

Understanding Trauma, Resilience and Trauma-Informed Care

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Penn Medicine
Lancaster General Health



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Building Trauma-Informed Organizations**

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Learning Objectives

- 1) Discuss why its important to learn about trauma
- 2) Define trauma
- 3) Describe events that individuals may experience as traumatic
- 4) Describe how individuals might experience effects of trauma throughout life
- 5) Describe how trauma relates to physical health as well as social and emotional health
- 6) Describe how traumatic experiences in childhood may affect physical and neurological development
- 7) List examples of risk factors and protective/resilience factors that can result in different individual responses to traumatic events
- 8) List and describe ways in which community agencies and organizations may re-traumatize the people they are intended to serve
- 9) Identify potential causes and indicators of vicarious or secondary trauma among staff
- 10) List examples of effective self-care practices for professionals working with people with trauma histories
- 11) Discuss how organizations can improve policies and procedures to make them trauma-informed

Selected Sources

- ACES Connection <https://www.acesconnection.com/>
- Alberta Family Wellness Initiative (AFWI) <http://www.albertafamilywellness.org>
- Buffalo Center for Social Research – The Institute on Trauma and Trauma-Informed Care <https://socialwork.buffalo.edu/social-research/institutes-centers/institute-on-trauma-and-trauma-informed-care/>
- Center for HealthCare Strategies, Inc <https://www.chcs.org/>
- Centers for Disease Control (CDC) www.cdc.gov
- Capacitar International: www.Capacitar.org
- ECHO: <https://www.echotraining.org/>
- Harvard Center on the Developing Child <https://developingchild.harvard.edu/>
- Health Insight National Nursing Home Quality Care Collaborative HealthInsight.org
- HelpGuideOrg International: www.HelpGuide.org
- National Center on Safe Supportive Learning Environments: Trauma-Sensitive Schools Training Package <https://traumasensitiveschools.org/>
- Resilience for All Ages: <https://www.leadingagemaryland.org/page/RFA-resources>
- Strategies for Trauma Awareness & Resilience: Eastern Mennonite University <https://www.emu.edu/cjp/star/>
- Substance Abuse & Mental Health Services Administration (SAMHSA) GAINS Center for Behavioral Health/Justice Transformation <https://www.samhsa.gov/trauma-violence>
- Trauma-Informed Oregon <https://traumainformedoregon.org/>

MODULE 1

What is Trauma and Why Does It Matter?

Why learn about trauma and resilience?

Definition of Trauma

Types of Trauma

Adverse Childhood Experiences (ACEs)

Impacts of Trauma

Why learn about trauma and resilience?

- ◆ Trauma is common across all demographics
 - ◆ Not only about people our organizations serve
 - ◆ it's about ***all of us*** as well
- ◆ Trauma is pervasive
- ◆ Trauma's impact is broad, deep and life-shaping
- ◆ Trauma affects people in different ways
- ◆ Trauma affects how people approach services

Why learn about trauma and resilience?

- ◆ Systems and organizations that serve individuals and families may inadvertently / unknowingly trigger or re-traumatize people, including organization staff.
- ◆ Understanding trauma and its impacts can help us to:
 - make sense out of people's behavior
 - avoid re-traumatizing
 - respond in ways that promote resilience & healing
 - improve policies, procedures & physical environment

Trauma among helping professionals

- ◆ 41% of **teachers** leave the profession within 5 years of starting (Ingersoll, Merrill, and Stuckey, 2014)
- ◆ 65% of **social workers** had at least one symptom of secondary traumatic stress (Bride, 2007)
- ◆ 26% of **criminal justice professionals** had moderate to severe depression (3x higher than US genl pop) and 17% had both depression and PTSD (Denhof & Spinaris, 2011)
- ◆ 79% of **nurses** had moderate to high rates of compassion fatigue (Abendroth & Flannery, 2006)

Key Insight



“The expectation that we can be immersed in suffering and loss daily and not be touched by it is as unrealistic as expecting to be able to walk through water without getting wet.”

(Remen, 2006)

Self Care

- Good self care is NOT selfish
- It is our professional and ethical responsibility
- Daily practices to re-charge our physical, emotional, relational and spiritual “batteries”



What is Trauma?

“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 threatening

and that has lasting adverse EFFECTS on the individual’s functioning and physical, social, emotional or spiritual well-being.”

SAMHSA GAINS Center for Behavioral Health/Justice Transformation

What could cause trauma?

- ◆ **An event may be traumatic if:**
 - ◆ It happened unexpectedly
 - ◆ You were unprepared for it
 - ◆ You felt powerless to prevent it
 - ◆ It happened repeatedly
 - ◆ Someone was intentionally cruel
 - ◆ It happened in childhood

helpguide.org - Emotional and Psychological Trauma:
Symptoms, Treatment and Recovery

Trauma may result from...

- ◆ a SINGLE, ONE-TIME EVENT
- ◆ REPEATED stressful or harmful EVENTS
- ◆ Stressful or harmful LIVING CONDITIONS/
CIRCUMSTANCES

***The effects of traumatic events
may continue for years, even decades,
after the trauma occurred***

ACTIVITY – Traumatic Events

- ◆ PAUSE the training
- ◆ Go to the Participant Worksheet for this activity and complete it
- ◆ When ready, press PLAY to continue the training

Examples of traumatic events

- ◆ Physical, emotional, or sexual abuse
- ◆ A crime or other violation committed against you
- ◆ Physical or emotional neglect
- ◆ War and combat experiences
- ◆ Refugee and immigrant experiences
- ◆ Outbursts of temper and rage or violence
- ◆ Alcoholism or addiction (your own or in your family)
- ◆ Physical illnesses, surgeries, disabilities (yours or loved ones)
- ◆ Loss of close family members and friends
- ◆ Natural disasters (flood, tornado, hurricane, earthquake)
- ◆ Accidents
- ◆ Living circumstances: poverty, hunger, homelessness
- ◆ Secondary or vicarious trauma
- ◆ Historical or racial trauma
- ◆ Pandemics

Historical Trauma

“The cumulative emotional and psychological wounding across generations, including the lifespan, which emanates from massive group trauma”

~ Maria Yellow Horse Brave Heart

Groups that have experienced significant historical trauma:

- American Indian and Alaska Native communities
- Communities of color
- Holocaust survivors
- Japanese-American survivors of internment camps
- LGBTQ communities

Racial Trauma

- ◆ Potentially traumatic experiences resulting from direct experiences of racial harassment, witnessing racial violence toward others, and experiencing discrimination and institutional racism

