

Trauma-Informed Practice

Presented by: The Centre For
Teaching and Learning at
Georgian College
(Melanie Doyle)



Land Acknowledgment



- I grew up on and currently live on the land of the Anishinaabe, Wendake, and Mississauga. This land is part of the Lake Simcoe Purchase Treaty No. 16. For a short time, I was fortunate to have lived on the lands of the Coast Salish on Vancouver Island, part of the Douglas Treaties.
- My connection to land developed as an adult, once I discovered a love for camping. I am learning that I feel most at peace when I am hiking in the trees or walking along a shore. I am still learning about my connection to all the lands that I am fortunate enough to walk, camp, live and vacation on.
- I recently learned about the Calls to Action and feel especially drawn to #62.ii, and Calls for Justice, #7.2.



How are you feeling today?

- On a Scale 1-5 (5 being best day ever, and 1 being the opposite of that)
- Zoom Poll





Let's go to the PADLET

What do you think of
when you hear the
word trauma?

Outcomes

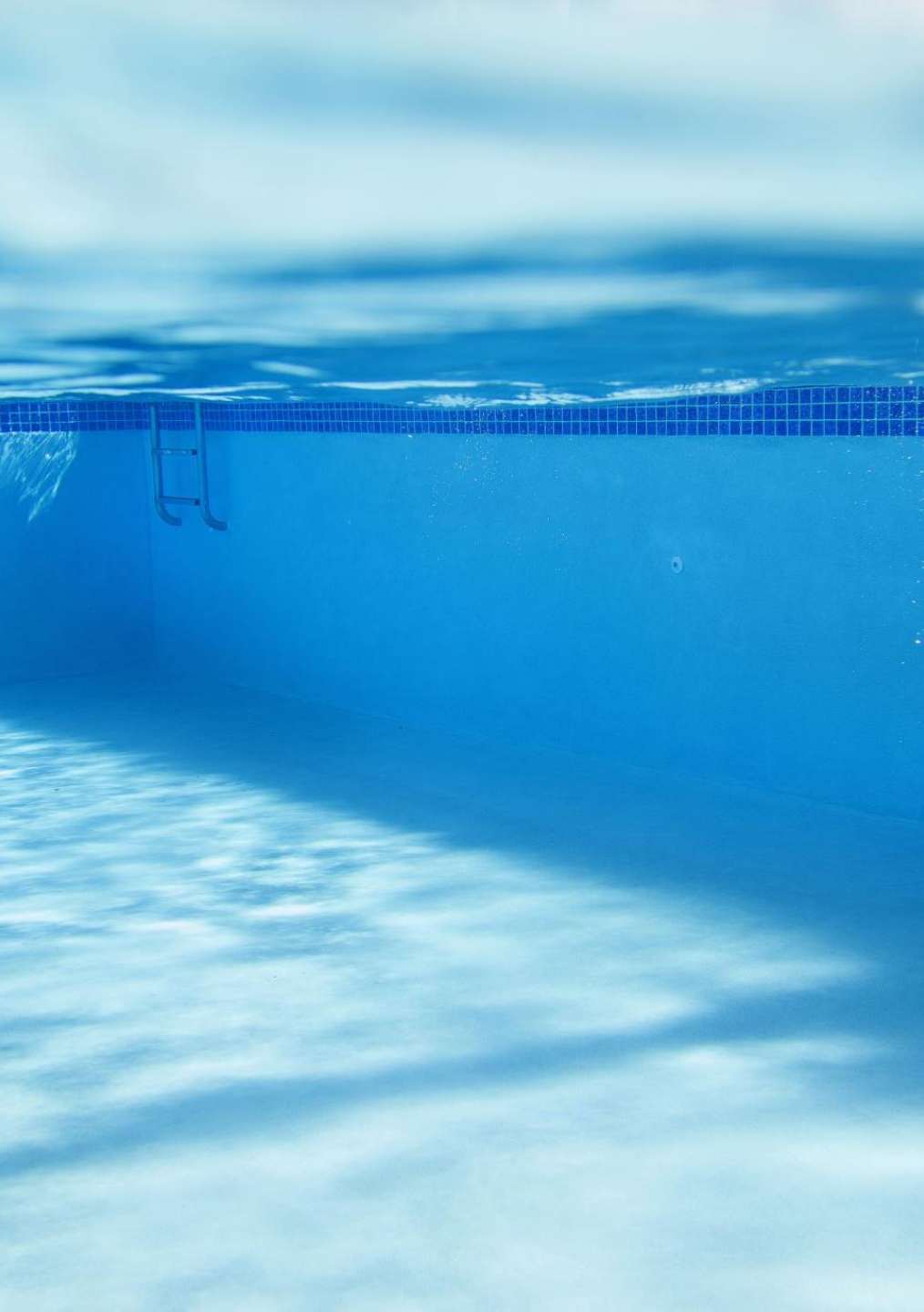
1. Define Trauma and Trauma-informed practice.

