- Unresolved trauma can leave individuals in a state of emotional and psychological distress.
- To cope with overwhelming feelings—such as fear, anxiety, or shame—many turn to substances as a way to numb the pain.

The Body's Response to Trauma

- **Fight Response:**
 - Reacting aggressively or defensively to protect oneself from perceived danger.
 - Common signs: anger, irritability, or physical aggression.
- **Flight Response:**
 - The urge to escape or avoid the threatening situation.
 - Common signs: anxiety, restlessness, or withdrawing from others.
- **Freeze Response:**
 - Feeling paralyzed, unable to act or make decisions in the face of trauma.
 - Common signs: dissociation, numbness, or feeling "stuck."
- **Fawn Response:**
 - Seeking to please or appease others to avoid conflict or harm.
 - Common signs: people-pleasing, difficulty setting boundaries, or prioritizing others' needs over one's own.



trauma responses can look like:



craving control

agreeing to things just to keep the peace

feeling on guard all the time

a negative world view, dwindling trust for other

seeking constant escapism

feeling responsible for other's happiness

saying "yes" because you're scared of losing security

chronic feelings of emptiness

giving in to reckless impulses, not caring for personal safety

What is Complex PTSD?



Complex PTSD involves the core symptoms of PTSD plus additional groups of symptoms
source: ISTSS Expert Consensus Treatment Guidelines For Complex PTSD In Adults

The Four Rs of Trauma-Informed Care



This figure is adapted from: Substance Abuse and Mental Health Services Administration. (2014). SAMHSA's concept of trauma and Guidance for a trauma-informed approach. HHS publication no. (SMA) 14-4884. Rockville, MD: Substance Abuse and Mental Health Services Administration.

Trauma-Informed Care in Action

- Predictability
- Space
- Recalibration
- Attribution
- Perspective
- Reciprocity
- Support
- Choice

How to Support Someone Who Has Experienced Trauma



TRAUMA-INFORMED CARE:

What does it look like?

@therecoverycenterusa



Language and Communication

Helpers use non-judgmental and empathetic language.

They avoid making assumptions about an individual's past experiences. For instance, instead of asking, "What's wrong with you?" they might ask, "What happened to you?"



Providing Choices

In healthcare settings, offering choices to patients can be empowering. For example, allowing a patient to choose their meal preferences or the time of their therapy sessions gives them a sense of control.



Sensory-Friendly Environments

Recognizing that sensory sensitivities can be triggered by trauma, trauma-informed care might involve providing calming sensory rooms or ensuring that lighting and noise levels are adjustable to individual preferences.



Active Listening

Helpers actively listen to individuals without interrupting or rushing through appointments. They validate their feelings and experiences.



Training and Self-Care

Healthcare staff are trained in trauma-informed care principles and are encouraged to practice self-care to prevent burnout. This ensures that they can provide the best possible care to their patients.



De-escalation Techniques

In situations where patients may become agitated or distressed, trauma-informed care involves de-escalation techniques that prioritize safety and minimize re-traumatization.

Values/Principles of Trauma-Informed Practice

Safety



Trustworthiness



Choice



Collaboration



Empowerment



Definitions

Ensuring physical and emotional safety for all. Generally involves protection of self or others.

Maximizing trust, ensuring clear expectations, and having consistent boundaries. Refers to transparency.

Making individual choice and control a priority. Refers to the right to self-determination and autonomy.

Sharing power and working together with individuals. The idea of working with, not doing to or for.

Involves the recognition of strengths and skills to build a realistic sense of hope and possibility.

Values/Principles in Practice

Create a welcoming environment

Embrace diversity and inclusion

Give consequences using supportive, non-confrontational language

Provide clear information about expectations

Inform others of transitions ahead of time

Express patience and acceptance

Inform others about options available to them

Balance flexibility while defining parameters

Reflect options regarding race, gender and culture

Seek ideas and feedback

Explore others' circumstances from their perspective

Acknowledge power dynamics

Build on strengths and capacities

Ensure interactions are validating and affirming

Use person-first and inclusive language

Trauma-Informed Care Cheat Sheet

- Identify Trauma Triggers
- Respond Don't React
- Help Them Relax
- Create a Routine
- Be Emotionally and Physically Available
- Don't Take Behavior Personally

Trauma-informed care cheat sheet

REMEMBER

Help is always available

IDENTIFY TRAUMA TRIGGERS

Look out for abnormal behavior or reactions and avoid circumstances that cause anxiety or outbursts until healing occurs.

RESPOND DON'T REACT

Avoid triggering an overwhelmed child with your reactions. Stay composed by lowering your voice and acknowledging their emotions. This will make them feel safe.

HELP THEM RELAX

Motivate them to practice slow breathing, listening to calming music, or affirming positive statements like "I am safe now".

CREATE A ROUTINE

Develop a regular routine for meals, academic work, and bedtime. Prepare your child in advance for changes or new experiences.

BE EMOTIONALLY AND PHYSICALLY AVAILABLE

Traumatized individuals may distance themselves from adults. Offer attention, comfort, and encouragement in ways that they accept. Be patient if they seem needy and follow their lead.

DON'T TAKE BEHAVIOR PERSONALLY

Provide the space to experience their emotions freely without criticism. Support them in finding words for expressing emotions and reward their use.



