



WALKING ON

BROKEN GLASS

LEARNING TO  
NAVIGATE THE WORLD AMONG  
TRAUMA SURVIVORS

# LAND ACKNOWLEDGEMENT

I would like to begin by acknowledging that the land on which we gather is the territory of the Mohegan, Mashantucket Pequot, Eastern Pequot, Schaghticoke, Golden Hill Paugussett, Nipmuc, and Lenape Peoples, who have stewarded this land throughout the generations. We thank them for their strength and resilience in protecting this land, and aspire to uphold our responsibilities according to their example.

# EUNICE BROWNLEE

Writer

Speaker

Activist

Trauma Survivor



# TODAY'S TOPICS

Learn the basics of trauma.

Learn trauma-aware language (and phrases to avoid).

Learn how to be present and show empathy to a person living with trauma.

# AGREEMENTS FOR SAFETY

- 01 Confidentiality. Sensitive stories will come up, and we agree not to share them with others who are not present.
- 02 Practice self-care. Take what you need in order to feel safe. That will look different for everyone.
- 03 Support. We agree to be a stand for anyone who chooses to contribute and not disparage anyone.
- 04 Inclusion. We agree not to embarrass or marginalize others. All thoughts are valid.

WHAT IS TRAUMA?

# WE'VE ALL EXPERIENCED A LEVEL OF TRAUMA

What turns something from "a bad thing" into a "traumatic event?"

Traumatic events are marked by a sense of horror, helplessness, serious injury, or the threat of serious injury or death.\*

# TRAUMA COMES IN ALL SHAPES AND SIZES



*Car Accident*

*With or without injury*

*Sexual Assault*

*Natural Disaster*

*A wildfire or hurricane, for example.*



*Physical Trauma*

*Head injury, giving birth,  
broken bones*

*Major life change*

*Death, divorce, job loss*

*Abuse*

*Can be physical or emotional*



# MEMORIES ARE FUNNY

## Positive memories

- Organized
- Beginning, middle, end
- Snapshot of a moment
- Sensory details diminish with time

## Traumatic Memories

- Disorganized
- Fragments
- Details don't form a complete picture
- Sensory details enhanced with time

# ABUSE IS A COMMON SOURCE OF TRAUMA

## Child Abuse

Harm or threat of harm of a child

## Domestic Violence

A pattern of abusive behavior between domestic partners used to gain power over another.

## Sexual Abuse

Any act, sexual in nature, performed without consent.

I IN 5

People report having been sexually molested as a child.

I IN 3

Couples engage in physical violence.

I IN 8

Children have witnessed their mother beaten or hit.

# ABUSE TERMS

## DARVO

Stands for deny, attack, reverse victim and offender.

## GASLIGHTING

The intentional denial of a person's reality. It is a form of emotional abuse that makes one question their sanity.

