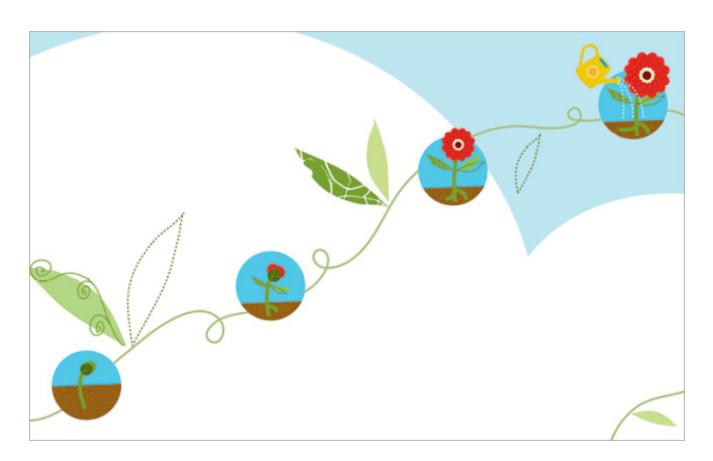


Trauma and Addiction Healing Bodies, Hearts, Minds and Souls

Roseann Cervelli MS, LCADC, CCS, CPS rcervelli@cjfhc.org



All that you touch, you Change. All that you Change Changes you. The only lasting truth Is Change. —Octavia E. Butler



A Heartfelt Message

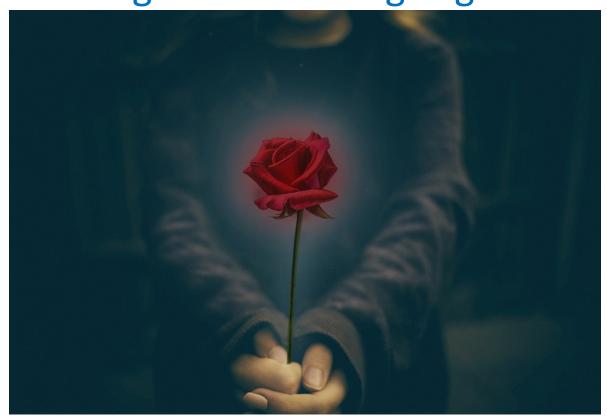
To All Health Care Providers, Substance Use, Mental Health and Behavioral Health Counselors, Nurses, Technicians, Law Enforcement, Social Justice Workers, Teachers, Lawyers, Probation Officers, Essential Workers, EMT Workers, Receptionists, Ambulance Drivers and Everyone Else...

You can TRUST that any person in your care has experienced some form or degree of trauma in their lifetime...EVERYONE deserves your Trauma Informed and Addiction Informed Sensitivity, Compassionate Care and Attention...Everyone deserves to be treated with Dignity and Loving Kindness...



Remembering All Victims of Trauma and Addiction

Centering and Breathing Together





Goals

- 1. To define the spectrum of Trauma and bring understanding to how Trauma may interfere with one's ability to function physically, mentally, socially and emotionally to one's full potential.
- 2. To reflect upon our objective and subjective definitions of Addiction and how these impact the Recovery process.
- 3. To explore the interrelationship of Addiction and Trauma
- 4. To highlight past, present and future treatment modalities for the healing of Addiction and Trauma
- 5. To reflect how Trauma informed practices may foster resiliency and empowerment for those seeking Recovery from Addiction and/or Trauma.





If we want to understand the oak, it's back to the acorn we must go.

- OPRAH WINFREY

@THEMILLENNIALGRIND









A Starting Point...

- What is your current definition of Addiction?
- What are some of your subjective thoughts, experiences and feelings about Addiction?

- What is your current definition of Trauma?
- What are some of your subjective thoughts, experiences and feelings about Trauma?



The Self-Portrait Of a Young Mother Entering Treatment



I thought to myself, "If this figure could walk off this page, it would..."

Suddenly, a door opened to all I could never understand or reconcile about Addiction.



Three Months of Residential Treatment Later...

- Her discharge self-portrait was drawn with pastel colors and covered the whole page of drawing paper.
- She and her 3 daughters were sitting under an apple tree, on a green-grass shaded hill.
- There was a stream of water running through.
- There was a sun shining.
- There were clouds and birds flying in the sky.

What Happened in those Three Months?



