

# Trauma Informed Care

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## To Be Trauma Informed an Organization:

realizes the widespread impact of trauma and understand potential paths for recovery;

recognizes the signs and symptoms of trauma in clients, families, staff, and others involved with the system; and

responds by fully integrating knowledge about trauma into policies, procedures, and practices, and seek to actively resist re-traumatization"

(SAMHSA's Concept of Trauma and guidance for a Trauma-Informed Approach, 2014 http://store.samhsa.gov/shin/content/SMA14-4884/SMA14-4884.pdf)

# TRAUMA-INFORMED CARE

TIC IS NOT ABOUT	TIC IS ABOUT
excusing or justifying unacceptable behavior	supporting accountability & responsibility
just being "nicer"	practicing compassion
focusing on the negative	focusing on skill-building, strengths based, & healing centered care
the 'end all, be all'	committing to a process
Attending just another training	transforming spaces, practices, procedures & policies; a culture shift
moving away from work related to diversity, equity, inclusion or resilience	inclusion of and partnership with other frameworks
something "new"	learning from many culturally specific programs

## Consider:

- Intrapersonal
  - Reflections on how you are doing. Your places of fear, worry, strength, healing.
- Interpersonal
  - How this is manifesting in relationships. With your co-workers, supervisors, families, etc.
- Organization
  - How this is showing up in policies, practices, and decision making.

### WHY and HOW

Neurobiology

**Epigenetics** 

Adverse Childhood Experiences

Resilience

Safety

Transparency &

Trustworthiness

Peer Support

Collaboration

Empowerment, Voice &

Choice

Cultural, Historical,

Gender issues

To those we are engaging and to our workforce

### Terms

### Trauma –

Anything that overwhelms one's ability to cope. Can be single event. More often multiple events, over time (complex, prolonged trauma). Includes collective, historical, generational – EXPAND your definition.

### Disenfranchised grief -

 experience when there a loss that is not or cannot be openly acknowledged, socially sanctioned or publicly mourned – (Doka, K)

### Toxic Stress –

prolonged activation of the stress response system with no buffer.

### Scarcity -

having less than you think you need (time, money, resources, space, food) (Mullainathan & Shafir)

### Neurobiology

Helps us understand how our brain development and functions are impacted by toxic stress/trauma

### Flip the Lid (Hand Model of the Brain)

Make a Fist with your thumb tucked inside your fingers. This is a model of your brain.



Thumb = Midbrain (Stem & Limbic) = Emotional Brain. This is where emotions and memories are processed. This is where the fight, flight & freeze is triggered.

Fingers = Cerebral Cortex = Rational Brain. Houses our ability to think and reason.

Fingernails = Prefrontal Cortex = Problem-Solving

When something triggers us, we are prone to "Flip our Lid" which means the Prefrontal Cortex (Fingernails) have a very poor connection with the Midbrain (Thumb), and we're not able to access the logical, problem-solving part of our brain. Our emotions are overriding our ability to think clearly.

-Dr. Dan Siegal



### Challenges with:

- Memory
- Communication
- Sensory regulation
- Executive functioning
- Regulation

In Survival Mode – assessing threat constantly

In the CHAT BOX share what emotions you seeing, hearing about?

# Brain and Body Function

- Attention can be a problem
  - Amygdala in survivors is hyper-vigilant scanning for <u>real</u> or <u>perceived</u> threat. Incoming sensory information is really important, but can also be triggering.
  - Attentional control from frontal lobe is decreased perseverate, fixate, trouble concentrating
- Memory is impaired damage to hippocampus due to excess cortisol
  - Working memory (short term) is impaired
  - Long term (explicit) memory (hippocampus) facts, stories, pictures – impaired
  - Long term (implicit) memory (amygdala acute trauma) often clear and sharp

### BRAIN AND BODY FUNCTION

- Communication is challenging: dominance of RH
  - ▶ Decreased verbal (left hemisphere) hypersensitive to nonverbal (right hemisphere) – prone to misinterpret.
- Executive Function is impaired
  - ▶ Planning, decision making, self-regulation, weighing the severity of a situation, prioritizing and other EF are worse.
- Beliefs are affected
  - Changes your sense of self, others, world
  - Relational disturbance
  - Blame
- Physical symptoms can result
  - ▶ Pain sleen immune system all can be affected

# Considerations for Organizations:

- more black and white,
- attention is more narrowly focused on the immediate here and now,
- difficulty planning or thinking ahead,
- difficulty regulating our emotions,
- less able to make decisions.

