Introduction to Trauma-Informed Care

PIH United States

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Partners In Health

UNITED STATES

AGENDA

Welcome and Introductions

Purpose of Training

Topics
- Defining + Understanding Trauma
- Trauma-Informed Principles + Practices
- A Trauma-Informed CHW
- A Trauma-Informed Organization
- Final Considerations for Trauma-Informed Action

Q&A with Presenters

Conclusion

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Intended Audience

Organizations and their employees, particularly the Community Health Workforce.

Detailed Objectives

- Provide information on trauma, how it impacts everyone, and how to address it using trauma-informed care (TIC) practices.

- Provide context for TIC practices to achieve health equity.

- Provide examples of how CHWs and CBOs can adopt a trauma-informed response in their work and in their communities.

Photo by Cecille Joan Avila for Partners In Health

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Defining Trauma

What is Trauma? Numerous definitions and types exist. In its simplest form, it is defined as "a psychological, emotional response to an event(s) or an experience(s) that is deeply distressing or disturbing".

3 Types of Trauma:
- **Acute**: a single incident
- **Chronic**: repeated and prolonged
- **Complex**: exposure to varied and multiple traumatic events, often of an invasive, interpersonal

Trauma is a Social Determinant of Health (SDOH).

SDOH are factors that influence the health status of individuals or populations. At every stage of life, health is determined by complex interactions between social and economic factors, the physical environment and individual behavior.

> **Trauma can negatively impact people's lives, influencing their behaviors, decisions, and their health.**

Trauma is not only in the head...

> **... it's also in the body. Trauma can physically change the brain in both adults and children.**
> **These include changes in neurobiological makeup and *difficulty coping, feeling trust, managing cognitive processes, and regulating behavior.***

The same event can be traumatic for one person, but not another.

Everyone experiences and carries the weight of their trauma differently. *How* they experience trauma greatly influences its long-lasting effects.

These effects may not be immediately evident—they can be immediate or emerge over time. They can be fleeting or stay with a person throughout their life.

Unresolved trauma can lead to a lifetime of difficulty.

Unresolved trauma can manifest in the body as:

- **Negative long-term health outcomes**
  - *Ex: Chronic pain, hypertension, cancer*
- **Brain development and mental health issues**
  - *Ex: ADHD, speech impairment, PTSD, substance abuse, depression, anxiety*
- **Social problems**
  - *Ex: Violence, inability to deal with conflict, uncontrollable anger, trauma re-enactment*

The 3 E's of Trauma

> **Knowing the 3 E's of trauma can help caregivers better understand each person's needs, and realize that sometimes "bad decisions/behavior" can be an understandable response to painful situations.**

Focus on understanding the:

Event(s)

"Individual trauma results from an event, a series of events, or a set of circumstances..."

Examples:
Abuse, Loss, Chronic Stressors, Racism

Experience

"… experienced by an individual as physically or emotionally harmful or life threatening, and that has lasting adverse..."

Consider:
How, When, Where, How often?

Effects

"… effects on the individual's functioning and mental, physical, social, emotional, or spiritual well-being."

Remember:
Hurt people hurt people.

Source: SAMHSA

What's considered Trauma?

Examples of Trauma:

- Racism
- Poverty
- All Types of Abuse
- Witnessing Violence
- Homelessness
- Natural Disasters
- Accidents

- Bullying
- Grief
- Historical Trauma
- Intergenerational Trauma
- **High Stress Environments (Chronic Toxic Stress)**
- **ACEs**

Further described on next slide

Source: Center on the Developing Child, Harvard

Toxic Stress and Adverse Childhood Experiences

Types of Stress

Stress is a natural occurring response to situations we perceive as threats or challenges. Not all stress is bad, but some stress has permanent impacts on health.

- **Positive Stress**: Brief increases in heart rate, mild elevations in stress hormones.
- **Tolerable Stress**: Serious, but temporary stress response.
- **Toxic Stress**: a prolonged activation of a stress response, with a failure for the body to recover.

