



Welcome!

The webinar will begin shortly...

Note: Your microphone is muted, and your camera is turned off. During the program, please use your device's speaker settings to adjust the sound level.

Treating Risky and Compulsive Behavior in Trauma Survivors

John Briere, Ph.D.

Department of Psychiatry and the Behavioral Sciences
Keck School of Medicine, University of Southern California

Johnbriere.com

Distress reduction behaviors (DRBs) often seen in clinical populations

- Self-injury
- Bingeing and purging
- Compulsive sexual behavior
- “Impulsive” suicidality
- Compulsive gambling, shoplifting, and buying
- Hair pulling and skin picking
- Reactive aggression

Why risky behaviors

- Borderline personality disorder
- Impulse control disorders
- Behavioral addictions
- New empirically-based attachment/emotional regulation models
 - *Reactive Avoidance model (RAm)*

Reactive Avoidance model

- Early childhood maltreatment or disattunement →
- painful implicit memories and attachment disturbance →
- reduced emotional regulation skills

Emotional dysregulation + triggers →
(DRBs, dissociation, substance abuse)

Functions of DRBs

- Soothing
- Distraction
- Communication
- To reduce dissociation
 - Hebb's optimal arousal curve
- Relief from guilt and shame through self-punishment
- Distress-incompatible states

Safety, stabilization, and harm reduction

- Use therapeutic relationship to stabilize
- Increase emotional regulation skills
 - Grounding, relaxation, breath training, mindfulness training
 - Steps of ReGAIN
 - Emotional detective work
 - Metacognitive awareness of triggered states

Trigger management

- Harm reduction
 - Delay as long as possible
 - Do as little as possible
 - Replacing versus distracting
- Psychoeducation on triggers
- Identification: Direct and indirect
- Urge/emotion “surfing”
 - You can't stop a wave, but you can learn to surf (Kabat-Zinn)
 - Half-life of triggered distress

Trigger management

- Brief version of ReGAIN/deescalation
 - Recognize that you've been triggered into countertransference
 - Ground, self-talk
 - Allow responses without out acting on them
 - Investigate (where is this coming from?)
 - Nonidentify
 - Metacognitive awareness of thoughts/feelings/memories as “just” that, not data on current reality

Suggested readings

- Briere, J. (2019). *Treating risky and compulsive behavior in trauma survivors*. NY: Guilford.
- Briere, J., & Eadie, E. (2016). Compensatory self-injury in the general population: Adverse events, posttraumatic stress, and the mediating role of dissociation. *Psychological Trauma: Theory, Research, and Practice*, 8, 618-625.
- Briere, J., Hodges, M., & Godbout, N. (2010). Traumatic stress, affect dysregulation, and dysfunctional avoidance: A structural equation model. *Journal of Traumatic Stress*, 23, 767–774.
- Briere, J., & Scott, C. (2014). *Principles of trauma therapy: A guide to symptoms, evaluation, and treatment*, 2nd edition, DSM-5 update. Thousand Oaks, CA: Sage.