

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 prevalence & "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-compulsion, 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



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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
- 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.

