

Understanding Mental Illness

What does it look like in the Court
Understanding Vicarious Trauma



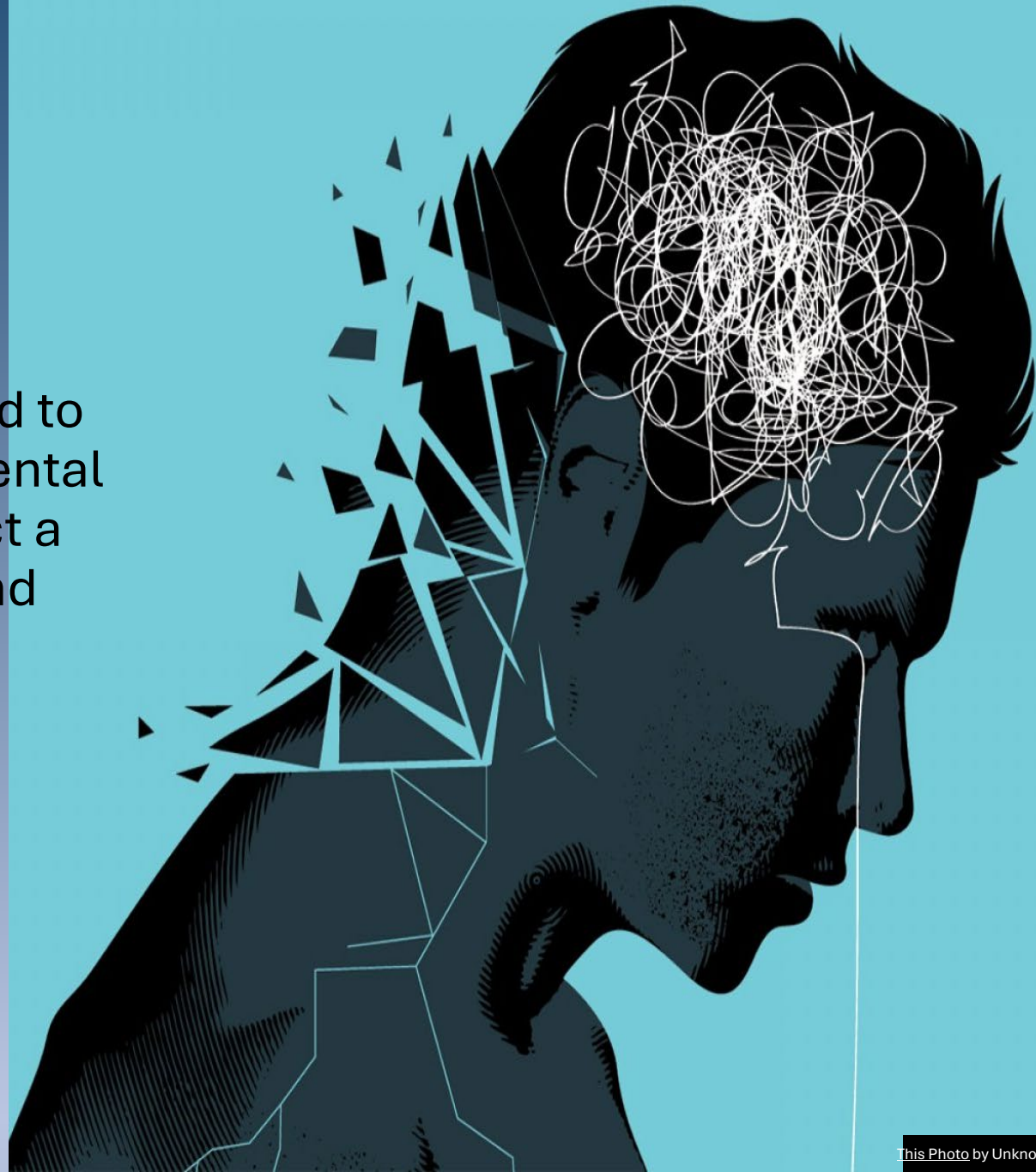
Presenter

- Sonny Provetto, LICSW
- Founder/Clinical Director
- Vermont Center for Responder Wellness
- Retired Vermont State Police

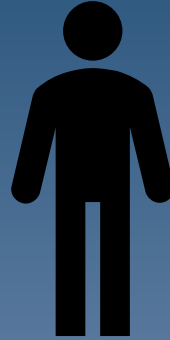


Definition

- Mental illness is a term used to describe a wide range of mental health conditions that affect a person's mood, thinking, and behavior.
- How We Think,
- How We Feel,
- How We Behave



Facts on Mental Illness



• 43.8 Million (1 in 5)



