Trauma Informed Care: Looking at Behaviors Through a Trauma Lens

Orchard Place/Child Guidance Center

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Trauma Informed Care: is a paradigm shift

“What’s wrong with you?”

“What happened to you?”
Trauma Informed Care (TIC) is.....

**Not a mental health intervention....it is....**

- Organizational structure
- Treatment framework
- Understand, recognize, respond to trauma effects
- Emphasis on physical, psychological and emotional safety for both *consumers* and *providers*
- Help survivors rebuild a sense of control and empowerment
Why Trauma Informed Care?

• Designed to minimize re-victimization

• Validates the survivors’ life experiences

• Problem behaviors may be attempts to cope with abusive experiences
Essentially TIC is.....

RESILIENCE

Building resilience in individuals so that the whole community/organization can thrive!!!
Trauma Informed Care

4 Essential Elements
1. **Connect** – Focus on Relationships

Hummer, V., Crosland, K., Dollard, N., 2009
2. **Protect** – Promote Safety and Trustworthiness

Hummer, V., Crosland, K., Dollard, N., 2009
3. **Respect** – Engage in Choice and Collaboration

Hummer, V., Crosland, K., Dollard, N., 2009
4. Redirect (Teach and Reinforce) – Encourage Skill-Building and Competence

Hummer, V., Crosland, K., Dollard, N., 2009
Two sides of the same coin
Core Principals revisited
(Fallot & Bebout; APA Convention 2013)

Consumers: these 5 questions

- **Safety** - physical/emotional safety
- **Trustworthiness** - maximize, make tasks clear; appropriate boundaries
- **Choice** - enhance consumer choice and control
- **Collaboration** - max and share power
- **Empowerment** - prioritize and skill building every opportunity

Staff: these 5 questions

- **Safety** - ensure for staff
- **Trustworthiness** - maximize as administrators and supervisors; make tasks and procedures clear; be consistent
- **Choice** - enhance staff choice/control in their day to day work
- **Collaboration** - max and share power with staff members
- **Empowerment** - prioritize staff skill building; provide resources
Trauma...

is something which threatens one’s physical or psychological integrity.
Types of Trauma

- Acute
- Chronic
- Complex
- Historical/Intergenerational
Acute trauma:

A single event that lasts for a limited time
• car accident
• witnessing a crime
• natural disaster
Chronic trauma:

The experience of *multiple* traumatic events, often over a long period of time
Complex Trauma...

Describes a specific kind of chronic trauma and its effects on children that include:

- Multiple traumatic events that begin at a very young age, typically under 5.

- Caused by adults who should have been caring for and protecting the child

Historical Trauma...

- Accumulative emotional and psychological pain over lifespan
- Across generations
- Result of massive group trauma
  (Yellow-Horse Brave Heart, 1995)
Historical Trauma can:

- Varied effects on individuals:
  - unsettled trauma or grief
  - depression, high mortality,
  - increase of alcohol abuse, child abuse and domestic violence

- Examples
  - Lakota and other American Indian
  - Jewish Holocaust survivors and descendants.

(Brave Heart, 2000)
Interpersonal Violence

• *Tends to be more traumatic than natural disasters*

• More disruptive to our sense of trust and attachment

• *Experienced as intentional* rather than as “an accident of nature”

(International Society for the Study of Trauma and Dissociation, 2009)
Prevalence of Trauma

• Children who experience child abuse and neglect are 59% more likely to be arrested as a juvenile, 28% more likely to be arrested as an adult, and 30% more likely to commit violent crime.

(Child Welfare Information Gateway, 2006)
FACT: One out of every 4 children attending school has been exposed to a traumatic event that can affect learning and/or behavior.

FACT: Trauma can impact school performance.

- Lower GPA
- Higher rate of school absences
- Increased drop-out
- More suspensions and expulsions
- Decreased reading ability

Adverse Childhood Experiences (ACE) Study

• Decade long study involving 17,000 people.

• Examines the health and social effects of ACEs throughout the lifespan.

• Largest study ever done on this subject.