Pandemic Trauma

- ◆ Grief associated w/ numerous, widespread losses
- ◆ Anxiety, fear, depression, “COVID dreams”, other mental health impacts
- ◆ Conflicts associated with the pandemic (political, community, family)
- ◆ Impacts on vocation (work, school, volunteering)
- ◆ Isolation, social distancing, loss of social connections, changes in family dynamics and interaction
- ◆ Loss of daily structure/routine
- ◆ Uncertainty, continual change
- ◆ Economic/financial impacts
- ◆ 24/7 news cycle
- ◆ Physical health impacts
- ◆ Deaths



EARLY RESEARCH

- ◆ 808 participants, 27 US states, ages 18+
 - ◆ nearly 90% of respondents had one or more traumatic stress symptoms
 - ◆ 27% met criteria for PTSD diagnosis (compare to 5.3% for general US population; 7.6% for veterans deployed in Iraq/Afghanistan)

(Holmes, Megan; Case Western Reserve Center on Trauma & Adversity; April 2020)

VIDEO – Healing Neen: Part 1: The impact of traumatic events



<https://vimeo.com/48688678>

ACTIVITY – Video Debrief: Healing Neen

- ◆ PAUSE the training
- ◆ Go to the Participant Worksheet for this activity and complete it
- ◆ When ready, press PLAY to continue the training

Adverse Childhood Experiences (ACEs)

VIDEO – Adverse Childhood Experiences Primer



<https://kplrfilms.co/resilience/bonus-content/>

Adverse Childhood Experiences (ACEs)

When children experience or witness, before age 18:

ABUSE

- ◆ Emotional
- ◆ Physical
- ◆ Sexual

NEGLECT

- ◆ Emotional
- ◆ Physical

FAMILY ISSUES:

- ◆ Household member who:
 - ◆ Abuses alcohol/drugs
 - ◆ Is chronically depressed, has mental health issues, suicidal
 - ◆ Is incarcerated
 - ◆ Loss of parent(s) due to separation, divorce, natural death, suicide, abandonment
- ◆ Mother treated violently

- ◆ These are called “Adverse Childhood Experiences” (ACEs)
- ◆ ACEs score = number of these 10 categories experienced

A Broader Picture: Adverse Childhood and Community Experiences

3 Realms of ACEs

Adverse childhood and community experiences (ACEs) can occur in the household, the community, or in the environment and cause toxic stress. Left unaddressed, toxic stress from ACEs harms children and families, organizations, systems and communities, and reduces the ability of individuals and entities to respond to stressful events with resiliency. Research has shown that there are many ways to reduce and heal from toxic stress and build healthy, caring communities.



Thanks to Building Community Resilience Collaborative and Networks and the International Transformational Resilience Coalition for inspiration and guidance. Please visit [ACESConnection.com](https://www.acesconnection.com) to learn more about the science of ACEs and join the movement to prevent ACEs, heal trauma and build resilience.

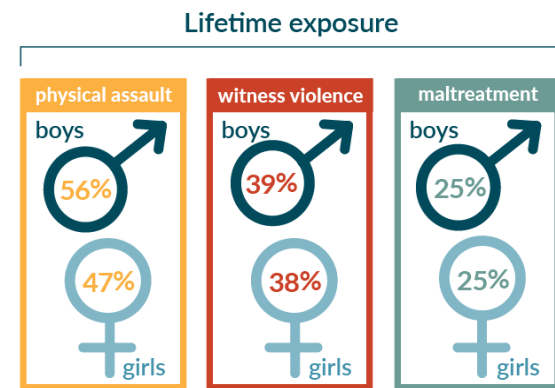
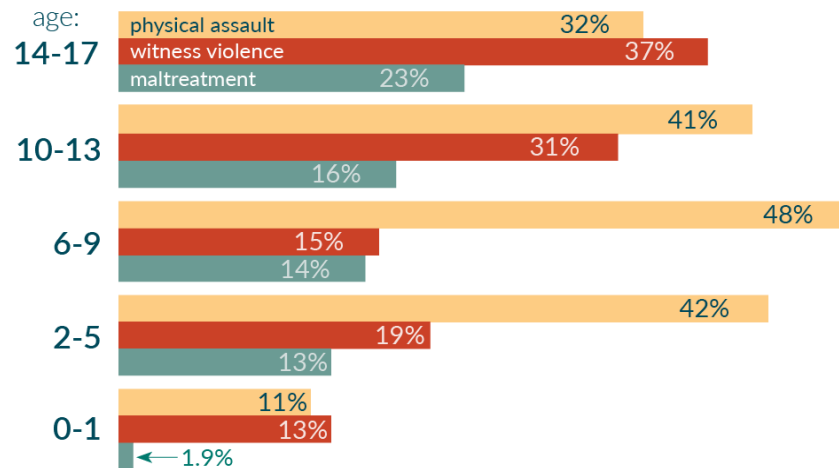
ACES
Connection

Prevalence of Childhood Trauma Nationally

2 of 3 children & youth were exposed to violence in the past year

Of these, **50%** report *more than 1 form of victimization* | **1 in 6** report *6 or more exposures to violence*

physical assault, **witnessing violence**, and **maltreatment** are common



Adverse Childhood Experiences (ACE) Study

1 in 5 adults report **3 or more** adverse experiences as children



Adverse experiences include:

- Physical abuse, emotional abuse, and sexual abuse
- Emotional and physical neglect
- Household substance abuse
- Household mental illness
- A mother treated violently
- Parent separation or divorce
- Incarcerated household member

As rates of adverse childhood experiences go up, so does **high risk behavior, illness, and early death**

Sources: Finkelhor, Turner, Shattuck, & Hamby, 2015; Child Trends, 2016; Felitti, Anda, Nordenberg, Williamson, Spitz, Edwards . . . & Marks, 1998

Prevalence of Childhood Trauma Among Specific Groups

Groups at increased risk of exposure to trauma:

- Youth of color ages 12 to 19
- African American youth living in urban, low-income communities
- American Indian/Alaska Native (AI/AN) children and youth
- Children and youth with disabilities
- Refugees
- Children and youth who are homeless and living in poverty
- LGBTQ children and youth
- Children and youth in foster care

ACTIVITY – Adverse Childhood Experiences

- ◆ PAUSE the training
- ◆ Go to the Participant Worksheet for this activity and complete it
- ◆ When ready, press PLAY to continue the training

Common Responses to Trauma - Children/Youth

	Young Children	School Age	Teens
Fear, anxiety, worry	X	X	X
Changes in sleeping & eating	X	X	X
Physical symptoms: headaches, stomachaches	X	X	X
Difficulty separating from caregivers	X		
Regressed behavior (bed-wetting, tantrums, etc)	X		
Re-enacting aspects of traumatic events in play	X		
Feelings of guilt, shame, self-blame		X	X
Difficulty concentrating, focusing in school		X	X
Angry outbursts, aggression		X	X
Withdrawal, isolation, numbing out		X	X
Over- or under-reactions to sudden movements, physical contact, changes in their environment		X	X
Decline in school performance		X	X
Worry how others will view them after the event			X
Increase in risk-taking behavior (drug/alcohol use, sexual behavior, fights, self-harm)			X

Physical Impact of Trauma

Brain Architecture

Shrinkage in prefrontal cortex, corpus callosum, and hippocampus. Enlarged and more reactive amygdala. **Resolution:** safe and stable nurturing relationships, walk in nature, touch, exercise



Neural Pathways

Need to 'rewire' our brain from old thought patterns and habits of mind, conscious, and unconscious. **Resolution:** neurofeedback, meditation/ mindful action, positive self-talk



Brain Waves

Predomination of wrong brain waves in wrong part of the brain leads to anxiety, unable to concentrate, and seizures.