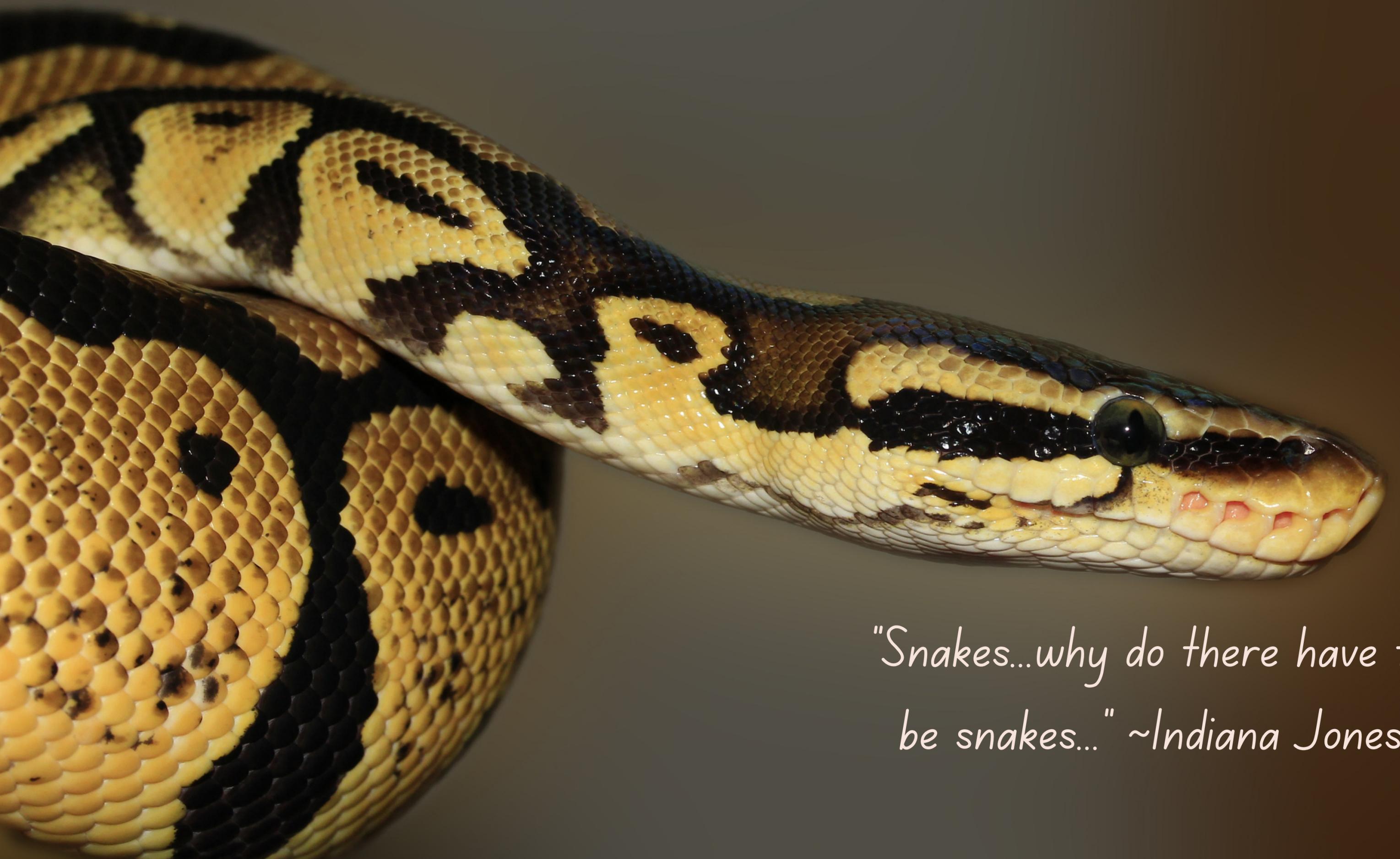
## CONSENT

Agrees by choice with the freedom and capacity to make that choice.

## COERCIVE CONTROL

A pattern of behavior that seeks to limit a sense of freedom or control in another using threats, lies, surveillance or other power tactics.

