Orange County CoC

Trauma-Informed Care in Practice Training

August 29, 2024 Developed & Facilitated by Aubrey Sitler

Welcome & Intros

FACILITATOR



Aubrey Sitler she/her | MSW, MPP Independent Consultant, ACStrategies

PARTICIPANTS

In the chat, tell us your:

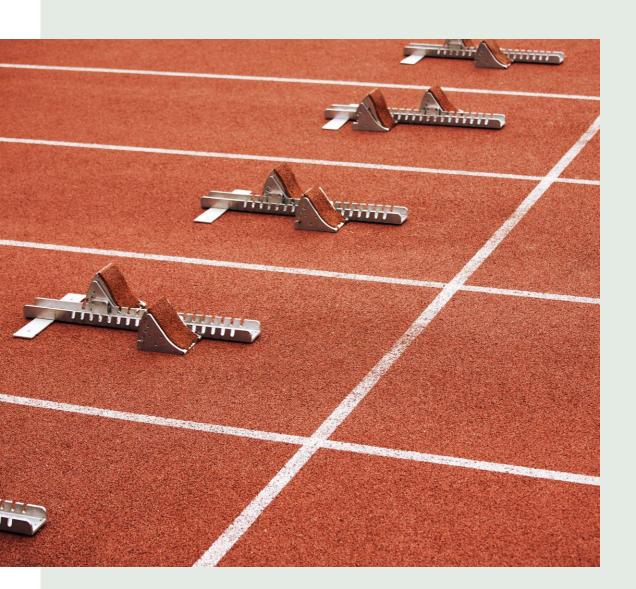
Name

Pronouns

Organization & Role

Agenda

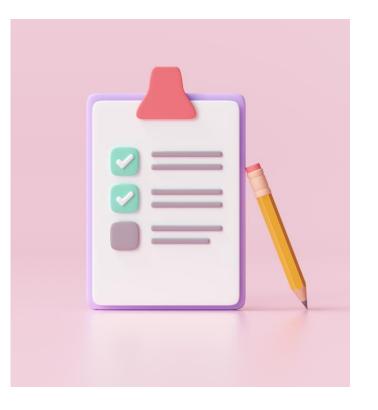
- Welcome & Introductions
- Level-Setting
 - Practice Tools
- Trauma Definitions
 - Primary Trauma
 - Vicarious Trauma
 - Secondary Trauma
- Trauma-Informed Care in Practice
 - Strategies & Tools
 - Scenario Discussion & Reflection



Level-Setting

Training Goals

- Lean into your learning edge. There is always more to learn, and there are always more ways to improve how we support folks experiencing homelessness and each other.
- Build on Dusty Olsen's Trauma-Informed Care (TIC) training (<u>link</u>) & dig more deeply into how trauma impacts providers & how systems and organizations can be trauma-informed.
 - Secondary & vicarious trauma for service providers (e.g., supporting people surviving abuse or trauma, death of a resident)
 - o Secondary & vicarious trauma for clients (e.g., when a client witnesses something harmful or retraumatizing happen in a residential program)
 - Primary trauma for service providers (e.g., when a client shouts at or threatens their case manager, death of a resident)
- Make connections between TIC and other key principles in practice: harm reduction, Housing First, providing low-barrier services and supports, racial equity/antiracism, LGBTQ+ equity, client autonomy & choice
- Practice self-reflection and problem-solving



Group Agreements & Expectations



Lean into your learning edge. There is always more to learn, and there are always ways to improve how we support folks experiencing homelessness and each other.



Be present. Tend to yourself, participate as you are able and in the ways that work best for you, and commit to being engaged in our conversation today.



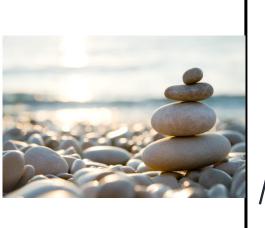
Grab a pen & paper. There may be times where you're asked to do some personal reflection.



Engage with care. Do not share personal information about clients, and protect your own personal information and experiences.



