



# Trauma Informed Care

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## Goals, objectives, agenda

- Understand impact of trauma on clients (and in the courtroom)
- Discuss ways to be more trauma informed
- Neurology of trauma
- The impact of trauma on clients
- How trauma manifests in the courtroom
- Define TIC, impact of trauma and the application to the family law community

## ● ● ● | Trauma 101

- Single event
- Complex marinade over time
- Interpersonal violence, especially at the hands of an authority/trusted figure, is particularly damaging
- Child welfare and system involved clients often experience both single and complex trauma

## ● ● ● | John Briere, 2006

*Trauma is an event that is extremely upsetting and at least temporarily overwhelms internal resources.*



## Traumatic events

- *Physical assault*
- *Sexual abuse*
- *Emotional or psychological abuse*
- *Neglect/abandonment*
- *Domestic Violence*
- *Gang/street violence*
- *Witnessing abuse/violence*
- *War/Genocide*
- *Accidents*
- *Natural or man-made disasters*
- *Dangerous environment*
- *Witness or experience street violence*
- *Rape*
- *Oppression*
- ***Any others? What about specific to system involved clients (children and parents)?***



## PTSD in foster children

Former foster children are almost twice as likely to suffer from Post-Traumatic Stress Disorder (PTSD) as U.S. war veterans (2005 Harvard Medical School)



## ACE Study

- Adverse Childhood Experiences (CDC, 1995)
- ACE score includes:
  - Lack of nurturance and support
  - Hunger, physical neglect, lack of protection
  - Divorce in the home
  - Substance abuse in the home
  - Mental illness or attempted suicide among household members
  - Incarceration of household member



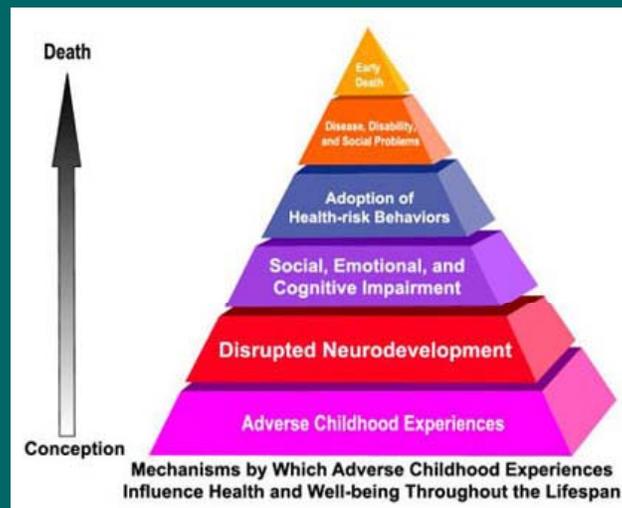
## Cumulative impact

- ACE Study: Scores 0-10
  - Score of 4 or more:
    - Twice as likely to smoke
    - 12 times as likely to have attempted suicide
    - Twice as likely to be alcoholic
    - 10 times as likely to have injected street drugs

## Cumulative impact

- ACE score highly correlated with:
  - Prostitution
  - Mental Health disorders
  - Substance abuse
  - Early criminal behavior
  - Physical health problems
  - Early death

## [www.ACEstudy.org](http://www.ACEstudy.org)





## Impact of trauma

Chronic trauma interferes with neurobiological development and the capacity to integrate sensory, emotional and cognitive information into a cohesive whole. Developmental trauma sets the stage for unfocused responses to **subsequent stress** (Van der Kolk).



## Impact of Trauma

- Emotional reactions
  - Feelings—emotions, regulation
  - Alteration in consciousness--dissociation
  - Hyper-vigilance
- Psychological and cognitive reactions
  - Concentration, slowed thinking, difficulty with decisions, blame
  - Crisis is comfortable—homeostasis
  - Over dependent
  - Not future oriented
- Behavioral and physical reactions
  - Pain, sleep disturbance, illness, substance abuse
- Beliefs:
  - Changes your sense of self, others, community
  - World is unsafe
  - Relational disturbance
  - Ability to be in relationship

## Common trauma reactions

- Without helpful affect regulation skills, people who are traumatized may have to rely on tension reduction behaviors—external ways to reduce triggered distress (Briere, 2004)
- ***What are some common tension reduction skills?***

## Enter “The System”

- A person has experienced trauma(s) meets...
  - Police
  - Child Welfare
  - Self Sufficiency
  - Juvenile Justice
  - Adult Corrections
  - Housing
  - Mental Health
  - The Court
  - And on and on and on...



