An Introduction to Trauma Informed Care



Building Blocks Foster Care

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Program Objectives

- Define Trauma
- Brain Development
- Normal Stress Response
- Effects of Prolonged Stress Response Activation
- What is Trauma Informed Care
 - Responding Appropriately to Trauma Survivors
 - How can we help trauma survivors
- How can we protect ourselves from Secondary Trauma

Trauma

- Any life event that is so disturbing and damaging to our psyche; we lack the tools to deal with it.
 - Sudden, Unexpected, Extreme
 - Outside one's control
 - Perceived or actual threat of death or significant harm to themselves or someone they love

Types of Trauma

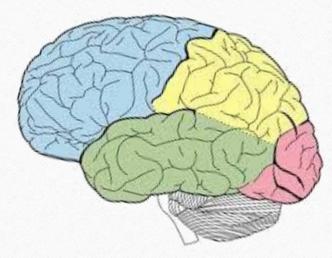
- Acute
- Chronic
- Complex
- Developmental
- Chronic Stress (Toxic)
- Emotional
- Secondary

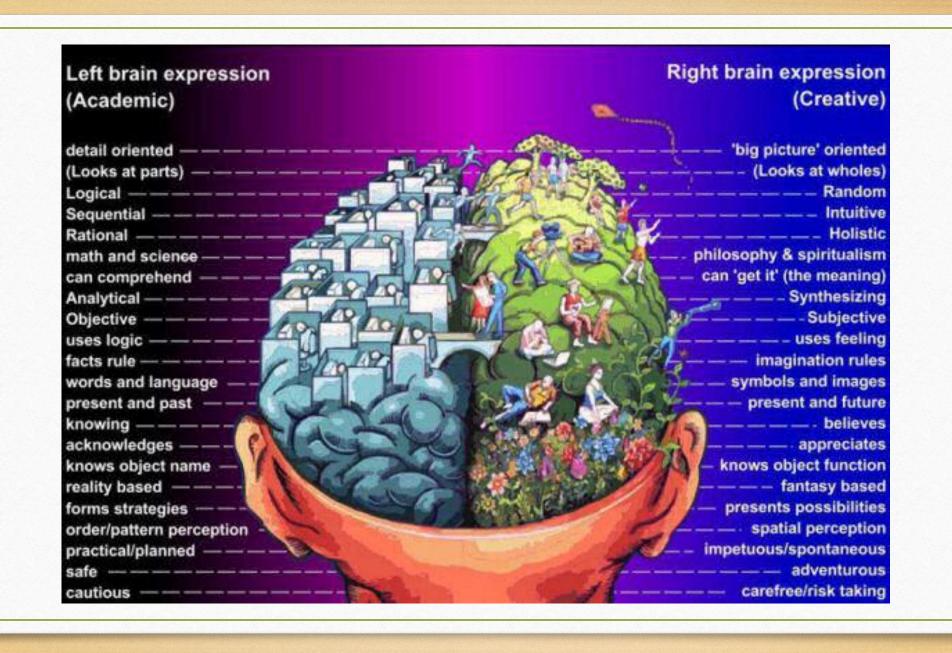
The Effects of Trauma are Highly Subjective

- Age
- Developmental Level
- Support Systems Protective Capacities
- Role in the Trauma
- Chronicity
- Culture
- Resiliency

Brain is Designed for the Body to Survive

- Brain Stem involuntary functions digestion, circulation, respiration
- Limbic Brain amygdala, hippocampus, pituitary gland
- Cortex thinking brain
 - Left Hemisphere
 - Right Hemisphere
 - Corpus Collosum





Normal Survival / Stress Response



What happens inside the body

- When our fight or flight response is activated, chemicals like adrenaline, noradrenaline and cortisol are released into our bloodstream causing our body to undergo a series of very dramatic changes.
 - Our respiratory rate increases.
 - Blood is directed away from our digestive tract and directed into our muscles and limbs.
 - Our pupils dilate.
 - Our awareness intensifies.
 - Our sight sharpens.
 - Our impulses quicken.
 - Our perception of pain diminishes.
 - Our immune system mobilizes with increased activation.
- We become prepared—physically and psychologically—for fight or flight. We scan and search our environment, "looking for the enemy."

What happens in the Brain / Behaviors

- We may overreact to the slightest comment.
- Our fear is exaggerated.
- Our thinking is distorted.
- We see everything through the filter of possible danger.
- We narrow our focus to those things that can harm us. Fear becomes the lens through which we see the world.

