

RCORP-ETC



TRAUMA INFORMED CARE FOR CAREGIVERS AND EDUCATORS

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A trauma-informed approach is, a relationship-based approach. Caregivers and educators play an essential role in helping children and youth recover from traumatic events. The more caregivers and educators learn about how traumatic events affect their children, the more they understand the reasons for their children's behaviors and emotions, and the better prepared they are to offer support and help them cope.

Trauma-Informed Care (TIC) shifts the fundamental question from "What's wrong with you?" to "What happened to you?"(1). Trauma-Informed Care acknowledges the need to understand one's life experience to cultivate a safe, supportive environment and provide the most effective healthcare services and to promote recovery and healing. The Four R's framework is a useful method for deploying TIC at home and in school (1,2):

REALIZE RECOGNIZE

RESPOND RESIST RE-TRAUMATIZATION

RECOGNIZE THE IMPACTS OF TRAUMA

Trauma impacts the brain, body, emotions, and behavior. Children and youth who experience trauma may display the following signs and symptoms:

- Overeating or lack of appetite
- Low mood or loss of pleasure
- Difficulty paying attention or dissociation (including daydreaming)
- Irritable or difficult to soothe
- Aggressive or sexualized behavior
- Difficulty sleeping and nightmares
- Somatic symptoms (e.g., headache)
- Restless, impulsive, or hyperactive
- Social withdrawal and isolation
- Fearful and anxious behavior (e.g., nail-biting)
- Suicidal and self-injuring behaviors
- Developmental regression (e.g., bedwetting)
- Clinginess or separation anxiety
- Difficulty trusting others or guardedness

REALIZE WHAT CONTRIBUTES TO TRAUMA

Many factors can contribute to stress and trauma including but not limited to:

- Poverty
- Incarceration
- Racism and discrimination
- Severe injury or illness
- Violence in the home or local community
- Abuse or neglect
- Homelessness
- Death and loss of a loved one
- Being in an accident or natural disaster
- Substance or alcohol use



TRAUMA-INFORMED CARE ISSUE

What is Trauma-Informed Care?

ACEs and the Importance of Trauma-Informed Care

Combating Provider Burnout and Compassion Fatigue

RESPOND & RESIST RE-TRAUMATIZATION

Provide children and youth a safe and supportive environment

- Use a calm tone of voice and way of interaction helps them to mirror your calm state
- Don't minimize the child's feelings, don't say "Stop being a baby, don't cry". Instead, validate and acknowledge their feelings (e.g., "I can see that you are anxious about")
- Allow children to express their feelings. Help them to name and verbalize their feelings
- Tell children that you are available to listen to the child and help them feel safe
- Create and maintain consistent daily routines and rituals in school and at home
- Establish sensible and fair rules that are clearly explained to establish structure and respect
- Offer children developmentally appropriate choices to enhance their autonomy and sense of control
- Be nurturing and affectionate. Warm and loving relationship helps children feel safe and secure.
- Notice and amplify their strengths. Use positive guidance to support their growth areas.

Help children deal with overwhelming emotions and promote self-regulation

- Take a few deep breaths together or ask them to imagine a relaxing place in their imagination
- Help them gain awareness of their senses (e.g., running hands under cold water)
- Help them notice their current surrounding using their 5 senses (e.g., name what they can see, hear, taste, touch, and smell)
- Offer alternative points of focus from what is stressful (e.g., tell a story, offer water or a book)

Resist re-traumatization

- Recognize the child's individual triggers
- Recognize how the home or school environment can trigger trauma histories

Lastly, in cultivating a supportive trauma-informed environment for children and youth, it is imperative that caregivers and educators identify and deal with their own trauma in addition to engaging in self-care regularly to prevent compassion fatigue, burnout, and secondary traumatic stress.



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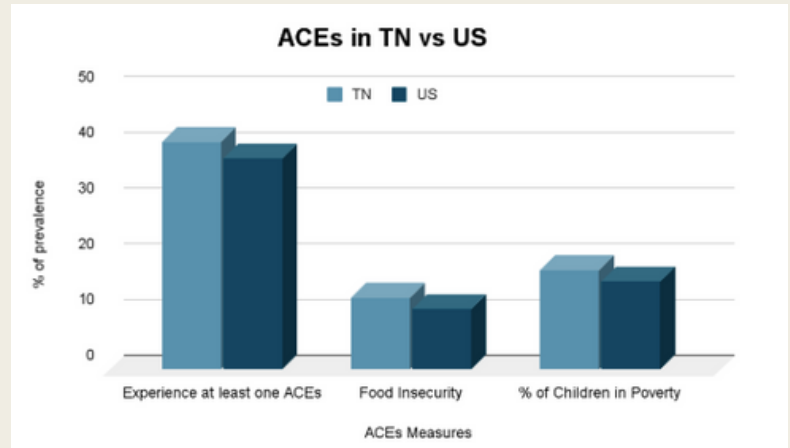
ACEs and Trauma-Informed Care

By Imane Bahanni

Adverse Childhood Experiences (ACEs) are traumatic events that occur in childhood before the age of 18. Traumatic events are disturbing, dangerous events that can pose a threat to a child's life.(1) Adverse experiences include but are not limited to physical, sexual, and emotional abuse, neglect, or household dysfunction.