2. Explore the framework for TIP.

3. Apply principles to your work.

4. Practice grounding.





Trigger Warning

- **Some of the content in this session may be difficult for you, it could provoke emotions and trigger a response you did not expect.**
- **You are not trapped, you can leave, you can go off screen, take a break.**
- **Suggestion: grab a pen, write down 2 ways you can handle triggers during this session**
- **(principles: Safety, Trust, Choice, Empowerment, Resilience)**



Grounding Activity



Definitions WHAT

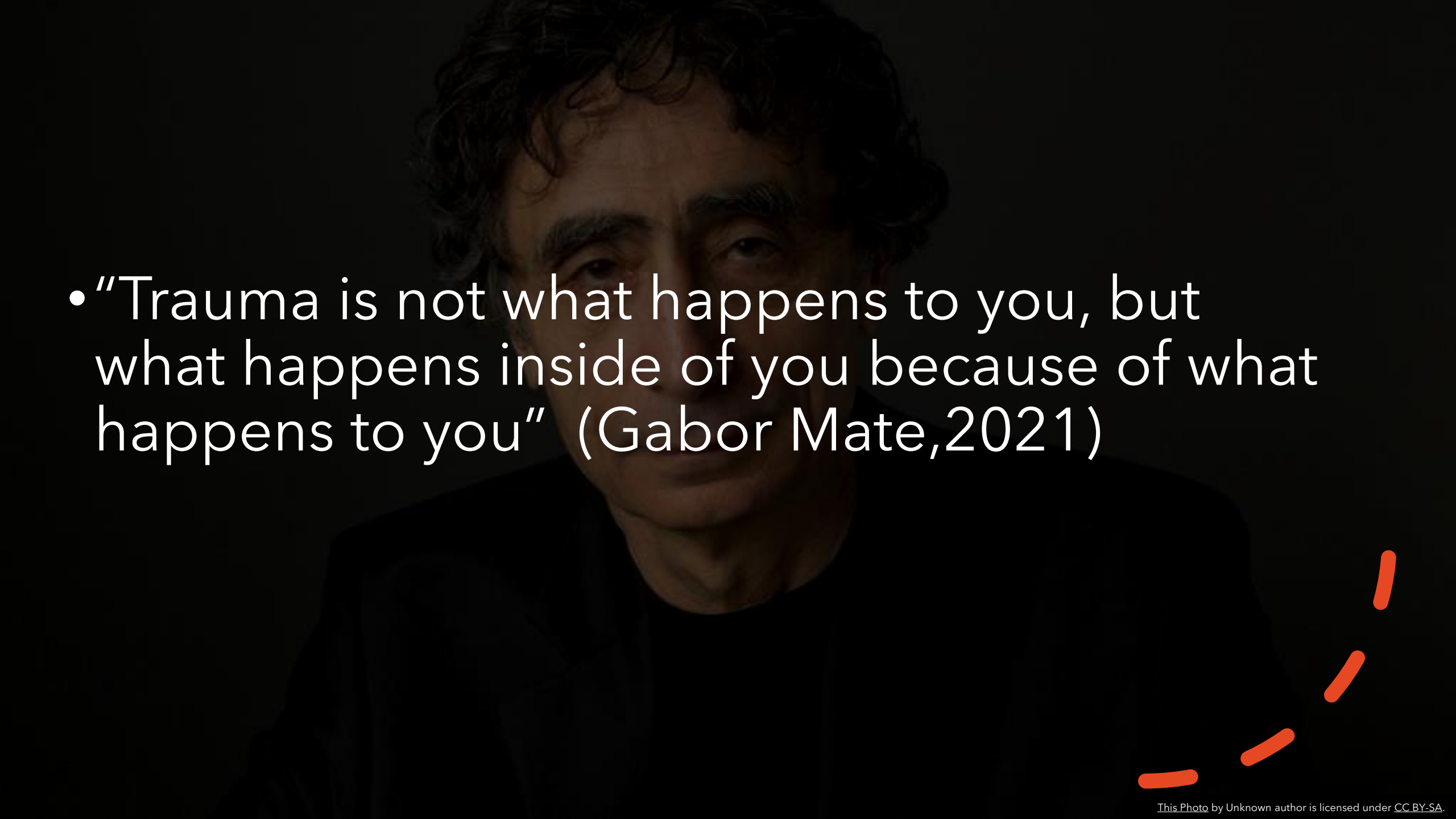
- Trauma-informed Practice
 - Trauma
 - Vicarious Trauma
 - Generational Trauma
-
- First let's go to the poll for 2 questions



Trauma

- "It is a **RESPONSE** to an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or threatening and that has lasting adverse effects on the individual's functioning and physical, social, emotional, or spiritual well-being." (Imad, 2020)



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- “Trauma is not what happens to you, but what happens inside of you because of what happens to you” (Gabor Mate, 2021)

Types of Trauma

- **Acute/PTSD**: Short term, unexpected event. Ex. Natural disaster, automobile accident
- **Individual Identity/Complex**: Sustained, repeated ordeal stressors. Ex. Combat, domestic violence, ongoing abuse
- **Collective Identity Trauma/Continuous Traumatic Stress**: ongoing systemic/cultural oppression. Ex. Racism, sexism (Carello, 2020; SAMHSA, 2014, Kira et al, 2013)



Types of Trauma

- **Generational trauma** is trauma that extends from one generation to the next. It begins when a group experiences a traumatic event that causes economic, cultural, and familial distress. In response, people belonging to that group develop physical or psychological symptoms. (Gillespie, 2023)
- **Historical trauma** and unresolved **historical trauma** is “the cumulative emotional and psychological wounding across generations, including the lifespan, which emanates from massive group trauma” [13].

More Trauma terms Defined

- **Vicarious Trauma**: Also known as secondary, bearing witness to others trauma; cognitive changes such as sense of self and worldview Ex. Stories we hear from others transfer onto us in a way where we are also traumatized (images, details) (Mathieu, 2012)
- **Secondary Trauma**: the emotional and psychological effects experienced through vicarious exposure to the details of others trauma
- **Compassion Fatigue**: emotional residue of the exposure; Loss of empathy for, and frustration with, clients from the effects of hearing about another's trauma, and fatigue from not being able to help a traumatised person
- Anyone can also experience stress when hearing about a loved one's trauma. That stress is very valid and natural, and sometimes it can lead to PTSD or other mental health difficulties, like depression and anxiety. **However, it is not the same as the concept of vicarious trauma.**
- **Burnout**: associated with workplace stress; loss of interest in things that used to inspire passion in us, those things are now tedious and unpleasant. Loss of motivation

