TRAUMA INFORMED APPROACH
AN INTRODUCTION

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OVERVIEW

• Defining Trauma & Traumatic Events
• Impact of Trauma
• Trauma Informed Approach
HOW WOULD YOU DEFINE TRAUMA?
TRAUMA & TRAUMATIC EVENTS

Types:
- acute
- complex
- systemic

Adverse Childhood Experiences
- Maternal Depression
- Emotional & Sexual Abuse
- Substance Abuse
- Domestic Violence

Adverse Community Environments
- Physical & Emotional Neglect
- Divorce
- Mental Illness
- Incarceration
- Homelessness
- Violence
- Poverty
- Discrimination
- Community Disruption
- Lack of Opportunity, Economic Mobility & Social Capital
- Poor Housing Quality & Affordability

UNDERSTANDING TRAUMA

A trauma response is the unique way an individual experiences, responds to, and processes an event or enduring conditions in which:

- An individual's ability to integrate their emotional experience is overwhelmed and/or

- An individual experiences a threat to their life, bodily integrity, or that of a caregiver or family
TRAUMA RESPONSE & PTSD

- Dysregulated Trauma Response: Fight, Flight, Freeze

PTSD Symptoms
- Hyper-arousal or hypervigilance
- Intrusive thoughts
- Avoidance
- Negative cognition and mood
- Physiological response
ADVERSE CHILDHOOD EXPERIENCES STUDY (ACE)

Adverse Childhood Experiences Study
- 67% individuals had 1+ ACE
- 12.6% had 4+ ACEs
- Higher ACE score = worse health outcomes
IMPACT OF TRAUMA & TRAUMA RESPONSE
INSTITUTIONAL AND SYSTEMIC TRAUMA

National Survey on Children's Health

Black children are more likely to have higher ACE scores compared to White children; and Black children are over-represented among children with 2 or more ACEs.

*Individual-interpersonal racism* is significantly associated with all other ACEs.

<table>
<thead>
<tr>
<th>Race</th>
<th>Kaiser Study</th>
<th>BRFSS ACE Survey</th>
<th>Philadelphia Residents</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>74.8%</td>
<td>75%</td>
<td>38.8%</td>
</tr>
<tr>
<td>Black</td>
<td>4.6%</td>
<td>10%</td>
<td>36.1%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>11.2%</td>
<td>8.5%</td>
<td>11.4%</td>
</tr>
<tr>
<td>Asian</td>
<td>7.2%</td>
<td>5%</td>
<td>6.2%</td>
</tr>
<tr>
<td>Other</td>
<td>1.9%</td>
<td></td>
<td>7.4%</td>
</tr>
<tr>
<td>Not HS Graduate</td>
<td>7.2%</td>
<td></td>
<td>7.4%</td>
</tr>
<tr>
<td>HS Graduate</td>
<td>17.6%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Some College</td>
<td>35.9%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>College</td>
<td>39.3%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Graduate or Higher</td>
<td>39.3%</td>
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Data Source: Felitti, et al. and Centers for Disease Control and Prevention and Nielsen-Clariitas 2013 Pop Facts Database. Prepared by the Research and Evaluation Group at PHMC
INSTITUTIONAL AND SYSTEMIC TRAUMA

The Philadelphia Urban ACES Study also examined the stressors that exist in the communities where people live.

“The prevalence of ACEs in Philadelphia suggests urban communities with disadvantaged populations are at high risk for ACEs and suggests these populations warrant targeted interventions to reduce the impact of ACEs and to prevent ACEs.”
TRAUMA INFORMED APPROACH

- **Realizes** the widespread impact of trauma
- **Recognizes** clients with trauma history have unique challenges (and unique strengths)
- **Responds at every level** and with every encounter by **fully integrating** knowledge about trauma into policies, procedures, and practices
- **Resists** re-traumatization and promotes healing and growth

- Culturally responsive, accessible, and trauma informed approaches are synergetic
FROM TREATERS TO HEALERS
4 E’s of Trauma-Informed Care in Clinical Settings

