

Doing Trauma Informed Work:

What it means for assisters and care providers

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CoverCO 2020 Conference
Plenary Session
October 8, 2020
1:00 pm to 2:00 pm



A PARTNER IN
NCTSN



The National Child
Traumatic Stress Network

IDD Trauma Toolkit

The Road to Recovery: Supporting
Children with Intellectual Disabilities Who
Have Experienced Trauma

Facts on Traumatic Stress and Children With
Developmental Disabilities

<http://www.nctsnet.org>

Impact of ACEs and Adoption of Trauma-Informed Approaches in Healthcare Settings

Linda Ligenza, LCSW, CIHS, National Council

Karen Johnson, LCSW, Trauma Services, National Council

Patricia Gerrity, PhD, R.N., F.A.A.N.

Stephen and Sandra Sheller 11th Street Health Center

SAMHSA-HRSA

Center for Integrated Health Solutions

April 18, 2018

Integration.samhsa.gov

HRSA
Health Resources & Services Administration



SAMHSA
Substance Abuse and Mental Health Services Administration


Prevalence of Mental Illness

	Women	Men	Both
Any Anxiety Disorder	23.4%	14.3%	19.1%
Any Mood Disorder	11.6%	7.7%	9.7%
Any Impulse-Control Disorder	9.3%	11.7%	10.5%
Any Substance Disorder	11.6%	15.4%	13.4%
Any Disorder	34.7%	29.9%	32.4%

We have nearly **1 in 3 Americans** who are suffering from a mental disorder in any given year, or *over 75 million people*.


Behind the Numbers

Let's break down the rates by category, as the NCS-R does:



Why do our clients lose emotional control?

- Psychiatric Diagnosis
 - Mood Disorders
 - Depression
 - Anxiety
 - Bi-Polar Disorder
 - Psychotic Disorders
 - Confusion and fear
 - Delusional thinking
 - Paranoia



Why do our clients lose emotional control?

- Personality Disorders
 - Borderline Personality Disorder
 - Lack of distress tolerance
 - Impulsivity
 - Emotional dysregulation
 - Interpersonal and social skill deficits
- Post Traumatic Stress Disorder
 - Flashback and triggers
 - Emotional dysregulation
 - Hyper vigilance

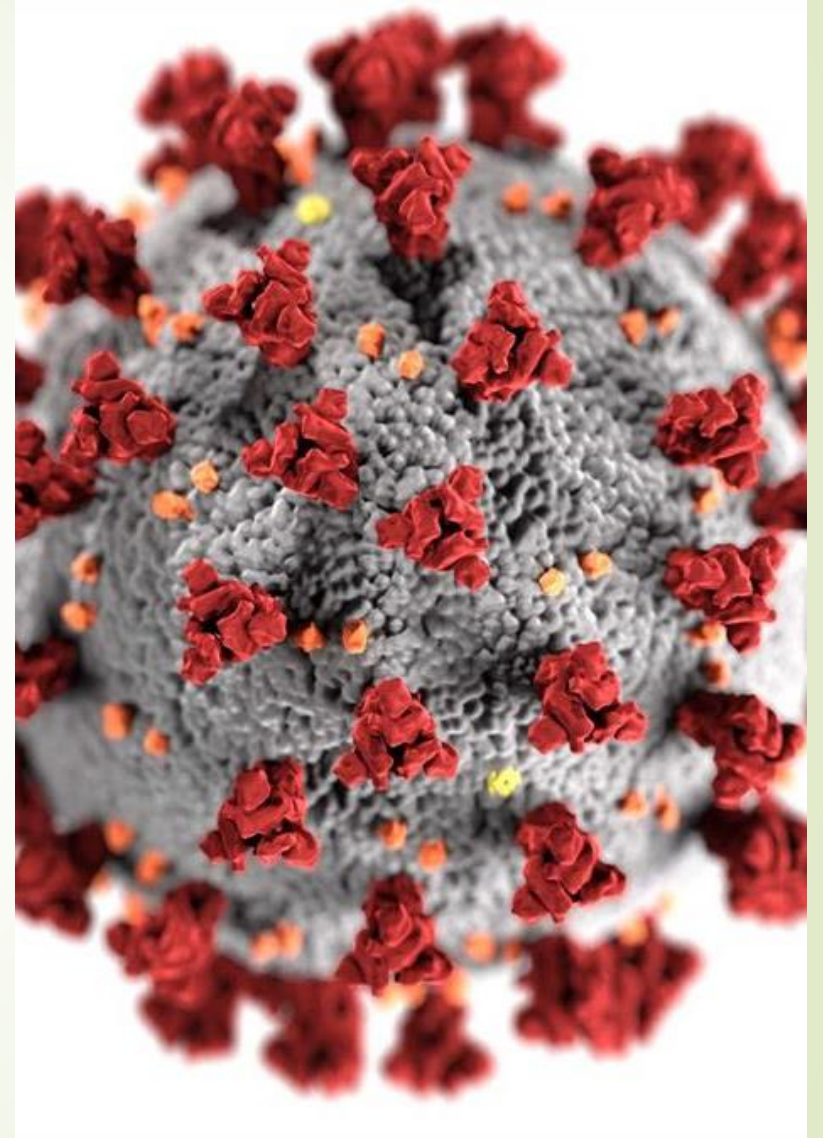
Why do our clients lose emotional control?


- ▶ Clients are often requesting help in times of stressful transition
 - ▶ Coping with grief & loss
 - ▶ Death
 - ▶ Divorce
 - ▶ Loss of a job
 - ▶ Feelings of loss of control
 - ▶ Experiencing large amounts of **STRESS**



COVID-19 Pandemic Stress Effects

- Unemployment related financial stress & loss of benefits
- Social isolation and low social support and loneliness
- Feelings of not being safe
- Increased caregiving demands
- Political conflict





Why do our clients lose emotional control?

- No matter what a person's diagnosis, there is a predisposition for:
 - Low frustration tolerance
 - Difficulty regulating mood and behavioral self-control
 - Problems with problem solving and Impulsive behavior
 - Low self-esteem and negative self image

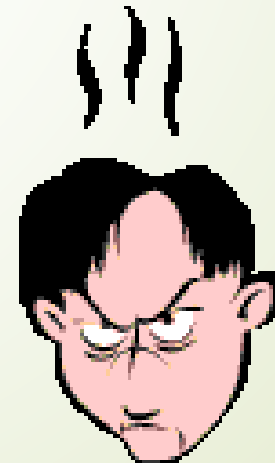
Nature & Purpose of Aggressive Behavior

- Natural fight or flight response
 - Emotion increases, cognition decreases
 - Heart rate increases
 - Blood pressure rises
 - Muscles tense
 - Facial changes
 - Pupils dilate
 - Nostrils flare



