

**angie**  
davis



**y e s**  
**suffering and loss**

**a n d**  
**healing and hope**

my 10 year journey with TBI

# TODAY'S JOURNEY

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The Set Up  
The Story  
The Take Aways  
The Yoga & Meditation  
Q & A

5

4

3

2

1



# THE SET UP

## ANGIE'S INTERSECTIONALITY

### Areas of Privilege



Safe Spaces: in which people, often of marginalized or underrepresented social groups, can say, be, and share their experiences without fear or judgment



### Areas of Marginalization



Cisgender, white



Woman



Educated professional,  
trained elementary  
school teacher with two  
university degrees



TBI recovery



Rural dweller



Injury & illness: Invisible neck injury, neurodiverse from brain injury, pain, role loss, income loss, status loss

### TRIGGER WARNINGS

BIG T, LITTLE t



Injuries to the face and neck, dental injuries



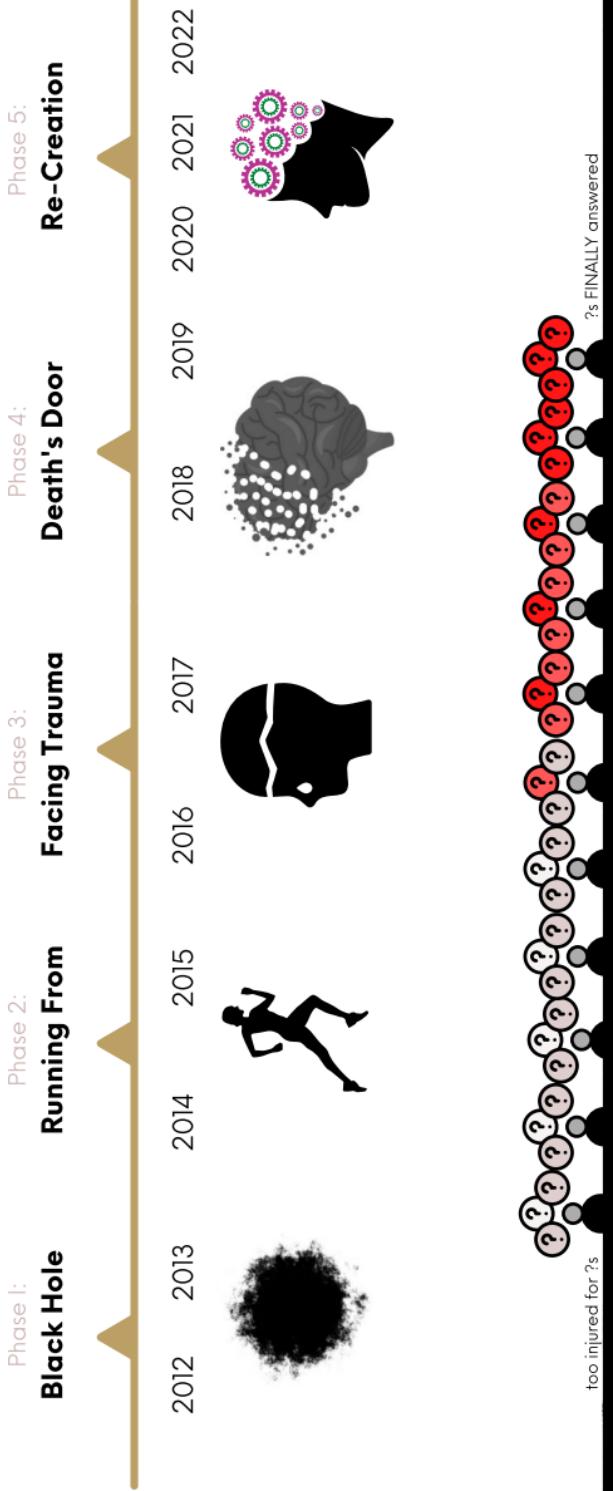
Medical undiagnosis, misdiagnosis, marriage loss

