RESILIENCE AND POST-TRAUMATIC GROWTH

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ANTHEM BY MARK NEPO

Yes, you fell down.
I feel for you, for I have fallen many times.
Now you must get up.
I know it isn’t easy.
I know it will take time.
Remember, the seed can’t imagine breaking ground.
And the fledgling can’t imagine flying.
And so, your broken heart can’t imagine finding its way.
But life is this repeating journey from sleep to wakefulness,
from blindness to sight,
from fear to love.
No matter how many times we fall, we are just beginning.
OUR TIME TOGETHER...

Describe

Describe the role of neuroplasticity in healing trauma

Identify

Identify resilience and protective factors against the development of PTSD

Apply

Apply psychosensory interventions to support mind-body health and emotion regulation

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RESILIENCE AND POST-TRAUMATIC GROWTH

- **Trauma:** “Any event that overwhelm[s] the ordinary human adaptations to life.” (Judith Herman, Trauma and Recovery)
- **Resilience:** Resilience is adapting well in the face of adversity. Psychological and Physiological capacity to flexibility respond to difficult events.
- **Post Traumatic Growth:** The belief in our ability to work through feelings of terror, rage, shame, and despair and to know that we can ultimately discover a greater sense of freedom, wisdom, strength, and peace.
RESILIENCE INFORMED THERAPY

Broaden the lens
Change the Focus
Enhance Self-Perception

QUESTIONS OF RESILIENCY

- Why do some people respond better to traumatic experiences than others?
- Which coping strategies and behaviors are associated with the greatest adaptation to traumatic life events?
- What are the most effective means of integrating these strategies into our lives?
FACTORS OF RESILIENCE

- Control
- Mindset
- Self-Efficacy
- Commitment
- Connectedness
- Coherence
- Action

RESILIENCE AND COGNITIVE FLEXIBILITY (SOUTHWICK, & CHARNEY, 2018)

- People who are resilient tend to be flexible – flexible in the way they think about challenges and flexible in the way they react emotionally to stress. They are not wedded to a specific style of coping. Instead, they shift from one coping strategy to another, depending on the circumstances.
- Many are able to accept what they cannot change; to learn from failure; to use emotions like grief and anger to fuel compassion and courage; and to search for opportunity and meaning in adversity.
Resilience is not a trait that people either have or do not have. It involves behaviors, thoughts, and actions that can be learned and practiced.

NEUROPLASTICITY

- There are about 86 billion neurons in the brain, each with thousands of connections to each other.
- All of our memories, beliefs, and behaviors are encoded as neural networks.
- Brain changes with every experience.
- Growth occurs throughout lifespan.
STRESS-INDUCED NEUROPLASTICITY

- Whatever you repeatedly think, feel, and sense builds new or strengthens existing patterns of neural connections in the brain.
- PTSD is a form of stress-induced neuroplasticity
  - Reviewing the negative images, hypervigilance to threat, nightmares, flashbacks, and repeating unhelpful beliefs and thought patterns strengthen the neural networks of these distressing states.

POSITIVE NEUROPLASTICITY

- We can purposefully change our neural networks through directed effort.
Research indicates the human tendency to focus on the negative. The capacity to focus on the positive needs to be developed. To counteract this negativity bias, we need to actively look for evidence of positivity and goodness in our lives.

H.E.A.L (HANSON)

You can enhance a good feeling by slowing down, breathing into the positive sensations, and allowing yourself to fully receive the nourishment of positive states. According to Dr. Rick Hanson, you can “hardwire happiness” and combat the negativity bias by following the acronym HEAL:

- Have a positive experience
- Enrich it
- Absorb it
- Link positive and negative material
A BIOPSYCHOSOCIAL MODEL OF CARE

The biopsychosocial approach considers biological, psychological, social, and cultural factors and their complex interactions in understanding health, illness, and health care delivery.

"Health is not defined by the absence of disease; rather, it is recognized by the presence of well-being."

~World Health Organization
THE 6 RS OF NEUROPSYCHOTHERAPY

- Relating
- Resourcing
- Repatterning
- Reprocessing
- Reflecting
- Resilience

Stress or Trauma exposure

Increased Cortisol → Mobilization through action → Resolution and Homeostasis

Unresolved Stress Response & Thwarted Instincts

Increased Cortisol → Blocked Mobilization/Thwarted Instinct → Defensive action remains
HOMEOSTATIC BALANCE

Homeostasis is a dynamic balance between the autonomic branches.

