



Trauma & Recovery

The link, the body, and the skills that steady it · Recovery in Focus · Session Packet

Start with one ground rule, because it protects everybody: **this group never asks anyone to tell their story.** This session is about how trauma works and the skills that steady a body carrying it, not about what happened to anyone. The details belong in individual sessions with someone trained for them, at a pace you choose. In here we work at the pattern level, and the pattern level is where the power is anyway.

Trauma is what happens in a person when something overwhelms their ability to cope: violence, abuse, neglect, loss, accidents, combat, or growing up where none of the adults were safe. It's not weakness and it's not rare, especially in this room: the research on childhood adversity found that the more of it a person carried, the higher their odds of addiction later, many times higher at the high end. That's not a coincidence, and it's not a character flaw on top of a character flaw. For a lot of people, substances were the first thing that ever made an unbearable body bearable. The substance was a solution before it was a problem, and recovery means the original problem, the thing the substance was medicating, is still there, asking for better medicine. This session is about understanding that link, recognizing a trauma response when your body throws one, and learning the steadying skills that are better medicine.

What is in this session?

This session has four parts, usually covered over two group meetings:

CLASS 1 1. The Link 2. What a Trauma Response Is

CLASS 2 3. Steadying Skills 4. Safety and the Path to More Help

After this session you will be able to

- Explain the trauma-addiction link without shame in either direction
- Recognize your own trauma responses as body events, not character flaws
- Use grounding skills that steady the body in the moment
- Know what trauma treatment looks like and how to ask for it when ready

What will be asked of you?

Only pattern-level honesty: noticing what your body does, never narrating what was done to you. You control your own pace completely. If anything in this session stirs more than you want stirred, say the word "pause" to the facilitator, no explanation needed, and use the skills on page 4 any time, mid-session, without asking.

Part 1: The Link

WAIT, REALLY?

A landmark study of childhood adversity found the link to later addiction is **dose-shaped**: the more categories of early adversity, the higher the odds, several-fold higher at four or more. Addiction research has repeated the finding ever since. Most people in rooms like this one carry some of that history.

Why the link is so strong: trauma, especially early trauma, builds a nervous system tuned for danger: the body's alarm system fires loud, fast, and at small things, and calm is hard to trust because in the old days calm never lasted. A body like that is exhausting to live in. Then a substance arrives that quiets it in minutes. Of course it got used. Understanding this changes the question from "what's wrong with me" to "what happened to me, and what did I learn to survive it", and that second question has answers that don't come in a bottle.

EXERCISE 1

Answer yes or no. (Yes/no only, no details, here or anywhere in this packet.)

1. Hard things happened to me before I ever used. ☐ Yes ☐ No
2. Looking back, part of my use was quieting something. ☐ Yes ☐ No
3. "What happened to me" fits my story better than "what's wrong with me." ☐ Yes ☐ No

EXERCISE 2

In your own words, pattern level only: what was the substance's job in your nervous system? (Quieting, numbing, sleeping, braving, forgetting?)

Part 2: What a Trauma Response Is

A trauma response is the body's alarm going off at the past: something today, a tone of voice, a smell, a type of touch, being cornered, a date on the calendar, matches something from then, and the body responds as if then is now. The classic shapes: **fight** (sudden rage out of proportion), **flight** (the overwhelming need to leave, now), **freeze** (going blank, numb, unable to speak), and **fawn** (instantly appeasing, losing yourself to keep someone calm). Flashbacks and nightmares are the loudest versions; the quiet ones, numbness, jumpiness, never sitting with your back to a door, are responses too. The key sentence, worth memorizing: **a trauma response is a body event, not a character flaw**. You didn't choose these reactions. You can learn to steady them.

EXERCISE 3: MY BODY'S MOVES

Pattern level: check the shapes your body knows. No stories attached.

- | | |
|---|---|
| ☐ Fight: rage that arrives faster than thought | ☐ Jumpy: startling big at small things |
| ☐ Flight: the need to leave, immediately | ☐ On guard: exits, backs to walls, scanning |
| ☐ Freeze: blank, numb, words gone | ☐ Sleep: nightmares or fighting sleep itself |
| ☐ Fawn: appeasing on autopilot | ☐ Numb: feelings offline for stretches |

The one my body uses most: _____

Marcus

Marcus, nine months sober, is doing fine until his new boss raises his voice across the shop, not even at him. Marcus's chest slams shut, his ears ring, and he's already planned the fastest route to the door before he notices his hands shaking. For years a moment like this ended at a dealer's house, and he never once connected the two. His counselor draws it for him in one line: raised male voice, then, now, body can't tell the difference yet. "Yet" turns out to be the most important word in the sentence.