# EXPERIENCING TRAUMA



"Snakes...why do there have to  
be snakes..." ~Indiana Jones



# TRAUMA CHANGES OUR PHYSIOLOGY

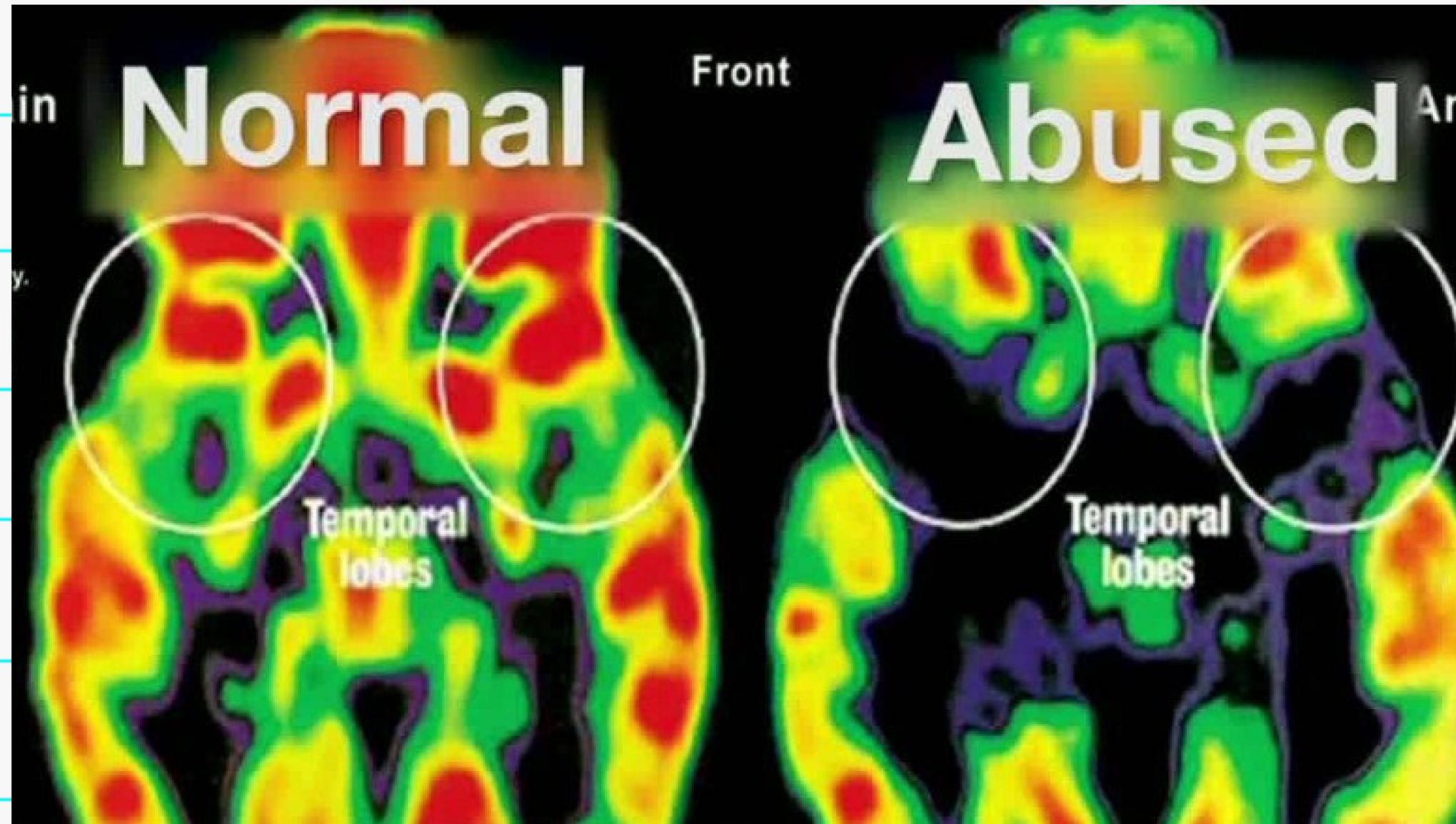
Stress response system is activated. Brain activity shifts.

Prefrontal Cortex  
Controls learning & logic



Limbic System  
Controls emotions &  
memory (mammal brain)

Your Brain On Trauma



WRITE YOUR TOPIC OR IDEA

*Elaborate on what you want to discuss.*

## PARASYMPATHETIC

Prepares the body for healing and growth.. Heart and breathing slow, saliva is produced and digestion is activated. Increase in growth hormones and melatonin.

