

TRAUMA VIDYA

- Trauma Vidya is a non-profit organization formed after the 2004 tsunami to help bring relief to those traumatized all over the world, through education, training, treatment and research.
- WWW.TRAUMAVIDYA.ORG

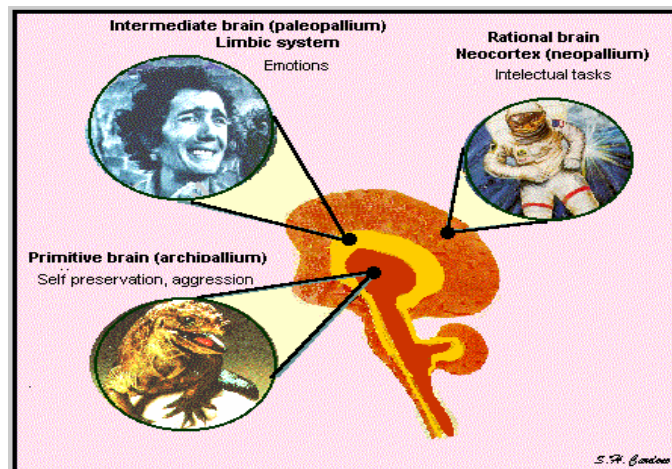
What is Trauma Vidya's Approach

1. Helping trauma survivors to heal themselves of trauma symptoms by teaching them how to mobilize the inherent self-healing and self-correcting tendencies in the human brain and body.
2. In most instances, effective treatment of symptoms of post-traumatic stress does not require neither prolonged care nor specialists, contrary to conventional wisdom in mental health circles.

Reasons for sub-optimal treatment of post-traumatic stress symptoms

- Extension of traditional mental health approaches that focus on meanings, feelings, memories, and behaviors to treating PTSD symptoms in disaster as well as non-disaster settings.
- Lack of understanding that PTSD symptoms are more often indicative of lack of regulation in the self-regulating survival physiology of the brain and body and that their effective treatment requires a greater focus on survival affects.

The TRIUNE BRAIN



Triune brain

- **Upper brain: Self awareness, language, memory, thinking, meaning making**
 - **Mid brain: emotions, feelings**
 - **Lower brain: regulates organs, nervous system, and life in the body**
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The Triune Brain

The Reptilian Brain-Survival

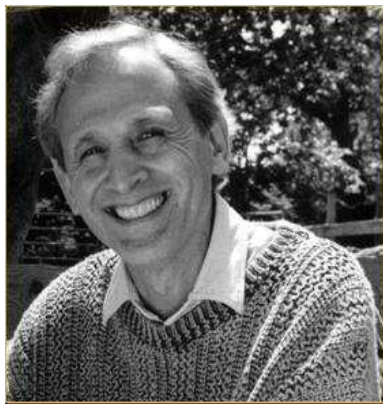
- **Behaviors of the Reptilian Brain are automatic and involuntary.**
- **They are resistant to change because we override these impulses with our neocortex.**
- **The Reptilian Brain plays a central role in resolving trauma**



What is behind Trauma Vidya's approach?

- Newer scientific understanding of the neurophysiology of trauma and of its inherent ability to self-heal.
- Evidence of clinical effectiveness of a trauma treatment model (SE) that utilizes such understanding to treat a variety of traumas in short-term and long-term clinical settings in different countries.
- Effort to modify an approach that is taught to trauma professionals in over fifteen countries to develop and test a simple, short-term, and self-help oriented trauma treatment approach in post-disaster settings in Tamil Nadu, Thailand, and the U.S.

SOMATIC EXPERIENCING



- Peter Levine, Ph.D. is the originator and developer of S.E.
- He has doctorates in both Medical Biophysics and Psychology
- He has studied stress and trauma for over thirty years and authored the book *Waking the Tiger-Healing Trauma*
- The FHE offers S.E. trauma trainings worldwide
- www.traumahealing.com

