

Trauma Informed Care



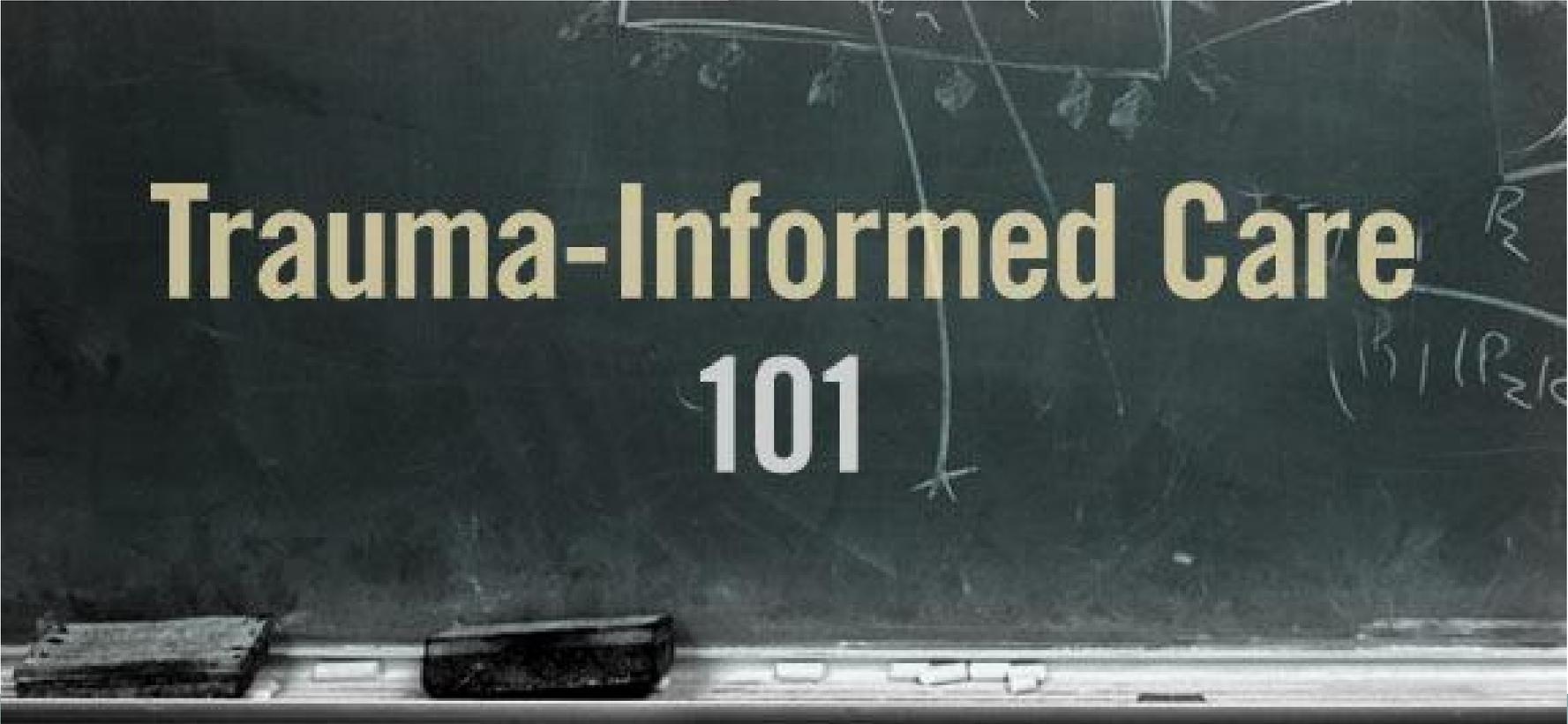
Objectives



- Trainee will be able to define Trauma
- Trainee will understand the three types of trauma
- Trainee will understand the prevalence of trauma in the DD population.
- Trainee will understand the neurological, biological, psychological, and social impact of trauma.
- Trainee will understand the effects trauma has on the individual, their family, and community.

