


TRAUMA
STARS


SAFETY TRUSTWORTHINESS AWARENESS RELATIONSHIP

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SAMHSA DEFINITION OF TRAUMA


Trauma results from an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or threatening.


Trauma has lasting adverse effects on the individual's functioning and physical, social, emotional, or spiritual well-being.

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ACUTE TRAUMA

- **A single** traumatic event or experience that is limited in time and impacts a person's physical or emotional safety
 - Caused by nature
 - Accidental
 - Intentional Acts
- **Examples-** car accident with serious injury or death, robbery, overdose, sudden or violent loss of a loved one, physical injury



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CHRONIC TRAUMA

- **Multiple** traumatic events or experiences that reoccur and/or are prolonged

Example: Exposure to domestic violence, war, natural disaster(s), exposure to crime-ridden area, ongoing major illness, ongoing bullying, homelessness



HISTORICAL & INTERGENERATIONAL TRAUMA

- Personal or historical events that are widespread and affect an entire culture
- **Prolonged** experience that continues to have an impact over **several generations**

Examples: Slavery; the Holocaust, Trail of Tears, racism, forced removal/relocation; massacre, genocide, racial and immigrant oppression, family secret (incest), incarceration



COMPLEX TRAUMA

- **Chronic, interpersonal and cumulative events that have an early onset and affect a child's neurodevelopment**

The trauma is often caused by a trusted caregiver.

Examples: Emotional abuse, physical abuse, sexual abuse, neglect, domestic violence



UNDERSTANDING TRAUMATIC STRESS

Reactions to stress that interfere with daily functioning and overwhelm the person's ability to cope with what they have experienced.

- Can compromise sense of self-worth, attachment, mood regulation, impulsivity and relationships



TRAUMA IS DIFFERENT FOR EVERYONE

Every traumatic experience is different and each person's response depends on many factors including:

- Person's age and developmental level
- Coping skills
- Support and resources
- Context and circumstances in which the stressful event occurs.



REACTIONS TO TRAUMATIC STRESS

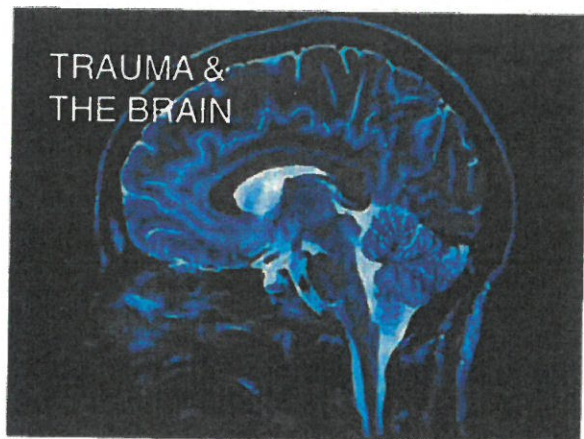
- Intrusion symptoms- recurrent and distressing
 - Intrusive thoughts
 - Nightmares
 - Flashbacks
- Avoidance of trauma-related stimuli
 - Trauma-related thoughts or feelings
 - Trauma-related reminders: people, places, activities, situations
- Increased arousal symptoms
 - Irritability, aggression, difficulty concentrating, difficulty sleeping, risky/destructive behavior, heightened startle reaction, hypervigilance, extreme temper tantrums



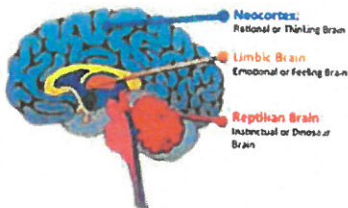
REACTIONS TO TRAUMATIC STRESS

- **Negative thoughts and feelings that worsen after the trauma**
 - Feeling isolated/detached, exaggerated blame of self or others for causing the trauma, inability to recall key details of the trauma, decreased interest in activities & social interactions
- **Dissociation**
 - Feeling detached, like an outside observer from oneself ("This is not happening to me"), "zoned out"
 - Feeling unreal or in a dream, feel like they are floating
- **Through Our Eyes**





THE TRIUNE BRAIN





- Developed by Paul MacLean, physician and neuroscientist
- The Triune Brain in Evolution (1990)
- Simplistic model that explains the "Bottom up" architecture of the brain.



