

Rooted

In love. In compassion. In neuroscience.

NMT as a Framework for Traumatic Grief



Not to make loss beautiful,
But to make loss the place
Where beauty starts.
Where the heart understands
For the first time
The nature of its journey.

— Gregory Orr,

MEET DR. BREE CONKLIN

Founder & Chief Everything Officer of Magnolia Harbor Carefarm

DSW, LCSW specializing in traumatic grief and complex trauma

Certified CBC Provider
Certified in EMDR
Circle of Security
Child-Parent Psychotherapy

Contributing Faculty and Field Instructor at the University of Tennessee

Research Fellow with The Young Widowhood Project

Research interests: Traumatic Grief & Carefarming, Human-Animal Connection and Animal Assisted Intervention in the therapeutic spaces of traumatic grief and complex trauma



THE UNIVERSITY OF
TENNESSEE
KNOXVILLE





WHAT IS MAGNOLIA HARBOR?

- 501(c)3
- Mission: Provide sanctuary to all beings and holistic therapy to those who have experienced trauma and traumatic grief
 - Therapeutic Program for Traumatically Bereaved Humans and...
 - Sanctuary for Rescue Animals
- One of only two carefarms in the United States that works with traumatic grief with this evidence-based model of care



THERAPEUTIC OFFERINGS OF MAGNOLIA HARBOR

- Individual Therapy
- Grief Support Groups
 - Traumatic Grief
 - Loss Due to Suicide
 - Widows and Kiddos
 - Caregivers
- Therapeutic Retreats
 - Loss Due to Suicide
 - Loss Due to Substance Use
 - Widows and Kiddos
 - Pet Loss
 - Caregivers for those living with Parkinson's



MAGNOLIA HARBOR IS...

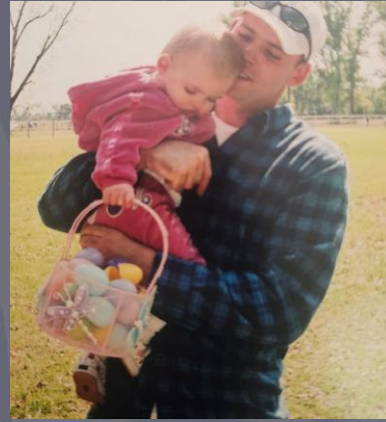
Compassion. Connection. Community.

With self.

With safe others.

With animals.

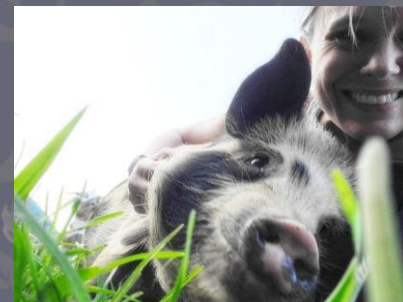
With nature



THIS WORK HONORS



AND THESE BEAUTIFUL BEINGS



DISCLAIMER

As we move through this material, you may have a variety of emotions come up

Try to extend compassion to yourself for anything you notice coming up

Know that it is okay to take a pause if you need



LEARNING OBJECTIVES FOR TODAY

- 1) Describe the organizing principles of NMT and describe the relevance to understanding trauma and grief on development
- 2) Describe how neurobiological dysregulation shapes the grieving space
- 3) Explain how NMT's brain-based sequencing provides a framework for organizing interventions for traumatic grief
- 4) Identify practical strategies and interventions informed by NMT that can support regulation and relational connection in traumatic grief
- 5) Apply case-based examples to demonstrate how NMT framework can be integrated into therapeutic practice and care settings



WHAT DOES THAT TRANSLATE TO...

Introduction

- A framework by which to recognize the presentation of symptoms within traumatic grief
- A guide to deepen understanding around the multi-dimensional impact of traumatic grief
- Introduce NMT as a framework to guide interventions that promote regulation and relational connection
- The hope of my heart....



*Only when we are
brave enough to explore
the darkness will we
discover the infinite
power of our light.*

Brené Brown



THE CRITICAL IMPORTANCE OF A NEUROBIOLOGICAL LENS IN GRIEF WORK

A neurobiological framework
allows grief work to be

- developmentally sensitive
- trauma-informed
- physiologically attuned

Address not just the story of
loss, but the way loss reshapes
the brain and body.

“The model we choose to use
to understand something
determines what we find.”

Iain McGilchrist

NEUROSEQUENTIAL MODEL OF THERAPEUTICS



WHAT IS NMT?

NMT is....

...a trauma-informed,
developmentally-sensitive
approach to the clinical
problem-solving process



NMT is NOT...