Our Basic Core Needs

- To be safe
- To love and be loved
- To belong, to bond
- To be connected
- To have purpose, meaning and direction
- To be confident and competent
- To be able to make decisions
- To have freedom
- To experience fulfillment
- To survive, thrive

selfactualization
morality, creativity,
spontaneity, acceptance,
experience purpose,
meaning and inner potential

self-esteem
confidence, achievement, respect of others,
the need to be a unique individual

love and belonging
friendship, family, intimacy, sense of connection

safety and security
health, employment, property, family and social stability

physiological needs
breathing, food, water, shelter, clothing, sleep

When our Core Needs are met, we feel a basic sense of reward, security, relief and control of life.

When our Core Needs are not met or neglected, we can become powerless, uncertain, alienated, estranged, lonely, blameworthy, shamed, ill, lost, anxious, depressed.



Gabor Mate: Two Fundamental Needs

1. Attachment: Bonding and belonging to a sense of self/others.

Without attachment, we cannot survive. With Trauma- the endorphins that facilitate attachment don't develop.

2. Authenticity: Being connected to ourselves.

Knowing what we feel, think etc., and being able to act on it.

Addiction and Trauma Harm Our Ability to meet these Fundamental Needs

"Every human being has a true, genuine authentic self that can never be destroyed." (Gabor Mate- The Wisdom of Trauma.)



What is Attachment?







Without attachment, there is no life...This attachment drive is the source of all pathology, whether physical or mental, when attachment needs are not met. (Gabor Mate)



What Is Authenticity?

Authenticity is a sense of being ourselves, knowing who we are, knowing how we feel.

To be authentic is to be in touch with your body, your gut feelings.

Like attachment, authenticity is a survival need.





Core Wounds

- Abandonment
- Loss of love
- Loss of belonging and connection
- Loss of safety
- Abuse, physical, mental, emotional
- Insecurity
- Betrayal
- Trauma
- Shame and self-hatred
- Loss of trust
- Isolation
- Adverse Childhood Experiences
- Adverse Environmental Experiences





Core Wounds from Childhood

The Pair of ACEs

Adverse Childhood Experiences

Maternal Depression

Emotional & Sexual Abuse

> Substance Abuse

> > **Domestic Violence**

Physical & Emotional Neglect

Divorce

Mental Illness

Incarceration

Homelessness

Adverse Community Environments

Poverty

Discrimination

Community Disruption

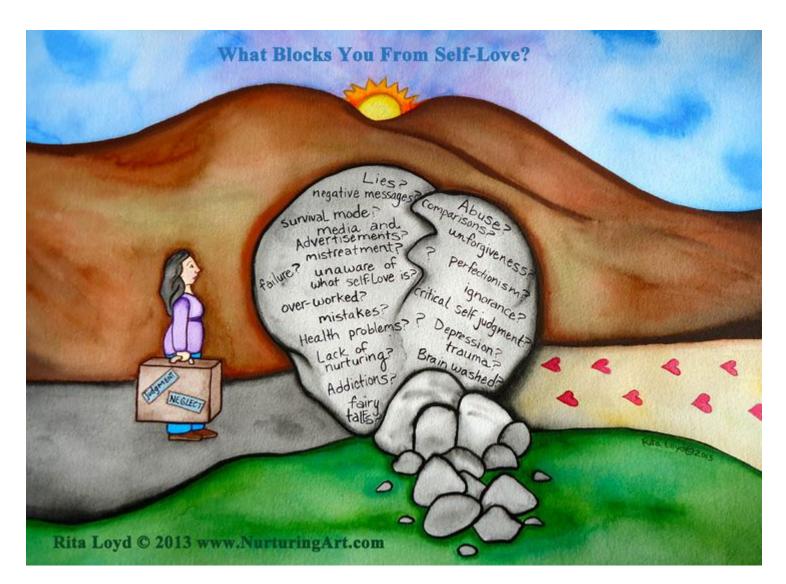
Lack of Opportunity, Economic Mobility & Social Capital Poor Housing Quality & Affordability

