



Understanding Trauma Basics

A client-friendly guide to what trauma is, how it can show up, and how therapy can help.

Trauma is not simply something bad that happened. It is the way the brain, body, emotions, relationships, and sense of safety can be affected when an experience overwhelms a person's ability to cope. Trauma may come from one event, repeated stress, loss, abuse, neglect, violence, medical events, accidents, or long-term relational wounds.



Common trauma responses

- Feeling anxious, numb, sad, angry, guilty, or ashamed
- Sleep problems, nightmares, fatigue, or trouble focusing
- Avoiding people, places, conversations, memories, or emotions
- Feeling on edge, easily startled, guarded, or unsafe
- Relationship strain, mistrust, isolation, or emotional shutdown
- Body symptoms such as tension, stomach issues, headaches, or panic sensations



What trauma is not

- It is not weakness, drama, attention-seeking, or a character flaw.
- It is not always obvious from the outside.
- It does not mean a person is broken.
- It does not require you to remember everything perfectly.
- It does not have to control the rest of your story.

Why symptoms happen

After trauma, the nervous system may stay on high alert even when the danger is over. The brain may keep scanning for threat, the body may react before you can think clearly, and reminders can trigger strong emotions or physical sensations. These responses are protective survival reactions. The goal of therapy is to help the system learn safety again.



Survival mode

The body prepares to fight, flee, freeze, please, or shut down.



Reminders trigger alarms

Sights, sounds, smells, places, conflict, tone of voice, or body sensations can activate the memory network.



Healing builds new patterns

Skills, support, and trauma-focused therapy help the brain and body respond with more control.

How therapy can help

Trauma-informed counseling moves at a safe, realistic pace. Treatment may include education about the nervous system, grounding skills, emotion regulation, CBT/DBT-informed coping tools, EMDR, Accelerated Resolution Therapy (ART), trauma-focused CBT, exposure-based work when appropriate, and faith-sensitive care when requested.

Good trauma therapy does not force someone to relive everything all at once. It focuses on safety, choice, stabilization, skill-building, processing when ready, and rebuilding daily functioning.



Try this when you feel triggered

- Name five things you can see and three things you can feel.
- Slow your exhale: breathe in 4 seconds, out 6 seconds.
- Say: "This is a trauma response. I am in the present."
- Put both feet on the floor and press gently into the ground.
- Reach out to a safe person or use your written coping plan.



When to ask for more support

Ask for help if trauma symptoms last for weeks, interfere with sleep, work, school, relationships, parenting, faith, or daily functioning, or if you feel stuck in fear, shame, avoidance, anger, or numbness. Get immediate help for thoughts of suicide, self-harm, feeling unable to stay safe, or danger from another person: call or text 988 in the U.S. or contact emergency services.