

Trauma-Informed Law by J. Kim Wright*

The expectation that we can be immersed in suffering and loss daily and not be touched by it is as unrealistic as expecting to be able to walk through water without getting wet. -- Dr. Rachel Naomi Remen

A few years ago, a lawyer in an MSW program called me to ask if I knew of a book about trauma and law. Surely there must be one, she insisted. We both searched Amazon and beyond and didn't find it. So, she suggested I write it. It was the beginning of the pandemic; I wasn't looking for another project. But the topic needed to be covered. So, since I was already an ABA Author, I decided to approach the ABA. We assembled a team of co-editors: Helgi Maki, Marjorie Florestal, and Myrna McCallum, all of whom knew more than I did about the topic, and we went to work. In March, 2023, *Trauma-Informed Law: A Primer for Practicing Lawyers and a Pathway for Resilience and Healing* was finally published by the ABA Law Practice section.

No one could have predicted how timely the topic would become. During the research, writing, editing, and discussion phase of the book, a lot of trauma was happening in the world. The murder of George Floyd, the discovery of the graves of the children in residential schools, political unrest, Covid-19. I wondered: is there always so much trauma or are we in more challenging times?

I had a vague idea about trauma. I was a domestic violence survivor, had a restorative justice background, working with families of murder victims and their families; as a divorce lawyer, I had regularly found myself in high conflict situations.

But my concept of trauma turned out to be the tip of the iceberg. And, finally people were talking about it. The world could no longer close its eyes to what was happening around us.

In the course of putting the book together, I came to refer to trauma as the glue that holds the legal system together. Some areas of practice are obvious cauldrons of trauma: criminal law, immigration, divorce, and personal injury. But in our research and interviews we found that even tax lawyers and the merger and acquisition folks experience trauma. Lawyers were swimming in trauma – their

own, their clients' traumas, and the systemic trauma around us. I saw that most legal work was to address or to avoid trauma and yet, lawyers were not trained in trauma; if anything, we were taught that feelings were irrelevant and we needed to just buck up, put on "professional distance" and do what needed to be done. If we just put on enough emotional armor, we would be fine.

But lawyers haven't been fine. The profession is known for its high levels of depression, addictions, suicide, and dysfunction.

It is time that we talk about trauma, learn about it, and find ways to address it in our lives and profession. In this article, I will share tools and resources that will allow you to be more trauma-aware and able to respond in ways that are healthier and manageable. Once you've learned to recognize trauma, you will realize you've seen it before but now you will know what it is and how to respond to it.

What is Trauma?

Trauma is defined as a perceived or actual event or set of overwhelming circumstances that produce feelings of intense fear or helplessness. From a public health perspective, trauma (or traumatic stress) describes a person's response to a situation, whether an acute or chronic situation, that overwhelms the human ability to cope effectively. It can be a sudden event or can be cumulative, a series of events over time. It is sometimes described as having to cope with events that are "too big, too fast, too soon, too hurtful or too little for too long."

As individuals and team members, you may have experienced any number of traumas throughout your life. The extent to which such traumas are resolved varies from person to person and team to team. Just because we haven't been direct victims of a traumatic event doesn't mean we aren't impacted.

This is not about something you think or something you figure out. This is about your body, your organism, having been reset to interpret the world as a terrifying place and yourself as being unsafe. And it has nothing to do with cognition. --Bessel van der Kolk, author, The Body Keeps Score.

Physiology of Trauma

Being aware of some basic physiological responses helps us to understand trauma and how it works.

Think of your brain as having three parts: the survival brain, the limbic or feelings section, and the prefrontal cortex. The prefrontal cortex is sometimes referred to as the executive function of the brain. It controls our attention, capacity to integrate memories into narrative and our ability to plan and make decisions.

Trauma is perceived as a threat by the brain, triggering a fear response. When trauma occurs, the human brain is wired to find a way to survive. When the brain responds out of fear, the limbic brain is activated, specifically the amygdala which functions as an alarm system signaling the presence of danger, and the hippocampus which facilitates the production of cortisol under stress. (In the absence of stress, it facilitates memory formation). The amygdala interprets the environment based on past experiences. It can become triggered by situations that seem like past dangers.

The limbic brain is reactive. It governs the functioning of emotions, memory encoding, how memories are stored, and survival responses. Focused on survival, it functions more quickly than the prefrontal cortex. It can rapidly take over or “hijack” cognitive functions. You may have heard the term, “amygdala hijack,” to describe the situation where our physiological responses have taken over.