• General Findings: Childhood experiences are powerful determinants of who we become as adults.
ACEs Questionnaire

- Physical abuse
- Emotional abuse
- Sexual abuse
- An alcohol and/or drug abuser in the household
- An incarcerated household member
- Someone who is chronically depressed, mentally ill, institutionalized, or suicidal
- Mother is treated violently
- One or no parents
- Emotional or physical neglect

Finding Your ACE Score

While you were growing up, during your first 18 years of life:

1. Did a parent or other adult in the household often or very often:
   - Swear at you, insult you, put you down, or humiliate you?
   - Act in a way that made you afraid that you might be physically hurt?
   - If yes enter 1 ____
   - Yes No

2. Did a parent or other adult in the household often or very often:
   - Push, grab, slap, or throw something at you?
   - Ever hit you so hard that you had marks or were injured?
   - If yes enter 1 ____
   - Yes No

3. Did an adult or person at least 5 years older than you ever:
   - Touch or fondle you or have you touch their body in a sexual way?
   - Attempt or actually have oral, anal, or vaginal intercourse with you?
   - If yes enter 1 ____
   - Yes No

4. Did you often or very often feel that:
   - No one in your family loved you or thought you were important or special?
   - If yes enter 1 ____
   - No

5. Did you often or very often feel that:
   - You didn't have enough to eat, had to wear dirty clothes, and had no one to protect you?
   - If yes enter 1 ____
   - Yes No

6. Were your parents ever separated or divorced?
   - If yes enter 1 ____
   - Yes No

7. Was your mother or stepmother:
   - 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 at least a few minutes or threatened with a gun or knife?
   - If yes enter 1 ____
   - Yes No

8. Did you live with anyone who was a problem drinker or alcoholic or who used street drugs?
   - If yes enter 1 ____
   - Yes No

9. Was a household member depressed or mentally ill, or did a household member attempt suicide?
   - If yes enter 1 ____
   - Yes No

10. Did a household member go to prison?
    - If yes enter 1 ____
    - Yes No
ACEs Conceptual Framework
Adverse Childhood Experiences in Iowa: A New Way of Understanding Lifelong Health

Findings from the 2012 Behavioral Risk Factor Surveillance System

Commissioned by the Central Iowa ACEs Steering Committee
Prevalence of Individual ACEs in Iowa

- Emotional Abuse: 28% (19% affected with only this ACE)
- Physical Abuse: 16% (6% affected with only this ACE)
- Sexual Abuse: 10% (15% affected with only this ACE)
- Adult Substance Abuse: 26% (19% affected with only this ACE)
- Parent Separation/Divorce: 22% (3% affected with only this ACE)
- Mental Illness among Adults: 17% (15% affected with only this ACE)
- Violence Between Adults: 16% (6% affected with only this ACE)
- Incarcerated Household Member: 7% (22% affected with only this ACE)

Average score across seven comparison states: (Arkansas, California, Louisiana, New Mexico, Tennessee, Washington & Wisconsin)
Co-Occurrence of High ACE Scores among Those Who Experienced Specific ACEs

**Child Abuse**
- Emotional Abuse: 45%
- Physical Abuse: 63%
- Sexual Abuse: 56%

**Household Dysfunction**
- Adult Substance Abuse: 46%
- Parent Separation/Divorce: 45%
- Mental Illness among Adults: 54%
- Violence Between Adults: 66%
- Incarcerated Household Member: 79%
- Iowa's General Population: 15%

Percentage with ACE score of 4 or more
On average, 5 out of every 30 students in an Iowa school classroom will live with a parent who has a very high ACE score – a score of 4 or more.
What causes stress to become toxic?

Center on the Developing Child/Harvard University

- **Positive**: Brief increases in heart rate, mild elevations in stress hormone levels.
- **Tolerable**: Serious, temporary stress responses, buffered by supportive relationships.
- **Toxic**: Prolonged activation of stress response systems in the absence of protective relationships.
Three Core Concepts in Early Development

3 Toxic Stress Derails Healthy Development

NATIONAL SCIENTIFIC COUNCIL ON THE DEVELOPING CHILD
Center on the Developing Child
HARVARD UNIVERSITY
Brain Development in Early Childhood

Healthy Brain
This PET scan of the brain of a normal child shows regions of high (red) and low (blue and black) activity. At birth, only primitive structures such as the brain stem (center) are fully functional; in regions like the temporal lobes (top), early childhood experiences wire the circuits.

