

Understanding Trauma, Resilience and Trauma-Informed Care

This training is provided by support from the Penn Medicine Lancaster General Health Behavioral Health Community Impact Fund and Let's Talk, Lancaster.



Penn Medicine
Lancaster General Health



MODULE 2

Individual Differences, Risk and Resilience

Individual Differences

Risk and Resilience Factors

Building Resilience and Fostering Healing

Post-Trauma Pathways and Stages of Healing from Trauma

Different people, different responses

- ◆ We all respond to situations and events differently
- ◆ What's traumatic for one person might not bother someone else
- ◆ We respond based on our own experiences, childhood, current level of stress, and other factors
- ◆ Symptoms or reactions might happen right away or be delayed, even for months or years
- ◆ Factors
 - ◆ Life experiences
 - ◆ Childhood & upbringing
 - ◆ Current level of stress
 - ◆ Childhood trauma vs trauma as adults
 - ◆ Risk factors / Protective factors

Culture and Trauma

The following are influenced by cultural factors:

- Risk and type of trauma exposure
- How a person describes their experience
- How distress is expressed
- Which topics are acceptable to discuss
- How a person makes meaning of experiences and heals from trauma

Gender differences and trauma

Gender Differences and Trauma

Females	Males
Typical trauma: childhood sexual abuse	Typical trauma: witnessing violence
More likely to develop PTSD when exposed to violence	More likely to be exposed to violence, but less likely to develop PTSD
Repeated exposure to sexual and violent victimisation from intimates, beginning in childhood Exposure to violence from strangers and adversaries; sexual abuse and coercion outside family	Exposure to violence from strangers and adversaries; sexual abuse and coercion outside family
Internalising: self-harm, eating disorders, addiction, avoidance	Externalising: violence, substance abuse, crime and hyper-arousal
Likely to get mental health treatment rather than substance abuse treatment	Likely to get substance abuse treatment rather than mental health treatment
Treatment needs to emphasise empowerment, emotional regulation, and safety	Treatment needs to emphasise feelings, relationships, and empathy

ACTIVITY – Individual Differences, Risk and Resilience Factors

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

Risk/Resilience Factors for Children

Protecting children from trauma's impact are resiliency factors; at the same time, risk factors, many associated with urban poverty, exacerbate impacts.

What helps a child bounce back from trauma?

Resiliency Factors



Individual-level Traits

- Easy-going temperament
- Proactive coping mechanisms
- High intelligence
- Positive perspective

Family Characteristics

- Strong, nurturing, stable family relationships
- Structure and boundaries
- Parental competence
- Parental employment
- Access to services

Community

- Community cohesiveness
- Caring adults and role models to support child and family
- Good schools
- Availability of support services for child and family

Risk Factors



Individual-level Traits

- Disabled/high needs
- Passive
- Male gender

Family Characteristics

- Weak family cohesion
- Poverty
- Single parent
- Marital conflict
- Parent mental illness
- Family stressors (unemployment, financial problems, etc.)

Community

- Lack of cohesiveness
- Social isolation
- Poor schools
- Neighborhood poverty

What puts a child at greater risk for adverse outcomes?

The Health Foundation of Western and Central New York.

https://hfwcnny.org/hfwcnny-content/uploads/FINAL_CNY_KidsTrauma_Research_Brief.pdf

VIDEO - Resilience Scale - AFWI

Building Resilience in Children



ACTIVITY – Building Resilience in Children

- ◆ PAUSE the training
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- ◆ When ready, press PLAY to continue the training

PROMISING FUTURES

PROMOTING RESILIENCY

among children and youth experiencing domestic violence

Almost 30 million American children will be exposed to family violence by the time they are 17 years old.^[2] Kids who are exposed to violence are affected in different ways and not all are traumatized or permanently harmed. Protective factors can promote resiliency, help children and youth heal, and support prevention efforts.