Practice Tool: Window of Stress Tolerance



Shutting down; 'checkedout' or 'out of it'; low energy; freeze

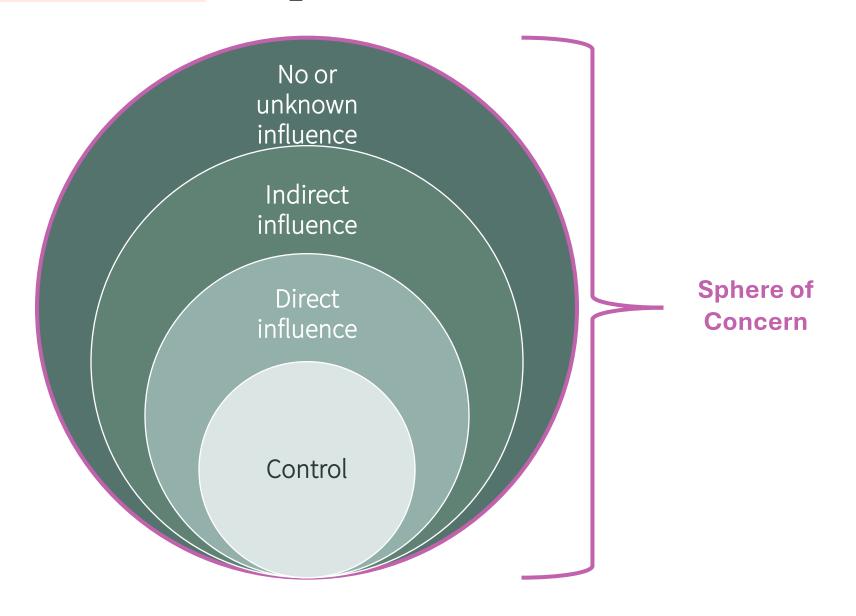
High activation; fast reaction 'on-edge'; fightor-flight

Thinking & feeling in balance; 'in my body'; able to engage effectively, learn, process complex information, be reflective

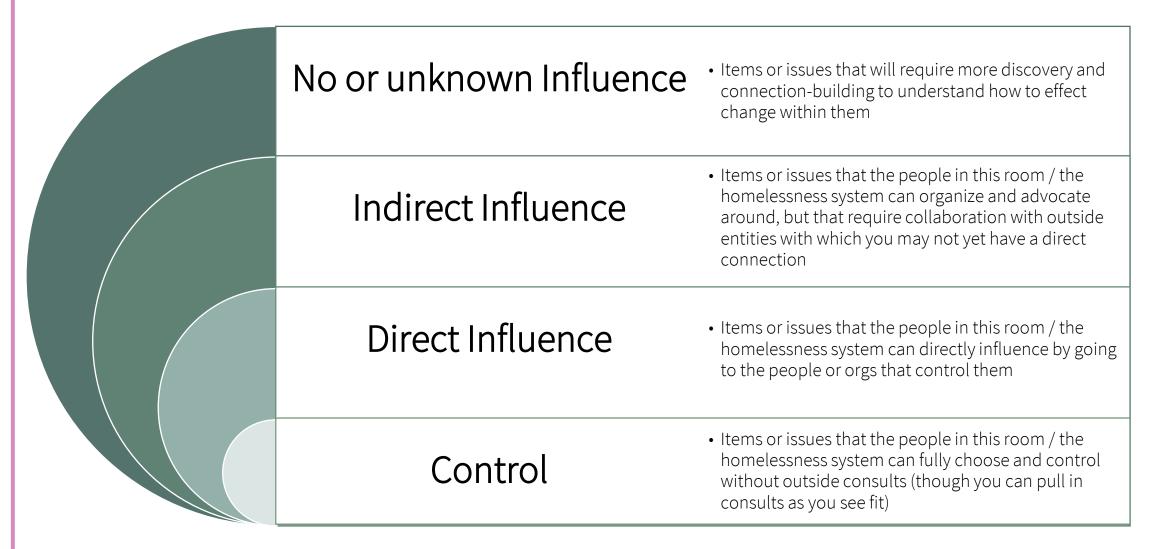
Practice Tool: 4 "I"s, or Levels, of Oppression & Equity

Ideological:	Widely held beliefs, truths, and values
Institutional:	• Rules, policies, and procedures that institutions, governments, agencies, and other entities hold and enforce (e.g., how your org does things)
Interpersonal:	 Actions, behaviors, and language used between 2 or more people (e.g., between staff members, between staff and client)
Internalized/Personal:	 Values, beliefs, and feelings an individual holds about themselves and others

Practice Tool: 4 Spheres of Influence



Practice Tool: 4 Spheres of Influence





Trauma Definitions

How would you define...

Trauma

 An event, series of events, or set of circumstances experienced by an individual as physically or emotionally harmful or life-threatening and that has lasting adverse effects on the individual's functioning and mental, physical, social, emotional, & spiritual well being. (SAMHSA)

How would you define...