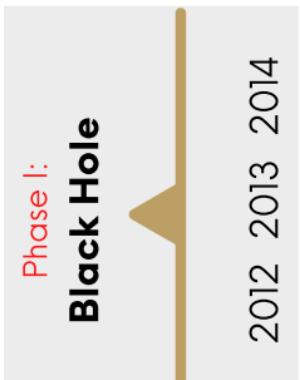
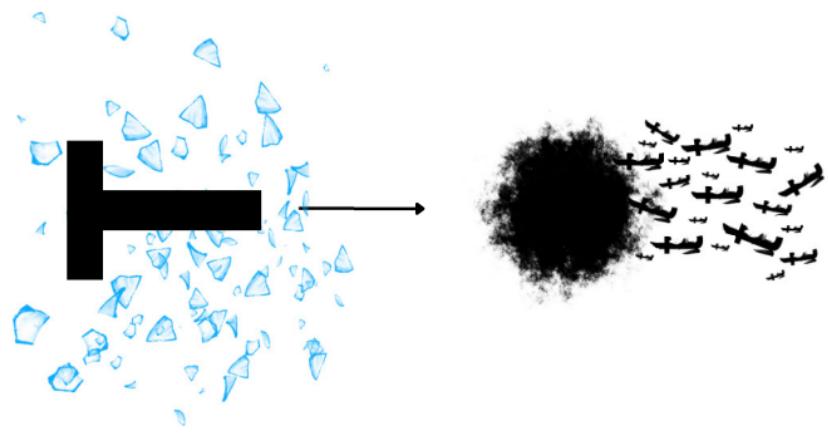


Mental and emotional difficulties from trauma

# THE STORY

## my 10 year journey with TBI





### The story of July 29, 2012

33 years old. Wife. Teacher. Triathlete. Dog mom, trying to become a human mom.



## Phase 2:

# Running From

### Relational

Loss of triathlon community  
Judgement by parents at work

Family

Husband

Words of husband

Therapist

Cheating

Boss

Colleagues

Abandonment

### From medical

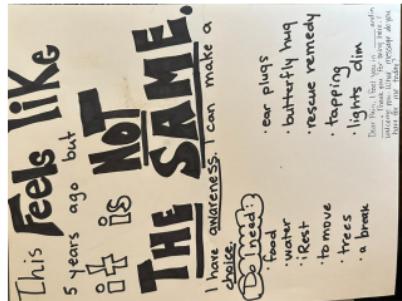
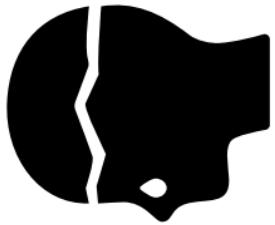
Emergency dentist  
Stories of ER failure  
Family doctor, nurse practitioner  
Neurologist x 2  
Lack of diagnosis  
Lack of information

2014 2015

### From Injury

Loss of trust in my body  
Amnesia  
Urinating the bed  
Dental injuries  
Denture  
Not being able to read  
Loss of cognitive capacity  
Insomnia  
Time lost  
Health lost  
My body letting me down  
Living in my body  
Identity changes (with no info)  
Isolation





Phase 3:

## Facing Trauma

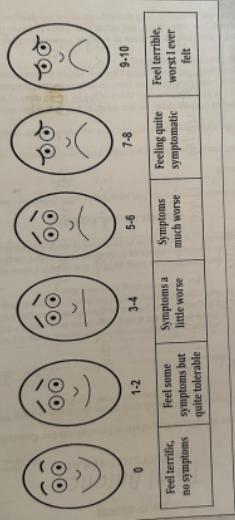
2016 2017

Phase 4:

## Death's Door

2017 2018 2019

## Rate Your Overall Condition



ex. Headache, Dizziness, Light/Sound Sensitivity, Feeling "Not Right", Difficulty Concentrating

## Daily Non-Negotiables

Get out of bed

Shower or bath

Make 1 meal with protein

Move for 10 minutes (yoga, walk)

Do 1 forward-planning activity

Text or talk to one person

Put on a bra and get dressed. In anything.

