



Becoming Trauma-Informed

Presented by:

Jacob Dancer III, LCSW

Program Manager



Objectives of Trauma-Informed Training

- Recognize the importance of being trauma-informed.
- Understand the symptoms of trauma.
- Understand the impact of trauma on youth.
- Understand the Universal Precautions Approach to trauma.
- Understand how your role can make an impact



Definition of a Trauma-Informed System: The 4 “R’s”

A program, organization or system that is trauma-informed:

- Realizes the widespread impact of trauma and understands the potential paths for healing;
- Recognizes the signs and symptoms of trauma in all individuals involved including staff, clients, and others involved with the system/organization;
- Responds by fully integrating knowledge about trauma into policies, procedures, practices, and settings.
- Resists retraumatization.

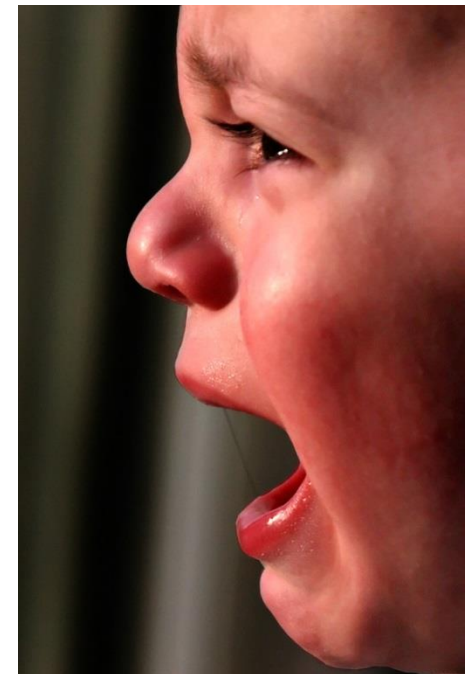


Definition of Childhood Trauma

The **experience** of an **event** by a child that is emotionally painful or distressful which often results in lasting mental and physical **effects**.

National Institute of Mental Health

- Event – One time or chronic
- Experience – whether the event is experienced as scary or threatening
- Effect - long-lasting and life altering





Traumatic Events

- Abuse – physical, emotional, sexual
- Neglect/Abandonment, betrayal of trust (such as abuse by a caregiver)
- Bullying
- Life-threatening health conditions and/or painful medical procedures
- Victimization
- Domestic / Community Violence
- Illness, death of loved one or caregiver
- Removal from home
- Automobile or other serious accident
- Natural Disaster
- Acts or threats of war/terrorism





Child Traumatic Grief

- When someone important to the child dies in a sudden or violent manner that is perceived as traumatic to the child.
- The child's trauma symptoms interfere with his/her ability to grieve.





Symptoms of Child Traumatic Grief

- Being overly preoccupied with how the loved one died
- Reliving or re-enacting the traumatic death, usually during play
- Showing signs of emotional and/or behavioral distress when reminded of the loss
- Attempting to avoid physical reminders of the traumatic death, such as activities, places, or people related to the death
- Withdrawing
- Showing signs of a lack of purpose and meaning to one's life



Other Sources of Ongoing Trauma

- Poverty
- Separations from parent/siblings
- Frequent moves
- School problems
- Traumatic grief and loss
- Discrimination





Experiences from Trauma

- Life threatening
- Overwhelming
- Subjective, internal state
- Varies among individuals
- Varies over time depending on developmental level
- Single incident or chronic incidents





Post-traumatic Stress Reactions

- Re-experiencing the event
- Avoidance
- Hyperarousal
- Guilt and shame
- A child's response to a traumatic event may have a profound effect on his or her perception of self, others, the world, and the future.
- Traumatic events may affect a child's:
 - Ability to trust others
 - Sense of personal safety
 - Effectiveness in handling life changes



Effects of Trauma

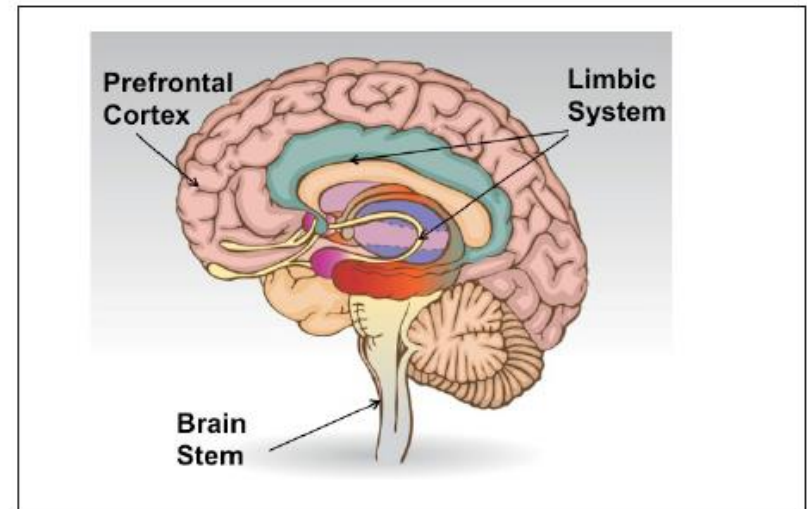
Responses to Stressors and Traumatic Events Varies –