...and does not imply, endorse,
or require – any single
therapeutic technique or
method



4 KEY COMPONENTS

Developmental History

Timing, nature, and severity of trauma

Relational experiences and connectedness

Current Functioning

Strengths & Vulnerabilities

Relational abilities

Actual connectedness

Treatment Planning

Considerations for sequencing

Centered around developmental needs

Implementation

Make modifications as therapeutic work progresses



KEY PRINCIPLES OF NEURODEVELOPMENT & NEUROBIOLOGY

- 1) The brain is organized in a hierarchical fashion, such that all incoming sensory input first enters the lower parts of the brain
- 2) Neurons and neural systems are designed to change in a use-dependent fashion
- 3) The brain develops in a sequential fashion
- 4) The brain develops most rapidly early in life
- 5) Neural systems can be changed, but some systems are easier to change than others
- 6) The human brain is designed for a different world



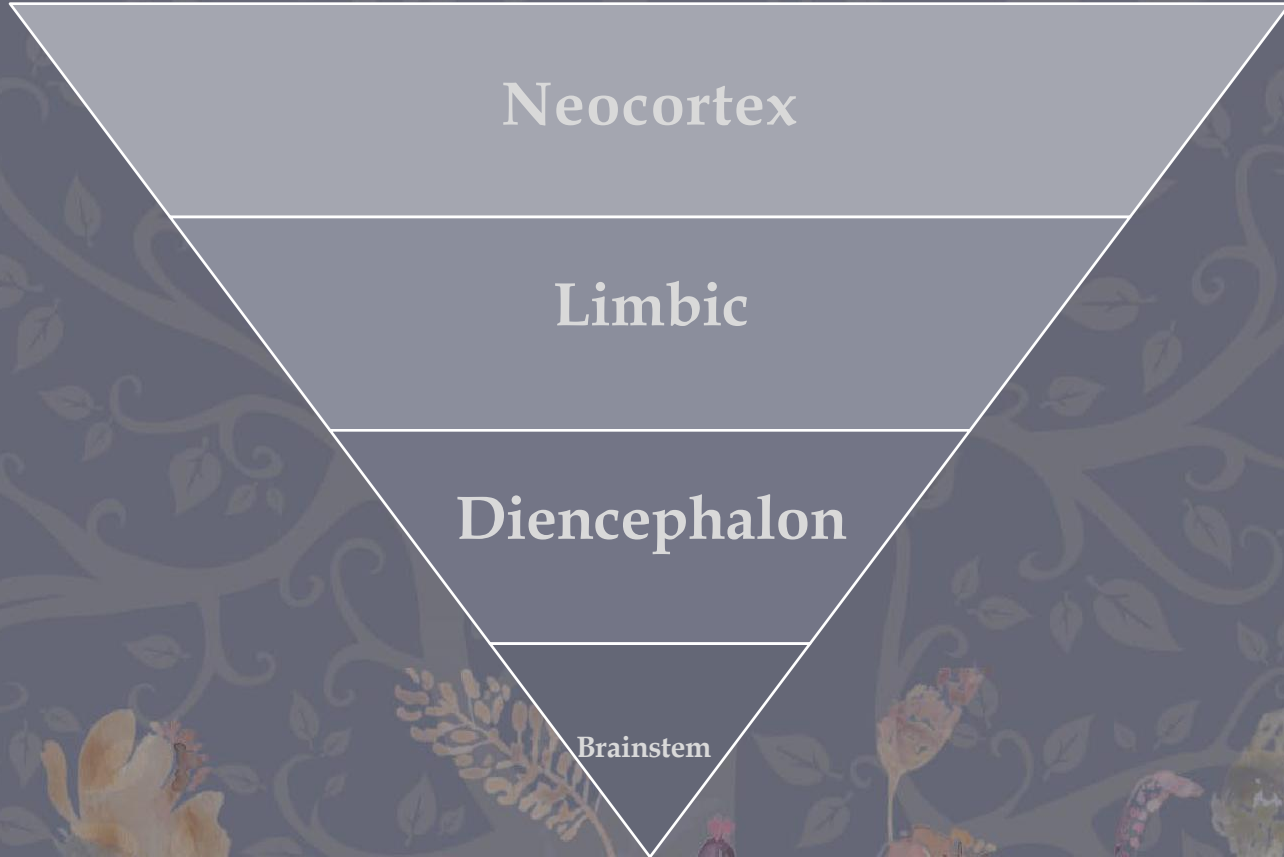
HIERARCHICAL BRAIN ORGANIZATION

Neocortex

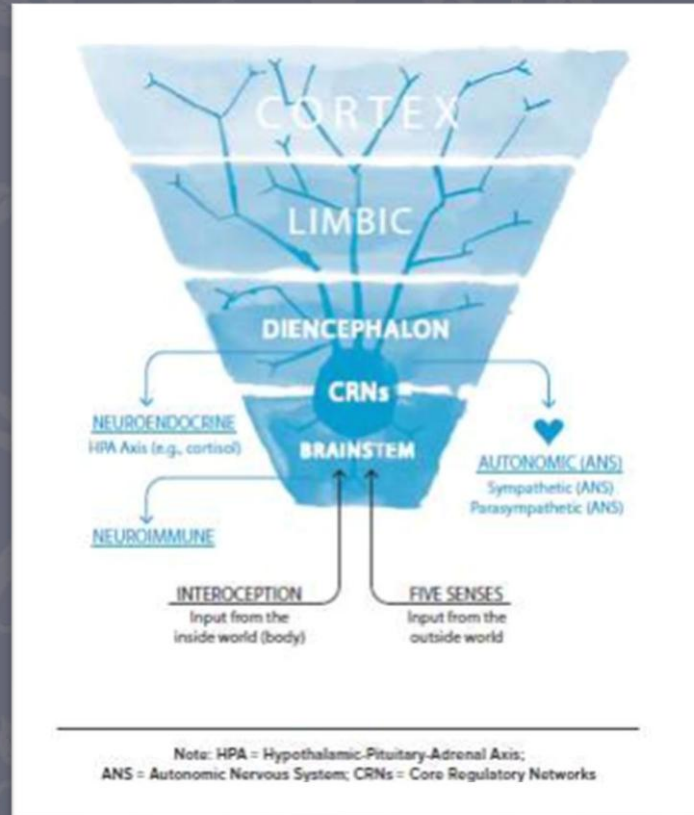
Limbic

Diencephalon

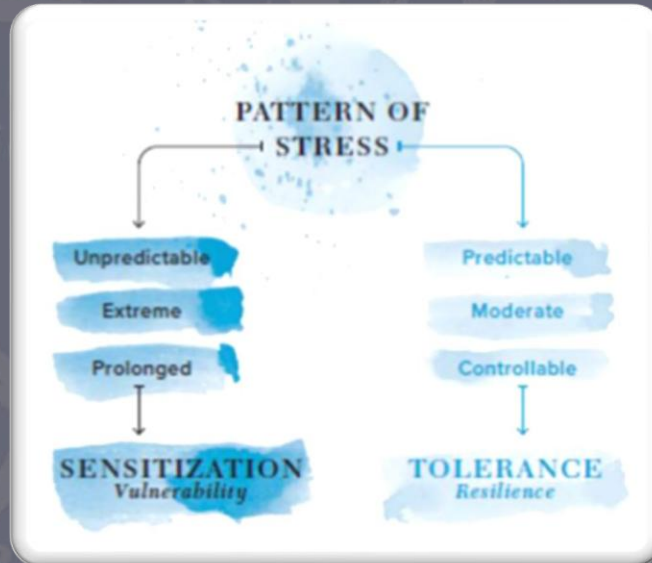
Brainstem



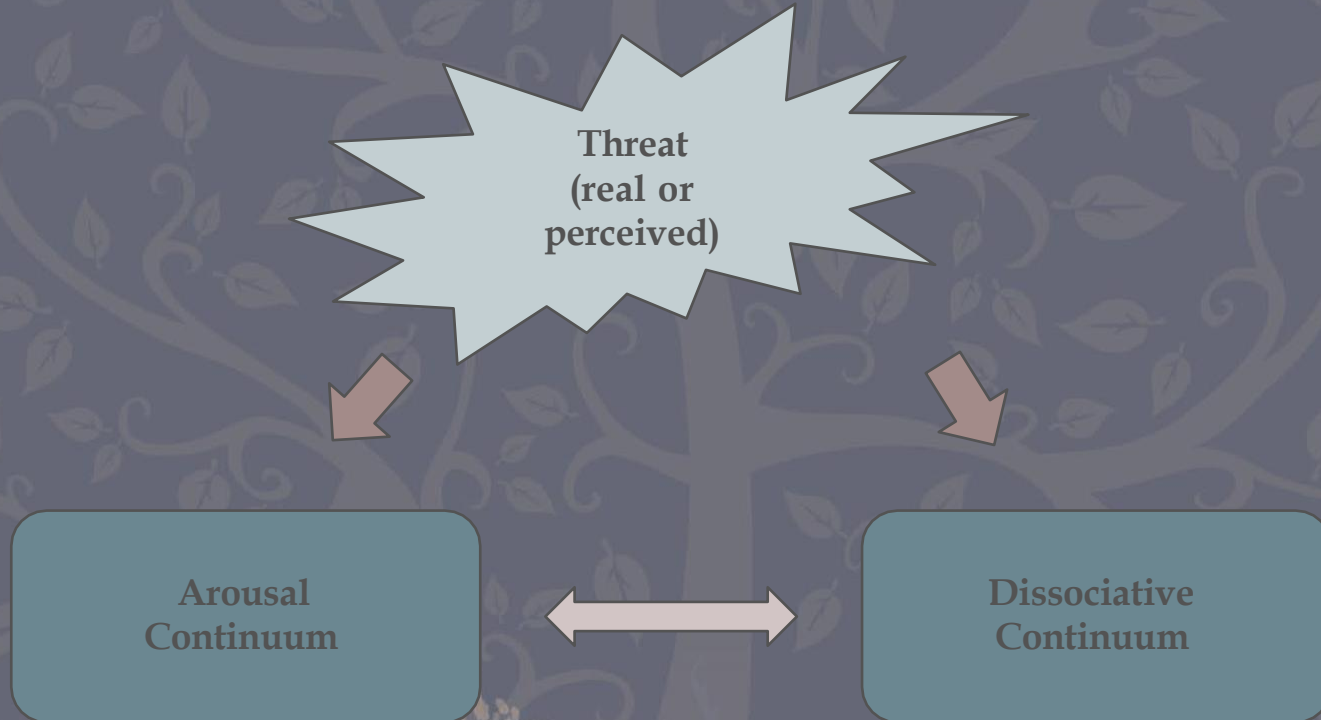
TREE OF REGULATION



PATTERNS OF STRESS ACTIVATION