#### COVID-19

#### Considerations for a Trauma Informed Response for Work Settings (Organizations/Schools/Clinics)

#### Purpose

The purpose of this document is to provide trauma informed considerations for work settings as we all navigate the uncharted territory and response to novel Coronavirus (COVID-19). We will refer to organizations in this document, but this includes schools, clinics, and other places where services are provided. The following considerations are grounded in the principles of trauma informed care (see <u>SAMHSA Guidance for a Trauma Informed Approach</u> for more information). We invite you to use the same framework as you are making decisions and communicating to staff.

#### Rationale

For most people, COVID-19 will be associated with increased uncertainty and stress. When we are under acute stress we are more likely to be operating from the survival areas of our brain, which means that our thinking becomes much more black and white, our attention is more narrowly focused on the immediate here and now, we start to have difficulty planning or thinking ahead, we have difficulty regulating our emotions, and we become less able to make decisions. Stressful times are associated with threats to our safety and a loss of power and control. A trauma informed approach can help reduce or prevent a trauma response.

#### Considerations

In addition to using the TIC principles to guide our work moving forward, it's important to keep these general TIC practices in mind.

- Support regulation when stressed, people have a harder time managing emotions and staying regulated. Build in time for regulation practices like breathing, grounding exercises, and movement. Model the calm behavior you want staff to mirror.
- Prioritize relationships. Social support and connection can actually buffer a stress response. During times of stress, it's important to find ways to connect and support each other.
- Explain the why behind decisions. Understanding why something (like a policy or practice) is happening can give people a sense of control and decrease a stress response.
- Help staff know what to expect to the extent possible. In uncertain times, having any amount of certainty or predictability is helpful. We aren't suggesting that you provide answers that you don't have; however, sharing information when it's available will decrease stress.
- Reframe behaviors. It's important to remember that emotional regulation and impulse control are more difficult during times of stress. People may not be showing up as their best selves during this period of fear and chaos. We need to

### Through policy, procedures, & practices:

### Support regulation:

when stressed, people have a harder time managing emotions and staying regulated. Build in time for regulation practices like breathing, grounding exercises, and movement. <u>Model the calm behavior you want staff to mirror.</u>

### Prioritize relationships.

Social support and connection can actually buffer a stress response. During times of stress, it's important to find ways to connect and support each other.

### Explain the why behind decisions.

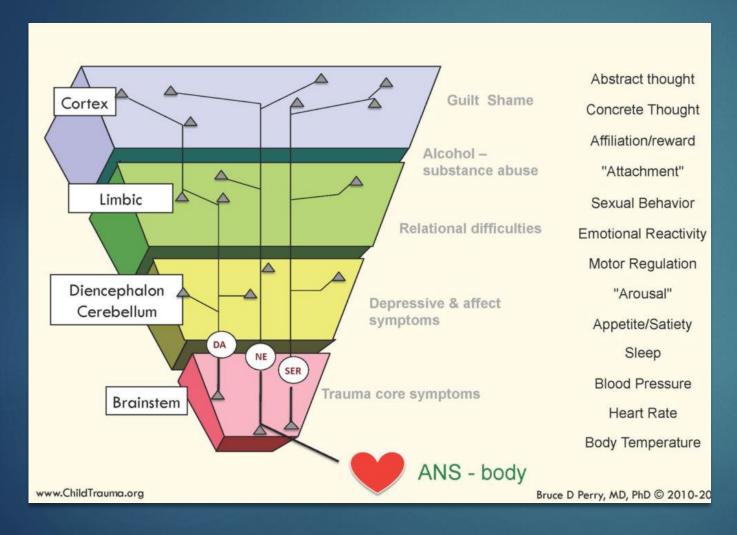
Understanding why something (like a policy or practice) is happening can give people a sense of control and decrease a stress response.

### ▶ Help staff know what to expect to the extent possible.

In uncertain times, having any amount of certainty or predictability is helpful. We aren't suggesting that you provide answers that you don't have; however, sharing information when it's available will decrease stress.

### Reframe behaviors.

It's important to remember that emotional regulation and impulse control are more difficult during times of stress. People may not be showing up as their best selves during this period of fear and chaos. We need to give everyone grace and realize that challenging behaviors are a reflection of the stress we are under. We need to all exercise patience and understanding. Give people the benefit of the doubt.