Direct and Indirect Trauma exposure



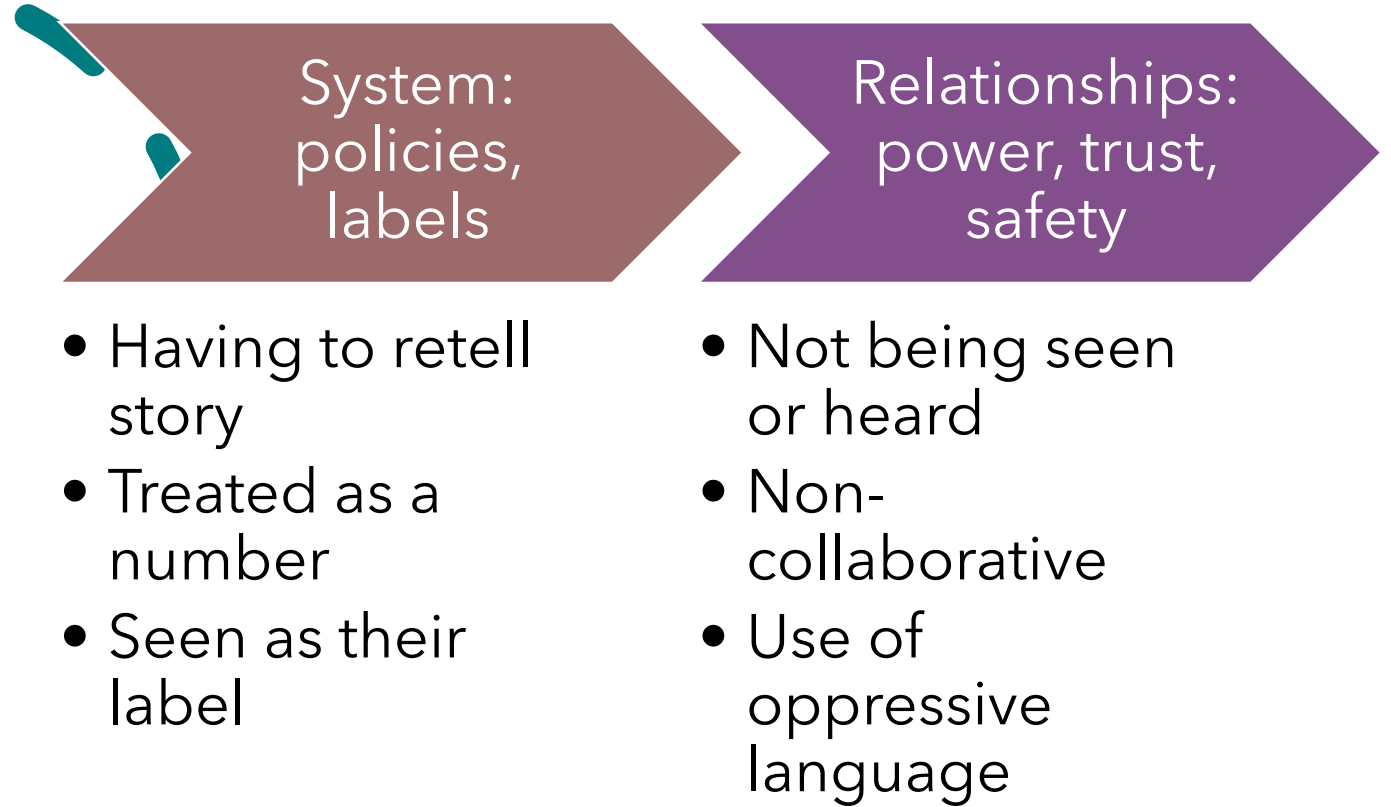
Indirect trauma exposure: listening to trauma narratives; increases risk of burnout, re-traumatization, secondary traumatic stress



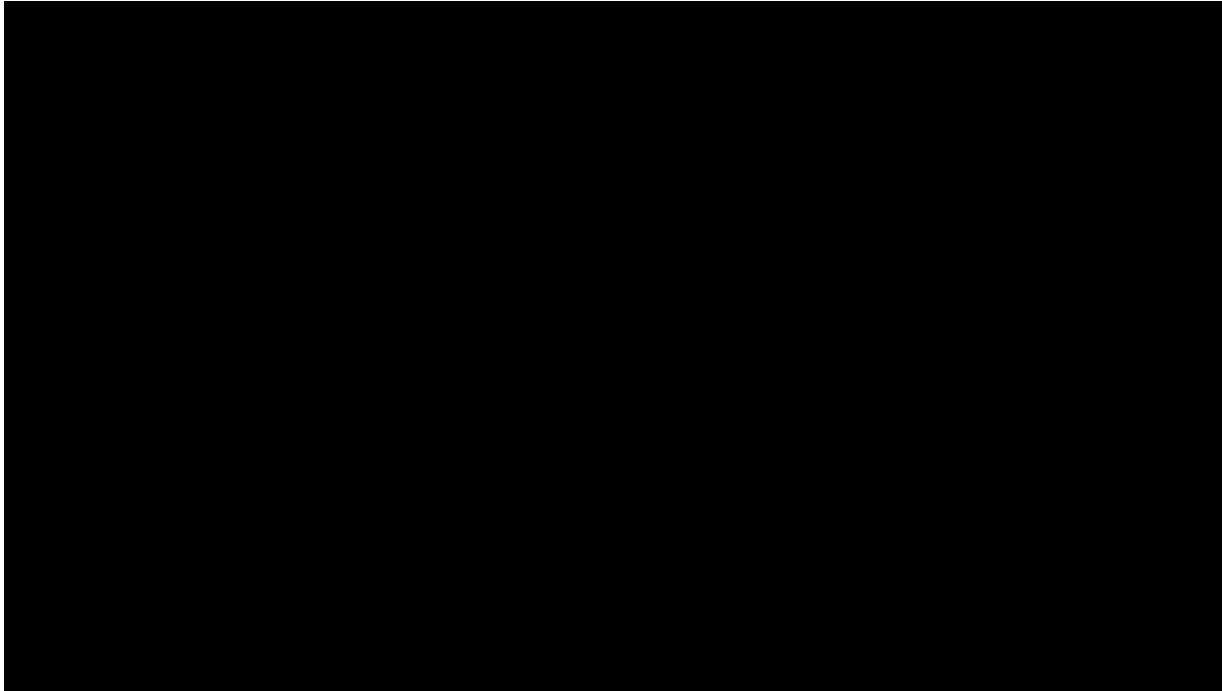
Direct trauma exposure: increased risk of PTSD, depression, substance use, leaving school/work, poor grades