- The impact of a potentially traumatic event is determined by:
 - The objective nature of the event and;
 - The child's subjective response to it
- Something that is traumatic for one child may not be traumatic for another.
- The impact of a potentially traumatic event depends on several factors



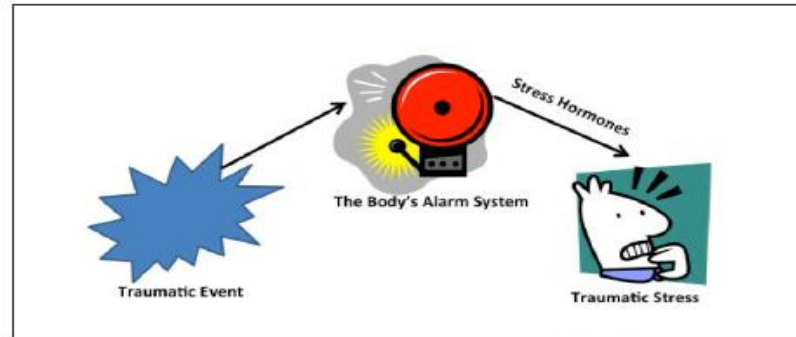
Brain Structure – Three Main Levels

- **Brainstem/Mid-brain** – autonomic functions (e.g., breathing, eating, sleeping, feeling pain)
- **Limbic System** – emotional regulation and memories, value of emotion
- **Cortex** – abstract thought, logic, factual memory, consciousness, planning, attention, impulse control, perceptual awareness





Traumatic Stress Response Cycle



(Georgetown University Center for Child & Human Development, n.d.)

- Past trauma causes the brain to interpret minor events as threatening
- Cortisol and adrenaline are released, increasing heart rate, breathing
- Fight, flight, or freeze response is initiated.
- Prefrontal cortex (reasoning) is skipped – impulsive reactions occur.
- Memories of the event can be foggy. (Campbell, J. S. W., n.d.).
- Stress hormones produced interfere with the development of higher brain functions. (Teicher, 2002)



Trauma & School Performance

- Trauma impacts school readiness
- Trauma impacts school performance
- Trauma impacts cognitive functioning that may result in behavioral difficulties
- Increased likelihood of dropping out of high school





Trauma and Development: School-Age Children

School-age children with a history of trauma may:

- Experience unwanted/intrusive thoughts and images
- Become preoccupied with frightening moments from the traumatic event
- Replay the traumatic event in their minds in order to figure out what could have been prevented or how it could have been different
- Develop intense, specific new fears linking back to the original danger



Trauma and Development: Adolescents

Trauma reactions may lead to:

- Aggressive or disruptive behavior
- Sleep disturbances masked by late-night studying, television watching, or partying
- Drug and alcohol use as a coping mechanism to deal with stress
- Self-harm (e.g., cutting)
- Over- or under-estimation of danger
- Expectations of maltreatment or abandonment
- Difficulties with trust
- Increased risk of re-victimization, especially if the adolescent has lived with chronic or complex trauma



How to approach trauma while taking care of yourself

- ✓ A Universal Precautions Approach to Trauma – The 5 S's:
 - ✓ Safety
 - ✓ Support
 - ✓ Self-Soothing
 - ✓ Strengths
 - ✓ Self-Care:





Universal Precaution #1 - SAFETY

- Maximize Physical and Psychological Safety –
 - **Psychological Safety**: the experience of feeling safe, secure, and protected from danger or harm. It relates to one's perception or sense of safety.
 - A child who has experienced trauma may still feel unsafe even though they are no longer in a dangerous situation. Therefore, in addition to ensuring physical safety, it is important to help children feel psychologically safe.



Maximizing Safety

Understand Youth's Responses to Trauma –



- Youth who have experienced trauma often exhibit challenging behaviors and reactions.
- A child's behavior is reflective of his or her experience.
- Many of the most challenging behaviors are strategies that, in the past, may have helped them survive in the presence of abusive or neglectful caregivers.



How to Maximize Safety

- Be consistent (i.e. rewards and consequences for behavior)
- Remain Calm.
- Be predictable.
- Maintain routines; prepare youth for any changes.
- Maintain professional boundaries. Avoid false promises.
- Give choices, provide youth with control over aspects of their lives.
- Support them in maintaining connections.
- Encourage caregivers to promote psychological safety.