### B. Perry Neurosequential model

- Relate
- Regulate
- Reason



# Hosting a Virtual Meeting Using Trauma Informed Principles<sup>©</sup>

**Purpose.** By using SAMHSA's 6 principles of trauma informed care (TIC), we offer strategies for hosting virtual meetings that promote safety, power, and value. Hosting virtual meetings and trainings with these principles in mind can foster a space where participants are present & accessible, and their exposure to activation and re-traumatization is mitigated.

### **Examples of activation points during virtual meetings**

#### Compromised SAFETY Lack of POWER No sense of **VALUE** Limited opportunity to · Staring at an image of Accessibility considerations share one's voice, given the are often missing oneself Blurred boundaries one-dimensional platform Lack of shared presence or between home & office · Lack of clarity around what emotional attunement, thus · Unclear social cues and choice is available in limited co-regulation social norms relation to ways of opportunity Screen fatigue participating · Often transactional, thus Perceived or actual lack of Consent is often overlooked missing the whole person confidentiality Silence is misinterpreted as lack of participation

### 1) Emotional & Physical Safety.

Set up security measures, such as a secure link, password, and/or wait room, in order to
ensure that only those invited to the meeting are in attendance.

### **Expectations:**

- Limitations re: virtual and your capacity.
   Take what is needed.
- Write questions in the chat box: now or later I will respond.
- Translate for your setting.

#### Wellness:

- Do you have water or tea?
- Do you have a fidget or comfort piece to put near you?
- Feel free to move about.
- Do not have to be on video.
- Mute yourself.
- Breath.
- Right brain activity.
- · Center ground.
- Agenda and expectations.

### Communication reminders:

- The source matters. What is our history? New manager may have to work harder?
- Consistency of message across messengers.
- Clear and direct information. Acknowledge where there are gaps. If you don't they will get filled with mis-information.
- Multiple methods. Have at least one in writing and accessible to return to.
- More frequent less duration.
- Have a communication plan that includes where, what, who, when.
- Have others be your "spotters".



# The Anatomy of a Trauma Informed Script<sup>©</sup>

**Purpose.** Ensuring that your words are trauma informed doesn't necessarily mean the recipient of your messages will be happy with what is being said. However, if they respect you because of the way you've said something they are more likely to remain regulated and able to engage. This is true for you too. A trauma informed script will help you stay regulated when you are delivering difficult news or getting hard questions.

#### Components of a trauma informed script

Validating or normalizing conveys that you understand what else could be going on for someone.

Being clear and direct is really important for a stressed brain.

Complete information helps avoid misunderstanding and misinterpretation.

**Providing the "why"** helps establish a sense of consistency and predictability.

Providing options and choice helps empower and create hope.

**Understanding the components of a trauma-informed script.** There are key components that make a script (or set of words) trauma informed (see box). We identify these elements in several sample scripts. During the COVID crisis, people have been asking for trauma informed words to use. Often, we feel nervous about our words when we are needing to set boundaries, clarify expectations, or delivery difficult news. We offer a few scripts to draw from. These scripts are just examples, and we invite you to think about what you are needing to communicate and how that can be said in **your own words** so that it feels natural and authentic. Remember, also, that body language, tone, and facial expressions impact how our messages are received.

### Validating or normalizing

### Being clear and direct

"In these stressful times it is hard to keep track of everything and it makes sense you want to call to find out what is happening. I am unable to talk daily, I need to focus my time on making calls and tracking down supplies so that I can support you and others with resources during this difficult time.

But, we can schedule a weekly check-in, or I can call and leave you a message every week to update you on my progress, or you can submit your questions through email that I will respond to on Thursday. Please let me know what you prefer."

### Providing the "why"

### Providing options and choice

#### Helpful TIPS:

- Sometimes when you are too specific with the validation statement, a person can dismiss the idea if it doesn't
  represent their situation. Try to keep it general unless you know how they are feeling and what is going on.
- You might also note that the script says precisely when the service provider will respond to the service user's
  question (Thursday). That is also part of being clear and direct, and helps a stressed brain know what to expect.

# Expectations:

- We are not as productive in this time. Things take longer.
- ▶ Help focus with short term goals and expectations.
- Help people prioritize and know this is likely to change.
- Flexible schedules that support the team and individual needs.