- Traumatic stress reactions or symptoms that develop after multiple exposures to events that are perceived as traumatic (Duckwork & Follette, 2012)
- Reactivation or triggering of trauma stress reactions
- Feeling numb, negative thoughts and mood, agitated or wound up
- Fear, betrayal, violated

Re-traumatization



What is trauma? The author of “The Body Keeps
the Score” explains | Bessel van der Kolk | Big
Think - YouTube





Some staggering stats

- 80% of women in prison experienced sexual and physical abuse
- 50-79% of men who experienced maltreatment before the age of twelve experienced serious involvement with the justice system
- An estimated 50% of all Canadian women and 33% of Canadian men have survived at least one incidence of sexual or physical violence



Trauma Effects

- Changes to the brain
- Compromised immune systems
- Increased physical and mental stress
- Decreased trust
- Attachment difficulties and conflictual relationships
- Hyperarousal and hypervigilance
- Rigid or chaotic behaviour



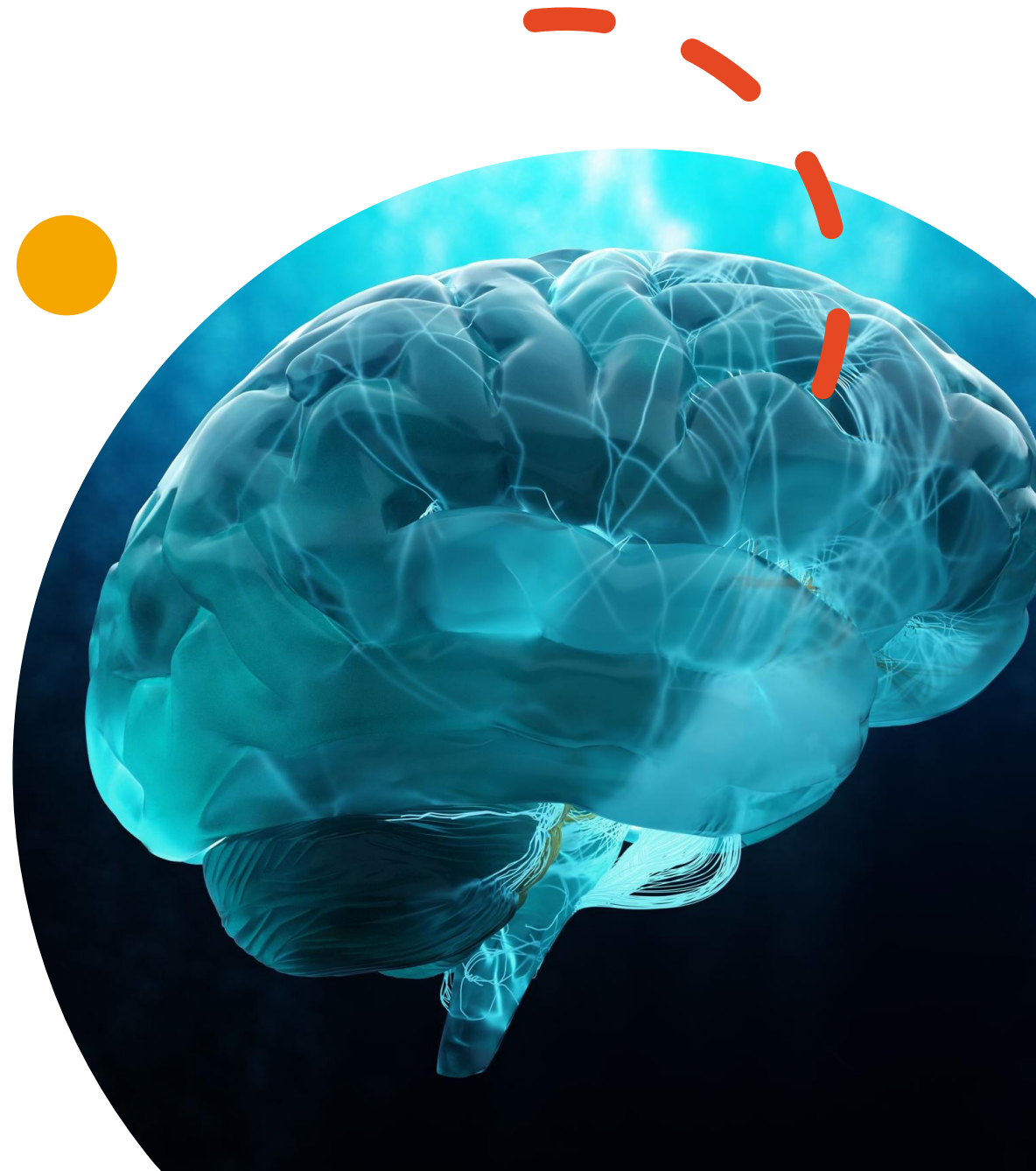
How do the effects of Trauma show up?

