

The Historical Trauma Response and Its Relationship to Alcohol and Other Drug Abuse

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Maria Yellow Horse Brave Heart, PhD
Associate Professor of Psychiatry/Director,
Native American & Disparities Research
Center for Rural & Community Behavioral Health
mbraveheart@salud.unm.edu
Director, The Takini Institute

Presentation Overview

- Incorporating Consideration of Historical Trauma and Historical Unresolved Grief/Historical Trauma Response Features with Assessment
- Historical Significance of Alcohol as Chemical Warfare
- Spiritual Experiences and Substances; Replacing Traditional Cultural Norms
- Combining Traditional Healing with Western Knowledge about Addictions

Historical Trauma and Unresolved Grief

- ***Historical trauma*** is cumulative emotional and psychological wounding over the lifespan and across generations, emanating from massive group trauma (1985-88)
- ***Historical unresolved grief*** accompanies that trauma

(Brave Heart, 1998, 1999, 2000)

Historical Trauma Response

- The *historical trauma response* (HTR) is a constellation of features in reaction to massive group trauma
- This response is observed among Lakota and other Native populations, Jewish Holocaust survivors and descendants, Japanese American internment camp survivors and descendants.

(Brave Heart, 1998, 1999, 2000)

Historical Trauma Response Features

- **Survivor guilt**
- **Depression**
- **Sometimes PTSD symptoms**
- **Psychic numbing**
- **Fixation to trauma**
- **Somatic (physical) symptoms**
- **Low self-esteem**
- **Victim Identity**
- **Anger**
- **Self-destructive behavior including substance abuse**
- **Suicidal ideation**
- **Hypervigilance**
- **Intense fear**
- **Dissociation**
- **Compensatory fantasies**
- **Poor affect (emotion) tolerance**

Historical Trauma Response Features

- Death identity – fantasies of reunification with the deceased; cheated death
- Preoccupation with trauma, with death
- Dreams of massacres, historical trauma content
- **Loyalty to ancestral suffering & the deceased**
- **Internalization of ancestral suffering**
- **Vitality in own life seen as a betrayal to ancestors who suffered so much**

Historical Trauma Response

- Wood and grain alcohol traded to tribes
- Non-Native Wild West and Frontier Dysfunctional Drinking Styles Were Role Models for American Indians
- Many tribes had no mind or mood altering substances and those that did were mostly restricted to ceremonial use
- Prohibition against open practice of ceremonies and substitution of “spiritual experiences”

Historical Trauma Response

- Alcohol used deliberately in treaty signing/negotiations
- Alcohol given to cavalry before the Wounded Knee Massacre and the assassination of Sitting Bull according to oral testimonies
- Alcohol as chemical warfare
- Alcohol referred to as spirits by dominant culture
- Human need for spiritual experiences

Historical Trauma Response

- Acute grief reactions and collective grief reactions – fantasies of escaping into the past, return of the old way of life, reunion with deceased relatives
- Alcohol use as a response to grief, attempts at numbing the emotional pain, and leaving the traumatic response behind
- Simultaneous self-destructiveness of alcohol abuse – aggression, anger turned against the self

Historical Trauma Response

- Depression, passive suicidal ideation, death wishes acted out through alcohol and other drug abuse
- Abandonment pain due to massive deaths and early boarding school trauma
- Substances temporarily numb the pain
- Generational traumatic responses

Intergenerational Transfer of the Historical Trauma Response

- **Parents who have been traumatized as children often pass on trauma response patterns to their offspring.**
- **Internalization of ancestral suffering**
- **Loyalty to the deceased**
- **Death wishes – to join deceased ancestors**
- **Vitality in own life seen as a betrayal to ancestors who suffered so much**

Epigenetics, Transgenerational Effects, and PTSD

- Yehuda & Bierer, (2009) *J of Traumatic Stress*, 22 (5)
- Yehuda, et al., (2005) *J of Clinical Endocrinology & Metabolism*, 90 (7)
- Walters et al., (2011) *Du Bois Review: Social Science Research on Race*, 8(1)
- Transgenerational, higher stress vulnerability (doesn't mean poor mental health necessarily but greater *risk* for traumatic responses to stress and more likely to have PTSD-like symptoms)
- Stressful environmental conditions *can* leave a genetic imprint, changes in neurobiology
- Testimonies of “inherited” grief in qualitative research