How to Talk to Youth About Their Trauma

- Be authentic; genuinely caring. Don't feel the need to say the "right" things.
- Ask them how they would like to be helped; allow them to make their own decisions.
- Avoid sounding like an expert , or superior (no "adulthood")
- Respect their culture (i.e. do not bring up religious or spiritual issues unless their religious beliefs are known).
- Do not tell them how they should be feeling; meet them where they are. Ask them how they're feeling.
- Do not force them to talk about their trauma.
- Listen. *Do not share your own feelings, experiences or opinions.
- Avoid trivializing their feelings with "Don't cry", "Calm down", "You should be glad you're alive", etc.
- Ask, "What happened to you?" not, "What is wrong with you?"



Universal Precaution #2: SUPPORT



Supporting Youth Well-being and Resiliency –

- Positive attachment to an adult is a factor that enhances resilience for children.
- Caregivers response to the youth's trauma influences how they will perceive it. (Do not freak out!)
- Caregivers need to practice self-care so they can be emotionally available.
- Staff and overall agency policies should support the continuity of a child's relationships and minimize disruptions.
- Ensure that youth have access to trauma treatments and services when available and appropriate. (Referral process)



Resilience



Resilience: the ability to overcome adversity and thrive in the face of risk.

- Neuroplasticity allows for rewiring of neural connections through corrective relationships and experiences (van der Kolk, 2006).
- Supportive adults have the ability to help undo some of the negative effects of trauma.
- Youth who have experienced trauma can develop resilience when supported by caring, safe, and nurturing adults, and thrive when presented with positive new opportunities and learning experiences (Reed, 2006).



How You Can Be Supportive

- Nurture the child's strengths and interests – provide opportunities for exposure.
- Listen to and acknowledge their traumatic experience(s)
- Praise them for their efforts; encourage other caregivers to do the same if appropriate.
- Facilitate and promote ongoing contact between the youth and people who are important to them (family, friends, teachers, etc.)
- Identify and help to normalize troubling emotions; reinforce positive coping skills (assist in identifying past successes)
- Consider referrals to mental health providers when needed. Provide youth with ability to make their own decision.



Universal Precaution #3: SELF-SOOTHING

Assist Youth in Managing Their Feelings

- Youth rely on you to provide the “emotional glue”; they can’t access when they are losing control.
- Remain calm; monitor your own emotional reactions.
- Assist youth to identify self-soothing behaviors.
- Praise them for using appropriate coping strategies; even after a meltdown once they have regained control.
- Provide safety plans and reminders. Follow-through. Make items readily accessible.



Universal Precaution #4: STRENGTHS

Identify and Build on Youth's Existing Strengths

Individual Strengths -

- Cognitive ability
- Self-efficacy
- Internal locus of control (a sense of having control over one's life and destiny)
- Temperament
- Social skills

Family Strengths -

- Family cohesion
- Supportive parent-child interaction
- Social support (e.g., extended family support)

(Benzies & Mychasiuk, 2008)



Universal Precaution #4: STRENGTHS

Community Strengths -

- Positive school experiences
- Community resources
- Supportive peers and/or mentors (Koball et al., 2011)

Cultural Protective Factors

- Strong sense of cultural identity
- Spirituality
- Connection to cultural community
- Protective beliefs and values
- Cultural talents and skills



Universal Precaution #5: SELF-CARE

- **Individual Self-Care:** It starts with you. Stressors vary by individual. Be aware of your stressors and its impact on your physical and emotional well-being.
- **Organizational Self-Care:** Includes individual self-care on the job and the creation of healthy work environments in which a culture of self-care is a system-wide priority.



Individual Self-Care Strategies

Physical

- Getting enough sleep
- Proper nutrition
- Exercise

Emotional

- Personal support system (friends, family)
- Allow yourself to experience appropriate emotions (cry, laugh)
- Self-love, self-appraisal





Individual Self-Care Strategies

Personal

- Relaxation
- Meditation
- Prayer
- Quiet, reflective time
- Seek professional assistance (therapy, EAP)



Workplace

- Take regular breaks
- Set boundaries, limits
- Peer support
- Debrief following crisis event(s) as needed
- Get supervision
- Use PTO/vacations



What Else Can You Do for Self-Care?

- Be aware of how trauma is affecting you. Know your warning signs.
- Request regular supervision, debriefing, consultations.
- Stay connected to peers, family friends, and your community. Seek out supports and sources of enjoyment and inspiration.
- Consider therapy for any unresolved trauma that your work with youth may be triggering.
- Be diligent about using stress management techniques
- Develop a personal plan focused on maintaining work-life balance. Share it with others who can help to support you.