- Excessive **crying**
- **Irritability**, anger, or fearfulness
- Flashbacks or replaying the experience
- Nightmares or **trouble sleeping**
- **Alcohol or drug use** as a way to cope
- Physical symptoms like **stomach pain or headaches**
- Chronic fatigue
- **Hypervigilance**
- **Perfectionism**
- Jumpiness, excessive sweating, or a **racing heart rate**
- Engages our fight, flight, freeze fawn, shutting down ability to problem solve
- Exacerbates feelings of risk, which comes with new tasks
- Self-regulation is more limited (focus, time management, planning, studying)



So how does trauma affect the brain?

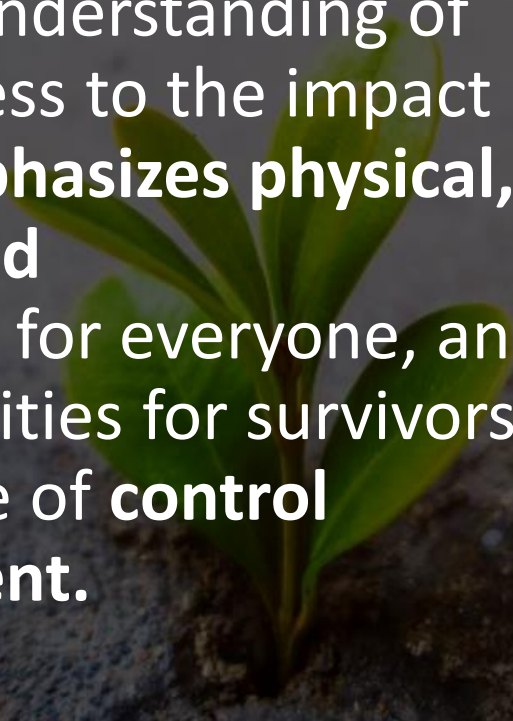
- **Prefrontal cortex:** executive functioning; ability to regulate emotions and critically think (goes offline when threat is perceived)
- **Amygdala:** emotions such as fight, flight, freeze; activated when danger is perceived (increased reaction in a traumatized brain)
- **Hippocampus:** learning and new memory (smaller in people who have experienced trauma)
- [Dr Daniel Siegel presenting a Hand Model of the Brain - YouTube](#)





Misinterpretation

- the traumatized person in a state of alarm (for example thinking about an earlier trauma) is less capable of concentrating, more anxious, and more attentive to nonverbal cues such as tone of voice, body posture and facial expressions
- They may, in fact, **misinterpret such cues** because of anxiety induced hypervigilance (Perry, 2006, p. 24).
- What we may see in an individual might be an emotional response to a trauma-related (subconscious) memory, or our executive functioning is inhibited as something is perceived as a threat

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- Trauma-Informed Practice is a **strengths-based framework** grounded in an understanding of and responsiveness to the impact of trauma. It **emphasizes physical, psychological, and emotional safety** for everyone, and creates opportunities for survivors to rebuild a sense of **control and empowerment**.



Trauma-informed Practice



Trauma-informed care

- Trauma-informed care (TIC) is a lens that allows helping agencies to understand a client's current problems in the context of past victimization and to ask "what happened to you," not "what's wrong with you?"

From (Deficit Perspective)	To (Trauma-Informed, Strengths-Based)
What is wrong?	What happened?
Symptoms	Trauma responses/adaptations/coping
Disorder	Response
Attention seeking	Individual is trying to connect
Controlling	Individual is trying to assert their power
Borderline	Individual is doing their best given their early life experiences
Manipulative	Individual has difficulty communicating directly
Malingering	Seeking help in a way that feels safer
Treatment resistant	Our formulation/plan isn't meeting the



Framework

- Trauma-informed care is an approach developed by The Substance Abuse and Mental Health Services Administration (SAMHSA) that was adapted from Harris and Fallot's (2001) foundational work which highlighted five principles as a frame for practice.
- Building on this research, SAMHSA added a sixth principle (Cultural, Historical, and Gender Issues)
 - **Safety;**
 - **Trustworthiness and Transparency;**
 - **Peer Support;**
 - **Collaboration and Mutuality;**
 - **Empowerment, Voice, and Choice;**
 - **Cultural, Historical, and Gender Issues**



principles as wheel of practice

Trauma informed approach

- Along with this shift from the individual to the social, a trauma-informed approach acknowledges the vast and **interconnected nature of trauma** and being significantly **rooted in institutional oppression**.
- Integrating trauma-informed practice at the institutional level requires “fully integrating knowledge about trauma into policies, procedures, and practices, and seeks to actively resist re-traumatization” (SAMHSA, 2014, as cited in Venet, 2021, p. 5).

Equity Centered Trauma Informed Principles

- **Safety:** foundational; physical space and interactions promote safety. Feel safe to make mistakes
- **Trustworthiness and Transparency:** people are first, practice transparency, be accountable, own mistakes, apologize, give grace, be clear, explain what, why and how.



Equity Centered Trauma Informed Principles



- **Peer Support:** vehicle for establishing safety and building trust, use of lived experience, connect people where possible
- **Collaboration and Mutuality:** learning centered, focus on strengths not deficits, share decision making, share power

Equity Centered Trauma Informed Principles

- **Empowerment, Voice and Choice:** help clients transform silence into language and action, empower them to make choices
- **Cultural, Historical and Gender Issues:** must acknowledge oppression, interrogate your own privilege, be open to learning about others culture





- We are NOT trauma detectives.



Scenario

- You are hosting a synchronous session for your clients in Zoom. They don't turn on their cameras.

- What is a trauma-aware response?