CONTINUUM OF ADAPTIVE RESPONSES TO THREAT



STATE DEPENDENT FUNCTIONING

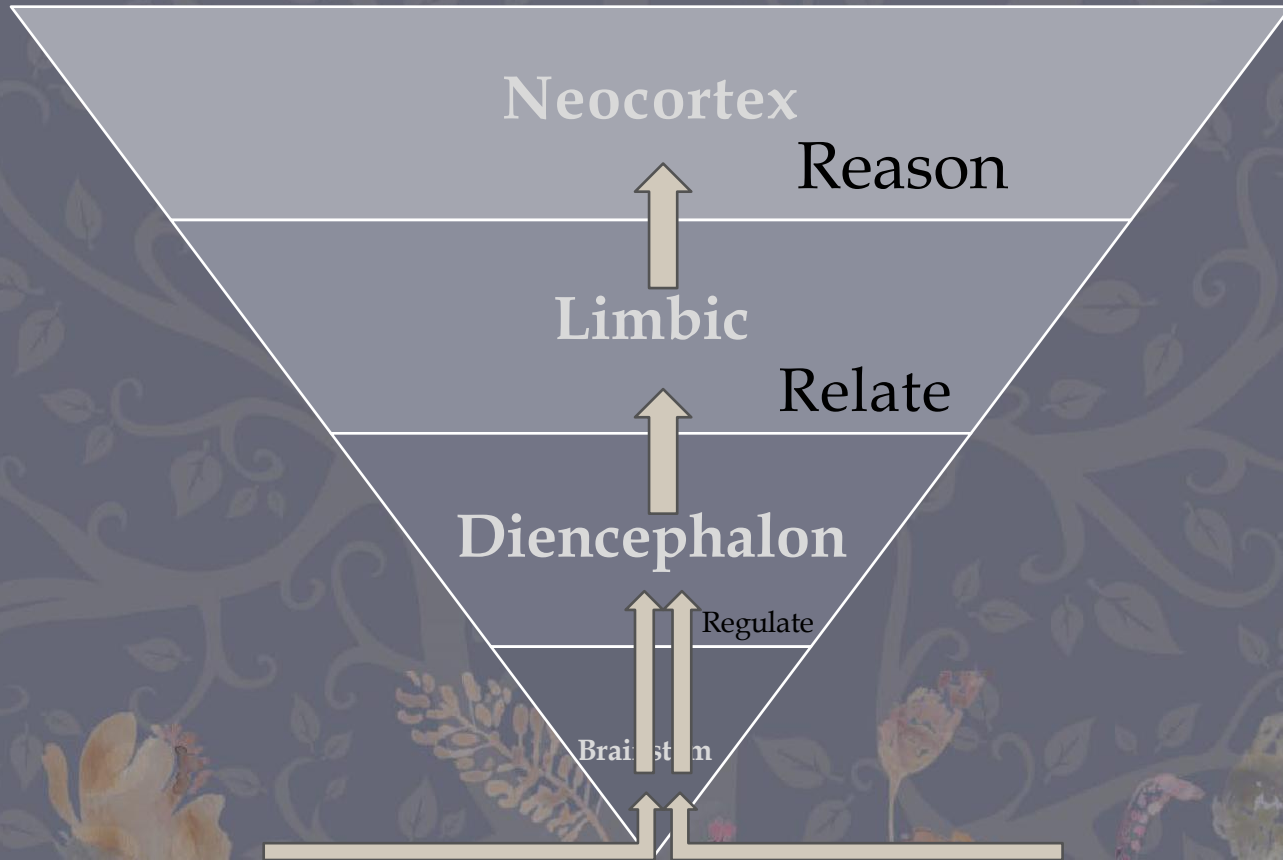
“STATE”	CALM	ALERT	ALARM	FEAR	TERROR
<i>DOMINANT BRAIN AREAS</i>	Cortex (DMN)	Cortex (Limbic)	Limbic (Diencephalon)	Diencephalon (Brainstem)	Brainstem
<i>ADAPTIVE “Option” Arousal</i>	Reflect (create)	Flock (hypervigilance)	Freeze (resistance)	Flight (defiance)	Fight
<i>ADAPTIVE “Option” Dissociation</i>	Reflect (daydream)	Avoid	Comply	Dissociate (paralysis/catatonia)	Faint (collapse)
<i>COGNITION</i>	Abstract (creative)	Concrete (routine)	Emotional	Reactive	Reflexive
<i>FUNCTIONAL IQ</i>	120–100	110–90	100–80	90–70	80–60

SEQUENCE OF ENGAGEMENT:

REGULATE

RELATE

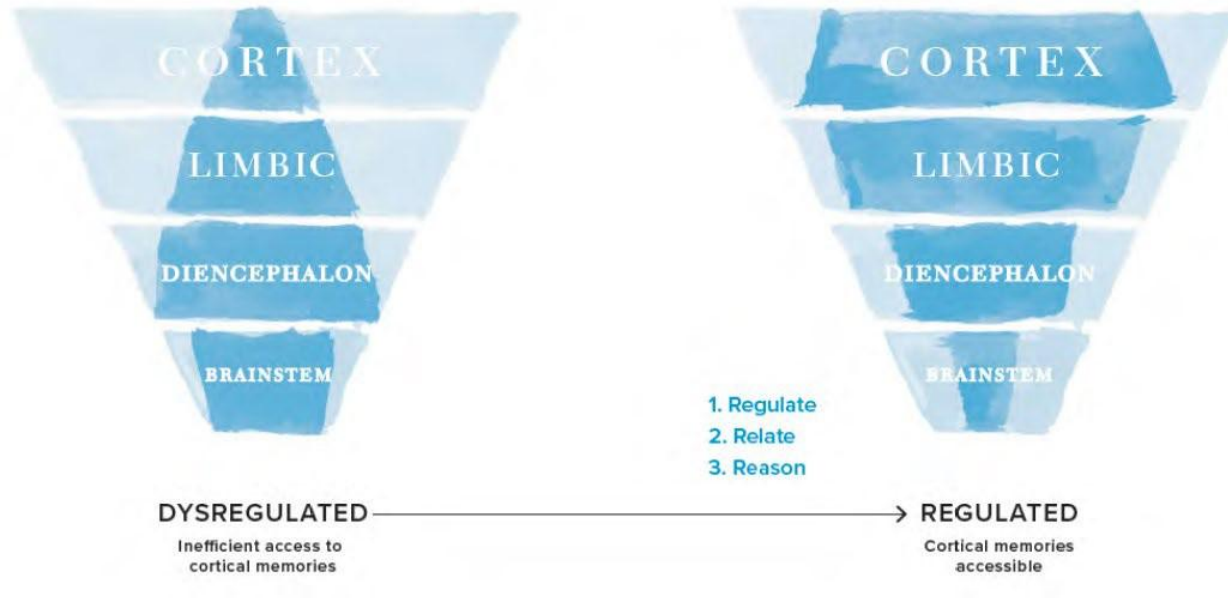
REASON



SEQUENCE OF ENGAGEMENT

Figure 11

STATE DEPENDENCE AND MEMORY



KEY TAKEAWAYS FOR NMT



WHAT IS GRIEF?



WHAT IS GRIEF?

Cognitive and emotional reactions that follow the death of a loved one

Strong feelings of yearning, longing, and sadness, along with anxiety, bitterness, anger, remorse, guilt, and/or shame

Varies in duration & intensity and may fade & reappear



THE REALITY OF DISCONNECTION

“The harsh contrast between our everyday drive to connect with the people we’re closest to and the harrowing reality that no connection is available is ‘one of the most painful experineces a human being can suffer.’”

--Candace Ossefort-Russell



A close-up profile of a grey donkey's head and neck, looking slightly down and to the right. The background is a vibrant sunset sky with orange, pink, and blue hues, and a line of trees on the horizon. A semi-transparent grey rectangular box is overlaid on the donkey's head, containing the text "WHAT IS TRAUMATIC GRIEF?".

WHAT IS TRAUMATIC GRIEF?

NUANCES OF TRAUMATIC GRIEF

May be subject to
cultural interpretation

Sudden & unexpected death

Out of synch with time

Violent and/or disfiguring
death

Multiple, cumulative deaths

Death after prolonged
suffering

Death of a child at any age
for any reason

All Symptoms Are Adaptive

&

Context Matters



CHECK ON YOUR ROOTS

What do you notice coming up as we touch into what types of losses fall under traumatic grief?





PREDICTORS IMPACTING THE PRESENTATION OF SYMPTOMS



A Few Factors

Age (you & loved one)

Expected vs
Unexpected

How loved one died

Degree of dependency
within the relationship

Social Support

Secondary Losses

Children

Developmental age

Relationship to
deceased prior to death

Parent's capacity for
attunement

Presence of other
attachment figures

Opportunity to have a
continued bond

Expectations

There is a tendency to underestimate how intensely distressing and disabling loss usually is and for how long the distress, and often the disablement, commonly lasts. Conversely, there is a tendency to suppose that a normal healthy person can and should get over bereavement not only fairly rapidly but also completely.

