Trauma Informed Care

With Youth and Families
September 29, 2020

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Learning Objectives

1. Participants are able to define trauma and describe the impact of trauma.
2. Participants are able to understand behavior through a trauma lens.
3. Participants are able to recognize the value of utilizing a trauma-informed approach.
4. Participants are able to describe SAMHSA's guiding principles of Trauma-Informed Care.

Trauma-Informed Approach

(SAMHSA, 2018)

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

- ***Realizes*** the widespread impact of trauma and understands potential paths for recovery;
- ***Recognizes*** the signs and symptoms of trauma in clients, families, staff, and others involved with the system;
- ***Responds*** by fully integrating knowledge about trauma into policies, procedures, and practices; and
- Seeks to actively **resist *re-traumatization***."

Why Does This Matter?

- Children bring these traumas with them when they come into your school/home/center/community.
- Traumatic stress reactions and other responses to trauma can cause children to behave in ways that may baffle you.
- Trauma can impact school performance and learning.
- Children's traumas can directly affect you as well.
- Dealing with trauma without the proper tools and understanding can lead to compassion fatigue.
- A child's trauma related behavior can also bring back memories of your own that you may have struggled hard to forget.

Why Else Does This Matter?

- IMPACT OF ADVERSE CHILDHOOD EXPERIENCES AND TOXIC STRESS COSTS $112.5 BILLION PER YEAR TO CALIFORNIA
- Prevalence of ACEs in California has increased since 2013. 63.5 percent of Californians have experienced at least one of the ACEs
- Adverse Childhood Experiences and toxic stress will cost California over a trillion dollars in the next 10 years. https://www.acesaware.org/
- 2020 California Children's Report Card https://www.childrennow.org/portfolio-posts/20-report-card/

Developing A Trauma Lens

Shifting the focus from ***"What's wrong with you?"*** to ***"What happened to you?"***

What Does it Mean to be Trauma Informed?

https://www.youtube.com/watch?v=rc-unDgBAMk&feature=youtu.be

*What is **Trauma**?*

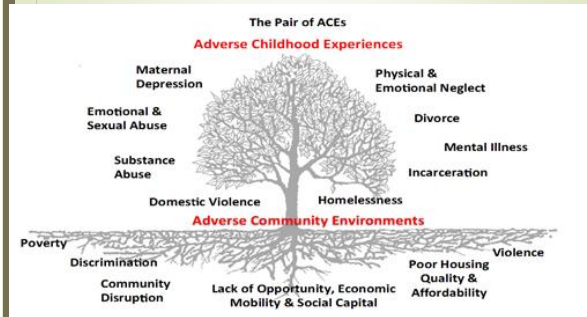
"Trauma results from an event or series of events that is experienced by an individual as physically and/or emotionally harmful or threatening and has lasting, adverse effects on the individual's functioning and well-being. ***It is the individual's experience of these events that determines whether it is traumatic."***

SAMHSA, 2014

Types of Trauma

- Acute Trauma
- Chronic Trauma
- Complex Trauma
- Historical Trauma
- Racial Trauma
- Traumatic Grief
- Systems-Induced Trauma
- Community Trauma

Building Community Resilience (BCR) 'pair of ACEs' framework



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

CDC Vital Signs/ACEs report (Data 2015-2017)

Takeaway #1: ACEs are common

- Nearly 61% of all respondents experienced at least one type of ACEs.
- Females and American Indian/Alaskan Native Non-Hispanic, Black Non-Hispanic groups were more likely to experience 4 or more ACEs.
- Some children and families are at greater risk for ACEs due to the historical, social, structural, political, and economic environments in which they live.

Takeaway #2: The effects of ACEs add up over time and impact our health and life outcomes.

Takeaway #3: Preventing ACEs could help prevent poor health and life outcomes.

- At least five of the top ten leading causes of death are associated with ACEs.

Takeaway #4: ACEs *are* preventable. ***Prevention happens in partnership.***

https://www.childtrends.org/publications/prevalence-adverse-childhood-experiences-nationally-state-race-ethnicity

Prevalence of Trauma

Individuals who experience significantly higher rates of trauma include:

- Black, Indigenous and Latinx youth
- Homeless youth
- Lesbian, gay, bisexual, and transgender youth
- Juvenile Justice System involved youth
- Refugee youth, particularly those not accompanied by a caregiver
- Youth with an Intellectual and/or Developmental Disability
- Youth in Foster Care

Resource*

Psychological Trauma: Theory, Research, Practice and Policy 2020, Volume 12, Issue 5 (July)

Differential Impact of COVID-19 on Communities of Color

International Perspectives on COVID-19

What is the Impact of Trauma?