Learning Objective

1. What is Trauma?

A photograph of a chalkboard with the text "Trauma-Informed Care 101" written on it. The chalkboard is dark green and has some faint, illegible chalk markings. The text "Trauma-Informed Care" is in a large, bold, yellow font, and "101" is in a smaller, bold, white font. The chalkboard is framed by a white border with a dashed line. The background of the slide is a solid orange color.

Trauma-Informed Care

101

Group Discussion



- How would you...
- Define Trauma
- What is it that makes something traumatic as opposed to stressful

Psychological Trauma Defined



To understand what trauma does we have to understand what it is.

“Psychological trauma occurs when a sudden, unexpected, overwhelming intense emotional blow or a series of blows assaults the person from outside. Traumatic events are external, but they quickly become incorporated into the mind.”

– Lenore Terr, *Too Scared To Cry: Psychic Trauma in Childhood*, (p. 8)

Small Groups:



- In pairs, discuss a client (adult or child) that you suspect has experienced trauma.
- Focus not on the events but the behaviors.
- Share how did they present? What behaviors did they exhibit?

Prevalence of Trauma and DD





Prevalence

4 times more likely to be victims of crimes as non-disabled.

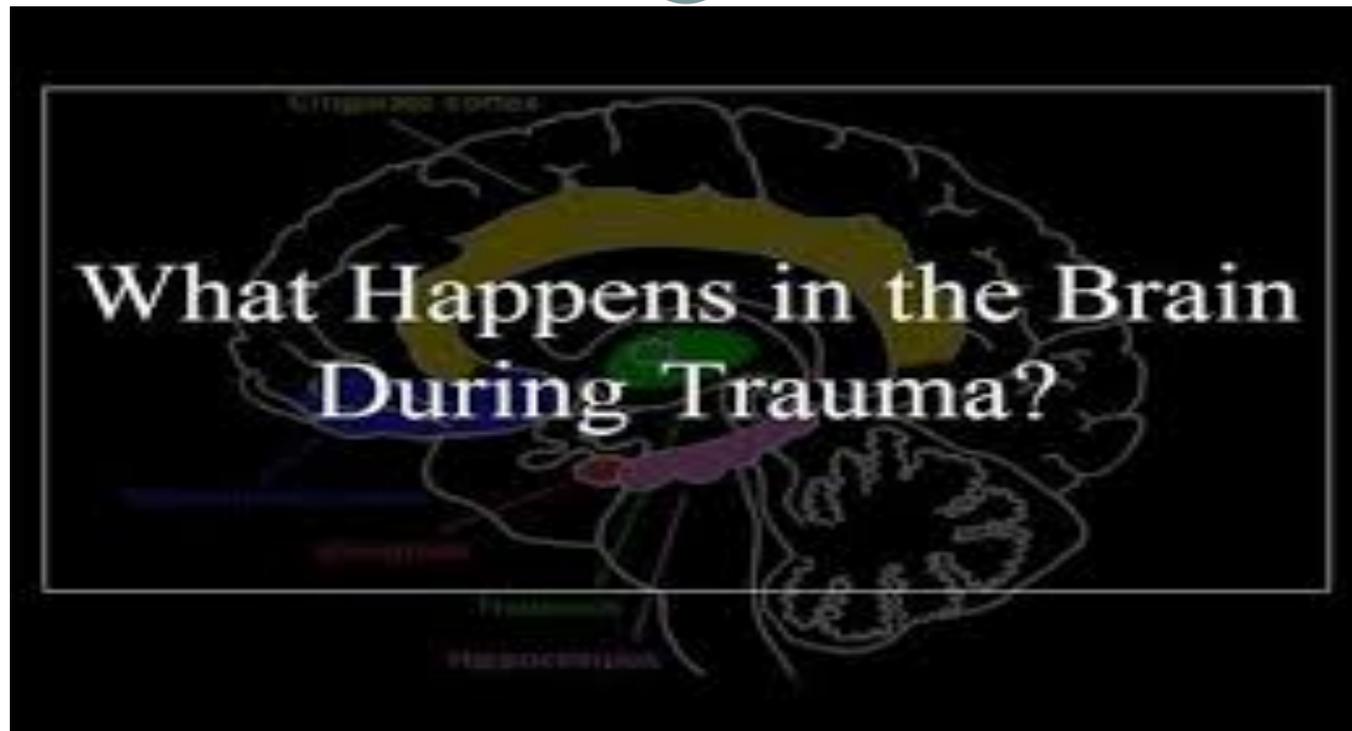
64% of children maltreated had a DD.