Violence



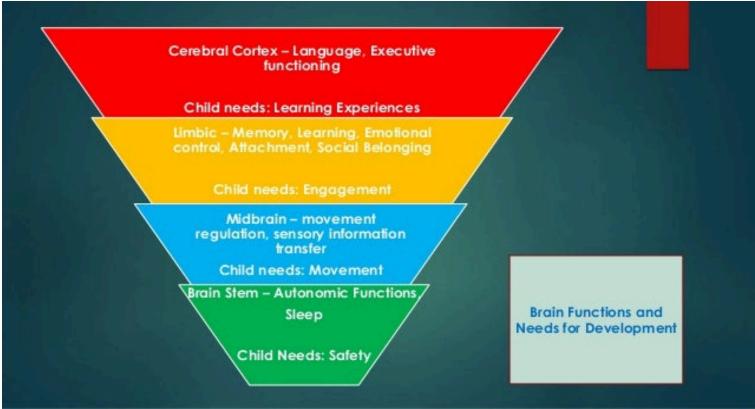
© Ellis 2020







The Journey of Brain Development



The thousand of loving, responsive interactions- the moments- shape the developing brain of the infant...



Patterns of Early Stress Activation on the Brain and Body: Affecting- Emotional, Social, Mental and Physical Health

ENVIRONMENT:

- UNPREDICTABLE
- EXTREME
- PROLONGED
- ABUSE/NEGLECT
- DYSREGULATED

=

Responses become overactive and reactive...

Leads to Sensitization and Vulnerability of Stress Response System-Flight, Fight and Freeze

ENVIRONMENT:

- PREDICTABLE
- MODERATE
- CONTROLLABLE
- NURTURING
- EMOTIONALLY REGULATED

=

Stronger, more flexible stress response capability...

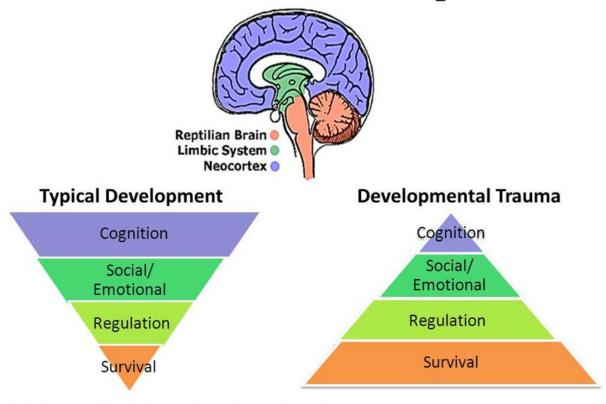
Leads to Tolerance and Resilience of Stress Response System-Healthy Adaptations



Source: Bruce D. Perry and Oprah Winfrey. What Happened to You? FlatIron Books, NY. 2021. p.57.

Journey of Brain Development

Trauma & Brain Development

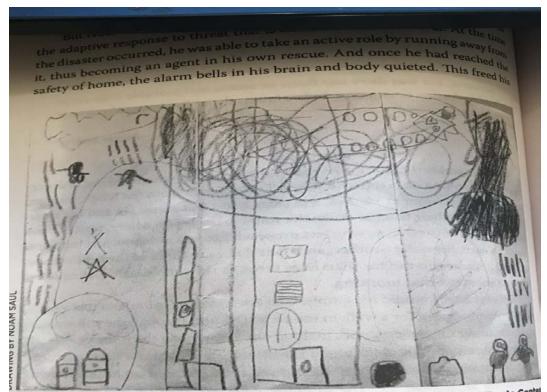


Adapted from Holt & Jordan, Ohio Dept. of Education



The Body Keeps the Score

Source: Bessel Van Der Kolk, M.D.



Five-year-old Noam's drawing made after he witnessed the World Trade Center attack on 9/11. He reproduced the image that haunted so many survivors—people jumping to escape from the inferno—but with a life-saving addition: a trampoline at the bottom of the collapsing building.



Noam and His Drawing of Sept. 12, 2001

- The 5-year-old boy was able to run away from the scene with his father and brother —he was an active agent in his own rescue.
- He was not immobilized, which is "at the root of most traumas."
- He and his family were unharmed, surrounded by love of one another.
- He was able to calm himself, drew the picture the next day, and imagined a creative alternative to what he had seen-a life saving trampoline.



Trauma Is Not New...