REST AND DIGEST

## SYMPATHETIC

Prepares the body for physical action. Increase in adrenaline, disengagement of frontal cortex, restriction of vagus nerve (dry mouth, upset stomach, restriction or release of bowels)

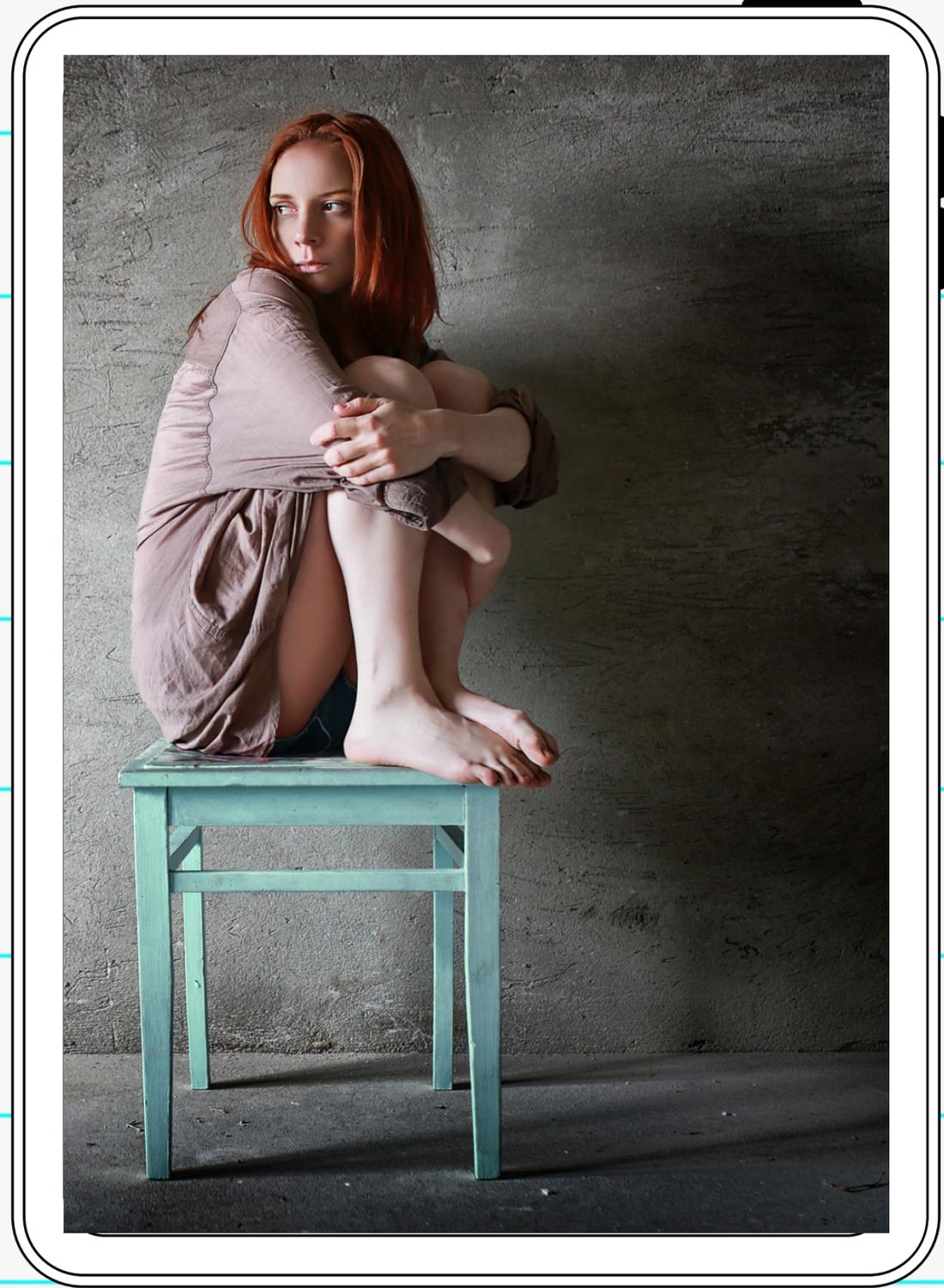
FIGHT OR FLIGHT

FIGHT

FLIGHT

FREEZE

FAWN



# ADVERSE CHILDHOOD EXPERIENCES STUDY (ACES)

*A study begun in 1994 that connects 10 traumatic events in formative years with health outcomes as adults.*

# ACES STUDY FOUND THAT

With four or more indicators, people were:

4x

As likely to experience depression

12x

As likely to die by suicide

PTSD ADDED TO DSM-V IN 1980

*Still only limited to war veterans*

“

SOME PEOPLE'S LIVES SEEM TO FLOW IN A NARRATIVE; MINE HAD MANY STOPS AND STARTS. THAT'S WHAT TRAUMA DOES. IT INTERRUPTS THE PLOT. IT JUST HAPPENS, AND THEN LIFE GOES ON. NO ONE PREPARES YOU FOR IT.