Research indicates that the #1 protective factor in helping children heal from the experience is the presence of a consistent, supportive, and loving adult—most often their mother.^[1]

PROTECTIVE FACTORS THAT PROMOTE RESILIENCY

INDIVIDUAL

Temperament

Individual temperament or sense of humor



Understanding

Ability to make sense of their experiences

Relationships

Ability to form relationships with peers



Expression

Opportunities to express feelings through words, music, etc.



Mastery

Opportunities to experience mastery



Conflict Resolution

Development of conflict resolution & relaxation techniques



Culture

Strong cultural identity

FAMILY

Role Models

Adults who role model healthy relationships



Health

Healthy caregivers



Networks

Relationships with extended family members and others



Supportive Relationships

Positive child-caregiver relationships



Stability

Stable living environment

COMMUNITY



Access to Services

Basic needs, advocacy, health



School

Positive school climate and supports



Mentors

Role models & mentors, i.e. coach, faith leader

Neighborhood Cohesion

Safe & connected communities



Get started at www.PromisingFuturesWithoutViolence.org

National Domestic Violence Hotline: 1-800-799-7233 (SAFE)

National Dating Abuse Helpline: 1-866-331-9474 or text "loveis" to 77054

Promising Futures: Best Practices for Serving Children, Youth & Parents is a project of Futures Without Violence

FUTURES
WITHOUT VIOLENCE™

Formerly Family Violence Prevention Fund

Building Resilience in Children: “Changing the script”

Blame and punishment don't work. Shift to positive discipline.

INSTEAD OF	THINK
Assuming the child is intentionally misbehaving	The child lacks skills
Shaming for lack of skills	How to build missing skills
Criticizing	How to nurture
Blaming	Teaching

SOURCE: Children's Resilience Initiative - www.resiliencetrumpsaces.org

Key Insight

*“Every time you think of calling a kid ‘**attention-seeking**’ this year, consider changing it to ‘**connection-seeking**’ and see how your perspective changes.”*

Dr. Jody Carrington, Psychologist



VIDEO – Resilience



<https://www.youtube.com/watch?v=-pnhFmdz-ig>

Risk/Resilience Factors for Adults

RESILIENCE

Family ties

Strong primary relationship

Connection to community

Employment

Biology

Meaningful activity

Strong cultural or religious beliefs

RISK

Health issues

Pre-existing mental health problems

Severity of trauma


Proximity to trauma

Biology

Numerous traumas

Experiences that diminish coping capacity

People *think* differently about trauma



Fear of stigma
Can't be a victim
Suck it up
Self-blame
Negative self-view
World is dangerous
Betrayal
Anger & rage
Desire for revenge