- 18th and 19th century-Western medicine used the term "hysteria" which comes from Greek word *hystera*, meaning uterus or womb- reserved for women.
- Pierre Janet- 1911-in describing his patients with trauma, "unable to integrate their traumatic memories, they seem to lose their capacity to assimilate new experiences...as if their personality has definitely stopped at a certain point..."
- Freud-came forward, and then retreated from his ideas of hysteria and its causation due to sexual violence, due to their social unpopularity and acceptance.
- World Wars- the terms "shell shock," "combat exhaustion," and the growing realization their symptoms were not only due to actual physical, trauma but tied to extreme psychological distress.
- Beginning of advocating for humane, caring and psychological treatment.
- Viet Nam and returning veterans- systemic study of trauma- lobbied the American Psychiatric Association to create new disorder reflecting their experiences= PTSD.
- "Psychological trauma became a "real" diagnosis, opening the gates to social legitimacy and continued research." (Treleaven, p. 53).

Source: Treleaven, D. Tramua Sensitive Mindfulness. W. W. Norton and Co. 2018.



What is Trauma?



Dr. Bessel van der Kolk:

Trauma is not just an event that took place sometime in the past. It is also the imprint left by that experience on the mind, brain and body. After Trauma, the world is experienced with a different nervous system.

Traumatized people...do not feel safe inside- their own bodies have become booby-trapped...Your body has become the container of dread and horror. The enemy who started on the outside is transformed into an inner torment."

For real change to take place, the body needs to learn that the danger has passed and to live and survive in the reality of the present.

Source: Van der Kolk, Bessel. The Body Keeps the Score. The Body Keeps the Score. Penguin Books. NY, NY. 2014.



What is Trauma?



Pat Ogden:

"Trauma refers to any threatening, overwhelming, experience that we cannot integrate... After such experiences, we are left with a diminished sense of security with others and in the world, and a sense of feeling unsafe within our own skin."



What Is Trauma?



Resmaa Menaken:

"Trauma is a response to anything that's overwhelming, that happens too much, too fast, too soon, or too long — coupled with a lack of protection or support. It lives in the body, stored as sensation: pain, or tension — or lack of sensation, like numbness...Trauma is also a wordless story our body tells itself about what is safe and what is a threat."



What is Trauma?



Gabor Mate:

The origin of the word 'trauma' is the Greek for 'wound'

- A psychic wound that hardens you psychologically that then interferes with your ability to grow and develop. It pains you and now you're acting out of pain.
- It induces fear and now **you're acting out of fear.** So without knowing it, your whole life is regulated by **fear and pain that you're trying to escape from in various ways.**
- The invisible force that shapes our lives. Trauma shapes the way we live, the way we love and the way we make sense of the world. It is the root of our deepest wounds.
- Disconnect from ourselves, our sense of value, and from the present moment.

Source: https://medium.com/invisible-illness/trauma-expert-dr-gabor-mat%C3%A9-a42a6ce67726



An Essential Question Expanded

What happened to you?

versus

What's wrong with you?

Gabor Mate: "Trauma is not the bad thing that happened to you, but what happens inside of you as a result of what happened to you. It is a disconnect from self because it is too painful to be ourselves."



Every Statistic is a Person...Trauma in our World

- More than 2/3 of children reported at least one traumatic event by the age of 16.
- In the U.S., nearly one in five women will be raped in their lives.
- 70% to 90% of U.S. adults have experienced some type of traumatic event once in their lives.
- Since 1999, more than 352,000 students have experienced gun violence in 380 schools. Beyond the dead and wounded, children who witness the violence or cower behind locked doors to hide from it can be profoundly traumatized.
- There were more school shootings in 2022 46 than in any year since at least 1999.
- In 2021, 1 in 5 adolescents suffer from a major depressive disorder. Suicide is the second most common cause of death in the U.S. for youth aged 15-24.

https://www.samhsa.gov/childtrauma/understanding-child-trauma

Ways Trauma Is Experienced

It occurs:

- When we directly experience a traumatic event
- When we witness a traumatic event
- When we experience or share an event that occurred to someone close to us.
- When we have repeated exposure to trauma.

Source: David Treleaven. Trauma Sensitive Mindfulness. W. W. Norton & Company. 2018.



The Many Faces of Trauma

Resmaa Menakem:

Historical Trauma

Intergenerational Trauma

Persistent Institutional Trauma

Personal Trauma

Vicarious Trauma

Complex Trauma

"Trauma can damage the genes in our cells. That damage can be passed on from parent to child, and from the child to his or her own child."

What Influences the Impact of Trauma?