Immobilization

Mobilization

DYSAUTONOMIA

Stress and trauma can cause dysregulation of the autonomic nervous system or dysautonomia with symptoms of:

- Fatigue
- Brain fog
- Sleep disturbances
- Low tolerance for exercise
- Lightheadedness or dizziness (Postural Orthostatic Tachycardia Syndrome, POTS)
- Increased vulnerability to anxiety
- Reduced capacity to recover from stress.
HOW MIND-BODY THERAPIES WORK

- Increased Distress Tolerance
- Improved Mental Outlook:
- Enhanced Somatic Awareness:
- Exercise Induced Neuroplasticity:
- Improved Vagal Tone

THE POLYVAGAL THEORY (PORGES, 2022)

- **Myelinated Ventral Vagal Circuit, the “Social Engagement System”—Safe, Social, and Connected:** Above Diaphragm.
- **Sympathetic Nervous System—Mobilization into Fight and Flight.**
- **Dorsal Vagal—Immobilization.** Below diaphragm, Facilitates “rest and digest” when you feel safe. When unsafe initiates “collapsed immobilization” or a “faint” response.

Image Credit: Gabriel Kram
THE VAGAL BRAKE (PORGES, 2022)

- All three systems (ventral Vagal, Sympathetic, and Dorsal vagal have inputs to the sino-atrial node: the pacemaker of the heart.
- Sympathetic input accelerates the heart.
- When we shift into a threat response, the vagal brake which ordinarily slows the heart (held in place by the ventral vagal system) begins to lift and the heart rate accelerates.
- Ventral and dorsal input slows the heart albeit in different ways.
- Applying the myelinated ventral vagal brake slows the heart gradually and smoothly and can easily lift which allows the heart rate to increase as needed.
- The dorsal vagal circuit functions as an abrupt brake leading to bradycardia, a rapid reduction of the heart rate or vasovagal syncope (faint response).

VAGAL TONE (BOLTON ET AL., 2020)

- Vagal tone is Heart Rate Variability (HRV): a measure of cardiovascular and respiratory function that facilitates adaptive responses to environmental challenge.
- HRV is a measure of the intervals between your heartbeats.
- High HRV means that there is a greater variability between the number of heartbeats on the inhalation as compared to the number of heartbeats measured on the exhalation.
- High HRV is associated with improved immune system health, and a reduction in anxiety, depression, PTSD symptoms. This is the physiological basis for resilience.
- “Heart rate variability (HRV) provides the best available means of measuring the interaction of sympathetic and parasympathetic tone, that is, of brainstem regulatory integrity.” (van der Kolk, 2006)
BARORECEPTORS AND VAGAL EFFICIENCY (PORGES, 2017)

- Vagal efficiency refers to how quickly the vagus nerve helps you adapt everyday stressors by applying and removing the vagal brake.
- Tolerating postural changes such as moving from laying down, to sitting, to standing, can provide a good measure for resilience of your nervous system.
- Practices that involve moving through postural transitions in a repeated, rhythmic manner allow you to alternately increase and decrease your heart rate.
- You are increasing the resilience of your nervous system in addition to the physical endurance required in these actions.

NATURAL VAGUS NERVE STIMULATION

- Neuromodulation vs. Hacking
- Gentle Awakening of the Ventral Vagal Circuit
- Emphasis on Social Connection
- Focus on Safety & Choice
- Soothing & Stimulating
NATURAL VAGUS NERVE STIMULATION TECHNIQUES

- Balanced Breath/Resonance Frequency Breathing
- Physiological Sigh
- Tragus and Concha (Ear massage)
- Self-Applied Touch (Self-Havening)

CONSCIOUS BREATHING FOR SELF-REGULATION

- Stressful and traumatic situations can cause shallow breathing, holding of the breath, tightness in the chest, over-breathing, and feelings of panic.
- Breath is the fastest way to regulate ANS
  - Inhales stimulate sympathetic nervous system
  - Exhales stimulate parasympathetic nervous system.
- Balanced Breath or Sama Vritti (Resonance Frequency Breathing; Pagaduan, et al., 2019):
  - 5-count inhale
  - 5-count exhale
  - Breathing in and out of your heart as you focus on anything that brings you a genuine sense of care, warmth, appreciation, or gratitude (McCraty & Zayas, 2014)
THE PHYSIOLOGICAL SIGH

The physiological sigh or cyclic sighing: take two sharp inhales of breath, typically through the nose, followed by an extended exhale through the nose or mouth (Del Negro, Funk, & Feldman, 2018, Ashhad et al., 2022).

Skill: Tragus & Conchae Stimulation

Massage the cartilage in front of the ear stimulates the auricular branch of the vagus nerve (ABVN) also known as Alderman’s nerve or Arnold’s nerve improves vagal tone. Conchae consist of 100% Vagal Fibers.
Skill: Self-Havening Touch (Truitt, 2022)

- A Psychosensory Intervention
- Touch has been shown to reduce heart rate and blood pressure, lowers norepinephrine and cortisol, increases oxytocin and positive emotions, increases GABA and Serotonin
- Touch palms
- Hands to your forehead and smooth across the top of your face from the center out to your temples.
- Hands to your cheeks and move them gently out toward your ears.
- Moving hands downward from shoulders to elbows

THE PHASIC MODEL OF TRAUMA TREATMENT (JUDITH HERMAN)

- **Phase I**: Establish stability and safety by developing your resources.
- **Phase II**: Process traumatic material in a well-paced, regulated manner
- **Phase III**: Re-Integration of new experiences into identity and relationships
- **Phase IV**: Justice, reparations, recognition, and rehabilitation for offenders
THE HERO~HEROINE'S JOURNEY

- **Innocence**: The story begins with a phase of freedom and naivety.
- **The Call**: This period of ease is disrupted by loss or trauma. This is the call to enter the hero’s journey.
- **Urge to Reject the Call**: Fear leads you to rely upon avoidance, addictions, isolation, disconnection from yourself.
- **Gathering your Resources**: You gather resources, mentors, and allies to face your fears and pain.
- **Crossing the Threshold**: You commit to your healing path.