Resolution: neurofeedback



Neurotransmitters

Vulnerable to addiction because dopamine transmitters/receptors not developed or damaged.

Reduces motivation & focus, creates fatigue. Low serotonin causes depression.



Hormones

Prolonged high cortisol and ghrelin creates greater reactivity to stress. Long term damage to cells, structures of the body, and other hormone glands (thyroid). **Resolution:** oxytocin ("the love hormone")



Toxin Elimination

Intestines and kidneys less able to eliminate toxins (slow gut or unbalanced flora). **Resolution:** salt baths, sauna



Nervous System

Supercharged sympathetic nervous system. Parasympathetic nervous system not engaged to bring back into balance. **Resolution:** yoga, breathing, or other physical/emotional regulation



Immune System

Resistance to cortisol or lower cortisol creates unchecked inflammation. Cause of many diseases: asthma, arthritis, etc.) **Resolution:** meditation/mindful action, walking in nature, diet, rest

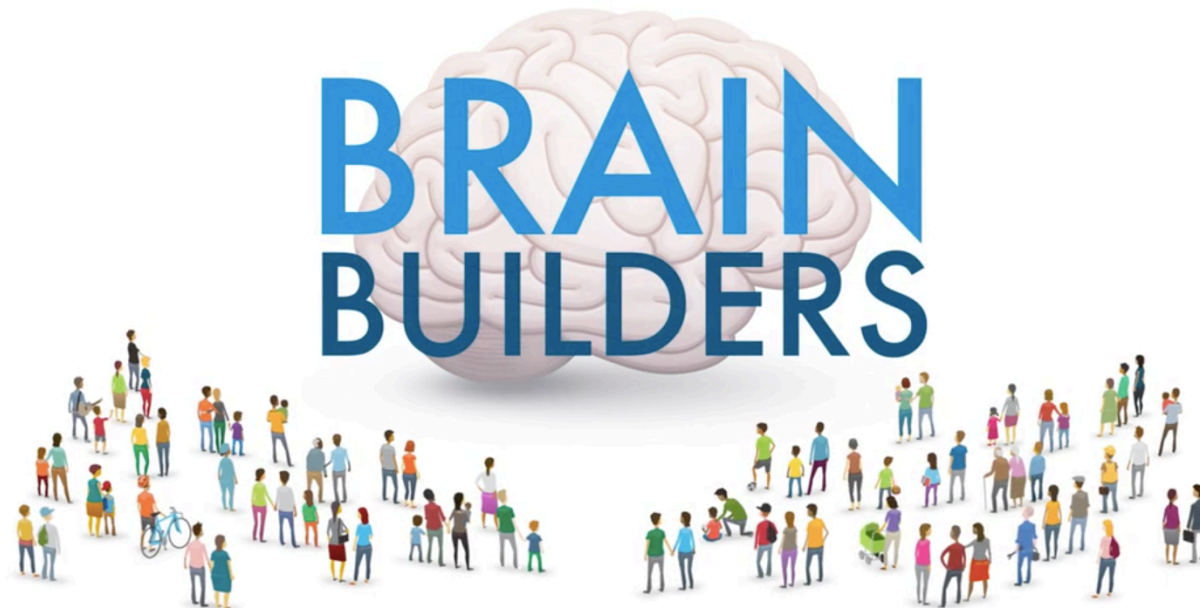


Cellular Change

Shortens telomeres which prematurely ages and reduces reproduction of cells & can cause cancer. **Resolution:** social support

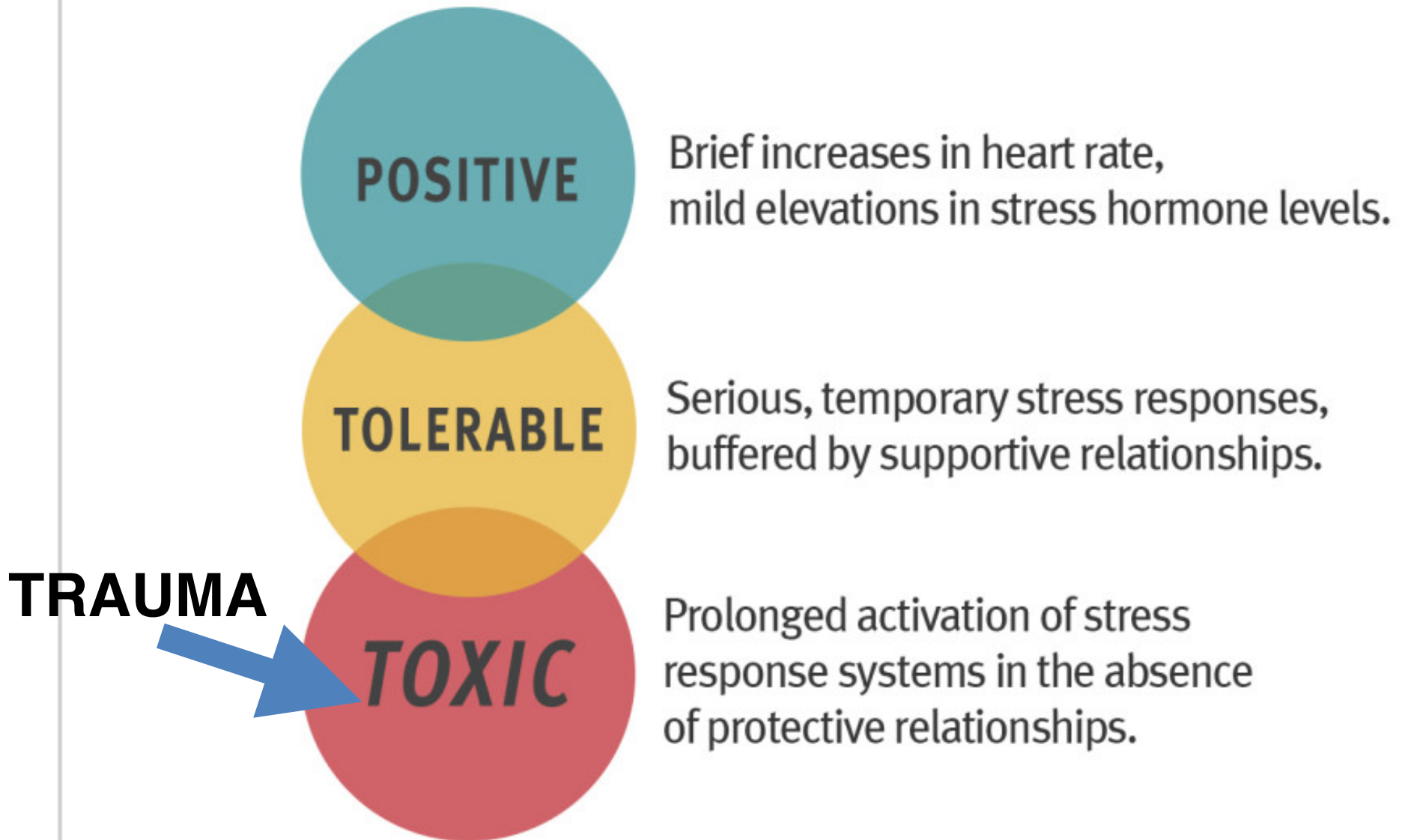
Epigenetics turns genes on or off in a adaptation to dangerous environments. Effect can last generations. **Resolution:** Safer environment (perception of)