When a threat appears and there seems to be little hope of escape or survival, the defensive responses of neurobiology prioritize survival instead of forming memory or narrative. (There is little use in remembering what we aren’t likely to survive.) As a result, memory or narrative may not be linear or chronological. In addition, the neurobiological impact of trauma can disrupt learning. This is particularly true if neurobiological development occurred amid toxic stress or trauma.¹

Physiological responses can have a profound impact on the individual.

When a person encounters a traumatic or threatening situation, the sympathetic nervous system (SNS), a part of the autonomic nervous system, is activated. This leads to the “fight, flight, or freeze” response, which is the body’s way of preparing to confront, hide from, or escape from the threat. Physiological changes associated

¹ N. Burke-Harris, *The Deepest Well: Healing the Long-Term Effects of Childhood Adversity*, Harper Collins (Mariner Books), 2018.

with this response include increased heart rate, heightened alertness, and the release of stress hormones.

Blood flow is redirected away from less critical functions, such as digestion and immune response, toward the muscles and vital organs needed for immediate survival. The digestive system can be affected, potentially leading to issues such as nausea or changes in bowel movements. During a trauma response, the body's pain perception can be altered, potentially allowing individuals to endure injuries that they might not notice during the acute phase of the trauma.

Stress hormones also enhance alertness and focus, allowing individuals to respond to the perceived threat with increased awareness and attention.

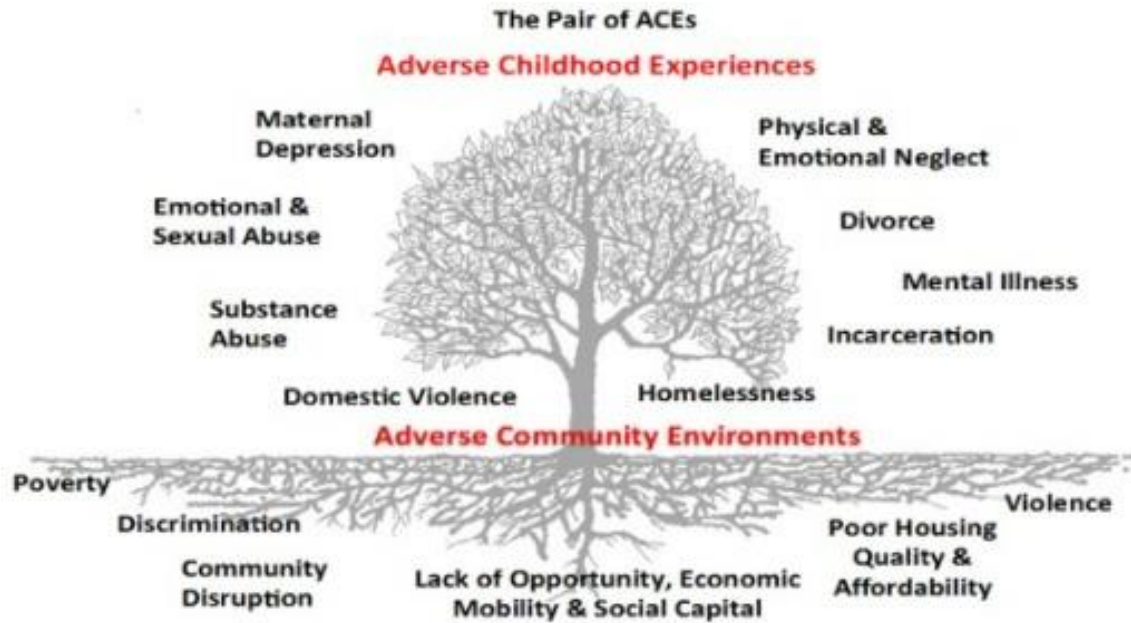
Some individuals experiencing extreme trauma may dissociate, which is a disconnection from their thoughts, identity, consciousness, or sense of self. This can be a protective mechanism that helps individuals cope with overwhelming experiences.

While these physiological responses are adaptive in the short term, they can become maladaptive if the traumatic experience is severe, prolonged, or recurring. The body's stress response systems may become dysregulated, and individuals may continue to experience the physiological and emotional effects of the trauma long after the event has occurred. Trauma therapy and support are often needed to help regulate these physiological responses and address the psychological impact of trauma.

