

Excerpt from: <http://www.tiandayton.com/what-do-we-mean-by-relationship-trauma>

# What Do We Mean by Relationship Trauma?

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### The Emotional Body

Our emotions are physical; they are processed in our bodies by our limbic system. That's why action and emotion are so closely linked. Because we experience our emotions within our bodies, feelings are often accompanied by an urge to act.

The limbic system is the brain/body system that governs mood, bonding, libido, appetite, and sleep cycles. The limbic system records and categorizes all of our sense information like sights, sounds, smells, tastes, and so forth and double codes them with the emotions and gestures or movements that we associate with that experience. That's why our emotional memories so often get triggered into consciousness by an old familiar smell, sound, sight, taste, gesture, or sensation. The sensory cue, whether it be the smell of a pipe or cookies baking, an old song, a soft summer breeze, or facial expression triggers a flood of emotions in us. Those "sense memories" accompanied by the emotions double coded with them, can either wrap us in a wonderful reverie of recollections or send us straight through the ceiling, depending upon the emotional content of the situation we are recalling. They can make us want to fight, run out of the room, or cuddle close and be cozy and affectionate.

### Living in Emotional Extremes: A Dis-regulated Limbic System

Trauma, however, can dis-regulate the limbic system. (I go into in detail in my book *Emotional Sobriety: From Relationship Trauma to Resilience and Balance* and *The ACoA Trauma Syndrome*.)

Dis-regulation in our limbic system can lead to an impaired ability to regulate our emotions and can manifest as depression, anxiety, mood disorders, sleep problems. It can contribute to an inability to regulate and balance our emotions, appetite, intimacy, and sexual drive (libido).

When our limbic system, which is responsible for balancing our moods, becomes dis-regulated, we may lose some of our ability to stay balanced or to "self-regulate". We may have trouble staying emotionally balanced. When we get upset, for example, we may go from 0–10 or 10–0 with no speed bumps in between. From intense emotion to shutting down, we have trouble living in 4, 5, and 6.

When we cannot balance our emotions ourselves, we may look to a substance to do that for us, like drugs or alcohol. Or we may use food, sex, or a compulsive form of bonding to create a temporary or false sense of "safety" and "balance." Needless to say this is a slippery slope that can lead to self medication.

### Biology and the Endless Wheel of Trauma and Addiction

Trauma: Emotional and limbic dis-regulation can also lead to the body becoming symptomatic or to somatic disturbances and upsetting body sensations. Fear or intense emotions can set in motion heart-pounding, queasiness, sweating, tightness of muscles, or shortness of breath. This rise in disturbing body sensations can trigger disturbing emotions and

trauma imagery that is stored in the mind, scenes from past situations where we felt help- less or scared can race through our minds as flashbacks or even nightmares. This can become a vicious circle in which the body and mind play off of each other, causing a negative synergy in which the disturbing emotions and imagery trigger disturbing body sensations and vice versa. This can drop trauma survivors into a confusing emotional, psychological and physiological “black hole” that they can have trouble finding their way out of and can contribute to feeling scared, helpless and disempowered all over again.

Addiction: Drugs and alcohol, for the trauma survivor, can provide a way to quiet the mind and the body that they can have control over; a sort of self-administered medication. Certain behaviors, particularly those that trigger a rise in dopamine levels in the brain, like eating (particularly sugar, white flour, and fatty foods) or sexual acting out, can have a similar “soothing” (but addictive) effect. The more these substances or behaviors are used to quiet and calm unwanted feelings and sensations, the more dependent we become on them and the more convinced we become that we cannot calm down or feel OK without them.

Trauma and Addiction: Over time, greater amounts of the drug or acting out behaviors are needed to reach the same “high.” Thus the addiction takes hold, the PTSD symptoms become worse not better and lives become unmanageable for all concerned. In this manner individuals may develop insidious multiple addictions. Gruesome twosomes like food and alcohol or sex and drugs or gambling and alcohol, are all potent combinations that make it difficult to recognize what the primary addiction or issue is, or exactly how to treat it. After all, we have to eat, right? However, there are ways of eating that trigger spikes in blood sugar levels that in turn trigger cravings. And because drinking also affects blood sugar and lowers inhibitions, gorging on sugary and fatty foods becomes easier and more mindless. Though the individual may not appear to be eating or drinking to unmanageable excess, they are able to manipulate their own body chemistry and maintain addictive levels of feel-good body chemicals by a combination of drinking alcohol and using food to get a dopamine high. This manipulation of one’s own body chemicals can also be achieved through maintaining adrenaline highs. Adrenaline can be as addictive to the brain as heroin, activities like constant rushing, overworking, high-risk behaviors or frenetic exercise can all create spikes in adrenaline. In all of these cases, behavior can come to mirror that of an addict and thinking, feeling, and behavior get out of whack.