VIDEO – Core Story of Brain Development - AFWI



[https://www.albertafamilywellness.org/resources/video/
how-brains-are-built-core-story-of-brain-development](https://www.albertafamilywellness.org/resources/video/how-brains-are-built-core-story-of-brain-development)

Types of Stress

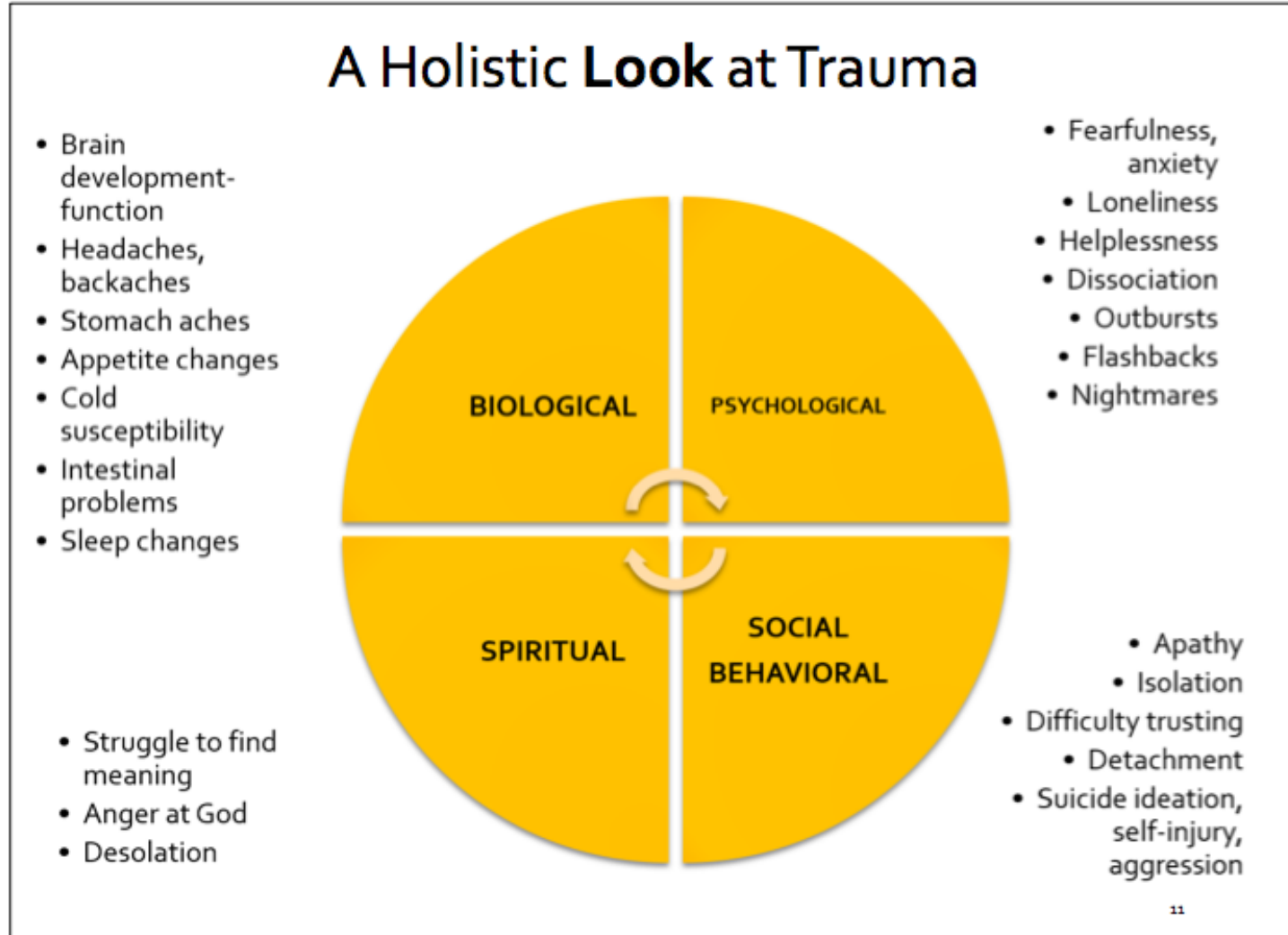


<https://developingchild.harvard.edu/science/key-concepts/toxic-stress/>

Impacts of Trauma

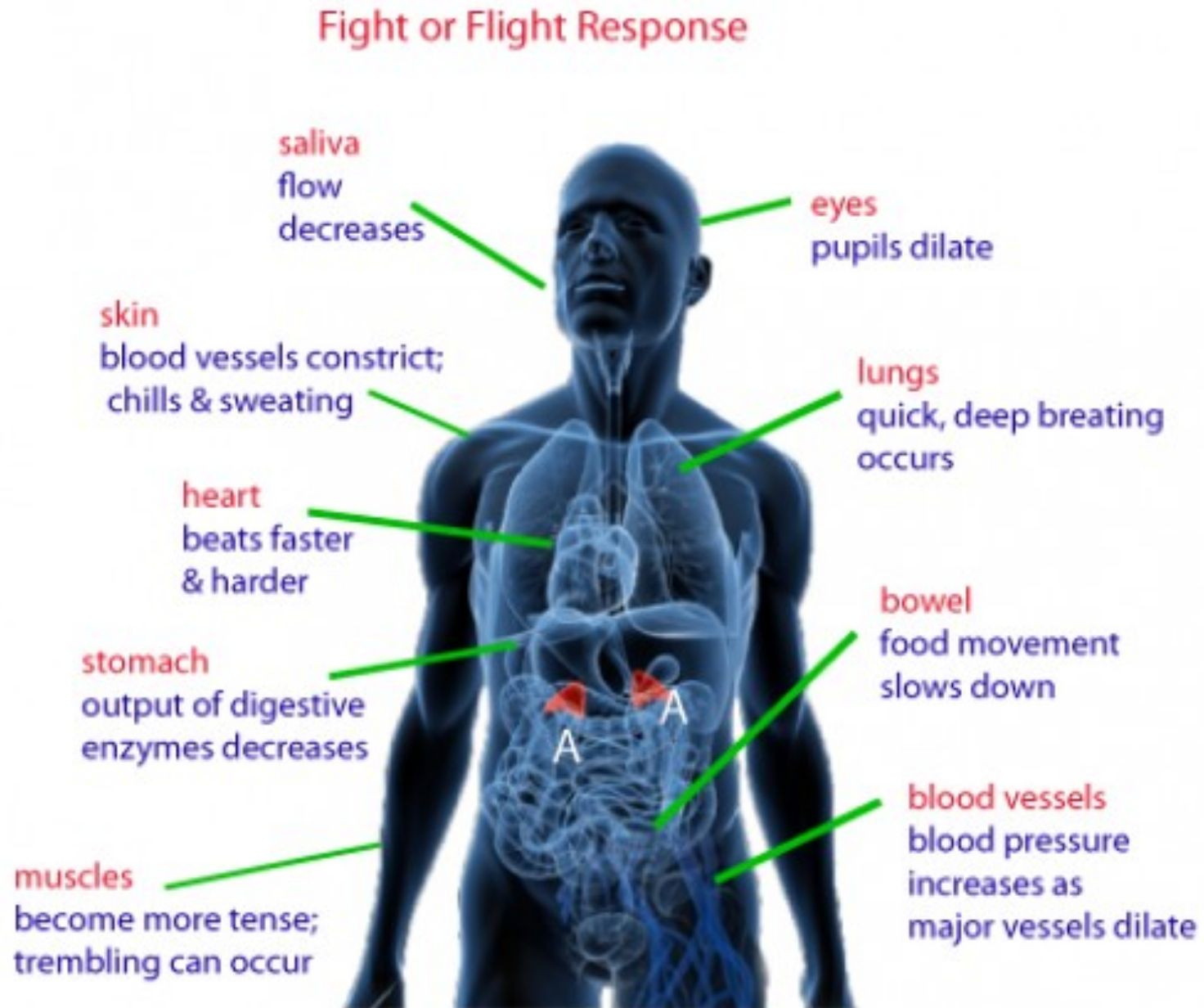
- Biological
- Psychological
- Social/Behavioral
- Spiritual
- Across the life span
- On communities

Impacts of trauma



Source: Tracey Gendron and Gigi Amateau, "Trauma-Informed Care in Nursing Homes," webinar July 24, 2018, presented by HealthInsight. <http://bit.ly/HI-TIC>.

