

by Michael Allen



Photo by [familymwr](#) 

Many of you today have heard about trauma, etc.. In fact most might say it's almost overused. As a society however we have to embrace what is going on around us and address it appropriately. Personally I would say it is a global epidemic and since the [scars are invisible](#) we have to expand our perception about this phenomenon.

So what is "[Trauma](#)"? Webster's defines it as:

**trauma** [noun](#)

**trau·ma** | \ 'trō-mə also 'traü-\

*plural* **traumas** also **traumata** \ 'trō-mə-tə also 'traü-\

## **Definition of *trauma***

**1a** : an injury (such as a wound) to living tissue caused by an extrinsic agent

**b** : a disordered psychic or behavioral state resulting from severe mental or emotional stress or physical injury

**c** : an emotional upset the personal *trauma* of an executive who is not living up to his own expectations— Karen W. Arenson

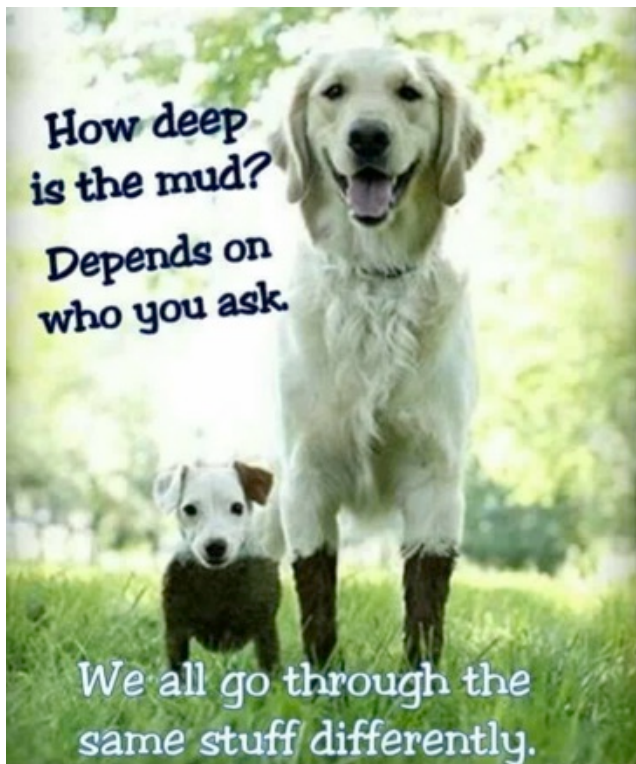
**2** : an agent, force, or mechanism that causes trauma

I have been in Behavioral Health for over 18 years now in many capacities; BHT, Case Manager, Clinical Coordinator and High Conflict Divorce Coach. I served on the Trauma Informed Care Committee of my last Behavioral Health Agency and it really helped shape my perspective. When a person is trauma informed it shifts your perspective from “What is wrong with you?” to “What Happened to You?”

That opens up the door to conversations on how to fix the problem and move forward.

Mental Health is just now in the last 5 years only scratching the surface of what trauma is, how it affects people and how to treat it. What I learned while studying [TIC \(Trauma Informed Care\)](#) was that according to [SAMHSA](#) (Substance Abuse and Mental Health Administration) [90% of all mental illness is directly related to childhood trauma](#). This number is kind of hard to ignore.

Now let’s take a look at trauma. The tricky thing about trauma is that it is relative, meaning one person’s experience could be completely different from another’s. When discussing trauma my supervisor once stated “One person’s Hangnail could be another’s end stage cancer” ~ Ann Cone-Sevi LCSW (Licensed Clinical Social Worker)



This always resonates with me. So from that perspective, who are we as friends, family, mental health professionals, judges, lawyers to invalidate someone's experience with what they consider traumatic? We can't because we are not in their body or mind we don't know how it affected them.

Mental Health is just now beginning to understand the importance of [integrated care](#)....mental and physical health working together. Mental Health is just beginning to understand that the mind and the body are connected, we need to treat both together. Gone are the days of "Oh sorry we don't treat that that's a medical problem" or vice versa. Mental Health is just now starting to emerge from the dark ages and state "Hey we need to take a look at this, these could be related". [Dr Nadine Burke Harris](#) very clearly describes the link to childhood adversity and physical health problems. 7 out of 10 fatal health problems are linked to childhood trauma.(see hyperlink)

Trauma can affect us on a cellular level. That means it can affect us so deeply we carry it to our core which in turn affects our Physical Health and on a deeper level we can carry it into our DNA. Trauma then gets passed down through generations. Grandma or Grandpa was in a car accident that was horrible....son or daughter feels anxiety around cars after seeing their parents anxiety and so on down the line.