- Acute distress almost universal
- Impact *can* be long lasting
- Childhood trauma is a risk factor for numerous adult psychiatric and medical problems
- Impact varies; most recover over time without treatment but a significant minority will develop moderate to severe PTS symptoms and will require treatment
- There are cultural differences in how people understand and respond to trauma
- Trauma can derail development and impact brain development

Viewing Trauma in the Environmental Context

- Individual attributes
- Developmental factors
- Protective and risk factors
- Life history
- Type of trauma, specific characteristics of the trauma
- Parental response
- Amount and length of trauma exposure
- Cultural meaning of traumatic events
- Number of losses associated with the trauma
- Available resources (internal and external, such as coping skills and family support)
- Community reactions

Impact of Trauma on Family System

- Youth and Family Perspectives on Trauma-Informed Care. A collaborative project with JBS International Inc. and Georgetown University National Technical Assistance Center for Children's Mental Health https://vimeo.com/105717042

- Simultaneous exposure
- Impact on Parent-Child Relationship
- Vicarious traumatization or contagion of trauma
- Intrafamilial trauma
- Impact on engagement in treatment

***Caregivers are central to recovery and treatment following trauma for children**

- #1 predictor of recovery is parental response

The Meaning of Trauma

It is important to remember that what happened is not nearly as important as ***what the trauma means to the individual.***

Substance Abuse and Mental Health Services Administration. *Trauma-Informed Care in Behavioral Health Services*. Treatment Improvement Protocol (TIP) Series 57.

Common Responses to Trauma: Cognitive

- Foreshortened future
- Disruption of core beliefs
  - "Every time I get close to someone they leave me."
- Perceptions of self and others
- Dissociation

Substance Abuse and Mental Health Services Administration. *Trauma-Informed Care in Behavioral Health Services*. Treatment Improvement Protocol (TIP) Series 57.

Common Responses to Trauma: Emotional

- Emotional dysregulation
- Numbing
- Physical
- Somatization
- Hyperarousal
- Sleep disturbances
- Triggers or cues
- Flashbacks
- Trauma-induced hallucinations or delusions

Substance Abuse and Mental Health Services Administration. *Trauma-Informed Care in Behavioral Health Services*. Treatment Improvement Protocol (TIP) Series 57.

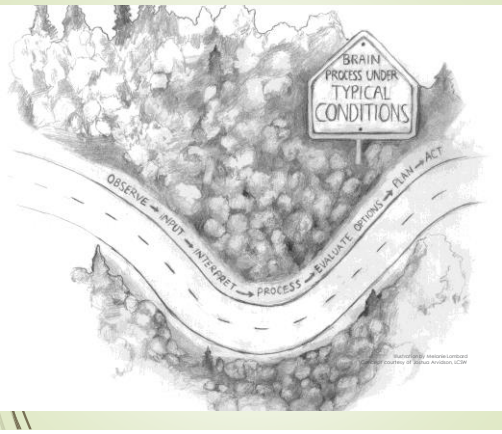
Danger

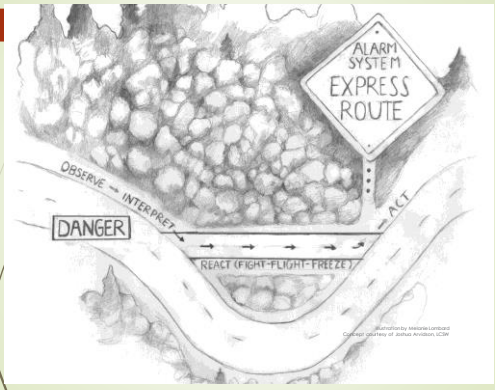
Marrow, M., Benamati, J., Decker, K., Griffin, D., and Lott, D. A. (2012). *Think trauma: A training for staff in juvenile justice residential settings.* Los Angeles, CA, and Durham, NC: National Center for Child Traumatic Stress.

