Trauma Informed Care

Leslie Espinoza – Case Manager, Project Hope Alliance
Sandra Valdes – Case Manager, Project Hope Alliance
Tanya Philip – Case Manager, Project Hope Alliance
Keep Yourself Safe

- Some of us may have our own experiences with trauma
- The content we discuss today may trigger some memories or discomfort
- Please take a moment to prepare yourself
- If at any time you feel overwhelmed or uncomfortable, please feel free to step outside.
- DO WHAT YOU NEED TO TAKE CARE OF YOURSELF!
What is Trauma?

Something that is EXPERIENCED by an individual as harmful or life-threatening and that has lasting adverse effects on their functioning.
Is Homelessness Considered Trauma?

- Actually YES! Homelessness is often considered complex trauma
- Extreme stress that overwhelms the person’s capacity to cope
- Research shows rates of traumatic stress are very high, and may even be normative among those experiencing homelessness. (Hopper et al, 2010)
Over 90% of homeless mothers report having experienced severe physical or sexual assault in their lifetimes.

Even though men make up the majority of the chronically homeless population and are frequently exposed to trauma, homeless men are less likely to receive services than homeless women.

Being homeless is associated with more than three times the risk of sexual assault for women.

86% of homeless youth report exposure to trauma.

Almost 2/3 report exposure to multiple traumatic events.

Homeless youth are at risk for further victimization, such as repeated abuse, exposure to violence and forced prostitution.

Most homeless individuals have been victimized one or more times in their lifetime.

For most, abuse began in early childhood.

Resulting in fractured relationships, which can provide some insight into what led them to homelessness.

Therefore, by definition, individuals experiencing homelessness ARE trauma survivors!

These findings suggest we cannot truly solve the problem of homelessness without addressing the underlying trauma intertwined with the experience of homelessness.
Why be Trauma Informed?

- Trauma can affect how clients access and respond to services
  - Lack of trust, resistance to services, hyper vigilance, etc
  - Help you understand reactions or behaviors of your clients
- Trauma survivors may need specific, tailored services
  - Trauma affects everyone differently – protective factors, age, etc
  - How a provider responds to these needs has an impact on client’s process of recovery
Common Adult Trauma Reactions

- Flashbacks
- Feeling unsafe, out of control
- Hyper alertness
- Use of alcohol or drugs to manage emotional responses
- Difficulty concentrating or remembering things
- Irritability
- Increased need for control
- Risky behaviors
- Numbing to routine activities
- Avoidance
- Insomnia or nightmares
- Muscle tension
- Fatigue
- Racing heartbeat
Common Child Trauma Reactions

- Problems with sleep
- Changes in appetite
- Irritability or anger
- Problems focusing or paying attention
- Obsessive worry
- Difficulty separating from parents
- Regressing to younger stages of behavior
- Bed wetting
- Guilt or shame
- Developing eating disorders or self-harming behaviors
- Early onset experimentation with drugs & alcohol
What does being “Trauma Informed” mean to you?
What is Trauma Informed Care?

A program, organization, or system that:

1. **Realizes** the widespread impact of trauma and understands potential paths for recovery.

2. **Recognizes** the signs and symptoms of trauma in clients, families, staff, and others involved with the system.

3. **Responds** by fully integrating knowledge about trauma into policies, procedures, and practices.

4. Seeks to actively resist re-traumatization or re-victimization.

This differs from Trauma Specific Services (TSS), which are interventions that directly address the trauma and related symptoms:

- Therapy or Counseling
- Trauma-focused CBT
- Seeking Safety
- Medications (anti-depressants, anxiety medications, etc)

Trauma Informed Care (TIC) can be practiced by anyone, in any setting:

- It is a sensitivity to the needs and experiences of clients who have experienced trauma
- It can be the link to, or facilitate TSS
Principles of Trauma Informed Care

- Safety
- Trustworthiness & transparency
- Peer support
- Collaboration
- Empowerment, voice and choice
- Cultural, historical & gender issues
Developing your “Trauma Lenses”

- Trauma Informed Care is really just changing our way of looking at things
- How are we viewing behaviors?
- Moving from “What’s wrong with you?” to “What happened to you?”
- Look for underlying causes of behaviors often looked at as disruptive, non-compliant, defiant, etc.
  - Or is it just a learned coping strategy resulting from past trauma?
What does this look like?

- Above all, DO NO HARM
- Meet client where they are at
- Create Safety
- Be respectful
- Be compassionate
- Be present in the moment
- Be consistent
- Promote agency/choice
- Respect confidentiality
- Maintain healthy boundaries
- Honor client as expert on their own experience
- Inspire hope
<table>
<thead>
<tr>
<th>“Difficult” Behaviors</th>
<th>Common Trauma Reactions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Has difficult getting motivated to get job training, pursue education, or find housing</td>
<td>Depression &amp; diminished interest in everyday activities</td>
</tr>
<tr>
<td>Avoids meetings with staff, emotionally shuts down when faced with traumatic reminders or triggers</td>
<td>Avoidance of traumatic memories or reminders</td>
</tr>
<tr>
<td>Is alert for signs of danger, appears tense and nervous</td>
<td>Hyper-alertness or hyper vigilance</td>
</tr>
<tr>
<td>Cuts off from family, friends, and other sources or support</td>
<td>Feelings of shame and self blame</td>
</tr>
<tr>
<td>Complains system is unfair, that they are being targeted or unfairly blamed</td>
<td>Loss of sense of order or fairness in the world</td>
</tr>
<tr>
<td>Remains in abusive relationships, or are victimized repeatedly</td>
<td>Revictimization, impaired ability to identify danger signs</td>
</tr>
</tbody>
</table>
Some tips for providers...

- Avoid jargon and other complicated language
- Write down instructions or information
- Be genuine – don’t try to be cooler than you are
- Normalize their experience
- Minimize distractions
- Encourage activities that are self soothing
- Promote self sufficiency & self help as much as possible
Vicarious Trauma

- Working with clients who have experienced trauma can also affect service providers.
- Can affect your personal life and well-being.
- Can affect how you serve your clients.
Symptoms of VT

- Emotional numbing
- Social withdrawal
- Work related nightmares
- Reduced productivity
- Loss of sense of control over your life/work
Don’t forget about yourself!

- Trauma informed best practice includes the self-care of the service provider!
  - You cannot serve from an empty cup
- What are some things you do for self care?
- Remember: self care is not always pretty!
What can you do now?

- Bring what you learned here back to your organization
- Seek out & attend training and educate yourself and your staff.
- Help create new policies & procedures that are trauma-informed
- Discuss non-TIC moments
- Facilitate the change – you can begin the culture shift! We are more powerful together, as a community!
If you want to know more...

- **Trauma Informed Organizational Toolkit for Homeless Services**
  - The Self-Assessment is designed to help programs evaluate their practices and based on their findings, adapt their programming to support recovery and healing among their clients.

- **ACES questionnaire**
  - [www.aces tooohigh.com/got-your-ace-score/](http://www.aces tooohigh.com/got-your-ace-score/)

- **National Child Traumatic Stress Network**
  - [www.nctsn.org](http://www.nctsn.org)

- **ProQOL Self Survey (Compassion Fatigue assessment)**
  - [www.proqol.org/ProQol_Te st.html](http://www.proqol.org/ProQol_Te st.html)
Questions?
References


