

Trauma Education: Science, Hope, and Healing

Goals

- Trauma and trauma informed care definitions
- Key concepts • The science
- Creating a culture of trauma informed care
- Practical tools for your organization
- Learn about secondary and vicarious trauma-encourage wellness

Characteristics of effective caregiving- Present, Attentive, Attuned, Responsive

Types of Stress

- Toxic-prolonged without protective relationship
- Neutral-serious but temporary. Harm buffered by supportive relationship
- Positive-brief

Trauma:

An event that completely overwhelms the one's ability to cope and has lasting effects on the individual.

Trauma-Informed Care:

Approach to working with people that

- assumes trauma as a universal precaution
- recognizes the presence of trauma symptoms
- acknowledges the role trauma may play in each person's, life-including their staff

Types of trauma

- Single event
- Multiple events, over time (complex)
- Interpersonal violence or violation
- Structural violence – social structures harm / disadvantage individuals – systemic oppression “isms”, poverty
- Collective, historical, generational

3 Es

- Event
- Experience
- Effects on individual's functioning and mental, physical, social, emotional, or spiritual wellbeing.

Strengthening Families Protective factors <https://cssp.org/our-work/project/strengthening-families>

- Parental/Caregiver Resilience
- Social & Emotional Competence of Child
- Concrete Supports in Times of Need
- Social Connections
- Knowledge of Parenting & Child Development

Other factors:

- Age and stage of development

- Genetics and epigenetics
- Relationship
- Severity and nature
- Duration and frequency
- Response-before, during and after
- The framing of the trauma-meaning making
- Cultural, social and societal context • Impact including losses
- Etc...

•4 R's

- Realization
- Recognize
- Responds
- Resist revictimization

Adverse Childhood Experiences-

https://www.ted.com/talks/nadine_burke_harris_how_childhood_trauma_affects_health_across_a_life_time?language=en

Brain States-Calm, alert, alarm, fear and terror

Reframing ideas

- Conventional Wisdom-"Get over it"
- Misunderstood/mislabeled/misdiagnosed
- "High Maintenance"

Reality check-trauma affects our work

- Widespread
- Broad, deep, life shaping
- Affects the more vulnerable
- Impacts how a person asks for help and trusts leadership

Organizations meant to heal often re-traumatize

Resilience

Emotion is a neurological event involving your brain and entire nervous system that rise from one's circumstances, mood, or relationships with others. <https://brenebrown.com/podcast/brene-with-emily-and-amelia-nagoski-on-burnout-and-how-to-complete-the-stress-cycle/>

Resilience boosters

- Daily structure
- Healthy eating
- Limit media-stress dose
- Exercise
- Connection
- Help others
- Sleep 'hygiene' • Process emotions
- Relaxation

Trauma Recovery / Trauma Specific Services – Reduce symptoms – Promote healing – Teach skills – Psycho-empowerment, mind-body ...

Trauma Sensitive – Awareness of trauma – Trauma lens

Some treatment options

Trauma specific services

- Addiction and Trauma Recovery Integration Model (ATRIUM)
- Essence of Being Real
- Risking Connection
- Sanctuary Model
- Seeking Safety
- Trauma Affect Regulation: Guide for Education and Therapy (TARGET)
- Trauma Recovery and Empowerment Model (TREM and M-TREM)
- **Parent Education- CIRCLE OF SECURITY & INCREDIBLE YEARS

Epigenetics

Helps us understand the impact of toxic stress across generations – transmission through our genetic code

Adverse Childhood Experiences

ACE Study Demographics

18,000 People 71% returned questionnaire

Age

- Average age 57 years old

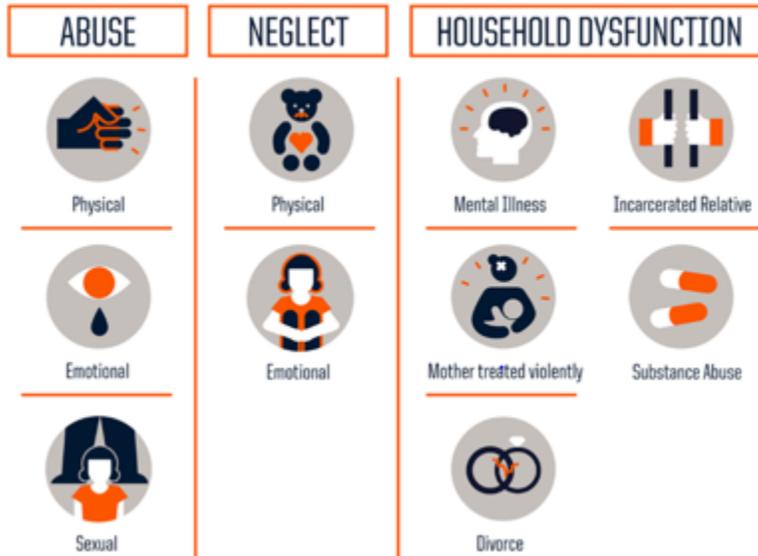
Gender

Approximately half female and half male

Education

74% attended some college

46% finished college



Impact of ACEs

Effects are neurological, biological, psychological, and social in nature, including:

