



Trauma, Dissociation & Enactment

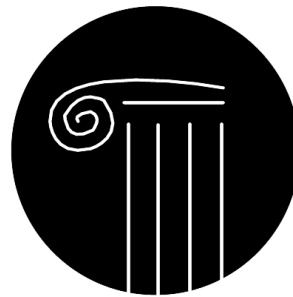
An Introduction from an Interpersonal- Relational Perspective

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Trauma and Dissociation

Goals for Today

- To review fundamentals
- To describe a broad framework for understanding complex trauma and dissociation
- To point toward ways in which unprocessed trauma may play out without awareness of what is happening
- To highlight key elements supporting resilience



Trauma and Dissociation

What do we mean by “trauma”?

There are many definitions...

“The conflict between the will to deny horrible events and the will to proclaim them aloud is the central dialectic of psychological trauma.” - Judith Herman, 1997



Trauma and Dissociation

Trauma – Definitions

Etymology – greek – *traumat-* wound

“An overwhelming threat to the integrity of the self that is accompanied by annihilation anxiety” – Coates & Moore in Bromberg (1998)

“The precipitous disruption of self-continuity through invalidation of the internalized self-other patterns of meaning that constitute the experience of “me-ness” – Bromberg (1998)



Trauma and Dissociation

Trauma Statistics

- Reported prevalence in general population ranges from 40%-72%
- 72% reported some form of adult or childhood trauma
- 40% natural disaster or MVA
- 43% witnessed violence in home, social setting or combat
- 50% interpersonal violence e.g. child abuse, physical assault, rape
(Elliot 1997)
- Bifurcated pattern of post traumatic symptoms – 30% with chronic abuse dissociative, versus hyperarousal (Lanius, Bluhm, Lanius, 2007)
- The presence of high dissociative activity at the time of trauma is predictive of the development of more severe pathology in many studies (Breh & Seidler 2007) – though this is an unresolved question.
- The presence of depression is a risk factor for the development of PTSD (Shalev et al., 1998), as is narcissistic vulnerability (Shalev et al., 2005)



Trauma and Dissociation

Trauma – Stigma

- Traumatic experience is often ignored
- Traumatic experiences are often surrounded by feelings of shame and guilt
- Traumatic experiences are often hidden and not talked about in families and organizations, and consequently get expressed and lived out maladaptively



Trauma and Dissociation

Trauma – Can't be fully digested or understood

- “An objectively massive, threatening event, one that would be overwhelming to anyone... Trauma is not just something upsetting or distressing, even if it is extremely so. Trauma refers to event(s) that could not be assimilated. If the traumatic event could not be taken in, it cannot be linked with other experience... In short, the result of trauma is dissociation.” – Howell (2005)



Trauma and Dissociation

Dissociation

- Literally dis-association – a disruption or lack of usual associative processes, emotionally and cognitively
- Often but not exclusively precipitated by traumatic experience
- May manifest in positive and negative symptoms, and be both adaptive and maladaptive, with some dependence on context
- ❖ **Whatever is dissociated is enacted (often but not always)**



Trauma and Dissociation

Dissociation

- DSM-IV: “a disruption of the usually integrated functions of consciousness, memory, identity, or perception of the environment. The disturbance may be sudden or gradual, transient or chronic.” (American Psychiatric Assoc., 2007)
- Discontinuity between Conscious Experience and Memory with Two Components: 1) detachment from overwhelming emotional content, 2) compartmentalization of experience (Allen, 2001, van der Kolk, 1996)
- Is often seen as serving a protective function in response to acute and/or chronic stress
- Occurs on a spectrum from “normal” to “pathological”



Trauma and Dissociation

Dissociation - Primary, Secondary and Tertiary

- Primary: fragmented nature of traumatic memories, as in flashbacks
- Secondary: similar to DSM definition – alterations in experience of time, place and person – depersonalization, derealization, altered body image, tunnel vision, altered pain perception, etc.
- Tertiary: expression of distinct ego states, e.g. DID
(van der Kolk, 1996)



Trauma and Dissociation

Enactment

- The expression, embodiment, and concretization of dissociated material as interpersonal interaction
- Co-determined by all participants (e.g. manager-employee, members on a work team, victim and abuser and family, etc.) to various degrees
- Actions and patterns of interaction may be seen as communicative, but haven't been translated into spoken language



Trauma and Dissociation

PTSD

- A. The person has been exposed to a traumatic event in which both of the following were present:
 - 1. The person experienced, witnessed, or was confronted with an event or events that involved actual or threatened death or serious injury, or a threat to the physical integrity of self or others.
 - 2. The person's response involved intense fear, helplessness, or horror.
- B. The traumatic event is persistently re-experienced
- C. Persistent avoidance of stimuli associated with the trauma and numbing of general responsiveness (not present before the trauma)
- D. Persistent symptoms of increased arousal (not present before the trauma)
- E. Duration of greater than 1 month (DSM-IV, APA, 2007)



Trauma and Dissociation

Disorders of Extreme Stress NOS Symptom Categories

- I. Alteration in Regulation of Affect and Impulses
- II. Alterations in Attention or Consciousness
- III. Somatization
- IV. Alterations in Self-Perception
- V. Alterations in Perception of the Perpetrator
- VI. Alterations in Relations with Others
- VII. Alterations in Systems of Meaning

(van der KolkSpinazzola, Roth, Sunday, Pelcovitz, 2005)



Trauma and Dissociation

Resilience - Definition

- Capacity to bounce back, withstand hardship, and repair oneself (Wolin & Wolin 1993)
- The strengths humans require to master cycles of disruption and reintegration (Flach 1988)
- The ability to respond to stresses without collapse (Schipper 2003)



Trauma and Dissociation

Resilience – 5 Factors

1. Active Coping Style
2. Ability to reframe problems as challenges
3. Ability to maintain a positive outlook
4. High levels of perceived social support
5. Ability to perceive meaning in experience and connect to a larger moral whole

(Smith/Katz, 2006)

