

Trauma-Informed Training

A Core Curriculum for entities serving children and families in Wisconsin





Modified and Presented by: Jodi Field, RN and Jennifer Froh, Health Educator Juneau County Health Department

Acknowledgments and Influencers:

Training and Research

- Naropa University
- Gallaudet University
- Gestalt Equine Institute of the Rockies
- Maiberger Institute
- Infant, Early Childhood, and Family Mental Health
- Dr. Daniel Siegel, Interpersonal Neurobiology
- Dr. Bessel van der Kolk
- Dr. Gabor Maté
- Robin Wall Kimmerer, *Braiding Sweetgrass*
- Jon Kabat Zinn, Mindfulness-Based Stress Reduction
- Eva Selhub, Your Brain on Nature
- NCTSN
- SAMHSA

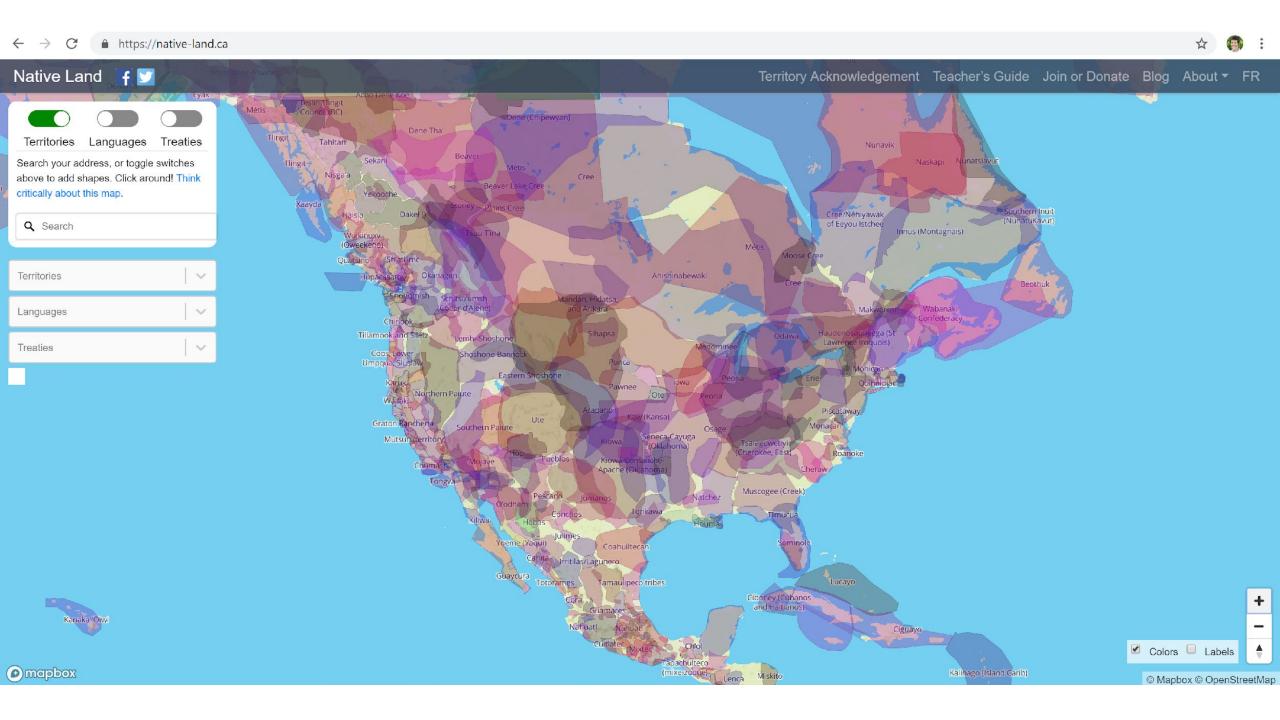
Mentors and Colleagues

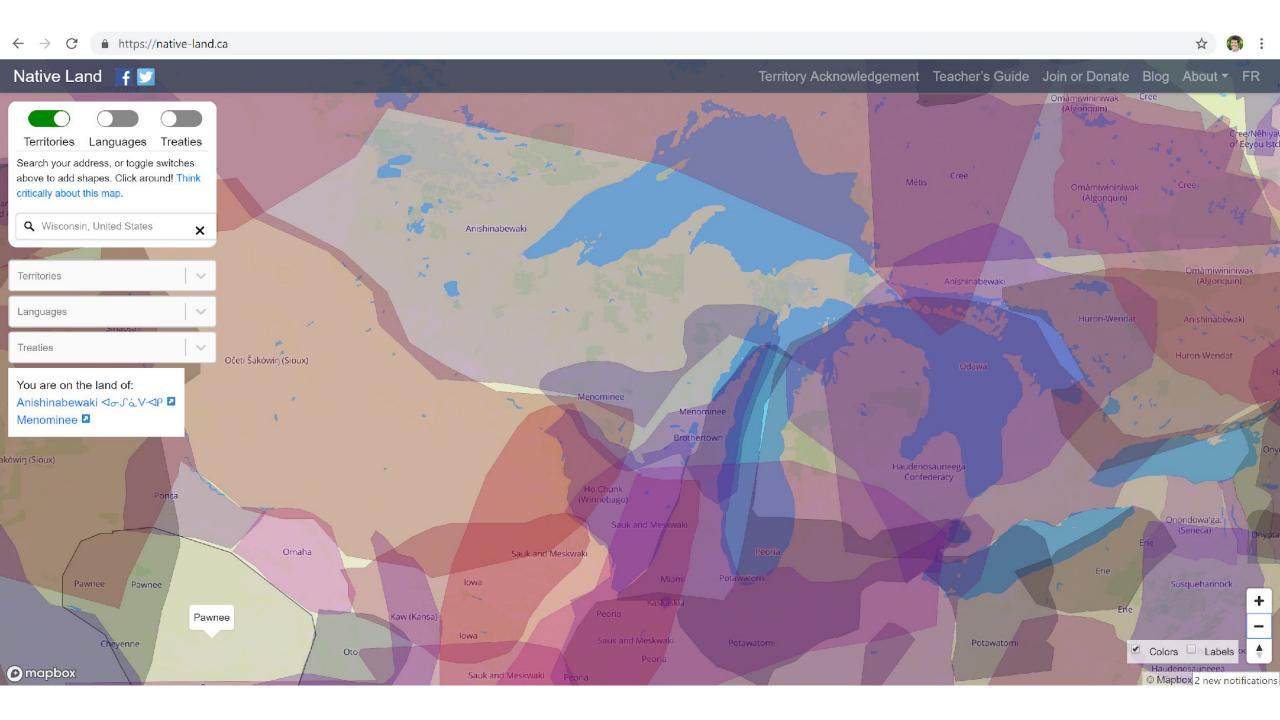
- Carla Sherrell, EdD
- Duey Freeman, LPC
- Pinar Ates Sinopolous-Lloyd and So Sinopolous-Lloyd
- Olga Vera, PhD
- Mark Rashid
- Leona Furnari, LCSW
- Elicia Goodsoldier
- Claire Chang, MA LPC
- Deb Silver, LPC R-DMT
- my students and clients over the years
- my family and chosen family
- the Earth and nature