Changes in brain neurobiology

Social, emotional, and cognitive impairment

Adoption of health risk behaviors as coping mechanisms

Severe and persistent behavioral health, health and social problems, and early death
(Felitti et al., 1998; Herman, 1992)

Neuroception – automatic response



Resilience

Buffering variables that reverse, prevent, or heal this process



Sensory Perception

Attention and the Trauma Brain

Divided attention is better

– hyper vigilance and the ability to pay attention to a lot of stimuli once

Selective attention is worse in general but better for threatening stimuli

Sustained attention becomes harder

Memory and the Trauma Brain

- Memory for facts, information, and episodes is impaired – damage to hippocampus
- Working memory is usually not great – frontal lobe activation is decreased
- HOWEVER – Implicit memory is strong for threatening stimuli
- Executive Functioning and the Trauma Brain

- Frontal lobe function is impaired – affecting judgement, decision making, planning, reasoning
- Poorer regulation – attention and impulse control – Anxiety related, preservative loops

Communication and the Trauma Brain

Impact of trauma

Rebuild safe brains

- Interactions that express kindness, patience, reassurance, calm acceptance, listening
- Asking questions with the purpose to understand
- Understanding the role of culture in trauma response
- Recognizing that symptoms are often a person’s way of coping with trauma or are adaptations

Implementing Trauma Informed Care

6 Key Principles

- Safety
- Trustworthiness & transparency
- Peer support
- Collaboration and mutuality
- Empowerment, voice and choice
- Cultural, historical and gender issues

A culture of Trauma Informed Care

- Involves all aspects of program activities, setting, relationships, and atmosphere (more than implementing new services).
- Involves all groups: administrators supervisors, direct service staff, support staff, and consumers.
- Involves making trauma–informed change into a new routine, a new way of thinking and acting.
- Commitment to an ongoing process of self-assessment, review, hearing from consumers and staff, openness to changing policies and practices.

Common “alarm response” moments

- Are you going to hurt me?
- When are you going to hurt me?
 - Changing or unpredictable routines
 - Transitions (settings or activities)
 - Feeling vulnerable, shame, rejection, or a loss of control •
 - Too much stimulation, sensory overload
 - Being confronted or limits set

Hotspot activation points (perceived/actual threats)

- oPolicies
- oProcedures
- oPractices
- oSpaces

What TIC doesn’t do

- Doesn’t excuse or permit or justify unacceptable behavior
 - Supports accountability, responsibility
- Doesn’t mean just being nicer
 - Compassionate yes, but not mushy

- Doesn't 'focus on the negative'
 - Skill-building, empowerment
 - Recognizing strengths
- Doesn't stop at this training –

Parallel Process within Trauma Informed Care

<u>Patients</u>	<u>Staff</u>	<u>Organization</u>
Feel unsafe	Feel unsafe	Is unsafe
Angry/aggressive	Angry/aggressive	Punitive
Helpless	Helpless	Stuck
Hopeless	Hopeless	Missionless
Hyper aroused	Hyper aroused	Crisis Driven
Fragmented	Fragmented	Fragmented
Overwhelmed	Overwhelmed	Overwhelmed
Confused	Confused	Valueless
Depressed	Demoralized	Directionless

Individual Self-Care & Organizational Workforce Wellness

Secondary Traumatic Stress: Signs and symptoms of PTSD that mirror those experienced by trauma victims. Leads to erosion of empathy, hope, and compassion

Vicarious Trauma: the cumulative effect of working with survivors of trauma

- cognitive changes resulting from empathetic engagement and a change to your world view
- tolerance, perception of personal freedom
- beliefs about self and others
- sensory memory
- imagery
- interpersonal relationships

Signs of burnout

Process

- Allow the feelings to come
- Recognize in your body
- Breathe through
- Get help if you need it

Compassion Satisfaction:

- oThe satisfaction that comes from helping others
- oProtects against compassion fatigue and secondary stress

Vicarious Resilience:

Resilience one experiences as a result of another's resilience

- Getting back in balance

- Be gentle with you!
- Provide time and space to reflect and process • Get professional help • Eat healthy for you
- Hydrate
- Rest
- Gentle exercise

Reward System of the Brain

Neurotransmitter makers

TIC makes a difference

- Improved Workforce Wellness
 - oSense of confidence, satisfaction with work
 - oReduced burnout, stress (absenteeism, turnover)
 - oImproved organizational climate
- Cross-system/Integrated Care
 - oShared language – shared resources
- Increased engagement
 - oReduced no-shows
 - oFollow through on referrals
 - oImproved satisfaction with services
 - oAdherence to plans or treatment protocols
 - oReduced Emergency Room

Moving forward

- Recognize trauma
- Get help for yourself if needed
- Understand that alarm responses are common
- Teach that these responses are normal to extreme situations
- Educate others
- Practice good self-care
- Implement Trauma Informed Care in your world