- History of Previous Trauma- victims of childhood trauma, war, physical, emotional and sexual violence and abuse, racism, personal and community ACES
- History of Mental Health Problems previous depression, anxiety, substance abuse etc.
- Proximity to the event for oneself, or closeness to significant others
- Occur in early years- before the personality is integrated
- Unavailability of compassionate and trauma informed support- family, friends, caregivers, culture, environment-for managing after-effects
- **Unexpected** -ex. a sudden death, 9/11, collapse of Florida apartment

Factors that Influence Impact of Trauma

- Lasts a long time or repeats itself multiple times
- Length of time before one accesses help and support
- Individual temperament and adaptive or maladaptive resiliency resources
- Involves the death of many (ex. floods, earthquakes, mass shootings etc.)
- Immobilization- helplessness and no agency
- **Underdeveloped protective skills**-problem solving, express emotions, stress tolerance, inner resilience, discipline etc.
- Biology- overactive nervous systems, history of drug abuse, heredity

Stress>Traumatic Stress>Post Traumatic Stress>PTSD 90%------3.5%

Some say 100% of persons have experienced some form of traumatic stress.

Source: David Treleaven. Webinar: Trauma Sensitive Mindfulness. SCIP Progam 2020.



Stress:

- The non-specific response of the body to any demand for change. (Selye, 1936)
- Can be positive or negative.
- Something we all experience in many ways, every day.

Source: David Treleaven. Webinar: Trauma Sensitive Mindfulness. SCIP Progam 2020.



Traumatic Stress:

- The response to shocking and emotionally overwhelming situations that may involve actual or threatened death, serious injury or threat to your own physical integrity or that of others.
- Intense survival based responses when our safety is on the line.

Source: David Treleavan. Webinar: Trauma Sensitive Mindfulness. SCIP Program. 2020

Central Jersey

Post-Traumatic Stress Disorder

When symptoms of trauma carry on past the traumatic event.

- Intrusions-thoughts, memories, sensations, flashbacks
- Avoidance-of all external and internal reminders
- Arousal and Reactive Symptoms-acceleration of nervous system, out of balance, dysregulated, hyper-vigilant, shut down, disassociated

Responses include intense fear, helplessness, horror, de-realization, depersonalization or a dissociative amnesia.



Source: David Treleavan. Webinar: Trauma Sensitive Mindfulness. SCIP Program. 2020.

Spectrum of Trauma

Post Traumatic Stress Disorder:

- If the symptoms of post traumatic stress persist for more than one month or occur at least six months after the event, then it may be classified as *Post-Traumatic Stress Disorder*.
- With repeated, prolonged, extensive exposure to traumatic events, you may be suffering from *Complex PTSD*. These would include prisoners of war, hostages held captive for long periods of time, battering victims, cult survivors, sexual abuse and domestic violence survivors.

Source: The PTSD Workbook. Mary Beth Williams, Ph.D, LCSW, CTS and Soili Poijula, Photography Control Jersey

Peter Levine: How Trauma Sticks in the Body

https://www.youtube.com/watch?v=fiq0sILHi
Js





Medusa Story

Peter Levine: Those who suffer from PTSD feel there is a monster of some kind trapped and living inside of them...

Trauma victims experience:

- Gut-wrenching sensations in the body
- Intrusive thoughts and memories
- Habitually may track for trauma relevant stimuli in their environment
- If they are asked questions about their experiences, they overwhelm themselves, freeze and can turn to stone.

Trauma victims need a "protective shield" when they confront or face their own inner world thoughts and memories.

Trauma informed and sensitive therapies

Compassionate coping strategies

Healing interventions to protect the victim from re-traumatization.



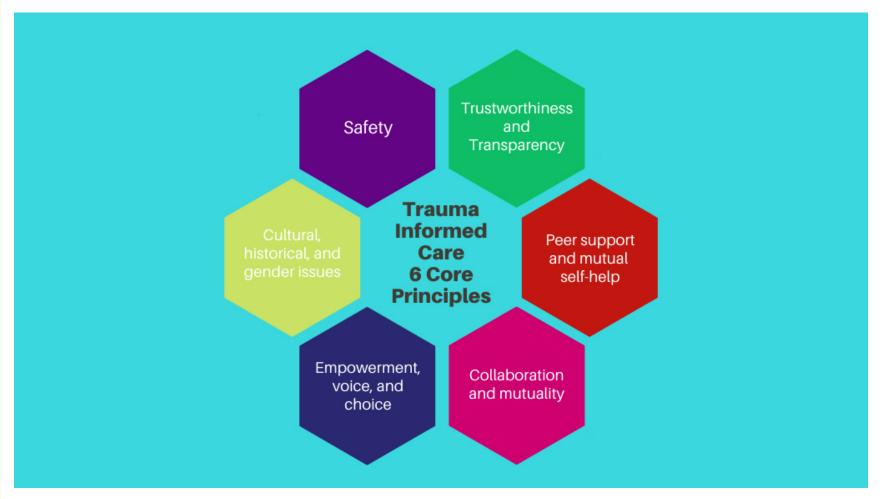
Trauma Informed Care



Trauma is a risk factor for nearly all behavioral health and substance use disorders.