Five million crimes are committed against individuals with disabilities each year in the US

Individuals with disabilities are 2-to-10 times more likely to be sexually abused than those without disabilities

- **People with DD are more likely to be exposed to trauma AND exposure to trauma makes DD more likely.**
- **Due to limited cognitive, social, and verbal skills, they are more vulnerable to being exposed to abuse.**

Neurological and Biological Impact of Trauma



Neurological Impact:

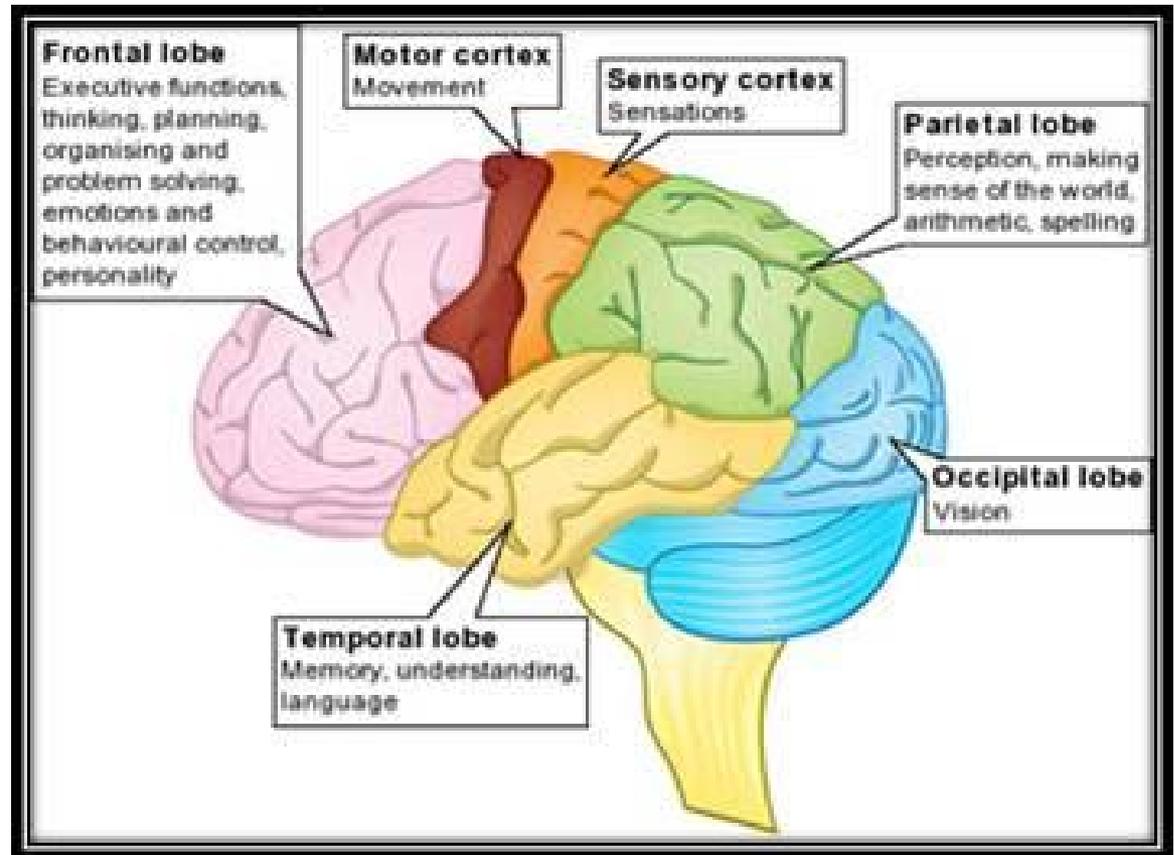
Alteration of brain to be in state of fear and hyper vigilant at all times.