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Adverse Childhood Experiences (ACEs)

ACEs are traumatic events experienced as children that can have significant impact on someone's physical, emotional, and mental health throughout their life.

The more ACEs a child has, the more likely they are to experience changes in behavior, have poorer health outcomes, and struggle in their responses to life experiences.

Source: Center on the Developing Child, Harvard

COVID-19 & Collective Trauma

Photo by Scott McIntyre for Partners In Health

Over the past two years, we have experienced collective (mass) trauma, on top of our existing traumas.

The COVID-19 pandemic has been traumatizing for most people, recognized as both an ACE and toxic stressor.

The unprecedented nature of the pandemic has made coping difficult for many, and there is a long road to recovery.

We have already witnessed its widespread negative effects, with harm further exasperated for healthcare and public health workers.

Experts warn there may be much more trauma to come.

Source: BBC Future

COVID-19 & Collective Trauma

Figure 1

Average Share of Adults Reporting Symptoms of Anxiety Disorder and/or Depressive Disorder, January-June 2019 vs. January 2021

41.1%
January 2021 (Household Pulse Survey)

11.0%
Jan - Jun, 2019 (NHIS)
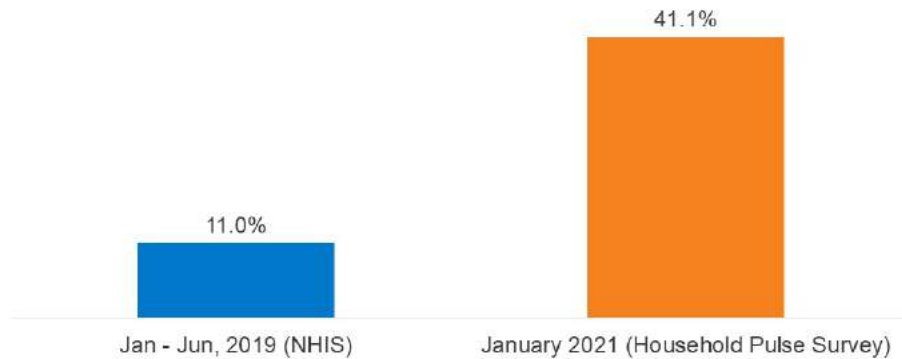
NOTES: Percentages are based on responses to the GAD-2 and PHQ-2 scales. Pulse findings (shown here for January 6 – 18, 2021) have been stable overall since data collection began in April 2020.
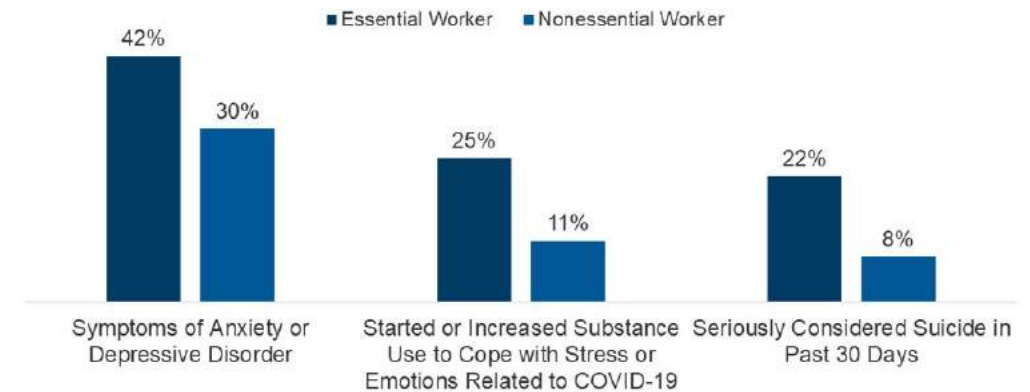SOURCE: NHIS Early Release Program and U.S. Census Bureau Household Pulse Survey. For more detail on methods, see: https://www.cdc.gov/nchs/data/nhis/earlyrelease/ERmentalhealth-508.pdf

