



COMMUNITY HEALTH CARE ASSOCIATION of New York State

TRAUMA-INFORMED CARE (TIC) & WELLNESS

LUNCH ROOM MEETUP



Monthly Virtual Meetups + Community Care Wellness Resources

Trauma 101: An Introduction to Trauma-Informed Care

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Overview



- Consider how we define trauma
- Recognize the ways trauma can impact the brain
- Discuss re-traumatization and what it may look like
- Introduce the guiding values/principles of a trauma-informed (TI) approach
- Reflect on current trauma-informed practices



What is Trauma?



Trauma: defined

“Psychological trauma is an occurrence which is outside the scope of everyday human experience and which would be notably distressing to almost anyone.”

- ** Acute Stress Disorder (ASD), Posttraumatic Stress Disorder (PTSD)
- ** Complex Trauma
- ** Historical/Cultural/Collective Trauma
- ** Adverse Childhood Experiences (ACEs)

(American Psychiatric Association, 1987)

The “Three Es” of Trauma

Events or Circumstances

Individual’s *Experience*

Long-lasting *Effects*



(SAMHSA, 2014)

World View



“ I expect
crisis, danger,
and **loss.** ”

“ The world
is an
unsafe
place to
live. ”

“ I have no
self-worth and
no **abilities.** ”

“ My own
thoughts and
feelings are
unsafe. ”

“ Other people
are **unsafe** and
can't be trusted. ”

Trauma and the Brain

When we perceive something as a threat, the amygdala activates and generates a fear response—commonly referred to as the “**fight, flight, or freeze**” or stress response.



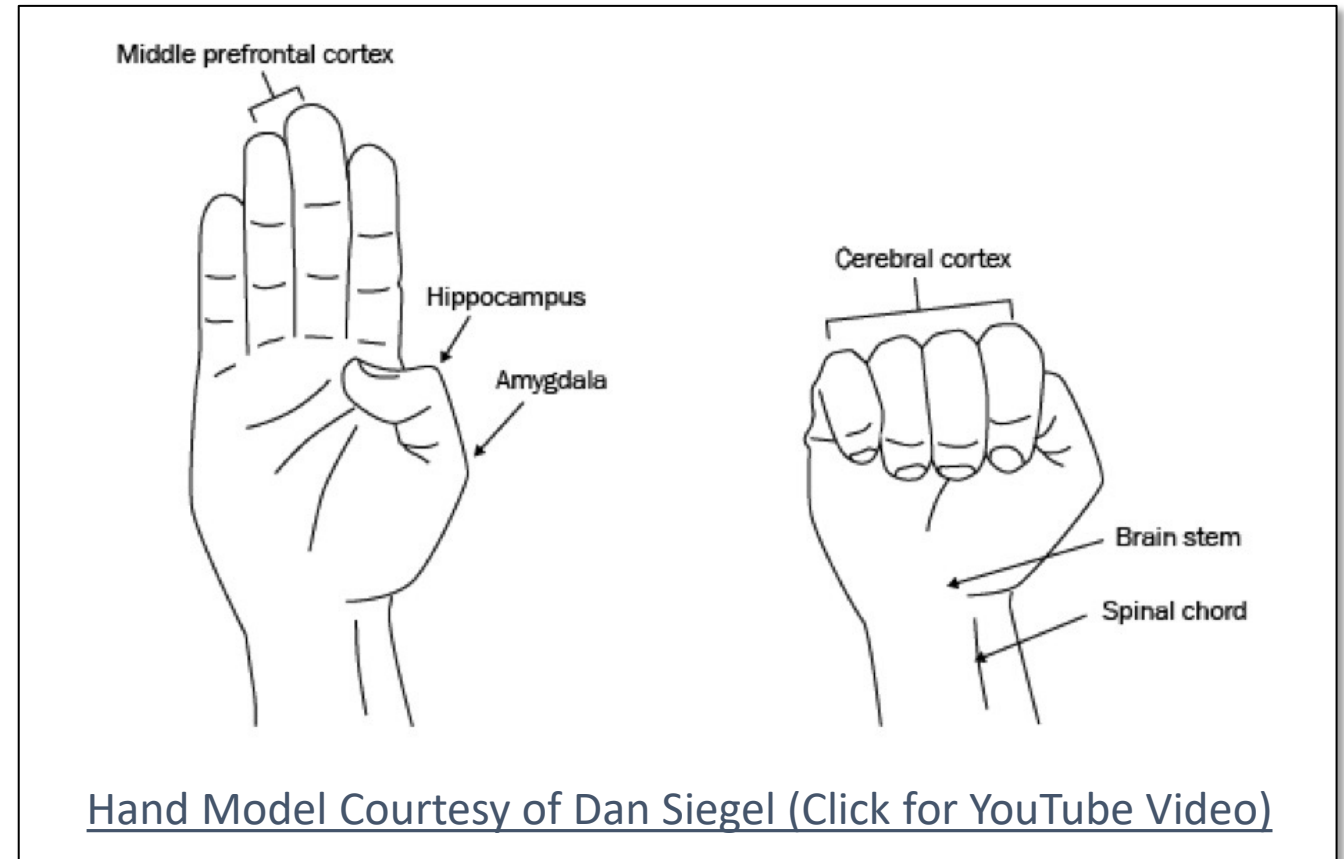
(Burke-Harris, 2014; Klinic, 2013; Pessoa, 2011)

