**What are Traumatic Memories?**

- When people talk about *traumatic memories* they usually mean *implicit* (non-conscious) body memories.

- *Traumatic memories* often intrude on the present as though the threat is current (van der Kolk, 2015).

- *Traumatic memories* often return as fragments of intense feelings, sensations, emotions, thoughts and sensory experiences; e.g. images, sounds, smells.

**What happens in the brain?**

- Trauma blocks *explicit* processing and heightens *implicit* processing (Siegel, 2012). This means that conscious recall is inhibited while sensory recall is heightened.

- Trauma limits the function of the hippocampus (due to increased cortisol), disrupts the consolidation of explicit memory and activates the amygdala (leading to release of adrenaline which intensifies implicit memory).

- Blocked explicit -alongside enhanced implicit - processing (Siegel, 2012) helps to explain the sudden intrusive body sensations, emotions, sensory experiences from the past.

- Research confirms that while traumatised people often can’t talk about their experiences they are often compelled to re-enact them (van der Kolk, 2015) without understanding the meaning behind the behaviour.

- Trauma is largely remembered as physical sensations, automatic responses and involuntary movements (Ogden et al, 2006) as well as unconscious ‘acting out’ behaviours (Levine, 2015).

- The need to resolve traumatic experience can fuel repetitive compulsive actions and behaviours until the trauma can be processed (van der Hart et al, 2006).
Recognising the relationship between repetitive, problematic behaviour and unresolved trauma can enhance the support trauma survivors need to recover.

How is betrayal relevant?

- Sometimes ‘forgetting’ is adaptive and aids survival (Freyd & Birrell, 2013; Silberg, 2013) e.g. when duty of care is violated and trauma and caregiving come from the same source (Silberg, 2013).

- The concept of ‘betrayal trauma’ (or betrayal of trust) helps explain the ‘forgetting’ of early life abuse because children need to preserve the attachment bond to caregivers (Freyd, 1991).

- ‘Betrayal blindness’ (not seeing when someone betrays our trust) or ‘unawareness’ and ‘forgetting’ is a survival strategy which occurs in diverse relationships in which dependency trumps the need for protective action (Freyd & Birrell, 2013).

- Adults as well as children, can also ‘not see’, ‘not know’ and ‘not remember’ traumatic experience.

- While ‘forgetting’ the trauma of betrayal can aid survival it can also threaten health.

Issues around disclosure

- Disclosing or not disclosing (i.e. when trauma can be spoken about) depends enormously on other people’s reactions (Freyd & Birrell, 2013).

- The majority of people who have been sexually abused as children do not disclose until they are adults and some never tell at all (Freyd & Birrell, 2013).

- Disclosure is a process (rather than an event) affected by social context, issues of safety and the potential for adverse repercussions.
Not disclosing, delayed disclosure, and/or retraction are common when the perpetrator is close to the victim (Freyd & Birrell, 2013, p.123).

The importance of social context

- Both remembering and ‘forgetting’ (i.e. explicit and conscious) can be healing and/or destructive.

- Social contexts and power disparities, as well as neurological factors, affect the encoding, retrieval, and reliability of memory (Barlow et al, 2017).

- Social power disparities can influence what it is appropriate to remember (Barlow et al, 2017).

- Internal and external processes not only affect what we disclose but what we allow ourselves to know (Freyd & Birrell, 2013).

To read the Fact Sheet (including references): The Truth of Memory and the Memory of Truth; click here
For the additional three summary Fact Sheets on Memory – Classification, Understanding Memory, Recovered Memory; click here