

Unresolved childhood trauma is a risk factor for chronic illness

Trauma impacts the integration of the brain

Unresolved trauma becomes disabling

After trauma we develop patterns of hypo and hyper arousal

Trauma creates lack or denial of self

When we get shocked with too many traumatic and adverse events our natural capacity to heal and bounce back is compromised

During trauma we get stuck / frozen in trauma time, so we need to become the primary caretakers of our wounded younger parts

Healing requires we move through incomplete trauma responses so somatic approaches and interventions are valuable

Trauma creates deeper enmeshment and so we need to differentiate self from trauma and those who have hurt us

We need to name, validate and challenge our traumas and adverse experiences

We need to interrupt old mental grooves

There is fear of living trauma-less because trauma becomes part of our subjective norm

Blocking our trauma related emotions has dire consequences for our well being, growth and physical health

Experience pours through generations; so it is wiser if we see our life through the lens of family history

Go to the places where history is intruding into our life in the present

We all carry our parents, early caregivers and teachers with us all the time

Unresolved trauma leads to our finding relationships similar to our childhood; attracting similar people and dynamics

We model in our adult relationships what we learn as children

We often act on old wounds we are mostly unaware of

When we have unresolved traumas we are prone to reacting instead of responding

Reacting instead of responding involves feeling out of thinking and thinking out of feeling without being present

We heal in safe and nurturing relationships

We have innate wholeness; we need to reconnect with it

There is an unbreakable bedrock part within us

There is a part in us beneath the layers of experience and traumas that cannot be damaged; we need to find the parts in us that are blocking this

The mind can change our health; consider the **placebo and nocebo effect**; however, it is not enough to have conscious positive thinking and beliefs because our subconscious mind can wreak havoc below our awareness if it carries negative beliefs and programmes (it runs our biology / over 90%)

Meditation and mindfulness practices can help integrate the brain, the body and mind, implicit and explicit memories, make the unconscious conscious. It can take place through focused attention, open awareness, the cultivation of kindness and working with opposites. For instance, integrating opposites as we build interoception or do a body scan exercise: focus on both left and right hands / legs, front and back or left and right side of body and so on.

Adverse childhood experiences

Finally, I have referred to the ACE research and the importance of these findings previously, but I would like to recommend Veronique Mead's website. She is a medical doctor, psychotherapist and has been working on her own life experiences and autoimmune condition. It is rich in free resources and information on how trauma and adverse childhood experiences impact our physiology, health and life span and the importance of incorporating this knowledge in healthcare, education and other areas of life.

Extracts from **Veronique Mead's Book 5: Adverse Childhood Experiences and Chronic Illness** (Kindle)

'We now have incontrovertible evidence linking adverse childhood experiences and chronic illness. The Adverse Childhood Experiences (ACE) studies are being replicated and increasingly mentioned around the world. For every increase in the ACE score of 1 point, risk for developing an autoimmune disease such as type 1 diabetes, lupus, rheumatoid arthritis and many others goes up by 20%. An ACE score of only 2 or more increases the chances of being hospitalized for an autoimmune disease by 70 to 80%. Dube and Felitti et al found that: childhood stressful events may increase autoimmune diseases independently as well as amplify the effect of other environmental factors, such as infections.

Like family physician Gabor Mate and author Johann Hari, Felitti discovered from his patients that behaviors such as addictions to drugs, food, and alcohol (among others) are ways of coping with overwhelming feelings from unresolved trauma rather than an addiction to a chemical substance. Difficult events make us want to keep the door closed to the past but when not resolved, the past influences the present and creates havoc in our lives – including very real, physiological and biological changes that are

not about underlying personality or behavioral or psychological problems so commonly associated with our limited general understanding of trauma and PTSD. Old traumatic events tend to be unrecognized and dismissed by our culture. And they remain grossly underestimated in our medical health care system. The ACE studies give us the information we need to begin to take it seriously for ourselves and for our children'.