Examples of Traumatic Experiences

Natural Disasters	Mass shootings	Divorce & Separation
War	Covid-19 Pandemic	Betrayal of trust
Motor Vehicle Accidents	Racial injustice	Rejection
Catastrophic Illness	Dog Bites	Humiliation
Victim of Crime	Persistent powerlessness	Loneliness
Sexual Violence	Falls	Discrimination
Incarceration	Witnessing trauma	Political powerlessness
Medical Emergency	Bullying	Being displaced
Political assassinations	Oppression	Chronic Poverty
Persistent neglect	High conflict environments	Sudden Death of loved one (esp. suicide)

Some of you may have heard of the ACES test from The Center for Disease Control. The test measures potentially traumatic childhood events, Adverse Childhood Experiences.² Their research has shown that 64% of US adults have experienced at least one ACE (as they're called). Children and adults who have experienced adverse events often live in communities which are sources of trauma, which is referred to as Adverse Community Environments (the two ACEs).³



Ellis, W., Dietz, W. (2017) A New Framework for Addressing Adverse Childhood and Community Experiences: The Building Community Resilience (BCR) Model. *Academic Pediatrics*. 17 (2017) pp. S86-S93. DOI information: 10.1016/j.acap.2016.12.011

As community members, we feel the impacts of adverse community environments and collective trauma but feel ill-equipped to respond beyond thoughts and prayers. We see the effects of intergenerational and historic trauma in our communities – but don't know how to effectively address the impacts of oppression and poverty. We aren't educated and prepared for the widespread impacts of trauma and the need for trauma-informed policies and practices. Trauma awareness is the first step to improving the health and wellbeing of individuals, families, organizations, and communities.

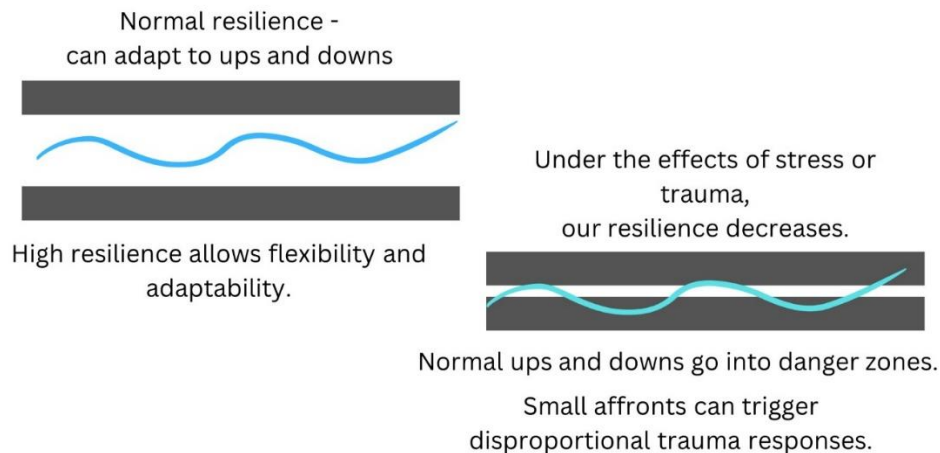
² <https://www.cdc.gov/violenceprevention/aces/fastfact.html>

³ Ellis WR, Dietz WH. "A New Framework for Addressing Adverse Childhood and Community Experiences: The Building Community Resilience Model". *Acad Pediatr*. 2017 Sep-Oct;17(7S):S86-S93. doi: . And https://cblcc.acf.hhs.gov/wp-content/uploads/The-Pair-of-ACEs-K2A_4.2.2021.pdf

Resilience

Resilience is the capacity to cope, adapt, and recover from difficult and challenging life experiences. Resilient people are flexible and adaptable to circumstances. However, it is not as though we are each assigned with a certain number of lifelong resiliencies in the way we are given two eyes, a nose, and a mouth. We each have our own capacity for resilience and resourcefulness.

The escalation of traumatic events has led to a collective loss of resilience caused by repeated trauma, stress, conflict, and other challenges. Like the proverbial straw that broke the camel's back, we can be doing just fine and then we encounter a seemingly small disruption and completely melt down. We don't have the capacity to resolve the problem. We may react in ways that are disproportionate or out of character.



