

The history of the recognition of trauma is one of secrecy, silencing, and forgetting. To acknowledge trauma is to acknowledge the perpetration of extreme violence and the predictable impacts structures of inequality produce. It has only been in times of massive collective traumas coupled with the presence of strong political movements in which the recognition of trauma and survivors gain wider spread credibility.

To recognize trauma is to bear witness and speak honestly of horrible things that no one really wants to hear about. Perpetrators only ask us to be silent, forget, and to move on. Rarely does violence happen in a vacuum. It occurs within a greater social context in which survivors and perpetrators both vie for recognition from observers. Survivors ask for recognition of their agency, autonomy, and right to live free from violence. Perpetrators ask for observers to blame their victims, look away, and do nothing. Or to join in the abuse that is occurring.

Historically there has been much invested in the denial of the lived experiences of survivors of violence. Many survivors of sexual violence find themselves endlessly pathologized and locked in mental health jails. Anti-violence movements are met with militarized police in the streets and elaborate infiltration attempts in their organizing. History is presented scrubbed of the many genocides and human rights abuses committed. Endless hours of media exist to characterize victims of violence as deserving or asking for it.

In a society with a vested interest in silencing and forgetting, strong political movements to support people impacted become essential to challenging structures of domination and violence. In their absence, perpetrators will be able to continue committing acts of unspeakable violence in secrecy.



Organizational practices which drive connection and support:

Peer Support Networks (with limited access to mental health care, peer support networks become essential)

Continual validation and celebration of work or successes

Helping to establish a consistent "work" to "home" transition and boundary

Centering connection of group members through projects of aid and cooperation

How is consent when talking about heavy things practiced? There has to be space to address the very real issues we are facing, while respecting others need for boundaries to exposure

Do members know how each other want to be taken care of if something overwhelming happens? For example, writing a list of what folks would want to be greeted with after experiencing an arrest.

Encouraging down time for members

Checking in with comrades on where they are at and how they are feeling

Have members train in and become aware of active listening, assertive engagement, and basic advocacy practices.

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Organizational practices which can contribute to burnout and exacerbate trauma:

Unrealistic expectations of members in terms of "workload"

Top down hierarchies which encourage isolation and produce policies with little to no transparency (secrecy of members is a necessity, but receiving unclear orders/demands from shadowey "bosses" is not a horizontal way to organize)

Inappropriate demands in terms of time/deadlines Bullying or harassing of members

Patriarchal attitudes towards member display or discussion of emotions and feelings ("just get over it already")

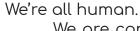
Not creating space for members to take breaks from organizing

No matter what it has to get done no matter what happens to us (romantic fatalism)

Treating people as disposable workers

No existing policies or practices to address harm perpetrated by members

Continual disregard of member physical safety Creating "real work" binaries, where care and compassion is devalued, and fighting and confrontation are prized



We are constantly mapping our surroundings and responding to endless environmental stimuli.

When we are faced with an event or experience which we perceive as threatening, our body has a dedicated, complex, and organized response to help us navigate danger. Our sympathetic nervous system and the adrenal-cortical system activate, which then shut down many automatic processes, like digestion, and we are flooded with adrenaline. Your body tenses up and you become more alert and aware of your surroundings.

It can be hard to make decisions when your body is flooded with adrenaline. You could feel extra excited, extremely angry, extremely afraid, and any number of other intense ways.

Our body reacts in this way to help keep us safe and is there to help us to run to safety or fend of an attack. Basically, to help us to perform an activity outside of our normal physical ability. These responses can activate even when not faced with a potentially threatening situation which would result in physical activity. Examples could include receiving a threat through facebook messenger or standing in front of a line of riot cops for hours and hours on end with nothing happening.

In these situations, where this adrenaline is NOT naturally processed out it stays in our system.



For people experiencing a threat which activates their sympathetic nervous system and their adrenal-cortical system, there are four recognized responses

Fight Flight Freeze or Fawn

There is NO WAY to predict how a person will react when faced with a threatening event. It is common for a person to freeze in one situation and fight in another. What is important to know is that, no matter what a persons' response, it is normal.