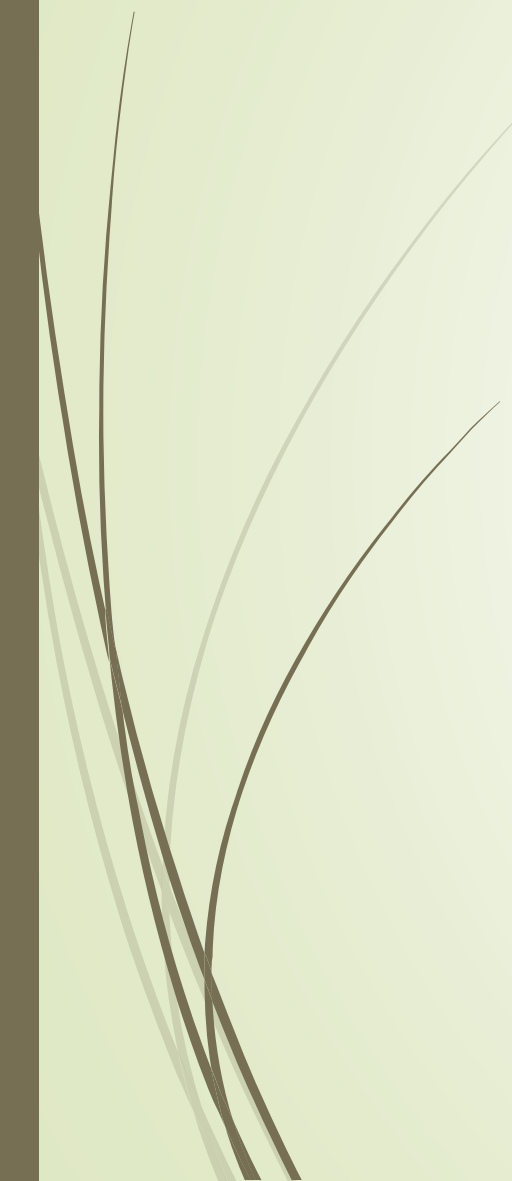
Nature & Purpose of Aggressive Behavior

- ▶ When feeling hopeless, people are not patient to problem solve
- ▶ As affect rises, cognition decreases
- ▶ When you are not getting what you want, hostility is a GREAT last resort
 - ▶ Endorphins mask pain
 - ▶ Aggression takes control of the immediate environment (regardless of long-term negative consequences).



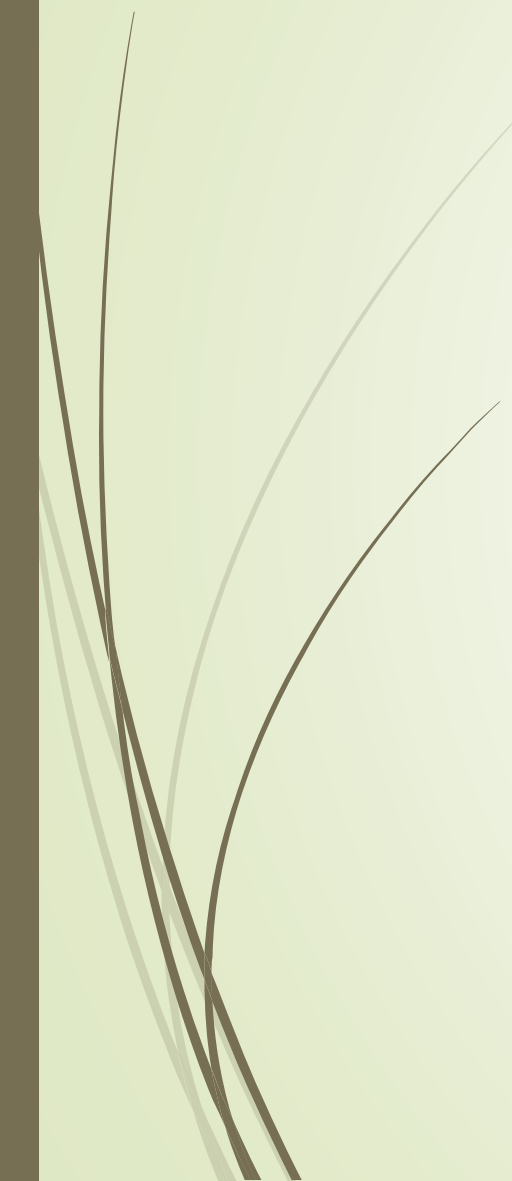


Why is Understanding Trauma Particularly Important?

- Many current conditions may be related to traumatic life experiences
 - People who have experienced traumatic life events are often very sensitive to reminders of the original event
 - These reminders or triggers may cause a person to relive the trauma and view our setting/organization as a source of distress rather than a place of healing and wellness
- 



What is Trauma? SAMHSA's Concept of Trauma: "3 Es"



"Individual trauma results from an **event**, series of events, or set of circumstances that is **experienced** by an individual as physically or emotionally harmful or life threatening and that has lasting adverse **effects** on the individual's functioning and mental, physical, social, emotional, or spiritual well-being."

Types of Trauma



Historical Trauma

“Cumulative emotional and psychological wounding, over the lifespan and across generations, emanating from massive group trauma experiences.”

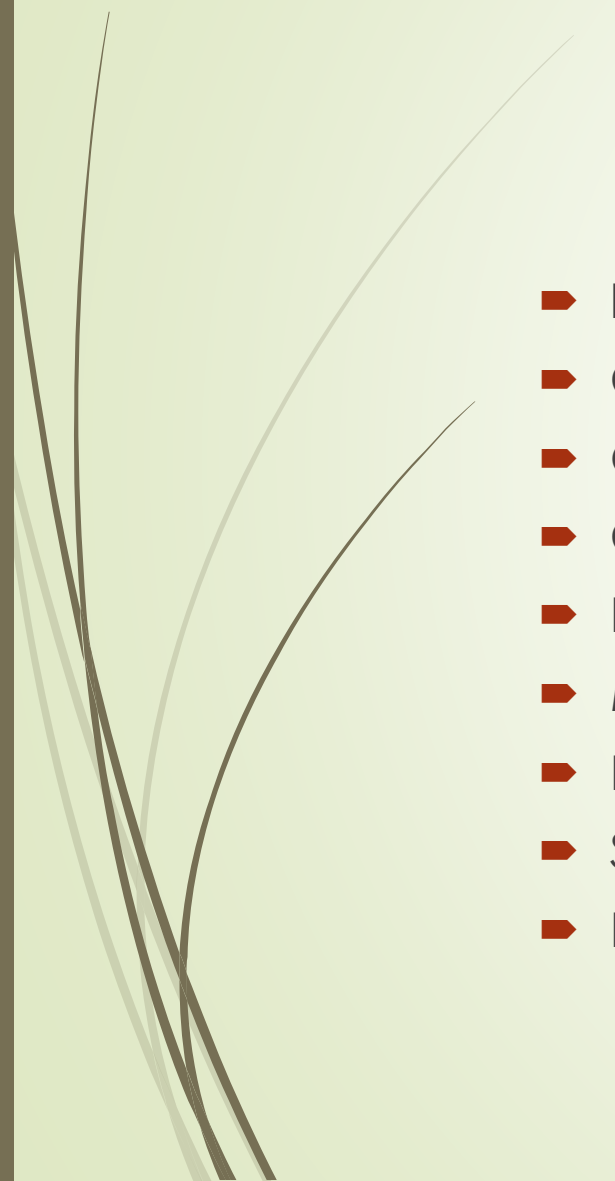
Yellow Horse Brave Heart, 2003
Rethinking Historical Trauma:
Narratives of Resilience
Aaron R. Denham, 2008