Active Trauma & Crisis: Emotion Dysregulation

Being in the middle of an active crisis or trauma event can cause the amygdala to be on **overdrive**...

...resulting in ongoing emotion dysregulation—particularly heightened feelings of **worry, fear, anxiety and stress**.

** Important to also recognize the impact of complex trauma on the brain*



(Dunn et al., 2018; Siegel, 2012)

THE IMPACT OF TRAUMA

Emotion Regulation

Trauma affects one's ability to:

- *control impulses*
- *interpret emotional cues*
- *trust in the reliability of others*
- *establish a predictable sense of self*



Physical & Mental Health

Trauma affects the likelihood that one will:

- *attempt to die by suicide*
- *engage in substance abuse*
- *develop a sexually transmitted disease*
- *develop diabetes/heart disease/cancer*



Perceptions & Beliefs

Trauma affects one's:

- *ability to hope*
- *core beliefs about self, others, & the world*



Cognitive Functioning

Trauma affects one's ability to:

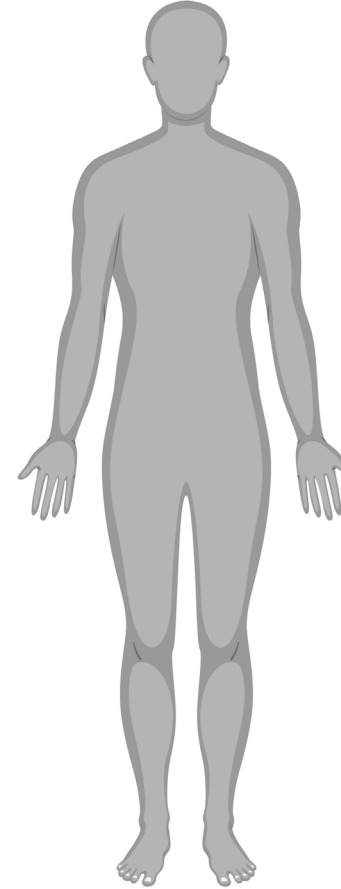
- *form memories*
- *make decisions*
- *learn & concentrate*
- *process and express language*



Relationships

Trauma affects one's ability to:

- *trust others*
- *set boundaries*
- *express needs and wants to others*
- *identify and form healthy relationships*