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Figure 8

Among Essential and Nonessential Workers, Share of Adults Reporting Mental Distress and Substance Use, June 2020

■ Essential Worker ■ Nonessential Worker

42% 30%
Symptoms of Anxiety or Depressive Disorder

25% 11%
Started or Increased Substance Use to Cope with Stress or Emotions Related to COVID-19

22% 8%
Seriously Considered Suicide in Past 30 Days

NOTES: Data is among adults ages 18 and above. Essential worker status was self-reported.
SOURCE: Czeisler ME , Lane RI, Petrosky E, et al. Mental Health, Substance Use, and Suicidal Ideation During the COVID-19 Pandemic — United States, June 24–30, 2020. MMWR Morb Mortal Wkly Rep 2020;69:1049–1057. DOI: http://dx.doi.org/10.15585/mmwr.mm6932a1

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About 4 in 10 adults in the U.S. reported symptoms of anxiety or depressive disorder in January 2021, up from 1 in 10 adults who reported these symptoms from January to June 2019.

Feelings of anxiety and depression and thoughts of suicide increased for healthcare workers, who were already prone to experiencing burnout.

Source: KFF, The Implications of COVID-19 for Mental Health and Substance Use

Trauma is Contagious

Photo by Scott McIntyre for Partners In Health

Trauma can be passed on in relationships, but it can also be healed by them.

Experts fear children may carry unhealed pandemic-related traumas on to their children, further adding to already present intergenerational traumas.

No one is irreparably damaged by their trauma.

Healing is possible with proper support systems and within healthy relationships.

It is critical for us to consider adopting a trauma-informed care response in our work, and in our own lives, to effectively recover from the pandemic, to further avoid systemic re-traumatization, and foster healing from *all* types of trauma.

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So what exactly is Trauma-Informed Care?

An individual that is trauma-informed assumes that someone is <u>more likely than not</u> to have experienced trauma.

An organization that is trauma-informed <u>changes its organizational culture</u> to emphasize respecting and appropriately responding to the effects of trauma at all levels.

A community or system that is trauma-informed has policies, programs, and partnerships in place that are sensitive and responsive to the diversity of traumas experienced by the individuals it serves.

Six Guiding Principles for Trauma-Informed Care

> **Every community is different, and your unique work/organizations goals should reflect that uniqueness.**

CHWs, organizations, and communities can consider these principles as a guide to redefine and rebuild their individual approaches to care, organizational processes, and systems to be trauma-informed.

1. SAFETY 2. TRUSTWORTHINESS & TRANSPARENCY 3. PEER SUPPORT 4. COLLABORATION & MUTUALITY 5. EMPOWERMENT VOICE & CHOICE 6. CULTURAL, HISTORICAL, & GENDER ISSUES

But keep in mind:
"Adopting a trauma-informed approach is not accomplished through any single particular technique or checklist. It requires constant attention, caring awareness, sensitivity, and possibly a cultural change at an organizational level."

The Four R's: Key Assumptions in a Trauma-Informed Approach

A trauma-informed approach is guided by 6 principles, and 4 key assumptions. Following both of these can help CHWs and CBOs adhere to the practice of trauma-informed care without a prescribed set of practices or procedures.

1. Realization about Trauma: *Realizing* the prevalence of trauma, particularly community or culturally specific traumas, including your own.

2. Recognizing the Signs of Trauma: *Recognizing* how trauma affects **everyone**. All the individuals that you serve, those who are involved with your program, organization, or system, including your own colleagues and workforce.

3. Responding to Trauma: *Responding* by putting this knowledge into practice in your own organization, workplace, your programs, your missions, and your own personal lives.

4. Resisting Re-Traumatization: *Resisting* re-traumatization by practicing trauma-informed care to avoid unintentionally interfering with the recovery of clients/the community, the well-being of staff, and the fulfillment of your organizational mission.