Addressing Trauma

I'm often asked about special training that is required for addressing trauma, especially with others. Shouldn't we leave that to trained therapists? Trauma expert, Ann Dupre Rogers, Executive Director of [Resources for Resilience](#) in North Carolina shared her perspective: "Trauma is a human experience. I'm human and I can help. With the level of trauma that the world is experiencing, there will never be enough therapists. It is up to us to get in touch with our humanity and help."

This example comes from Trauma-Informed Law:

If one of your clients suddenly rushed into your office for a previously scheduled client meeting over an hour late and exclaimed, "I've just been in

a car accident” your own humanity might prompt you to instinctively ask “What happened - was anyone hurt, are you ok?”

Even though you’re not a medical professional or therapist, you might say to your client: “Do you need anything? Do you need to call someone? Or reschedule? Or sit down and catch your breath?”

You likely wouldn’t plow ahead with your meeting as originally planned and completely disregard their state or situation despite their discomfort, or even the inconvenience to you the situation may bring.

You’d probably understand that the client’s lateness in that situation wasn’t a sign of disregard or lack of credibility. You likely wouldn’t be surprised if:

- the client blurted out information about the accident even though it seems unrelated to their client file or work with you; or

- the client seemed too upset to proceed with the meeting as planned; or

- the client’s thinking seemed scattered or social interactions with you fragmented.

You might also take a moment to regroup yourself after your own initial shock, take a second look at your agenda and pick up the broken pieces of your meeting to find another path forward with the client in light of the accident’s impact.

What we aren’t taught in law school, and many lawyers don’t realize, is just how many clients will show up in our practices who’ve experienced an impact (or injury) of this kind from adversity - but often that injury will be invisible. The client may not be in a position to explain the situation to us or even be fully aware it happened. The injury or the event that caused it may not be visible or easily verbalized by the client or anyone else. The injury might be from some other kind of adversity or conflict - including neglectful or broken relationships, violence, serious family health issues, losing a parent at a young age, from poverty or systemic discrimination.

The adverse event may even have happened years before, but its impact can persist years or even decades later. Trauma that comes from experiencing adversity might fragment more than a meeting agenda - it can shatter a person’s sense of themselves as professionals and as people.

When we work with clients from a trauma-informed perspective, we engage our awareness of trauma's impact to assist the client (and ourselves) with navigating the uncomfortable and inconvenient issues that can become obstacles to the pursuit of justice. We might only know that trauma is impacting a situation from the client's response (or even our own response) to trauma: fear, grief or anger or dysregulation like physical discomfort, mental or emotional suffering or strained relationships.

While some lawyers receive training in working from a client-centered perspective, we rarely learn how to deal with trauma and its impact. We've usually been taught to exclude trauma, or at least not talk about it. Without trauma-informed lawyering, clients impacted by trauma risk being inadvertently retraumatized.

Turning away from trauma risks diminishing the quality of legal services, undermining a client's experience with the legal system or even eroding our own wellbeing as lawyers. A better option is to turn towards trauma in clients, in systems and in ourselves with the same humanity you would offer a fellow human who has experienced a visible injury.⁴

When people affected by trauma show up in our work as lawyers, we're more likely than not to miss seeing the impact of trauma entirely or misinterpret it. They don't walk in saying they've just been in a car accident, but the trauma may seem as immediate. Since we haven't been taught to understand the impact of trauma, common myths or outdated information from our training may prevail and we can misconstrue trauma as a "problem" due to a perceived personal weakness, character issue, or credibility issue.

"Many times trauma in a person decontextualized over time can look like personality. Trauma in a family decontextualized over time can look like family traits, trauma decontextualized in a people over time can look like culture and it takes time to slow it down so you can begin to discern what's what." – Resmaa Menakem

⁴ Maki, Helgi, Florestal, Marjorie, McCallum, Myrna, and Wright, J. Kim, eds. *Trauma-Informed Law: A Primer for Practicing Lawyers and a Pathway for Resilience and Healing*. ABA Book Publishing, 2023

Recognizing Signs of Trauma

Trauma can manifest in a variety of emotional, psychological, and physical symptoms, which may vary in intensity and duration from person to person. Some symptoms of trauma include:

