# UNDERSTANDING TRAUMA:

When Bad Things Happen To Good People

### WHAT IS TRAUMA?

#### Definition (NASMHPD, 2006):

 The experience of violence and victimization including sexual abuse, physical abuse, severe neglect, loss, domestic violence and/or the witnessing of violence, terrorism or disasters.

#### DSM IV-TR (APA, 2000)

- Person's response involves intense fear, horror and helplessness
- Extreme stress that overwhelms the person's capacity to cope

### WHAT IS TRAUMA-INFORMED CARE?

Behavioral Health Services that incorporates:

- An appreciation for the high prevalence of traumatic experiences in persons who receive mental health services
- A thorough understanding of the profound neurological, biological, psychological and social effects of trauma and violence on the individual. (Jennings, 2004)
- We need to presume the clients we serve have a history of traumatic stress and exercise "universal precautions" by creating systems of care that are trauma informed. (Hodas, 2005)

#### ADVERSE CHILDHOOD EXPERIENCES (ACE) SURVEY (FELLITTI AND ANDA, 1998)

#### **CHILDHOOD ABUSE**

Did a parent or other adult in the household...

- Often or very often swear at you, insult you, or put you down?
- Sometimes, often, or very often act in a way that made you afraid that you might be physically hurt?

## Did a parent or other adult in the household...

- Often or very often push, grab, slap, or throw something at you?
- Often or very often hit you so hard that you had marks or were injured?
- Did an adult or person at least 5 years older ever...
- Touch or fondle you in a sexual way?
- Have you touch their body in a sexual way?
- Attempt oral, anal, or vaginal intercourse with you? Actually have oral, anal, or vaginal intercourse with you?

#### **HOUSEHOLD DYSFUNCTION**

Substance Abuse

- Live with anyone who used street drugs? Mental Illness
- Was a household member depressed or mentally ill?
- Did a household member attempt suicide?

Mother treated violently: Was your mother (or stepmother)...

- Sometimes, often, or very often pushed, grabbed, slapped, or had something thrown at her?
- Sometimes, often, or very often kicked, bitten, hit with a fist, or hit with something hard
- Ever repeatedly hit over at least a few minutes?
- Ever threatened with or hurt by a knife or gun?
- Incarcerated household member
- Did a household member go to prison?
- Parental separation or divorce
- Were your parents ever separated or divorced?

### WHAT DOES TRAUMA-INFORMED CARE LOOK LIKE?

TRAUMA INFORMED	NOT TRAUMA INFORMED	
Recognition of high prevalence of trauma	Lack of education on trauma preva- lence & "universal precautions"	
Recognition of primary and co-occurring trauma diagnosis	Over-diagnosis of Schizophrenia & Bipolar Disorder, Conduct Disorder & singular addictions.	
Assess for traumatic histories & symptoms	Cursory or no trauma assessment	
Recognition of culture and practices that are re-traumatizing	"Tradition of Toughness" valued as best care approach	
Power/control minimized — constant attention to culture	Keys, security uniforms, staff demeanor, tone of voice	
Caregivers/ supporters – focus on collaboration	Rule enforcers – focus on compliance	
Address training needs of staff to improve knowledge & sensitivity	"Patient-blaming" as fallback position without training	
Staff understand function of behavior as coping adaptations (rage, repetition-compul- sion, self-injury)	Behavior seen as intentionally provocative	
Objective, neutral language	Labeling language: manipulative, needy, "attention-seeking"	
Transparent systems open to outside parties	Closed system – advocates discourage	



## UNDERSTANDING TRAUMA: When Bad Things Happen To Good People

### WE MUST BE MINDFUL THAT, WE, AS CARE PROVIDERS AND STAFF:

- Often have our own traumatic histories
- Experience vicarious trauma in our work
- Seek to avoid re-experiencing our own emotions
- Respond personally to others' emotional states
- Perceive behavior as personal threat or provocation rather than as re-enactment
- Perceive client's simultaneous need for and fear of closeness as a trigger of our own loss, rejection, and anger.