There are some things that can be very helpful for supporting yourself or others after having an experience where your body responds to a perceived or real threat.

Generally, getting your heart rate up (if medically safe) for a minimum of two minutes but ideally 15-20 minutes can help to process out the adrenaline. If it is not medically safe, doing full body tension release exercises are another option. Not processing out adrenaline on a long term basis can result in negative physical impacts. Exhaustion, fatigue, dangerous raises in cortisol levels, and heart disease can be very common.

In the immediate aftermath, it can be important to ensure you are well hydrated (drink at least 8 oz. of water), have access to food, and if possible, seek a trusted comrade to process your experience. A lot of what we know about how an event can be experienced as traumatic rests on a persons immediate social sphere's response to that event. Caring and empathic responses are what we all deserve after experiencing a threat.

Many of these overlap with the impacts of primary trauma but are meant to be more focused on what is sometimes referred to as compassion fatigue. When the weight of horrible things and the inability of the helper to affect immediate change become so overwhelming it fundamentally disrupts our ability for connection.

Trauma and violence have real impacts on ourselves and the individuals we organize with. It is of the utmost importance for EVERYONE in an organizing body to have some familiarity both with what trauma is and the potential impacts it can have on people. Believing that trauma and violence don't effect you reproduces aspects of the patriarchal culture that fascism is so steeped in. It can lead to comrades not receiving the support they deserve and individuals not acknowledging their own burnout.

Organizing against fascism brings us close to some of the most horrifying events and realities we live in. Fascists seek to recreate massive historical atrocities in the forms of genocide. They commit acts of domestic and sexual violence within their personal lives. They engage in terrifying and threatening behavior. We see comrades experience violence at their homes and in the streets and learn of attacks on community members. In order to ensure our capacity for long term dedicated militant anti-fascist organizing, we must be seeking to ensure our organizational values acknowledge and seek to mitigate the impact of that organizing.

The work doesn't heal our trauma, but our bonds, connections, and commitments to each other does.

For many people who work to support people who have been exposed to violence, vicarious trauma can have a very real and lasting impact on our ability to engage in long term support.

Vicarious trauma is the STRESS produced from helping or wanting to help a traumatized or suffering person. It is the STRESS produced from not being able to fix, from not having the right resources, and from continually controlling your own compassionate response. This is tied again to the feeling of being helpless and powerless within the face of horrible things.

Vicarious trauma can slowly and insidiously impact us. It can create a profound transformation in the "helper's" inner sense of identity and existence. Vicarious trauma going unaddressed leads to powerful and compassionate individuals burning out and becoming disconnected. When vicarious trauma is impacting multiple individuals within an organization, whole groups can disband or themselves start reproducing incredibly harmful and toxic practices.

Some of the more common impacts of vicarious trauma are:

Dehumanization of others

Disconnection

Fatigue

Extreme and persistent sense of hopelessness

Decision fatigue (being overwhelmed by even the most simple of choices)

Preoccupation with "work", nightmares

Counting score (well you think thats bad let me tell you this other thing)

Inappropriate humor (humor which dehumanizes)

Feeling unable to stop "work"....ever

Intense preoccupation

Many of us are going to be faced with or experience threatening events or already experience ongoing oppression. So what is trauma?

Trauma can be primary, secondary, multi generational, intergenerational, and vicarious. The impacts of multigenerational and intergenerational trauma are passed down through families and/or shared cultural or ethnic identities. Many of us who come to this work have previous primary trauma or intergenerational trauma, and have already lived with its impacts for many years. There are many people who have experienced a number of different traumatic events and experiences through their lives,

Trauma results either when we are faced with a threatening or extreme event OR prolonged exposure to mistreatment (like houselessness or racism) which result in profound and life changing impacts. Usually these experiences are coupled with a feeling of helplessness or powerlessness to stop or change.