Primary Trauma

- Trauma someone experiences directly.
- Example causes: Living through childhood abuse, car accident, hurricane, intimate partner violence.

Vicarious Trauma

- Trauma someone experiences by hearing the trauma story of another person over the course of time.²
- Shifts in one's inward beliefs, worldview, and mindset feeling hopeless about relationships, the state of the world.³
- Example causes: Working at a domestic violence shelter and constantly supporting clients who have all experienced lethal abuse; working in any shelter where it takes a very long time for people to get housed and many people never end up getting resources from the homeless system.

Secondary Trauma(tic Stress)

- A type of trauma someone experiences by hearing the trauma story of another person once or over the course of time.²
- "A natural but disruptive by-product of working with traumatized clients. It is a set of observable reactions to working with people who have been traumatized and mirrors the symptoms of post-traumatic stress disorder (PTSD)."⁴
- Shifts in one's outward reactions and engagement (or lack thereof) with the world around them. It often shows up as PTSD symptoms hypervigilance, flashbacks, emotional detachment, etc.³
- Example causes: Working with a client who has experienced ongoing or one-time sexual violence; witnessing a violent crime.

How would you define...

Compassion Fatigue

- A gradual erosion of empathy, hope, and compassion stemming from the emotional burden of helping or caring for those who are traumatized, suffering, or in distress.
- A potential expression of vicarious or secondary trauma.
- **Common symptoms:** Emotional exhaustion and numbness, intrusive thoughts or nightmares about clients' traumatic experiences, hypervigilance or heightened anxiety, physical symptoms such as headaches, gastrointestinal issues, or sleep disturbances, difficulty separating work life from personal life, decreased sense of career satisfaction or purpose

Burnout

- A state of chronic physical and emotional exhaustion, often accompanied by cynicism and detachment from work caused by work-related stress (e.g., too much work, time pressure, lack of control over your work, insufficient rewards or recognition, lack of community at work, lack of fairness or transparency in decision-making, conflicting values with employer).
- Can occur in any profession and is not limited to those in helping roles.
- **Common symptoms:** Emotional exhaustion (feeling drained, unable to cope, lacking energy, and waking up tired every day, increased irritability and impatience); developing a cynical or detached attitude towards work or clients; feeling ineffective, unproductive, uncreative, and unmotivated; physical symptoms (headache, muscle tension, gastrointestinal symptoms); neglected self-care.

Example Causes of Secondary & Vicarious Trauma



Listening to individuals' stories or experiences of traumatic events (*staff and clients*)



Bearing witness to community violence or collective trauma (e.g., social media exposure and historical trauma / racism) (*staff and clients*)



Reviewing case files (staff)



Responding to violence or acute crises/ incidents over time (*staff*)



Being exposed to / witnessing a setting where others are experiencing and responding to violence/acute crises over time (*clients witnessing staff roles*)

Who's at risk of vicarious & secondary trauma?

• People in helping professions.

- Between 40% and 85% of "helping professionals" develop vicarious trauma, compassion fatigue, and/or high rates of traumatic symptoms (Mathieu, 2012).
 "Helping professionals" include social workers, nurses, doctors, first responders, teachers, support staff like janitors and administrators working in helping orgs.
- People of all ages.²
- Women, and especially women of color, are more likely to experience vicarious trauma.²

"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." -R. N. Remen, M.D. 1996

Sources

^{1. &}lt;u>What Is Vicarious Trauma? How To Cope (clevelandclinic.org)</u>

^{2. &}lt;u>What Is Vicarious Trauma? (choosingtherapy.com)</u>

^{3.} Secondary Trauma: Definition, Symptoms, & How to Cope (choosingtherapy.com

^{4.} Secondary Traumatic Stress | The Administration for Children and Families (hhs.gov)

Different folks are impacted differently.

There's higher risk of significant secondary & vicarious trauma symptoms and impacts for people who:

- Have prior traumatic experiences (especially experiences that are similar to clients' experiences)
- Are socially isolated, both on and off the job
- Tend to avoid feelings, withdraw, or assign blame to others in stressful situations
- Have difficulty expressing their feelings
- Lack preparation, orientation, training, and supervision in their jobs
- Are newer employees and less experienced at their jobs
- Have constant and intense exposure to trauma with little or no variation in work tasks
- Lack an effective and supportive process for discussing traumatic content of the work
- Are marginalized and have experienced institutional, historical or systemic trauma, especially multiple intersectional traumas.