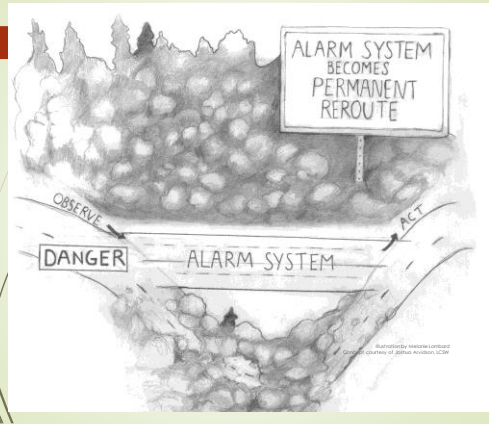
Common Responses to Trauma: Behavioral

- Reenactments
- Self-destructive and self-harming
- Avoidance

Substance Abuse and Mental Health Services Administration. *Trauma-Informed Care in Behavioral Health Services*. Treatment Improvement Protocol (TIP) Series 57.







Understanding the Relationship Between Behavior and Trauma

- What helps the child survive?
  - Assumption of danger and self protective stance.
  - Rapid mobilization in the face of perceived threat (Fight, Flight, Freeze).
  - Development of alternative strategies to meet developmental needs. Curriculum - Blaustein
- **Acknowledge that previous attempts were best effort to self-regulate.**
- **View dysregulation as response to stress instead of willful misbehavior.**

Kliethermes & Wamser, 2013

Survival Coping Strategies

"The only thing that really helps me sleep is smoking. It's what makes me go to sleep at night. It takes away the nightmares."

Marrow, M., Benamati, J., Decker, K., Griffin, D., and Lott, D. A. (2012). *Think trauma: A training for staff in juvenile justice residential settings.* Los Angeles, CA, and Durham, NC: National Center for Child Traumatic Stress

Complex Trauma Response

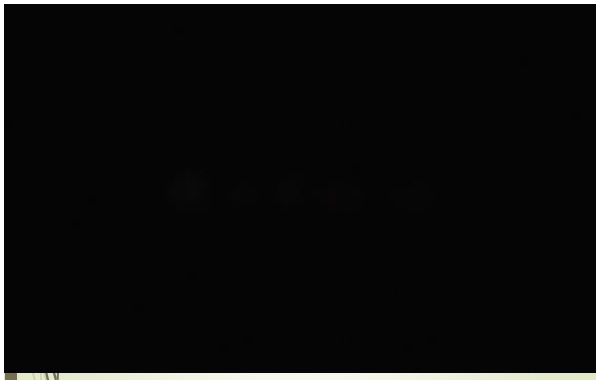
[redacted]

Never Give Up: A Complex Trauma Film by Youth for Youth
https://youtu.be/y8XaYdQfV3A

Post Traumatic Growth

- Post-traumatic growth (PTG) holds that people who endure psychological struggle following adversity can often see positive growth afterward.
- "People develop new understandings of themselves, the world they live in, how to relate to other people, the kind of future they might have and a better understanding of how to live life," says Tedeschi.

Richard Tedeschi, PhD, and Lawrence Calhoun, PhD



The Me I Once Was
https://youtu.be/PYUpdXnFSc8

Recognize and Respond to Trauma and Loss Reminders

- Listen and look for specific trauma and loss reminders that might connect to a client's reaction.
  - People, situations, places, or things that evoke past traumatic events
- Help your client become aware of internal and external cues connected to their specific triggers.
- In collaboration with the client, identify what could help if they become triggered in the treatment setting.
- Take seriously clients' symptoms and needs when they have triggered trauma memories.
- Be mindful that efforts to control and contain a client's behaviors in treatment can produce an trauma response.
- ***Recognize your own triggers and the impact of those on your response to others***

Recognize Treatment Issues That Can Cause Retraumatization

Examples include:

- Separation from caregivers/community.
- Practices that isolate or confine individuals.
- Environments or practices where physical space and personal boundaries appear overwhelming or unsafe.
- Authoritative or confrontational behavior.
- Observing physical altercations or fear of being attacked by other youth.

Recognize Treatment Issues That Can Cause Retraumatization

Examples include:

- Mislabeling client symptoms or being unaware that the client's traumatic history significantly affects his or her life.
- Presenting treatment as conditional on conformity to the counselor's beliefs and definitions of issues.
- Challenging or discounting reports of abuse or other traumatic events.
- Allowing the abusive behavior of one client toward another to continue without intervention.

Substance Abuse and Mental Health Services Administration. *Trauma-Informed Care in Behavioral Health Services*. Treatment Improvement Protocol (TIP) Series 57.

Grounding Techniques (Exhibit 1.4-1)

Grounding can help you defuse an escalating situation or calm a client who is triggered. Grounding strategies help a person become aware of the here and now.