Some common events that are associated with trauma are:

When we are faced with a potentially life threatening event

When we are faced with an event which we fear annihilation in terms of autonomy and self-determination

Witnessing extreme harm done

Sudden and unexpected losses/threats to ability to meet needs

Prolonged exposure to mistreatment

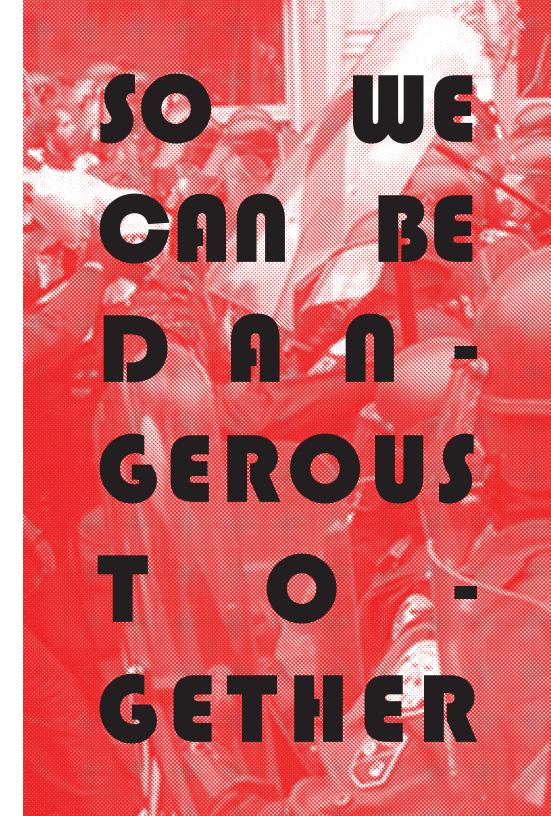
What's important is a persons perception of the event or threat to themselves. Two people can experience the same event and have two completely different reactions. One of the key things to think about is that internal feeling of being helpless or powerless. The bodies response to threat is a very complex and integrated process. When that organized response is made ineffectual, as when a person is powerless to act and seek safety, that system becomes overwhelmed and disorganized. The response can persist within the body in an altered and exaggerated state long after the person is free from threat. This resulting long term impact can have a profound and lasting impact on all aspects of an individual's life.

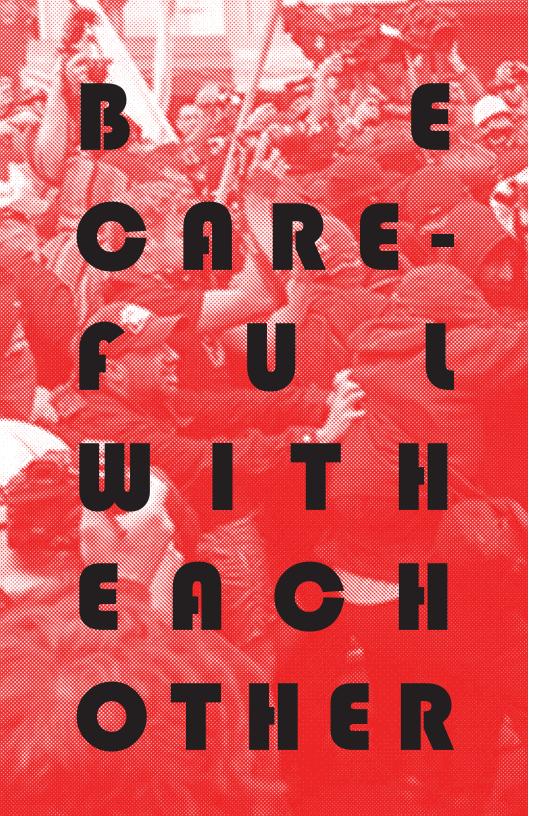
Trauma lives in the body and has cognitive, emotional, behavioral, and physical impacts. We tend to focus on and want a solely "mental process" to address trauma. For trauma to be addressed it has to be an active process. Something must be done, even if this is just talking.