Psychodynamic Formulation

- Ability to delay gratification
- Impulse control
- Other ego strengths, e.g. judgment, ability to operate under the reality principle rather than the pleasure principle (giving into id, to impulses); understanding consequences of their behavior
- Quality of superego – weak, rigid
- Ego mediates between the id and the superego

The DSM IV Cultural Formulation Applied to Alcohol Abuse

Cultural Identity – drinking identity

- Ethnic or cultural reference group(s) – alcohol norms
- Degree of involvement w/culture of origin & host culture – degree of drinking culture vs traditional abstinence
- Language abilities, use, & preference – drinking metaphors, references (e.g. in country music) [*even though I am a fan, I dislike all the emphasis on drinking*]

Cultural Explanations of Illness

- Meaning & perceived severity of symptoms in relation to reference group/s norms – denial of drinking, minimization of effects – “can quit anytime”
- Perceived causes & explanatory models that the pt. & reference group(s) use to explain the illness – it is Indian to drink

Culturally Sensitive Diagnosis: the DSM IV Cultural Formulation

Cultural factors related to psychosocial environment & levels of functioning

- Culturally relevant interpretations of social stressors, available supports, levels of functioning & disability – drinking to cope, interfering with functioning
- Stresses in the local social environment – can exacerbate abuse
- Role of religion & kin networks in providing emotional, instrumental, & informational support – are networks all involved with drinking or other drugs

Cultural elements of the relationship between the individual and the clinician

- Individual differences in culture & social status between the individual & clinician – clinician's experience with alcohol; alcohol abuse by clinicians at mental health and even substance abuse conferences

Culturally Sensitive Diagnosis: the DSM IV Cultural Formulation

Overall cultural assessment for diagnosis and care

- Discussion of how cultural considerations specifically influence comprehensive diagnosis and care – co-occurrence of PTSD or other trauma symptoms; self-medication for underlying depression which may be biologically based and requiring antidepressant medication; sometimes hard to discern as alcoholism can also lead to depressive symptoms (medical detoxification, alcohol treatment, meds for depression, and therapy often needed)

Reference:

Lewis-Fernandez, R. and Diaz, N. The Cultural Formulation: A method for assessing cultural factors affecting the clinical encounter. *Psychiatric Quarterly*, 2002, 73(4): 271-295. (Table 1, p. 275)

Other Physiological Issues in Addictions

- “Toxic” exposure, crossing the threshold from social drinking to abusive drinking to addiction – changes in brain chemistry
- Genetic or physiological vulnerability to alcohol dependence or other addictions
- Neuroinflammation and implications of reduction in traditional cultural activities, lifestyle, diet due to colonization, decimation of subsistence style, and traditional food sources, environmental toxicity (PPT by John C. Umhau MD MPH, NIAAA)