After the threat is over

- Our bodies are designed to behave this way for a short time and then return to normal.
- The extra physical exertion used during the "survival" of the threat quickly metabolizes the cortisol, adrenalin and noradrenaline and our bodies return to a state of balance.
- With the calming and restorative phase our blood pressure slows, breathing regulates, and rational thought returns.
- Neural pathways in the brain develop a short and direct route to handle threats.



Effects of Prolonged Exposure on the body

- Chronic overexposure to cortisol, adrenaline and noradrenaline leads to increased risk of:
 - Heart disease
 - Sleep problems
 - Digestive problems
 - Depression
 - Obesity
 - Memory impairment
 - Worsening of skin conditions, such as eczema

Effects of Prolonged Exposure on the mind

- It is almost impossible to cultivate positive attitudes and beliefs when we are stuck in survival mode.
- Our heart is not open.
- Our rational mind is disengaged.
- Our consciousness is focused on fear, not love.
- Making clear choices and recognizing the consequences of those choices is unfeasible.
- We are focused on short-term survival, not the long-term consequences of our beliefs and choices.
- When we are overwhelmed with excessive stress, our life becomes a series of short-term emergencies.
- We lose the ability to relax and enjoy the moment. We live from crisis to crisis, with no relief in sight.
- Burnout is inevitable.

Effects of Prolonged Exposure on the Brain

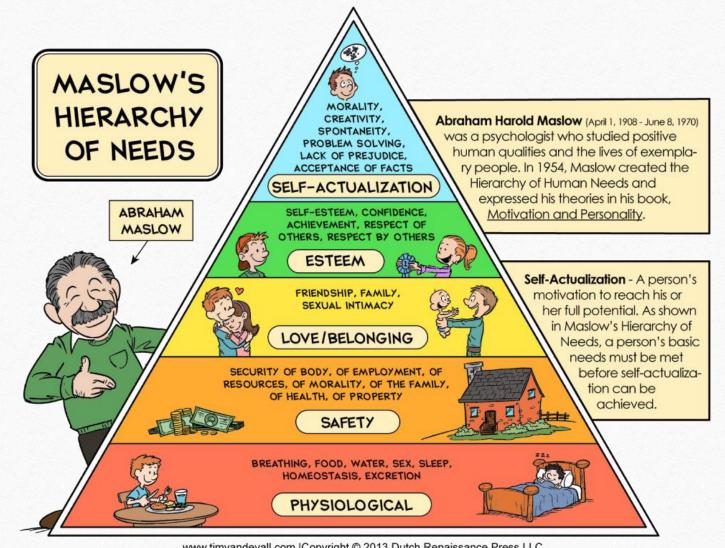
• Neural pathways in the brain do not develop a short and direct route to handle threats. These pathways are often jumbled up, making a person less able to effectively handle threats in the future.



- Because a person's body becomes "used to" the higher levels of cortisol, adrenalin and noradrenalin they may react inappropriately in times of "real" threatening situations.
- After prolonged exposure the body is never able to return to the same state of balance as it was before. There may be calmer times, but may never be in complete balance even with significant assistance.

Trauma Informed Care

- Change in Thinking Paradigm
- Universal Precautions
- Strength Based
- Meeting a person exactly where they are physical needs first



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Understanding of Memory

- Often filled with gaps
- Explicit
- Implicit

Understanding of Common Responses

- Reenactment.
- Dissociation
- Self-Medication
- Triggers
- Somatization
- Emotional Dysregulation
- Terminal Uniqueness
- Sleep Disturbances
- Impaired Memory Formation Forgetfulness, "Spacey"

How can we help???

- Agape Love unconditional positive regard
- Acceptance of thoughts. feelings, attitudes, beliefs
- Avoid Retraumatizing the survivor language ability, minimizing, promising things may not be able to deliver, managing perceptions
- Encourage participation in treatments
- Remove Barriers to accessing services

Trending Treatment Options

- Trauma Informed CBT
- Yoga / Tai Chi
- Meditation / Mindfulness
- EMDR
- Grounding / Earthing
- Tapping



Secondary Trauma

- AKA
 - Compassion Fatigue
 - Vicarious Trauma
 - Practitioner Decay
- "The Cost of Caring"
- Self-Care Practices

"I have come to the frightening conclusion that I am the decisive element. It is my personal approach that creates the climate. It is my daily mood that makes the weather. I possess tremendous power to make life miserable or joyous. I can be a tool of torture or an instrument of inspiration, I can humiliate or humor, hurt or heal. In all situations, it is my response that decides whether a crisis is escalated or deescalated, and a person is humanized or de-humanized. If we treat people as they are, we make them worse. If we treat people as they ought to be, we help them become what they are capable of becoming."

Haim G. Ginott