Irritability, easy to upset or cry	Overworking
Impatience	Distorted beliefs
Emotional outbursts	A sense of detachment
Disproportional responses	Violence
Out of character reactions	Persistent feeling of shame or guilt
Mood swings	Hopelessness
Fatigue	Hypervigilance and paranoia
Sleep disturbances	Hyperarousal and sensitivity
Substance use	Under-earning
Relationship breakdown	Loss of faith in own work or legal system
Trust broken	Memory problems
Nightmares, flashbacks	Avoiding anything that reminds them of the traumatic event
Rapid weight change	Blaming others
Change in eating habits	Physical symptoms like headaches, stomachaches
Social isolation, withdrawal	Children may regress to behaviors from younger age
Fear of being alone	
Distorted sense of safety	
Losing flexibility	

You may find that the trauma doesn't bother you at first but that certain symptoms show up over time. You might find it hard to sleep or notice that you are crankier than usual. You might find yourself feeling angry and wishing that we weren't making such a big deal out of things. Anger often masks other feelings.

Prevalence of Trauma

Not everyone who experiences a potentially traumatic event will develop trauma-related symptoms or disorders. Resilience, support systems, and individual coping mechanisms also play a role in how individuals respond to traumatic experiences.

Natural disasters are increasing and will continue to as climate change gets worse. The pandemic traumatized many people, either from fear or loss. Mass shootings, hate crimes, wars and other events have brought many people to the breaking point. Public displays of anger and meltdowns show up in the headlines in many ways, including airline passengers acting out and increasing violence.

On the other hand, I sometime hear the word, “trauma” being applied to a lot of situations that might more accurately be referred to as events that are triggering past trauma. Conflict or discomfort may seem traumatizing to someone who is not coping well. When triggered, some people feel a need to blame someone else for how they’re feeling (rather than seeking resilience-building tools and relationships). They may fall into a vicious circle.

Recognizing Trauma in Clients

The impact of trauma can show up in responses and behavior that do not fit with the way legal processes are designed to work or may complicate our work. Consider that the so-called “difficult” client may actually be reacting to trauma.

A person may not even remember the event that traumatized them. Author of *The Body Keeps the Score*, Bessel van der Kolk, MD., says that “Trauma comes back as a reaction, not a memory.”⁵

Clients may retell events, repeating the story over and over, often in a non-linear way. In my restorative justice work, I noticed that many clients had never been fully heard and therefore kept trying to tell the story. Telling it allowed them to make sense and being fully heard helped them have closure.

Here are some other examples that might occur across a variety of practice areas. In each of these cases, instead of thinking of this situation as one in which it’s

⁵ See Bessel Van der Kolk, *The Body Keeps the Score: Brain, Mind and Body in the Healing of Trauma*. (New York, New York: Penguin Books, 2015).

appropriate to ask “what is wrong with you?” consider that the better question may actually be “what happened to you?”.⁶

- the client who can't make a decision about their own case and responds repeatedly by asking you what you would do;
- the client experiences so much emotion when you talk about an aspect of their case, that you find yourselves avoiding the subject or find it challenging to communicate about it with words rather than mostly silence or tears;
- the client returns blank forms or does not sign the documents necessary for their legal matter to succeed;
- the client who, no matter what you ask them about their legal matter or case, appears unable to muster much of a response beyond yes or no answers and avoids participating in communications wherever possible;
- the client who has been advised to settle their case but they want to keep pursuing it even though going to trial is not a sensible strategy;
- the client whose story of events about their legal matter are out of order, and seem to shift or change despite writing down a timeline;
- the client who appears to have difficulty maintaining focus in meetings with you, or loses track of dates or times even when it comes to important events like showing up in court;
- the client who does not stand up for their own interests or otherwise tries to appease the person who they previously told you is at the center of their case;
- the client who appears to become suspicious anytime you write any notes about their case;
- the client who responds with extreme emotion or lack of emotion to a pivotal development in their case;

⁶ Oprah Winfrey and Bruce D. Perry, *What Happened to You? Conversations on Trauma, Resilience and Healing*, (New York: Flatiron Books: An Oprah Book, 2021).

-the client tells the same story, over and over, often in great detail, looping around and retelling either particularly upsetting parts of the story or seemingly minor details; or

-the client avoids your calls and other communications.

The formation of memory, learning, behavior and narrative can all be impacted by trauma. Lawyers and judges aren't taught to account for trauma response when analyzing the response of a "reasonable person" in a traumatic situation.

The neurobiology of trauma underlying these responses is complex. At times we might notice ourselves exhibiting those same signs of hypervigilance, dissociation or one of a fight, flight, or freeze response, or other aspects of trauma response. Or perhaps you may recognize some of these responses in yourself, when you have your own moments of being a "difficult lawyer".