Reduced brain size
density of neurons

Head circumference

Dysregulation of the
HPA-axis

Problems with the
release of cortisol



Biological Impacts:

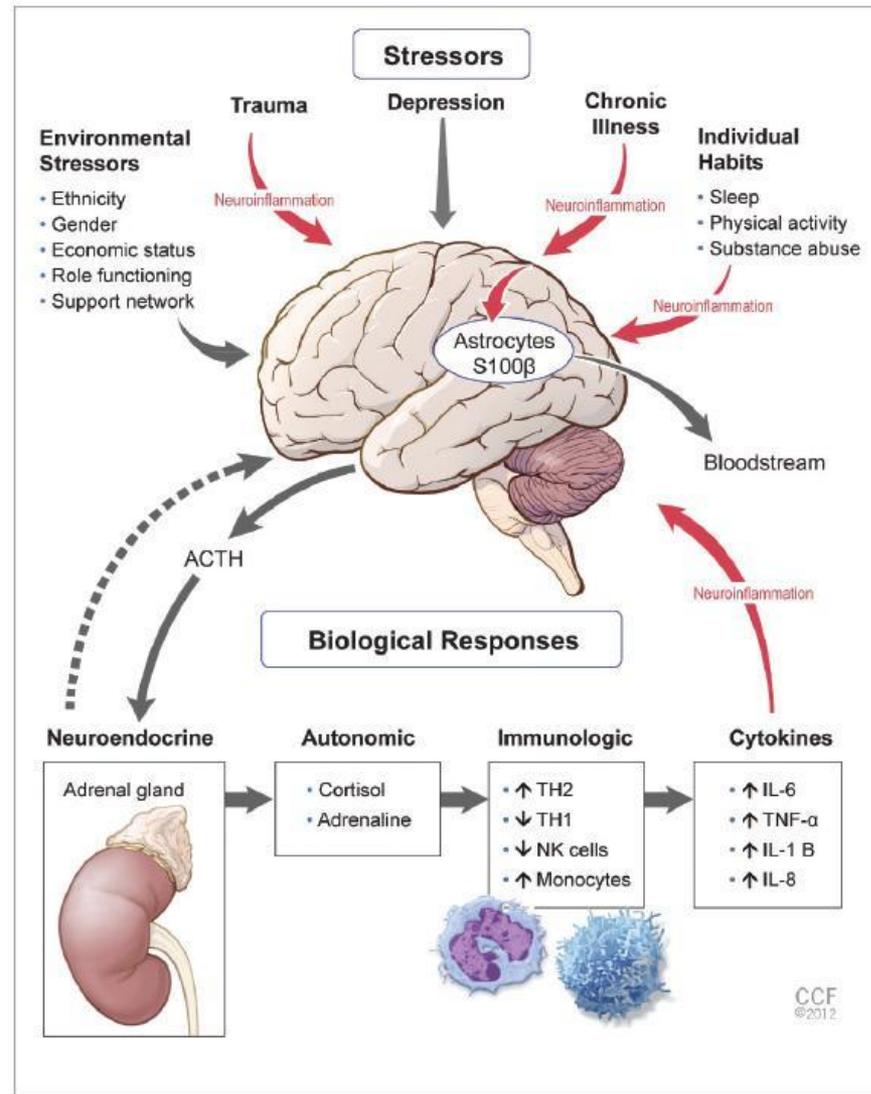
Epigenetics

Turning off stress responses

Altered stress genes can be inherited.

