


Trauma's Toll


How to Recognize Trauma And Respond To The Traumatized Individual
In the Care Facility Setting: Part 1



The image shows the painting 'The Scream' by Edvard Munch, depicting a figure standing on a bridge over a turbulent, orange and red sky, symbolizing emotional distress or trauma.

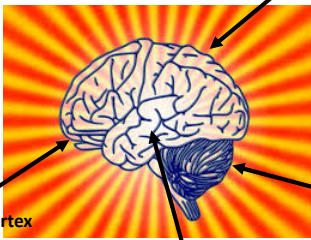
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What is trauma?



A word cloud containing terms related to trauma and PTSD, including: AVOIDANCE, COMBAT, STRESS, ANGER, SHOCK, INJURY, HEIGHTENED SENSE OF DANGER, INSOMNIA, BLAME, PTSD, NIGHTMARES, HYPER ALERTNESS, IRRITABILITY, SUICIDE, RAGE, SUBSTANCE ABUSE, GUILT, NUMB, COMBAT, DISASTERS, LOW SELF-ESTEEM, ALCOHOL, ANXIETY, DRUGS, ASSAULT, DREAMS, and DEPRESSION.

2



A diagram of the human brain with labels: Pre-frontal Cortex, Limbic System, Brain Stem, and Amygdala. The brain is shown against a background of radiating orange and red lines.

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Impact of Trauma on Behavior

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Instinctive/reactive survival
NOT rational choosing

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ADRENALINE AT WORK

- Increases Reaction Time
- Increases Mental Alertness
- Increases Memory (for performance)
- Reduces Fatigue
- Increases Adrenal Performance
- Increases Fat Metabolism

Cortisol

Did you know that a twenty-second hug releases the bonding hormone and neurotransmitter oxytocin, which is nature's antidepressant and anti-anxiety.

Opiates Act on Many Places in the Brain and Nervous System

Opiates can change the limbic system, which controls emotions to increase feelings of pleasure.

Opiates can change the brain stem, which controls automatic body functions, and regulate breathing.

Opiates can block pain messages transmitted by the spinal cord from the body.

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AUTOMATIC

Stress Response

▪ Withdrawal	->	Flight	How would these look for the resident?
▪ Immobility	->	Freezing	
▪ Aggression	->	Fight	
▪ Appeasement	->	Submission	

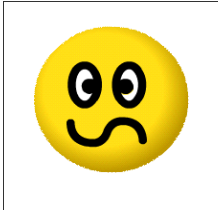
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Tonic Immobility & Collapsed Immobility



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The Trauma Experience

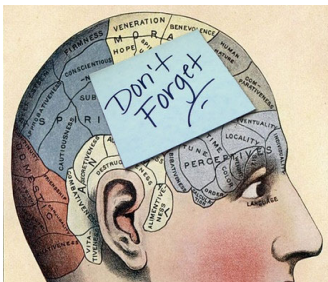


•Overwhelms:

- Ability to cope
- Ability to integrate ideas and emotions of event
- Result? Extreme confusion & insecurity

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Impact of Trauma on Memory



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Key Functions of Prefrontal Cortex


- Choosing **attention** focus
- **Holding thoughts**, memories, information
- **Reflecting** on feelings, thoughts and actions
- **Inhibiting** habits/automatic responses
- **Regulating** emotions



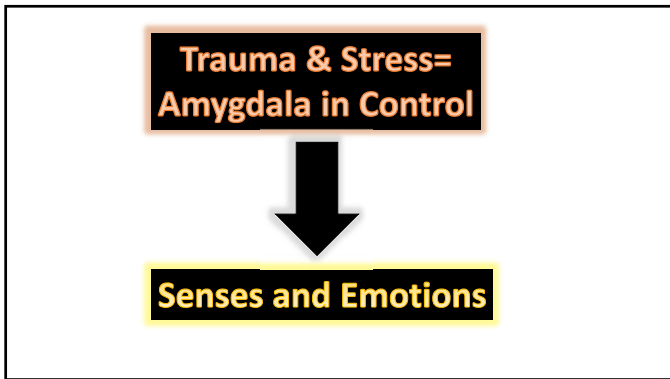
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High Stress = Impaired Prefrontal Cortex

- Stress chemicals turn it off
- Old primitive brain controls
- Wired to survive
- Can't...
 - Control attention
 - Remember important information
 - Think logically "If *this*, then *that*"
 - Over-ride emotional reflexes or habits




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High Stress = Impaired Prefrontal Cortex

Can remember but encoding affected




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Memory of Crisis Event looks like....



