

The T-Word – or the Trouble with Trauma

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Mark Brayne is a former BBC foreign correspondent who retrained in mid-life as a psychotherapist, specialising in trauma work. He's an accredited Consultant in EMDR (Eye Movement Desensitisation and Reprocessing), a relatively new therapy globally recognised as one of the most effective treatments for Post-Traumatic Stress Disorder (PTSD). Mark did the Hoffman Process in 2002.

Very probably like you, most folk I meet in my work as a psychotherapist come to me at first thinking that trauma is about war zones and earthquakes, car crashes, violent crime and stuff in the news that happens to other people.

The trauma most of us don't immediately think about – and these are real stories from my practice – is the day you wet yourself on stage at six when you hadn't dared ask to go to the toilet before your three lines in the nativity play.

Or the time when as a nine-year-old you didn't get the Barbie doll that your cute little sister was given for Christmas.

Or when you were seven at primary school and the boys started calling you Lucy (a female name, for heaven's sake) after you misheard the teacher's instruction and joined the girls being invited to the front of the class.

What's important about trauma, and something Bob Hoffman intuitively knew when he started the Hoffman Process an amazing 50 years ago, is that it's not just the 'BIG T' experiences of nearly losing our life that can mess us up long term.

Minor events can have a major impact

The experiences which have the deepest and most lasting effect almost always turn out to be the “*smaller t*” traumas of earlier life. It's the accumulation of subjective misery which undermines our sense of being loveable and safe in the world. That can impact us suddenly or - in our closest long-term relationships – it can grind away over time

That's why my client's story of not getting that Barbie doll told me so much about how her nervous system had laid down the neural roadmaps in childhood which, 30 years later, were now leaving her self-confidence crushed and crippled as an adult.

With the arrival of - to everyone else – an adorable little sister, her emotional world of safety and love had quite simply collapsed. She only saw a loathsome cuckoo in the family nest usurping her special relationship with her parents.

Of course, the parents probably saw it quite differently. What matters though is not how other people view things that happen to us but how we ourselves store them in our brains and nervous systems. This is especially important if those patterns are set up in our earliest years before we're able to bring a more mature understanding to the experience.

(I don't work with children under 18, but when I'm asked if there's an age group in which I specialise, I say it's primarily the under-sevens - whether my clients are actually 27 or 87.)

Happy endings

So, if most of us have got a trauma story within us, what can or should we do about it?

The bad news is that trauma, both Big T and small t, can seriously damage our emotional wellbeing for an entire lifetime. The very much better news is that given half a chance, our bodies and nervous systems know perfectly well how to heal.

Mostly, they do just that. We get over bad things that happen. Time heals. Broken hearts mend, as do bones and flesh. It's the same fundamental process.

But if muck gets stuck in the wound, evolution's natural healing mechanisms, built into us by three-and-a-half billion years of life on earth, get blocked too, and whether physically or emotionally, we continue to hurt.

That's where I find the Hoffman Process can come in, helping us to see where these childhood events have created patterns that are still running us as adults. Whether it's a 'big T', or a childhood of 'small t's', Hoffman can be a big part of pointing you in the direction you might now need to go.

With a 'big T' experience which you might never have looked at before, that may mean some one-to-one therapy before the course. Or, if you're already on the journey, your therapist might recommend the Process as a way to fast-track the next stage.

And by the way, this clearing of old stuff isn't just an emotional nice-to-have. Medical research now links a wider and wider range of physical and mental health issues, from chronic fatigue and diabetes to cancers and even the risk of experiencing domestic violence or abuse in adulthood, to what are termed Adverse Childhood Experiences (ACEs).

EMDR

My own preferred way of working is rather clunkily called Eye-Movement Desensitisation and Reprocessing, or EMDR. Recommended by health authorities for the treatment of Post-Traumatic Stress Disorder, EMDR therapy identifies the origin of our trauma-driven dysfunctions and then works to resolve these in a tightly-focused way.

We use EMDR to unpack the emotion, the thoughts and the body's physical sensations that are locked in the old wounds, and kick-start the body's natural healing process. This is done with short sets of bilateral sensory stimulation of 30-40 or so seconds.

In the jargon of EMDR, we call this Dual Attention Stimulus or DAS. Your therapist may ask you to hold buzzers in each hand, or use headphones clicking alternately left and right, or ask you to follow his/her hand or a light with side-to-side-eye movements as in REM sleep, each method a different way of delivering bilateral signals alternately to the left and right brain hemispheres.

Guided and witnessed by the therapist, these sets of bilateral stimulation take you back in time, into the roots of your traumatic memories big and small, with one foot in the safety and groundedness of the present and one foot in the past, as you work through the trauma memory and share whatever your nervous system is bringing back into conscious awareness.

It doesn't always do the trick, of course – there's no such thing as a miracle cure – and it's a bit more complex than there's space here to describe. But after more than 10 years of practice I continue to be astonished by the power and speed with which EMDR can shift hard-wired distress.

To illustrate this, and to explore where the roots of your own issues might lie, take a look at the exercise in the box to the right of this column.

Dr Laurel Parnell, author of Attachment-Focused EMDR and my own most influential psychotherapy teacher, calls this the Bridging Technique.

And while this particular technique isn't a treatment of trauma, the insights it gives might prompt your *thinking* left brain and your *feeling* right brain (to seriously simplify how our nervous systems work) to connect the dots back to how you got to be the way you are.

And what better place to start the journey of profound personal change.

I hope these examples help to illustrate that you don't need to have had a difficult childhood to benefit from the Hoffman Process – 'normal' ones still offer plenty of material.

As Hoffman quite rightly argues, we can all get more from or just *ask* more of life if we're clear of unnecessary baggage.

A final disclaimer though. It ultimately depends on you. After all, how many therapists *does* it take to change a lightbulb? Just one. But the lightbulb has to *want* to change.

Suggested Reading:

The best and most accessible book about trauma and also EMDR is probably *Healing without Freud or Prozac* by my sadly now-deceased colleague David Servan-Schreiber

For a very simple guide to helping yourself feel better about your past and future with the use of bilateral tapping, try Laurel Parnell's *Tapping In*.

For more information, visit Mark's website www.braynetwork.com

Focus on a situation that bothers you and freeze-frame that moment as if it were a photograph. Once you see the picture clearly in your mind's eye, ask yourself the following questions. Just observe whatever comes up for you, don't judge it.

- 1. *What does the image make me feel, emotionally?*** Choose just one word.
- 2. *Where is that feeling residing in my body?*** It could be anywhere, from the heart to the gut to your little toe. Just trust what you notice.
- 3. *What's the negative thought I have about myself that's attached to this?*** It could be anything – I'm not safe, I'm a bad person, I'm incompetent, I can't handle it etc.
- 4.** And now, the key bit, three short instructions: ***Drop back/Trace it back in time – As far as you can go – and above all, don't censor what comes to mind.***
- 5.** You'll almost certainly land a long way back. Trust that. Just notice what connections you make. Allow yourself to witness with compassion that (usually) kid's experience, feelings and thoughts. You might want to write down what you observe and connect.
- 6.** Take time, perhaps with a friend, someone you trust, maybe even a therapist, to reflect on how the long-term impact of those old small-t, possibly Big-T, experiences are affecting your life and relationships today.