Let's discuss PTSD vs CPTSD. PTSD which we've all heard about it not only something that happens to Veterans after a war (formerly known as "Shell Shock"). PTSD is usually a singular traumatic incident like a car accident, rape, assault, robbery, etc. CPTSD however is different. [COMPLEX Post Traumatic Stress Disorder](#) is what I like to call a "sandpaper trauma". It is essentially a rubbing trauma that happens over and over again and doesn't stop. For a parent struggling with "Parental Alienation" or someone fighting to stay in their children's lives through a high conflict divorce. Every day they wake up without their children, or have to go to another court hearing that goes nowhere, or hear their child spew venom at them is a "Sandpaper or Complex" trauma. Also for the children in this dynamic every day they have to hear the pathogenic parent spew venom at the other parent or convince the child they have to hate the other parent in order to "prove their love and loyalty" is also a complex trauma for the child.



**MOM**



**DAD**

Children naturally just want to love both parents. Each parent contributed 23 chromosomes to that child and when we study attachment theory ([Bowlby](#), Minuchin, Beck) it is so important to have both parent's contribute to the child development. Dad's have a special role, they teach confidence, strength, independence and love (a different form of love than mom). Mother's contribute gentleness, tenderness, kindness and also love (different than dad but equally important).



Now how does this tie to trauma and “Parental Alienation” or “ Pathogenic Parenting”? Most people who alienate or are high conflict personalities meet the criteria for what is called a [personality disorder in the cluster B category](#) (Borderline, Narcissistic, Anti Social, etc). Many people today will throw around those terms like candy. Let’s take a look at where these Personality disorders are rooted in. I’ll give you one guess.....Trauma. So along those lines we see a problem rooted in trauma now we can shift our perspective into how do we solve it? There is word in the mental health community that the next update to the DSM will be removing Axis II (or personality disorders) and replacing it with a more trauma related diagnosis. What does this mean? Diagnoses’ like Borderline Personality Disorder or Narcissistic Personality disorder carry a huge stigma may be going away. If someone told you that you were a Narcissist or a Borderline it would carry a lot of shame or anger and you’d probably reject that and not be willing to look at it or seek treatment.

Same scenario ....a person may absolutely meet all criteria for NPD, BPD or ASPD but instead of that label you were told.....I understand you suffered a lot of trauma. Let’s see how we can help you with that. Wouldn’t you be more apt to say “yes.....I have been through trauma”. Huge!

Parent’s who alienate their kids from a healthy loving fit parent are reacting to trauma. When the divorce process starts the Borderline Type personality fears abandonment (through childhood trauma...usually some type of sexual abuse) and will attempt to take the children to desperately avoid the perceived abandonment. The Narcissistic parent was raised by a similar type and used as a pawn in the family dynamic growing up. The child of a Narcissist is usually considered an extension of the parent and their own thoughts, feelings, boundaries and critical thinking are eroded. When the divorce is initiated the NPD parent is furious, angry and has the narrative “ [How dare you leave someone as great as me, I’m going to take that with what you most love your children](#)” ~ Dr. Craig Childress Testimony Pennsylvania House Children and Youth Committee.

How do we solve this trauma and break the family pattern's that are passed down through generations? It starts with an understanding of the patterns, behavior and how to shift your mindset. Even today most mental health professionals will cringe when they Borderline personality disorder in a client's chart. They know they can be "Manipulative", "Angry" , "Splitting" and very difficult to work with.

