



CENTER FOR
CHILD & FAMILY
HEALTH

Trauma-Informed Practice and Collaboration Among the CAC Disciplines

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AGENDA

- Setting the Stage
- Defining Trauma for Today's Discussion
- Defining Trauma-Informed Practice
- Self-Assessment/Reflection Activity
- Trauma-Informed Practices
 - Idea Sharing
 - Action Plans



EXPECTATIONS FOR OUR TIME TOGETHER

- You will take away one new/refreshed idea or action step
- We will be working together to define Trauma-Informed Practice and Collaboration
- Please feel free to speak in rough draft
- Learning Style Accommodating
 - Move your body as needed
 - Will switch between individual and group reflection
 - Presentation and activities
- We will end at 10:00 am

POSITIONALITY

How do I identify and come to this work of being trauma-informed?



WHO IS HERE?

HOW ARE WE DEFINING TRAUMA?

THE THREE “E”S:

Event – actual or extreme threat of physical or psychological harm and/or neglect that impacts healthy development

Experience – how the individual interprets and is disrupted physically and psychologically by the trauma

Effects – deleterious impact of trauma that may be short or long in duration (e.g., heightened stress response, inability to concentrate)

WHAT IS TRAUMATIC STRESS?



Exposure to events that involve threats of **injury, death, or danger** during which intense **terror, anxiety, and helplessness** are experienced.



Can occur via **direct experience, witnessing** the event, or even **hearing about** the event.



Intense physical effects, including rapid heartbeat and breathing, shaking, dizziness, and/or loss of bladder or bowel control.



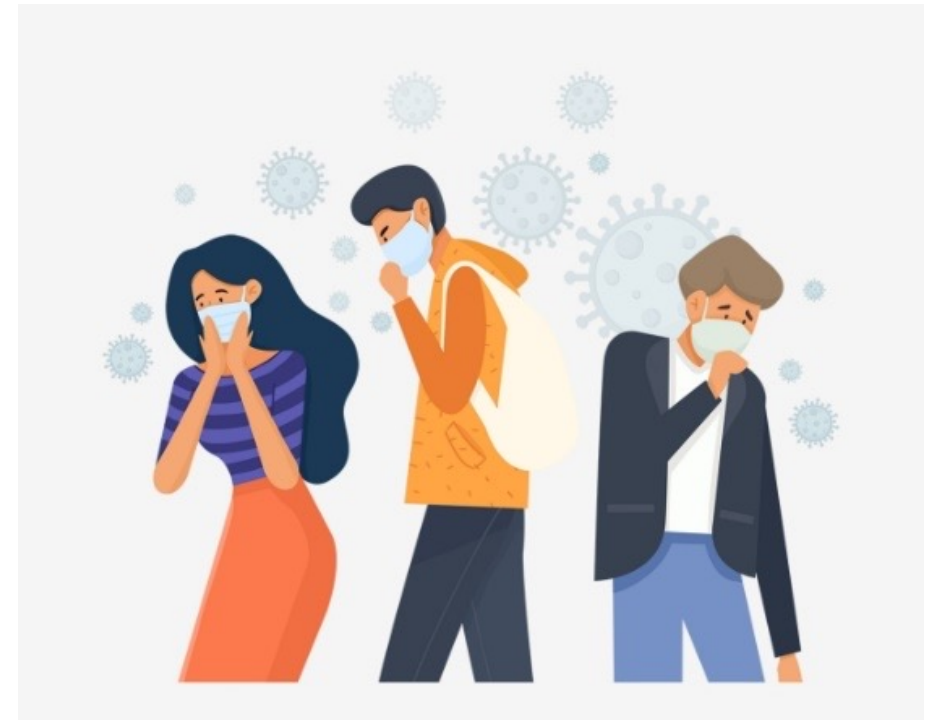
Reactions vary with age, but even very young children experience intense reactions.