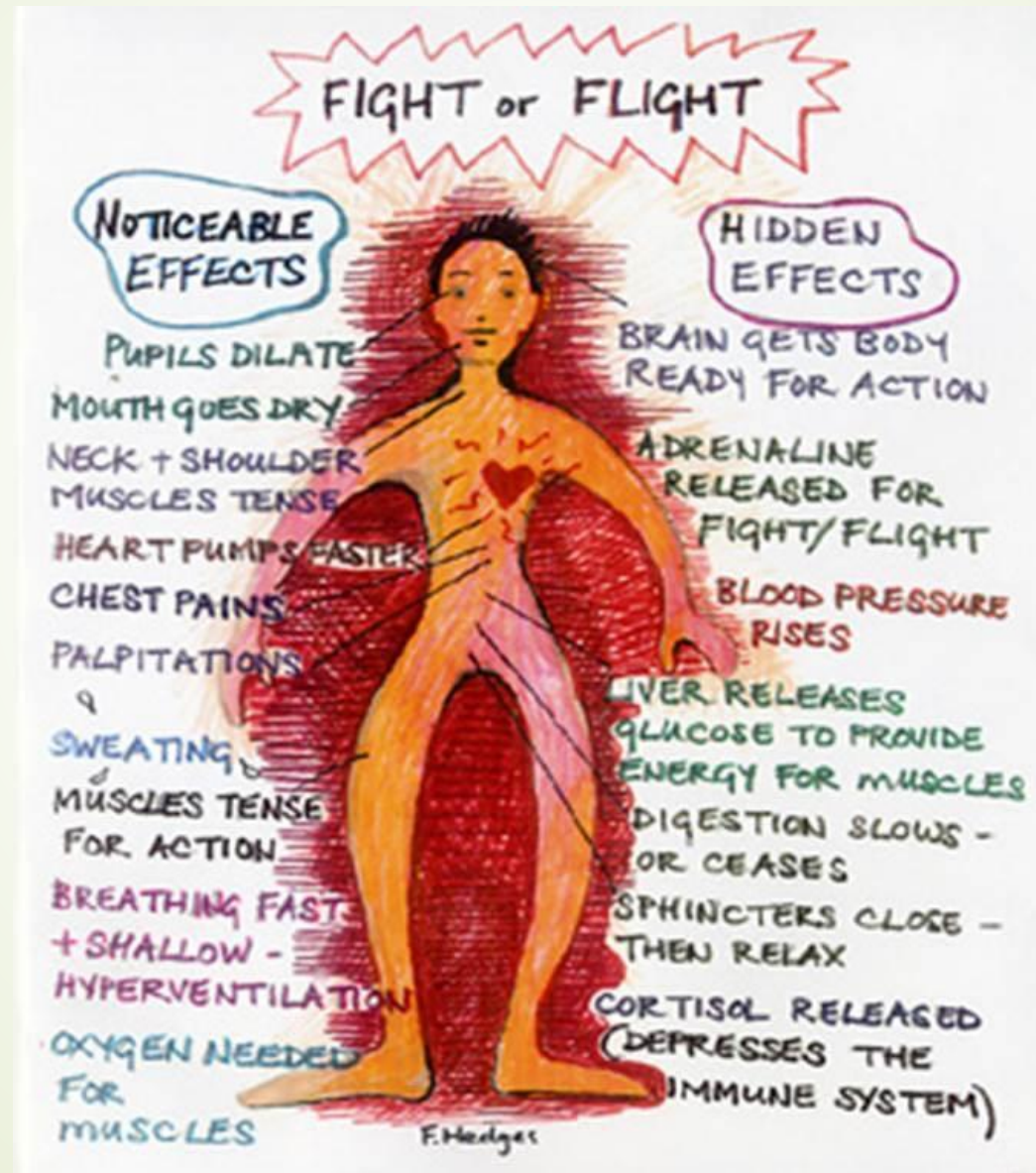
Historical Trauma and Cultural Healing, University of Minnesota Extension:
<https://extension.umn.edu/mental-health/historical-trauma-and-cultural-healing>



Common Signs of Trauma

- 
- Isolating behaviors
 - Confusion, difficulty concentrating
 - Quick to react to situations
 - Canceling or not keeping appointments
 - Frequent visits to the ED
 - Multiple medical and/or psychiatric diagnoses
 - Diagnoses with no clear etiologies
 - Suicidal behaviors
 - Diagnoses of ADHD in children and Borderline in adults