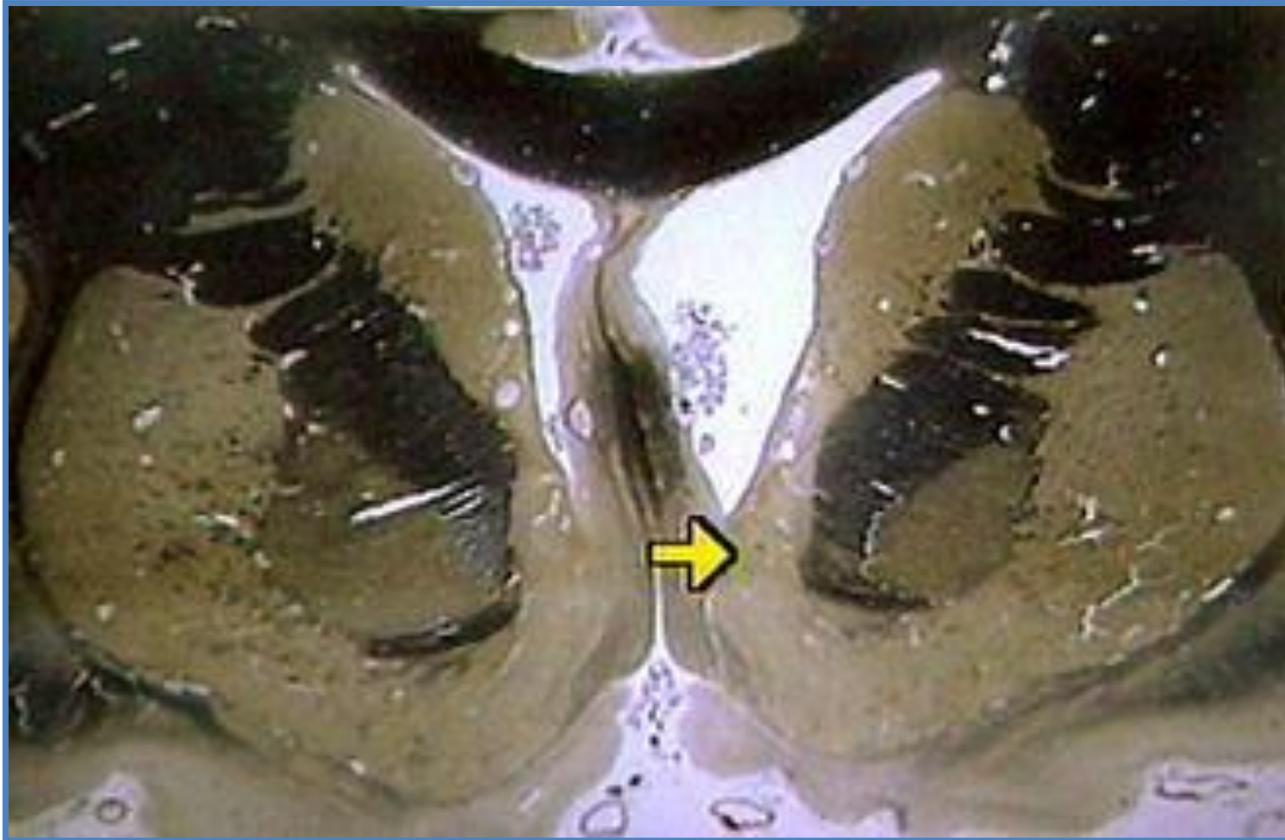
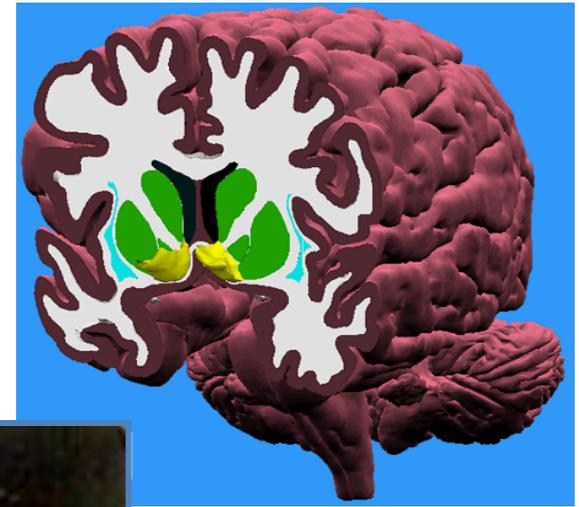
**“Dorsolateral” Frontal lobe
Planning, Thinking**