Get out of the house for 5 minutes.

Get to my appointments.

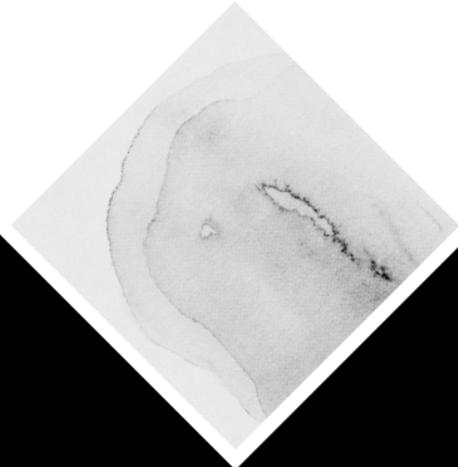
10 months

Rest Periods	
Ice & heat	Audiobook
Yoga	Just quiet
Headspace	Pray/visualize
iRest	Yoga
Podcast	Key Yoga Pose
Music	Just quiet
	Walk
	Shoulder stretches
	Bike

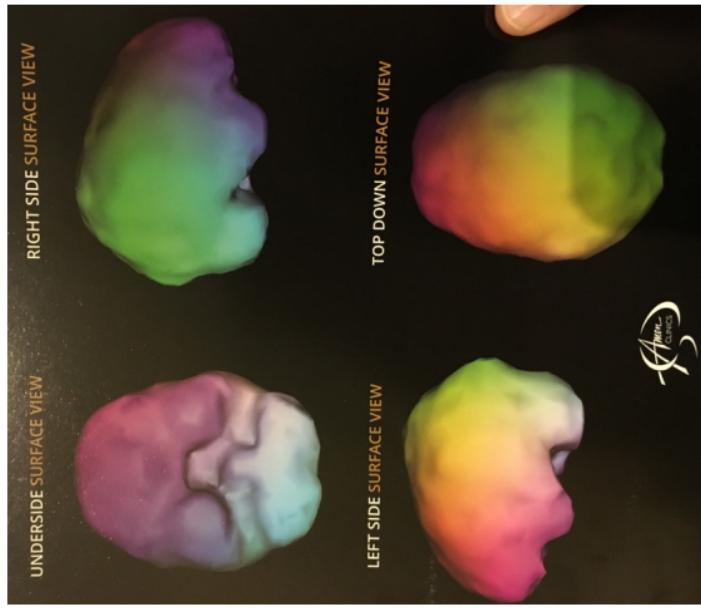


## FALL 2018: THE BOTTOM

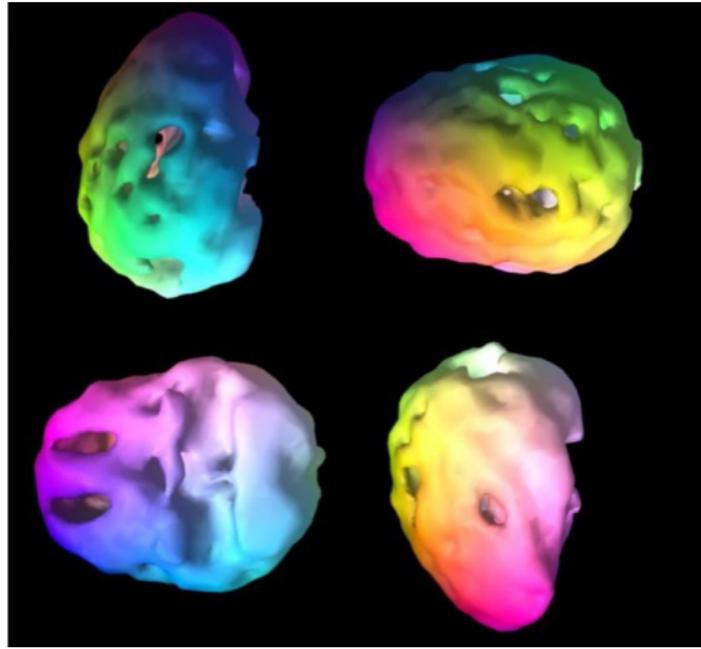
- LTD denied  
"Concussion should be a six-month healing process."
- Ontario SPECT  
"There is mild generalized increased perfusion throughout the supratentorial brain. The pattern can be seen with bipolar disorder."