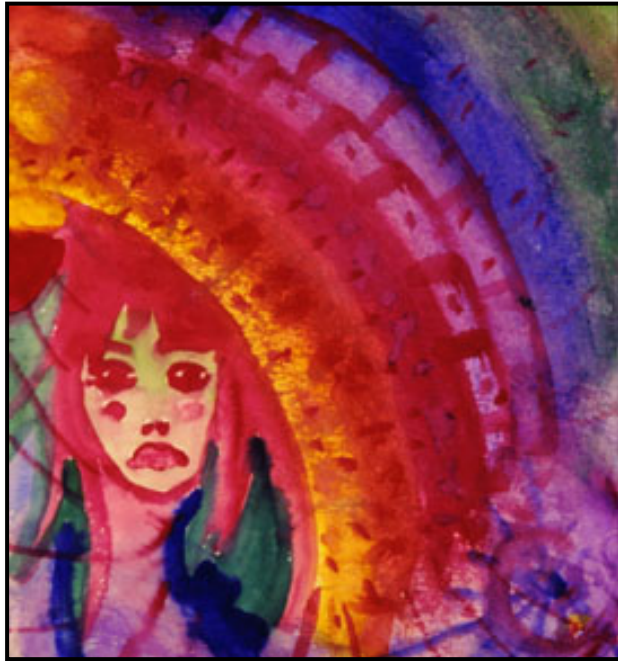
(The Institute on Trauma and Trauma-Informed Care, 2020)

We've learned that the way we sometimes DO business can hurt people.



What is “Retraumatization”?

A situation, attitude, interaction, or environment that **replicates the events or dynamics of the original trauma** and triggers the overwhelming feelings and reactions associated with them.



- Can be **obvious** - or **not so obvious**
- Is **usually unintentional**
- Is **always hurtful** – often exacerbating the very symptoms that brought the person into services

(The Anna Institute, n.d.)

System

(Policies, Procedures, Structural and Institutional Racism and Oppression)



Having to continually retell their story



Being treated as a number



Being seen as their label, title or status (i.e., addict, disabled, illegal)



No choice in service or treatment



Non-acknowledgement of work-related stress



No access to services



Practices without accessibility considerations



Isolation or exclusion practices



Marginalizing practices



Practices without cultural considerations



"-isms" and phobias

Relationship

(Power, Control, Subversiveness, Interpersonal Racism and Oppression)