Difficulty shutting down the stress response once the harm is gone.

Consistent Stress can lead to physical health implications



Psychological and Social Impacts of Trauma





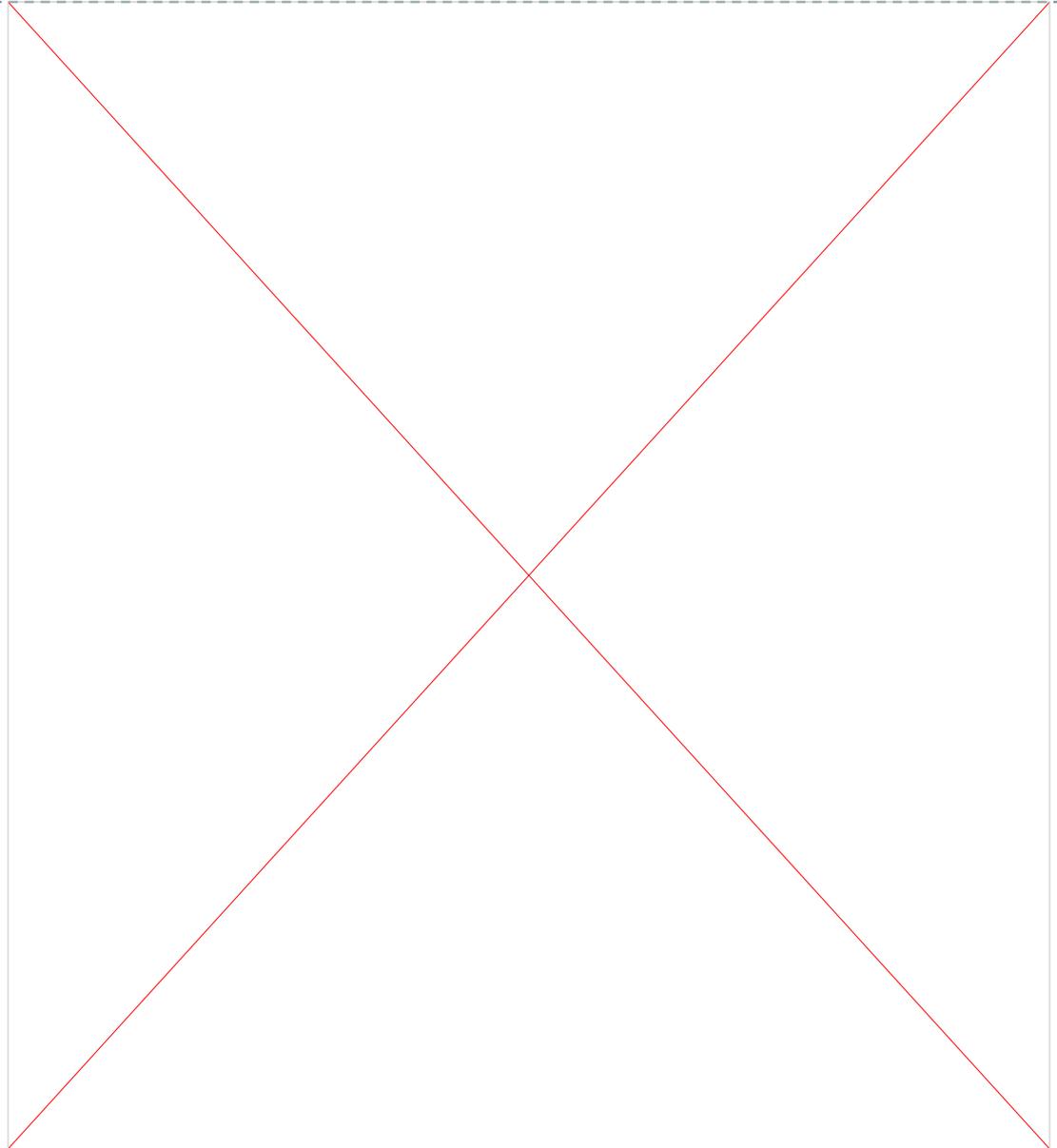
Psychological and Social Impact:

Individuals exposed to trauma can be more disruptive, aggressive, and withdrawn.