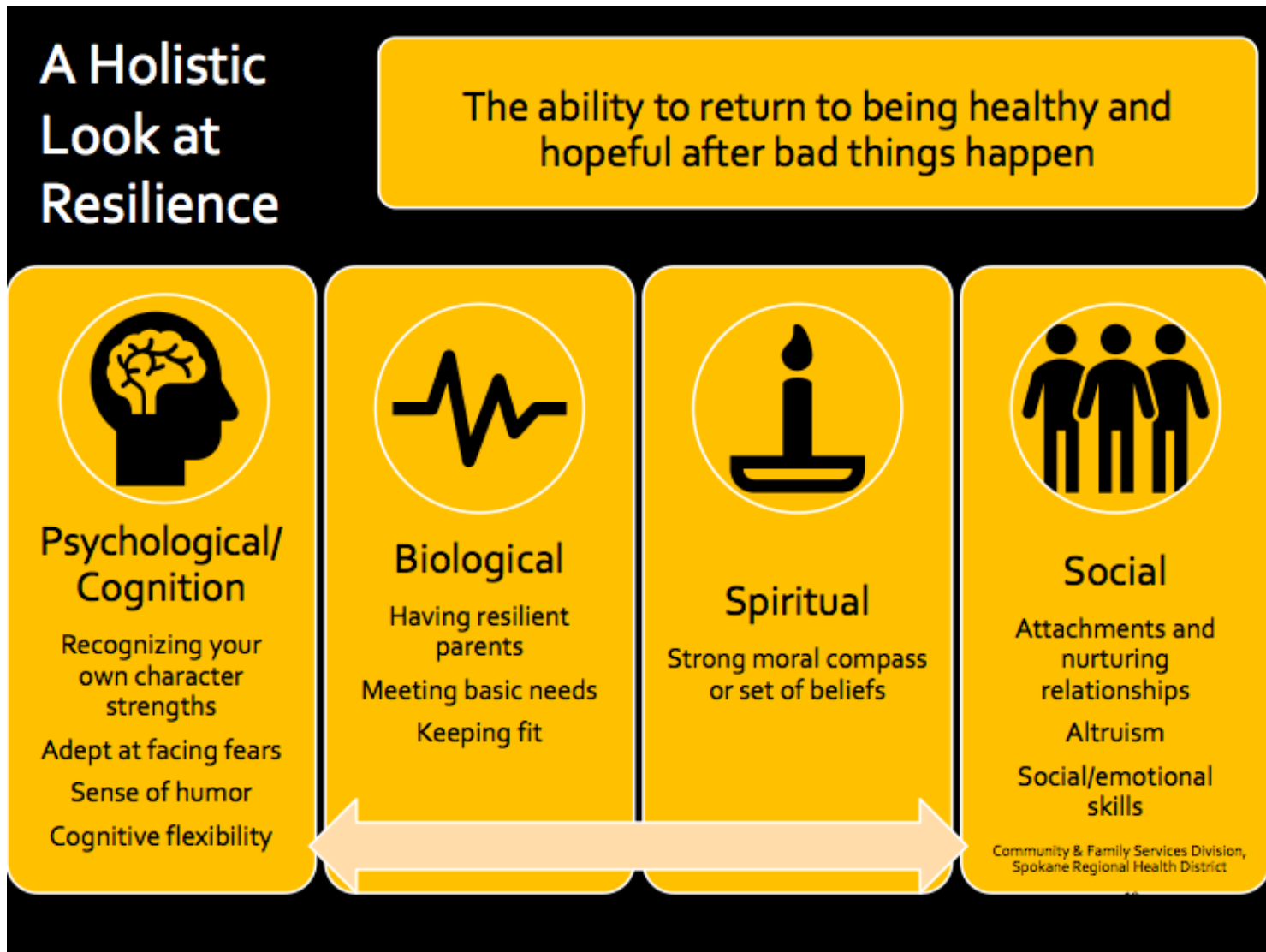
What Resilience is NOT

- ◆ NOT just about “grit” or “toughing it out”
- ◆ NOT about just “moving on” or “getting over it”
- ◆ NOT about telling the person lying on the ground with a boot-clad foot on their neck that they need to make their neck stronger
 - ◆ We also need to look at systems and structures.
 - ◆ What has to be done to get that boot-clad foot OFF of the person’s neck?

Resilience defined

- ♦ 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)

Resilience



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

ACTIVITY – Building Resilience in Adults

- ◆ PAUSE the training
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- ◆ When ready, press PLAY to continue the training

What is needed to heal from trauma and build resilience?

- ◆ Meaningful **connection** with others
- ◆ **Support** from family, friends, church, community, trusted others
- ◆ **Spiritual connections**: a sense of something larger than oneself
- ◆ Opportunities to participate in **social activities**
- ◆ Opportunities to **volunteer/be of service** in the community
- ◆ Structure & a **daily routine**
- ◆ Good **physical health**: proper diet, plenty of sleep, good medical care, low stress, avoid drugs/alcohol
- ◆ Opportunities for **fun, play, laughter**
- ◆ Opportunities for **creative** endeavors
- ◆ Opportunities to be out in **nature**