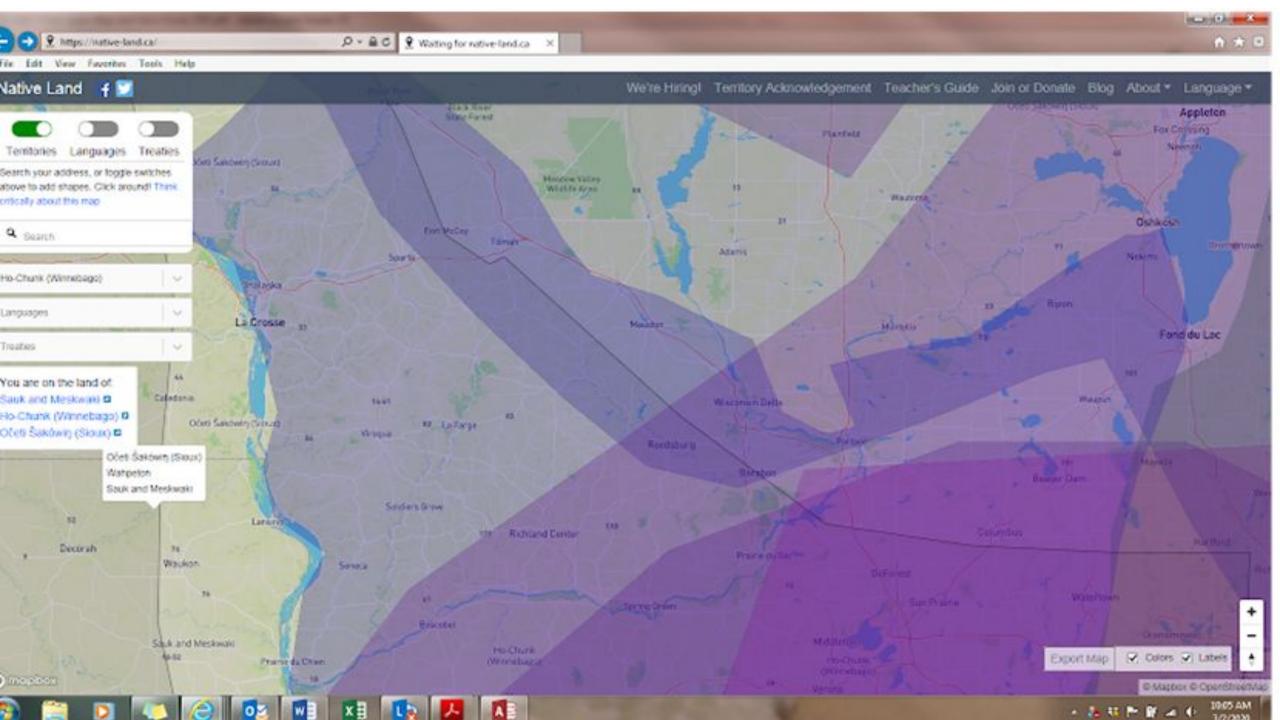


Objectives

- Participants will be able to define trauma and the different types of trauma.
- Participants will become familiar with signs and symptoms of trauma.
- Participants will discuss Trauma Informed Care principles.
- Participants will explore the parallel process of trauma, resilience, and recovery among children, families, providers, and systems.
- Participants will practice strategies for cultivating resilience (and regulation) in self, team, and clientele.
- Participants will identify aspects of bias, oppression, and intersectional adversity throughout the training.







Historical trauma is cumulative emotional and psychological wounding over the lifespan and across generations, emanating from massive group trauma.

Dr. Maria Yellow Horse Brave Heart

CURRENT RESERVATIONS AND TRIBAL LANDS MICHIGAN MINNESOTA ILLINOIS



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Introductions to Each Other

- Partners
- Small Group
- Whole Group



Co-Creating Brave Space

- Stay Engaged
- Expect Non-Closure
- Express Your Truth
- Experience Discomfort
- Honor the Author



Training Principles/Underlying Assumptions

- Experience shapes who we are.
- Relationships are the crux of Trauma-Informed Care.
 - We are hurt in relationship and we heal in relationship.
- Behavior is communication.
 - All behavior is an attempt to find regulation.
- Humans tend to be pleasure-seeking and pain-avoidant.
- Trauma and oppression are inherently connected.
- We all cause harm.
- Trauma is experienced (and processed) in the body.

Definition:

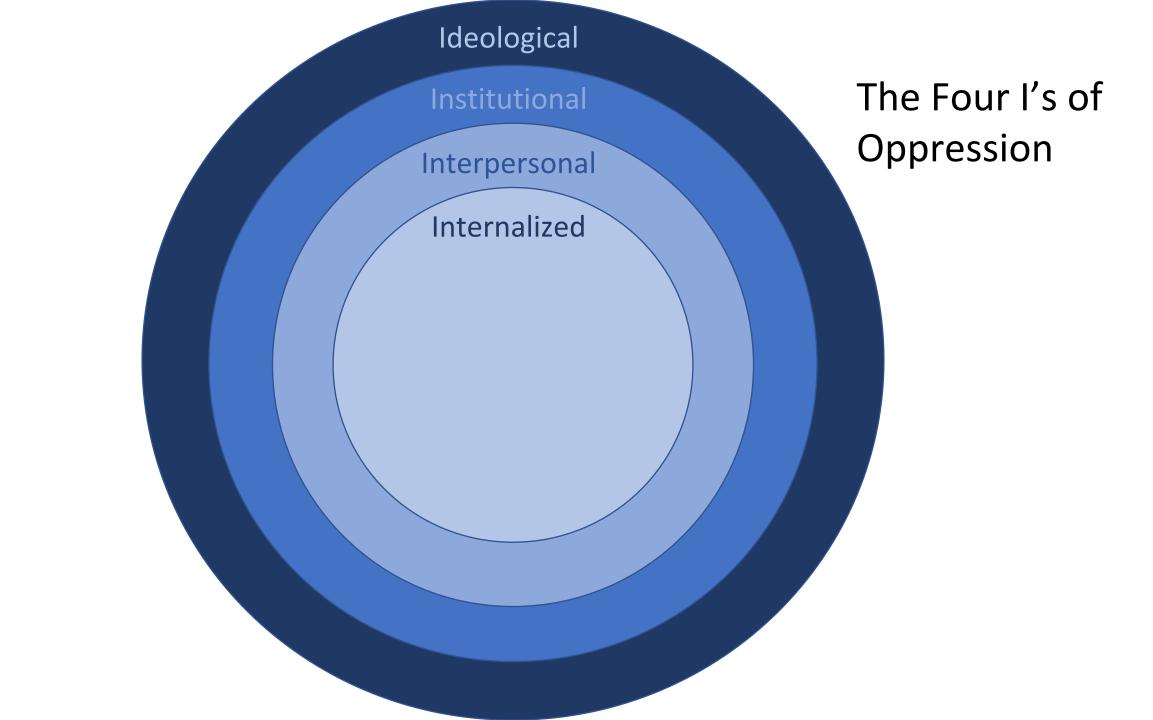
"Cruel or unjust exercise of authority or power"

"Sense of being weighed down in body and mind"

Examples: sexism, heterosexism racism, colonialism



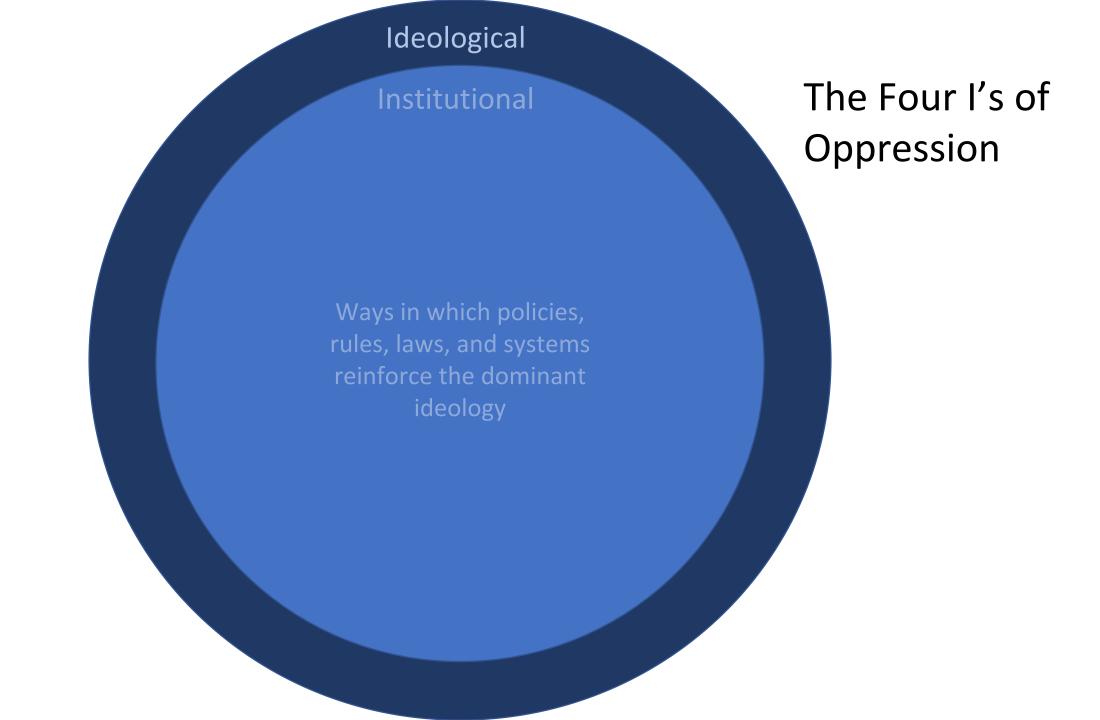
It's the same distance!"