The Body and Fight, Flight, Freeze



Impacts of Trauma/Toxic Stress on the Body

BRAIN

Difficulty concentrating, anxiety, depression, irritability, mood, mind fog

CARDIOVASCULAR

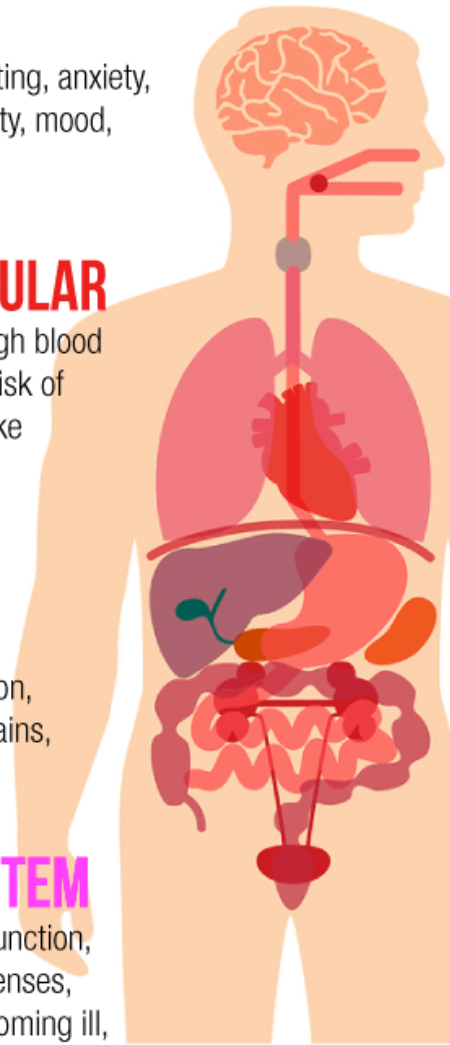
higher cholesterol, high blood pressure, increased risk of heart attack and stroke

JOINTS AND MUSCLES

increased inflammation, tension, aches and pains, muscle tightness

IMMUNE SYSTEM

decreased immune function, lowered immune defenses, increased risk of becoming ill, increase in recovery time



SKIN

hair loss, dull/brittle hair, brittle nails, dry skin, acne, delayed tissue repair

GUT

nutrient absorption, diarrhea, constipation, indigestion, bloating, pain and discomfort