1. Ask the client to state what he or she observes
2. Help the client decrease the intensity of affect
3. Distract the client from unbearable emotional states
4. Ask the client to use breathing techniques

Source: Melnick & Bassuk, 2000

Substance Abuse and Mental Health Services Administration. *Trauma-Informed Care in Behavioral Health Services*. Treatment Improvement Protocol (TIP) Series 57.

Grounding (Figure D-15, p. 413)

- **Mental**
  - Describe your environment in detail using all your senses. Describe objects, sounds, textures, colors, smells, shapes, numbers, and temperature. You can do this anywhere.
- **Physical**
  - Run cool or warm water over your hands.
  - Touch various objects around you: a pen, keys, your clothing, the table, the walls. Notice textures, colors, materials, weight, temperature. Compare objects you touch: Is one colder? Lighter?
- **Soothing**
  - Picture people you care about (e.g., your children), and look at photographs of them.
  - Remember the words to an inspiring song, quotation, or poem that makes you feel better, such as the Serenity Prayer.

Substance Abuse and Mental Health Services Administration. Substance Abuse Treatment for Persons With Co-Occurring Disorders. Treatment Improvement Protocol (TIP) Series, No. 42.

Guiding Principles of Trauma-Informed Care
(SAMHSA, 2014)

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

Create a Safe Environment

Key elements include:

- Consistency
- Follow-through
- Dependability
- Honest and compassionate communication

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Create a Safe Environment

Evaluate the physical environment.

- Is it welcoming of and responsive to the needs of trauma survivors?
- Does it promote a sense of safety, calming, and de-escalation for clients and staff?
- Is there space that both staff and people receiving services can use to practice self-care?

Safety in the Time of Telehealth

Assess appropriateness for telehealth.

- Vision or hearing difficulties
- Safety/self-harm/suicidal ideation concerns
- Impulsivity, attention problems, destructive behaviors
- Privacy in home
- Adult/caregiver present in home during session
- Access to necessary equipment

Stewart, 2020

Trustworthiness and Transparency

- Is transparency and trust among staff and clients promoted?
- What is the process for informing clients of rules, procedures, activities, and options? Are they followed consistently?
- Have information-sharing agreements been developed to minimize duplication of questions?

The Importance of Culture and Identity

- Develop mechanisms to address physical and emotional safety concerns related to race, ethnicity, gender and sexual identity.
- Recruit staff who are representative of the community or service area. Involve community leaders.
- Ensure that services are accessible, appropriate, and equitable.

Substance Abuse and Mental Health Services Administration. Trauma-Informed Care in Behavioral Health Services. Treatment Improvement Protocol (TIP) Series 57.

The Outbreak That Was Always Here:

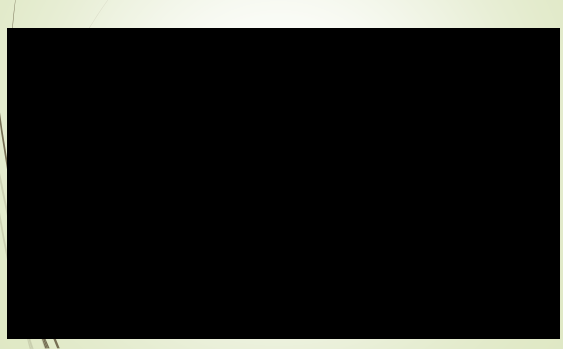
Racial trauma in the context of COVID-19 and implications for mental health providers.

- Consider cultural identity, with a focus on inherent strengths and previous experiences of resiliency of the individual and their community.
- Support clients to utilize racial socialization
- Encourage and assist connecting to social supports
- Have a trauma and culturally-informed approach
- Lens of cultural humility
- Assess for exposure to racial trauma
- Be aware of potential for clients to experience secondary trauma during times of national distress.
- Eikenberg Academy for Social Justice and Dr. Kenneth V. Hardy will be collaborating with The Black Mental Health Alliance and Greater Malden Behavioral Health https://uncoveringracialtrauma.eventsmart.com/

Liu, S. R., & Modir, S. (2020). **The outbreak that was always here: Racial trauma in the context of COVID-19 and implications for mental health providers.** *Psychological Trauma: Theory, Research, Practice, and Policy*, 12(5), 439-442. http://dx.doi.org/10.1037/tra0000784

NCTSN LGBTQ Youth:

Voices of Trauma Lives of Promise



Support Control, Choice, and Autonomy

- Creating opportunities for empowerment.
- Ask: "What can I do to make you feel more comfortable during this process?"
- Create liaisons between service providers.
- Create the opportunity for people with lived experience to provide feedback on quality improvement processes for better engagement and services?