Not being seen/heard



Non-transparency and veiled truths



Doing things for rather than with



Using punitive treatment, coercive practices and oppressive language



Racial profiling



Being non-collaborative



Victim blaming



Non-acknowledgement of historical narratives



Microaggressions



Non-inclusive language and messaging



Non-acknowledgement of power dynamics

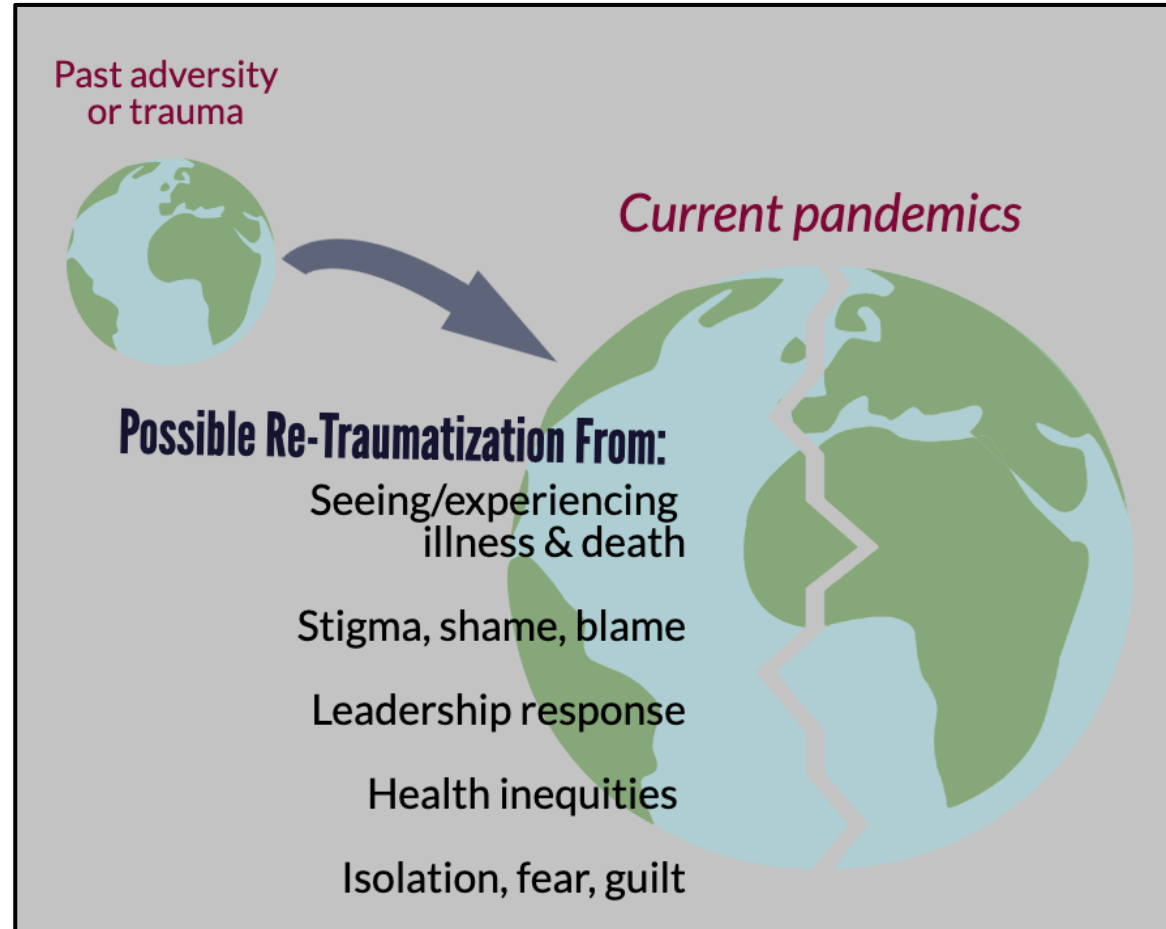
Retraumatization

WHAT HURTS?



(The Institute on Trauma and Trauma-Informed Care, 2021)

Reality of now...



(Institute on Trauma and Trauma-Informed Care, 2020)

Trauma-Informed Care (TIC)

We stop asking:

“What is *wrong with* this person?”

and begin asking....

“What has *happened to* this person?”