Antidotes to Trauma

We don't have much choice about whether we encounter trauma in our lives and those of our clients. We can choose to anticipate how we respond and plan healthier coping mechanisms. We can seek out information that raises our awareness of trauma and equip ourselves with tools, practices, and resources to care for distress instead of ignoring it or using legal analysis.

The following protocol has some suggestions. The resources at the end of this article will provide more.

Intrapersonal Level:

The first step is to know your triggers and work on them. Triggers are reminders of past traumas which are held in your body and can be activated by an event in the present. The triggering event is not (necessarily) a new trauma. It can be an insignificant or negligible event that reminds your brain of the past time and produces the trauma response.

Consistent self-care practices like getting enough sleep, eating healthy foods, exercising, and taking breaks help to expand one's general resilience.

Most resilience work is about settling the nervous system in the moment. In the moment of being hijacked or triggered, in order to restore balance to our nervous systems, we need to let the brain know that it is safe.

The survival brain only recognizes sensations. Sensations aren't thoughts. You can't think yourself out of trauma. Sensations are physical: seeing, hearing, smelling, tasting, touching, and hearing. So, it is important to engage the senses and not try to think your way out of the trauma response.

Do something physical: Feel your feet on the floor. Take a walk. Scrub the floor or stove. Push against a wall. Do something with your body!

Noticing where you are, what you are doing, listening to the sounds in your environment, breathing the aroma of a nearby garden, etc. can ground you and bring back executive functions.

Interpersonal Level:

It is possible to help someone else settle their nervous system if you have done the work to settle yours, so that you are able move into a more regulated and calm space. There is a lot of science about mirror neurons, sensory-motor cells in the brain that are activated when we see another individual performing the same action. An example is when you see someone smile and smile back. Taking a deep breath – or yawning – can have a similar impact. Beyond those more visible actions, we can share our regulation with those around us.

In an effort to understand empathy and compassion, there is also research on electromagnetic fields, emotional contagion, and increased dopamine sensitivity. In other words, there is science to back up the idea that we are interconnected on an emotional, heart and brain level and we can impact another person by shifting our state of regulation.

We can also share tools that have worked for us. One of the most powerful tools for restoring equilibrium after a traumatic or triggering event, is connection with another person. It may take courage to be vulnerable enough to share details but the tools aren't cognitive, they're sensory.

Listening is a powerful tool to offer someone who has experienced trauma. Listening without judging or fixing can help another person calm down and restore their equilibrium. Compassion and empathy can be powerful gifts. You can say (or just demonstrate): I see you. I hear you. I understand you.

However, it is important that the connection be healthy! In an attempt to find understanding, a traumatized person may seek out another person who has shared a similar experience.

“We are trauma-saturated and in a negative reinforcing loop,” says trauma educator, Christy Shi Day. “Generally connection is the antidote to trauma but many people are synching up with those who are already dysregulated and traumatized. Connection should be a protective response but it isn’t when it is creating a vicious cycle. A more appropriate leverage point may be in building individual capacity.”

Systemic Level:

Systemic Trauma can show up as: social fragmentation, inter-group conflict, cultural and identity challenges, political instability, economic decline, public health issues, education setbacks, historical memory distortion, strained policies and governance, loss of trust in institutions, and breakdown of relations. It is complex and intertwined, what systems designers call, “a wicked problem.” (I see it as a metaphorical bowl of spaghetti with many strands [problems] intertwined and wrapped around each other. You never know what changes can make the most difference or what unintended impacts might occur by making a single change.)

The adversarial legal system perpetuates and reinforces trauma. Patriarchy, paternalism, racism, sexism, heterosexism, and hegemony are built into the structures and are hard to eliminate. A lot of my life’s work has been about redesigning and transforming that system, bringing new ideas and models and nurturing the pioneers and leaders who are courageously going forward. I believe we are creating a new legal system with new values but progress is slow. A system based on maintaining the status quo and precedent doesn’t change overnight.

But we are not helpless. We can educate our colleagues about trauma. We can destigmatize trauma and find ways of encouraging healing in the system. We can be the change we are seeking. Integrative models of practice like collaborative law, mediation, restorative justice, therapeutic jurisprudence, etc. are a beginning but we have a long way to go.

