## Traumatic Stress Relief Team: Creating Safety in the Midst of Chaos

By Kathy Allan, RN, HN-BC, HTCP/I, SEP

nergy Magazine's March 2011 issue contained a great article by Christina Brugman about how we can prepare ourselves to survive in a disaster situation. She is so right when she says that it is not a question of whether or not a disaster is going to strike. It is a question of when or where it is going to strike. Her article stressed that by being prepared, knowing what to do, and having a plan of action improves our ability to survive and to be of service to our communities. When we create a plan of action that will ensure safety for ourselves and for our families, we are physically free to turn our attention to helping others.

There is something else we need to consider, and that is -- the effect that a disaster can have on us physiologically. Knowing how to create safety in our nervous systems in order to manage our internal response to threat is as important as knowing how to create safety in our external environment. We need to have an internal plan of action that will serve us well in any situation that involves traumatic stress, whether is comes from natural disasters, war, violence, accidents and even medical or surgical procedures. We need to learn how to work with our bodies in order to reduce the level of nervous system activation that comes from an experience of overwhelming traumatic stress.

I have been interested in the field of traumatic stress for years and in 2000 I began my studies in Dr. Peter Levine's Somatic Experiencing® program. It is a three-year program designed to teach professionals how to work with post-traumatic stress.

I was living in Santa Fe, NM at the time and was enjoying the community, the culture, the art, the land and the clear blue sky. Then on May 4, 2000 a disastrous fire broke out 35 miles northwest of Santa Fe in the forest around the city of Los Alamos. By the time it was extinguished, almost fifty thousand

acres had burned in and around the nuclear weapons production and waste storage facilities at the Los Alamos National Laboratory (LANL).

Officials from LANL assured everyone that the buildings that housed the nuclear materials were safe and would be protected from the fire but fear that nuclear materials might burn spread throughout the community. It was rumored that the smoke from the fire had radiation in it - plutonium and uranium to be exact. It seems that during the making of the atomic bomb in Los Alamos in the 1940's, scientists dumped excess radioactive materials onto the ground behind their laboratories. (The Center for Disease Control and Prevention (CDC) recently found that the soil surrounding LANL may contain as much as 100 times more plutonium than was previously estimated.) (1)

The plants and the trees absorbed some of this radiation and the fire released it into the environment. The smoke plume was twenty thousand feet high and could be seen from outer space over northern New Mexico, southern Colorado, Oklahoma and Texas.

There was no fire in Santa Fe and I was physically safe but my nervous system went on high alert. I was ready to flee at a moment's notice. I had trouble concentrating, sleeping and eating. I was shaking inside and, like most people who deal with potentially life-threatening situations, I discounted and minimized my distress. I did not realize that I was stuck on the freeze position of Fight/Flight/Freeze.

With the help of my friends, I realized that my nervous system needed to remember how to regulate itself in order to become unstuck and release the activation in my body. I did some Somatic Experiencing (SE) exercises and felt myself come back into my body with a sense of calm - without any anxiety. When this happened I was able to turn my attention to being of service in the community.

There were major gaps in information coming from Los Alamos.

The official response was that no radioactive or hazardous materials were released. But independent monitoring later revealed that there was 30 times the normal radiation level in the environment.

One thousand fire fighters from all over the country fought the fire and when it was contained they returned to their homes. Many residents from Los Alamos returned to their homes and life in the surrounding communities returned to normal. But I could not stop thinking about the firefighters who fought the fire without masks to protect themselves or the people down wind from the fire who were exposed to radiation from the smoke. How could they be helped? What could our little Santa Fe Healing Touch group do?

Rose Marie Tsigowanu-Tun, a Native American nurse in our Healing Touch group, lived at San Ildefonso Pueblo, which was immediately downwind from Los Alamos and the most affected by the contaminated smoke. At her request, we decided to start a Healing Touch clinic there. She set up a meeting with the elders to get permission for the clinic. Our group did a presentation to the San Ildefonso community and the elders gave us permission to start the clinic. Rose Marie's family had an empty three-bedroom house on the Pueblo and we were able to use it as our clinic.