LIMBIC BRAIN- EMOTIONAL BRAIN


- The limbic system is involved in survival instincts, memory and procedural learning.
- The amygdala is involved with emotion and motivation.
 - Always alert & scanning the environment
 - Processes facial expressions, emotions & reads social cues
 - Can have difficulty distinguishing real danger from perceived danger




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THE STRESS RESPONSE

The amygdala processes fear → fight, flight and freeze response




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NEOCORTEX - THINKING BRAIN

- The cerebral cortex is responsible for executive functioning- analytical thinking, decision making, self-regulation of behavior
- The prefrontal cortex does not fully develop until the mid-20s
- The cerebral cortex can integrate input from the emotional and rational systems, but they compete.
- When emotional arousal is high, the emotional brain can hijack/dominate the cerebral cortex.

There is a lag in processing during times of stress

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THE STRESS RESPONSE

- When the traumatic event is occurring the stress response shuts down 80-90% of the brain's functioning.
- In the moment, the person cannot process information as they would normally.
 - Speak to them as you would a 3 year old or dog



THE STRESS RESPONSE

- When the traumatic event is occurring the stress response shuts down 80-90% of the brain's functioning. This is why there is a lag in processing during times of stress.
- In the moment, the person cannot process information as they would normally.
 - Speak to them as you would a 3 year old: short sentences, simple commands, calm tone
 - Remain calm and limit distractions



THE IMPACT OF STRESS

- Once cortisol is released it can take between 20 minutes and 2 hours for the person to come back to homeostasis/calm
 - It is unrealistic to expect anyone, especially children, to immediately calm down and refocus once the stress response is engaged.
- Chronic exposure to trauma causes the brain to develop in "survival mode" and stress hormones interfere with the development of higher brain functions.
 - Memory loss
 - Developmental delay and immaturity



CALMING DOWN

Calm the Body

- Rhythmic motions like bouncing a ball or rocking
- Stress ball
- Calm/sensory box
- Belly breathes
- Mindfulness exercise (washing hands, eating)

Calm the Mind

- Sensory 5-4-3-2-1
- Mentally listing simple information (days of the week, favorite animals, counting backwards or by 3's)
- Listening to music, writing, drawing



POSSIBLE COPING SKILLS

In order to cope with traumatic experiences, people may use unhealthy habits to survive....

- Smoking
- Drinking
- Sex
- Drugs
- Fighting
- Cussing
- Screaming

Dismissing these coping devices as "bad habits" or "self destructive behavior" misses their functionality.

It is important to treat the TRAUMA not the BEHAVIORS



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TRAUMA INFORMED PRACTICE



TRAUMA INFORMED CARE

SAMHSA states that a program, organization, or system that is trauma-informed:

1. realizes the widespread impact of trauma and understands potential paths for healing;
2. recognizes the signs and symptoms of trauma in clients, staff, and others involved with the system; and
3. responds by fully integrating knowledge and understanding of trauma into policies, procedures, practices, and settings.
4. Seeks to actively resist re-traumatization.

SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach



HOW CAN WE HELP?

SHIFT THINKING FROM:

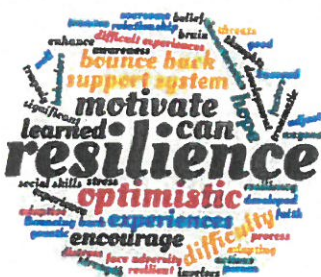
What's wrong with you?

To

What happened to you?



BUILDING RESILIENCE



WHAT IS RESILIENCE?

The American Psychological Association defines resilience as the process of adapting well in the face of adversity, trauma, tragedy, threats or significant sources of stress.

- Bouncing back from difficult experiences

Resilience involves behaviors, thoughts and actions that can be learned and developed in anyone.

<http://www.apa.org/pubs/journals/07-00000-00000-0000>



RESILIENCE

Some factors of resilience may be genetic but the adaptive characteristics of resilience can be learned.