REPRODUCTIVE SYSTEM

decreased hormone production, decrease in libido, increase in PMS symptoms

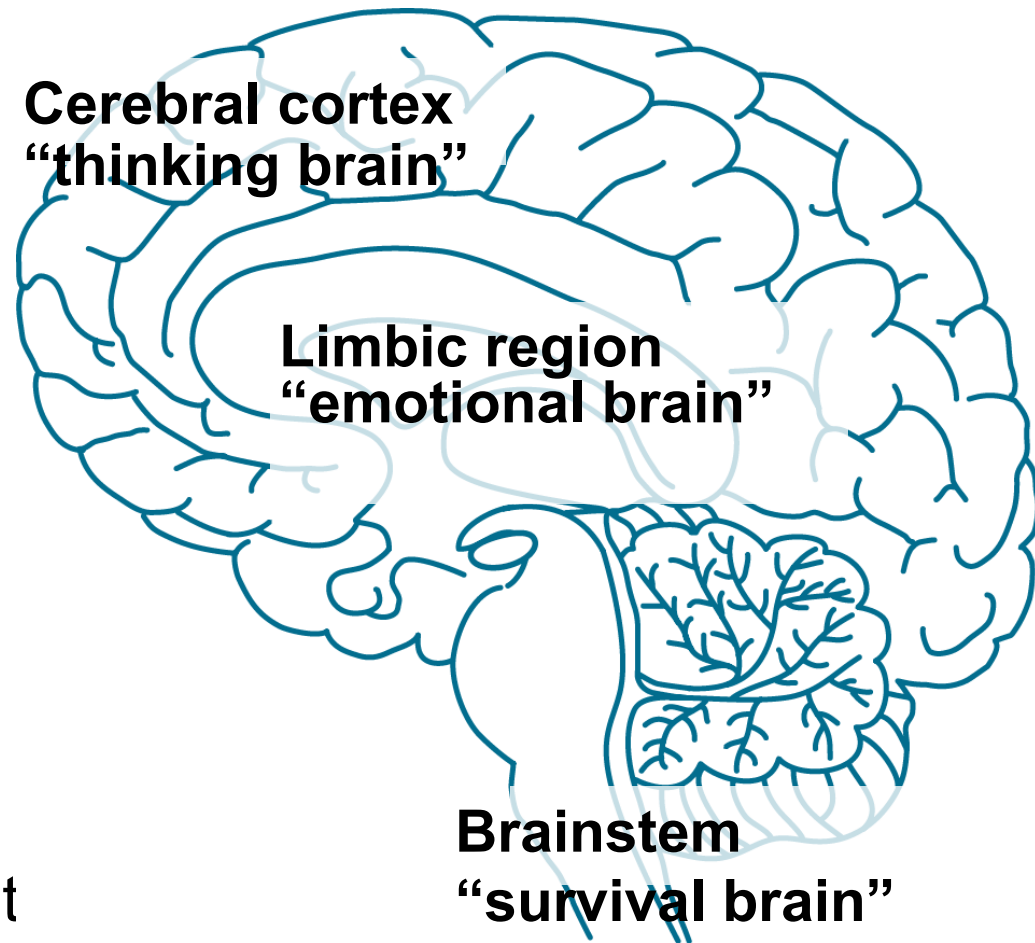
VIDEO: Hand Model of the Brain and Fight, Flight, Freeze



<https://www.youtube.com/watch?v=gm9CIJ74Oxw> or
<https://vimeo.com/172777436>

The Brain and Fight, Flight, Freeze

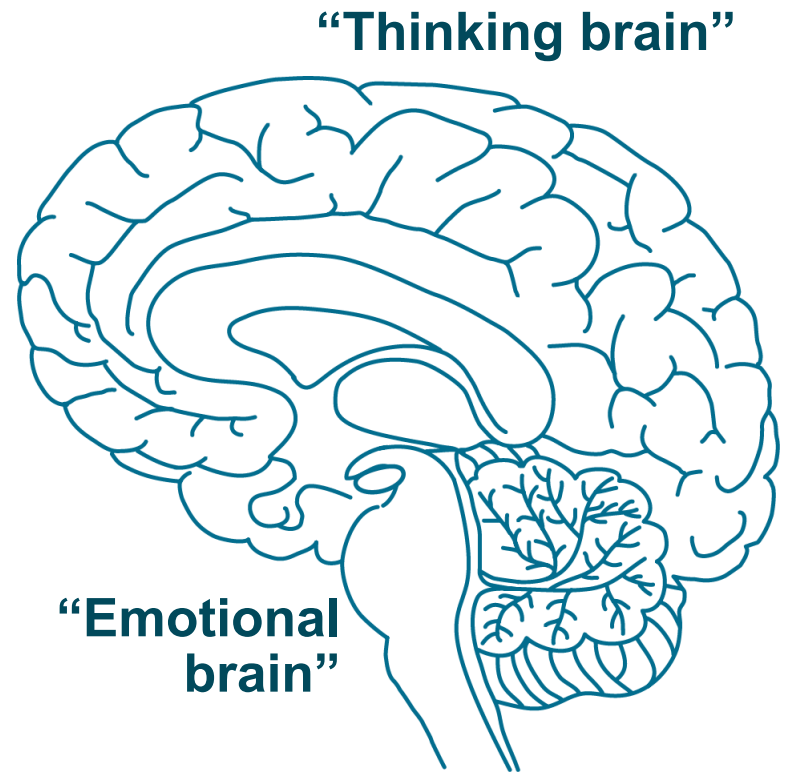
1. The amygdala (in limbic region) senses threat and sets off the alarm.
2. Thinking brain assesses the situation.
3. Thinking brain goes off-line. Emotional brain activates fight/flight/freeze response.
4. Thinking brain helps shut off the alarm and helps us to calm down.



National Center on Safe Supportive Learning Environments:
<https://traumasensitiveschools.org/>

The Brain and Fight, Flight, Freeze

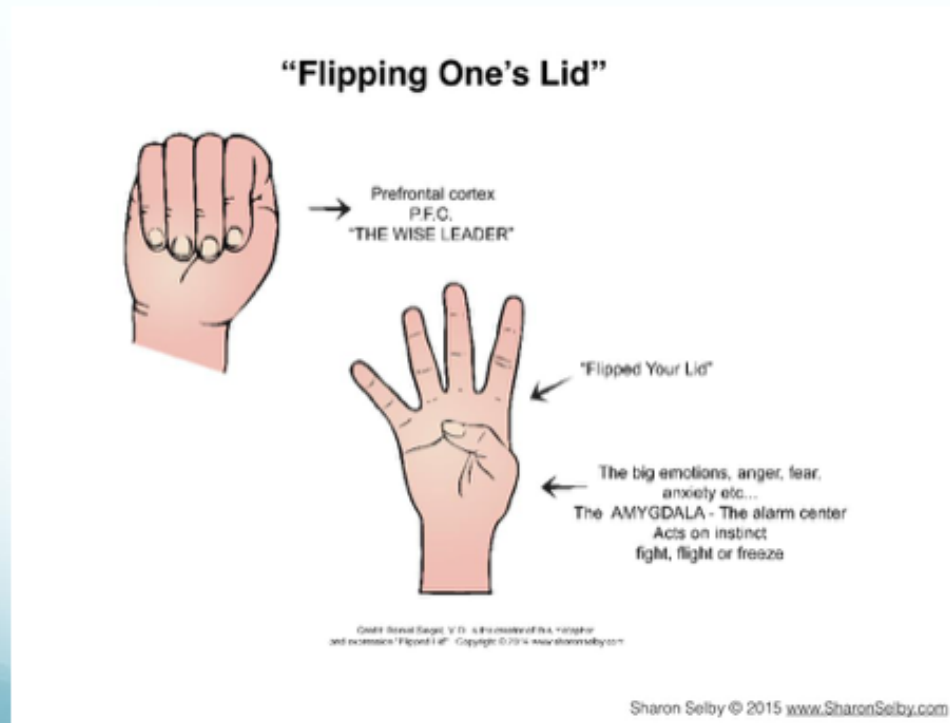
- An experience becomes TRAUMATIC when it overwhelms our system for responding to stress.
- The emotional brain continues to sound the alarm and send messages to fight or flee, even after the threat has passed.