Trauma-Informed Care in Practice: Tools & Strategies

Symptoms of Vicarious & Secondary Trauma

Physical

Behavioral

Professional

Cognitive

Spiritual/World View

Emotional

Interpersonal

Symptoms of Vicarious & Secondary Trauma

Physical Symptoms

- Sleep disturbances
- Change in appetite
- Impaired immune system
- Low energy & exhaustion
- Fatigue, aches, and pains

Behavioral Symptoms

- Increase in substance use
- Lower motivation
- Withdrawal from activities that you enjoy
- More risk taking or impulsive behaviors

Professional Symptoms

- Tardiness & absenteeism
- Decrease in quality & quantity of work
- Lower motivation
- Increased mistakes

Cognitive Symptoms

- Diminished concentration
- Loss of focus
- Loss of interest
- Self-doubt decrease in confidence
- Perfectionism
- Difficulty with decisions
- Poor judgment
- Hyper-vigilance/worry

Spiritual/World View Symptoms

- Overwhelming feelings of the unfairness of life
- Anger at higher power
- Questioning your own beliefs
- Loss of sense of purpose
- Hopelessness in future

Emotional Symptoms

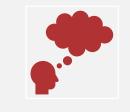
- Anxiety
- Guilt
- Irritability and/or anger
- Sadness
- Loss of empathy/Apathy
- Hopelessness
- Depression
- Emotional shutdown
- Difficulty managing emotions

Interpersonal Symptoms

- Withdrawal from colleagues and loved ones
- Mistrust
- Intolerance
- Feelings of loneliness
- Poor communication leading to conflicts
- Decreased quality of relationships

Activity: Symptoms & **Responses to** Vicarious & Secondary Trauma

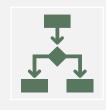
Jamboard Link



Internalized Level: How have you seen each type of vicarious or secondary trauma symptom show up in yourself or others?



Internalized / Interpersonal Level: How do you re-center yourself or support others who are demonstrating these symptoms?



Institutional Level: How does or could your organization promote policies & procedures that support staff and clients when they experience vicarious or secondary trauma?

What can you do to prevent & address vicarious & secondary trauma?



- Seek support and guidance from your supervisor if you are unsure how to do any of the following
- Take time off use your vacation days, sick days, mental health/personal days, and short-term medical leave if needed.
- Set clear emotional boundaries with clients or patients
- Practice mindfulness and self-awareness techniques
- Engage in regular self-reflection and processing of emotional experiences
- Seek supervision or peer support to discuss challenging cases
- Develop a strong support network outside of work
- Identify activities that feel healing, calming, and/or energizing for you, and engage in activities them when you need to replenish emotional resources (socializing, physical activity, engaging with your spirituality or creativity, etc.)
- Learn to recognize what early signs of empathy depletion, vicarious trauma, and secondary trauma look and feel like for you, and take proactive steps to address them as soon as you recognize them
- Seek mental health support (e.g., therapy) to help process your experiences, symptoms, needs, and strategies

What can you do to prevent & address vicarious & secondary trauma?



Immediate Term

- What can I do now? In the next 2 hours? In the next day?
- Examples: take a reset break, take a walk (with or without a friend), watch a movie, journal to process feelings & symptoms, bake cookies with my kid.

Short Term

- What can I do in the next week? 2 weeks?
- Examples: Talk with supervisor about concerns to develop strategies, rethink how I plan and schedule out my week (e.g., vary tasks more intentionally), look for a therapist.

Long Term

- What can I do in the next month? 6 months?
- Examples: Advocate for systemic change at my org (supervision and support, staffing and pay structure), consider a role, org, or career change.

What can you do to prevent & address vicarious & secondary trauma?



Principles of Trauma-Informed & Equitable Organizations



Understanding trauma & oppression



Naming & addressing power & privilege



Recognizing intersectionality



Honoring identity in healing & resilience

Building a culture of self & collective care



Advancing equitable participation



PDF Handout: Adapted from Boston Public Health Commission (2020) SAMHSA (2018)

Principles of Trauma-Informed & Equitable Organizations

- Reflect on your own:
 - What are your reactions to reading through these principles? Does your workplace already embed some of them?
 - Which principles feel simplest/easiest to incorporate into your work? Into your team/organization more widely?
 - Which feel most challenging? Why?
- Large group back together:
 - Any principles you have questions about?
 - Share out key takeaways or themes

