

# WHAT IS TRAUMA?

- **TRAUMA IS “AN OVERWHELMING EVENT”  
(VAN DER KOLK,1987).**
- **OUTSIDE THE RANGE OF THE USUAL - DISTRESSFUL TO ANYONE (DSM-IV)**
- **CENTRAL IS A TERROR OF DEATH**
- **THE PSYCHE BREAKS APART.**
- **ORDINARY WAYS OF COPING ARE USELESS - TRUST IN SELF IS LOST (TERR 1990)**

# **EXTERNAL WORLD CHANGES FOR MOTHER**

- **WEIRD WARD ENVIRONMENT - ESTRANGED**
- **SIGHT OF HER ILL INFANT - TERROR OF DEATH**
- **CARED FOR BY OTHERS - LOSS OF POWER**
- **PUBLIC EXPOSURE - LOSS OF PRIVACY**
- **HUMILIATING- LOSS OF INTERACTION AND PHYSICAL CONTACT**
- **LACK OF INFANT RESPONSIVENESS - NO SENSE OF REWARD OR VALUE AS A MOTHER**

# **EXTERNAL WORLD CHANGES FOR THE FATHER**

- **WIFE AND BABY ILL**
- **NO ONE FOCUSES ON HIS EMOTIONS AND EXPERIENCES - NOT EVEN HIMSELF!**
- **MANAGEMENT ROLE WITH STAFF**
- **EXTERNAL CARETAKER - HAS TO WORK**
- **WIFE NOT AVAILABLE TO CARE FOR HIM**

# **AUTISTIC SPACE IN TRAUMA**

- **EVENTS ARE STRIPPED OF THEIR EMOTIONAL MEANING**
- **MOTHER'S EXPERIENCE OF HERSELF AS MOTHER IS STRIPPED OF EMOTIONAL MEANING**
- **HER EXPERIENCE OF HER BABY IS STRIPPED OF EMOTIONAL MEANING**
- **SHE IS IN A DEAD, AUTISTIC-LIKE SPACE WHICH DESTROYS LINKS WITH HERSELF AS MOTHER AND WITH HER BABY AT THIS CRUCIAL TIME**

# PHYSIOLOGY IN TRAUMA

- **EXPERIENCES ARE PROCESSED IN THE PREFRONTAL SYSTEM OF THE BRAIN**
- **IN TRAUMA, THE HIGHLY AROUSED AMYGDALA CLOSES DOWN**
- **THE HIPPOCAMPUS STOPS FUNCTIONING**
- **AS A RESULT, THERE IS NO STORING OF MEMORY**
- **IT BECOMES A BODILY EVENT EXPERIENCED AS “THE THING IN ITSELF”, WITH ITS ORIGINAL DREAD**

# **TRAUMA IS A PSYCHIC WOUND**

- **VIOLENT INTRUSION CAUSES EXCESSIVE PSYCHIC PAIN FLOODING THE EGO**
- **THERE IS A TERROR OF DEATH**
- **“A VIOLENT EXPLOSION ACCOMPANIED BY IMMENSE PSYCHOTIC FEAR OR PANIC” (BION 1977)**
- **THE DEVASTATION CREATES AN AUTISTIC AREA IN THE PSYCHE**

# **TRAUMA AND INTERNAL OBJECTS**

- **NORMAL TENSION BETWEEN PROTECTIVE AND PERSECUTORY INTERNAL OBJECTS IS FROZEN**
- **THE TERROR IS THAT BAD OBJECTS WILL TRIUMPH OVER GOOD**
- **SEVERE DEPRESSION ENSUES, BELIEF IN SELF IS LOST**

# THINKING AND TRAUMA

- **NO PROCESSING - NO SYMBOLISATION,  
NO MODEL, NO STORAGE**
- **ARCHAIC REPRESSION MEANS THE  
EXPERIENCE CANNOT BE THOUGHT, ONLY  
REENACTED**
- **DISSOCIATION OCCURS**
- **EXPECTATIONS OF THE NORMAL ARE  
SHATTERED**



# **INTERNAL HOLDING AND TRAUMA**

- **IN PSYCHIC PROCESSES, OPPOSITES ARE TOLERATED AND NEUTRALISED**
- **IN TRAUMA, SPLITTING REMAINS**
- **THERE IS NO HOLDING, NO THINKING**
- **THE MOTHER CANNOT HOLD THE BABY IN HER MIND OR THINK ABOUT IT DURING THIS CRUCIAL TIME**

# SELF IMAGE AND TRAUMA

- **SPLITTING - GOOD AND BAD OBJECTS, NO NEUTRALISING**
- **NO CONTINUOUS SENSE OF SELF**
- **INTERNAL NARRATOR LOST**
- **SENSE OF HISTORY LOST**
- **LITTLE SENSE OF CAUSE AND EFFECT - JUDGEMENT IMPAIRED**
- **SHAME, BLAME AND DEGREE OF SELF HATRED**

# **(1) CARE OF THE TRAUMATISED PARENTS**

- **THE NEED FOR “ANOTHER” TO ABSORB SHOCK AND HOLD THE EMOTIONAL OVERLOAD (WARD, FAMILY, COMMUNITY)**
- **PREMATURITY RUPTURES CONTINUITY FROM PREGNANCY TO BIRTH. STAFF NEEDED TO FACILITATE REUNION BETWEEN MOTHER AND BABY**
- **PROFESSIONAL STAFF TO GIVE PROFESSIONAL HELP TO THE MOTHER TO BOND WITH HER INFANT IN THE HUMIDICRIB**
- **INDIVIDUAL PROFESSIONAL THERAPY. PROFESSIONAL HOLDING OF THE AUTISTIC SPACE ALLOWS THE PRIMITIVE EMOTIONS BEHIND THE SPACE TO BE EXPERIENCED AND PROCESSED**

## **(2) CARE OF THE TRAUMATISED PARENTS**

- **THE ESTABLISHMENT OF A PARTNERSHIP BETWEEN THE NURSE CARING FOR THE BABY AND THE MOTHER SO THAT SHE WILL FEEL AN ESSENTIAL PART OF THE MOTHER/BABY UNIT (MOTHER/FATHER/BABY UNIT)**
- **WARD AS A THERAPEUTIC COMMUNITY. ALL PARENTS WERE HELPED BY CARING DOCTORS AND NURSES. ALL PARENTS WERE HELPED AS A RESULT OF CONTACT WITH THEIR INFANT**
- **ALL PARENTS NEEDED HELP ON RETURNING HOME AND FOUND THE HOME VISITING OF THE UNIT NURSE INVALUABLE**