Common Clinical Disorders

Bipolar I and
Bipolar II
Disorder – 8%

Personality
Disorders -
9%

Depression -
10-12%

Traumatic
Brain Injury –
12%

Anxiety –
20-30 %

Uncommon Clinical Disorders

Schizophrenia
- .5%

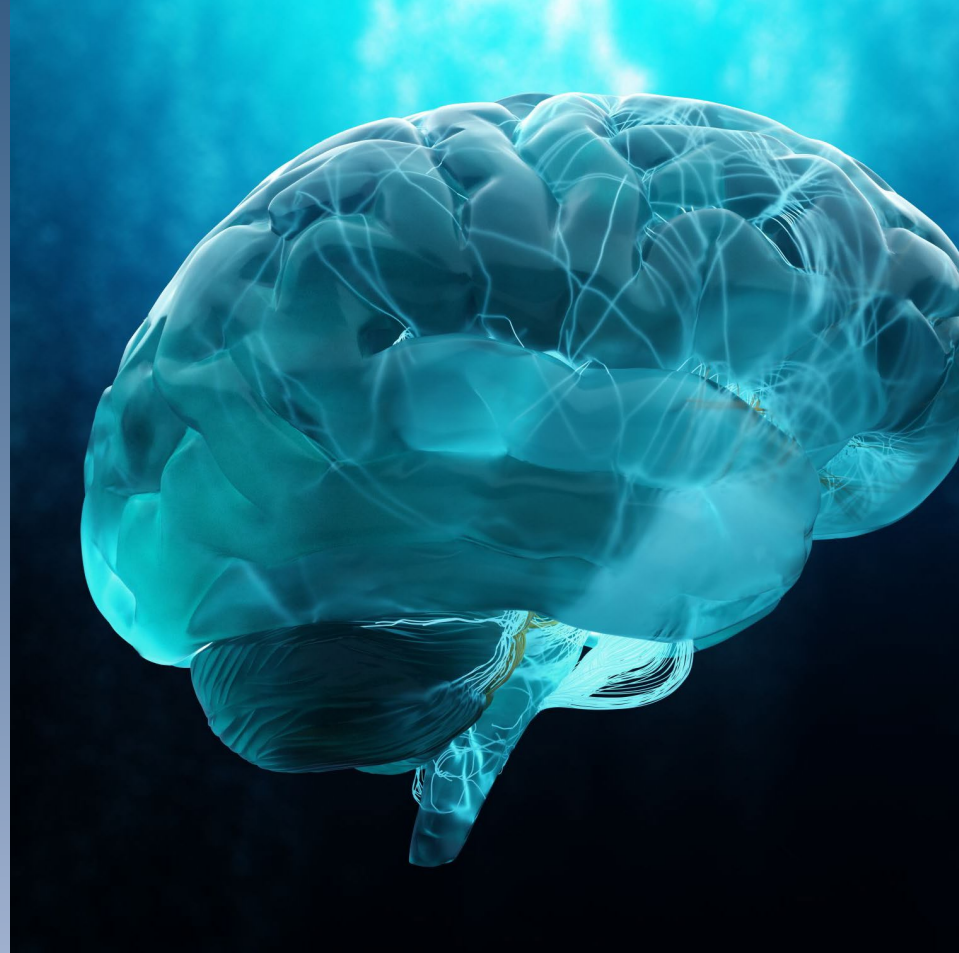
Psychopathy -
4%

Sociopathy
4%

Dissociative
Identity
Disorder - 1%



**Root Cause for
Most
Psychological
Conditions Is
Trauma**



Genesis of Trauma

Exposure to Violence

Emotional Abuse

Physical Abuse

Sexual Abuse

Neglect / Social Insecurities



Personality Disorders

Cluster A	Odd and Eccentric Linked to Trauma
Cluster B	Erratic and Dramatic Linked to Trauma
Cluster C	Anxious and Fearful Linked To Trauma

IMPACT OF TRAUMA

Short-term Impact of Trauma

- Fear
- Flashbacks
- Aggression
- Poor relationships
- Avoidance
- Eating and Sleeping disturbances
- Social Withdrawal

Long-term Impact of Trauma

- PTSD
- Depression
- Anxiety
- Substance Abuse
- Violence
- Flashbacks
- Aggression
- Personality Disorders