Trauma's Impact on the Body



Trauma Shapes Our Beliefs



Worldview

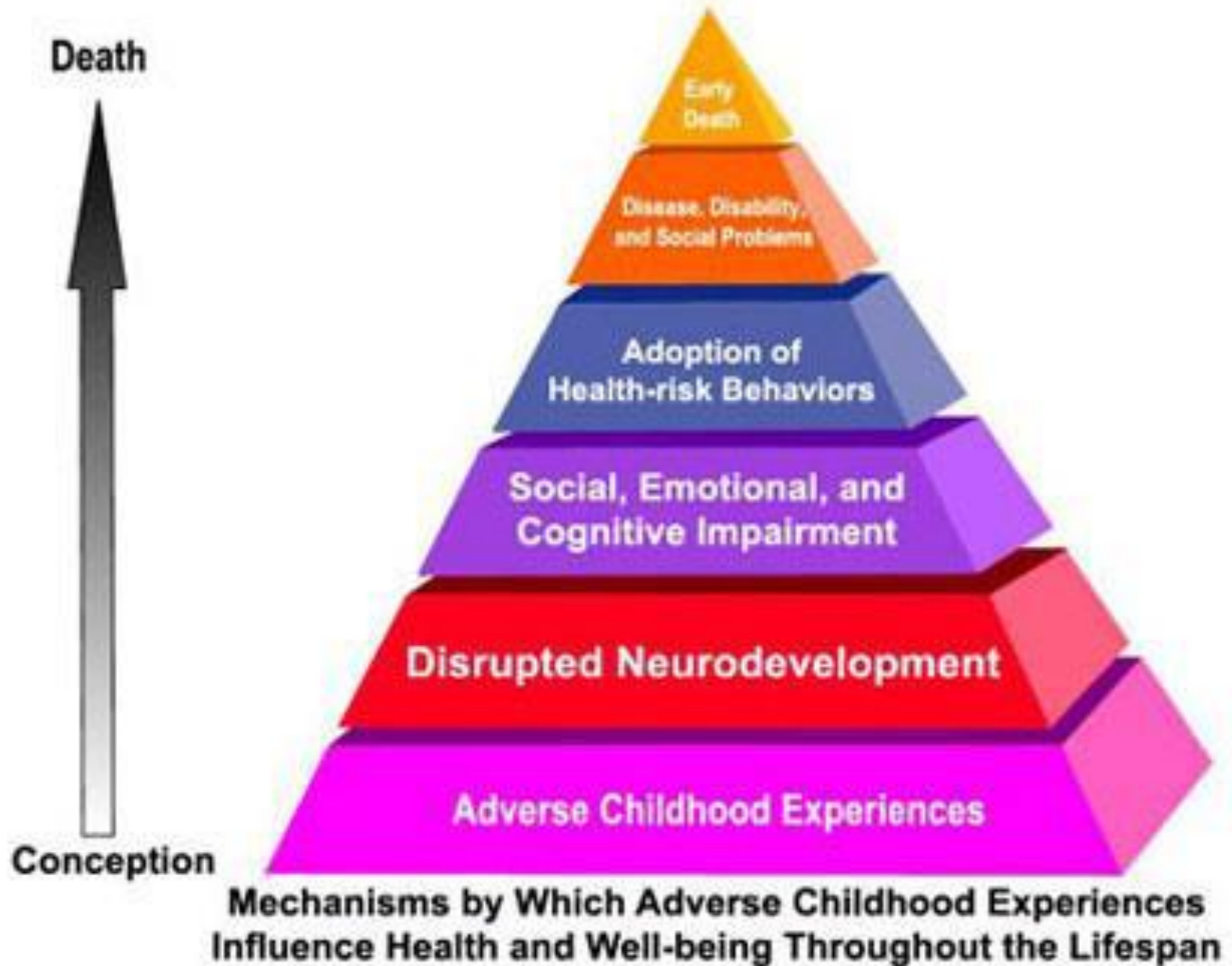


Identity



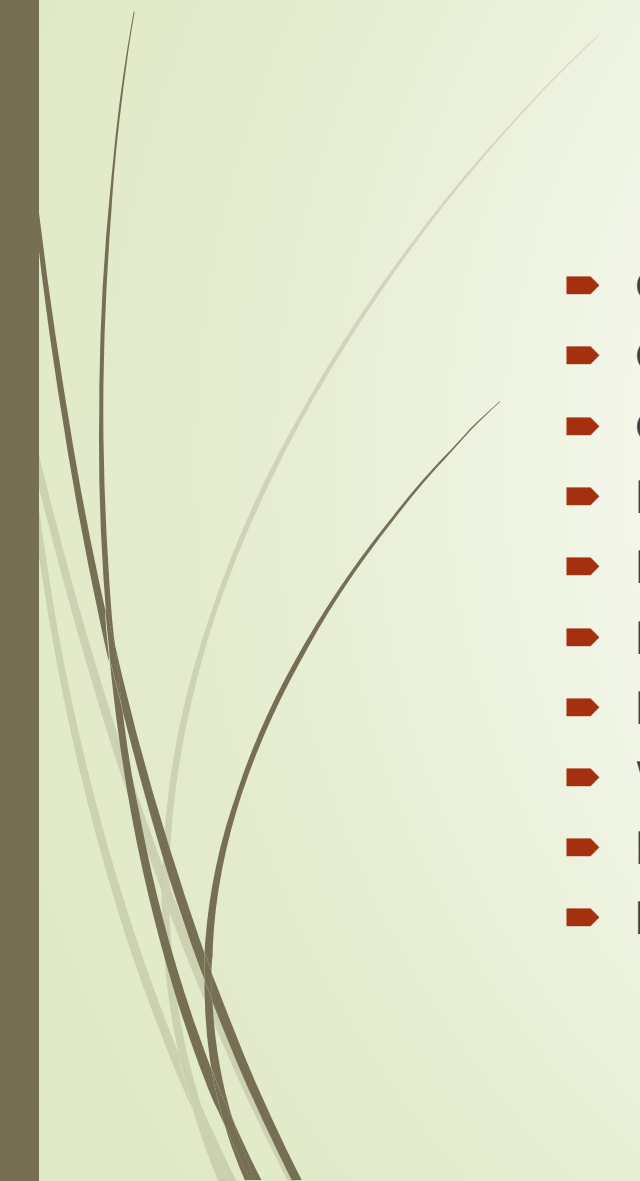
Spirituality

The ACES Study





Adverse Childhood Experience

- 
- Child physical abuse
 - Child sexual abuse
 - Child emotional abuse
 - Physical neglect
 - Emotional neglect
 - Household mental illness
 - Household substance use
 - Witnessing domestic violence against the mother
 - Loss of a parent to death or abandonment, including abandonment by divorce
 - Incarceration of any family member



ACES Study Findings



- Over 17,000 adults studied from 1995-1997
- Almost 2/3 of participants reported at least one ACE
- Over 1/5 reported three or more ACEs, including abuse, neglect, and other types of childhood trauma
- Major links identified between early childhood trauma and long term health outcomes, including increased risk of many chronic illnesses and early death



Life-Long Physical, Mental and Behavioral Outcomes Linked to ACEs

- Alcohol, tobacco, and other drug addiction
- Auto-immune disease
- Chronic obstructive pulmonary disease and ischemic heart disease
- Depression, anxiety, and other mental illness
- Diabetes
- Fetal death
- High risk sexual activity, STDs, and unintended pregnancy
- Intimate partner violence—perpetration and victimization
- Lung cancer
- Liver disease
- Obesity
- Multiple divorces
- Skeletal fractures
- Suicide attempts
- Work problems—including absenteeism, productivity, and on-the-job injury
- **Self-regulation & anger management problems**



ACES Findings

“You are just as likely to develop heart disease from an ACE as you are from high blood pressure, high cholesterol or family history”

Vince Felitti, MD
Co-Principal Investigator





Trauma-informed Approaches in Primary Care

- Minimizes reaction to triggers
- Improves adherence to treatment and use or overuse of services
- Helps people understand how trauma impacts their current health
- Connects people with appropriate services and resources

It's good medicine!
Trauma-informed Care is
Now the **EXPECTATION, NOT the Exception!**



What is a Trauma-informed Approach?

A trauma-informed program, organization, or system (4 Rs):
From SAMHSA's Concept Paper

Realizes

Realizes widespread impact of trauma and understands potential paths for recovery

Recognizes

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

Responds

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

Resists

Seeks to actively resist re-traumatization

What is a Trauma-informed Approach?



Engage in Sensitive Practices

- Be respectful
- Take time
- Build rapport
- Share information
- Share control
- Respect boundaries
- Foster mutual learning
- Understand non-linear healing
- Demonstrate awareness and knowledge of trauma



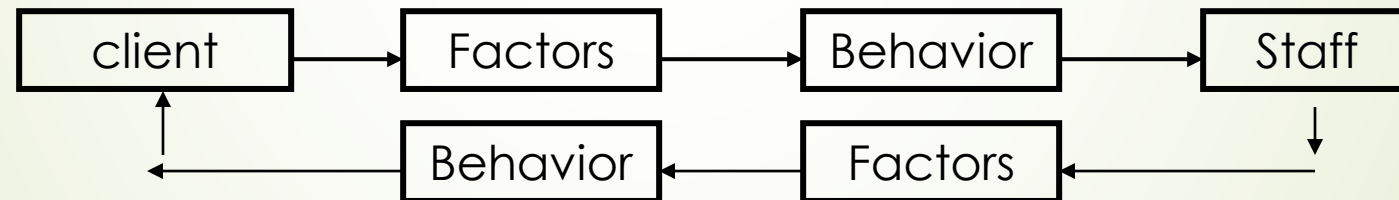
What is your role?

- ▀ Your responsibility working in a public setting
 - ▀ Working with various teams
 - ▀ Helping and assisting individuals/families with their problems
 - ▀ First line of contact with clients
 - ▀ Not IF you will encounter anger, but WHEN you encounter anger
 - ▀ Avoid the “not my job” mentality

Important Concepts

Integrated Experience

- The concept that behaviors and attitudes of staff impact behaviors and attitudes of individuals, and vice versa.