-- Bowlby, 1980, pp. 7-8

TRAUMATIC GRIEF IMPACTS ALL DOMAINS OF FUNCTIONING

Cognitive Effects of Traumatic Grief

- Avolition/no motivation
- Impaired memory
- Difficulty concentrating & making decisions, distractible
- Disorganized thoughts
- Ruminative thoughts (esp. re: physical health & safety)
- Survivor's guilt/feelings of responsibility

Behavioral Effects of Traumatic Grief

- Substance abuse
- Social isolation
- Recklessness risky or unpredictable behavior
- Regression
- Avoiding responsibilities or overworking
- Suicidal gestures
- Appetite changes
- Impulsivity

Physiological Effects

- Rapid heart rate
- Shallow breathing
- Global pain
- Inflammatory diseases
- Hyperarousal
- Gastrointestinal
- Headaches/Stomach Aches
- Sensory malfunctions

Emotional Artifacts of Traumatic Grief

- Numbness/Emotional anesthesia
- Apathy
- Rigidity
- Fear & Anxiety
- Depression & Despair
- Anger & Rage
- Decreased connection & sense of belonging
- Freneticism

Interpersonal Effects

- Relational distress
- Social isolation
- Communication issues
- Increased conflict
- Attachment Concerns
- Family Relationships
- Social Relationships
- General Lack of Interest in Social Activities



COGNITIVE EFFECTS OF TRAUMATIC GRIEF

Cognitive Effects of Traumatic Grief

- Avolition/no motivation
- Impaired memory
- Difficulty concentrating & making decisions, distractible
- Disorganized thoughts
- Ruminative thoughts (esp. re: physical health & safety)
- Survivor's guilt/feelings of responsibility



COGNITIVE EFFECTS OF TRAUMATIC GRIEF

“I just can’t remember things anymore.”

“My brain just goes ‘bleh’ when I try to think of things. It is like everything is important and I can’t figure out what to do next.”

“I don’t understand why I lived and he didn’t...and I feel like maybe I made this happen because 8 months ago, I wished he would die.”

“I was sick and then my mommy got sick and then she died.”



The background of the slide is a dark blue-grey color with a repeating pattern of light green leaves and vines. There are several large, stylized flowers in shades of pink and purple scattered around the edges. In the top right corner, there is a small, detailed illustration of a purple butterfly.

BEHAVIORAL EFFECTS OF TRAUMATIC GRIEF

- Social isolation
- Substance abuse
- Recklessness risky or unpredictable behavior
- Regression
- Avoiding responsibilities or overworking
- Suicidal gestures
- Appetite changes
- Impulsivity

BEHAVIORAL EFFECTS OF TRAUMATIC GRIEF



PHYSIOLOGICAL EFFECTS OF TRAUMATIC GRIEF

- Rapid heart rate
- Shallow breathing
- Global pain
- Inflammatory diseases
- Hyperarousal
- Gastrointestinal
- Headaches/Stomach Aches
- Sensory malfunctions

The experience of grief, then, is “brutally physiological. It literally takes your breath away.

Its physicality is also what makes grief so hard to communicate to anyone who hasn’t experienced it.”

--Ossefort-Russell, 2018



PHYSIOLOGICAL EFFECTS OF TRAUMATIC GRIEF



*"I just want
to do yoga
again, but
my back
won't let
me."*



EMOTIONAL ARTIFACTS OF TRAUMATIC GRIEF

- Numbness/Emotional anesthesia
- Apathy
- Rigidity
- Fear & Anxiety
- Depression & Despair
- Anger & Rage
- Decreased connection & sense of belonging
- Freneticism



INTERPERSONAL EFFECTS OF TRAUMATIC GRIEF

- Relational distress
- Social isolation
- Communication issues
- Increased conflict
- Attachment Concerns
- Family Relationships
- Social Relationships
- General Lack of Interest in Social Activities



INTERPERSONAL EFFECTS OF TRAUMATIC GRIEF



“..it is so beautiful they died so close together.”

“Everyone sees the happy me...they have no idea what it is like on the inside because they don't want to know.”

“I smiled at church, and someone said, “Oh! You are finally feeling better!”

“...don't try to fix what can't be fixed. By accepting the new sad, grieving me as someone who is ok to be with and not expecting me to feel like I need to get over this or move on and become the happy person I was. Not making me feel like I have to wear a mask and pretend I am someone I am not.”





“My grief is messy...it isn't peaceful.

I need you to sit with me in the mess.

I need you to not expect me to make it pretty or peaceful.”



RECONNECT WITH YOUR ROOTS

*What do you notice in
your body?*



*What questions do
you have so far?*

A photograph of a field of wildflowers. In the foreground, there are several purple flowers with small, clustered blossoms. To the right, there are taller yellow flowers with larger, single petals. The background is a soft-focus field of green grass and more flowers. A semi-transparent grey rectangular box is centered over the image, containing white text.

HOLDING TRAUMATIC GRIEF IN AN NMT FRAMEWORK

DEMYSTIFYING GRIEF RESPONSES

“When we have a coherent way to make sense of the intensity that’s happening in front of and inside us, we can return to a safe compassionate physiological state from which we can offer care that can return our clients to safety.”

--Geller & Porges, 2014; Ossefort-Russell, 2013; Porges, 2013



THE 3 E'S OF TRAUMA

Event

The event that occurred

Experience

Ways in which the event is experienced

Effects

The symptoms after the event and experience



THE EFFECT OF TRAUMA

*“Trauma is not what happened **TO** you but what happens **INSIDE** of you.”*

--Gabor Mate



HOW DOES THIS HAPPEN?