SAMHSA: Dealing with the Effects of Trauma: A Self-Help Guide

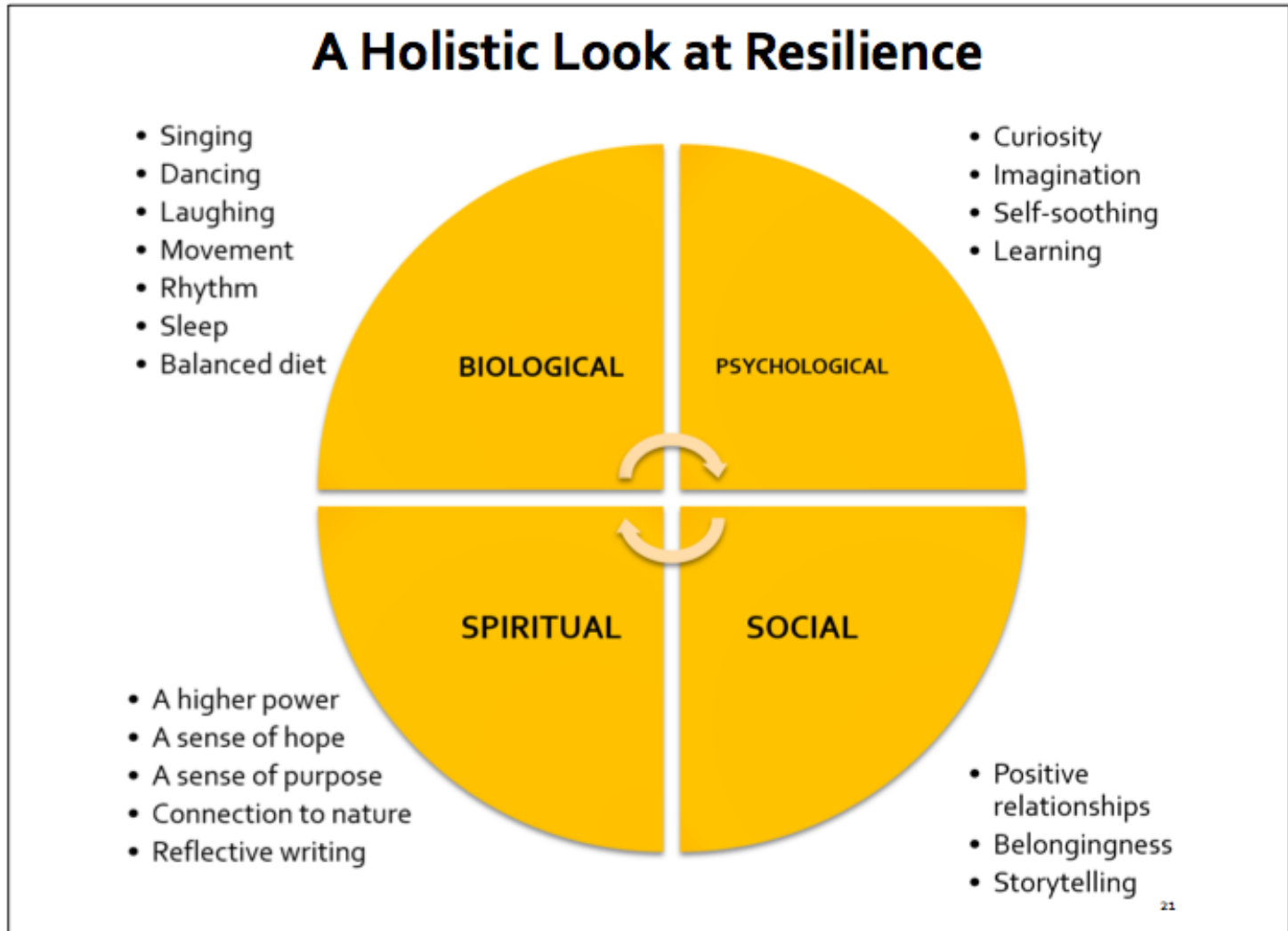
What is needed to heal from trauma and build resilience?