Attitude and Internal Dialogue

- Understanding and attitude is everything
 - Resilience to stressful situations
 - Putting this job duty in perspective
 - Not being caught off guard
 - Your ability to appropriately “laugh it off”
 - The stuff that makes up your self-confidence and self-control



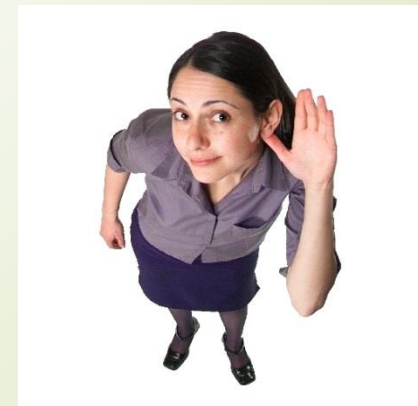
Anger Management Skills

- Quit Taking It Personally (QTIP)
 - Anger is directed at the situation you represent, not you
 - If you take the situation personally, you will react in a way that can create a dangerous situation

Anger Management Skills

➤ Listen Carefully

- Even if you are personally attacked, allow them to express their anger before responding
- Listen to details for understanding their perspective
- You do not have to take abuse, but communicate this in a calm, empathic way





Anger Management Skills

- **Acknowledge** the anger
 - Let the person know that you recognize how they feel
 - Validate their feelings
 - Don't focus on distortions
 - If you dismiss their anger, they will definitely escalate in order to be understood



Anger Management Skills

- **Maintain** an open outlook
 - Don't jump to conclusions
 - Don't let your "stuff" become part of the problem
 - Continue to strive for a win-win situation



Anger Management Skills

- ▶ Help the person “save face” when they start to calm
 - ▶ People who lose control feel guilt or shame
 - ▶ Your empathic response to this will help the person calm and work towards what you want

Anger Management Skills

- ▀ Your self-control
 - ▀ Keep voice low and calm
 - ▀ Do not take a condescending tone
 - ▀ Non verbal is most important
 - ▀ Open stance
 - ▀ Eye contact
 - ▀ Continue to listen
 - ▀ Model how you want them to act
- ▀ Your escalation = their escalation





Anger Management Skills

- Don't express your personal judgment about what should or should not make a person angry
 - Being perceived as condescending will increase feelings of being misunderstood
 - Subjective reality
 - We all perceive situations differently
 - Remain empathic and try to understand their reality



Anger Management Skills

- Support the person as their anger decreases
 - You don't have to agree with them
 - Good time to acknowledge their feelings of frustration and anger
 - Your goal is de-escalation, not necessarily solving the problem

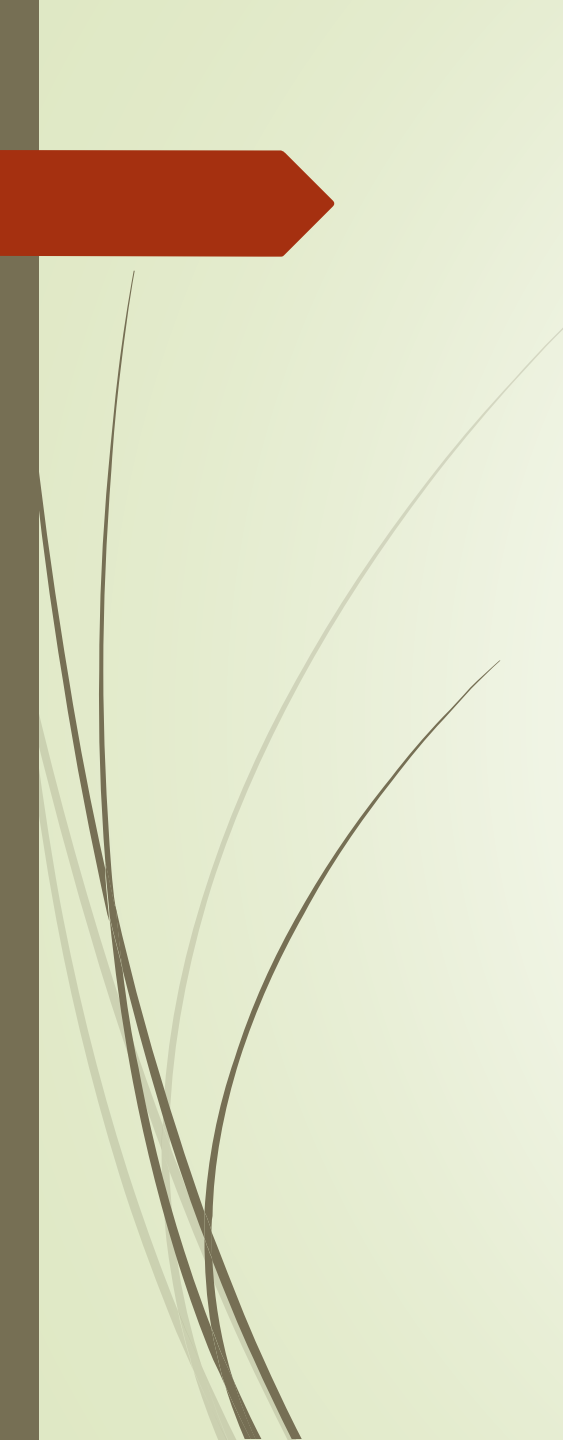




Four Terms Related to Caregiver Stress

- Vicarious traumatization
- Compassion fatigue
- Burnout
- Secondary traumatic stress

closely related terms which capture different aspects of the stress associated with helping professions



Compassion fatigue is “an extreme state of tension and preoccupation with the suffering of those being helped...The helper...suffers through their own efforts to empathize and be compassionate. Often, this leads to poor self care... extreme self sacrifice..and symptoms similar to PTSD”

Charles Figley, Ph.D.

Examples of Compassion Fatigue Symptoms (Pelkowitz, 1997)

Cognitive

- **Decreased concentration**
- **Apathy, rigidity**
- **Perfectionism**

Behavioral

- **Hypervigilance**
- **Social withdrawal**
- **Expressed anger**

Emotional

- **Anxiety**
- **Numbing**
- **Depletion**

Spiritual

- **Loss of faith**
- **Anger at God**
- **Meaning of life and work?**

Examples of Compassion Fatigue Symptoms (Pelkowitz, 1997)

Personal relations

- **Decreased intimacy/sex**
- **Intolerance, loneliness**
- **Parental overprotection**

Somatic

- **Hyperarousal**
- **Reduced immunity**
- **Aches, pains, medical problems**

Work performance

- **Low morale**
- **Detachment**
- **Fatigue**
- **Obsession with details**
- **Negativity**
- **Absenteeism**