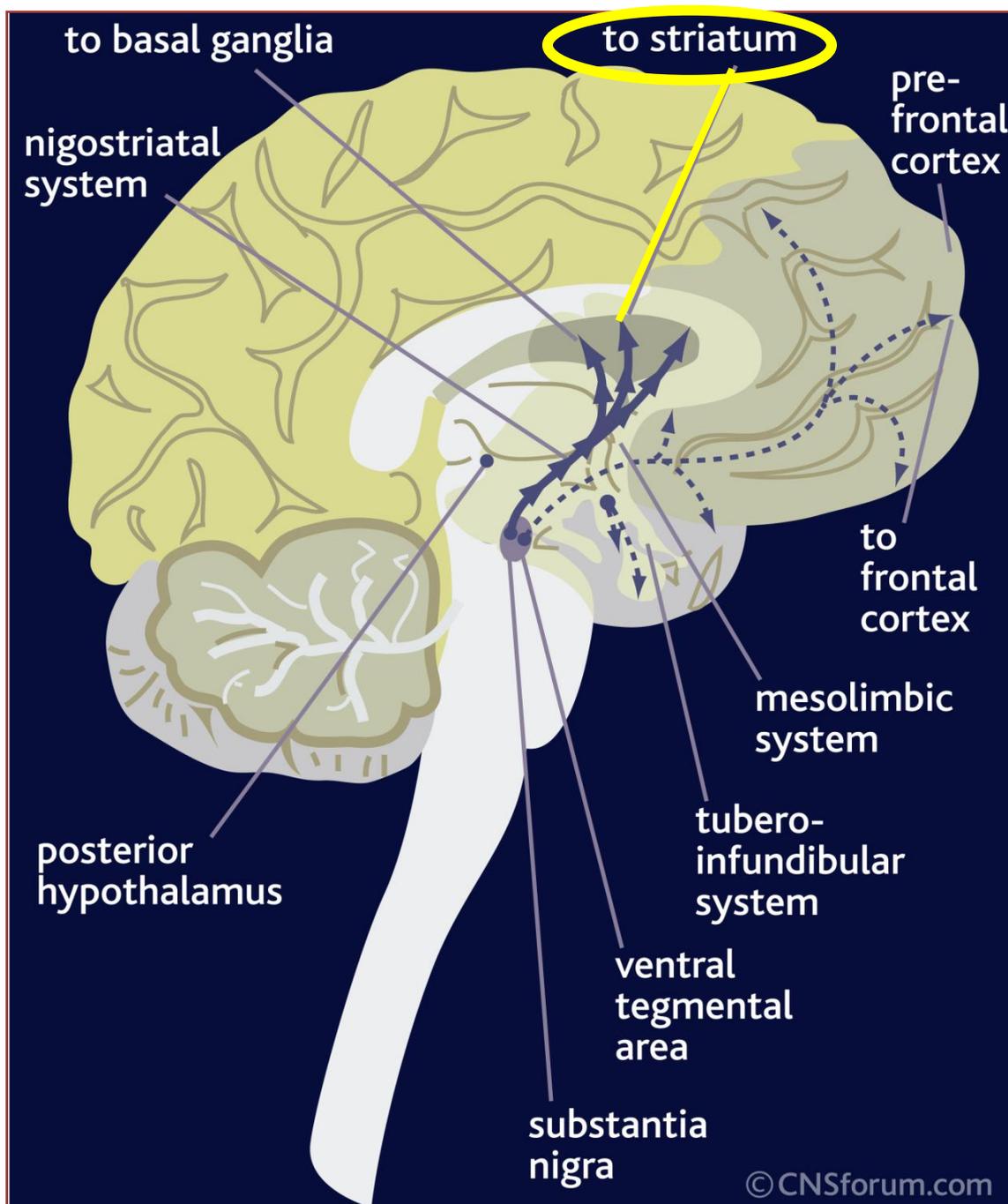
Orbitofrontal lobe
Value, Emotion, “Urges”