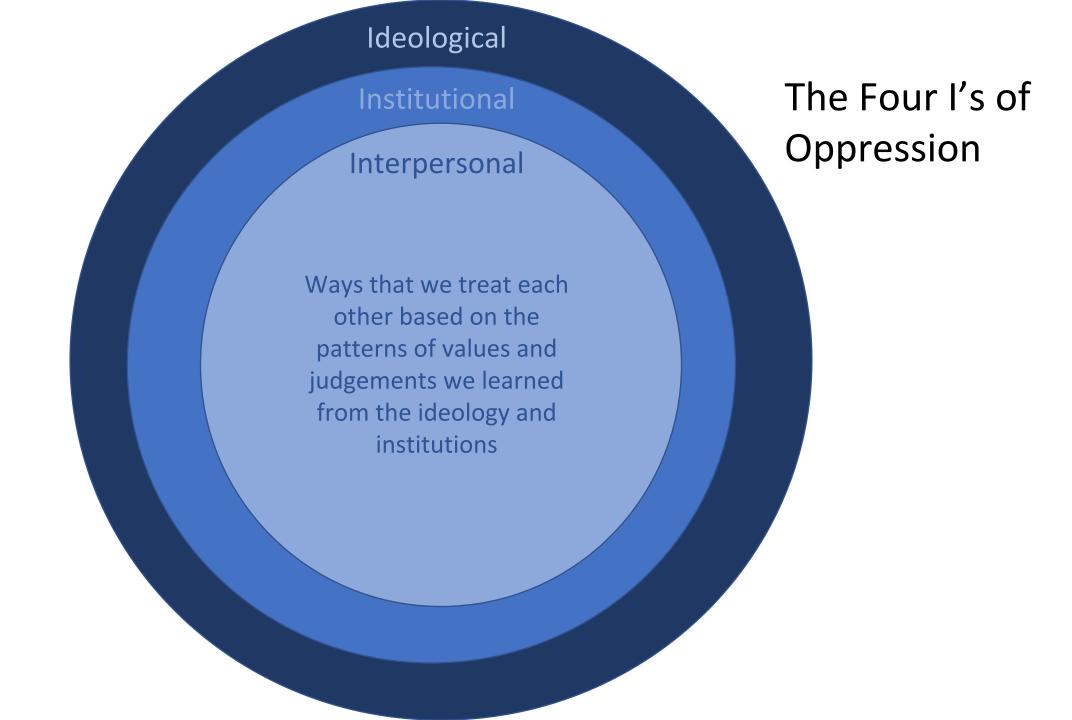


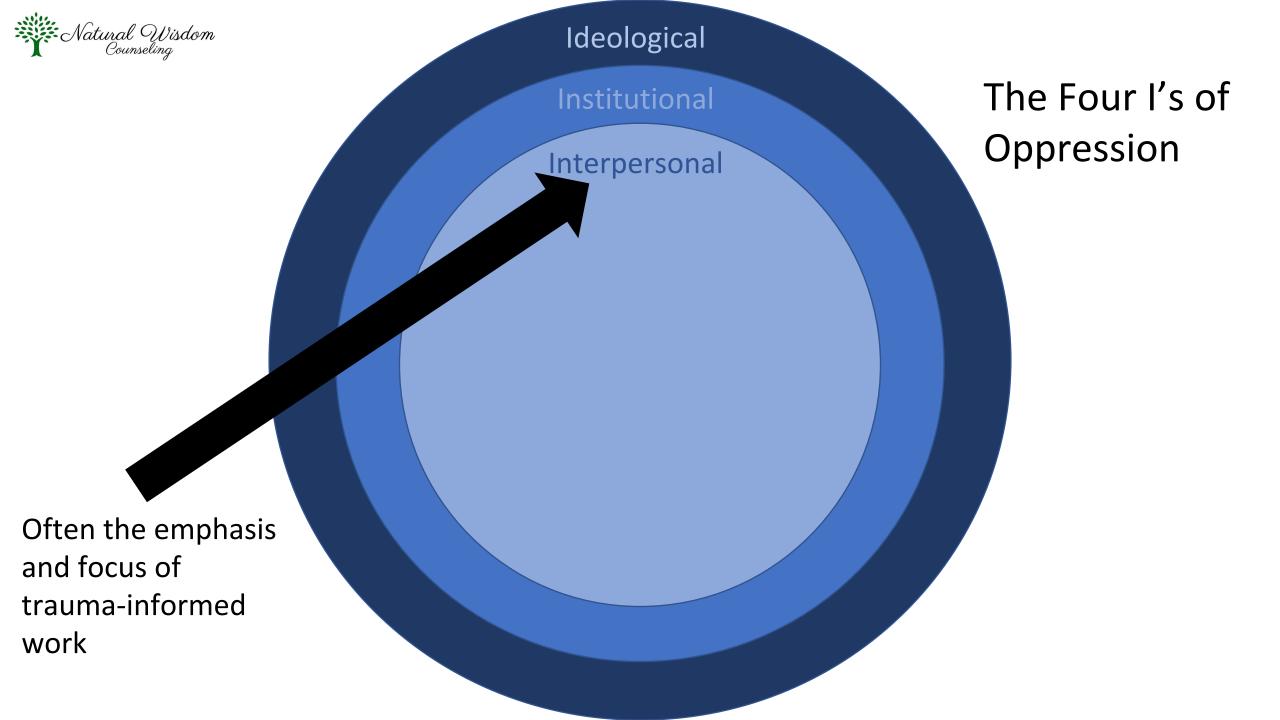
Ideological

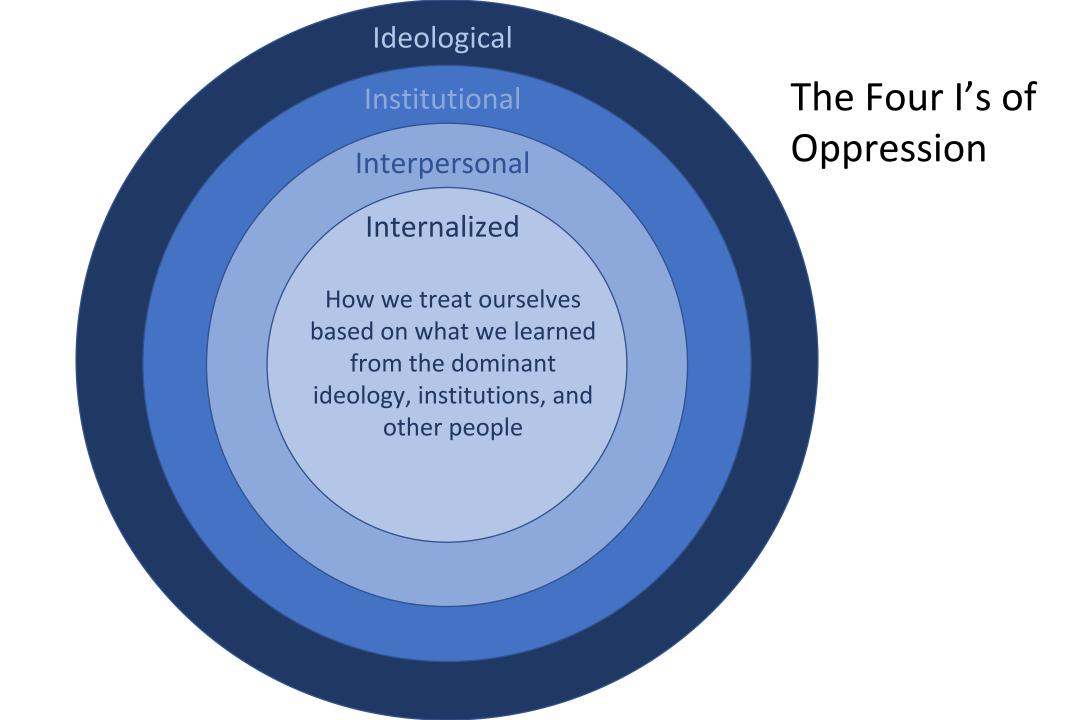
The Four I's of Oppression

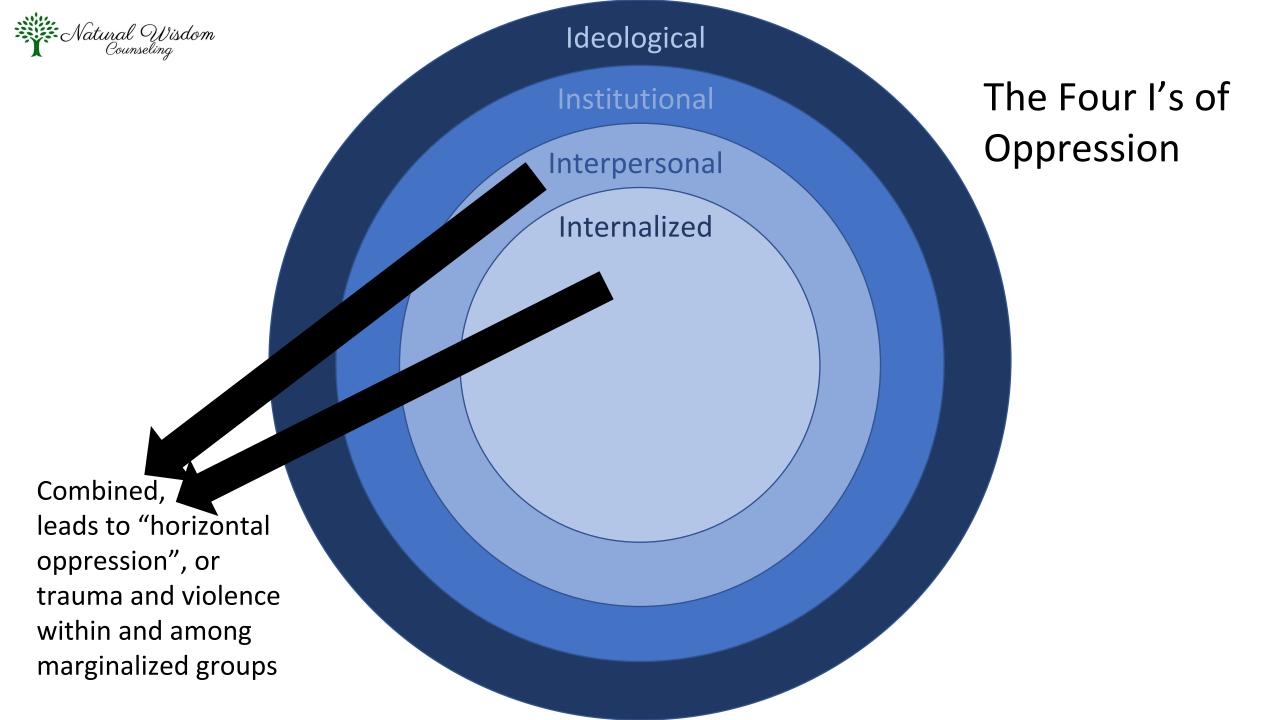
Dominant thoughts,
ways of knowing, and
paradigms (generally
associated with values and
judgements)

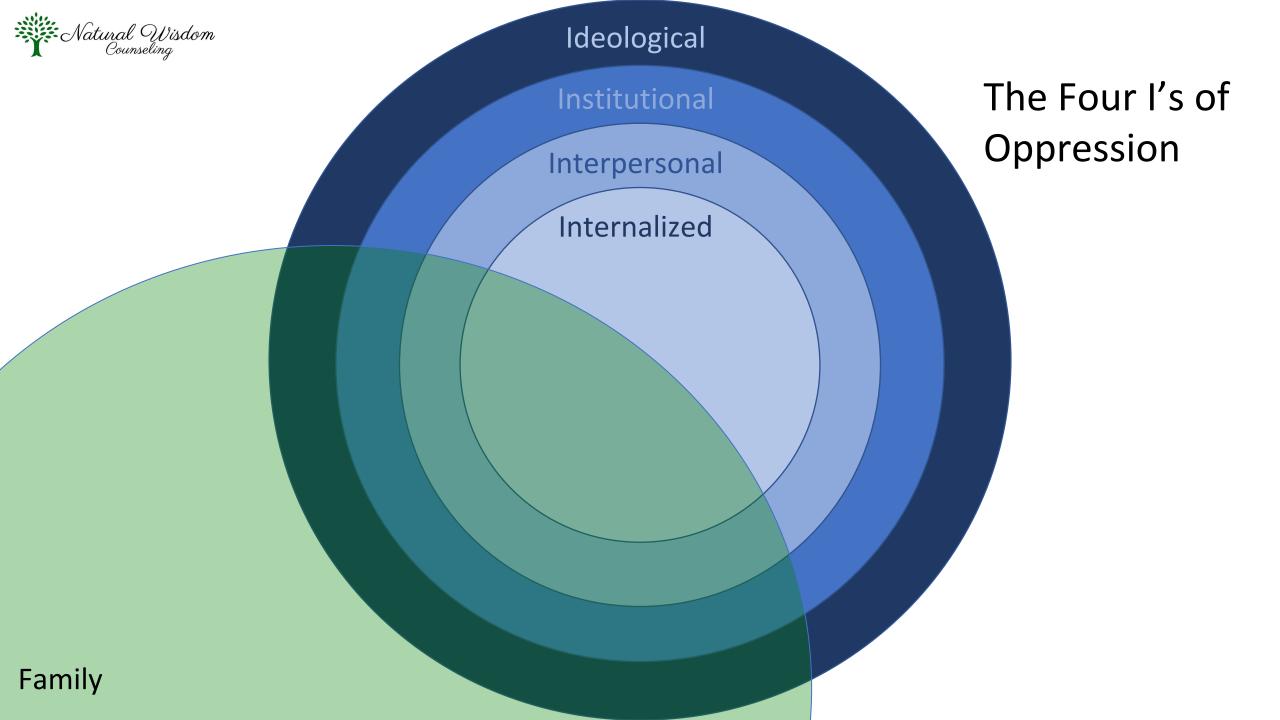


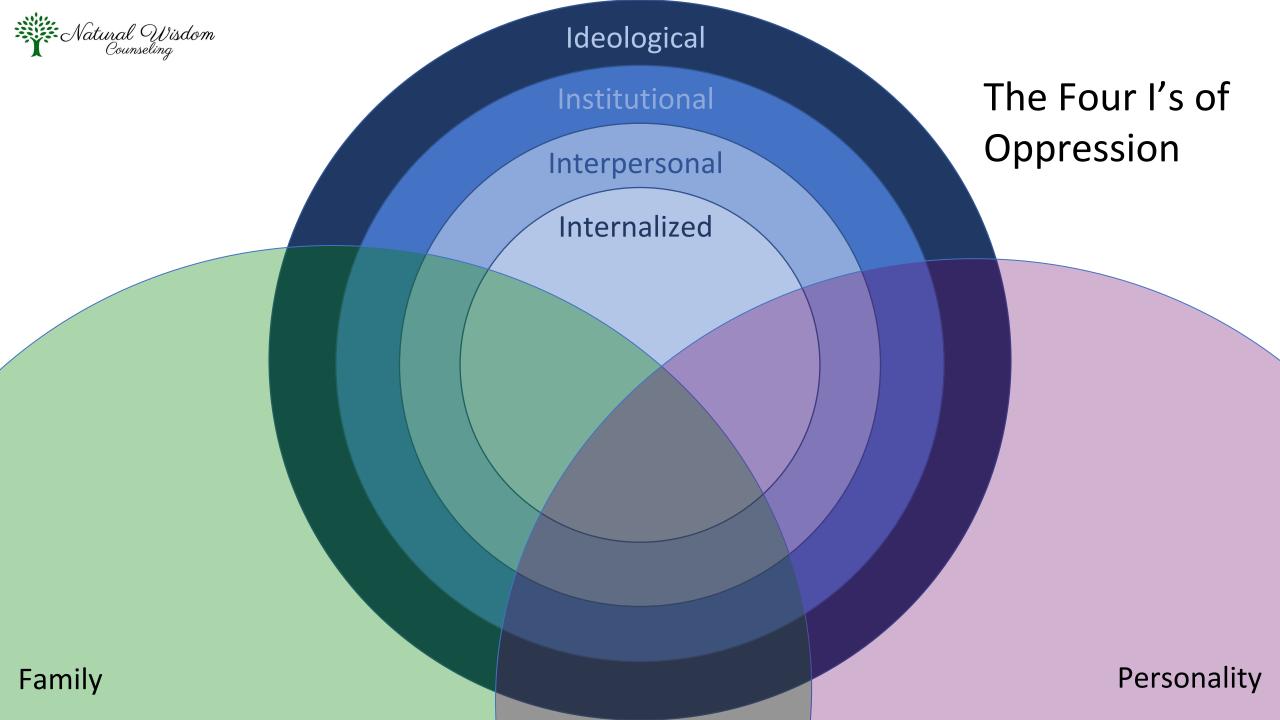












Trauma Defined

- Toxic stress
- Many definitions
- Is subjective



POSITIVE STRESS

Mild/moderate and shortlived stress response necessary for healthy development

TOLERABLE STRESS

More severe stress response but limited in duration which allows for recovery

TOXIC STRESS

Extreme, frequent, or extended activation of the body's stress response without the buffering presence of a supportive adult

Intense, prolonged, repeated and unaddressed

Social-emotional buffering, parental resilience, early detection, and/or effective intervention

Toxic Stress Derails Healthy Development

by the <u>Center on the Developing Child at Harvard University</u>
http://developingchild.harvard.edu.



The Three E's of Trauma



Event

• Events / circumstances cause trauma.



Experience

 An individual's experience of the event determines whether it is traumatic



Effects

• Effects of trauma include adverse physical, social, emotional, or spiritual consequences.