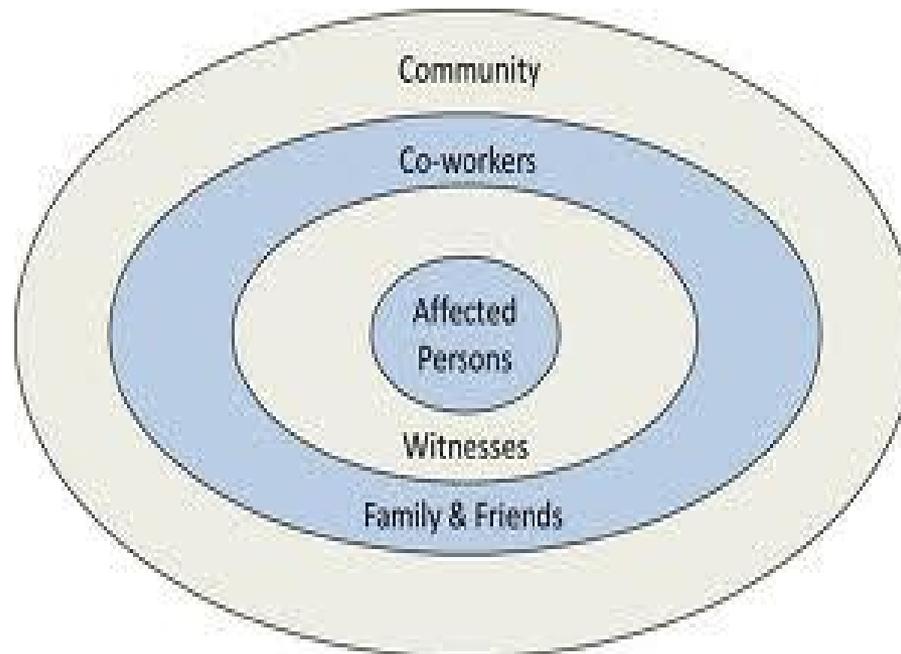
Impacts one's ability to pay attention, complete tasks, and learn new skills

Effects one view of the world

- Perception of time
- Cognitive style
- Affective tone
- Ability to develop solutions to problems
- Ability to respond and understand rules, Regulations, and laws



Trauma and Community





Community and Relationships :

People that are trying to form relationships with trauma survivors may mistake the outward signs of trauma. In other words, to take the behavior personally.

Symptoms of trauma can make it difficult to form relationships with others.

Trauma can effect relationships and desire to be involved in a community.





Outward symptoms that can make social situations difficult :

Flight or fight response

Sweating

Pounding heart

Shortness of breath

Being irritable or on edge

Anger, being on edge, being easily triggered or “set off”

Being distant, detached, or seeming to be “out of touch” with reality

Difficulty problem solving

Self injurious behavior or self harm

- People that have experience trauma may struggle to be involved with others and the community.



How Can We Help?



- Be patient as we form relationships, strong relationships are healing
- Learn about triggers of the person we are supporting
- Learn about what things help to calm the person
- Be non-judgmental. Behavior as a result of trauma is not personal
- Have respect and compassion (Empathy statements)
- Daily routines and activity schedules (routines provide a sense of safety)
- Use a calm voice and quality components when supporting the person
- Let the person make choices in their day (self-determination)
- Supply the “why”. Use rationales always. (Knowing why provides comfort)