Trauma Informed Care=Addiction Informed Care





Goal of Trauma Sensitive Care: A Model Also for Addiction Treatment

- To create an atmosphere and experience in which every individual feels as though they will always be welcome and receive respectful care and assistance, as they define it. SAFETY, CHOICE and RESPECTFUL ENGAGEMENT
- Unintentionally, many systems of care create triggers: too controlling, too structured, inflexible, lack of accessibility, and not client-driven.
- To allow the client to have choices, self-agency, control, compassionate support, freedom from shame and judgment.
- To create recovery models that honor each client's culture, personal and generational history, background, interests, lived experiences etc.



Various Healing Modalities for Trauma and Addiction

- Movement, rhythmic interactions with others-tossing beach ball, drumming, dancing-being physically in sync with others
- Yoga, tai chi. Martial arts-changes physiology
- Singing, vocalizations, soothing activities
- Tapping Techniques (EFT-Emotional Freedom Technique)
- EMDR, Brainspotting, Somatic Experiences and Therapies
- Therapeutic and guided use of psychedelics-MDMA, Ayahuasca, Ketamine,
 Psilocybin- Plant Medicines
- Trusted bonding with a therapist who makes one feel safe:
- Mindfulness, Self-Compassion, Trauma Sensitive Mindfulness, Internal Family Systems, Compassionate Inquiry, Compassion Focused Therapy, DBT, CBT etc.
- Body-oriented techniques-Peter Levinehttps://www.youtube.com/watch?v=G7zAsealyFA



Addiction and Mental Illness Statistics

- 46.3 million people aged 12 or older (or 16.5 percent of the population) met the applicable DSM-5 criteria for having a substance use disorder in the past year:
 29.5 million people- alcohol use disorder / 24 million people- a drug use disorder.
- Number of 2021 drug overdose deaths: 106,699, including illicit drugs and prescription opioids.
- Drug overdose deaths per 100,000 population: 32.1 (Source: <u>National Vital Statistics</u>
 <u>System Mortality Data (2021) via CDC WONDER</u>)
- In 2021, 94 % of people aged 12 or older with a substance use disorder *did not* receive treatment
- Nearly 1 in 3 adults had either a substance use disorder or any mental illness in the past year
- 46%percent of young adults 18-25 had either a substance use disorder or any mental illness.

Source: https://www.samhsa.gov/newsroom/press-announcements/20230104/samhsa-announces.nsd.ul-resulmental-illness-substance-use-levels-2021

Source: https://nida.nih.gov/research-topics/trends-statistics/overdose-death-rates

Trauma, Addiction and ACES

Trauma is a risk factor for nearly all behavioral health and substance us disorders.

- Subjects with five or more ACEs had 7 to 10 times greater risk for substance abuse than those with none.
- ACE researchers found nearly 2/3 of injection drug use can be attributed to abusive and childhood traumatic events.
- Alcohol consumption has a similar pattern-those who suffered sexual abuse were 3X more likely to begin drinking in adolescence than those who had not...
- ACE researchers: Consumption of alcohol used as a means to selfregulate negative or painful emotions

Source: Mate', G., In The Realm of Hungry Ghosts: Close Encounters with Addiction. North Atlantic Press. Berkeley, California. 2008



Trauma And Addiction

Russell Brand:

"Drugs and Alcohol are not my problem. Reality is my problem, drugs and alcohol are my solution."

• Dr. Bruce Perry:

"There is a correlation between addiction and trauma... Most people are not taking drugs for the reasons that we think. It's not about self-indulgence and pleasure seeking, or even a desire to escape life in general, as much as it is about avoiding the pain and distress of dysregulation."