Surface View of a Healthy Brain

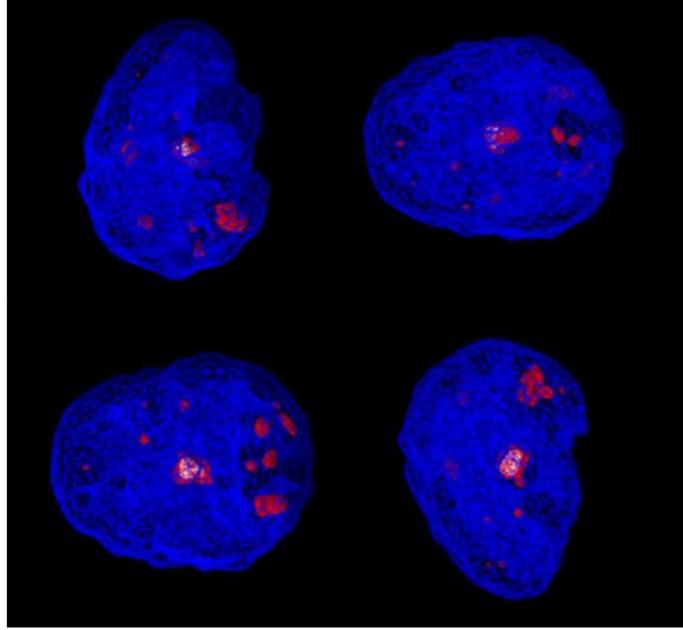
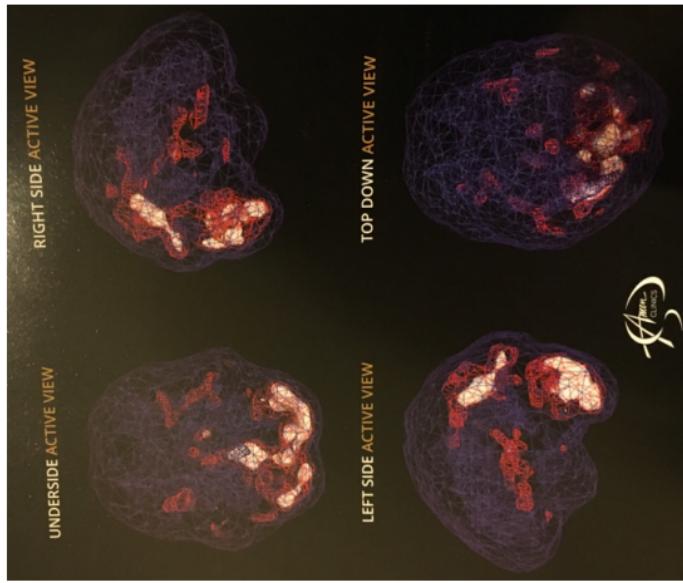


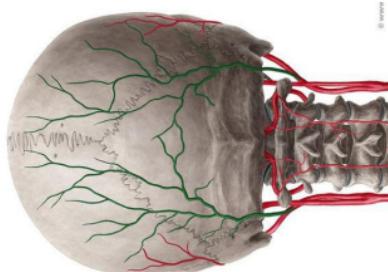
Surface View of Angie's Brain, February 2019