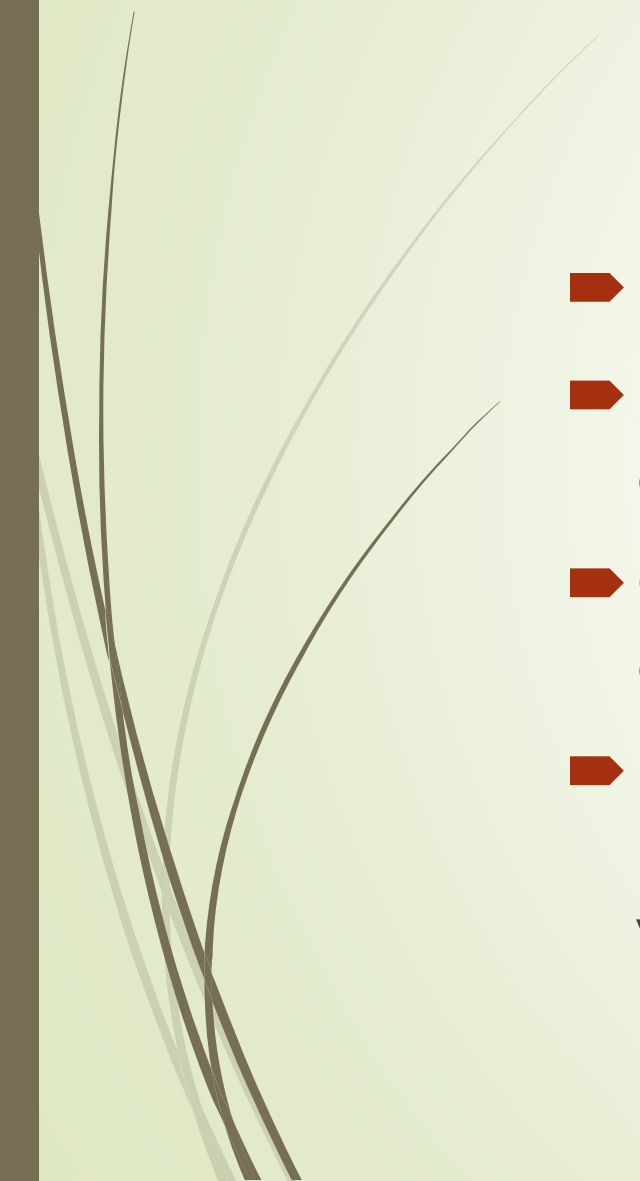


Rational Detachment (CPI)

- “The ability of staff to maintain control of their own behavior in the presence of acting-out behavior
(Crisis Prevention Institute)
- Ones ability to rationally and objectively consider all of the factors that lead to dysregulation in order to emotionally detach from the situation, regulate one's self, and manage crisis effectively
(Brian Tallant)



Secondary Traumatic Stress Reactions

- Reactions are highly individualized
 - May involve symptoms seen in trauma survivors or variants of these
 - Caregivers are affected, but not enough to constitute a “disorder”
 - May encompass cognitive, emotional, behavioral, spiritual, relational, somatic, and work performance domains (Pelkowitz, 1997)
- 

A Continuum of Secondary Traumatic Stress Responses

(Stamm, 1999)





Personal Risk Factors for STS Reactions

- History of personal trauma
- Identification with victim
- Immediate stressors on employee
- Low social support
- Low sense of control

(Baird & Kracen, 2006; Nelson-Gardness & Harris, 2003, Regehr et al., 2004)

University of Iowa:

<http://www.uiowa.edu/~nrcfcp/training/documents/PPT%20Secondary%20Trauma.pdf>



Work-Related Factors

- Early in career/inexperience on the job
- High exposure to client trauma information
- Lack of supervision
- Exposure to critical incidents

(Baird & Kracen, 2006; Nelson-Gardness & Harris, 2003, Regehr et al., 2004)

University of Iowa:

<http://www.uiowa.edu/~nrcfcp/training/documents/PPT%20Secondary%20Trauma.pdf>



Organizational Factors



- Unusually high caseloads
- High administrative burden
- Conflicts w/co-workers or supervisors
- Climate of constant change
- Excessive emphasis on cost-effectiveness, competition
- Unforgiving environment (“If you can’t handle it, leave”)

(O’Brien, 2006; Regehr et al., 2004)

University of Iowa: <http://www.uiowa.edu/~nrcfcp/training/documents/PPT%20Secondary%20Trauma.pdf>



"My question is: Are we making an impact?"



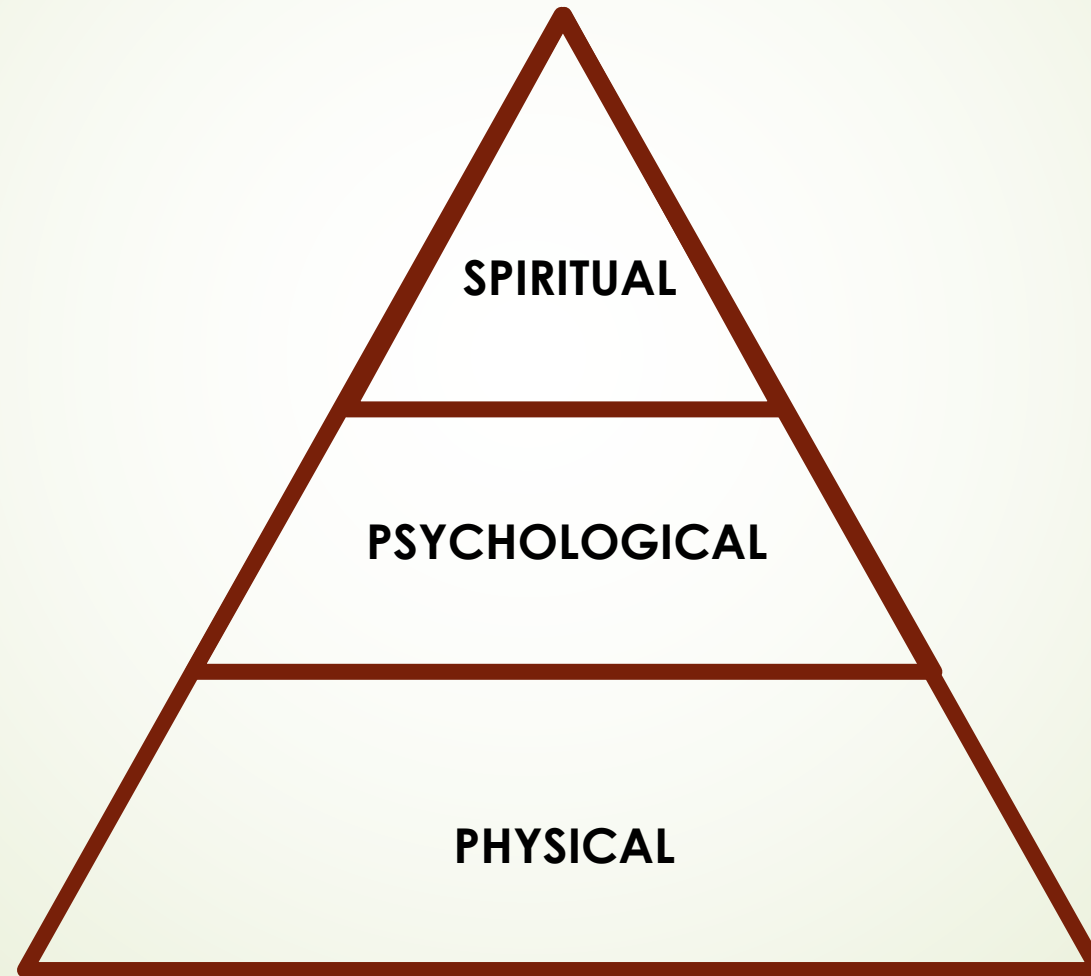
Compassion satisfaction often helps people cope with compassion fatigue, secondary stress and burnout. It is the satisfaction we feel from helping others.