Trauma's Impacts

- Disrupts the nervous system
- Dis-integrates sense of safety, belonging, dignity, purpose, and/or understanding of the world
- Pervasive and prevalent
- Interrupts relationships
- Growth and learning



Trauma/Safety Activity

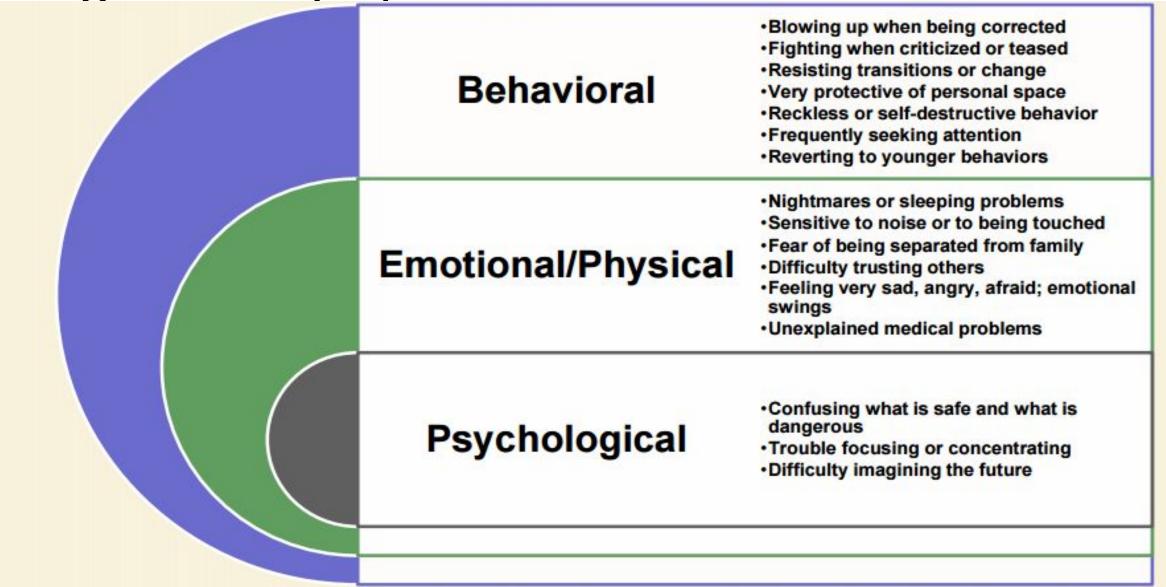


Types of Trauma

- Interpersonal Trauma
- Historical Trauma
- Intergenerational Trauma
- Environmental & Disaster Trauma
- Developmental, Attachment, & Early Childhood Trauma
- Institutional & Systemic Trauma
- Complex Trauma
- Chronic Trauma
- Medical Trauma
- Refugee Trauma
- Traumatic Grief & Loss
- Social & Societal Trauma
- Immigration Trauma
- Birth Trauma

- Vicarious Trauma
- Secondary Trauma
- Domestic Violence
- Community Violence
- War, Terrorism, & Political Violence
- Abrupt, Uncontrollable Change
- Maltreatment & Abuse
- Human Trafficking
- Torture
- Neglect
- Bullying
- Death and Loss

Signs and Symptoms



Movement Break



Measuring Stress/Trauma

- Physiology
 - Skin Conductivity
 - Heart Rate
 - Blood Pressure
 - Cortisol Levels
- Life Stress Test
- Adverse Childhood Experiences



Adverse Childhood Experiences (ACE's)

ACE's are potentially traumatic events that occur in a child's life:

ABUSE

NEGLECT

HOUSEHOLD DYSFUNCTION



Physical



Physical



Mental Illness



Incarcerated Relative



Emotional



Emotional



Mother treated violently



Substance Abuse



Sexual



Divorce

ACE Score Prevalence for CDC-Kaiser ACE Study Participants by Sex, Waves 1 and 2.

Number of Adverse Childhood Experiences (ACE Score)	Women Percent(N = 9,367)	Men Percent (N = 7,970)	Total Percent (N = 17,337)
0	34.5%	38.0%	36.1%
1	24.5%	27.9%	26.0%
2	15.5%	16.4%	15.9%
3	10.3%	8.5%	9.5%
4 or more	15.2%	9.2%	12.5%

ACEs Prevalence

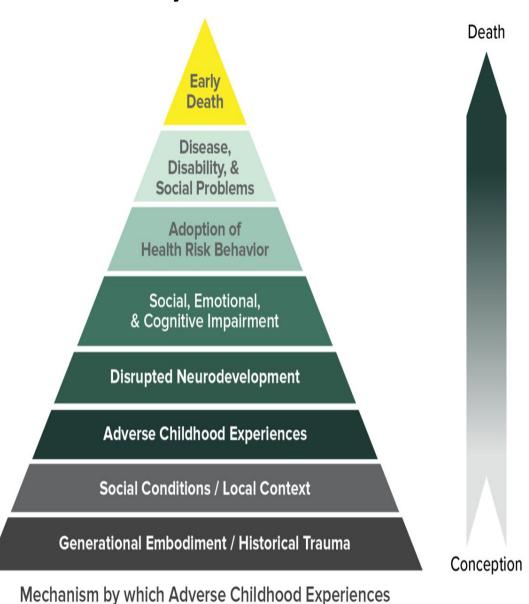
The prevalence estimates reported below are from the entire ACE Study sample (n=17,337).

Prevalence of ACEs by Category for CDC-Kaiser ACE Study Participants by Sex, Waves 1 and 2.

ACE Category	Women	Men	Total
	Percent (N = 9,367)	Percent (N = 7,970)	Percent (N = 17,337)
ABUSE	25		
Emotional Abuse	13.1%	7.6%	10.6%
Physical Abuse	27%	29.9%	28.3%
Sexual Abuse	24.7%	16%	20.7%
HOUSEHOLD CHALLENGES			
Mother Treated Violently	13.7%	11.5%	12.7%
Household Substance Abuse	29.5%	23.8%	26.9%
Household Mental Illness	23.3%	14.8%	19.4%
Parental Separation or Divorce	24.5%	21.8%	23.3%
Incarcerated Household Member	5.2%	4.1%	4.7%
NEGLECT	N		
Emotional Neglect ³	16.7%	12.4%	14.8%
Physical Neglect ³	9.2%	10.7%	9.9%

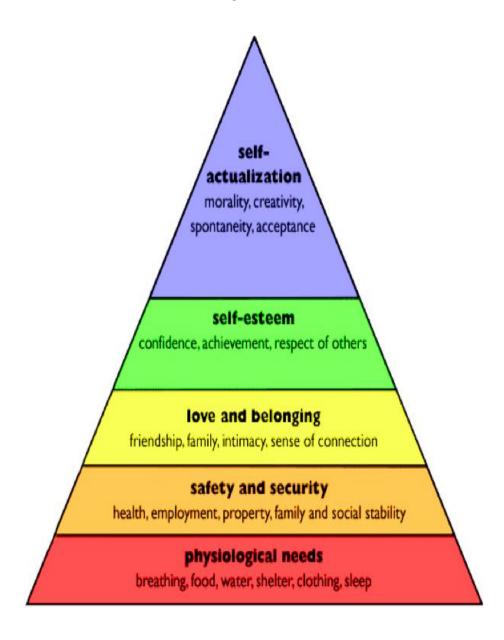
Note: 3Collected during Wave 2 only (N=8,629). Research papers that use Wave 1 and/or Wave 2 data may contain slightly different prevalence estimates.

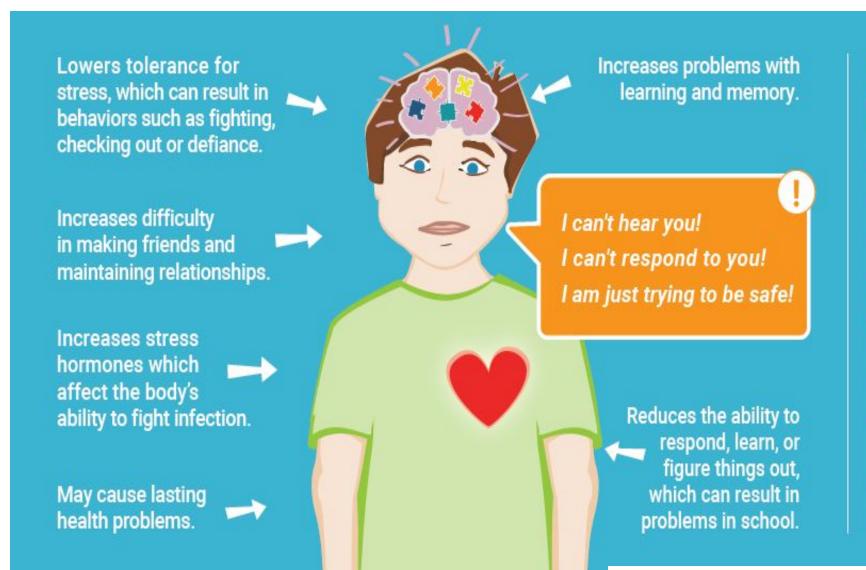
The ACE's Pyramid



Influence Health and Well-being Throughout the Lifespan

Maslow's Hierarchy of Needs





Exposure to childhood ACEs can increase the risk of:

- Adolescent pregnancy
- Alcohol and drug abuse
- Asthma
- Depression
- Heart disease
- Intimate partner violence
- Liver disease
- Sexually-transmitted disease
- Smoking
- Suicide







Strengthen economic supports to families

- Strengthening household financial security
- Family-friendly work policies



Change social norms to support parents and positive parenting

- Public engagement and enhancement campaigns
- Legislative approaches to reduce corporal punishment



Provide quality care and education early in life

- Preschool enrichment with family engagement
- Improved quality of child care through licensing and accreditation



Enhance parenting skills to promote healthy child development

- · Early childhood home visitation
- Parenting skill and family relationship approaches



Intervene to lessen harms and prevent future risk

- Enhanced primary care
- Behavioral parent training programs
- Treatment to lessen harms of abuse and neglect exposure
- Treatment to prevent problem behavior and later involvement in violence

What can be done about ACEs?