#### **TRIGGERS OR TRIGGERING EVENTS**

Triggers are those external events or circumstances, which, when they occur, predictably produce reactions that are negative and may be very disturbing. Knowing that you are susceptible to feeling uncomfortable emotional reactions to particular events and circumstances is the first step to reduce their power over you.

When we recognize that almost anything could be a trigger to someone, we know we have to ask people what is upsetting to them and what helps them when they are able to identify what those things might be.

#### **POTENTIAL TRIGGERS:**

- Loud or abrupt noises
- Smells
- Tone of voice
- Glaring lights
- Waiting for long periods of time to receive services
- Aggressive behavior
- Impatience
- Not being listening to or being heard
- Small spaces
- Crowds

- Having to repeat one's story multiple times to multiple people Filling out forms
- Filling out forms
- Removal of or denial of privileges
- Colors
- Anniversary dates
- Signage
- Disorder/chaotic environments
- Lack of choice or options
- Not being believed
- Darkness

#### **ADDITIONAL RESOURCES**

- The Anna Institute www.theannainstitute.org
- Adverse Childhood Experiences Survey www.acesurvey.org
- The National Child Traumatic Stress Network www.nctsn.org
- The National Council for Community Behavioral Healthcare www.thenationalcouncil.org
- SAMHSA Disaster Technical Assistance Center www.samhsa.gov/dtac
- The SAMHSA National GAINS Center www.gainscenter.samhsa.gov
- SAMHSA Promoting Alternatives to Seclusion and Restraint through Trauma-Informed Practices – www.nasmhpd.org

### ARE YOU TAKING CARE OF YOURSELF - WELLNESS TOOLS

Wellness tools are healthy choices that you can make that are usually simple, safe and free. What makes you feel better? What helps you when you feel stressed?

#### EXAMPLES OF WELLNESS TOOLS:

- Focused breathing exercises
- Take 5 walk away
- Meditation
- Prayer
- Yoga
- Music
- Reading
- Talking to a supporter/friend
- Have a good cry or a good laugh
- Gardening
- Go outside or walk in nature
- Exercise
- Hydrate with water
- Prepare a healthy meal or snack
- Journaling
- Hobbies
- Time with family
- Watch a movie
- Volunteer
- Relaxation exercise
- Rest
- Talking with a supporter

Wellness tools are unique to every person and what we know is if we do something that is focused on our wellness, we are less focused on illness.



## STRESS & EARLY BRAIN GROWTH Understanding Adverse Childhood Experiences (ACEs)

#### What are ACEs?

ACEs are serious childhood traumas -- a list is shown below -- that result in toxic stress that can harm a child's brain. This toxic stress may prevent child from learning, from playing in a healthy way with other children, and can result in long-term health problems.

## Adverse Childhood Experiences can include:

- 1. Emotional abuse
- 2. Physical abuse
- 3. Sexual abuse
- 4. Emotional neglect
- 5. Physical neglect
- 6. Mother treated violently
- 7. Household substance abuse
- 8. Household mental illness
- 9. Parental separation or divorce
- 10. Incarcerated household member
- 11. Bullying (by another child or adult)
- 12. Witnessing violence outside the home
- 13. Witness a brother or sister being abused
- 14. Racism, sexism, or any other form of discrimination
- 15. Being homeless
- 16. Natural disasters and war

## Exposure to childhood ACEs can increase the risk of:

- · Adolescent pregnancy
- · Alcoholism and alcohol abuse
- · Depression
- · Illicit drug use
- · Heart disease
- · Liver disease
- · Multiple sexual partners
- · Intimate partner violence
- · Sexually transmitted diseases (STDs)
- · Smoking
- · Suicide attempts
- · Unintended pregnancies

#### How do ACEs affect health?

**Through stress.** Frequent or prolonged exposure to ACEs can create toxic stress which can damage the developing brain of a child and affect overall health.



**A Survival Mode Response** to toxic stress increases a child's heart rate, blood pressure, breathing and muscle tension. Their thinking brain is knocked off-line. Self-protection is their priority. In other words:

"I can't hear you! I can't respond to you! I am just trying to be safe!"