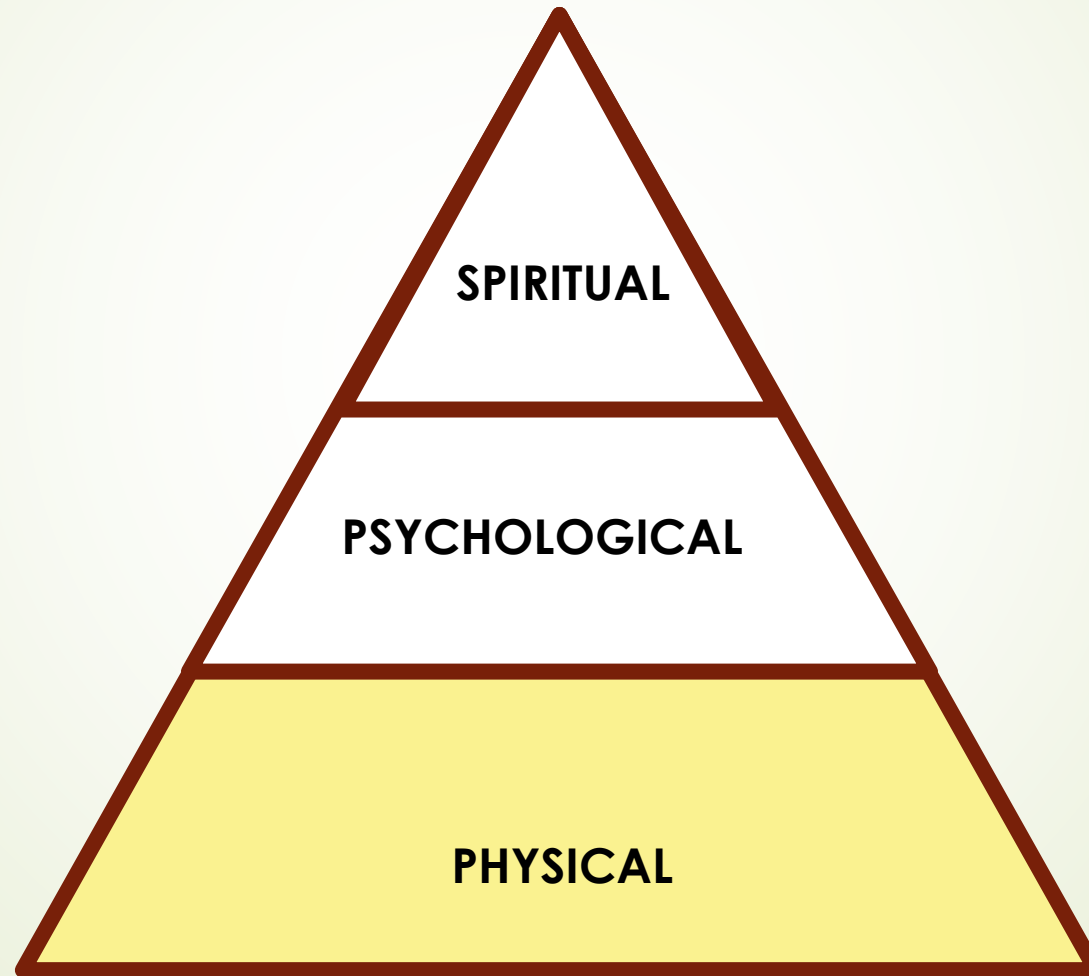
When on an airplane, the flight attendants tell you that in case of an emergency, oxygen masks will drop from the overhead compartments. They ask that you put your own mask on first before helping others.

Caregivers face the oxygen mask dilemma daily. Putting the mask on someone else first means you are sacrifice your own needs and put yourself at risk for anxiety, frustration, stress, depression, and health issues.

