

Trauma and addiction treatment

Paul du Buf

Trauma and addiction treatment

1. The relevance of knowing about trauma, trauma treatment and its prevalence in addiction treatment and our culture
2. Three key learnings from trauma research and their relevance for addiction treatment
3. Feeling into the possibility, opportunities and challenges for addiction services to become trauma-informed and in that way lead the way to and help create a trauma-informed culture

1. Relevance of knowing about trauma

A story about "Anna" (65 years) ...
 NHS Alcohol Assertive Outreach Pilot Project 2013 - 2015
 Over 80 visits to her home / hospital / GP /
 our service in London / nursing home

Nothing worked and I had 19 years of experience ...
 but no experience about how to go about trauma!




Trauma: greek word for "wound"

Nowadays also used to describe the challenging emotional consequences that living through a distressing event can have for an individual.

Traumatic events are difficult to define because the same event may be more traumatic for some people than for others.

Distinctions of trauma types:

- Acute / Chronic / Complex

Right brain

- dominant first few years
- lacks words but can read body language
- can scan for danger
- intuits threat
- can respond instinctively, not intentionally

Left brain

- dominant as language and cognition develop
- verbal and rational
- plans, organises, learn from experience
- evaluates danger cues
- interoception: what I feel within my body



Trauma treatment:

- Eye Movement Desensitization and Reprocessing
- Mindfulness-based stress reduction
- Somatic Experiencing and other somatic therapies
- Developments: psychedelic therapies (mdma / ketamine)

Integration: safety and agency are key



My experience:

Prevalence > 95% history with trauma
i.e. bereavements, child abuse, domestic violence, divorce, job losses

Presentation: PTSD + alcohol dependency / drug dependency

Drugs and alcohol use: self-medicating to deal with pain

Q: what happened to you? vs. what is wrong?

Culture: ACEs study / environmental failure!



Key learnings about trauma

1. trauma is a fact of life everyone has or will experience trauma
2. trauma can be healed, it is not a life-sentence
3. nervous system regulation in our culture is neglected



I FEEL LIKE

Relevance for addiction treatment:

Somatic response to trauma is an adaptive coping strategy:

Fight: protecting / **Flight:** distancing / **Freeze:** terrified / **Submit:** ashamed / **Attach:** needy

- Addiction can be considered as an example of a **flight** response: "turning off" the body
- Just as a wound can heal when the environment is right, so will trauma
 - ↓
- ↑ stigma, symptom management, shame, blame, drop-out, burn-out
- safety agency equality care connection hope resilience

Trauma and addiction treatment

Considering addiction services to become trauma-informed and in that way lead the way to and help create a trauma-informed culture

Observational bias

Observer bias is the tendency of observers to not see what is there, but instead to see what they expect or want to see.



3. Addiction services and culture becoming trauma-informed

.. appreciating and learning from the wisdom of our nervous system.

Organisational Trauma-Informed Elements

- Secure Strong Leadership Commitment
- Build Trauma Awareness
- Become Trauma Integrative
- Ensure Physical & Psychological Safety
- Monitor Quality

Trauma and culture



Further reading recommended:

- ACEs research
- Bessel van de Kolk: "The body keeps the score"
- Stephen Porges: Poly-vagal theory
- Janina Fisher: "parts and dissociation" work
- Somatic / poly-vagal informed exercises

The Feeling Wheel
by Gloria Wilcox

Stress Squares & Stress Circles
Paul Duf

SHADOW DANCING
Connecting with our traumas for healing and growth
PAUL DU FUF, RN

Website: www.pauldubuf.info
Email: pauldubuf@gmail.com
