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Book Review:

Psychology of Trauma 101

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PSYCHOLOGY OF TRAUMA 101. Lesia M. Ruglass and Kathleen Kendall-Tackett. *Springer*, 2015, 248 pp.

Psychology of Trauma 101 is part of the Psych 101 Series that includes *Motivation 101*, *Emotional Intelligence 101*, and so forth. The goal, I infer, is to bring the basics of psychology to the public, one topic at a time. Psychology of trauma is not typically presented to students or the public this way. Typically, an introductory psychology class would cover stress, mental health,

and related topics, but leave psychology of trauma for an upper-division course. Seeing *Psychology of Trauma 101* sitting next to *Intelligence 101* was unexpected, but it makes sense. Trauma affects a lot of people, and surely as many would benefit from knowing the basics as they would for the basics of, say, IQ testing.

Chapter 1, *What is Psychological Trauma?*, sold me on assigning this book in my Psychology of Trauma class. As the authors write, there is confusion among students and the public about what trauma really is. This chapter covers every point I cover the first week of Psychology of Trauma: trauma is overwhelming; it causes not only classic PTSD but many other reactions; and events can be single or chronic. Child maltreatment, intimate partner violence, sexual violence, military sexual trauma, sex trafficking, combat-related trauma, civilian war trauma, disasters, accidents, and serious medical illnesses. This comprehensive and well-referenced list is an excellent introduction to the breadth of potentially traumatic experiences as well as differences and commonalities among them.

The chapter on *How Do You Diagnose Posttraumatic Stress Disorder?* includes DSM-5 criteria along with a brief history of the criteria in early versions of the DSM. A strength of this chapter is the detailed list of assessment measures for PTSD. The emphasis here is really on valid and reliable assessment of PTSD as defined by the DSM-5, and readers benefit from the first author's strong background and experience in this area. For a more complete discussion of complex PTSD, readers can go to the penultimate chapter, *Questions and Controversies in Trauma Psychology*. Undoubtedly many readers will appreciate the emphasis on the need for a strong empirical basis for the classification and assessment of disorders. Perhaps because of my

background in developmental, and not clinical psychology, I prefer to cover complex PTSD more substantively in my Psychology of Trauma class, and I can still easily do so by supplementing with complementary readings.

Similarly, the focus on evidence-based treatments and complementary and alternative treatments heavily favors psychotherapeutic and pharmacological approaches that have been shown to reduce classic PTSD symptoms and sleep disturbance. There is virtually no discussion of treatments for common reactions to trauma such as a lack of trust, attachment-related difficulty, and alterations in memory and system of meaning. From the perspective of a professor, I am happy to have students read this book as a cogent explanation of this perspective along with other readings that allow for a broader discussion of common experiences following trauma. I would have some reservation about handing this book to someone who recently experienced trauma, particularly interpersonal trauma that might be more associated with a wider set of experiences without explaining the limits of the information presented here.

The *Trauma and Health* chapter is a real strength, and reflects the expertise of the second author. This is not just a list of correlations among types of trauma and bad health outcomes. Rather, there is a good discussion of the variety of pathways by which trauma affects health. Similarly, the *Gender, Race/Ethnicity, and Culture in Trauma Psychology* chapter provides an unusually insightful analysis of these issues, especially for such a brief book.

There are two serious omissions in this book from my perspective. First, there is very little discussion of the effects of trauma on children or effective treatment for children. The lack of child or developmental focus is likely a byproduct of the tight page limit, but it nevertheless

limits the usefulness of the book. There is also very limited discussion of dissociation. There is an extended discussion of the validity of the Dissociative Identity Disorder diagnosis that contains accurate information, but it stands out as odd that there is a need to defend this particular disorder, and also that it is not placed within the wider set of dissociative experiences that survivors report and that are included in the DSM.

If an editor approached me with the task of writing a brief Psychology of Trauma 101 book, I am not sure I would take up the task. I may conclude that this topic just does not lend itself to the form. Having read this book, I could no longer justify this position though. I see too many people who experience trauma themselves or among their friends and family and who have absolutely no points of reference to understand even the basics. This book provides the basics, and I look forward to hearing my Psychology of Trauma students' reactions to it this term.