## The good news is resilience can bring back health and hope!



#### What is Resilience?

Resilience is the ability to return to being healthy and hopeful after bad things happen. Research shows that if parents provide a safe environment for their children and teach them how to be resilient, that helps reduce the effects of ACEs.

#### **Resilience trumps ACEs!**

#### Parents, teachers and caregivers can help children by:

- · Gaining an understanding of ACEs
- · Creating environments where children feel safe emotionally and physically
- · Helping children identify feelings and manage emotions
- Creating a safe physical and emotional environment at home, in school, and in neighborhoods

#### What does resilience look like?

#### 1. Having resilient parents

Parents who know how to solve problems, who have healthy relationships with other adults, and who build healthy relationships with their children.

#### 2. Building attachment and nurturing relationships

Adults who listen and respond patiently to a child in a supportive way, and pay attention to a child's physical and emotional needs.

#### 3. Building social connections

Having family, friends and/or neighbors who support, help and listen to children.

#### 4. Meeting basic needs

Providing children with safe housing, nutritious food, appropriate clothing, and access to health care and good education.

## 5. Learning about parenting and how children grow

Understanding how parents can help their children grow in a healthy way, and what to expect from children as they grow.

#### 6. Building social and emotional skills

Helping children interact in a healthy way with others, manage their emotions and communicate their feelings and needs.

#### **Resources:**

#### ACES 101

http://acestoohigh.com/aces-101/

Triple-P Parenting www.triplep-parenting.net/gloen/home/

Resilience Trumps ACEs www.resiliencetrumpsACEs.com

#### CDC-Kaiser Adverse Childhood Experiences Study

www.cdc.gov/violenceprevention/aces tudy/

#### Zero to Three Guides for Parents

www.zerotothree.org/about-us/areasof-expertise/free-parent-brochures-and-guides/

## **Trauma-Sensitive Practices**

## Safety

- Use a warm and compassionate manner to build rapport
- Speak in a calm, caring tone
- Take time to familiarize the person with the physical environment
- Ask about comfort level with lighting and environmental surroundings
- Actively listen without judgment
- Show respect
- Share control

## Choice

- Allow the person to decide where to sit / stand in the room
- Ask if you can close the door
- Provide as many choices without compromising safety
- Explain rationale for your intervention and obtain consent
- Make sure you can follow through with choices provided

## **Trustworthiness**

- Ask the person what they want or how you can help them
- Actively listen
- Tell the person what to expect and how long it will take
- Explain all interventions in terms the person can understand
- Do what you say you are going to do; apologize if you are not able to or if you made a mistake

## Collaboration

- Share information
- Allow the person to problem-solve
- Encourage the person to make decisions about treatment
- Provide opportunities to take on a leadership role

## Empowerment

- Ask "What happened to you" rather than "What is wrong with you?"
- Pay attention to body cues; many survivors have been conditioned to be passive and defer to authority and so may not disclose distress
- Take time with the person so they feel genuinely heard
- Ask the person what they need to meet their goals
- Model and build self-confidence (acknowledge even the smallest positives)



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## What Might You See?

## Nonverbal Indicators of Discomfort and Distress

## These behaviors are probably best understood as "fight, flight, or freeze" responses to the perception of a threat:

- Rapid heart rate and breathing
- Holding breath or sudden change in breathing pattern
- Sudden flooding of strong emotions (such as anger, sadness, fear, etc.)
- Color draining from the face or face becoming red
- Sweating
- Muscle stiffness, muscle tension, and inability to relax
- Cringing, flinching, or pulling away
- Trembling, shaking, or extreme restlessness
- Pacing, muttering, or other signs of agitation
- Startle response
- Staring vacantly into the distance
- "Spacing out" or being uninvolved in the present
- Being unable to focus, concentrate, or respond to instructions
- Being unable to speak

## **Common Trauma Triggers**

Loud or abrupt noises	Smells	
Tone of voice	Glaring lights / darkness	
Waiting for long periods of time	Having to repeat one's story multiple times to multiple people	
Aggressive behavior	Impatience	
Being ignored, dismissed, or mocked	Small spaces	
Crowds / chaotic environments	Being touched	
Removal of or denial of privileges	Colors and signage	
Anniversary dates	Language	



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## The Missouri Model Principles of Trauma Informed Care

### SAFETY

Ensure physical and emotional safety, recognizing and responding to how racial, ethnic, religious, gender or sexual identity may impact safety across the lifespan.