If first we must “do no harm”, how do we not make it worse?



## Trauma Informed Care

“Trauma-informed organizations, programs, and services are based on an understanding of the vulnerabilities or triggers of trauma survivors that traditional service delivery approaches may exacerbate, so that these services and programs can be more supportive and avoid re-traumatization.” (SAMHSA)

vs.

Trauma Specific Services – intended to reduce trauma symptoms experienced by survivors. (EMDR, TFCBT, Seeking Safety, TREM, ATRIUM)



## Trauma Informed Care

- “Trauma-Informed Care is a strengths-based framework that is grounded in an understanding of and responsiveness to the impact of trauma that emphasizes physical, psychological, and emotional safety for both providers and survivors to rebuild a sense of control and empowerment.” (Hopper et al, 2010)
- “Trauma-informed organizations, programs, and services are based on an understanding of the vulnerabilities or triggers of trauma survivors that traditional service delivery approaches may exacerbate, so that these services and programs can be more supportive and avoid re-traumatization.” (SAMHSA)



## Core principles of trauma-informed systems of care

- Awareness: Everyone understands the impact of trauma
- Safety: Ensuring physical and emotional safety.
- Trustworthiness: Maximizing trustworthiness, making tasks clear, and maintaining appropriate boundaries.
- Choice: Prioritizing consumer choice and control.
- Collaboration: Maximizing collaboration and sharing of power with consumers. Integrating care.
- Empowerment: Prioritizing consumer empowerment and skill-building. Relationships heal. Recovery is possible.



We can't change people's childhoods and traumas, but we can increase our sensitivity to how people function due to the impact of earlier experiences.



## Here's what we can do

- Support trauma recovery (TIC is not trauma recovery or treatment itself)
- Enhance engagement
- Decrease vicarious trauma/compassion fatigue in staff
- Reduce re-traumatization
- Provide "corrective emotional experiences"
- Increase trust
- Understand brain development and chemistry



## How might trauma impact client behavior?

- Difficulty getting motivated and following through with:
  - Treatment
  - Job training
  - Visits
  - Education
- All or nothing thinking
- Seems “turned off”. Lacking emotion.
- Impulsive. Reactive.
- Does not engage in services
- Complains that the system is unfair. Feels they are being targeted.
- Interpersonal conflicts with authorities (attorneys, DHS, judges, etc.)
- Irritable, easily agitated, angry



## Those behaviors are also trauma reduction behaviors

- But those behaviors can drive systems and workers nuts! We observe:
  - Uncooperative
  - Manipulative
  - Doesn't care about rules
  - Non-compliant
  - Difficult to engage
- What other behaviors might we see that may be resulting from trauma?



## TIC lens

What happened to you?

rather than

What's wrong with you?



## TIC language

- I wonder if...
- I notice that...
- Because I know it is hard to remember information in times of stress, can you repeat...
- Accessing services can sometimes feel traumatizing and scary...
- I am getting ready to...
- What you can expect is...



## Discussion

- What are some typical “difficult” behaviors you encounter that may be common trauma responses? Think about the scenario.
- How might you interact with clients to mitigate system impact, reduce trauma responses and increase engagement?
  - Remember principles of TIC:
    - Awareness
    - Safety
    - Trustworthiness
    - Choice
    - Collaboration
    - Empowerment



## TIC in the Courtroom

- What do you need to know more about?
- How can this neuroscience inform how you run your courtrooms and hearings?
  - Developing orders (specifics, language)
  - Managing trauma in the courtroom:
    - Clients
    - Attorneys
    - Court staff
    - Families
  - What else?

● ● ● | TIC is hopeful & transformative

Applying TIC principles will:

- Improve desired outcomes
- Increase engagement
- Decrease vicarious/secondary trauma or compassion fatigue
- Support trauma recovery
- Reduce re-traumatization
- Provide corrective emotional experience
- Educate others