Just as traumatic experiences can undermine the brain's development, good experiences can enhance it.




STRATEGIES TO BUILD RESILIENCE


- 1. Have a strong support system and use them. For children, a strong relationship with at least 1 adult is critical.
- 2. Have a spiritual belief system- belief in a higher power or purpose.
- 3. Learn about others who are resilient and overcame traumatic experiences.
- 4. Accept that mistakes and challenges will happen.
- 5. Develop a 'change' or 'growth' mindset instead of a fixed mindset.



STRATEGIES TO BUILD RESILIENCE


- Develop self-efficacy: Positive self view and belief that you can succeed
- Have a sense of control over one's life
- Know that you can adjust/overcome challenges & stressors and learn from them
- Regulate your thoughts, feelings & emotions
- Have hope. See the positive. Be grateful. Laugh

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SAFETY TRUSTWORTHINESS AWARENESS RELATIONSHIP

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GUIDING PRINCIPLES OF TRAUMA INFORMED CARE

SAFETY

- Enable all individuals to feel physically and emotionally safe
- Ensure that interpersonal interactions promote a sense of safety

TRUSTWORTHINESS & TRANSPARENCY


- Create an environment of trust demonstrated by our actions to clients, staff/co-workers and the community
- Maintain transparency, consistency and good interpersonal boundaries

AWARENESS


- Recognize common trauma responses
- Understands the multiple ways trauma impacts individuals

RELATIONSHIP

- Everyone has a role to play in a trauma-informed approach
- Understand that growth/healing takes place in the context of relationships

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TRAUMA'S IMPACT ON YOU


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HELPING THE HELPERS

Trauma impacts professionals, families and systems as well as clients.

Intervention efforts must focus on the professional as well if we want to avoid:

- Burnout
- Vicarious trauma

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Burnout

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BURNOUT

Term coined by the psychologist Herbert Freudenberger in the 1970s

- It describes the consequences of severe stress and high ideals experienced by people working in "helping" professions. Doctors and nurses, for example, who sacrifice themselves for others, would often end up being "burned out" exhausted, listless, and unable to cope"

U.S. National Library of Medicine



SIGNS OF BURNOUT

| | | |
|----------------------|---------------------------|------------------------|
| Exhaustion | Cynicism | Health Problems |
| Lack of motivation | Forgetful | Angry & Irritable |
| Lack of satisfaction | Decreased job performance | Not taking care of YOU |



VICARIOUS TRAUMA



VICARIOUS TRAUMA

Negative cumulative changes that take place in helping professionals over time, after witnessing or hearing the traumatic experiences of others.

For helping professionals, vicarious trauma can:

- Impact you cognitively, emotionally, physically, spiritually and your ability to do your job.
- Present as PTSD symptoms

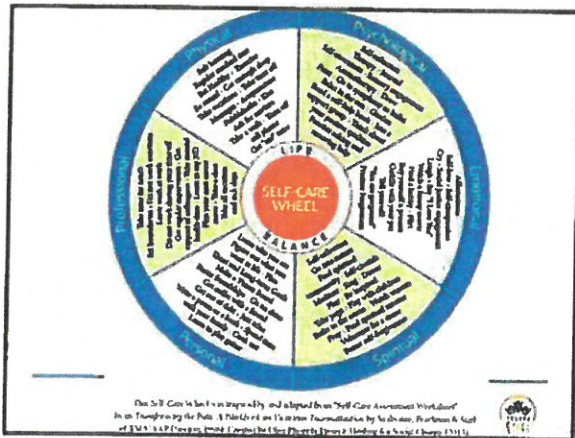


RISK FACTORS FOR VICARIOUS TRAUMA



SELF CARE





WHAT ABOUT YOU?

- What are your risk factors?
- What helps protect you from vicarious trauma?
- How will you practice self-care in the next week? Month?

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THE TAKE HOME MESSAGE

Trauma is pervasive

The impact of trauma touches many life domains

Become trauma informed

We help individuals find resilience and healing

Trauma affects staff members in human service programs

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