(Mollard & Hudson, 2016)

**Educate** about prevalence of traumatic experiences, impact on brain development in children, and functioning and health later in life

**Empathize** how trauma has affected patients current health and behaviors; respond compassionately to disclosures

**Explain** how past experiences have affected current life and health; explain in full detail effective healthcare interventions

**Empower** individuals to improve their own health through patient-centered care and shared decision-making strategies
## Core Principles of a Trauma-Informed Culture

<table>
<thead>
<tr>
<th>Principle</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td>Safety</td>
<td>Ensuring physical and emotional safety; “do no harm”</td>
</tr>
<tr>
<td>Trust</td>
<td>Maximizing trustworthiness, making tasks clear, maintaining appropriate boundaries</td>
</tr>
<tr>
<td>Choice</td>
<td>Prioritizing survivor choice and decision-making; supporting survivors’ control over their own healing journey</td>
</tr>
<tr>
<td>Collaboration</td>
<td>Maximizing collaboration and sharing power with survivors</td>
</tr>
<tr>
<td>Empowerment</td>
<td>Identifying strengths, prioritizing building skills that promote survivor healing and growth</td>
</tr>
<tr>
<td>Cultural competence</td>
<td>Ensuring cultural applicability of services and options; sensitivity to the role of culture in lived experience and decision-making</td>
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</tbody>
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Adapted from Proffitt, 2010
How to Support Someone Who Has Experienced Trauma

**Predictability**
Everyone loves surprises! Not. Trauma survivors often prefer predictability because that feels safer.

**Space**
Allow time for the survivor to calm down and take perspective. Trauma survivors often have difficulty regulating emotions and take longer to calm down.

**Perspective**
Be aware when 'past is intruding into present.' Don't take responsibility for what is not yours... gently.

**Recalibration**
Rid 'over-reacting', 'over-sensitive', or 'over'-anything from your vocabulary.

**Attribution**
Don't refer to the person's 'upbringing, problem, issues, behavior.' Call it for what it is - trauma.

**Reciprocity**
Give what you also need to receive: listening, empathy, and empowerment.

**Support**
Be kind, loving, patient... but empathetically set limits - you have needs too!

**Choice**
It can be a big trigger when a survivor is denied choice and control. Confer, collaborate, and cooperate.
## TRAUMA INFORMED APPROACH

<table>
<thead>
<tr>
<th>Traditional Paradigm</th>
<th>Trauma Informed Paradigm</th>
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<tbody>
<tr>
<td>Individuals are sick, ill, or bad</td>
<td>Individuals are hurt and suffering</td>
</tr>
<tr>
<td>Individuals' behaviors are bad/unhealthy and need to be punished/corrected</td>
<td>Individuals behaviors are survival skills developed to live through trauma but are maladaptive in normal society</td>
</tr>
<tr>
<td>Individuals can change behavior if they only had the motivation</td>
<td>Individuals need support, trust, and safety to decrease maladaptive behaviors and develop healthy coping skills</td>
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<tr>
<td>Manage or eliminate individual’s negative behaviors</td>
<td>Provide opportunities for individuals to heal from their trauma and learn new skills</td>
</tr>
<tr>
<td>Staff should come to work every day at their best and perform to leaderships expectations</td>
<td>Leaders need to create strong organizational culture to combat trauma and stress associated with working with traumatized individuals</td>
</tr>
<tr>
<td><strong>Instead of what's wrong with you?</strong></td>
<td><strong>what has happened to you?</strong></td>
</tr>
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DISCUSSION

What are you already doing that’s TI?
What can you do to become more TI?
What questions do you have?
Becoming a trauma informed organization is a long-term, transformative process that takes a thoughtful approach, purposeful planning, and sufficient resources and time.

**Additional Reading, Training, and Learning:**

The Body Keeps Score: Brain, Mind, and Body in the Healing of Trauma
SAMHSA
traumainformedcare.chcs.org
Acesaware.org
REFERENCES