Striatum – influences the frontal lobe

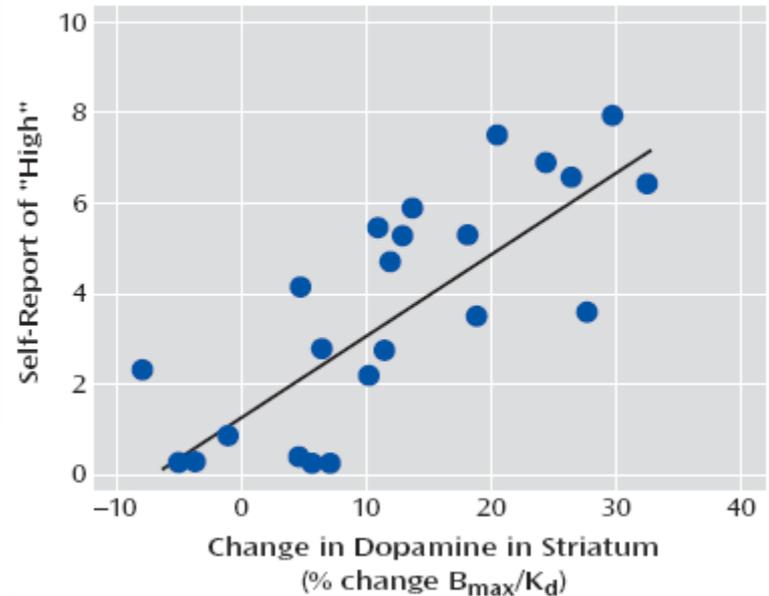
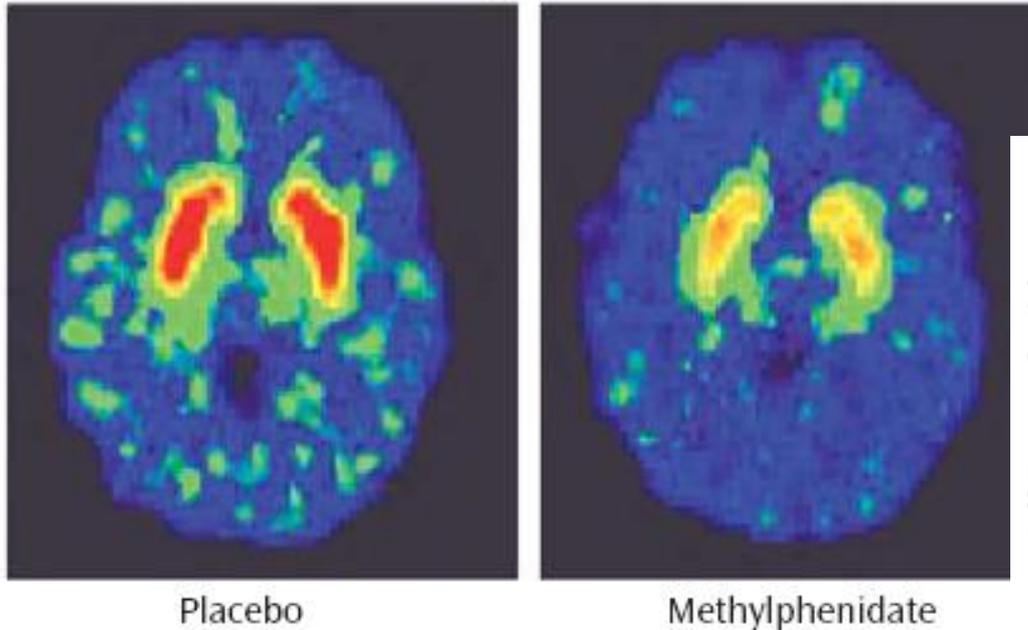