Active Inner View of a Healthy Brain

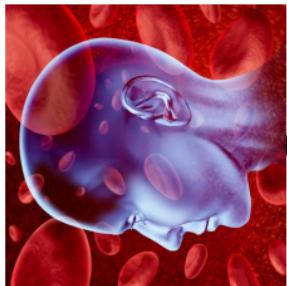
Active Inner View of Angie's Brain, February 2019



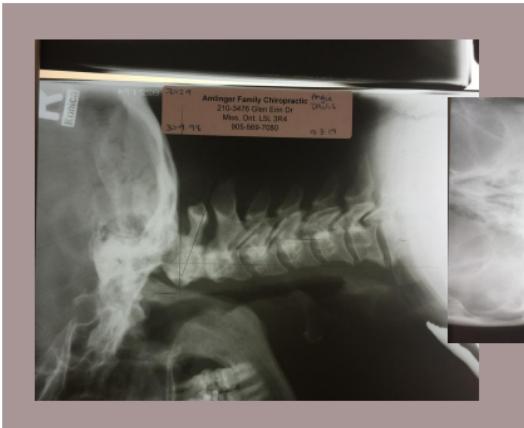




Out



In



## Phase 5:

### Re-creation



**yes and**

suffering and loss

healing and hope

loss  
isolation  
shame  
living in an injured body  
financial stress

2019 2020 2021 2022



**and new life**

**and**

and  
yes



# THE TAKE AWAYS

# FOR POLICY MAKERS

for what is thought to be best in any relative point of view.

**Government** organization that is governing authority system or form by for what is thought to be best in any relative point of view.



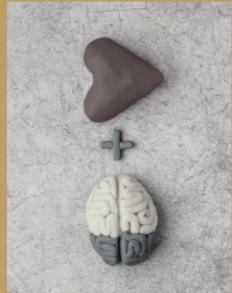
## Funding



- Proper assessment, diagnosis, and treatment saves lives and reduces future issues

# THE TAKE AWAYS

## FOR PROVIDERS



### Share power

- Reminder: information is power and we are in desperate need of it.

### Slow down

- Take time to explain, listen and understand, validate and empathize.

### Use EI

- So our humanity comes before everything else, always

Treat the neck

 TRAUMATIC  
BRAIN INJURY



# THE TAKE AWAYS

## FOR SURVIVORS

You're best in any point of view.  
**Survivor** [ sə'vər ] remain alive or remain alive through affliction; "the survivor is the



### Document your journey

- Make the invisible visible

### Choose hope

- Hope is a choice, not a feeling

### Rest as Awareness

- Touch the part of you that is unchanged.



# THE TAKE AWAYS

## FOR ANGIE



### Live by your values

- and practice radical acceptance

### Follow your truth

- and process emotions

### Find what feels good. Do that. Repeat.





# iRest Meditation

iRest® is a type of mindfulness meditation that promotes deep relaxation through breathing, guided imagery, and progressive relaxation

1. Connect to heartfelt desire
2. Set intention
3. Find inner resource
4. Sense your body
5. Sense your breath
6. Welcome emotions
7. Witness thoughts
8. Find joy
9. Experience peace
10. Reflect on your practice



A few research-based benefits:

- reduce symptoms of PTSD, stress, anxiety, depression, insomnia, chronic pain, and more
- improve sleep
- strengthen your resilience to deal with day-to-day life
- increase energy, happiness, confidence, and joy

For Research:  
[irest.org](http://irest.org) --> resources --> research

# **Yoga Instructors**



**What my parents think I do.**



**What my friends think I do.**



**What my students think I do.**



**What the NY Times thinks I do.**

**What it feels like I'm doing.** What I do when I get home.

# Trauma Informed Yoga

Interception - Choice Making - Action taking

- Choice, power and control in the hands of the student - not the teacher
- Invitational language
- Focus on interoception



Examples of invitational language:

- You could try...
- See if (works for you)...
- You might feel...
- An option is to...
- When you are ready...
- Perhaps...