TYPES OF TRAUMA



COVID-19: A DIFFERENT KIND OF CRISIS

- Infectious disease outbreaks are unlike acute traumatic or other distressing events
 - Ongoing crisis with insidious stressors that are chronic, silent, and impactful on multiple levels
- Some examples of potential stressors:
 - Health of self
 - Health of loved ones
 - Separation from family/Social Isolation
 - Food insecurity
 - Job insecurity
 - Moral duress
 - Anticipatory grief
 - Traumatic grief/loss
 - Discrimination based on ethnicity/culture
 - Vicarious trauma through media exposure
 - Personal view of outbreak versus large group view



WHAT ABOUT ADVERSE CHILDHOOD
EXPERIENCES (ACES)?

THE SIGNIFICANCE OF ACES

How the ACES Work

Adverse Childhood Experiences

- Abuse and Neglect (e.g., psychological, physical, sexual)
- Household Dysfunction (e.g., domestic violence, substance abuse, mental illness)



Impact on Child Development

- Neurobiologic Effects (e.g., brain abnormalities, stress hormone dysregulation)
- Psychosocial Effects (e.g., poor attachment, poor socialization, poor self-efficacy)
- Health Risk Behaviors (e.g., smoking, obesity, substance abuse, promiscuity)



Long-Term Consequences

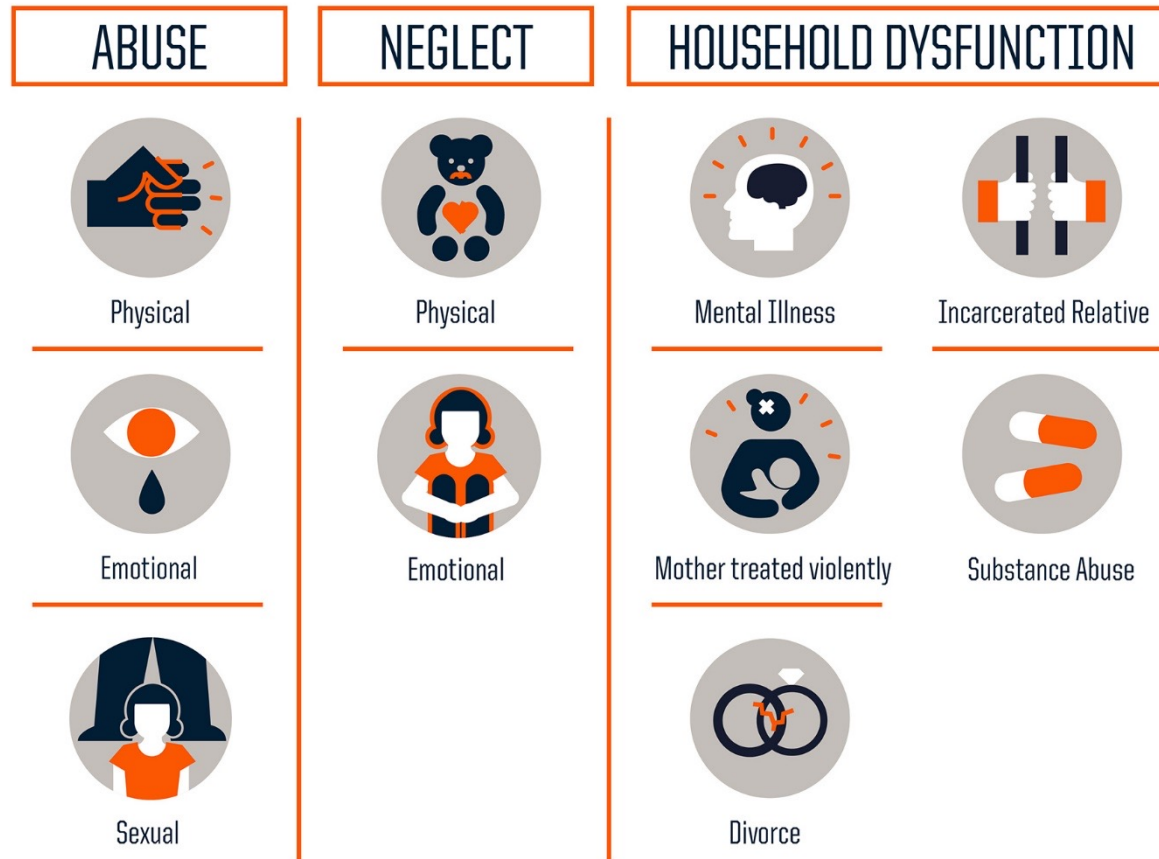
Disease and Disability

- Major Depression, Suicide, PTSD
- Drug and Alcohol Abuse
- Heart Disease
- Cancer
- Chronic Lung Disease
- Sexually Transmitted Diseases
- Intergenerational transmission of abuse

Social Problems

- Homelessness
- Prostitution
- Criminal Behavior
- Unemployment
- Parenting problems
- High utilization of health and social services
- Shortened Lifespan

TYPES OF ADVERSE CHILDHOOD EXPERIENCES (ACES)



OTHER TYPES OF TRAUMA

- Traumatic loss, separation, bereavement
- Sexual assault
- Physical assault
- Community violence
- Serious illness or medical trauma
- Accidents/fires
- Natural disasters
- War, terrorism, political violence
- School violence
- Bullying

NCTSN RESOURCE ON ACES SCREENING

NCTSN

The National Child
Traumatic Stress Network



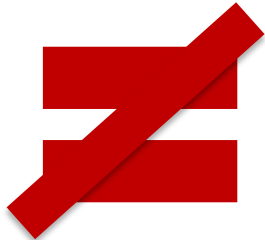
Beyond the ACE Score: Perspectives from the NCTSN on Child Trauma and Adversity Screening and Impact