What is Public Health Doing?

Voluntary home visiting programs can help families by strengthening maternal parenting practices, the quality of the child's home environment, and child's development.

EXAMPLE: Nurse Family Partnership

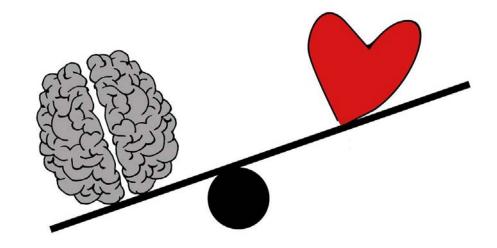
Can we do better?



Trauma-Informed Care: Recurring Themes

- Basic Understanding of Trauma
- Creating an environment of physical and emotional safety for the survivors and providers
- Adopting a strengths-based approach to services

Is this enough? What might still be missing?



The Four Rs of Trauma-Informed Care



Realize the widespread impact of trauma and understand potential paths for recovery

Recognize

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

Respond

by fully integrating knowledge about trauma into policies, procedures, and practices

Resist

re-traumatization of children, as well as the adults who care for them

This figure is adapted from: Substance Abuse and Mental Health Services Administration. (2014). SAMHSA's concept of trauma and Guidance for a trauma-informed approach. HHS publication no. (SMA) 14-4884. Rockville, MD: Substance Abuse and Mental Health Services Administration.

SAMHSA's Trauma-Informed Care Principles

- Safety
- Trustworthiness & Transparency
- Peer Support & Mutual Self-Help
- Collaboration & Mutuality
- Empowerment, Voice, & Choice
- Cultural, Historical, & Gender Issues





Healing Comes From Relationships

built on nine trauma-informed practices



Trauma-Informed Care

"Learning to be with suffering as an experience is part and parcel of what it means to live, and it radically alters our relationship to all of life and to the suffering of others. If you are invested in alleviating suffering, whether as an activist or change-maker or someone who's committed to life because you hear the cries of the world, it's important to understand that you can't even recognize the suffering of others without fully acknowledging the despair of your own suffering. It turns out that far from dragging you down, one of the most liberating things you can do is to come to terms with the fact that some form of your suffering will always be there. To really be present with that unhooks us from the constant anxiety of trying to make it go away. Paradoxically, once we release the proposition that we are going to get rid of the suffering, then the potential to alleviate the suffering becomes possible." --Rev. angel Kyodo williams

Experiential



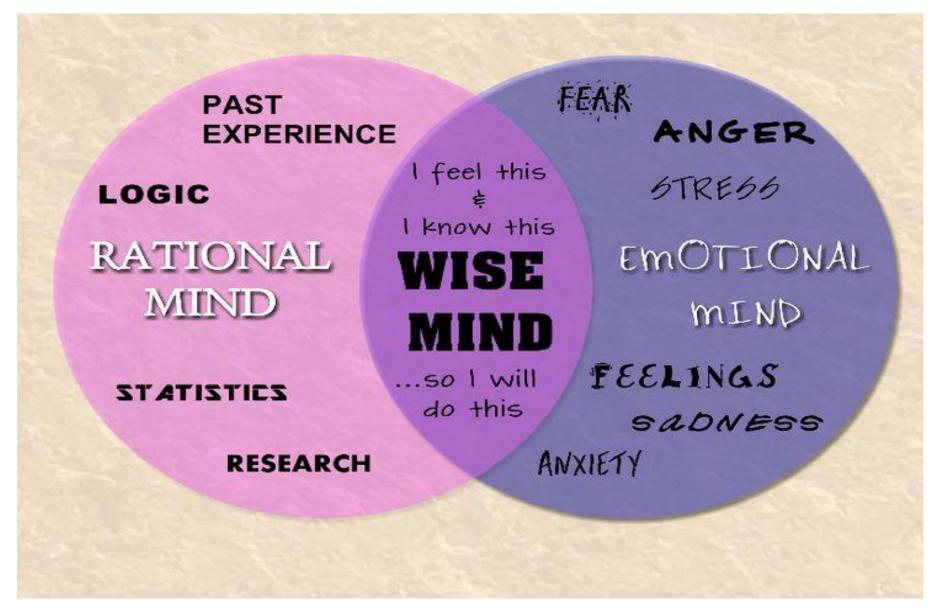
"Neurons which fire together, wire together."
-Donald Hebb, Canadian physician-psychologist

- Gray Matter
- Corpus Collosum
- Amygdala
- Hippocampus
- Prefrontal Cortex
 - Medial and Orbital Portions



Frontal Cortex Triune Brain (Thinking Brain) Mid Brain (Emotional Brain) Hind Brain (Survival Brain) Dr. Paul D. MacLean, 1990

Finding a middle ground by keeping yourself grounded



Selection from "For Suffering" by John O'Donohue

"May you be blessed in the holy names of those Who, without you knowing it, Help to carry and lighten your pain.

May you know serenity
When you are called
To enter the house of suffering.

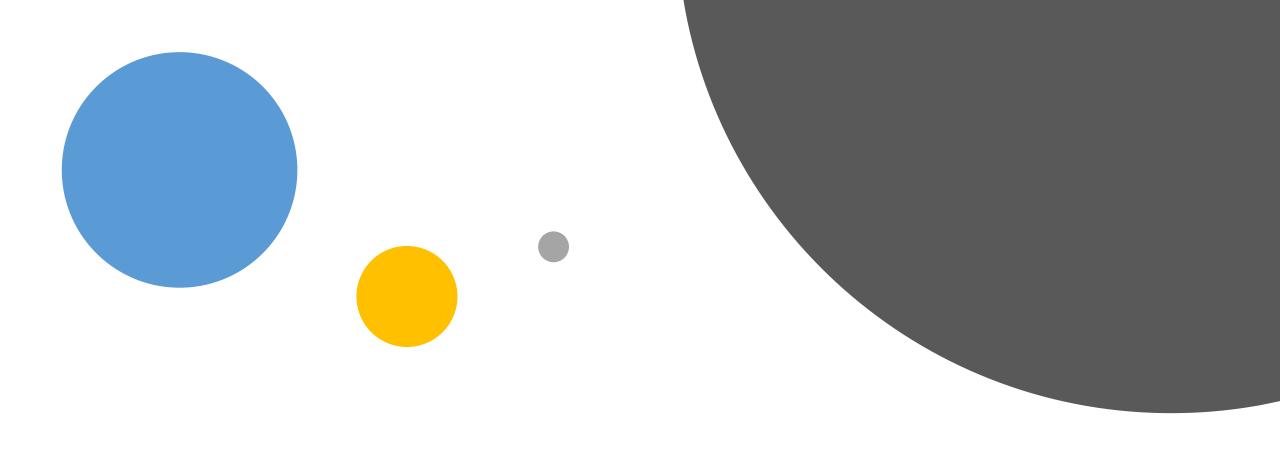
May a window of light always surprise you.

May you be granted the wisdom
To avoid false resistance;
When suffering knocks on the door of your life,
May you glimpse its eventual gifts.

May you be able to receive the fruits of suffering..."







Questions & Comments

So now what?