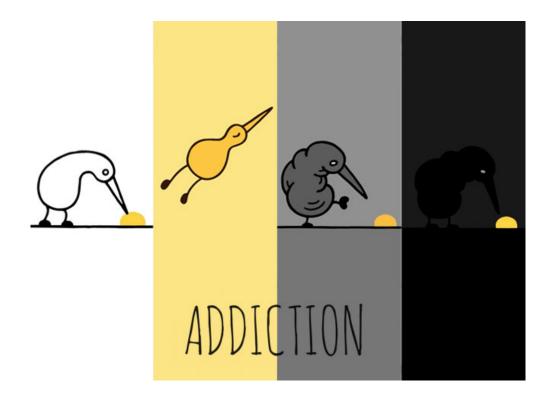
Gabor Mate

"Addiction is an attempt to solve a problem. It is the symptom of a deeper malaise, in most cases, trauma. ..The most important question is not "why the addiction, but why the pain?? What is the benefit of Addiction? What did it do for you?

In order to heal addiction, we must look at the underlying trauma...

All addiction has its roots in some kind of trauma, but not all trauma leads to addiction."

What Is Addiction?



Nuggets (2015)

https://mindremakeproject.org/2021/09/22/best-ted-talks-for-addiction



Gabor Mate: Addiction is not A Choice

https://youtu.be/tl104at2iqs

"Addiction has biological, neurological, psychological, medical, emotional, social, political, economic and spiritual underpinnings- and perhaps others I haven't thought about."





What Is Addiction?

It matters how people view addiction because that influences what they are willing to do about it...

- Is addiction a brain disease?
- Is addiction a chronic, irreversible disease?
- Is addiction the result of habit?
- Is addiction a choice?
- Is addiction a moral issue?
- Is addiction a result of one's genetics?
- If addiction is not a disease, what is it?
- Can addiction be cured?



DSM V



The Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, is the standard for detailing mental illness. Among other disorders, it covers the complicated subject of addiction. When looking at something as complex as substance use disorder, providing a definition of addiction can be challenging. The medical community took over 60 years to develop the DSM-5.

DSM-I to DSM-IV

- Addiction was thought to emerge from a "primary personality disorder."
- Legal problems were part of the criteria for substance abuse.
- There was conflict in differentiating substance abuse and substance dependence.
- Significant limitations arose with reliability, external validity and assumptions.
- "Diagnostic orphans" fell between the existing classifications



The DSM-5 made dramatic modifications by combining abuse and dependence into a unified category.

Criteria for Substance Use Disorder

















contact with Gateway today!





A patient only qualifies by meeting two or more of these substance use disorder criteria. If you or a loved one are suffering from substance use disorder, don't wait. Get in



11 Criteria

Four basic categories — impaired control, physical dependence, social problems and risky use:

- Using more of a substance than intended or using it for longer than you're meant to.
- Trying to cut down or stop using the substance but being unable to.
- Experiencing intense cravings or urges to use the substance.
- Needing more of the substance to get the desired effect also called tolerance.
- Developing withdrawal symptoms when not using the substance.



11 Criteria - Continued

- Spending more time getting and using drugs and recovering from substance use.
- Neglecting responsibilities at home, work or school because of substance use.
- Continuing to use even when it causes relationship problems.
- Giving up important or desirable social and recreational activities due to substance use.
- Using substances in risky settings that put you in danger.
- Continuing to use despite the substance causing problems to your physical and mental health.



Substance Use Disorder –DSM -5

3 Levels of Severity

- Like other illnesses, substance misuse worsens over time. The substance use disorder criteria explained in the DSM-5 allow clinicians to determine how severe a substance use disorder has become depending on how many symptoms are present. For example:
- One symptom could indicate an individual is at risk.
- Two or three criteria point to a mild substance use disorder.
- Four or five symptoms show someone has a moderate substance use disorder.
- Six or more criteria indicate a severe substance use disorder, which signals an addiction to that substance.

New Definition of Addiction

The American Society of Addiction Medicine (ASAM) issued a new addiction definition in October 2019.

Addiction is a treatable, chronic medical disease involving complex interactions among brain circuits, genetics, the environment and an individual's life experiences. People with addiction use substances or engage in behaviors that become compulsive and often continue despite harmful consequences.

Prevention efforts and treatment approaches for addiction are generally as successful as those for other chronic diseases.



New Definition of Addiction

 The updated description of addiction needs to "...fully address the biological, psychological and social factors that contribute to the development and perpetuation of this disease and has led to punitive approaches that often cause more harm than good."