In Tennessee, nearly 41% of children experience at least one ACE. Compounding the challenge, 13% of children experience food insecurity, and 18% live in poverty; these have also been associated with ACEs and contribute to a greater risk for childhood trauma.(2) Furthermore, ACEs disproportionately affect children of ethnic and racial backgrounds. For instance, in Tennessee, African American children are twice as likely to have two or more adverse childhood experiences compared to White or Caucasian children.

Adverse Childhood Experiences can have short-term and long-term effects on children that can go on to impact them in adulthood. Adverse childhood experiences are linked to both acute and chronic effects. Children who experience traumatic events may have difficulty forming relationships, trouble focusing and learning, as well as difficulty making decisions. Traumatic experiences can also lead to toxic stress -prolonged stress. Toxic stress of ACEs can have long-lasting effects on a child's development, including their immune system, brain development, and stress-response systems.



Traumatic events can increase the risk of older children participating in risky behaviors, such as substance use or unsafe sexual behavior. Evidently, these chronic effects can have lasting health outcomes into adulthood. Studies have shown that ACEs can increase the risk of later developing chronic diseases such as cancer, heart disease, suicide, and COPD. ACEs also show increased involvement with child welfare and justice systems. Adults with ACEs tend to have greater financial and employment difficulties. These issues can then be transferred down to their own children if left untreated. Thus, a cycle of generational trauma.

In response to the growing prevalence of ACEs, a focus on Trauma-Informed Care (TIC) has been introduced in home and school settings. It provides whole-person care by avoiding re-traumatization and creating a welcoming and safe environment for all children, especially those who have experienced trauma.

The TIC approach, therefore, creates a trauma-responsive environment that empowers individuals and families, promotes a positive mindset, and builds trusting relationships(6). Indeed, TIC This approach cancan be helpful to heal trauma and prevent the continuation of trauma the cycle with implications for overall community health. ACEs are a pervasive issue in Tennessee, with high prevalence rates among young children and adolescents. Trauma-informed care involves creating a culture of safety and trust and providing compassionate, individuals and families, promotes a positive mindset, and builds trusting relationships. Indeed, TIC can be helpful in healing trauma and preventing the continuation of the

trauma through client-centered care that recognizes the unique needs of individuals who have experienced trauma. While efforts have been made to promote trauma-informed care in the state, there is still a need for increased awareness, education, and implementation of trauma-informed practices. By embracing trauma-informed care, individuals and communities can create a path to buffer the negative consequences of ACEs toward healing and growth.*

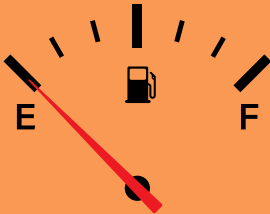
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- 3.<https://www.cdc.gov/violenceprevention/aces/fastfact.html>
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COMBATTING PROVIDER BURNOUT AND COMPASSION FATIGUE

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Trauma-informed care is an important tool for improving patient and/or client experiences, but this type of care takes a great deal of effort and involvement on behalf of the provider, and can take its toll on the providers themselves. Because the work we do has such a huge impact on the lives of those we serve, it's easy to put others' well-being before ourselves, to the point where our own physical and/or mental health suffers as a result. Healthcare and service providers who work closely with people who have experienced trauma, disasters, or serious illnesses or injuries can begin to feel the symptoms of something known as compassion fatigue. This phenomenon can affect aspects of their lives outside of work.



What is Compassion Fatigue?
Compassion fatigue is defined as the gradual lessening of compassion over time, and typically encompasses two elements: empathy burnout and secondary traumatic stress. Burnout is associated with feelings of exhaustion, helplessness and/or being overwhelmed. Secondary trauma can make providers feel as if the trauma they see experienced by their patients or clients is happening to them or their loved ones which can be extremely distressing. Careers that involve various sources of stress with little time to recover between these stressors can often create an environment where compassion fatigue is common

Signs and Symptoms

- Chronic exhaustion (both physically and mentally)
- Reduced feelings of sympathy or empathy in work and personal life
- Helplessness
- Cynicism, or pessimism at work and in personal life
- Hypersensitivity or complete insensitivity to emotional material
- Feelings of apathy
- Frequent headaches
- Poor work-life balance
- Avoidance or isolation from others
- Trouble sleeping
- Weight loss
- Impaired decision-making
- Diminished sense of career fulfillment
- Problems in personal relationships

Strategies for Reducing and Preventing Compassion Fatigue

As service providers, the best way to combat compassion fatigue is to check in with ourselves as best we can. SAMHSA provides a list of tips to prevent or reduce compassion fatigue in providers.

- Emotional regulation
 - Watch for warning signs that your stress response has been triggered
 - Incorporate meditative practices such as Deep Breathing, Shallow Breathing, and Belly Breathing
 - Make time for self-care and relaxation in or daily or weekly routine
- Boost resiliency
 - This can be done through getting adequate sleep, eating well, regular physical activity, and active relaxation
- Setting boundaries
 - Set limits with the people you help – appointment times, clear roles and expectations – good for you and for people who have a history of trauma • Setting limits within the workplace – your availability, your workload, how your time is spent • Setting limits with family and friends – it’s okay to say “no” to take care of you. I’ll give you a resource on how to do this • Setting limits with self – loving discipline. Work hours, nourishment, how time is spent.
- Foster a support system
 - It’s important to stay in regular contact with loved ones, even when it’s hard or feels overwhelming

It may also be a good idea to develop positive and supportive relationships with others in your field, as they can understand what you may be going through. Ask a coworker to be a self-care buddy, or plan to attend regular group mental health check-ins.

To properly take care of others we must take care of ourselves!

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