*Jessica Stern, Denial: A Memoir of Terror*

# TRAUMA MEMORIES

*Relived, not remembered*

*Body re-enacts traumatic situations as though they are happening for the first time*

*Not stored as a narrative*

*No beginning, middle, end. Loss of timeline, connection to present. Often disjointed and fragmented*

BREAK TIME

CREATING SAFETY AND CONNECTION

REALIZE

Realize widespread impacts of trauma

RECOGNIZE

Recognize signs of trauma

RESPOND

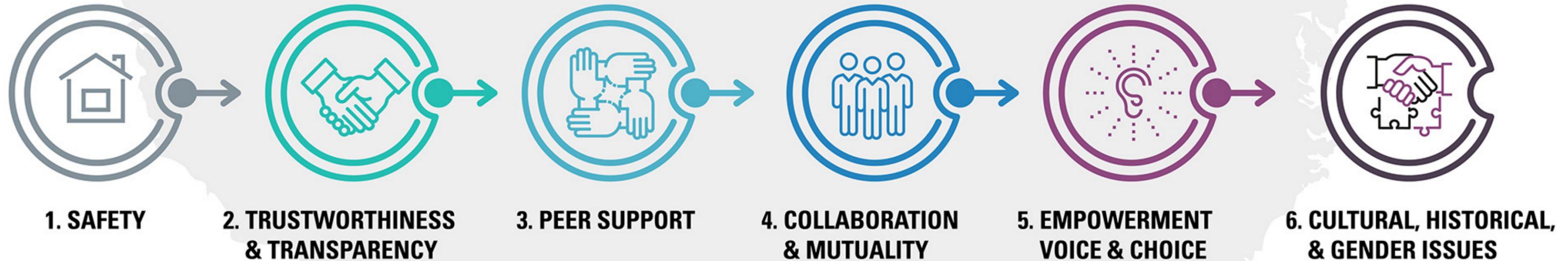
Respond by fully integrating knowledge about trauma into policies and practices

RESIST  
RETRAUMATIZATION

Resist re-traumatization

# 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.

# LANGUAGE MATTERS

## Active language

"The person who abused you" instead of "your abuser"

## Honest Apologies

"I'm sorry you..." is a non-apology and is a form of victim blaming. Instead, try "I'm sorry for..." state the specific action and acknowledge how it made the other person feel.

# CREATING CONNECTION & SAFETY

- *Acknowledge their reality*
- *Practice active/fertile listening*
- *Validate their feelings*
- *Use check-in questions*





*Get out of your head and into your body*

# SELF CARE FOR SERVICE PROVIDERS



Take a break

Set goals

Say no

Create a support  
system

Connect with  
emotions



Practice  
mindfulness



“

IF WE CAN HEAL OUR TRAUMA, WE CAN  
HEAL THE WORLD.

*Kelly Sparks*

# RESOURCES

National Domestic Violence Hotline 800-799-7233 or Text START to 88788

National Suicide Hotline 800-273-8255

RAINN - Sexual Abuse Hotline 800-656-4673

# RESOURCES

Nadine-Burke Harris TED Talk on ACES

ACES Assessment

Preventing Retraumatization

Trauma Drama University

Kid Power



THANK YOU!

[eunicebrownlee.com/NERSC](http://eunicebrownlee.com/NERSC)

Instagram/Twitter: @eunicebrownlee LinkedIn.com/in/eunicebrownlee