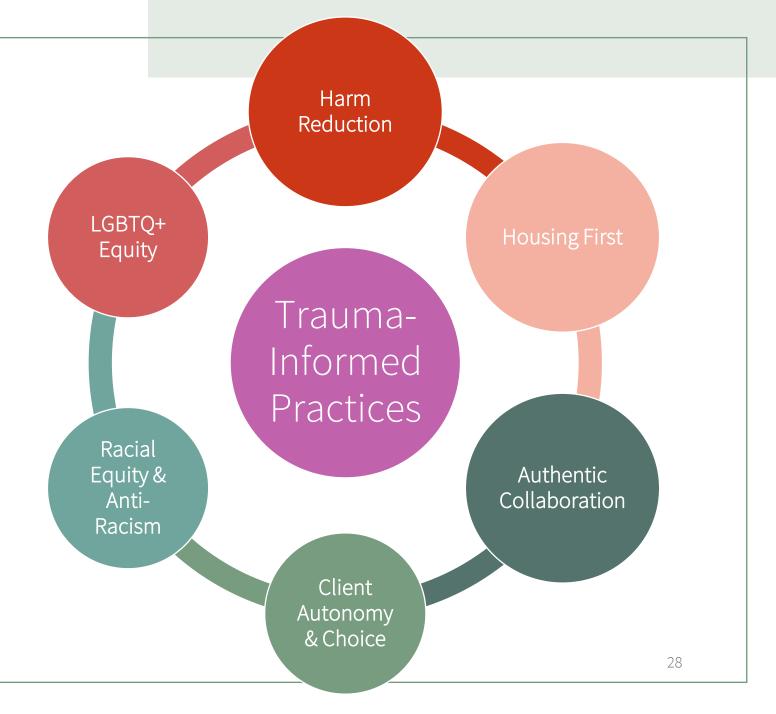


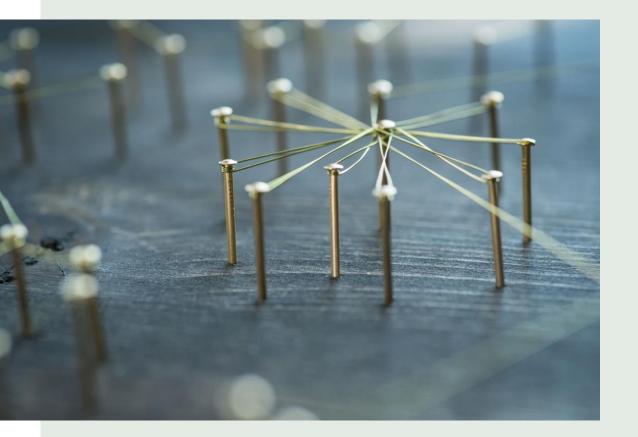
Photo of Poppy, taken by Aubrey 😊

Additional Tools to Prevent & Address Vicarious & Secondary Trauma

- <u>The Compassion Fatigue Workbook</u> (free version not available)
- <u>White Dominant Culture & Something Different Framework</u>. This framework names ways that our culture, institutions, and organizations embed norms and expectations that uphold white supremacy culture, whether we intend for them to or not. It also presents alternatives to begin to dismantle those norms, reminding us that we have choices in how we structure our organizations, programs, and teams.
- <u>Understanding Generosity Burnout and Solutions</u>
- Free trauma worksheets available <u>here</u>
- <u>Secondary Traumatic Stress Informed Organizational Assessment</u> (STSI-OA) (University of Kentucky Center on Trauma & Children)
 - Supplemental video: Innovations in addressing secondary traumatic stress in the workplace (youtube.com)
- What else? Add your ideas & tools you use in the chat.

Trauma-informed practices intersect with many other core principles





Case Scenario: Discussion & Reflection

Reminders & Expectations for Engagement

- Talking about examples of client interactions may be triggering to you or others on this call. Take care of yourself, and walk away if needed.
- Do not share confidential client information.
- Protect your peace, and do not disclose personal information about yourself.

Scenario

Jesse (they/them) is a 22-year-old client accessing services at a drop-in center. They are upset that they are unable to use the laundry machine. They had signed up for the 3pm time slot, but did not arrive until 4pm, and other clients are signed up to use it for the remainder of the evening. Jesse is frustrated by the situation and starts yelling at staff and other clients, and swearing about how "f'ed up" the rules are. A staff member explains that they tried to find Jesse at 3pm to put their laundry in, and they couldn't find them. Jesse responds by punching a hole in the wall and continues to get more frustrated and upset, saying, "This always happens to me. Why can't I just do what I need to do so I can go study?"

The staff member finally says: "That's it, Jesse. You can't be screaming and breaking things in here. You're banned from the drop-in center for the next week."

Thank you!

Please reach out with questions & feedback.