

**Utilization of Ericksonian Techniques in
Healing Childhood Trauma: A Case Study of
Encopresis**



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Disclaimer

Materials that are included in this course may include interventions and modalities that are beyond the authorized practice of mental health professionals. As a licensed professional, you are responsible for reviewing the scope of practice, including activities that are defined in law as beyond the boundaries of practice in accordance with and in compliance with your professional standards.

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Educational Objectives



1. Explain the theoretical basis of trauma as well as the dissociation process
2. Demonstrate skills to access severe trauma
3. Describe facilitating the integration process

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Content

- Introduction
- What is trauma?
- Impact on the body
- Diagnostic Criteria (DSM-5)
- Theoretical Frame of Reference
- Assessment: Holistic perspective
- Treatment Techniques
- Case Study: Encopresis



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What is trauma?

- Physical/emotional/sexual abuse/neglect
- Single incident or repetitive
- Symptomatology pervasive & multifaceted
 - Depression & anxiety
 - Medical illness
 - Impulsive
 - Self-destructive behavior



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Definition of Trauma

- Greek word *traumatikos* - "wound"/ emotional shock
- A term used freely either for physical injury caused by some direct external force or for psychological injury caused by some extreme emotional assault (Reber, 2012)
- Psychological trauma impact on brain as result of overwhelming stress that exceeds persons' ability to cope, or integrate emotions involved with experience

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Polyvagal Theory - Stephen Porges

- Specifies two functionally distinct branches of vagus (tenth cranial nerve). Serves to identify the relationship between visceral experiences and vagus nerve's parasympathetic control of heart, lungs, and digestive tract.
- Shutdown, or freeze-or-faint, occurs through dorsal branch of vagus nerve. Reaction can feel like the fatigued muscles and light headedness. When dorsal vagal nerve shuts down - immobility or dissociation
- Dorsal branch affects body functioning below the diaphragm affecting digestive system

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Deprived Children SA

- 'Children for Tomorrow Foundation' Langa - UWC, Tygerberg hospital, Kraaifontein Day hospital
- Community-based psychotherapeutic service in underprivileged areas
- When Grade 5 & 7's are asked how they resolved conflict – movement of slicing the throat, stick out a fist
- Coping is the same as the infantile ways of holding the self together
- Often present with fear for their own survival (paranoid anxiety) and depressive anxiety (Stellermann, 2006)

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Disruption of primary attachment

- Deprivation from primary caregiver
- Three stages (Bowlby, 1980)
 - Child **cries, pleads, bargains** in an attempt to force parent to return
 - **Despair**, child appears listless, gives up hope
 - **Reattach**, or gives up hope and adapts, or dissociates



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Kangaroo Motherhood


Jill & Nils Bergman 2010

- Babies react with protest and despair when moved from natural environment
- Protest phase - tries to re-establish contact by crying
- If that fails - becomes too tired to cry and lapses into despair
- Withdraws to conserve energy for survival
- Lower body temperature and heartbeat with increase of stress hormones
- Give up hope and dissociation can occur
- Skin-to-skin contact with mother
 - baby's temperature and heartbeat return to normal
- Mother's voice
 - eye contact contribute to contentment

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Baby breastfeeding



SENSATIONS THAT WIRE BRAIN

SEES Mum's eyes	Ear HEARS Mum's voice
SMELLS Mum's milk	MOVES with Mum
TASTES Mum's milk	Back FEELS Mum's arm holding
Hand TOUCH Mum's skin	WARMED on Mum's front
Skin-to-skin CONTACT	

Copyright Hold your Prem : Jill Bergman with Dr Nils Bergman

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Kangaroo Motherhood

Jill & Nils Bergman 2010

- Baby born with maximum of synapses between nerve cells
- Unused synapses tainted
- 6 months - brain cells developed
- Neural pathways are determining factor - quality of life
- Stress-related paths in infancy
 - pleasure-related paths pruned away
- Plasticity of brain compensate for loss

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Developmental Trauma

- Prolonged
 - Multiple/chronic
- Interpersonal nature - not captured in PTSD
 - Within care-giving system
 - Neglect/maltreatment
- Interferes with neurological development
 - Sensory/emotional/cognitive
- Untreated
 - Perpetrator/victim

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Symptoms of Complex Trauma

- Regulation of affect & impulses
- Memory and attention
- Self-perception
- Somatizations
- Victim
- Aggressor