Here is my perspective shift.....we are no long afraid of this diagnosis but embrace it and understand that it is rooted in trauma. I'll give an example....at one of my agencies I lead a behavioral health team. We had a very difficult client, this member displayed all the tendencies of BPD. This member was in the psychiatric hospital more than they were out for suicidal ideations. This member was not diagnosed with BPD but I spoke to the BHMP (Behavioral Health Medical Professional) and convinced them to add the diagnosis. I worked with my team to shift the idea that this member was bad to "let's look at why they act this way.....they were traumatized...how do we help them?" One incident I walked in and this member was blowing up in the team room, yelling and screaming and the whole team including the doctor were trying to stabilize the client. I simply remained calm and directed the client to talk to me privately. The client shared they simply wanted a referral to a day program, I kept my energy calm and listened and agreed to the referral and asked if they were willing to start DBT ([Dialectical Behavioral Therapy](#)) counseling (the standard treatment for Borderline PD). I then helped the member learn about [mindfulness exercises](#) and how to utilize them when anxiety began to creep in. I am happy to say it worked. The member began to reengage with the team, began attending DBT and had a record month and a half without being hospitalized. This all began with the team mindset of " I know you are going through a hard time, but no matter what we are not abandoning you". That mindset changed the way the member responded to treatment and they began to move forward.

Here is how this related to fit loving parent's fighting to stay in their children's lives. Once you understand that your former spouse is dealing with some type of childhood trauma you as the healthy parent have the ability to react with empathy, kindness and pure love for your child. Your ex spouse is simply reacting to unresolved childhood trauma so you have to think.....how do I move around this for my child?

I can speak from experience that once I understood my ex spouse's childhood attachment trauma (thanks to the works of Dr. Craig Childress) I could respond appropriately. It was not easy but once you understand it you can shift the dynamic. What Dr. Craig Childress has done today is he has used established constructs of attachment based on Bolwby, Minuchin and Beck. What is different is he is not focusing on the actions of the traumatized ex spouse but the trauma reenactment that is emerging in the child. He has created a [rating scale](#)

(Childress, 2015) to track this and prove that what is happening is actually [child psychological abuse](#) to turn a child against another parent. He has given therapist the tool to diagnose [child psychological abuse](#) in high conflict divorce cases.

The more we become aware that is not natural to reject a parent the more we can solve this problem in mental health. A child will naturally attempt to bond to a parent....even if that parent is abusive. During high conflict cases an alienating parent will claim the other spouse is abuse (true or not), but when you think about it rationally.....say you have an abusive parent. This parent is so obviously abusive, they even put their cigarettes out on the child's skin. The police are called, see the obvious abuse and take this parent to jail. What is a child's natural reaction? "No! Don't take my Daddy (or Mommy) away!" even in the presence of severe abuse. A child's natural DNA drives them to bond to both parents, even if one or both are abusive. For a child to reject a parent ...that takes a third party influence, it takes psychological manipulation and control of another trusted caregiver.

Mental Health is still in the dark ages. However there is hope. Everything in mental health moves at a snail's pace but they are moving forward. The more we understand this trauma pattern the easier it will be to break it. What can you do as a fit loving parent now aware? You have a responsibility to react to everything with ultimate love for your child. You have to shift your perspective from "What the hell is wrong with you" to "What happened to you and how do we fix it".

During the process of divorce I had to make sure that I put on my own oxygen mask first. Meaning...I had to make sure I was grounded and stable to not only fight for our son but make sure I wasn't succumbing to my own trauma. Throughout the process I saw a therapist who performed [EMDR \(Eye Movement Desensitization and Reprocessing\)](#). EMDR is a very effective form of trauma therapy. Long story short after [EMDR](#) all my triggering events that would throw me into fight or flight mode were now a dull grey memory. I could move forward....I was no longer stuck.

Dr Craig Childress has aptly named this trauma pattern a "pathogen". A pathogen is a sickness (trauma) that needs appropriate assessment, diagnosis and treatment. The first step to creating the antibody for this pathogen is understanding the trauma pattern and breaking the cycle for your child. I am happy to say that my young son now enjoys the love of both parents. He went through a severely traumatic experience as I fought to stay in his life but this understanding of trauma saved him. My ex spouse and I can communicate today, forget the past and now understanding my ex spouse I can come at it from the perspective above and help her heal her trauma. Helping her heal, helps our son heal and now the trauma pattern is broken.

Michael S.R. Allen

[www.michaelallencoaching.com](http://www.michaelallencoaching.com)



**Michael Allen  
Coaching**

*Coaching for High-Conflict Divorce/  
Separation Involving Children*