Photo by Lynsey Weatherspoon for PIH

Source: SAMHSA

From Principles to Action: the 3 Cs of Promoting Healing

› **Furthermore, the 3 Cs can help promote healing for all- the person or community you are serving, and yourself. Trauma-informed care responses allow you to care for yourself while caring for others.**

1 **CALM:** Preventing ACEs and other forms of trauma from happening is critical. CHW's and CBO's can support people by reducing sources of stress in people's lives. Providing services that help meet people's basic needs can reduce toxic stressors, lessen the risk factors of the SDOHs, and further prevent ACEs from occurring.

2 **COMFORT:** CHW/CBOs can promote the healing of individuals and communities by sharing, supporting, and creating community and culturally-relevant responses to reduce the negative effects of trauma, ACEs, and toxic stress. Examples include hosting wellness sessions with meditations, encouraging people to prioritize self-care, and creating access to behavioral and mental health resources.

3 **COLLABORATE:** Many cultures hold a belief that if a community is not healthy, its members cannot be. CBOs and CHWs can play a critical role in creating healthy communities by building a strong, community-centered network of resources that foster healthy and responsive relationships and families. Working together to address community-wide issues benefits everyone.

Sources: ACEs Aware, Kimberg 2016

Reflections – take a moment to reflect upon and discuss these questions

- How can CHWs integrate an understanding of trauma into their work?

- How are trauma-informed CHWs better prepared to serve their community?

- How can CBOs ensure that they are healing and not re-traumatizing?

- How can trauma-informed CBOs better support their workforce?

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Recall the Four R's

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3. Responding to Trauma: *Responding* by putting this knowledge into practice in your own organization, workplace, your programs, your missions, and your own personal lives.

4. Resisting Re-Traumatization: *Resisting* re-traumatization by practicing trauma-informed care to avoid unintentionally interfering with the recovery of clients/the community, the well-being of staff, and the fulfillment of your organizational mission.

Photo by Lynsey Weatherspoon for PIH

Source: SAMHSA

As a Trauma-Informed Community Health Worker...

Photo by Zack DeClerck for PIH

You are a caregiver. You are a trusted messenger.
You build a connection with the people you serve.

You can help people heal, prevent additional traumas, and protect against its long-lasting harm.

CHWs can be trauma-informed by:

- Helping people meet their basic needs by supporting and providing necessary services.
- Building strong community resources to foster healthy and responsive relationships.
- Attending trainings on TIC.
- Displaying empathy & compassion
- Knowing your community! (Cultural Humility)
- Asking "What happened to you?", instead of "What is wrong with you?" *Keep in mind the 3 Es!*
- Understanding that people are not *giving you* a hard time, they are *having* a hard time.

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A Trauma-Informed Organization: Internal Considerations

Seeking to understand the entirety of peoples' needs, to best support and connect communities to resources, is a goal of many organizations.

This begins by understanding your employees' needs and creating a trauma-informed workspace.

Recognize that CHWs and other employees may experience emotional residue of trauma just by hearing about it.

This is a phenomenon known as ***Trauma Exposure.***

Types of Trauma Exposure include:

- **Vicarious Trauma**: carrying emotional residue of hearing of trauma
- **Secondary Trauma**: indirect exposure to trauma through hearing firsthand account or narrative of traumatic event.
- **Compassion Fatigue**: emotional and physical exhaustion leading to a diminished ability to empathize or feel compassion for others.
- **Secondary Traumatic Stress**: feeling emotional duress that results when a person hears firsthand accounts of trauma experiences, especially multiple experiences from many people.
- **Secondary Victimization**: from compassion to victim blaming due to overexposure.
- **Burnout**: having emotional, physical, or emotional exhaustion caused by excessive, prolonged stress. This occurs when you feel overwhelmed, emotionally drained, and unable to meet demands.