Resources to explore:

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Somatic Experiencing International (SEI) - <https://traumahealing.org/>

Somatic Experiencing (SE) is a modality for nervous system regulation. SEI offers a body-oriented therapeutic model that helps heal trauma and other stress disorders. It was developed by Peter Levine, Ph.D., one of the leading authors in the field of trauma and resilience. Interim executive Director of SEI, Rebecca Stahl, is a lawyer who has represented children in family law and child welfare cases. She is an SE practitioner and yoga teacher. In a recent newsletter, Rebecca wrote:

As trauma professionals, we know how trauma impacts us. It can make us see the world in stark terms. It can make us believe that the world is “us vs. them.” When we are in trauma responses, we seek safety, and we seek safety in those who we deem are like us. Everyone and everything else are potential threats. When you add social media and algorithms to the mix, this polarization and othering only increase....

Trauma in our systems makes us feel as though whatever we are experiencing will never change. It will never get better. SE gives our nervous system the chance to feel something different, even for a moment. That moment may begin as only a moment, but it tells the system that shift is possible. It tells the nervous system that there is another way. And these small changes often lead to much larger shifts over time. And they are powerful. And they have the potential to shift ourselves and the world. They have the potential to unwind these deeply held patterns.

HeartMath

HeartMath is based on 30 years of research on the psychophysiology of stress, emotions, and the interactions between the heart and brain. Collaborative lawyer and peacemaking practitioner, Dona Cullen of Portland, Oregon, is also a HeartMath practitioner. She has written:

Using HeartMath has the physiological effect of balancing the nervous system, the hormonal system and messages from the heart to the brain. We use simple techniques, focusing on the heart and breathing at a slower, deeper pace to generate a coherent heart rhythm. Coherent heart rhythm is carried as neural information from the heart to the brain as a sign of wellbeing, which helps to bring emotional stability and regulation to the nervous system. Then, we add an intentional shift towards kindness or appreciation by activating regenerative heart qualities like love, compassion, courage and other renewing emotions. Over time, our emotional awareness becomes more developed allowing more self-regulation to become coherent so our physiological and emotional systems are in sync and functioning at an optimal level.

Documentaries:

<https://thewisdomoftrauma.com/>

In The Wisdom of Trauma, we travel alongside physician, bestselling author and Order of Canada recipient Dr. Gabor Maté to explore why our western society is facing such epidemics. This is a journey with a man who has dedicated his life to understanding the connection between illness, addiction, trauma and society.

<https://kpjrfilms.co/resilience/>

Researchers have recently discovered a dangerous biological syndrome caused by abuse and neglect during childhood. As the new documentary Resilience reveals, toxic stress can trigger hormones that wreak havoc on the brains and bodies of children, putting them at a greater risk for disease, homelessness, prison time, and early death. While the broader impacts of poverty worsen the risk, no segment of society is immune. Resilience, however, also chronicles the dawn of a movement that is determined to fight back. Trailblazers in pediatrics, education, and social welfare are using cutting-edge science and field-tested therapies to protect children from the insidious effects of toxic stress—and the dark legacy of a childhood that no child would choose.

*About the author:

J. Kim Wright wears a lot of hats in the Integrative Law Movement. She is a Senior Fellow at the Project for Integrative Law and Legal Education, Center on Dispute Resolution, Quinnipiac University School of Law in Connecticut, United States, where she also teaches a remote course and clinic on Integrative Law Approaches to Negotiation.

She is the author/editor of three American Bar Association books and a frequent contributor to books and periodicals. (See <https://jkimwright.com/> for titles and more.)

From 2008 to 2023, Kim traveled worldwide as a digital nomad. She lectured at dozens of law schools on six continents and wove a web of integrative lawyers into a movement.

She now leads a team of changemakers through her company, Cutting Edge Law Enterprises, Inc. and offers a certification in Integrative Law through Integrative Legal Education, Inc. Kim is the co-creator of the Conscious Contracts® approach, now available in over 20 languages around the world and she manages the intellectual property and certification program for the community.

In 2023, Kim gave up the digital nomad lifestyle and opened an integrative law practice in North Carolina where she helps clients align their legal documents with

their values. Her clients include a sustainable textile manufacturer, an electric vehicle association, and an organization focused on rights of nature and alleviating climate change.

She is on the board of advisors for the Project for Integrating Spirituality, Law, and Politics (PISLAP) and the North Carolina Sustainable Business Council.