Stress v. Trauma

**Stress** is described as the physiological or psychological response to internal or external stressors. Stress involves changes affecting nearly every system of the body, influencing how people feel and behave.¹

**Trauma** is an emotional response to a terrible event like an accident, rape or natural disaster. Immediately after the event, shock and denial are typical. Longer term reactions include unpredictable emotions, flashbacks, strained relationships and even physical symptoms like headaches or nausea.²

Trauma is in the eye of the beholder. It depends on how the person perceives the experience and how their body processes the traumatic event.

When a person experiences stress, a stress response - the “fight flight or flee” response - is triggered in the body. This hormonal response is essential to our survival, as it enables us to react quickly to life-threatening events. It is a very important part of our survival process and typically resolves normally after dealing with the stressor.

¹ [https://www.apa.org/topics/trauma/](https://www.apa.org/topics/trauma/)
² [https://www.apa.org/topics/trauma/](https://www.apa.org/topics/trauma/)
You can read more about the stress response here:
https://www.health.harvard.edu/staying-healthy/understanding-the-stress-response

When stress turns into trauma, though, the stress response can be massive or prolonged. The trauma can be stored in their brain, specifically in the brain’s neural pathways. Depending on the way the person’s brain processes the traumatic event, the person’s reaction could be short or long-term. Post traumatic stress disorder (PTSD)

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can develop in some cases (7% to 8% of Americans)\(^4\) where the traumatic event is not processed fully. Symptoms of PTSD can include flashbacks, nightmares, emotional distress, and more, and can last for years without proper treatment.

Complex PTSD can develop when someone experiences trauma upon trauma upon trauma, or exposure to a prolonged trauma. The Coronavirus Pandemic is a big T trauma. Secondary issues - job loss/changes, financial stressors, increased/changing responsibilities at home, quarantining/inability to leave the house - can also be perceived as trauma - big or little t - depending on the severity of the issue and how it’s perceived. Complicating matters, depending on a person’s trauma history, the pandemic and pandemic-related issues could be triggering a person’s past trauma history.

A “trigger” is something that reminds the traumatized person of the traumatic event. For example, let’s say a person’s trauma history includes a terrible car accident. The person

\(^4\) [https://www.ptsd.va.gov/public/ptsd-overview/basics/how-common-is-ptsd.asp](https://www.ptsd.va.gov/public/ptsd-overview/basics/how-common-is-ptsd.asp)

\(^5\) [https://www.pesi.com/blog/details/1635/this-is-your-brain-on-trauma](https://www.pesi.com/blog/details/1635/this-is-your-brain-on-trauma)
may fully recover, but because of how trauma is stored in the brain, the “echo” of the trauma is always present. Even 20 years later, a near collision or a blare of a car horn could be perceived by the person’s brain as a reminder of the traumatic event - and “trigger” an emotional response.

Or if a person grew up with food insecurity, the pandemic and the resulting inability to safely get out of the house to get food could serve as a trigger.

People with trauma histories have differently wired nervous systems. Your nervous system is as unique as you are, and your experiences shape it throughout your lifetime. People who experience traumatic events typically have a “faster reacting” nervous system, due to how they had to react to the event. Surviving a trauma usually involves the person having to be hypervigilant and sometimes, the nervous system gets “stuck” in a hypervigilant state. If the person is born with a naturally “fast moving” nervous system, you can imagine how this could compound things. Depending on how the trauma is processed, if and when the person receives the appropriate therapy, a person could experience the effects of trauma for much of their lifetime.

You can read more about trauma & complex trauma here:

https://pivotaleducation.com/hidden-trainer-area/training-online-resources/trauma-brain-limbic-system/

https://www.apa.org/topics/trauma/

**Mindfulness Meditation and Trauma**

Mindfulness is paying attention, in a particular way, to the present moment, with curiosity, kindness, and non-judgment. It is not a technique, and it is not a tool; it is more like a pair of glasses that you put on to see the world differently. With the recent explosion in the mindfulness movement, we have come to think of mindfulness as a universal solution, especially in times of stress and overwhelm. Apps like Calm can be helpful, and have encouraged mindfulness to be accessible to all. While there are a number of mindfulness techniques that can be helpful to most people, there can be limitations.

I would not newly prescribe mindfulness, for example, to people with a trauma history. Especially now, in the midst of an active trauma. A person with a trauma history, who has never meditated/Practice mindfulness before, when asked to close her eyes and go

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inside, runs the risk of being overwhelmed by their internal experience. Memories that have been long suppressed may come to the surface, and create more harm than good. The person could re-traumatize themselves, sending them back into a dangerous cycle. You can read more about this here: 

https://www.thescienceofpsychotherapy.com/is-mindfulness-safe-for-trauma-survivors

**Three ways to help your people:**

1. Practice mindful listening & talking
2. Acknowledge that everyone is going to react to this differently - look at your people through a trauma lens
3. Acknowledge and honor your own experience

**Some universally acceptable, research-based mindfulness techniques:**

2 feet one breath
Connect with one of your feet by wiggling your toes, feeling your feet in your shoes, or sending energy down your leg into your foot. Then do the same with the other foot. Next, take one breath, focusing on the physical sensations of the breath in your body.

3Ps - This can be helpful if you are in and out of doors all day, as it was originally developed for doctors and nurses transitioning from patient room to patient room. But you can choose any transition point as the anchor.
- Pause - Stop what you’re doing.
- Be Present - Take a breath, notice the feeling and sensation of your breath in your body. notice what emotions could be present.
- Proceed - Continue, Feeling grounded and proceeding with connection to self.

STOP - This exercise can be helpful if you repeatedly find yourself going down a path of negative thoughts.
- S - Stop
- T - Take a Breath
- O - Observe
- P - Proceed

Example: you are in the middle of a phone conversation. The topic is challenging. You suddenly notice that you are upset (this is the moment of STOP, as you are suddenly aware to the truth of this moment.) You take a deliberate breath, or two or three, which...
gives you a little bit of space or distance from the direct feeling of upset. Then you pay attention, observe, what is going on inside of you: you feel that your shoulders are tight and your jaw clenched. You feel a little hot and you feel like yelling or saying something mean. With this information in the created space you can now decide how to proceed. STOP can create the small gap we need in order to make a decision instead of reacting mindlessly.  

Mindful Listening - This practice can be very helpful when managing a team of people or a staff. So often we are on autopilot, thinking about what we are going to say next instead of focusing on the speaker. Really focusing on the speaker helps people to feel seen and heard, creating a felt sense of understanding.

How to Practice Mindful Listening: HEAR
H - Halt — Halt whatever you are doing and offer your full attention.
E - Enjoy — Enjoy a breath as you choose to receive whatever is being communicated to you—wanted or unwanted.
A - Ask — Ask yourself if you really know what they mean and if you don’t, ask for clarification. Instead of making assumptions, bring openness and curiosity to the interaction. You might be surprised at what you discover.
R - Reflect — Reflect back to them what you heard. This tells them that you were really listening.

Building Your Emotional Resilience Muscle

https://www.managementcenter.org/article/building-your-emotional-resilience-muscle-%f0%9f%92%aa%f0%9f%8f%bd/

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6 http://www.sharingmindfulness.com/s-t-o-p-handout/

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