Our bodies are brilliantly designed with a built-in surveillance system that watches for signs of safety and warnings of danger ahead



NEUROCEPTION

Inside of
Us

- Heartbeat, breath, organs, muscle action

Outside
of Us

- Immediate environment
- Large world

Between
Us

- Communication with other systems
- One-on-one or in groups



Neuroception

Our nervous system listens to what's happening inside our bodies. It scans our environment and pays attention to the messages others send us.

When it senses safety, it automatically moves us to a state of connection. When it senses a threat, it moves us into a state of protection to keep us safe.

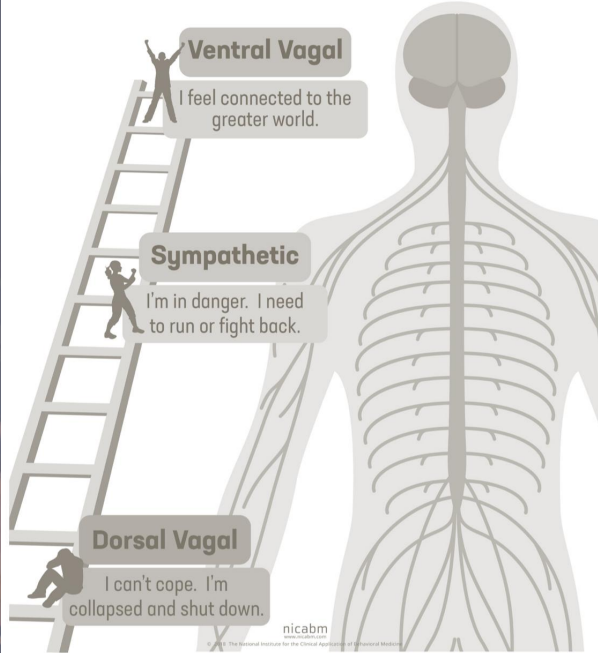


HIERARCHICAL SYSTEM

NICABM

Free Report - pg. 4

Polyvagal Theory: The Autonomic Ladder Understanding the Nervous System Adapted from Deb Dana, LCSW



Ventral Vagal

- System of Connection

Sympathetic

- System of Mobilization

Dorsal Vagal

- System of Shut Down



HIERARCHICAL SYSTEM

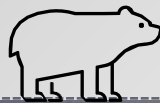
Ventral Vagal

- System of connection
- Connect & communicate
- Organized & can go with the flow
- Access to emotions: calm, happy, playful, engaged, attentive, active, excited, passionate, alert, relaxed, curious, willing to experiment



Sympathetic

- System of action & mobilization
 - Every day: regulate rhythms & energy
 - Survival: fight/flight
- Anxious, angry, overwhelmed, distracted, difficulty with focusing, trouble with follow-through
- No one can be trusted & no place is safe



Dorsal Vagal

- System of shutdown
 - Every day: Regulates digestion
 - Survival: Shutdown
- Disconnected, shutdown, numb
- Chronic fatigue & drained, no energy for tasks of daily living
- Hopeless & helpless



ANS is always on guard asking: "Is this safe?"

HONORING THE POLYVAGAL SYSTEM

Of Note

- Our bodies are designed to process information all the time
- Our nervous system is hierarchical
- We move up and down the hierarchy throughout our entire day

Review of the Systems

- System of Connection (Ventral)
 - Organized
 - Engaged
- System of Action (Sympathetic)
 - Chaotic Energy
 - Anxious, Angry
 - Overwhelmed
- System of Shutdown (Dorsal)
 - Hopeless, helpless
 - No way out
 - Chronic fatigue

Trauma & the Nervous System

- Trauma disrupts our ability to be connected
- Feeling safe with other people is one of the single most important aspects of mental health;
- Traumatized individuals are chronically out of synch with others
- “Trauma is about a loss of connection—to ourselves, to our families, and to the world around us.”—Deb Dana



MAPS

Maps give us tools to store and exchange knowledge about space and place.

Where am I?

How did I get here from there?

How do I get there from here?

We need landmarks to orient us, and we need language to label what we are experiencing

Human emotions and experiences are layers of biology, biography, behavior, & backstory.

-- Brene Brown



DEMYSTIFYING GRIEF RESPONSES

“Demystifying people’s
behavior helps to regulate it.”

--Porges, 2011



“Understanding the pathways and patterns of our autonomic responses reduces shame and self-criticism and makes room for curiosity and self-compassion...”



EVALUATION EXACERBATES; COMPASSION HEALS

“Am I recovering from the *illness* of grief at a proper rate?”

Much of our literature compels us as therapists to distinguish “normal” grief from grief that is exaggerated, abnormal, complicated, excessive in duration, too strong, or prolonged.

“Compassion is neurophysiologically incompatible with judgmental, evaluative, and defensive behaviors and feelings.”