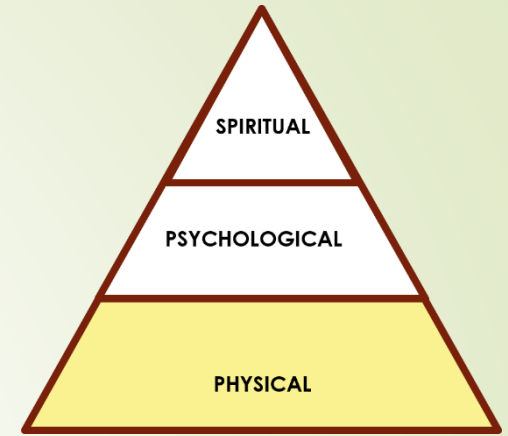
Levels of Resilience



Physical Resilience

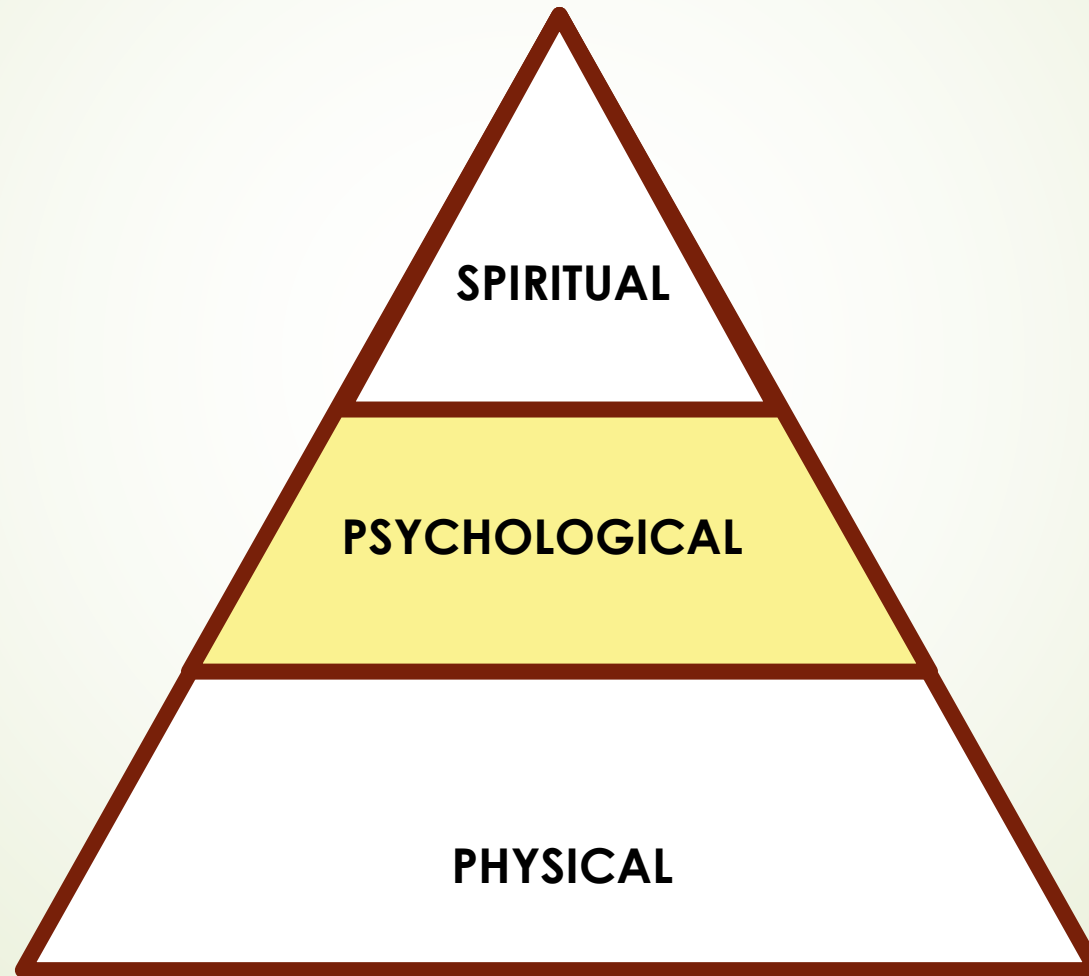


Physical Resilience



- Getting medical treatment when needed
- Maintain a reasonably healthy diet
- Getting adequate sleep
- Limiting toxins to a reasonable level
- Routine purposeful movement of your body

Psychological Resilience



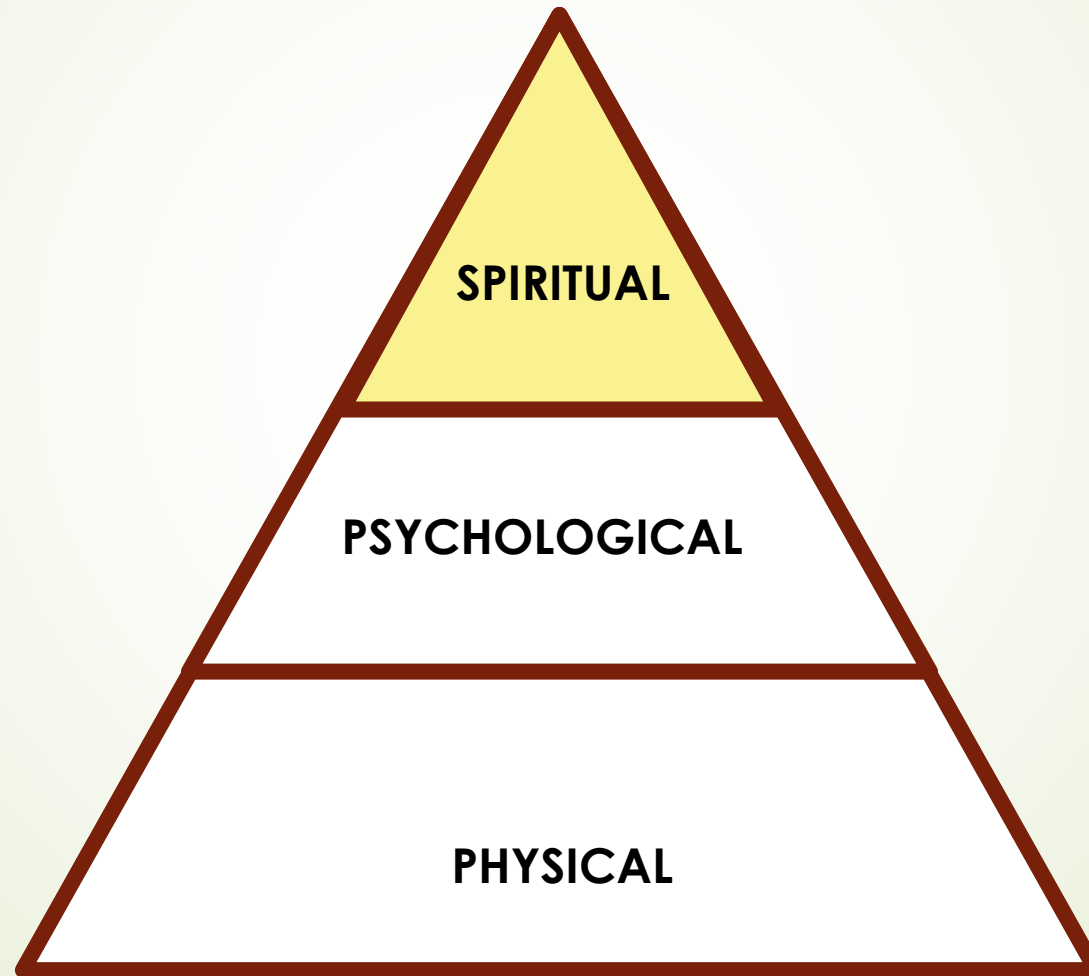


Psychological Resilience



- Developing and utilizing healthy relationships in your life
- Getting psychological help when you need it
- Journaling
- Positive reframing and self-talk
- Soothing sensory experiences
- Taking purposeful time-off
- Creative Arts and Expression
- Mindfulness, Relaxation & Meditation

Spiritual Resilience



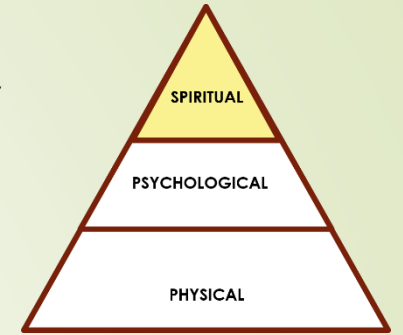
Spiritual Resilience



“With spiritual self-care, one size does not fit all. Nor do the benefits. Taking care of your spiritual side can mean being more connected to the present moment, aware of what is important and what is not so important in life, connected to other people in a meaningful way, being guided by God, or a Higher Power. Basically, being connected to a greater meaning and purpose in life. “
(2015 Dr. Gary R. McClain PhD)

“Every single world philosophy and religion has something to say about pain and suffering.”

Belonging to a spiritual community



Open your definition of Spiritual Community. You probably already belong to groups of people of whom you share a common human experience. These are your spiritual communities.

“Wherever two or more are gathered... Joining a church, synagogue, temple, or other spiritual community brings you into contact with people who share your spiritual values, who can help you to deepen your day-to-day experience of spirituality and provide emotional support.”



Embracing compassion

- Accept yourself for who you are
- Celebrate your personal strengths as well as all the evidence that you are human and not superhuman.
- And then do the same for the other people in your life. Replace judgment with acceptance. Remind yourself: we are all in this world together.



Framework for STS management

■ Prevention activities

- (World view: guilt/responsibility issues, personal safety, resolving one's own traumas, etc.
Health behaviors: Sleep, nutrition, exercise, alcohol/substances)

■ Soothing activities

- (Meditation, guided imagery, pleasure reading, yoga, reflection, hot baths, etc.)

■ Discharge activities

- (Exercise, griefwork, massage, music, body therapies, art, yelling at hockey games, etc.)



Framework for STS management

➤ Professional support activities

- (Supervision, training, reading, consultation, debriefing, caseload management, connecting with co-workers around + aspects of work, etc.)

➤ Social support activities

- (Friendships, socializing, family support, emotional support, instrumental support, etc.)

➤ Inspiration/re-charging activities

- (Spirituality, time w/children, vacation, time in nature, etc.)



Compassion Satisfaction



Savor the good you do,
that counters the pain that has been caused