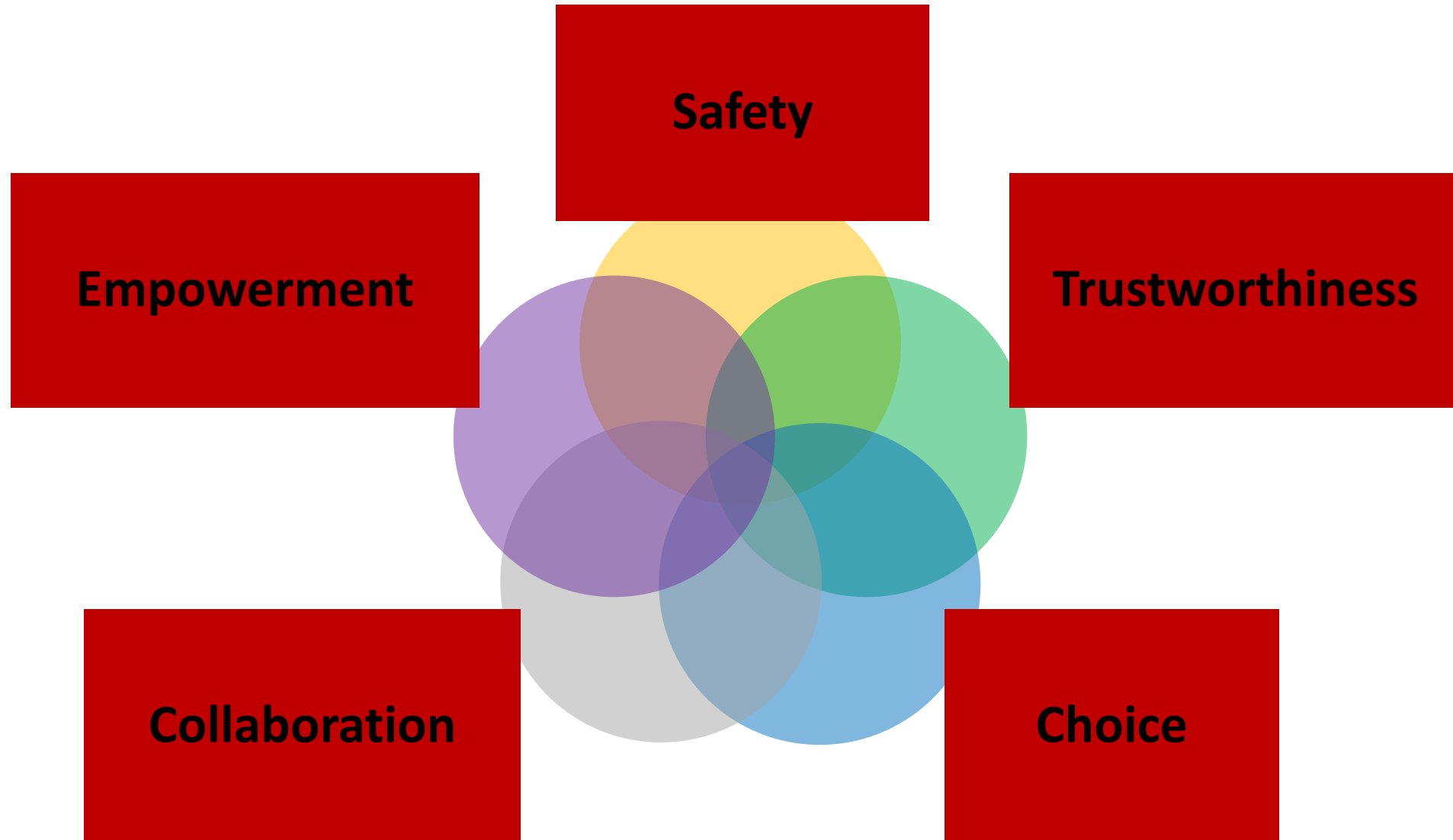


Universal Precaution



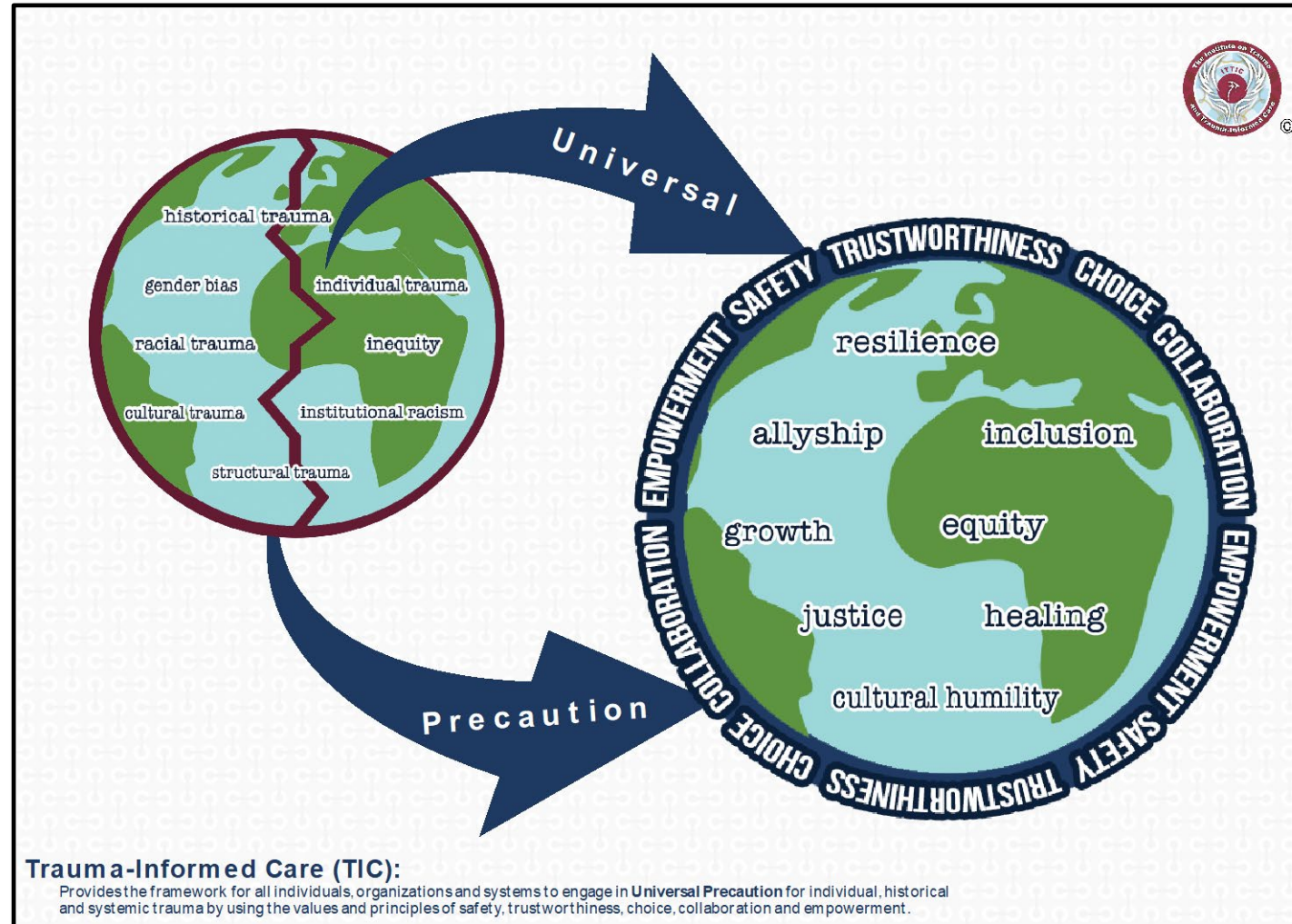


Trauma-Informed Guiding Values and Principles



(Fallot & Harris, 2001)

Universal Precaution



Your Role and Responding to Trauma

Trauma-Informed



- Understand trauma and its impact
- Recognize possible trauma reactions and behaviors
- Identify and use the 5 values/principles in all interactions

***** Everyone in the health center/system***

Your Role and Responding to Trauma



Trauma-Sensitive



- Make deliberate changes to interactions, policies, protocols and environments to address potential re-traumatization
- Acknowledge the impact of the work on self and colleagues