Amaya-Jackson, L., Absher, L.E., Gerrity, E.T., Layne, C.M., & Halladay Goldman, J. (2021)

DEFINING TRAUMA-INFORMED PRACTICE

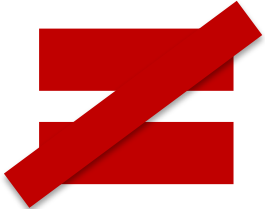
KEEP IN MIND

Physical Safety



Psychological Safety

Stress



Trauma

TRADITIONAL PERSPECTIVE TO A TRAUMA-INFORMED PERSPECTIVE

Challenging behaviors are the result of individual deficits (e.g., what's wrong with you?).

- Challenging behaviors may be ways of coping with trauma (e.g. what happened to you?).

Understands difficult behaviors as purposeful and personal.

- Understands difficult behaviors may be an automatic stress response.

Focuses on changing the individual to “fix” the problem.

- Focuses on changing the environment.

Service providers need to uphold authority and control.

- Service providers need to offer flexibility and choice.

Punitive approaches are most effective.

- Positive, strengths-based approaches are most effective.

Support for people exposed to trauma is provided by counseling professionals.

- Support for people exposed to trauma is the shared responsibility of all who provide support.

SAMHSA'S 6 PRINCIPLES

of a

TRAUMA-INFORMED APPROACH



SAFETY

Prevents violence across the lifespan and creates safe physical environments.

TRUSTWORTHINESS

Fosters positive relationships among residents, City Hall, police, schools and others.

EMPOWERMENT

Ensures opportunities for growth are available for all.

COLLABORATION

Promotes involvement of residents and partnership among agencies.

PEER SUPPORT

Engages residents to work together on issues of common concern.

HISTORY, GENDER, CULTURE

Values and supports history, culture and diversity.

SELF-ASSESSMENT/REFLECTION ACTIVITY

TRAUMA-INFORMED PRACTICES

TRAUMA-INFORMED PRACTICES

Low Impact Debriefing

Routines around starting and stopping

Set up, respect and protect processing time

Remembering/Reevaluating the 'Why?'

ACTION PLANS

Any
Questions



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EVALUATION



C4 - Trauma-Informed
Practice
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