Scenario

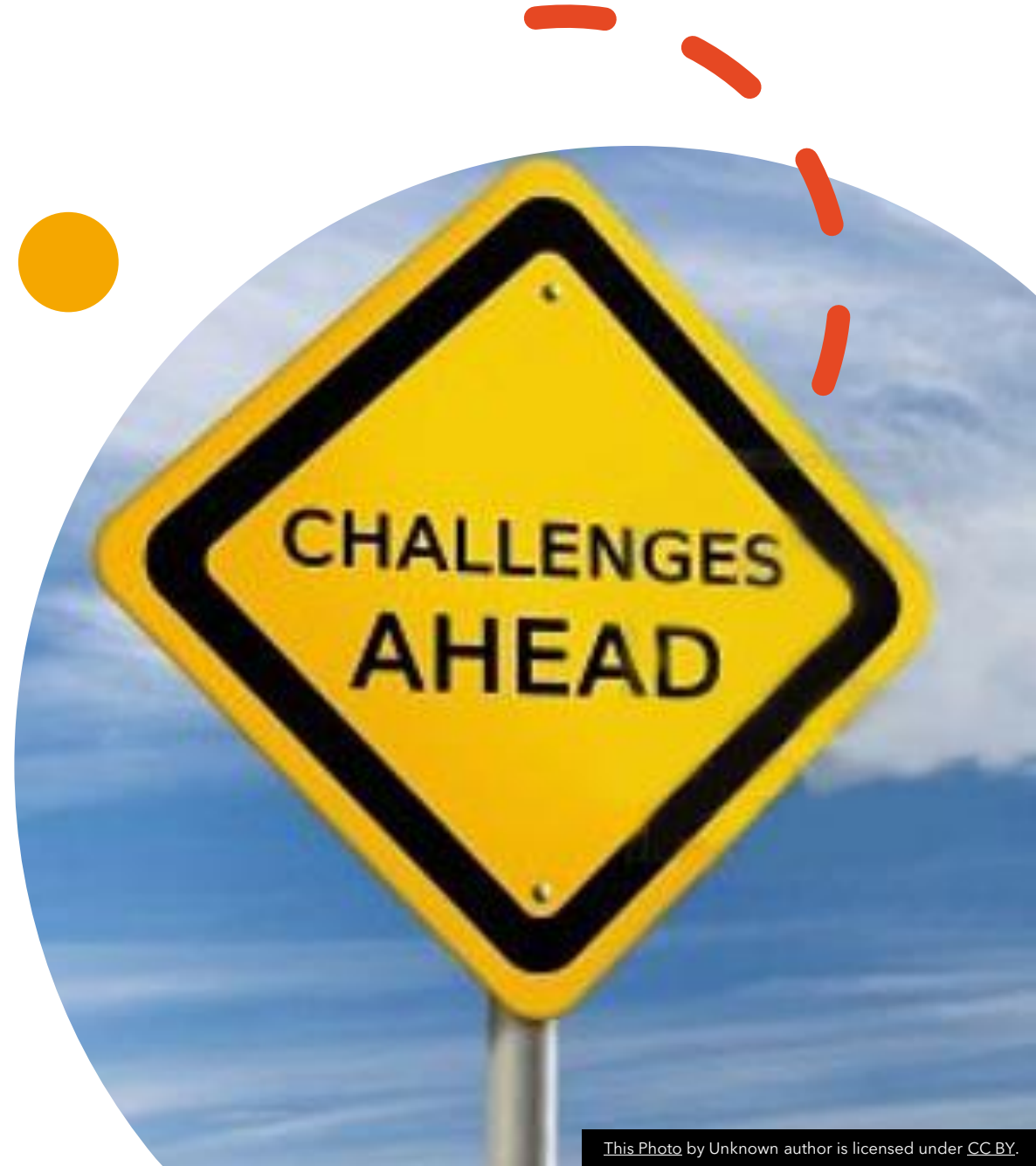
- Chris is a client has emailed to state their mother was killed in a car accident yesterday and needs to reschedule their session.

What would be a typical response?

Trauma-informed?

Scenario

- You are working with an Indigenous woman who has disclosed her experience of recently living in poverty.
- How might you work with this individual in a trauma-informed way?





Historical and Intergenerational Trauma

- related to colonization, the residential school experience, and the '60s scoop, and other trauma experienced by aboriginal people in Canada, are like no other.
- Trauma associated with continuing family separation, high levels of incarceration, and appallingly high rates of violence against aboriginal women continues.
- Thus, trauma-informed, gender-informed, culturally safe practice is critical.

Cultural considerations



- Being culturally sensitive means being open, curious, aware and accommodating of culture
- Gender, sexual orientation, religion, race, ethnicity, physical attributes
- Culture is embedded in the fabric of our beings
- Socioeconomic status: low-income communities puts individuals at higher risk of experiencing trauma
- ACE's: adverse childhood events: in a study of 1000 college students 59% reported at least one, 38% reported 2 or more



