

Trauma and Social Justice: why we can't talk about one without including the other

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For the past 15 years I have been training yoga teachers, clinicians and other direct service providers to be “trauma informed.” This starts with educating people on the impact of unresolved trauma on individuals and communities. This lens can help us understand why our students might be shut down, or why a client is anxious and mistrustful. **This lens asks us to assume that everyone is doing the best they can in the moment, and that most of our behavior is an attempt to regulate ourselves and feel safe and good.** We can group the cause/source of trauma into two main categories- overwhelming events (shock trauma), profound lack of attunement and mirroring (developmental trauma). Most mental health paradigms include only personal and interpersonal events in these categories. Shock traumas are things like car accidents, natural disasters, violence, witnessing violence, even childhood surgeries. Developmental trauma usually refers to the lack of attunement between a child and its primary caretaker. A child who is not attuned to will not feel that the world is a safe place for them and this can impact them for their whole life.

What the trauma informed framework often fails to explicitly name is *systemic or institutionalized* trauma. **This category refers to the way that people are harmed by the larger systems that many of us rely on such as the educational system, political system, criminal justice system, healthcare, etc.** In the United States (and many other countries), these systems are set up to serve a small group of people often at the expense of a larger group of people. We often call these groups marginalized because their needs and voices get set aside while other needs and voices tend to be centered. **The people not served by, and often harmed by these systems, can be traumatized by these systems.**

A low-income Black boy labeled as problematic in pre-school, who gets set on an educational track that will most likely lead him to juvenile hall and then jail, is being harmed by an educational system that gives harsher punishments to kids of color and tends to criminalize their behavior rather than offer resources of support. A low-income person with chronic illness who doesn't have access to good healthcare can be traumatized (even killed) by a system that is not designed to care for them. Non-neurotypical people often get labeled as defiant or not bright at school and in their communities; many internalize this and think something is wrong with them without realizing that they may be processing information in a way that is not recognized by the larger world. We can think of these examples as forms of developmental trauma- these people are not being attuned to by the larger systems that are supposed to be there to nurture and support them. In fact, they may even feel targeted by these systems as a child would feel if their parent hit them when they cried rather than trying to understand what they are needing.

A transgender person who fears for their life when they are out in public because of how many times they have been bullied or beat up is experiencing shock trauma and the reverberations of that. Black and Brown people who have been unfairly harassed by law enforcement or who know others who have been, experience the shock trauma of violent

policing practices and higher incarceration rates than their white counterparts. Communities with high cancer rates due to pollution in their water, soil and air are victims of environmental injustice because highways and polluting factories are usually located in low income neighborhoods rather than affluent ones. These communities are forced to deal with the trauma of illness and loss due to pollution more than people in wealthier neighborhoods.

These are all examples of institutionalized traumatic events and circumstances because they are sanctioned or covered up by the larger institutions that they are a part of. Some other examples of this are red lining, stop and frisk laws, biased educational tests, and lack of private or non-gendered bathrooms (there are many more).

Social injustice is traumatizing. This needs to be named in trauma work. When this doesn't happen, individuals can be blamed for behavior that is a natural response to an overwhelming or untenable situation. There can be a subtle, or not so subtle, implication that it is their weakness or lack of resilience that got them where they are, not a larger system that sees them as disposable or doesn't even see them at all. For many people who are served by these systems it can be hard to realize that what they assume to be a birthright is not available to everyone. As an able-bodied person, I never have to think about access ramps in buildings for example. Buildings were made for me and I have been able to take that for granted. A person in a wheelchair is constantly faced with this question and may often not be able to access certain spaces. They have to work extra hard to navigate a world oriented towards able bodied people. If they seem frustrated or frazzled, it is not because they are deficient, it's because the larger context is not serving them, and they are tired of that.

It is important to name these dynamics and build into a model of trauma informed care the ways that systems can harm or privilege people and groups. **This more holistic perspective opens us up to a broader conversation about how to implement systemic and cultural change as a way to reduce harm and promote wellbeing for all.** Naming systemic trauma can help the targets of these systems to heal the shame or self-blame they may carry because they have internalized a sense of culpability for their situation, and it can help those privileged by the systems to wake up to their privilege and leverage it to serve all beings, not just themselves.

Things are not black and white of course, and one person can both benefit from and be harmed by the different systems they are a part of. Similarly, someone who mostly benefits from the larger institutions they rely on may have experienced severe personal and interpersonal trauma. For example, a wealthy, able-bodied, cis-gender, neurotypical white man may have experienced severe personal trauma and be suffering immensely because of it. Conversely, someone who is marginalized in many ways may have come from a supportive family and have a strong community of support buffering them against the negative impact of systemic trauma. **Trauma is not reserved for the marginalized just like resilience does not only belong to those with privilege. The purpose of bringing systemic trauma into the lexicon of trauma informed work is not to create a competition about who is more traumatized, that serves no one. It is about making distinctions that can help carve a pathway towards healing.**