A Trauma-Informed Organization: Internal Responses

A trauma-informed organization can prevent re-traumatization and transform the workplace from a place of *stress* into a place of *healing*.

This requires action across an organization, from policies, practices, procedures, and partnerships, to administration, hiring, training, and staff development--all with a goal of *creating safe spaces, avoiding re-traumatization, and facilitating healing.*

Tangible actions an organization can take:

- Recognize employee burnout, or the other effects of trauma residue, and allow time to decompress and heal.
- Provide employees access to mental health services and wellness plans.
- Ensure the physical workspace creates a calming and grounding place to work (remove clutter, incorporate plants, natural lighting, etc.).
- Work towards promoting employee health in all aspects: mental, physical, spiritual, emotional, individually, and collectively.
- Create policies that enable employees to take time to care for themselves, including policies for paid time off, wellness trainings, and resources for mental health crisis.
- Listen to what your employees are telling you they need!

A Trauma-Informed Organization: External Responses

A Trauma-Informed Organization strives to go from Trauma-inducing to Trauma-reducing in the way it and its staff members interact in the community and the way its programs are designed. Trauma-informed care requires understanding how trauma impacts lives AND understanding the root causes behind that trauma.

Applying the principles of trauma-informed care can help address health inequities, particularly in BIPOC, resource-limited, and other marginalized communities.

Photo by Zack DeClerck for PIH

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Beyond Trauma-Informed Care to Systems Level Change

> **Trauma exists systematically, therefore, Trauma-Informed Care isn't limited to a professional role or organizational practices. The following are considerations for how to be trauma-informed in community systems.**

ADVOCATE for policies and programs that strengthen families and people who are at high-risk of experiencing trauma due to SDOH.

CONNECT people in your community with each other

- Connection may be through partnership, mentorship, support groups, after school programs, community events, etc.

PRACTICE trauma-Informed care, cultural humility and competency both in your work and in every aspect of your daily lives.

CREATE partnerships among CBOs and other community leaders to bring awareness to trauma and the SDOHs.

- Ensure services are available as a resource to everyone.
- Collaborate on solutions to address community-specific issues.
- Encourage others to adopt a Trauma-Informed Care response.

EMPHASIZE resilience and strengths of those in your care who have experienced trauma and who may have a large number of SDOHs.

- Focus interventions around building upon protective factors for the individual, in a culturally relevant manner, by and for the community.

EDUCATE yourselves and others on trauma.

- Learn the best practices for working with marginalized communities, how to reduce implicit bias, and how we can be trauma-informed in every aspect of our lives.

Thank You

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Learning and Impact Team

A couple of resources to leave you with...

- [Alameda County Care Connect: Trauma Informed Care, Recovery, and Healing - YouTube](#)

- [Building a Trauma-Informed Workforce - Trauma-Informed Care in Behavioral Health Services - NCBI Bookshelf (nih.gov)](#)

- [Improvement Tools for Trauma-and Resilience-Informed Pediatric Care - Center for Care Innovations](#)

- [Incorporating Racial Equity into Trauma-Informed Care - Center for Health Care Strategies (chcs.org)](#)

- [Supporting Child and Student Social, Emotional, Behavioral, and Mental Health Needs (PDF)](#)

- [The Implications of COVID-19 for Mental Health and Substance Use | KFF](#)

- [The New Workplace is Trauma-Informed | Kaiser Permanente](#)

A couple of resources to leave you with...

- [Trauma Informed Care vs. Trauma Specific Treatment | Alameda County Trauma Informed Care](#)

- [Trauma-Informed Care in Service Systems | American Institutes for Research (air.org)](#)

- [Trauma-Informed Care: A Sociocultural Perspective - Trauma-Informed Care in Behavioral Health Services - NCBI Bookshelf (nih.gov)](#)

- [Trauma-Informed System Model (traumatransformed.org)](#)

- [What's Your Concept of Trauma? (crisisprevention.com)](#)

- [What Are the Social Determinants of Trauma? | Relias](#)