

Trauma and recovery from addiction – exploration of core principles of therapeutic transformation and integration

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The understanding of the aetiological complexity of addiction has evolved to recognise the correlation between adverse childhood and traumatic experiences and the complex implicit patterning of addictive behaviours manifesting as defensive adaptations to mitigate the intensity of suffering where traumatic experiences remain unresolved or are chronic in nature.

Therapeutic disciplines of trauma-specific treatment and the increasing awareness of the need to incorporate trauma-informed care as an integral part of recovery-orientated treatment programmes are also undergoing evolutionary processes of understanding, development and refinement, mirrored by the expansion of knowledge in the field of neuroscience.

Research findings from 2004 onwards have identified and described a core neurological process defined as memory reconsolidation, whereby emotional learnings from the past may be recognised and altered within specified timeframes that have been confirmed by research and then applied within the practical framework of psychotherapeutic practice. The elucidation of the basic steps of this core process provides for the potential transformation of old, and integration of new, emotional learning experiences. This step-wise process can then be applied to a range of therapeutic approaches that have been created and practised successfully as a powerful antidote to the complex spectrum of trauma-related symptomatology, including addictive behaviours.

Exploration of the research findings highlighting the step-by-step process of what has been defined as therapeutic reconsolidation process (TRP) – as described by Bruce Ecker, Robin Ticic and Laurel Hulley – will be discussed. This process may then function as a core component of trauma-informed and trauma-specific therapy. It may also be incorporated into aspects of addiction recovery treatment programmes to supplement recognised evidence-based counteractive strategies of care, such as pharmacological agents and CBT, which have proven to be very useful in the management of trauma-related symptoms of distress.

However, counteractive strategies alone do not necessarily promote transformation or release of emotionally-charged implicit patterns of response to challenging life situations, disruptive relationships and to a fragmented sense of self. Such emotional learning patterns may fuel the phenomena of trauma re-enactment and consequential relapse into addiction behaviour.

The TRP has contributed to a revolution in the neuroscientific core understanding of trauma and memory which has dissolved the long held 20th century belief that early emotionally-charged implicit programming is largely indelible. It offers a blueprint for transformation of past, and integration of new core perspectives on self and life.

Presenting author

Robina is a medical practitioner with clinical experience in women's health, general practice, mental health/psychiatry. For the past 15 years, she has been working in the field of addiction medicine, with particular interest in trauma literature, Certification in Trauma Studies, and is completing formal training in Somatic Experiencing trauma therapy.