Environment: outside and inside the body

Nervous System

Safety

Danger

Life threat

**Calm
Coherent
Engaged**

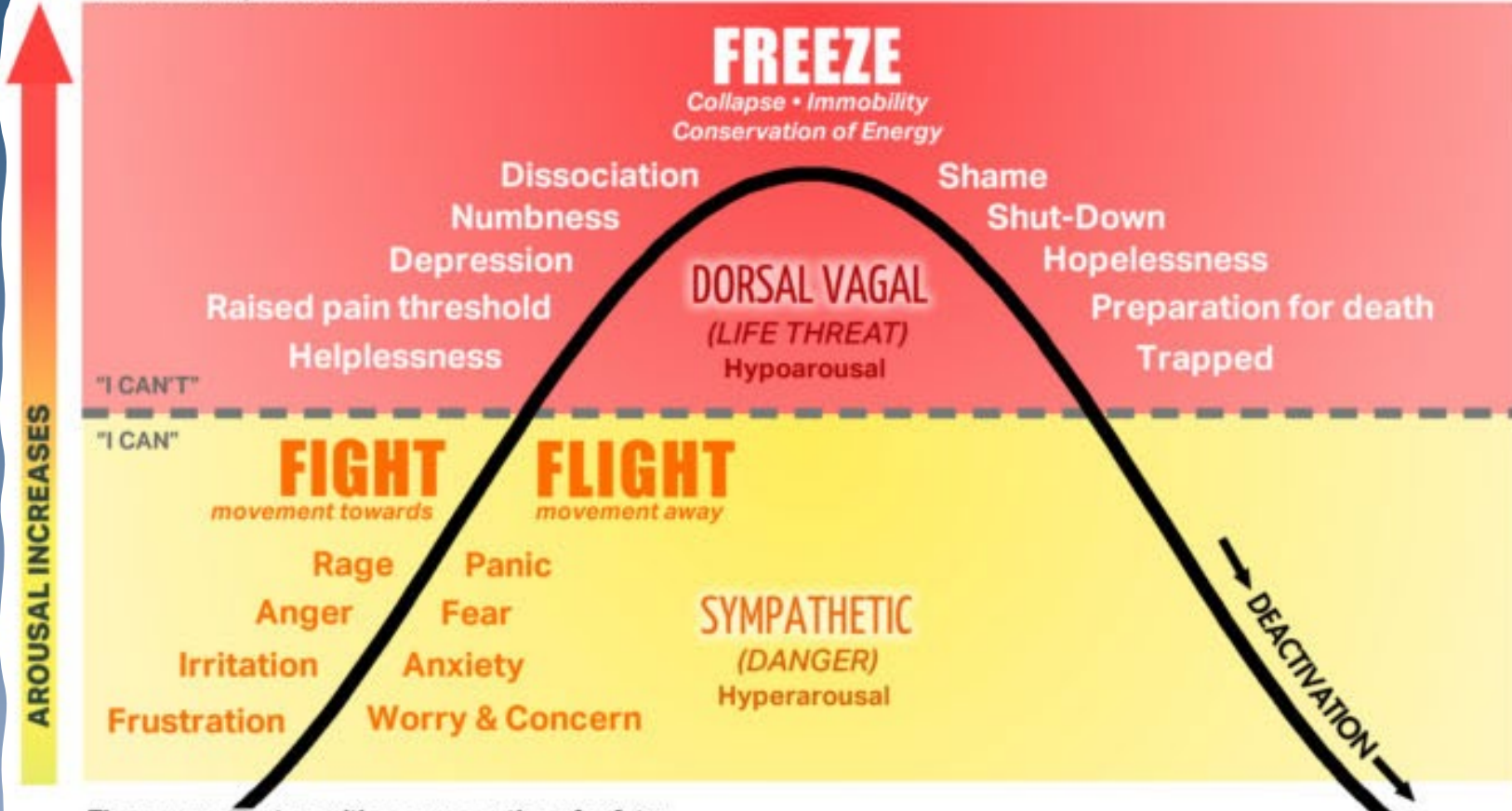
**Reactive
Aroused
Alarmed**

**Shutdown
Can't Listen
Dissociation**



POLYVAGAL CHART

The nervous system with a neuroception of threat:



The nervous system with a neuroception of safety:

PARASYMPATHETIC NERVOUS SYSTEM

DORSAL VAGAL COMPLEX

Increases

Fuel storage & insulin activity • Immobilization behavior (with fear)
Endorphins that help numb and raise the pain threshold
Conservation of metabolic resources

Decreases

Heart Rate • Blood Pressure • Temperature • Muscle Tone
Facial Expressions & Eye Contact • Depth of Breath • Social Behavior
Attunement to Human Voice • Sexual Responses • Immune Response

SYMPATHETIC NERVOUS SYSTEM

Increases

Blood Pressure • Heart Rate • Fuel Availability • Adrenaline
Oxygen Circulation to Vital Organs • Blood Clotting • Pupil Size
Dilation of Bronchi • Defensive Responses

Decreases

Fuel Storage • Insulin Activity • Digestion • Salivation
Relational Ability • Immune Response