An Abused Brain
This PET scan of the brain of a Romanian orphan, who was institutionalized shortly after birth, shows the effect of extreme deprivation in infancy. The temporal lobes (top), which regulate emotions and receive input from the senses, are nearly quiescent. Such children suffer emotional and cognitive problems.
What Can You Do?
Ask What Is The Cat Hair?

Panksepp, J (1998)

What is the Cat Hair

Amount of Play

- Amount of Play

Graph showing the amount of play over time with a sharp decline around the 5th point.
Interventions:

• Breathe

• Talk less
• Give short, simple instructions
Interventions...

- Be aware of voice tone and facial expressions
- Suggest a replacement behavior
Neurosequential Model of Therapeutics (NMT)

• Relevant: Developmentally matched
• Repetitive: Patterned
• Relational: Safe
• Rhythmic: (Perry, 2007)
Get Permission
Interventions:

- Don’t personalize
- Provide tactile coping items; play dough
Interventions continued

• Respond to *affect* not the behavioral manifestation
• Reframe negative/oppositional behavior
• Help client focus on competencies rather than deficits
• Identify possible triggers
  • sensory
  • times of day
  • certain activities
Interventions

• Create “Safe Place”
• Can rules be changed or flexible?
Show Empathy
Build Resiliency

In your consumers, yourself and your organization
Resilience is the ability to recover from traumatic events.

People who are resilient see themselves as:

- Safe
- Capable
- Lovable
Resilience/Stress questionnaire

How a person perceives their environment is important!!

- 14 question survey
- Developed in Augusta, Maine
- 2006 updated in February 2013
- Scoring system modeled after ACE’s

Resilience/Stress Questionnaire

[Content of the questionnaire is not transcribed due to the image quality and the need for a readable transcription tool.]
Secondary Traumatic Stress

a direct result of frequent and repeated exposure to traumatic material

It is inevitable
It is expected

BRAIN: Cortisol becomes toxic to brain cells, damaging cognition. Fatigue, anger, & depression increase.

IMMUNE SYSTEM: Repeated suppression of disease-fighting cells ultimately weakens resistance to infection.

INTESTINES: Decreases in blood flow leave mucous lining vulnerable to ulcers.

CIRCULATORY SYSTEM: Elevated BP & heart rate. Damage elasticity of blood vessels.

**Module IV: Secondary Trauma, Burnout, Counter Transference**

**ABC:** Building Personal Resistance to Secondary Trauma

**a)** Awareness - monitor emotions, needs, limits and resources.

**b)** Balance - set aside time for reflection, play, relaxation, and family.

**c)** Connections - utilize social support, resist tendencies to isolate.
Caregivers Also Need Care

- We are all human
- Caring for family and friends can be difficult, draining, exhausting, and frustrating
- Daily/Weekly Self Care
Use this self-care plan to identify some strategies that might help you manage your feelings when dealing with intense information. Sample Self-Care Plan:

If I become exhausted, emotional, numb or angry:
- I can talk to __________ about my feelings.
- I can take a break.
- I can stretch or exercise or go for a walk.
- I can eat something nutritious.
- I can eat something not so nutritious (chocolate!)
- I can think of some of my most successful clients.
- I can take a nap or lie down.
- I can watch something funny or entertaining.
- I can play with my pet or my children.
- I can shoot baskets or play another sport.

These things work well for me when I am overwhelmed at work:

1. 
2. 
3. 

My clinical supervisor is:

Niki Miller, M.S C; presentation on RSAT Training Tool
Self-Care Basics

- Get enough sleep
- Eat well
- Be physically active
- Use alcohol in moderation, or not at all
- Take regular breaks from stressful activities
- Laugh every day
- Express yourself
- Let someone else take care of you
Commit to self care daily

Do relational activities with “normal friends” weekly/monthly
RESOURCES

• www.traumainformedcareproject.org
• www.nctsn.org
• http://www.nctsn.org/products
• www.samhsa.gov/nctic/about.asp
• www.traumacenter.org/about/about_bessel.php
• www.sidran.org/
• www.iowaaces360.org/
• www.resiliencetrumpsaces.org
• www.gainescenter.samhsa.gov/
THANK YOU!
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