### **Application**

- Before Arriving: (predict, transparent, safety)
  - Prepare for physical health staff feel good about procedures for self and other
  - Prepare staff with information needed and hear their worries
  - Communicate with parents about protocols, how to ask questions/concerns, predict possible issues (clingy, don't' want to leave, other youth stories)
- During Service: (regulate, relate, predictable, consistent, peer support)
  - ▶ Be front and center and prepared to guide don't leave things up to figure out.
  - ▶ Have "words" for non stigmatizing correction of protocols CONSISTEN across staff programs
  - Open and closing rituals to regulate and to relate
  - Have safety protocols in several ways, verbally explained, acted out, on the walls (sesame street?)
  - First Day: Speak about COVID19. Have you heard of this? What do you know about it? Do you see things different around this space? "there is a lot of information out there for us here at [ ] we are going to ......" Words to help each other "if you see ..... you can say......"
  - Incorporate regulation rhythm, movement, meditation.
  - Offer space for 1:1 regulation need. "get the wiggles out"
  - \*come up with a dance for saying hello or for showing your happy. Incorporate sign language

### After:

- Note how things went assess
- Check in on your own regulation staff check in
- Note any concerns
- Communicate with caregivers

# Throughout

- Communication is important
  - ▶ To all! Multiple ways. Offer ways for clarification.
- You will likely see a flow of behaviors through beginning middle end
- Healing:
  - ▶ Being seen and heard unique experiences and different "what feelings do you associate with stay home stay safe?" "what was a thorn, rose, bud"
  - Feeling left behind, abandoned. "Did you feel abandoned by people, organizations, state..."
  - Grief and Loss how can you bring this in the space? Loss of loved ones, birthday parties, .....
  - Post Trauma Growth What are learnings we want to take forward. What would you want to do differently.

# Behavior & Communication Hierarchy

Understanding and accepting alternative explanation for behaviors

Lid is flipped

Adjust behavior and communication in response.

Prioritize de-escalation, regulation, building trust and creating safety

Lid is not flipped, but prevention is key Use techniques to prevent lids from flipping

Prioritize empowerment, collaboration, and creating self-worth

# Van der Kolk: precondition of trauma & toxic stress.

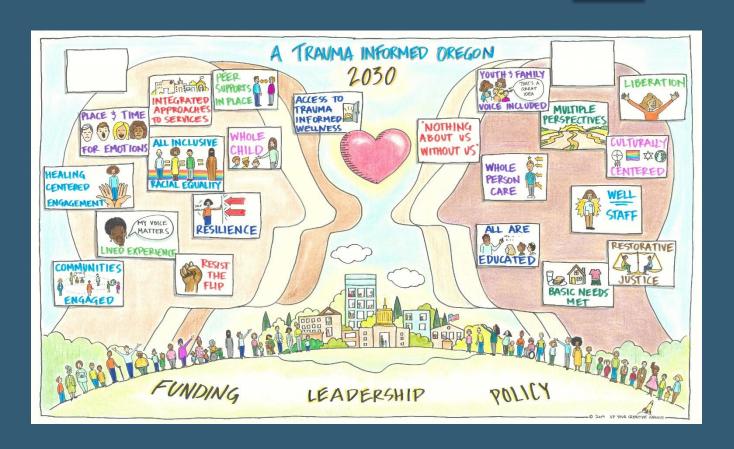
### Think WHY and HOW can I create this:

- Safety fight, flight, freeze
- 2. Have a predictable environment
- Connect with others and self (allow for self time as well)
- Staying present—reduce numbing out.
- 5. Ways to take action (reduce immobility)
- 6. Sense of time and sequence—ways to remember things change
- 7. Find purpose—what is your purpose in this time as an individual, program, and organization

# Things to consider:

- This is happening to everyone but not in the same way.
  - Race, class, gender, region, language, culture, etc.
  - Challenge myths and judgement.
- The simultaneous experience of acute, accumulated, and prolonged stress.
- Allowing space for grief & feelings. The both/and of trauma.
- Hierarchy of needs. Learning can not happen until basic needs are met. Regulation and relationship are the goals at this moment.
- What is needed next? For staff, families, programs. How will you "open" doors in a way that is restorative? Repair? Unique stories?
- Note positive learning and changes. Let us resist returning to the status quo that only benefited a few.
- Your wellness is critical and will fluctuate.

- Does this resonate with what you are seeing or experiencing?
- What have you tried to support regulation and relationship during this time through policy, procedure or practice (for self, colleagues, families)?
- How can this information support your goal?
- What would be helpful to know more about?



Your work is the buffer! Thank you!