PARASYMPATHETIC NERVOUS SYSTEM

VENTRAL VAGAL COMPLEX

Increases

Digestion • Intestinal Motility • Resistance to Infection
Immune Response • Rest and Recuperation • Health & Vitality
Circulation to non-vital organs (skin, extremities)
Oxytocin (neuromodulator involved in social bonds that allows immobility without fear) • Ability to Relate and Connect
Movement in eyes and head turning • Prosody in voice • Breath

Feel Safe -
Social
Engagement

Self - Regulation

Connection

Optimistic World View



If We are
Activated
(Sympathetic)

Fight

Flight

Negative world View



Dorsal Vagal (Freeze)

Shutdown

Numb

Dissociation – No
connection



Communication is dependent upon the Nervous System

Body Language

Eyes

Posture

Tone of Voice

Gestures



GOAL

Empathy

Show
Compassion

Need to Feel
Valued, Seen,
and Heard



Questions?





Breaktime

What is Vicarious Trauma



Trauma

The inability for your mind to process information to make meaning



Vicarious Trauma - VT

1980 Charles Figley-Termed
“the Cost of
Caring”

Professionals
working in
settings

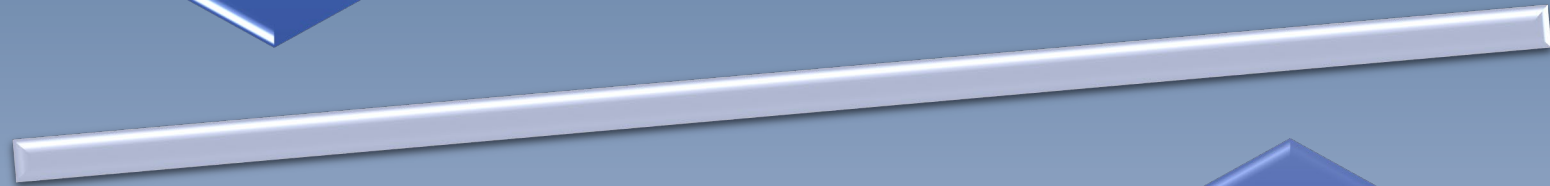
“Compassion
Fatigue” and
“Burnout”



Differences in Opinion: What Vicarious Means



**DSM 5 Manual
Of Psychological
Disorders**



Dictionary



Meaning of Vicarious



Vicarious:

Experienced through the
feelings or actions of another
person

Trauma Exposure DSM 5

- **Direct Exposure** - Gateway to Post Traumatic Stress Criterion A

- Threat to:

- Life and Limb
- Witnessing or Learning of....



Life and Limb

- **Indirect (Vicarious) Exposure** – is direct exposure

- The repeated or intense exposure to traumatic material



Traumatic Material



DSM 5: Post Traumatic Stress Disorder

Example: *police officers reviewing the aversive details of child abuse cases*

Listening to the trauma stories of others



What Happens Then....

Changes our World View

Changes our Reality

Changes our Self Experience



Behavioral:

Sleep disturbances

Nightmares

Appetite changes

Hypervigilance

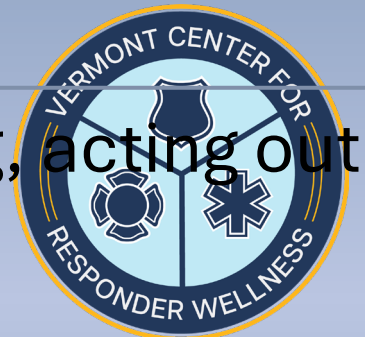
Exaggerated startle response

Losing things

Clumsiness

Self-harm behaviors

Negative coping – smoking drinking, acting out



Physical:

Panic symptoms

Sweating, rapid heartrate, difficulty breathing, dizziness

Aches and pains

Weakened immune system

Getting Sick



Cognitive:

Minimization of vicarious trauma

Lowered self-esteem and increased self-doubt

Trouble concentrating

Confusion/disorientation

Perfectionism

Racing thoughts

Loss of interest in previously-enjoyed activities

Lack of meaning in life

Thoughts of harming yourself or others



Social:

Withdrawal and isolation

Loneliness

Irritability and intolerance

Distrust

Projection of blame and rage

Decreased interest in intimacy

Change in parenting style (overprotective)



What do we do?

- Mindful of **how our body and minds works**
- **Recognize the negative impact of trauma** stories, pictures, and other materials
- Understand the **power of connectedness** and belonging
- Identify **unhelpful interpersonal dynamics** at work and at home



Recovery from Trauma

- **Individual**
- **A, B, C's:** Awareness, Balance, and Connection

- **Systemic Changes**
- Reduce exposure to indirect trauma through workload and challenging cases
- Provide effective interventions for staff
- Qualified mental health professionals available



Other Resources

- <http://www.samhsa.gov/nctic/trauma-interventions>
- <http://www.ptsd.va.gov/>
- <http://www.nctsn.org>