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THE HERO~HEROINE'S JOURNEY

- **Descent into the Underworld—the cave you fear to enter**: The courageous inner work of trauma recovery that allows you to retrieve the treasure (strength, courage, wisdom)
- **The Return**: Eventually you come full circle—back to your community with newly discovered gifts and capacities.
- **Master of two worlds**: You maintain a connection to your inner, spiritual self while compassionately relating the complexity of this world we share.
- **Self-Actualization & Self-Transcendence**: Self-leadership allows you to become a leader, healer, or guide for others.
RESILIENCE AND A SEARCH FOR MEANING

- Trauma asks us to come to terms with the lack of reason or overpowering senselessness that surrounds acts of violence or abuse
- We are not saying that “all things happen for a reason”
- Meaning is the result of actively committing to the task of working through despair to find hope for the future.

ATTENDING TO THE PAST

- The goal is to restructure the role that the trauma has played in your life and, in turn, lessen its emotional impact.
- With support, you can process the emotions, sensations, memories, and beliefs associated with adverse or challenging events.
- By working through your past, you free yourself from the negative beliefs, emotions, and somatic experiences associated with these events.
- You can learn to trust that trust that releasing these remnants of your painful past allows for new growth.
YOUR HERO OR HEROINE’S JOURNEY

- What events in your life have initiated your hero’s journey?
- Have you noticed a desire to reject the call?
- What resources or supports have helped you to face this challenge?
- What additional resources do you need to help you navigate the challenge?
- Are you aware of any strengths or positive changes that you have discovered as a result of your commitment to your healing journey?
- How has adversity influenced your sense of purpose?
- What gifts do you have to share with the world as a result of the difficult experiences of your life?

COHERENCE (DAN SIEGEL)

- A Coherent Self: Ability to talk about how the past has shaped your behaviors, beliefs, and relationships. Ability to make meaningful connections out of the complexity of diverse life experiences. Helps you hold dichotomies, polarities, conflict, disappoints, and contradictions.
- An “Oscillating Narrative”: an inclusive narrative about the ups and downs of your history is linked to greater resilience to stress
- Mindful reflection: allows you to take responsibility for your life now so that you can take an active part in creating your future.
  - Adversity is part of the story, not the whole story
  - Adversity is part of the story, but it doesn’t determine the rest of the story
RESILIENCE & POST-TRAUMATIC GROWTH

**The Process**
- Work through vulnerable emotions with Social Support
- Challenge negative thought beliefs & explore meaning through the cultivation of a coherent narrative
- Cultivate the Resources you need to handle adversity
- Embodiment & Empowerment
- Transform Learned Helplessness into Learned Optimism

**The Outcome**
- Greater sense of Choice in the Here and Now
- Sense of freedom “I am no longer defined by the past”
- Capacity to live in accept the world as it is and take part in creating meaningful change for an improved future
- “This happened to me, it is over now. I am strong and capable of handling challenge with support.”

POST-TRAUMATIC GROWTH
- Discovered our strengths
- Enhanced interpersonal relationships
- Increased willingness to ask for and accept help
- Increased willingness to be vulnerable
- Increased recognition of social supports that had previously been ignored.
- Increased appreciation of life
- Increased ability to “take it easy”
- Newly found interests or passions
- Spiritual discoveries
Over time, you take the many threads of your life experiences and weave them into a single fabric. You weave in your strengths and your struggles. You begin to notice patterns and themes. Most importantly, you recognize yourself as the weaver. You learn that you can continue to integrate new threads at any time, for you are an active participant in the ongoing creation of your life story. Over time, the fabric that you create out of your life experiences begins to feel increasingly integrated and whole. Now your life story can help you identify new possibilities for your future. You might even discover that your fabric is inextricably woven into the fabric of all life. (Schwartz, The Post Traumatic Growth Guidebook)

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THE WAY IT IS BY LYNN UNGAR

One morning you might wake up to realize that the knot in your stomach had loosened itself and slipped away, and that the pit of unfulfilled longing in your heart had gradually, and without your really noticing, been filled in—patched like a pothole, not quite the same as it was, but good enough. And in that moment it might occur to you that your life, though not the way you planned it, and maybe not even entirely the way you wanted it, is nonetheless—persistently, abundantly, miraculously—exactly the way it is.
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