# Trauma Informed Yoga

**Yoga as an Adjunctive Treatment for Posttraumatic Stress Disorder: A Randomized Control Trial**

Bessel van der Kolk et al., 2014:

**Study design:** RCT

**Intervention type:** 1-hour class for 10 weeks, trauma informed yoga program

**Sample size:** 64 women with chronic, treatment-resistant PTSD

**Results:**

-were more likely than women in the control group to no longer meet criteria for PTSD posttreatment  
-also showed significant decreased in depressive symptoms and negative tension-reduction behaviours (e.g., self-injury)

**Discussion:**

Yoga significantly reduced PTSD symptomatology, with effect sizes comparable to well-researched psychotherapeutic and psychopharmacologic approaches. Yoga may improve the functioning of traumatized individuals by helping them to tolerate physical and sensory experiences associated with fear and helplessness and to increase emotional awareness and affect tolerance.

**Journal of Clinical Psychiatry**

**Results:** The primary outcome measure was the Clinician-

Administered PTSD Scale (CAPS). At the end of the study, 16 of 31 participants (52%) in the yoga group no longer met criteria for PTSD compared to 6 of 29 (21%) in the control group ( $n=60, \chi^2 = 6.17, P=.013$ ). Both groups exhibited significant decreases on the CAPS, with the decrease falling in the large effect size range for the yoga group ( $d = 1.07$ ) and the medium to large effect size decrease for the control group ( $d = 0.66$ ). Both the yoga ( $b = -9.21, t = -2.34, P = .02, d = -.37$ ) and control ( $b = -22.12, t = -3.39, P = .001, d = -.54$ ) groups exhibited significant decreases from pretreatment to the midtreatment assessment. However, a significant group  $\times$  quadratic trend interaction ( $d = -.34$ ) showed that the pattern of change in Davidson Trauma Scale significantly differed across groups. The yoga group exhibited a significant medium effect size linear ( $d = -.052$ ) trend. In contrast, the control group exhibited only a significant medium effect size quadratic trend ( $d = 0.46$ ) but did not exhibit a significant linear trend ( $d = -.029$ ). Thus, both groups exhibited significant decreases in PTSD symptoms during the first half of treatment, but these improvements were maintained in the yoga group, while the control group relapsed after its initial improvement.

Rhodes (2014):

Long term follow up study found that:

-the frequency of continuing a yoga practice what a significant predictor of long-term outcomes  
-at 1-3 years post-study, women who practiced yoga were more likely to show a loss of a PTSD diagnosis and greater reduction in PTSD and depressive symptoms



# Trauma Informed Yoga

Qualitative reports from women in the study:

- Symptom reduction
- Improved quality of life
- Personal empowerment
- Greater tolerance for emotional states and increased emotional regulation
- Greater tolerance for inner sensations
- Ownership and control over one's body (their body does belong to them, it is under their control, can feel safe in their bodies)--leading to increased body appreciation for self-care and a tendency to listen to the body more (for some = more hope for the future and more willingness to take action to improve health)
- Less self-judgement, more self-acceptance



# gentle yoga

INTERNATIONAL



Gentle Yoga

Teacher

Yoga Type

Body Part

Length

Positions

Nervous System

Breathwork

Rest

Sleep

10:30

11:52

30:32

# RESOURCES

- Gentle Yoga International on YouTube  
<https://www.youtube.com/channel/UCKxLbkZVaFUn9VHCSTTnVvg>
- Apps: Calm, InSight Timer, Headspace
- If you or your clients are looking for not power or vinyasa yoga - search yin yoga, gentle yoga, restorative yoga
- theyogamd.ca- Dr. Shailla Vaidya
- Love Your Brain



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 Once you choose hope  
anything's possible.

~Christopher Reeves

# THANK YOU!

TO A FUTURE WHERE EVERY TBI SURVIVOR GETS WHAT THEY NEED