In recovery we learn to manipulate our body chemistry as well. Part of feeling good and maintaining a good mood lies in intentional “serotonin management”. We need to actively adopt activities that stimulate serotonin, one of the body’s natural “antidepressants” or mood regulators. Comfortable exercise, sharing emotions, journaling, meditation, relaxation, guided imagery, and a relationship network all stimulate serotonin to enter the blood stream. Encourage clients to try it themselves. When they are feeling moody, ask them to take a walk with friends and share feelings or journal and then share or listen to a guided imagery and go into a relaxed and meditative state.

## The Importance of Healing Experientially

As J. L. Moreno, the father of psychodrama, sociometry, and group psychotherapy said, long before his time, “the body remembers what the mind forgets.” Over the last three decades, neuroscience has under- scored the importance of incorporating the body into the healing process when working with emotional and psychological trauma. We need to do more than learn to tell the story of our lives. We need to feel the story of our lives in order to heal it. Trauma shuts feeling down, recovery wakes feeling up. That’s why we need solid recovery supports in place such as twelve-step meetings, affiliative groups, therapy, exercise, good nutrition, and healthy forms of self-soothing. Whether we’re talking about recovery from addiction or trauma or a combination of both, we need a strong healing network that’s available seven days a week in order to help us to learn to hold and manage the intense emotions that recovery will naturally re-stimulate without acting out or self-medicating. One or two times a week in one-to-one therapy is not enough, in my experience. Emotions aren’t that neat, they come up at the most inopportune times and need to be processed more regularly, at least in early recovery.

Research in attachment theory and bonding help us to understand why it is also so crucial that a therapeutic process be relational. Psychodrama's triadic system of psychodrama, sociometry, and group psychotherapy provides a full framework for body, mind, and relational healing. Psychodrama is a role play method that allows us to recreate our role relationships so that we can explore them both from our perspective and, through role reversal, through the eyes of the other. Sociometry is the science of applied group dynamics and how the exploration and healing of those dynamics can be made experiential in group therapy. Moreno developed a method that allows the body to move, to feel and to act; a multi sensory experience of feeling and healing, where we use all of our senses, where we feel first then struggle toward the intellectual word or words that best define what we're experiencing in our hearts, minds and bodies. A relational process in which we not only try to talk about what hurt us but we witness the stories of others with whom we may identify. Where we can hear them struggle to share the same muffled emotions that we too may be carrying, or see as they try to take some of the actions that we, too, have longed to take whether curling up and hiding, running or embracing. Experiential healing provides a process where we can allow the deeper layers of our own experience to unravel before our eyes and make sense of them, layer by layer, as they emerge both within ourselves and in relation to others.

Contrary to what many might think, this material does not necessarily come pouring forth in treatment; it is slow and painstaking work. Often times, as painful memories emerge, the body will react before the client is even aware of what they are feeling, they may shake or shiver, get a pounding headache; their gut might tighten or their throat go dry. It is up to the therapist to read these signals and use them as information in working with the client and to help the client to learn to recognize them in themselves. The trauma survivor may initially come forward tentatively, frightened of retaliation for even thinking what they may perceive to be disloyal or subversive thoughts. Feeling what they have never felt can feel dangerous to them.

Simply saying the words that were never spoken or feeling emotions that were never felt, without shutting down, acting out, or self medicating, can be deeply healing for the person who carries frozen or denied pain. This fairly straightforward process can allow them to make sense of themselves and what drives and defines them in their life and relationships. Even shaking off tension in the body while doing experiential exercises or watching a DVD and sharing emotions that come up can result in healing and relief for the person who longs or needs to get in touch with the "stories" and feelings they may be carrying unconsciously. As these feelings come forward, the thinking that was frozen in place starts to come forward, too. The body moves and the mind and heart follow. Identifying that "I want to run, to fight and defend myself, to collapse . . . I want to talk, to hug or to be held" can help individuals to come out from the shadowy depths of their unconscious selves, into the sunlight. This can be a confusing and disequilibrating process. After sharing with moving clarity about something that they have long held in silence, for example, group members often say things like, "Did that make any sense?" or "I feel like I'm babbling." Quite the contrary, those listening are often riveted, sitting on the edge of their seats as they quiver with identification and emotion. This kind of "aha" moment is healing not only for the one sharing, but for all those watching, who suddenly see that they, too, may have such eloquence and intelligence in their pain. We see such moments in the stories that are a part of these DVDs.

<http://www.tiandayton.com/blog-with-medium-thumb-nail-right-sidebar> (Walking on eggshells video & Emotional Sobriety video)

**"Addiction can mean that we cannot regulate our emotions...that is why we need to heal the limbic system" . 12 step programs are the path to heal the limbic system to become calm.**

**Signs of Emotional Sobriety- well develop skills to regulate emotions and have a perspective on life..... and live in the present....process painful emotions... live comfortably with intimate connections/relationships (live in present vs. living in past hurts and fear of future hurt)**