- ◆ Feeling **empowered**, to counteract traumatic experiences where all control was taken away from you
- ◆ Feeling **validated**: needing others to listen to you, to validate the importance of what happened to you, to believe you, to understand
- ◆ Feeling **connected** in supportive, meaningful relationships
- ◆ Feeling a sense of **hope** that things can get better
- ◆ Feeling that your life has **meaning and purpose**
- ◆ Being able to **trust** other people again

SAMHSA: Dealing with the Effects of Trauma: A Self-Help Guide



Resilience



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Post-Trauma Pathways

- Resilience
- Recovery
- Post-traumatic growth



- Severe persisting distress
- Decline
- Stable maladaptive functioning
- PTSD

Post-Trauma Pathways

- 
- Severe persisting distress
 - Body's attempts to adjust are not effective
 - Requires more intensive, individualized supports
 - Decline
 - Initially appear to be managing the strain of the trauma
 - Over time unable to maintain healthy functioning
 - Difficulties may begin months or years after the event
 - Stable maladaptive functioning
 - Poor functioning before and after a traumatic event
 - History of exposure to adversity
 - Vulnerable to continued negative effects
 - PTSD

Post-Trauma Pathways

PTSD: Post-traumatic Stress Disorder

Symptoms

- Re-experiencing (nightmares, flashbacks, reactions to trauma reminders)
- Avoidance of trauma reminders
- Changes to the stress response system (on alert danger, reactive)
- Negative changes in beliefs about self, others, and mood

Consider cultural factors related to PTSD symptoms.

Post-Trauma Pathways

- Resilience: A positive, adaptive response to significant adversity
 - Adaptable, caring, and supportive relationships
 - A sense of mastery over life circumstances
 - Strong executive function and self-regulation skills
 - Safe and supportive environments
 - Affirming faith or cultural traditions
- Recovery
 - Longer period of disruption
 - Return to earlier level of functioning
- Post-traumatic growth: Positive change or transformation as a result of a traumatic experience

Post-Trauma Pathways

Resilience, Recovery, Growth

Resilience

- May demonstrate resilience in one type of situation but not another.
- Coping skills that support resilience can be developed at any age.
- People do not develop the capacity to positively adapt to adversity in isolation - positive, supportive relationships are essential.

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

Stages of Healing from Trauma

- ◆ Establish safety: control, safety planning, social support, self-care
- ◆ Healthy relationships: empowerment, validation, compassion
- ◆ Remembrance and mourning
- ◆ Reconnection/integration

“This is something that happened, it was traumatic, but it no longer impacts who I am or what I do in life”

(adapted from Judith Herman, Trauma and Recovery)

Stages of Healing from Trauma

- ◆ Reconnection/integration phase includes “paying it forward” - a desire to help other people
- ◆ Many human services professionals have trauma histories, but may not have gone through the stages of recovery themselves
- ◆ This may explain high levels of burnout/turnover in helping professions

(adapted from Judith Herman, Trauma and Recovery)

VIDEO



<https://www.albertafamilywellness.org/resources/video/brains-journey-to-resilience>

Summary

- ◆ In Module 2, we've looked at:
 - ◆ Individual differences in how people respond to traumatic events
 - ◆ Risk and resilience factors
 - ◆ Building resilience and fostering healing
 - ◆ Post-trauma pathways and stages of healing from trauma
- ◆ In Module 3, we'll explore:
 - ◆ Trauma Histories and Universal Precautions
 - ◆ Using Trauma-Informed Responses
 - ◆ Becoming a Trauma-Informed Organization

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 2: KNOWLEDGE QUIZ:

<https://www.surveymonkey.com/r/N6BWRXZ>

(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 2: TRAINING EVALUATION:

<https://www.surveymonkey.com/r/G3RDG39>