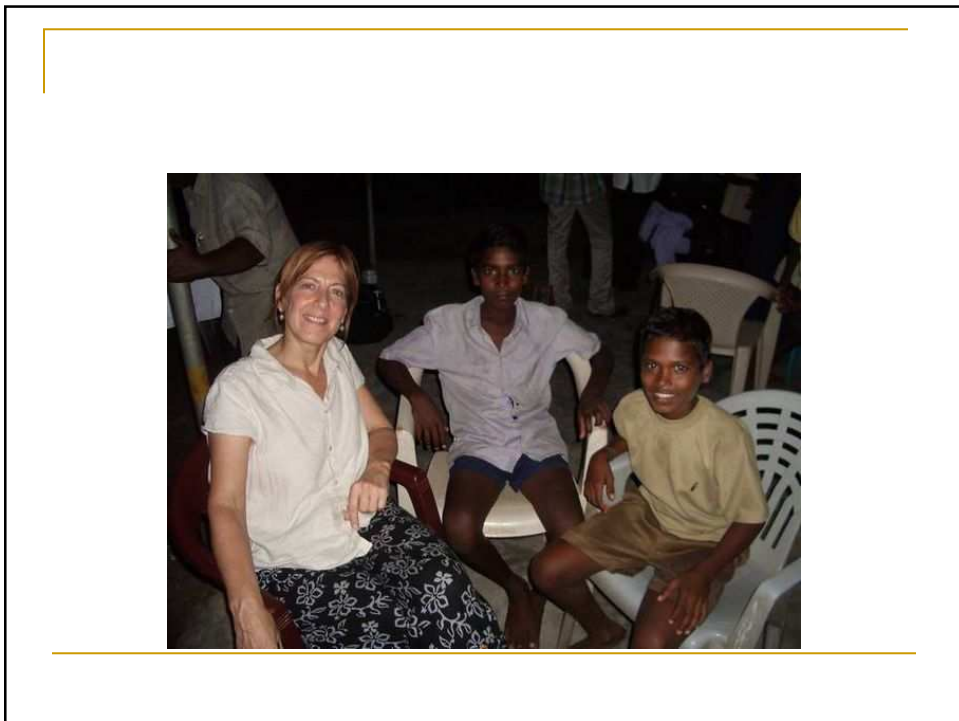
Survival Affects in Trauma Symptoms

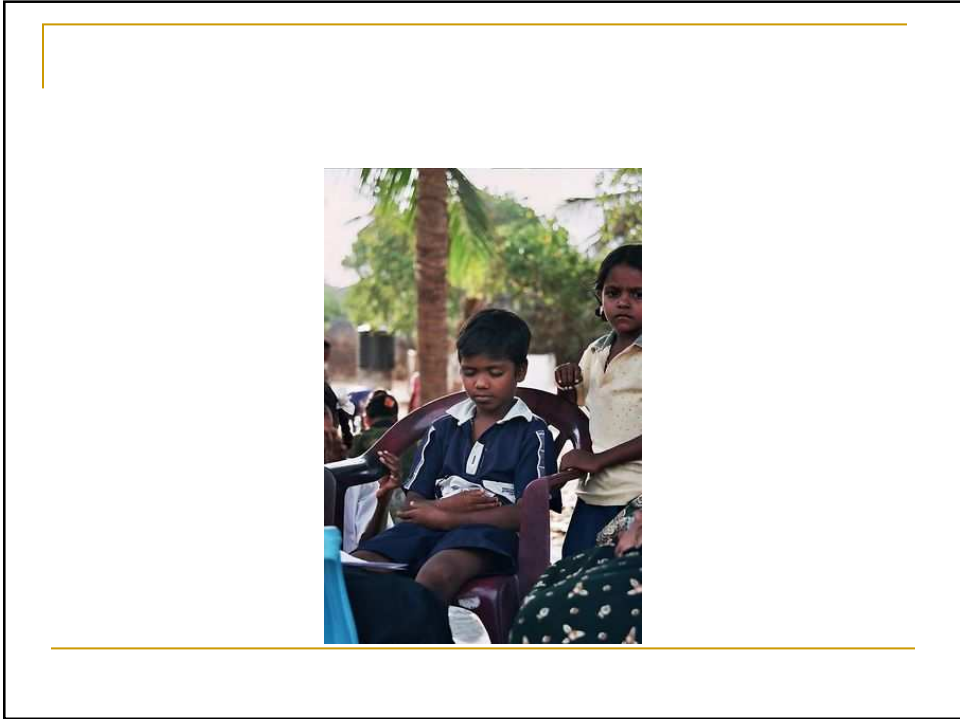
- Constriction/flaccidity in body/brain tissue
- Hyper or hypo arousal in autonomic nervous system
- Terror or its complete absence
- Persistent states of extreme stress or dysregulation
- Under-active or overactive or disorganized orienting, fight, flight, freeze, and dissociation responses
- Aggression or its complete absence

Trauma Vidya's work in Tamil Nadu among tsunami survivors

- Over 200 trauma survivors treated/trained in June/July 2005 in Vilupuram, Cuddalore and Nagapattinam districts in one-hour sessions.
- Over 200 trauma survivors treated/trained in February 2006 in Nagapattinam and Tarangampadi taluks in one-hour sessions.
- Over 80 personnel from thirty NGO organizations and academic institutions trained for six days in the approach in Chennai in September 2006.
- Three-week trip to Tamil Nadu in February 2007 to treat/train tsunami survivors still with PTSD symptoms and to train more NGO personnel in the approach this time in four days.











Research

- June/July 2005:

In over 200 people treated/trained, 73% of 463 presenting symptoms treated remained significantly improved four weeks after the treatments, with 27% somewhat better, 28% a lot better, and 18% completely resolved. Similar results observed on indicators of dimensions of traumatic stress (arousal, intrusion, and avoidance). Preliminary analysis of data from eight-month follow-up under analysis shows enduring benefits of treatments/trainings.

Research

- February 2006:

Preliminary analysis of data from four-week and eight-month follow-up from treatment group of over 200 subjects and control group of over 60 subjects is showing good treatment outcomes in treatment group over control group on dimensions of traumatic stress (arousal, intrusion, and avoidance).

Conclusions

- Symptoms of traumatic stress in most instances can be treated with a simple, short-term, self-help oriented approach with the focus on helping trauma survivors to mobilize self-healing and self-correcting tendencies in their own nervous system which is most involved in traumatic stress.
- The approach is applicable to a wide variety of traumas such as domestic violence, terrorist attacks, and automobile accidents and to situations that cause extraordinary stress which further compromises immune system in situations such as AIDS and extra-ordinary loss.

Conclusions

- This evidence-based approach has much to offer in countries such as India where the availability of mental health professionals is severely limited to provide long-term care by specialists for those with traumatic stress symptoms and has much to offer to shorten the suffering of traumatic stress in traditional mental health settings.
- NGOs offering psycho-social services in post-disaster as well as other settings to trauma survivors can be trained in four days to incorporate this approach into their psycho-social services to offer first-aid, prevention, and treatment/training in relation to traumatic stress in the populations served.
- NGOs interested in such trainings can contact Trauma Vidya through www.traumavidya.org.