We decided that radiation exposure needed powerful and frequent Healing Touch treatments to keep the body's vibration at a healthy wellness level. Rosalyn Bruyere, in her book <u>Wheels</u> <u>of Light</u>, says that radiation lowers the vibration of the body and that this is what can cause malignant growth later on. She suggests doing a whole body chelation that includes the liver and the kidneys and to balance the brain. (2)

The thought of having to work on so many people was daunting. Many in our group had full time jobs and had to travel long distances to get to the clinic. We were afraid that they would be too tired to be able to run a high vibration of energy so we decided on a team approach to healing. There were five or six practitioners on each team and we spent an hour with each client including the intake, treatment, post treatment debriefing and recommendations for continued healing. Looking back on it, I realize that it was rather chaotic because we did not use any method or technique. We simply and independently put our hands where we felt called to work.

The clinic was a success, the clients loved it and our Healing Touch group felt the sacredness of working as a team. We worked in our little clinic every week for about two months. Then we had a visit from the Medicine Man who had some very serious concerns. Our group was not Native American, the clinic was next to the Kiva where they do sacred ceremonies, we were doing "strange" healings, we were women and we were there after dark. He requested that we discontinue our clinic so we honored his request and left. It was so sad to see it end.

I went on to complete my trauma studies and moved back to San Diego. I did not give up on the team healing approach and introduced a new improved version of team healing to the San Diego Healing Touch community. Even though this was an improvement, it was still a little chaotic and did not adequately address the challenges of working in disaster situations.

Natural disasters are happening at an alarming rate. Radiation exposure is everywhere now. It can come from nuclear power plants, radiation treatment for cancer, CAT scans, PET scans, mammograms, x-rays, airport screening, cell phones, computers, microwave ovens and more. Traumatic stress is so pervasive that it has grown into a public health problem.

My challenge has been to create a way of working that would enable practitioners to treat large numbers of traumatized people and avoid becoming traumatized themselves, i.e. secondary traumatization. How can we increase the effectiveness of Healing Touch treatments, decrease the amount of time needed for a treatment, teach practitioners how to work in unison with other practitioners while incorporating other modalities, and very importantly, make Healing Touch affordable for everyone? The new version had to do all of these things and it had to flow simply and effortlessly.

The good news is that the latest version of the Team Healing Technique does just that. We tested it at the California Association of Healthcare Facilities RAP Conference on April 21, 2011. Twelve volunteers from the San Diego Healing Touch community were able to treat seventy-seven clients in a two-hour span. All of the clients loved their treatments and the practitioners were excited to be working in this manner. I am looking forward to sharing the new Team Healing Technique with you. I will be presenting a one day post-conference workshop at the Healing Touch Worldwide Conference in San Antonio on Monday, August 29. The workshop is called - *Traumatic Stress Relief Team: Creating Safety in the Midst of Chaos*. <u>Click here</u> for more details. I hope you can make it.

- Concerned Citizens for Nuclear Safety, New Mexico's Right to Know: The Impacts of Los Alamos National Laboratory Operations on Public Health and the Environment, hhp:// www.nuclearactive.org/docs/RighttoKnow.html
- 2. Bruyere, Rosalyn, Wheels of Light, A Study Of The Chakras, Bon Productions, Arcadia, CA 1992 pp 220, 221

## About the author:



Kathy Allan, a Healing Touch Certified Practitioner and Instructor, is a Board Certified Holistic Nurse who has been a leader in the American Holistic Nurses Association. She teaches Healing Touch nationally and started two popular Healing Touch Clinics in San Diego and two in

New Mexico. She is a former faculty member of Beyond Ordinary Nursing where she taught Integrative Imagery, a form of imagery that allows the client to dialogue with their images and receive guidance. Kathy is also certified in Somatic Experiencing, a natural approach used to treat Post Traumatic Stress Disorder. She is the originator of the Team Healing Technique and has written articles on the use of Healing Touch for specific conditions. Kathy has a private practice in San Diego, CA.