EXERCISE 4

- Which shape did Marcus's body throw? _____
- What was the old link between moments like that and his using?

- Why is "yet" the most important word?

End of Class 1. Talk it out (pattern level):

- "Body event, not character flaw." What does that reframe change for you?
- What did the substance's job description look like in your nervous system?

Part 3: Steadying Skills

These skills do one thing: convince the body that now is now. They are not therapy and they don't erase anything; they end the false alarm faster so you get your afternoon back, sober.

- **5-4-3-2-1 grounding.** Name 5 things you see, 4 you hear, 3 you can touch, 2 you smell, 1 you taste. It forces the brain to process the present, and then is not the present.
- **The long exhale.** Out-breath longer than the in-breath, five times. The body's built-in brake.
- **Orienting.** Slowly turn your head and actually look around the room, letting your eyes land on each exit and each ordinary object. It sounds too simple. The body scans for danger anyway; doing it on purpose, slowly, tells the alarm the scan came back clean.
- **Temperature.** Cold water on face and wrists; a hard reset when the response is big.
- **Name it, date it.** Out loud or silently: "This is a trauma response. It's (today's date). I'm at (place). That was then." Dating the moment out loud works better than it sounds.

EXERCISE 5: PRACTICE NOW, TOGETHER

The group does 5-4-3-2-1 and the long exhale together, then orienting, slowly. Rate it:

Settledness before (0-10): _____ after (0-10): _____

The skill my body liked best: _____

EXERCISE 6: MY STEADYING PLAN

My body's usual shape (from Exercise 3): _____

My first skill when it hits: _____

My name-it-date-it line, word for word: _____

The person I can text afterward ("had a rough moment, I'm okay"):

Part 4: Safety and the Path to More Help

Steadying skills are first aid. The deeper repair, actual trauma treatment, exists, works, and is more available than it used to be: therapies where a trained clinician helps the brain store the old memories properly so they stop firing as if they were happening now (names you might hear: EMDR, trauma-focused CBT, Seeking Safety, which was built for trauma and addiction together). Two honest truths about timing. First, early recovery usually isn't the moment to open up the heaviest memories; stability first, skills first, then the deeper work when you and a clinician agree you're ready for it. Second, "not yet" is not "never," and telling your counselor "I think there's trauma under this" does not open anything up. It just lets your counselor make a note, so the right help can be planned and ready for when you choose. That one sentence is the whole ask of this session.

EXERCISE 7

Answer yes or no:

1. I knew trauma treatment existed beyond talk-about-it. ☐ Yes ☐ No
2. "Stability and skills first, deeper work later" fits where I am. ☐ Yes ☐ No
3. There's something I'm ready to mention to my counselor, one sentence, no details.
☐ Yes ☐ No

EXERCISE 8

Write the one sentence you could say to your counselor, if and when you choose. You don't have to say it this week. You just have to own the sentence.

READ THIS ONE STRAIGHT

If one of these moments ever brings thoughts of not wanting to be here, that's a same-day conversation: staff today, your person tonight, or call or text **988** any hour. Trauma responses pass, and they pass faster with help. Asking is never the wrong move.

SKILL OF THE DAY: GROUND ONCE A DAY, CALM OR NOT

Run 5-4-3-2-1 or orienting once a day this week, calm or not. You're training the body to find "now" on command, so it's findable on the day the alarm lies to you.

Take it to the group (pattern level, always)

- What changes when the question becomes "what happened to me"?
- Which steadying skill actually moved your number, and when will you use it this week?
- What makes "yet" a recovery word?
- What would saying that one sentence to your counselor cost you, and what might it get you?

Session summary

Trauma and addiction are linked dose-to-dose, because substances quiet nervous systems that trauma tuned for danger; the substance was a solution before it was a problem. Trauma responses are body events, fight, flight, freeze, fawn, and they can be steadied with grounding, breath, orienting, and dating the moment. Deeper repair exists when you're resourced for it, and the only ask tonight was one sentence you could say to your counselor, when you choose.

Words used in this session

- **Trauma:** what happens in a person when events overwhelm their ability to cope. Common, not weakness.
- **Trauma response:** the body reacting to today as if it were back then: fight, flight, freeze, or fawn. A body event, not a character flaw.
- **Grounding / orienting:** skills that convince the body now is now.
- **Trauma treatment:** clinician-guided repair (EMDR, trauma-focused CBT, Seeking Safety). Stability first, then the deeper work, by your choice.

Takeaway: You survived something, and the surviving taught your body habits that the substance exploited. Steady the body daily, keep the details for the right room, and when you're ready, one sentence to your counselor starts the plan.