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Create Collaborative Relationships and Participation Opportunities

- Shifting the viewpoint from, "We, the providers, know best," to the more collaborative, "Together, we can find solutions."
  - Youth and Family Perspectives on Trauma-Informed Care. A collaborative project with JBS International Inc. and Georgetown University National Technical Assistance Center for Children's Mental Health https://vimeo.com/105717042
- Sharing Power. It seeks to combine the knowledge and training of the provider with the lived experience of the families receiving services.
- Create Peer Support Groups
  - **Rise: Stories for Parents Under Stress** (BY AND FOR PARENTS IN THE CHILD WELFARE SYSTEM) https://www.risemagazine.org/

NCTSN What's SHARING POWER Got to Do with Trauma-Informed Practice?; SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach.

Considerations for Trauma Screening

- Treatment setting should guide screening practices.
- Screening should benefit the patient.
- Re-screening should be avoided.
- Ample training should precede screening.

Menschner, C. & Alexandra, M. (2016). Center for Health Care Strategies. Key Ingredients for Successful Trauma-Informed Care Implementation

Screening Considerations

- Trauma-related symptoms
- Depressive symptoms
- Sleep disturbances
- Past and present mental disorders, including trauma-related disorders
- Type and characteristics of trauma
- Intergenerational trauma
- Trauma in country of origin or during immigration process, separation, deportation
- Discrimination and oppression
- Substance abuse
- Social support, coping styles, and availability of resources
- Risks for self-harm, suicide, and violence
- Physical health

Substance Abuse and Mental Health Services Administration. *Trauma-Informed Care in Behavioral Health Services*. Treatment Improvement Protocol (TIP) Series 57.

Use Strengths-Oriented Questions and Provide Hope

- What behaviors have helped you survive during and after your traumatic experiences?
- What are some of the creative ways that you deal with painful feelings?
- If we were to ask someone in your life, who knew your history and experience with trauma, to name two positive characteristics that help you survive, what would they be?
- What coping tools have you learned from your _____ (fill in: cultural history, spiritual practices, athletic pursuits, etc.)?

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Identifying Evidence Based Treatment and Promising Practices for Trauma

National Child Traumatic Stress Network (NCTSN)

- https://www.nctsn.org/treatments-and-practices/trauma-treatments/interventions
- https://learn.nctsn.org/

California Evidence-Based Clearinghouse for Child Welfare

- https://www.cebc4cw.org/

Psychoeducation and Prevention Resources For Young Children

- http://lookthroughtheireyes.org/young-children-and-trauma/ Information and resources about trauma
- http://piploproductions.com/ Trauma information using stories and cute characters
- Sesame Street https://www.sesamestreet.org/toolkits/challenges
  - Apps: Sesame Street
    - Breathe, Think, Do
    - Incarceration
    - Military Families
    - Moving
    - Divorce/Separation
    - Let's Get Ready! (Safety Planning)

Secondary Traumatic Stress

"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."

Rachel Remen, 1996
Kitchen Table Wisdom

Professional Quality of Life Elements Theory and Measurement http://www.proqol.org/

–Free online assessments, research, resources

Decreasing the Risk of Secondary Trauma and Promoting Self-Care

- Peer support
- Supervision and consultation
- Training
- Personal therapy
- Maintaining balance
- Setting clear limits and boundaries with clients

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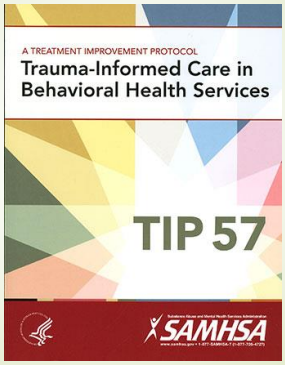
Trauma-Informed Approach: Bottom line

- Utilize a trauma-informed approach, regardless of what you know or don't know about an individual
- Learn about the youth and the context of their experiences
- Ask the right questions
  - "What happened to you?"
  - "How were you affected?"
  - "Who is there for you?"

Trauma-Informed Approach: Bottom line

- Communicate and exhibit physical and psychological safety
- Demonstrate respect, appreciate cultural values, support autonomy, justice, beneficence and nonmaleficence
- Address power imbalances to reduce re-traumatization
- Help youth to understand their behaviors from a trauma lens
- Model and assist with the use of adaptive coping skills

SAMHSA, 2014



Thank you and Contact Information

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