Cultural Considerations

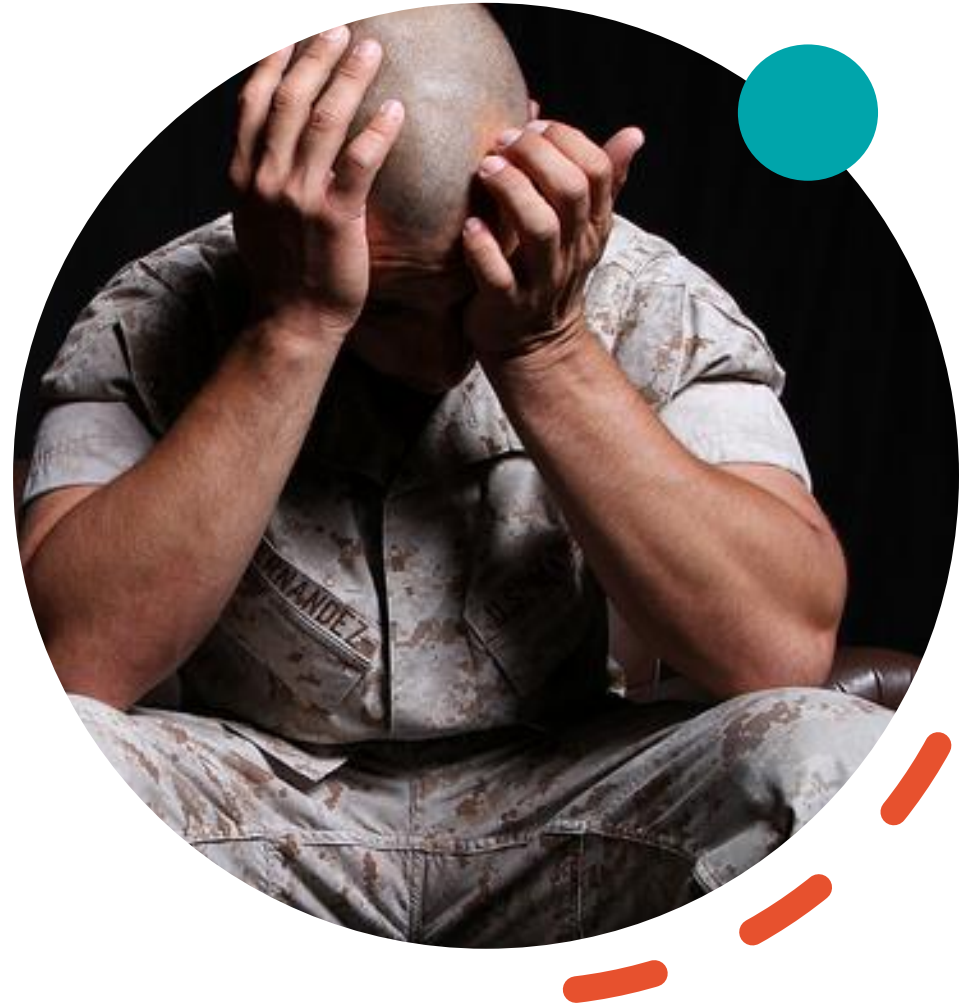
- If you don't recognize the built-in biases in yourself and the structural biases in your systems—biases regarding race, gender, sexual orientation—you can't truly be trauma-informed.
- Marginalized peoples—excluded, minimized, shamed—are traumatized peoples, because...humans are fundamentally relational creatures. J. Carello and P. Thompson (2021)
- To be excluded or dehumanized in an organization, community, or society you are part of results in prolonged, uncontrollable stress that is sensitizing...Marginalization is a fundamental trauma. (Perry & Winfrey, 2021, p. 220)

- "We don't see things as they are, we see things as we are" (Nin, 1961)



Working with men and women with history of trauma

- important it is to include – in trauma-informed approaches with **men - attention to redefining masculinity** in relation to powerlessness, trust, and expression of emotion.
- A key part of creating safety in services involves “normalizing” the fact that often **women** have experienced or are experiencing violence and trauma, and that there is no pressure to disclose or give details.
- Earning trust is key to trauma-informed practice with women. Trust can be earned through sharing, co-reviewing, providing clarity, and discussing documents related to the services available to women.
- Offer choice, be clear, be flexible



LGBTTTIQ

- The rainbow community includes a diverse group of individuals and groups identifying as lesbian, gay, bisexual, transsexual, transgendered, two spirited, intersexed, and questioning (LGBTTTIQ).
- Common to this diverse community is **significant experience of trauma**. Lesbian, gay, and bisexual youth report very high rates of verbal victimization as well as sexual and physical abuse and assault at school
- sexual orientation victimization among this subgroup has been associated with **post-traumatic stress symptoms**.
- This extends to individuals identifying as **transgendered**, with increased rates of violence and threats both in school and within their communities with family and friends.





Immigrant and Refugee

- Trauma-informed approaches can involve **understanding and validating the impact of multiple stressors, recognizing the meaning of trauma and healing within the cultural context, creating a climate of hope, rebuilding the person's sense of control, and facilitating social support and resilience.**
- The trauma-informed approach of **not forcing disclosure** is particularly relevant, as many refugees may be unwilling or unable to share their personal stories.
- helpful to address trauma not from an individual perspective but through **collective and family-centred** interventions
- important to note that complementary therapies – exercise, yoga, art therapy, acupuncture, mindfulness, etc. – have shown **positive impact** in preventing and supporting refugees and immigrants affected by trauma



Motivational Interview Techniques

- **OARS**

- **Open-ended questioning:**
(closed ended can be necessary at times, if open ended is too overwhelming you can offer multiple choice answers)
- **Affirmations:** acknowledges effort and strength, recognizes success
- **Reflection:** feel heard and valued
- **Summaries:** can clarify, link ideas, focus and contain conversation