"We have no evidence that a felony charge or time in a jail cell addresses the underlying disease, and the consequences of incarceration only add future pressures that make it more difficult to manage the illness. While breaking the law must be addressed judicially, incarceration is no more of a treatment for addiction than it is for diabetes or mental illness."

(Drs. Early and Olsen)

https://www.psychologytoday.com/us/basics/addiction/is-addiction-disease



A Word on Harm Reduction

Mark Tyndall- "Harm Reduction is a misunderstood health intervention..."

Melissa Byers-"Harm Reduction connects and connection is needed more than ever."

- Releases the need for achieving abstinence as the only way to recovery
- Reduces suffering and death
- Serves to diminish shame and stigma of addiction
- Provides for stigma free policies, practices and environment.
- Endorses safety of participants
- Encourages personal agency, health and wellness
- Provides an environment of connection, non-judgment, support and compassion
- Harm Reduction Navigators direct participants to housing, detox, treatment,
- Maternal health programs and other needed services
- Provides a space for authentic connection
- Holds that addiction is a public health issue, which needs systemic and just social and health solutions, not criminalization

Sources:Youtube- Melissa Byers. The Merits of Harm Reduction-TED Talk
Youtube-MarkTyndall. The Harm Reduction Model of Drug
Addiction. TED Talk



Shame: The Core of Trauma and Addiction

Chris Germer: Shame is the Wish to Be Loved...





Shame and the Wish to Be Loved: Underneath Trauma and Addiction

"We need to be loved. We needed to be loved. We were born and we still need to be loved and the wish to be loved never ends...

Most of us have actually forgotten this universal wish to be loved. Do you see in my eyes the wish to be loved? it's there and it's there all the time and it's not just there for me it's there for you and it's there for your family members and your friends. It's there. But we've forgotten. Most of us have forgotten that we put it out of our minds. Why have we forgotten the wish to be loved? We've forgotten because it hurts to remember. Because when we remember that we wish to be loved, we're going to start to remember all the times we were not loved the way we needed to be. This is actually why we need self compassion...We must learn how to love ourselves as well.

So what does this have to do with shame? Well shame is the belief that something is wrong with us that makes us unlovable, that we are too flawed to be accepted by others just as we are. And when we look deeply at the nature of shame we see that we would never feel shame if we didn't wish to be loved."

So it's actually the innocent wish to be loved that sustains shame..." (Chris Germer)



What Is Needed: Relationship is Everything

Trauma affects a person's relationship to self...

Trauma affects a person's relationship to all other relationships...

Addiction Does the Same...

Compassion for Self and Others may be cultivated as a restorative healing practice to bring forth integration, resiliency and inner resources for th



Compassion: An Antidote to Trauma and Shame





Compassionate Healing



Only When Compassion Is Present, Will People Allow Themselves To See The Truth." (A.H. Almaas)



Compassion Builds Resilience

 Resilience is the process of adapting well in the face of adversity, trauma, tragedy, threats or significant sources of stress.

• Self-Compassion and Compassion for others helps those with trauma *gently recover and uncover inner resources and a sense of safety and belonging to themselves and to the world around them.*

Everything you think you know about addiction iswrong | Johann Hari



The Opposite of Addiction is Connection

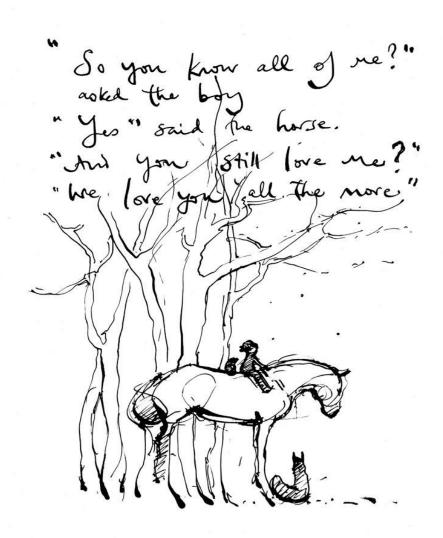
CJFHC
Central Jersey
Family Health Consortium

Closing Break-Out Room

- Reflect back to your thoughts on Trauma and Addiction at the beginning of this class.
- Share in your break-out room any new awareness, thought, feeling, perception, you may have experienced from this presentation...What is your Golden Nugget?
- Share how you might apply this information to a client or clients you are working with today.



A Thought to Leave and Begin With... The Boy, the Mole, the Fox and the Horse...





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