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EFFECTS of TRAUMA

- Memory has been **impacted**
- The **amygdala** and **hippocampus** parts of the brain are responding.
- Memory is **fragmented**, difficult to retrieve
- Memory is **ACCURATE**

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Brains During Assault

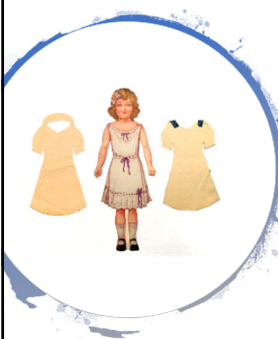
Perpetrator	Victim
<ul style="list-style-type: none"> •Prefrontal cortex in control •Not stressed •Thinking and behavior: <ul style="list-style-type: none"> •Planned •Practiced •Habitual 	<ul style="list-style-type: none"> •Amygdala in control •Terrified, overwhelmed •Attention and thoughts driven by perpetrator actions •Behavior controlled by emotional reflexes and habits from childhood (incl. abuse)

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What is sexual assault?

- Lacks consent
- Involves intimate parts
- Humiliates and degrades the victim
- May gratify and arouse the offender
- Targets vulnerability
- When perpetrator is not otherwise compromised, although sexual acts are involved, it is about power, control, domination, punishment and humiliation. It is not "sex", but a violent act.
- Other sexually inappropriate behavior may constitute abuse of a resident.

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Typical Victim Stereotypes

- Reacts hysterically
- Immediately reports
- Never forgets the details
- Reports with 100% accuracy
- Non-stranger victim is less traumatized

What additional stereotypes are there concerning residents of facilities?

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HANDS-ON OFFENSES
 May include harmful genital practices

Sometimes accompanied by hands-off offenses, like exhibitionism, voyeurism, forced viewing of porn, harassment, threats and sexual degradation

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When force is present, consent is not.

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Common Dynamics

- 1. TERROR & INTIMIDATION** Physical force, weapons, restraints, verbal threats, situational intimidation
- 2. VICTIM = POWERLESS**
- 3. VICTIM = OBJECT** Victim not seen or treated as a person
- 4. MOST DEFEND SELVES IN SOME WAY--** Instantaneous decision Active resistance, struggle, verbal, submission

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The fear outlasts the crime.

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Who are the perpetrators?

- ADULT FAMILY MEMBERS (SONS, DAUGHTERS, GRANDCHILDREN, SIBLINGS)
- SPOUSES AND INTIMATE PARTNERS
- CAREGIVERS OR FACILITY STAFF
- OTHER RESIDENTS IN THE FACILITY
- STRANGERS OR ACQUAINTANCES (LEAST FREQUENT)

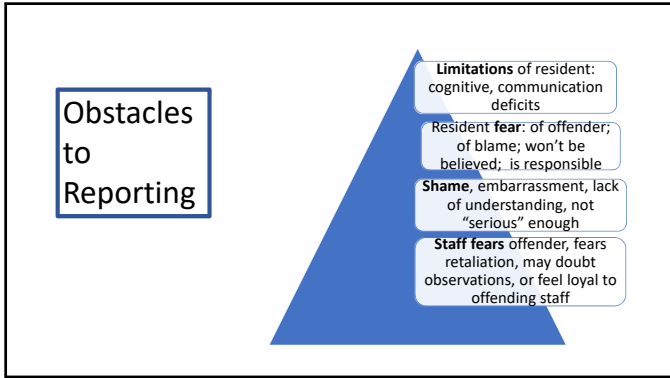
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What makes a resident vulnerable to SA?

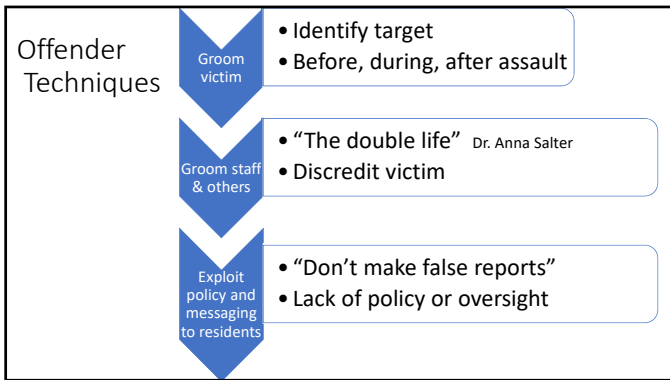
- Women
- Older
- Mental impairment, like Alzheimer's
- Socially isolated from family, friends
- Neglected by caregivers, family in other ways
- Are physically disabled or communication is difficult

http://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/CertificationandCompliance/Downloads/nursinghomedatacompendium_508-2015.pdf

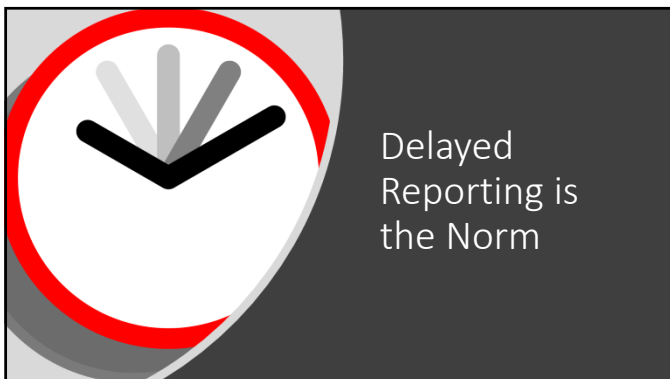
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