Incorporate Into day-to-day life

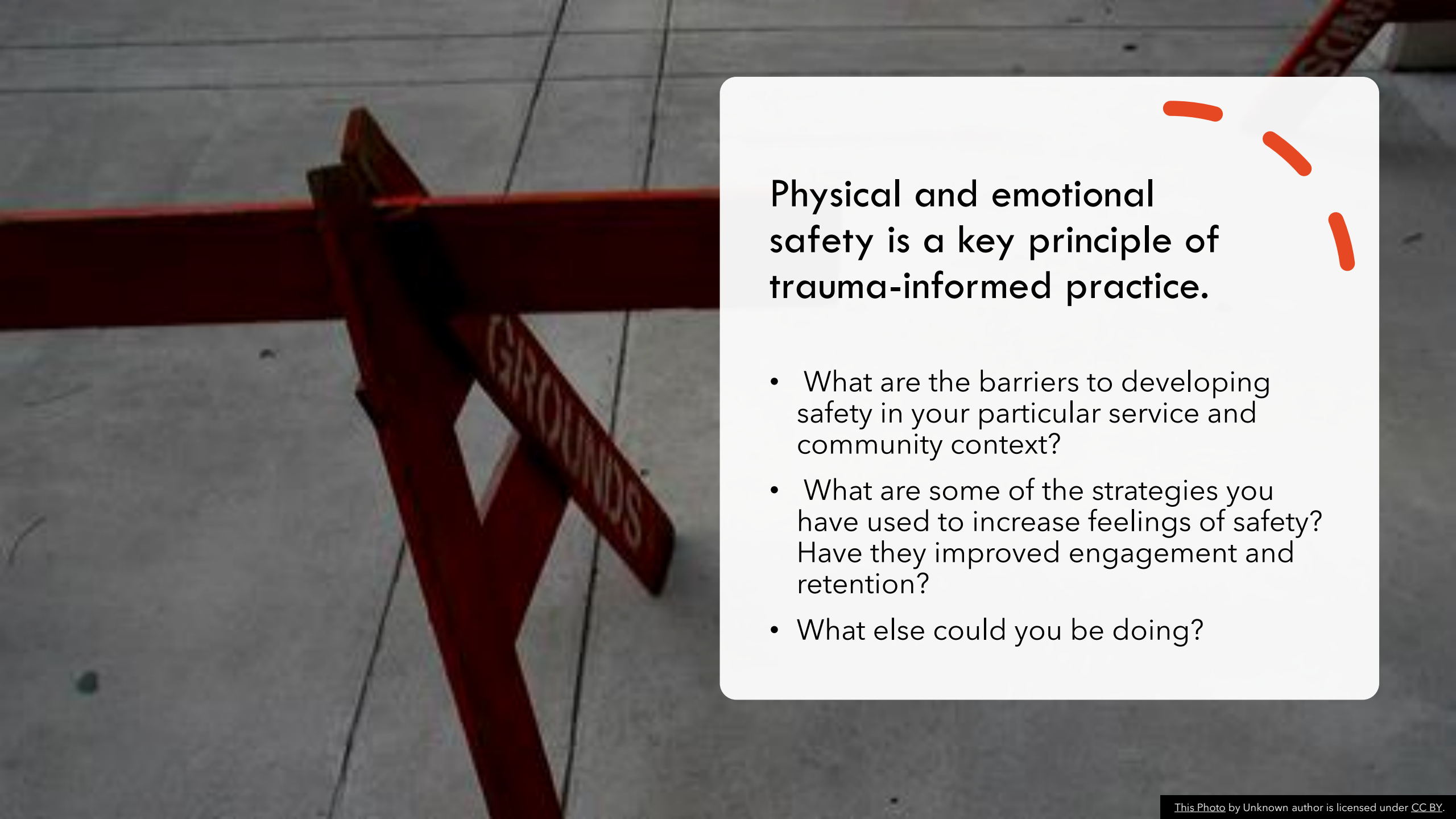


Traits, Qualities and Characteristics

- Empathy
- Compassion
- Ability to talk openly
- Self-aware
- Practice self-care
- Flexible
- Comfortable with the unknown
- Willing to learn from others
- Able to regulate your own emotions
- Good listener

A trauma-informed service provider, system and organization:

- **Realizes** the widespread impact of trauma and understands potential paths for healing;
- **Recognizes** the signs and symptoms of trauma in staff, clients, patients, residents and others involved in the system; and
- **Responds** by fully integrating knowledge about trauma into policies, procedures, practices and settings.



Physical and emotional safety is a key principle of trauma-informed practice.

- What are the barriers to developing safety in your particular service and community context?
- What are some of the strategies you have used to increase feelings of safety? Have they improved engagement and retention?
- What else could you be doing?



Let's head back to the
Padlet

- What is one way you plan to add trauma informed practice to your life?



Trauma Aware Checklist

- ☐ To understand ways that trauma can impact **everyone**
- ☐ To use that understanding to inform policies to **minimize re-traumatization** and maximize safety and possibilities for learning and growth
- ☐ Shift our focus "what has happened to you" look at trauma as an injury or disability
- ☐ *Offer choice, safety, collaboration, empowerment, and be transparent*

Being Trauma informed DOES NOT MEAN

- ☐ Individuals will never be upset or distressed
- ☐ We are required to be a clients therapist
- ☐ We have to lower our expectations and standards
- ☐ We should avoid talking about, teaching about trauma or sensitive topics
- ☐ That all individuals will be successful in everything they do

How are you ?
feeling about
Trauma informed
Practice?

Zoom Poll





Reflection
Grounding

Breathe

THANK YOU :)





Resources

- [Generational Trauma: Definition, Symptoms, Treatment \(health.com\)](https://www.health.com/health/trauma/trauma-101)
- [Trauma-informed Pedagogy: What It Is and How It Can Help Now – FOCUS \(dal.ca\)](https://www.dal.ca/education/trauma-informed-pedagogy)
- [Types of Trauma Teaching Tools - Office of Teaching & Learning \(du.edu\)](https://www.du.edu/teaching-learning/trauma-teaching-tools)
- [Responding to Trauma in the Classroom - Office of Teaching & Learning \(du.edu\)](https://www.du.edu/teaching-learning/responding-to-trauma)
- [Trauma-Informed Practice \(TIP\) - Resources - Province of British Columbia \(gov.bc.ca\)](https://www2.gov.bc.ca/gov/content/education-training/trauma-informed-practice)



Resources

- [An introduction to trauma informed practice | CAMH](#)
- Alberta Health Services Trauma Informed Care E-Learning Increase knowledge about trauma and the impact it has by creating connection, sharing knowledge and resources, 6 modules
- <https://www.albertahealthservices.ca/info/Page15526.aspx>