The Brain and Fight, Flight, Freeze

Neurobiology

Helps us understand how our brain development and functions are impacted by toxic stress/trauma



Challenges with:

- Memory
- Communication
- Sensory regulation
- Executive functioning
- Regulation

In Survival Mode –
assessing threat
constantly

The Brain and Fight, Flight, Freeze

Trauma Interrupts Health

The Nervous System Loses Balance

Out of Balance



Disconnection



Fight/Flight



Freeze



Social NS

can't inhibit or regulate
SNS (fight/flight)
PNS (freeze)

Sympathetic NS

hypervigilance
anxiety
nightmares
PTSD

Parasympathetic NS

immobility
depression, apathy
fatigue



Veronique Mead, MD, MA
Chronic Illness Trauma Studies.com

Impacts of TRAUMA

Re-enactment

Recreating the childhood dynamic expecting the same result but hoping for a different one. This strategy is doomed to failure because the need is in the past and cannot be resolved. Also you will interpret anything as confirmation that you have been betrayed once more.

Loss of self-worth

Trauma survivors can swing between feeling special, with grandiose beliefs about themselves, and feeling dirty and 'bad.' This self-aggrandizement is an elaborate defense against the unbearable feeling of being an outcast and unworthy of love.

Loss of safety

The world becomes a place where anything can happen

Loss of danger cues

How do you know what is dangerous when someone you trust hurts you and this is then your 'normal?'

Loss of trust

This is especially true if the abuser is a family member or a close family friend.

Shame

Huge, overwhelming, debilitating shame. As a child, even getting an exercise wrong at school can trigger the shame. The child may grow into an adult who cannot bear to be in the wrong because it is such a trigger.

Loss of intimacy

For survivors of sexual abuse, sexual relationships can either become something to avoid or are entered into for approval (since the child learns that sex is a way to get the attention they crave) and the person may be labeled 'promiscuous.'

Dissociation

Often, to cope with what is happening to the body during the abuse, the child will dissociate (disconnect the consciousness from what is happening). Later, this becomes a coping strategy that is used whenever the survivor feels overwhelmed.

Loss of physical connection to body

Survivors of sexual and physical abuse often have a hard time being in their body. This disconnection from the body makes some therapies know to aid trauma recovery, such as yoga, harder for these survivors.

Loss of sense of self

One of the roles of the primary caregiver is to help us discover our identity by reflecting who we are back at us. If the abuser was a parent or caregiver, then that sense of self is not well developed and can leave us feeling phony or fake.

Key Insight

“We keep trying to change people’s behaviors without a full understanding of how and why those behaviors arise.”

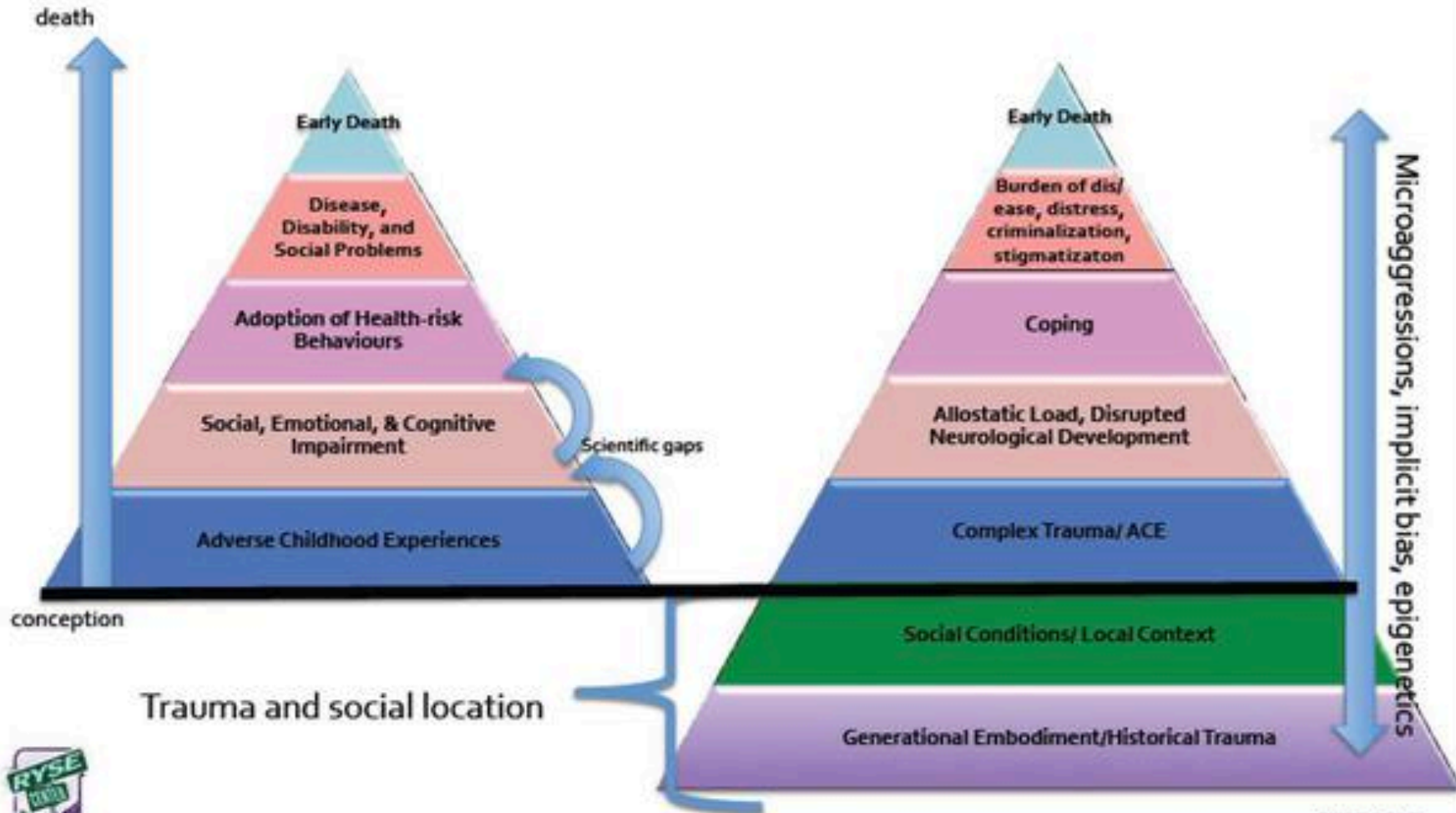
Dr. Gabor Mate
In the Realm of Hungry Ghosts