Arriving Back in this Space Together

Non-Verbal Experiential



IT'C MOT TUAT DAD עהע והווו וטוו ט דו **IIICT DE UADDY** JUUT DE HALL I DAN'T DE CAD DUN I DL JAD VOULL CET UNED IT TOO LE ULT OTEN IT VOUPDE OVEDDE A OTIMO TUU NL UYLNNLAUTINU

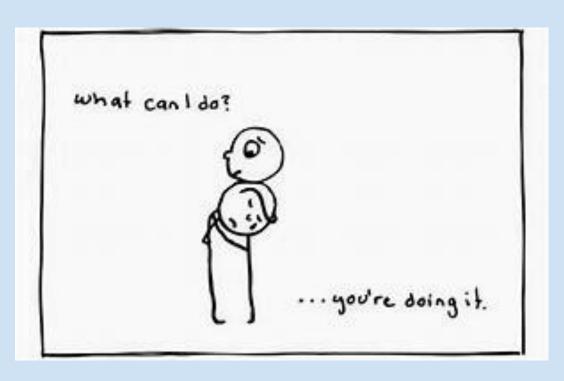
I BELIEVE YOU.





Presence

- Not always comfortable
- Not always convenient
- Not always pleasurable

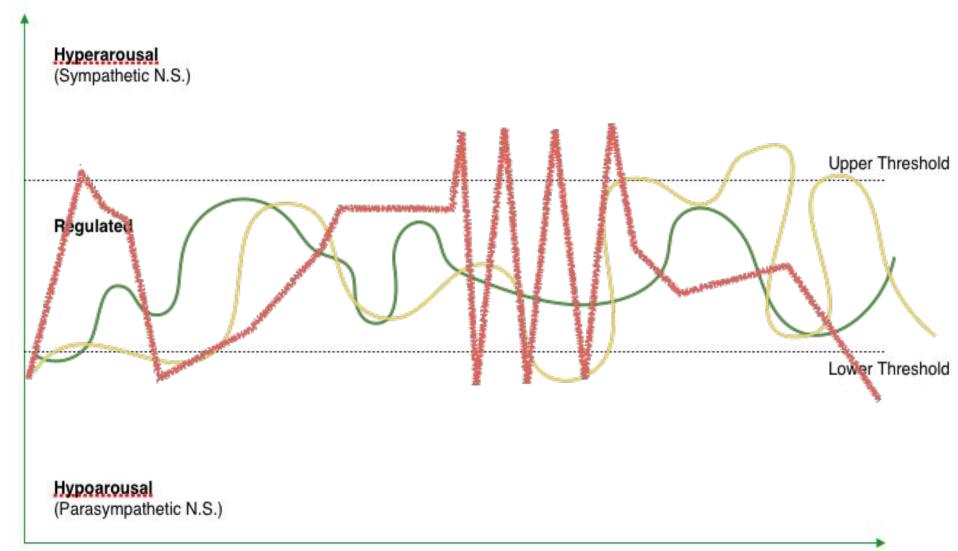


Cartoon Courtesy of Dr. Dan Siegel



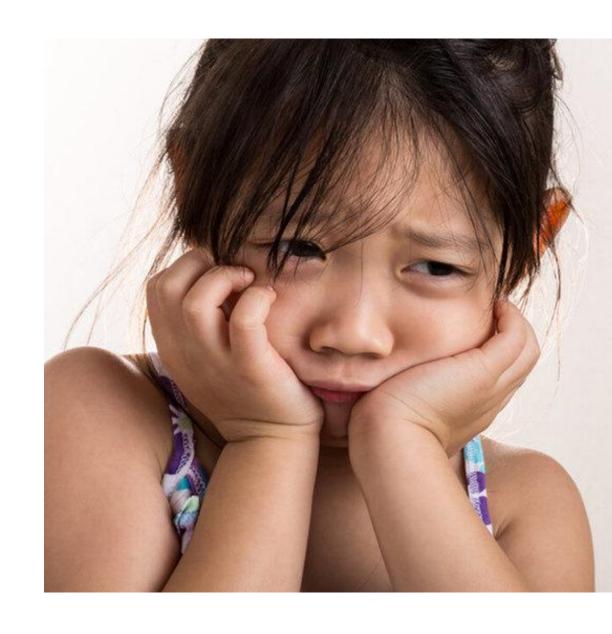
Window of Tolerance

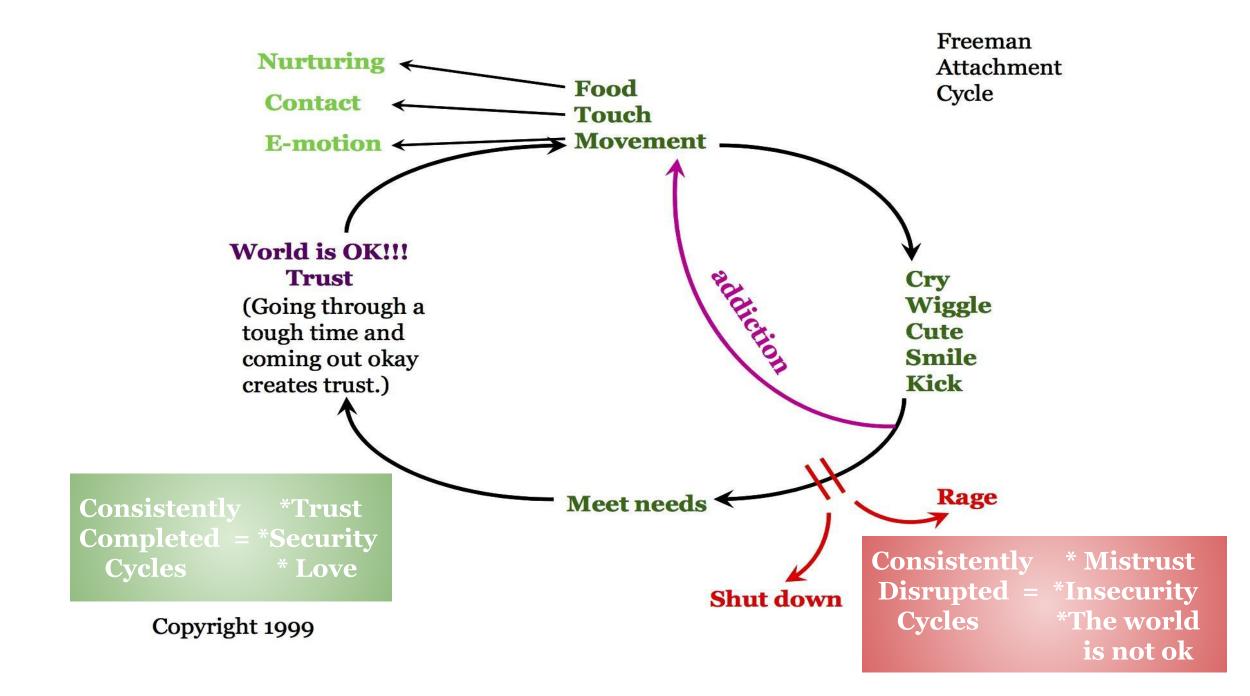






Working with Extreme States AKA Getting Un-Stuck





raialiti riuttaa



We can learn to hold ourselves



So we can hold the caregiver...



So the caregiver can hold/contain their self...



And then hold the child(ren)...



And the child(ren) can internalize the holding and balance self-regulation (learn that they are okay and the world is okay).





"Social support is biological necessity, not an option, and this reality should be the backbone of all prevention and treatment.

Recognizing the profound effects of trauma and deprivation on child development need not lead to blaming parents.

We can assume that parents do the best they can, but all parents need help to nurture their kids. "

Bessel Van Der Kolk

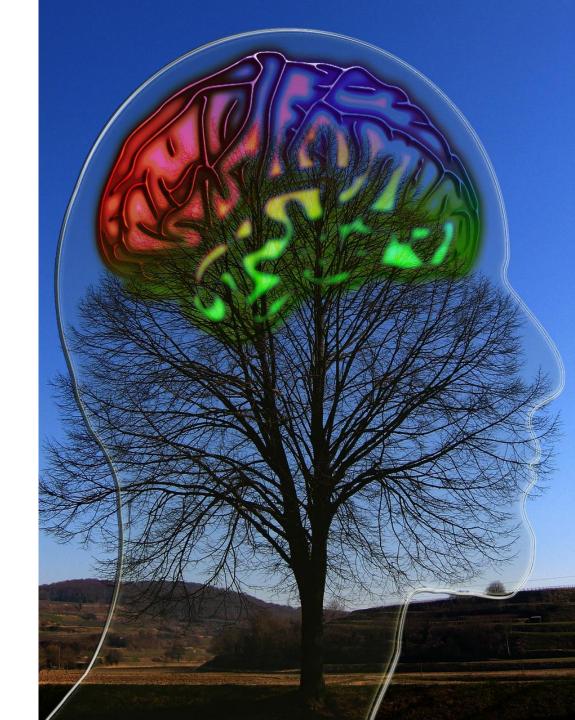
The Body Keeps the Score: Brain, Mind, and Body in the Healing of Trauma