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Impact of Trauma

- Traumatic events disrupt homeostasis in various areas of brain activated response to threat
- Internalization of elements of traumatic experience can result in persistence of fear-related neurophysiologic patterns affecting emotional, behavioural, cognitive, and social functioning
- Neurodevelopmental view of trauma can be useful for research, to define and use child-specific and developmentally informed models for assessment, therapeutic intervention, and policy

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Impact on the Body

- Trauma in Nervous System – not the event
- Danger → brain on alert → amygdala triggers series of changes in brain chemicals and hormones → entire body in anxiety mode
- Stress-hormone boost
- Racing heartbeat
- Fight, Flight, Freeze
- Digestion shutdown

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Impact on the Body

- Studies of trauma survivors demonstrate high circulating cortisol levels, others have shown decreased cortisol responses
- Cortisol is critical neurohormone that mediates person’s sense of well-being
- High levels of cortisol may cause cell death in hippocampus; part of brain that is critical for information processing and memory

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Impact on the Body

- Often result in difficulty controlling autonomic functions, with threat-related psychological difficulties such as hyper-vigilance for danger and overwhelming anxiety or anger (van der Kolk et al., 2014)
- Trauma survivors at increased risk of developing somatic problems such as chronic widespread pain and GI problems, consistent with shifts in autonomic state regulation (Kolacz & Porges, 2018)

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Freeze Response

- Nature such as attack of lion on impala
- When escape (flight) and fight is impossible, safer to play dead
- Lion might be caught off guard for moment and escape might be possible
- Animals can shake the energy off
- Frozen energy gets stuck in body (Levine, 2007)
- May manifests in symptoms
 - chronic depression/dysthymia, addictive behavior, OCD

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How the body releases trauma

Peter A Levine (2010)

- Shakes when cold, anxious, angry, fearful
- Self-regulation and resilience
- When inhibited or resisted, it prevents completion
- Rebounding abilities get *stuck*
- Scared, stiff or collapse
- Overwhelmed with helpless dread
- Paralysis and shutdown prevent release of 'survival energy'

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Diagnostic Criteria (DSM-5)

- Post Traumatic Stress Disorder (p271)
- Reactive Attachment Disorder (p265)
- Disinhibited Social Engagement Disorder (p268)
- Acute Stress Disorder (p280)
- Adjustment Disorder (p286)
- Other Specified Trauma and Stressor-Related Disorders

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Theoretical Frame of Reference

- Dissociation
- Ego State Development
- Developmental Phases

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Dissociation

- Coping mechanism in overwhelming trauma
- Ego State - Development of parts
 - Defined as organized system of behavior and experience whose elements are bound together by some common principle, and which is separated from other such states by a boundary that is more or less permeable (Watkins & Watkins 1997)
- Dissociation continuum - normal/pathology

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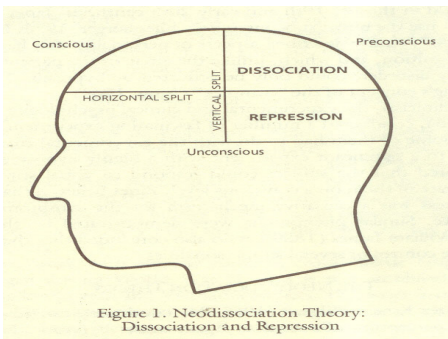


Figure 1. Neodissociation Theory: Dissociation and Repression
Healing The Divided Self – Maggie Phillips & Claire Frederick pg.4

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Differentiation Dissociation Continuum Watkins & Watkins 1997

Normal Well-Adjusted	Neurotic	Borderline Multiple	Multiple Personality DID
Adaptive Differentiation	Defensive	Pathological Dissociation	

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Ego States Development (Seel, 2012)

- Identification
- Reinforcement
- No ego state exists to cope
- Introject
- Trauma

EGO STATES RANGE

HEALTHY BEHAVIOR CAN BE MODIFIED

OVERRANGIOUS OBSESSIVE BEHAVIOR IS JUSTIFIED OR SERVES TO PROTECT

BEHAVIOR IS ENTRENCHED

RIGID NUMB/DETACHED

BPD DID

BEHAVIOR IS PATHOLOGICAL

Fig. 1

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Identification & Reinforcement

- Ego state is a neural pathway of dendrite and axon connections
- Created by recurring synaptic firings
- Primarily during early years
- Brain is a dynamic and changing organ

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