--Porges, 2012



LOSS: HIGH-RISK CONDITIONS



LOSS



LOSS: AN INTRINSICALLY THREATENING ENVIRONMENT

Loss thrusts grievors into a painful, chaotic environment

Features of Loss

- Violation of expectancy
- Permanent absence generating primal attachment distress
- Feared to be unbearable emotions
- Extreme physical symptoms
- Self-evaluative narratives

Social engagement behaviors are displaced with defensive reactions

No matter who we are or how much support we have, neuroception is overwhelmed with internal and external cues that shout "*danger*"



FACTORS THAT INFLUENCE INDIVIDUAL NEUROCEPTION

Temperament

- Introversion/Extroversion
- Physiological sensitivity
- State regulation difficulties

Experiential History

- Attachment history
- Trauma history
- Cultural history

Physical & Emotional Input from Body

- Intense emotional activation
- Physical activation

Present Physical Condition

- Feeling tired or hungry
- Injured
- Ill

Present States of Mind Influenced by Meaning of Loss

- Quality & closeness of relationship
- Whether loss was traumatic
- Life phase of griever

EXTERNAL ENVIRONMENTAL FACTORS INFLUENCING NEUROCEPTION AFTER LOSS

Unsought
External
Uncertainty

- Systems like uncertainty only if there's safety in the background
- W/o safety, unpredictability is unsafe
- Loss upends roles, routines, and identities
- This degree of uncertainty may cue the nervous system into sensing danger (mobilization) or life-threat (shutdown)

Physical
Absence of
Loved One

- Acute disconnectedness
- Social expectancy violation

*Reminder:
It is not about the event
itself, but about the
response of the system to
the event*



INTERNAL ENVIRONMENTAL FACTORS INFLUENCING NEUROCEPTION AFTER LOSS

Absence of Loved One from the Inner World

- Attachment reorganization is one of the most painful aspects
- “Although bereaved individuals derive some comfort from the presence of close, supportive friends or family members, these support networks do not fill the emotional gap left by the attachment figure.”
--- Fraley & Shaver, 1999

Internal Uncertainty: Shattered Assumptions

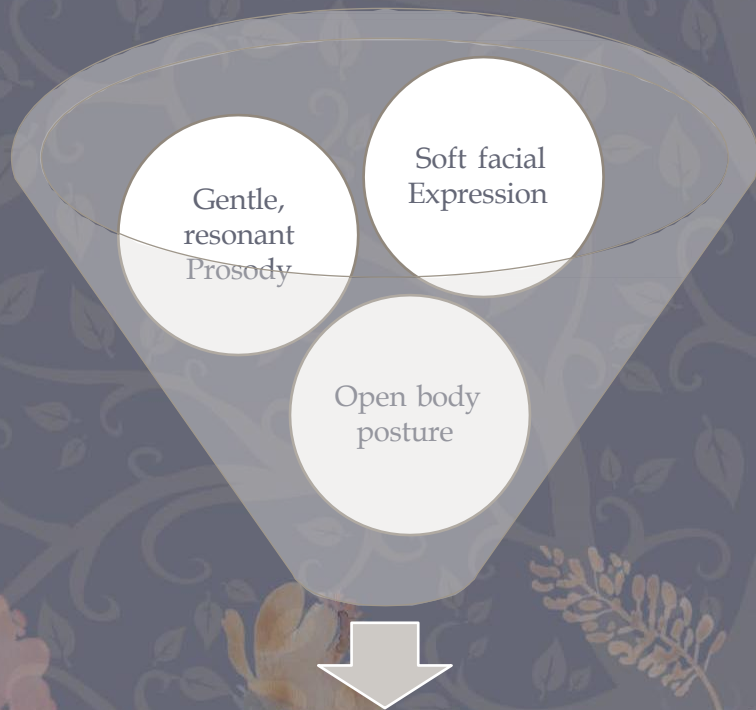
- Loss of close person rocks sense of identify
- Assumptions about the world help perceive events, construct plans, and forecast the future
- Loss can create intense awareness that things can happen over which there is no control, that we are not ultimately protected and safe, and that the universe might contain elements of randomness and chance

Ongoing, Unfamiliar Feared-to-be- Unbearable emotions

- Unfamiliarity and intensity of responses might cue system into danger and life-threat



WHAT'S LOVE GOT TO DO WITH IT



Loving Presence



ANCHORS INTO RELATIONAL SAFETY



POLYVAGAL ANCHORS: RELATIONAL CONNECTION



“Our capacity to heal ourselves is physically linked to our relationships with other people...the quality of person-to-person interactions... is critical for survival”

—Porges, 2011, p.295



“FOR THE FIRST TIME IN MY
WHOLE LIFE I FELT SAFE”



CLINICAL APPLICATION: CASE STUDIES



YOU KNOW YOU ARE WORKING WITH TRAUMATIC GRIEF.... NOW WHAT?

Take a Deep Breath!

Truly.

When you don't know what to say, take a deep breath, get grounded in your heart, compassion, and mindful presence .

Whole-Hearted Presence to Bear Witness

Traumatically bereaved humans want you to witness their grief...and that requires your whole-hearted presence.

Consultation & Resources

Please reach out to me via email

Dr.bree@magnoliaharbor.org

if you would like additional resources or to connect about consultation



CONTACT INFORMATION

Dr.Bree@magnoliaharbor.org

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website! 



REFERENCES