## TRUSTWORTHINESS

Foster genuine relationships and practices that build trust, making tasks clear, maintaining appropriate boundaries and creating norms for interaction that promote reconciliation and healing. Understand and respond to ways in which explicit and implicit power can affect the development of trusting relationships. This includes acknowledging and mitigating internal biases and recognizing the historic power of majority populations.

## Сноісе

Maximize choice, addressing how privilege, power, and historic relationships impact both perceptions about and ability to act upon choice.

## COLLABORATION

Honor transparency and self-determination, and seek to minimize the impact of the inherent power differential while maximizing collaboration and sharing responsibility for making meaningful decisions.

### Empowerment

Encouraging self-efficacy, identifying strengths and building skills which leads to individual pathways for healing while recognizing and responding to the impact of historical trauma and oppression.

The five principles were initially based on Creating Cultures of Trauma-Informed Care (CCTIC): A Self-Assessment and Planning Protocol; Community Connections; Washington, D.C. Roger D. Fallot, Ph.D. and Maxine Harris, Ph.D. April, 2009.

The revised Missouri Model Principles of Trauma Informed Care were approved October 2018 by the Missouri State Trauma Roundtable.



## MINDFULNESS

Stay aware of your sensory experience

Stay out of judgment

Stay in the present moment

## **SBNRR Mindfulness Practice**

Stop what you are doing

Breathe for a moment

Notice where in your body you feel tension or strong emotion

Reflect on why you may be feeling that way

Respond mindfully

## 5-4-3-2-1 Mindfulness Practice

In your mind, describe in detail:

5 things you can see

 $\underline{4}$  things you can touch

<u>3</u> things you can hear

2 things you can smell

<u>1</u> thing you can taste

## **Benefits of Mindfulness**

Body	Mind	Emotions
Boosts immune system	Increases gray matter	Increases positive emotions
Lowers blood pressure	Improves attention	Fosters compassion for others
Reduces chronic pain	Enhances memory	Cultivates self-compassion
Improves sleep	Improves emotional regulation	Builds empathy
Alleviates GI issues	Supports calm responses	Decreases anxiety

# Self-Care: Finding the Time



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## If you have 2 minutes

- Take a few deep breaths or stretch
- Doodle, daydream, or look at a photo of a loved one
- Take a bathroom break
- Let someone know that you may need some time to talk later
- Enjoy a peppermint or stick of gum

- Think of three things for which you are grateful
- Share a smile or laugh with a coworker
- Have a cup of tea, coffee, or water
- Acknowledge an accomplishment
- Massage your forehead or hands

## ••••••

- Listen to music and sing out loud
- Jot down your dreams or goals
- Run in place, do some jumping jacks, or walk up and down steps
- Have a cleansing cry
- Note a strength or quality you value in someone else and tell them

## If you have 5 minutes

- Send an email that has been nagging you
- Spend time with a pet
- Step outside for fresh air
- Straighten up your desk or work area
- Enjoy a healthy snack

## 

- Write in a journal
- Assess your self-care
- Have a conversation with someone you don't normally see
- Talk to a friend, family member, or co-worker about a problem or frustration
- Take some quiet time to reflect on what you need from others in your life and how you can ask for help

- Surf the web for inspiring quotes
- Take a brisk walk or dance to music you enjoy
- Add things to your work area that bring you joy—plants, photos, inspiring or funny quotes
- Plan a celebration to acknowledge an accomplishment or milestone
- Find a quiet place either indoors or outdoors and meditate

## If you have 30 minutes ••••

- Read for pleasure
- Go shopping for something fun
- Have a "walking" meeting rather than meet in an office
- Exercise vigorously, practice yoga, or take a bubble bath
- Visit a friend you haven't seen in a while

- Review your calendar to mindfully create space
- Play a game with family/friends
- Spend time in nature
- Watch your favorite TV show or listen to your favorite album
- Cook a meal



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