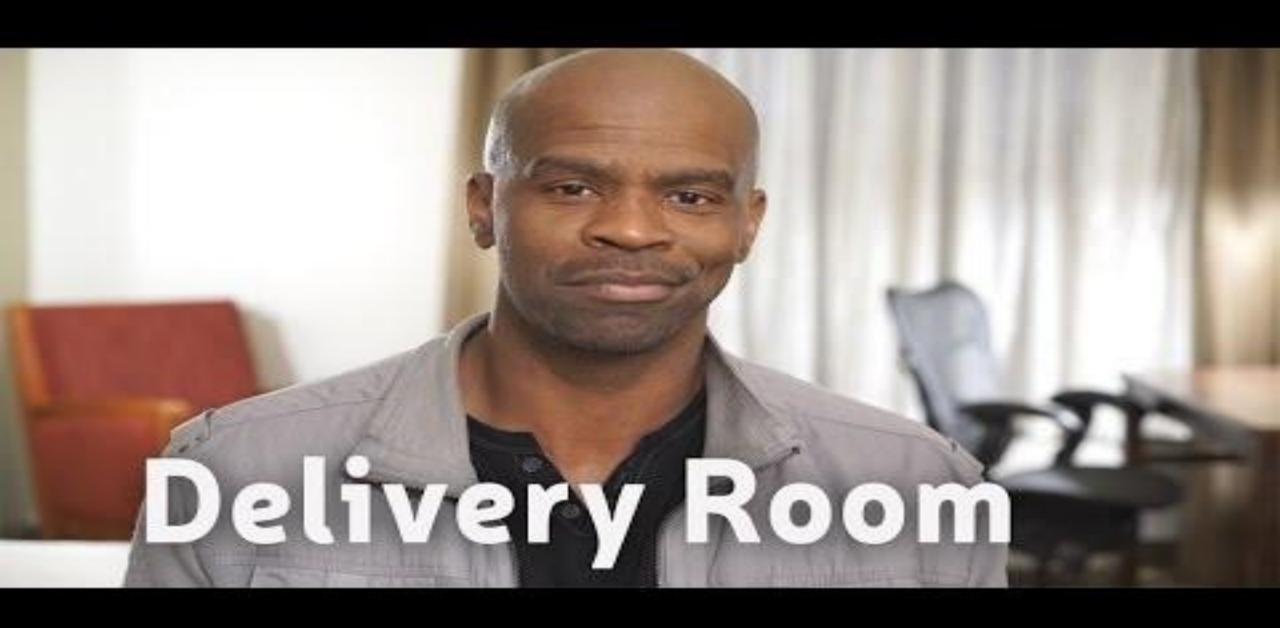
Four Threats to the Nervous System

- Physical & Emotional Danger
- The Unknown
- Incongruence
- Shoulds (or Judgments)

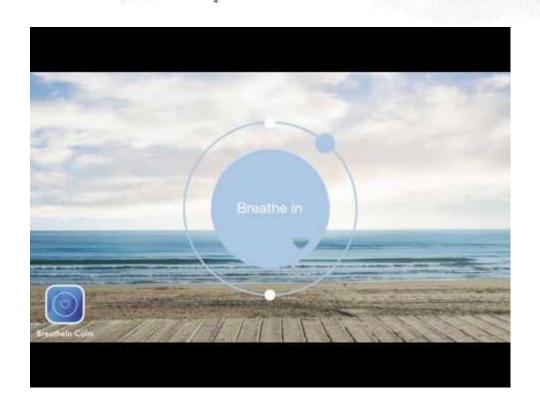


Diversity Informed Tenets for Work with Infants, Children, and Families

- Self-Awareness Leads to Better Service for Families
- Champion Children's Rights Globally
- Work to Acknowledge Privilege and Combat Discrimination
- Recognize and Respect Non-Dominant Bodies of Knowledge
- Honor Diverse Family Structures
- Understand that Language Can Hurt or Heal
- Support Families in Their Preferred Language
- Allocate Resources to Systems Change
- Make Space and Open Pathways
- Advance Policy that Supports All Families

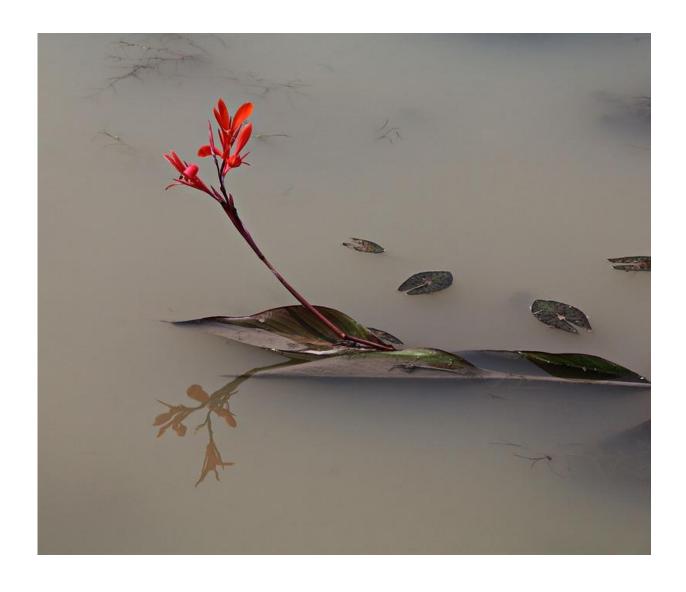






Resilience: Protective Factors

- Caregiver Resilience
- Social Connections
- Concrete Supports
- Knowledge of Parenting and Child Development
- Social and Emotional Competence



https://www.youtube.com/watch?v=xSf7pRpOgu8

Cultivating Resilience

"The marvel of a basket is in its transformation, its journey from wholeness as a living plant to fragmented strands and back to wholeness again as a basket. A basket knows the dual powers of destruction and creation that shape the world. Strands once separated are rewoven into a new whole. The journey of a basket is also the journey of a people."

-Robin Wall Kimmerer, *Braiding Sweetgrass*, p. 256



Regulating Intervention: Play

How does play contribute to resilience:

- Emotional Regulation (managing feelings)
- 2. Pleasure and Enjoyment (the feel good factor)
- 3. Responses to stress and uncertainty (making sense of things)
- 4. Being creative (using imagination and creativity)
- 5. Learning (developing life skills)
- Attachment to people and place (meeting & making friends)
- 7. Problem solving (I can fix this myself)

- Games
- Dance/Movement
- Art
 - Music
 - Paint/Draw/Sculpt
 - Poetry







Regulating Interventions:

- Mindfulness
- Movement
- Ancestral Healing



https://abcbirds.org/bird/red-winged-blackbird

Burnout and Employee Turnover

Helping Professions are at Highest Risk 🥻



The Cost of Caring



Vicarious Trauma

"an ongoing process of change over time that results from witnessing or hearing about other people's suffering and need. When you identify with the pain of people who have endured terrible things, you bring their grief, fear, anger, and despair into your own awareness and experience."

(Headington Institute)

Compassion Fatigue

"a state of exhaustion and dysfunction, biologically, physiologically and emotionally, as a result of prolonged exposure to compassion stress."

(Charles Figley, 1992)

16 Warning Signs

Hypervigilance

Anger and Cynicism

A sense that one can never do enough

Diminished creativity

Grandiosity

Dissociative moments

Minimizing

Inability to empathize/numbing

Sense of Persecution

Chronic exhaustion/physical ailments

Addictions

Fear

Guilt

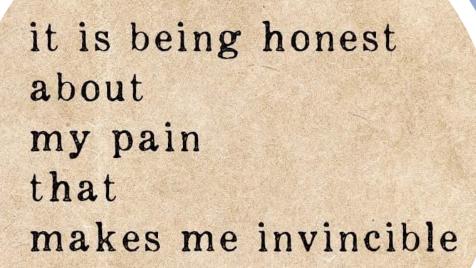
Inability to embrace complexity

Feeling helpless and hopeless









NAYYIRAH WAHEED

The Gift of Vulnerability

"Vulnerability is the birthplace of wholeheartedness."

-Brené Brown, "Daring Greatly"

"Compassion is not a relationship between the healer and the wounded. It's a relationship between equals.

Only when we know our own darkness well can we be present with the darkness of others."

-Pema Chödron

WHAT CAN I DO ABOUT TRAUMA AND ADVERSE CHILDHOOD EXPERIENCES?

Resilience Starts With You



Use Universal Trauma-Informed Care Precautions

Ask "<u>What Happened to You</u>" instead of "<u>What's Wrong with You</u>"



Stay Grounded

Find self-care activities that work for you



Find Your Brave Space

We all cause harm



Nurture Social Connections

Resilience Happens in Relationships



Be a Trauma-Informed Care Champion

Trauma-Informed Care (TIC) is a way of being



Stay Engaged

Keep Learning



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