*** Everyone in the health center/system*

- Administer trauma screening and assessment tools

*** Counselors, social workers, psychologists, nurses, etc. who are trained*

Your Role and Responding to Trauma



Trauma-Specific

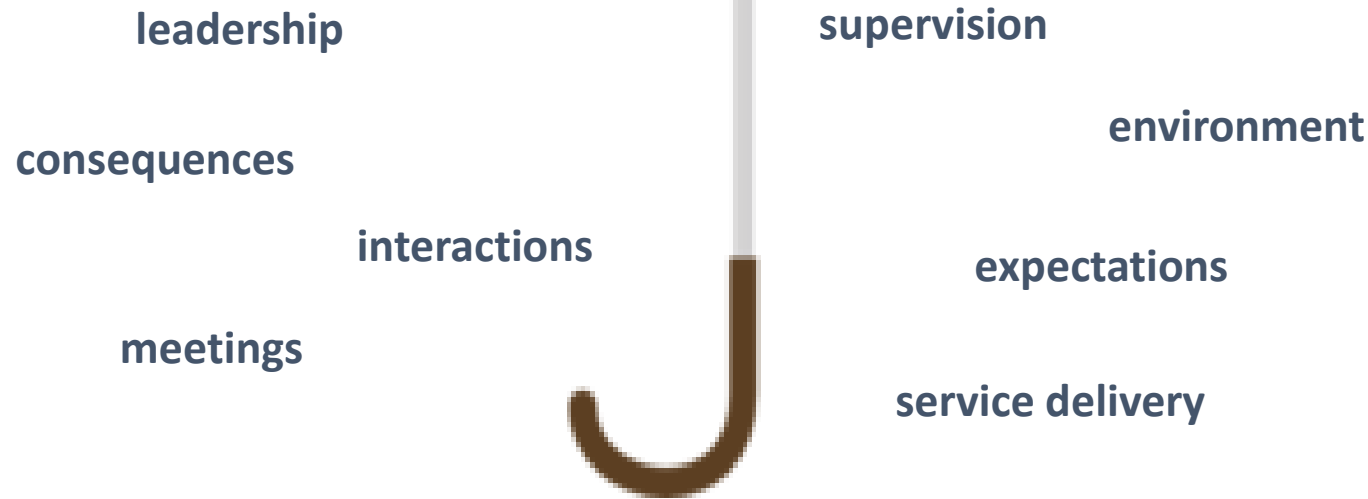


Offer evidence-based interventions designed to treat trauma, such as:

- Eye Movement Desensitization Reprocessing (EMDR)
- Cognitive Processing Therapy (CPT)
- Seeking Safety (SS)
- Trauma-Focused Cognitive Behavioral Therapy (TF-CBT)

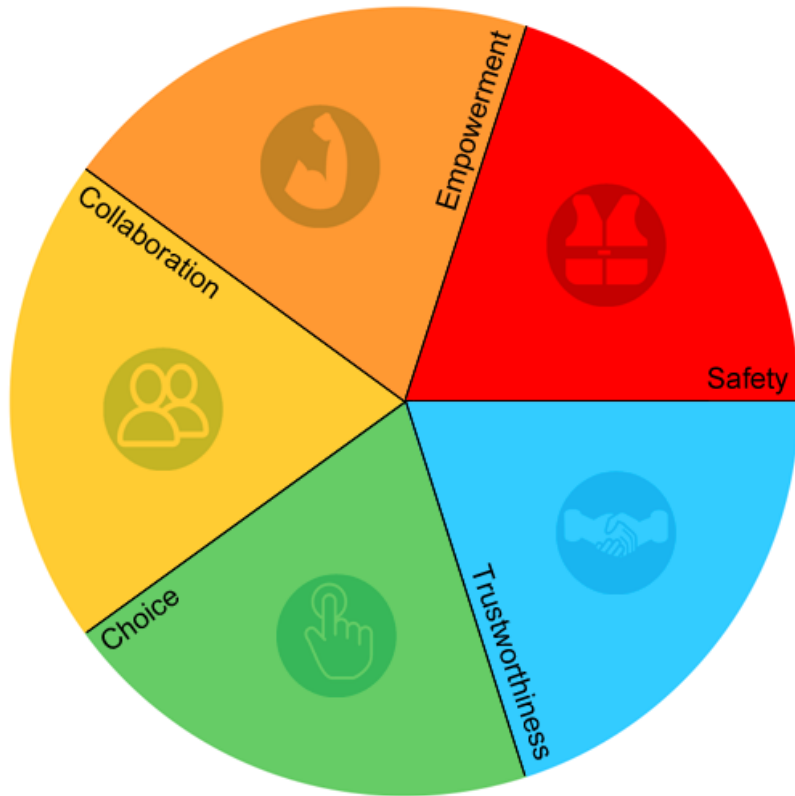
***** Trained trauma therapists only***

Trauma-Informed Practices



Being trauma-informed is about ***the way we do our work.***

Reflection Activity



1. On a scale of **1 to 10**, with 10 being you are engaging in the value/principle of _____, and 1 being the total opposite, **where would you rate yourself right now?**
2. What is **already in place** that helps you be at that number?
3. **What will be different** that will let you know you've moved up just 1 point higher?
4. What is the **next small step** to get to that higher number?

RSA



Additional Resources



ITTIC Trauma-Informed Organizational Change Manual:

<http://socialwork.buffalo.edu/trauma-manual>

TIC Implementation Resource Center:

<https://www.traumainformedcare.chcs.org/>

SAMHSA TIP-57: Trauma-Informed Care in Behavioral Health Services:

<https://store.samhsa.gov/product/TIP-57-Trauma-Informed-Care-in-Behavioral-Health-Services/SMA14-4816>



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We truly value your feedback!