Dopamine pathways in the brain



Dopamine released after substance use in the “Striatum” leads to a high

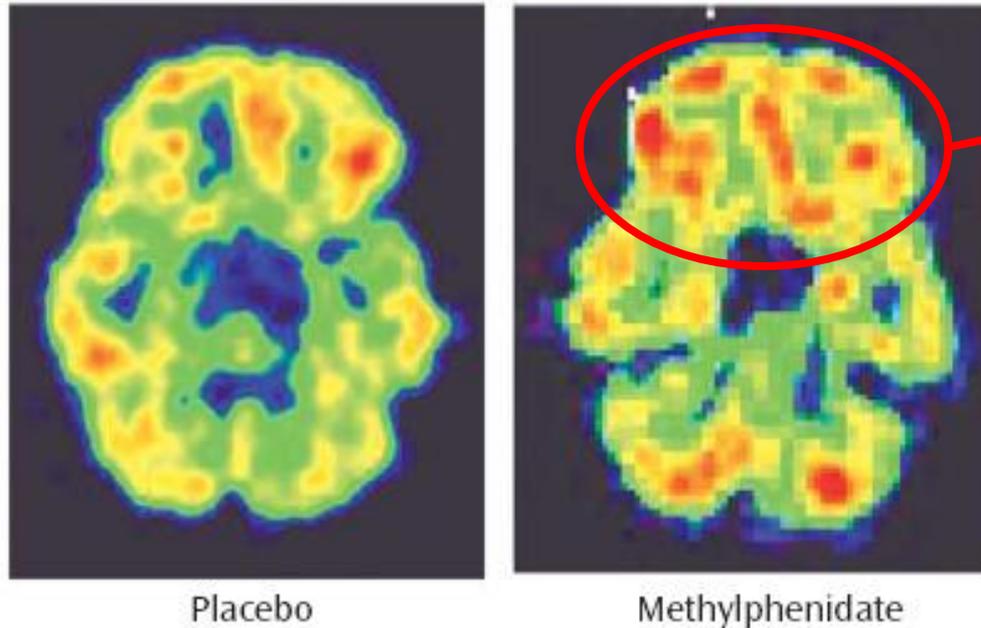
Increases in Dopamine in Striatum



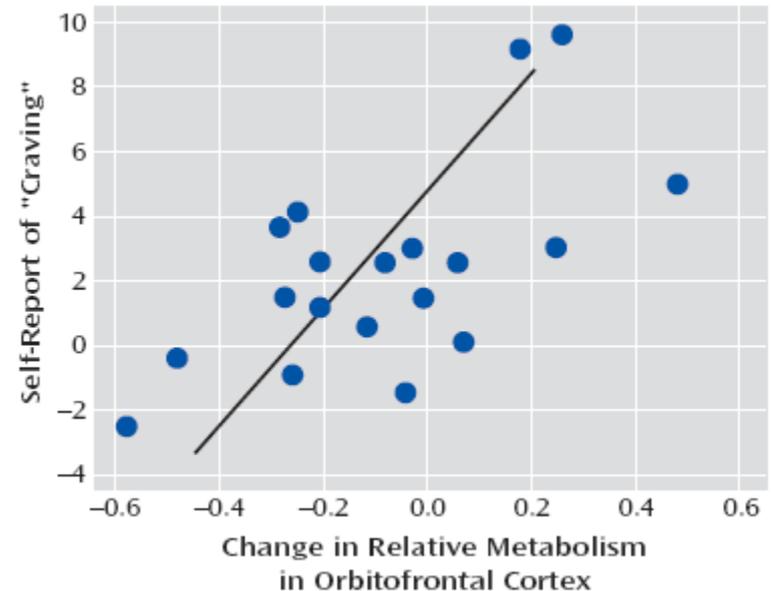
Increased dopamine release
in people with addictions

Activity in the front of the brain

Increases in Metabolism in Orbitofrontal Cortex



Orbitofrontal cortex



In people with addictions increased activity in part of the brain that leads to automatic behavior

References

- Brave Heart, M.Y.H., Chase, J., Elkins, J., & Altschul, D.B. (2011). Historical trauma among Indigenous Peoples of the Americas: Concepts, research, and clinical considerations. *Journal of Psychoactive Drugs*, 43 (4), 282-290.
- Brave Heart, M.Y.H. & Deschenie, T. (2006). Resource guide: Historical trauma and post-colonial stress in American Indian populations. *Tribal College Journal of American Indian Higher Education*, 17 (3), 24-27.
- Brave Heart, M.Y.H. (2003). The historical trauma response among Natives and its relationship with substance abuse: A Lakota illustration. *Journal of Psychoactive Drugs*, 35(1), 7-13.
- Kalivas & Bolchow (2005) Neural Basis of Addiction, *American Journal of Psychiatry* (slides provided by Dr. Steven Lewis, UNM Psychiatry)
- The Relevance of Neuroinflammation to the Development of Alcoholism Among Native Americans (PPT by John C. Umhau MD MPH, NIAAA)