Impacts of Trauma across the life-span

Trauma and Social Location

Adverse Childhood Experiences

Historical Trauma/Embodiment



Impacts of Trauma on Communities

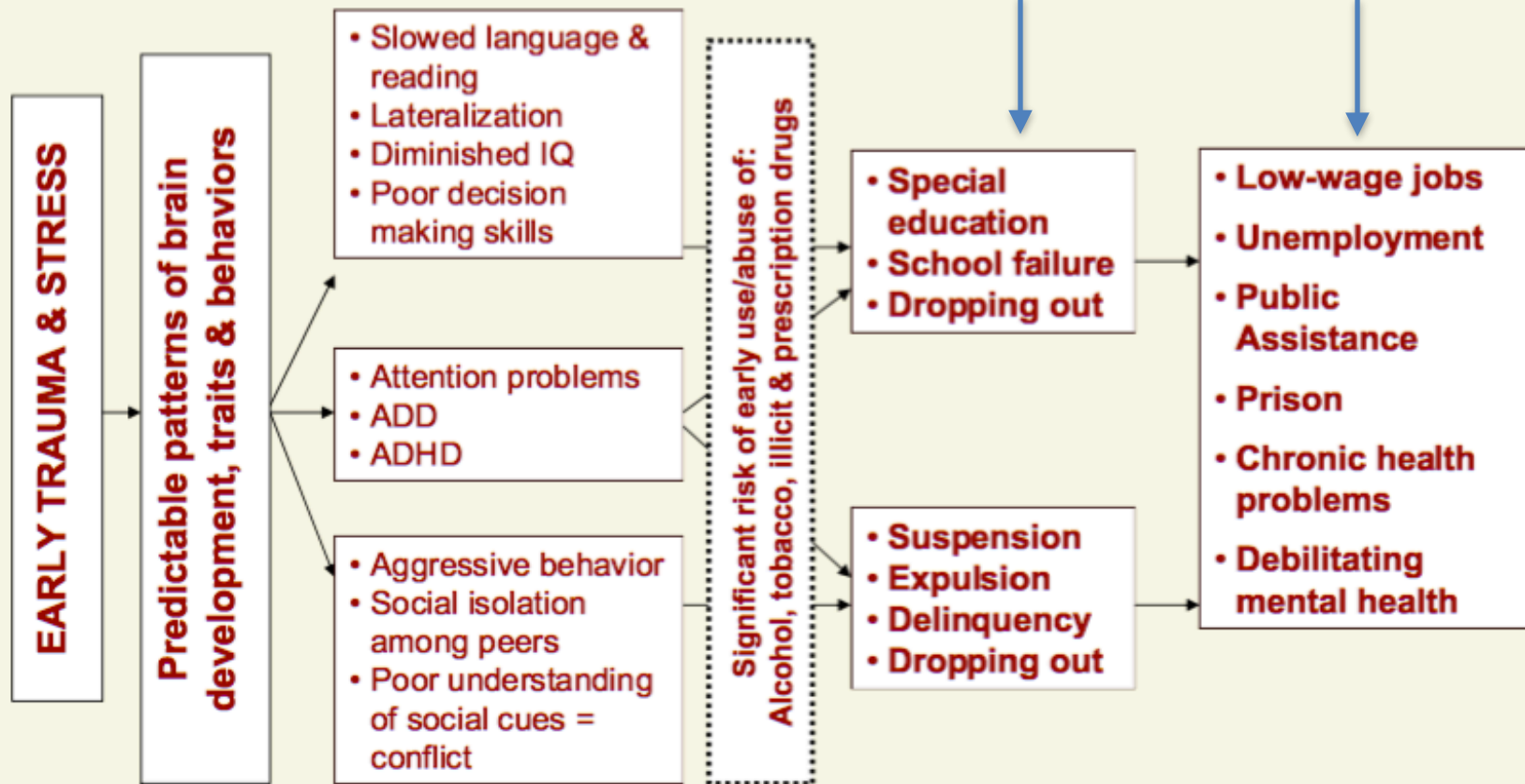


ADVERSE CHILDHOOD EXPERIENCE

DRAFT

INTEGRATING SCIENTIFIC FINDINGS: THE FAST TRACK TO POVERTY

Community Impact



The Good News: Resilience trumps ACEs

- ◆ ACEs are NOT DESTINY
- ◆ Resilience is “the process of adapting well in the face of adversity, trauma, tragedy, threats or even significant sources of threat.” (American Psychological Association)
- ◆ EVERYONE can learn to be more resilient and we can re-wire our brains for resilience (neuro-plasticity)
- ◆ By understanding how traumatic experiences may impact people, we can respond in a more trauma-informed way and foster resilience and healing
- ◆ In the next module, we'll explore:
 - ◆ Individual differences in how people respond to traumatic events
 - ◆ Risk and resilience factors
 - ◆ Building resilience and fostering healing
 - ◆ Post-trauma pathways

Summary

- ◆ In Module 1, we've looked at:
 - ◆ Why learn about trauma and resilience?
 - ◆ Definition of Trauma
 - ◆ Types of Trauma
 - ◆ Adverse Childhood Experiences (ACEs)
 - ◆ Impacts of Trauma

- ◆ In Module 2, we'll explore:
 - ◆ Individual differences in how people respond to traumatic events
 - ◆ Risk and resilience factors
 - ◆ Building resilience and fostering healing
 - ◆ Post-trauma pathways

To receive a certificate and/or any relevant CEU's for this module, you must complete the 2 items below.

1. Complete the Knowledge Quiz for this module at:

MODULE 1: KNOWLEDGE QUIZ

<https://www.surveymonkey.com/r/XB885JR>

(NOTE: You must get at least 70% correct to pass the module and receive a certificate. You will need to provide your contact information in order to receive a certificate and/or be eligible for CEU's)

2. Complete the Training Evaluation for this module at:

MODULE 1: TRAINING EVALUATION

<https://www.surveymonkey.com/r/WQNV8YR>