

Trauma and Abuse

[Name of the Writer]

[Name of the Institution]

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### **Introduction**

Freeing themselves from the trauma experience of physical, sexual or psychological, is a process that requires great courage and perseverance. Abuses were more severe and persistent over the imprint and make it deep and difficult to integrate. It is probably impossible to completely erase the traces of such trauma. But it is certainly possible to achieve that these injuries are no longer a significant barrier to the vitality of an abused person. Paradoxically, it is leaving to take these experiences from their place, while respecting the natural process of growth; a person can free himself for it is largely a code of silence surrounding the abuse, which helps to make them as destructive. Opening this subject then allows life to flow in parts of the body and soul ossified by silence. The release of such an experiment involves a series of steps to open itself and express their experience.

### **The resistances of the abused person**

In my experience, very few victims of physical and sexual abuse come to consult directly on these grounds clearly identified. They are vaguely aware that such abuse may have an impact on the "wrong to be" lived, but they rarely attack head on. Before agreeing to consult, most victims often repeat "You have to forget. After all, it's not so bad. We must move on. "In most cases, this diversion works for a while, and sometimes years.

But usually around the age of forty or fifty years, they can no longer be distracted from such injuries. This is the body that can no longer bear the silence, the negation of its important needs. And it is manifested by the appearance of various symptoms such as nightmares,

insomnia, anxiety, escape in alcohol or drugs, or as the vulnerabilities of each. The quality of reception of the victim by the psychotherapist will determine how itself can then successfully host his injuries. This ability to open oneself is crucial in the process of self-development proposed here (Herman, 1997).

As the ability to trust is the cornerstone of human development, the relationship of trust is also present in the care pathway. It is difficult for a victim of physical and sexual abuse to learn to trust a psychotherapist. It will be hard to believe that the therapist will not react to it as her abuser has reacted with it. Although he knows, intellectually, that the risk of injury is intentionally thin, the emotional, the protective reflex will be spontaneous. His distrust remains a form of resistance with which the psychotherapist must learn to cope. It may fade gradually with experience and confidence that the therapist is there to help. It should still expect several consecutive failures before they get there.

We must accept the fact that it is the spontaneous response of the customer. It is useful to remind the client that it abused protective reflex was adequate to protect the abuser, but he is no longer in the current situation. Or at least he has the right to take the time to build and verify that trust.

### **Accept the link between symptoms and trauma of abuse**

It is in giving access to minimally emotions associated with these symptoms it is possible gradually to recognize the immensity of repressed emotions. Accommodate the emotions associated with these symptoms can usually fast enough to reconnect with the original trauma. Though, acknowledge their presence does not necessarily mean making acceptance (Caruth, 1995).

### References

Caruth, C. (1995). *Trauma: explorations in memory*. Baltimore: Johns Hopkins University Press.

Herman, J. L. (1997). *Trauma and recovery* (Rev. ed.). New York: BasicBooks.