Retraumatization WHAT HURTS?



What Re-traumatization Can Look Like



SYSTEM <i>(Policies, Procedures, Structural and Institutional Racism and Oppression)</i>	RELATIONSHIP <i>(Power, Control, Subversiveness, Interpersonal Racism and Oppression)</i>
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- | | | | |
|--|--|--|---|
| | HAVING TO CONTINUALLY RETELL THEIR STORY | | NOT BEING SEEN/HEARD |
| | BEING TREATED AS A NUMBER | | NON-TRANSPARENCY AND VEILED TRUTHS |
| | BEING SEEN AS A LABEL (I.E. ADDICT, SCHIZOPHRENIC) | | DOES THINGS FOR RATHER THAN WITH |
| | NO CHOICE IN SERVICE OR TREATMENT | | USE OF PUNITIVE TREATMENT, COERCIVE PRACTICES AND OPPRESSIVE LANGUAGE |
| | NON-ACKNOWLEDGEMENT OF WORK RELATED STRESS | | RACIAL PROFILING |
| | NO ACCESS TO SERVICES | | BEING NON-COLLABORATIVE |
| | PRACTICES WITHOUT ACCESSIBILITY CONSIDERATIONS | | VICTIM BLAMING |
| | ISOLATION OR EXCLUSION PRACTICES | | NON-ACKNOWLEDGEMENT OF HISTORICAL NARRATIVES |
| | MARGINALIZING PRACTICES | | MICROAGGRESSIONS |
| | PRACTICES WITHOUT CULTURAL CONSIDERATIONS | | NON-INCLUSIVE LANGUAGE AND MESSAGING |
| | "ISMS" AND PHOBIAS | | NON-ACKNOWLEDGEMENT OF POWER DYNAMICS |



#1 NEW YORK TIMES BESTSELLER

THE BODY KEEPS THE SCORE

BRAIN, MIND, AND BODY
IN THE HEALING OF TRAUMA



BESSEL VAN DER KOLK, M.D.

"A MASTERPIECE THAT COMBINES THE BOUNDLESS CURIOSITY OF THE SCIENTIST, THE ERUDITION OF THE SCHOLAR, AND THE PASSION OF THE TRUTH TELLER." —JUDITH HERMAN, M.D.

The Body Keeps The Score Cheat Sheet

Key Concepts and Ideas From Bessel van der Kolk's Work On Trauma

TRAUMA'S IMPACT ON THE BRAIN:

- Trauma affects brain functions, particularly areas related to emotion regulation, memory, and perception.
- It can lead to changes in how we process memories, often resulting in fragmented or dissociated recollections.

THE BODY REMEMBERS:

- Trauma is stored in the body, often manifesting as physical symptoms, emotional dysregulation, or chronic pain.
- Somatic experiences and bodily sensations are integral to understanding and healing trauma.

DISSOCIATION AND DETACHMENT:

- Individuals may dissociate as a coping mechanism during traumatic events, leading to a disconnect between emotional experiences and physical sensations.
- This detachment can persist long after the traumatic event, causing ongoing issues.

THE IMPORTANCE OF SAFETY:

- Creating a sense of safety is essential for trauma recovery.
- Safe environments allow individuals to process trauma and reconnect with their bodies and emotions.

THERAPEUTIC APPROACHES:

- Traditional talk therapies may not be sufficient for trauma healing; somatic approaches and body-centered therapies are crucial.
- Techniques such as EMDR (Eye Movement Desensitization and Reprocessing), neurofeedback, and mindfulness practices can aid in recovery.

THE ROLE OF RELATIONSHIPS:

- Supportive relationships are vital for healing from trauma.
- Connection with others helps individuals feel safe and understood, facilitating the healing process.

MINDFULNESS AND AWARENESS:

- Mindfulness practices can help individuals reconnect with their bodies and emotions.
- Developing awareness of bodily sensations fosters emotional regulation and resilience.

NARRATIVE AND STORYTELLING:

- Sharing one's story is a powerful tool for understanding and processing trauma.
- Building a coherent narrative can help individuals integrate their experiences and reclaim their sense of self.

RESILIENCE AND RECOVERY:

- The human capacity for resilience is profound; many individuals can heal from trauma with the right support and resources.
- Recovery involves reclaiming control over one's body and life.

TRAUMA-INFORMED CARE:

- Healthcare providers and therapists should adopt a trauma-informed approach, recognizing the widespread impact of trauma and ensuring safety and empowerment in treatment.

PRACTICAL STRATEGIES:


- **Grounding Techniques:**
 - Engage in practices that help reconnect with the present moment, such as deep breathing, mindfulness, or physical movement.
- **Somatic Experiencing:**
 - Explore body sensations to process trauma and release tension held in the body.
- **Art and Expressive Therapies:**
 - Use creative outlets to express and process traumatic experiences.
- **Support Groups:**
 - Participate in groups where individuals can share their experiences and connect with others who understand their struggles.

"We are all wounded in one way or another, and healing is an ongoing process that involves a mix of acceptance, learning, and growth."

— Bessel van der Kolk, *The Body Keeps the Score*

Thistle & Bee

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THE NATIONAL HUMAN
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888-373-7888

Intersection of Trauma and Addiction

QR Code for CEUs