Many people who experience a traumatic event experience what is called "hyperarousal". Hyperarousal occurs when the response to threat is disorganized to the point where a persons mind and body are now constantly organized to respond to threat, no matter their environment.

This can look like continual full body tension, seeing an "enemy's" face in every person you see, seeing the world as a battleground. It can make it harder to fall asleep at night, have you jumping at every noise, waking up multiple times from sleep. It is not uncommon for people experiencing post traumatic hyperarousal to receive diagnosis of fibromyalgia or persistent generalized anxiety disorder.

When our response to threat is activated, many cognitive processes like memory encoding, speech,





creative mapping, and most of what is referred to as "higher cognitive processing" shut down. This can lead to traumatic events not being processed in the same way other memories are. Most of our experiences are encoded in a linear narrative fashion, becoming part of an unfolding story we communicate about ourselves.

Traumatic events become essentially "stuck" outside of a person's narrative. They become an un-integrated event. This is why when speaking to survivors of trauma, we often hear fragmented and disjointed retellings. This is why supporting a person in processing, through some form of communication like talking or writing, can be incredibly essential in reintegrating that event back into a persons narrative.

Many people who experience trauma also experience traumatic triggers and flashbacks. This is where a person is exposed to environmental or internal stimuli in which the traumatic memory intrusively resurfaces and the body experiences the same effects as during the event. It can be easily understood as being actively unsafe within your body and memories. To be clear, being triggered is not feeling uncomfortable. Being triggered is to have a traumatic event intrusively reassert itself producing a whole body response.

For people who organize against fascism many of the needed strategies themselves necessitate ongoing exposure and interaction with violent content and the potential for engaging directly with physical violence. The work itself has to be kept confidential from many of our friends, family, and people who we routinely interact with, leading to extreme feelings of isolation and disconnection. Being associated with anti-fascist organizing represents an ever present

danger in being doxed and experiencing harassment and threats from fascists.

Engaging in dedicated militant anti-fascist organizing creates the perfect conditions for traumatic exposure and impact.

Most experiences which result in trauma happen outside of socially validated experience. We do not live in a culture which believes and seeks accountability for sexual assault survivors. We do not live in a culture that believes the extra judicial murders of people of color, predominately Black and Indigenous peoples, is fundamentally abhorrent and demands justice. We do not live in a culture that truly believes or understands the threat fascist organizing presents, and which routinely condemns community self defense. This active process of societal blame, forgetting, and denial is ever present for anyone who is exposed to violence.

As many of the impacts of exposure to violence and trauma can lead to isolation from ourselves and our communities, we are doubly isolated from societal recognition and support in that it simply doesn't exist on a wide scale yet.

Strong and resilient political projects which seek to defend communities and demand the recognition of the traumatic impact of violence are essential to challenging narratives of domination and oppression which sever our bonds to each other.

Some Common Impacts of Trauma:

Cognitive/Internal – Personal experiences of extreme or overwhelming emotions of fear, anxiety, anger, and other emotions. A person may appear to be calm, composed, and unaffected but inside they may experience:

Numbness Difficulty completing tasks

Guilt Dissociation
Shame Irritable
Fear Lack of hope
Denial Detachment

Self-blame Overwhelming sense of fear

Difficulty concentrating Constantly worry

Restfulness Lack of interest in activities

Helplessness

Physical - Reactions in the body that often have no apparent cause or trigger may include:

Tense muscles
Headaches and migraines
Stomachaches
Fatigue
Dizziness
Flashbacks
Hot/cold flashes
Teeth grinding
Jaw clenching
Muscle spasms

Eating disturbances Tremors
Sleeping problems Nausea

Easily startled

Behavioral – Common coping responses may include:

Isolation

Drastic changes in food consumption

Over consumption of substances (it is incredibly normal for folks to consume substances to support themselves. This is in direct reference to a person over consuming substances to cope with overwhelming thoughts and feelings)

Avoidance of certain places

Self-harm

