

Trauma Hyperarousal

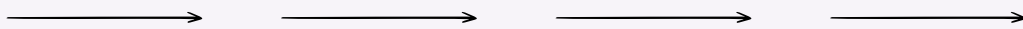
This first image illustrates that, initially, those who are highly impacted by a traumatic event are often in a state of intrusion. The memories, frozen pictures, sounds and other stimuli from the event are interfering with their conscious minds much of the time. During this time people are often very willing to talk about it.

INTRUSION



Over the next couple of weeks, the mind works hard to stuff the traumatic memory into a silo and keep a lid on it. Similar to repression. People now have intrusive memories in response to outside stimuli, such as hearing a siren or a loud noise. That flips them back into intrusion, but they become able to get back to constriction more quickly with practice. Do not confuse this with healing!

INTRUSION



CONSTRICTION

No matter where one is on the continuum of intrusion and constriction, the residual biochemistry of trauma is still present in the body. People likely have higher levels of adrenaline and other biochemistry that leaves them vulnerable to being on edge, easily provoked and irritable.

HYPERAROUSAL

INTRUSION



CONSTRICTION