ChildSavers

Guiding our community's children through life's critical moments with trauma-informed mental health and child development services.



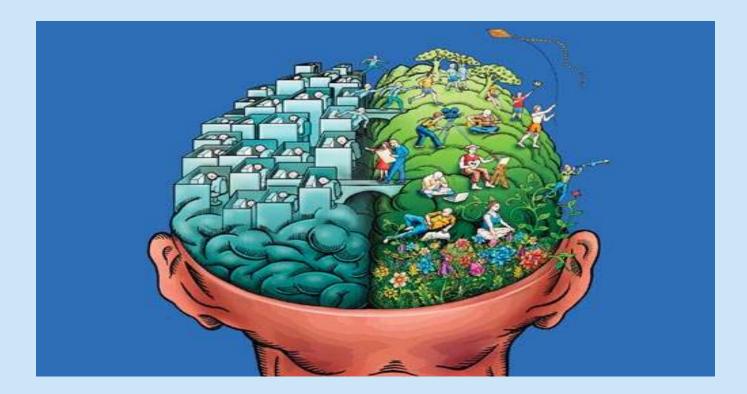
ChildSavers

Surviving and Thriving: Trauma and Resilience

John Richardson-Lauve, LCSW jrl@childsavers.org www.childsavers.link/traumaresources



Impact of Right and Left Hemisphere Talk





One in four children will experience trauma by age four.



Source: SAMHSA



Definition of Trauma

Trauma is an event or experience that creates extreme stress that overwhelms a person's ability to cope.



Some Signs of Trauma

- Avoidance of trauma-related thoughts or feelings
- Intrusive memories of the event or nightmares about the event
- Hyper-arousal or exaggerated startle response
- Hyperactivity
- Irritable or aggressive behavior
- Withdrawal or social isolation



Key Component of Trauma

Is the experience of loss! Due to that loss, people seek:

- Power and Control
- Boundaries
- Safety, Trust and Protection
- Attention
- Attachment and Connection
- Consistency
- Positive Sense of Self (purpose and contribution)
- Tension Release
- Soothing
- Sensation and Feeling





Key Components of Trauma-Informed Care

Respond to the need rather than react to the behavior.



Key Components of Trauma-Informed Care

Ask the question... "What happened to you?" (Instead of "what is wrong with you?")



Types of Trauma Include...

Community Violence Domestic Violence Medical Trauma Natural Disasters Physical Neglect Physical Abuse Refugee Trauma School Violence Sexual Abuse Terrorism Traumatic Grief House Fire Homelessness Death of a Caregiver Military Deployment Substance Abuse

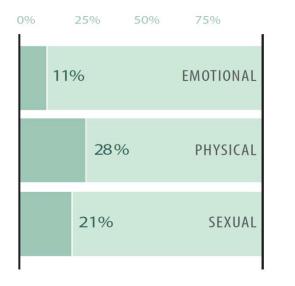


ACES- Adverse Childhood Experiences

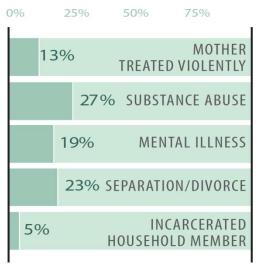
- 1. Emotional Abuse
- 2. Physical Abuse
- 3. Sexual Abuse
- 4. Emotional Neglect (feeling unloved and unwanted)
- 5. Physical Neglect (including poverty)
- 6. Parental Separation or Divorce
- 7. Domestic Violence
- 8. Substance Abuse in Family
- 9. Mentally Ill Family Member
- 10. Incarcerated Family Member



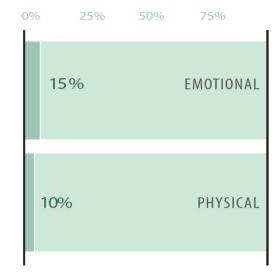
ABUSE



HOUSEHOLD CHALLENGES









Risk Associated with Trauma

Shift from an ACE Score of o to 4

- 242% more likely to smoke
- 222% more likely to become obese
- 357% more likely to experience depression
- 443% more likely to use illicit drugs
- 298% more likely to contract an STD
- 555% more likely to develop alcoholism



Risk Associated with Trauma

Shift from an ACE Score of o to 4:

- Nearly 400% increase in the risk of emphysema or chronic bronchitis
- 1200% increase in the likelihood of suicide



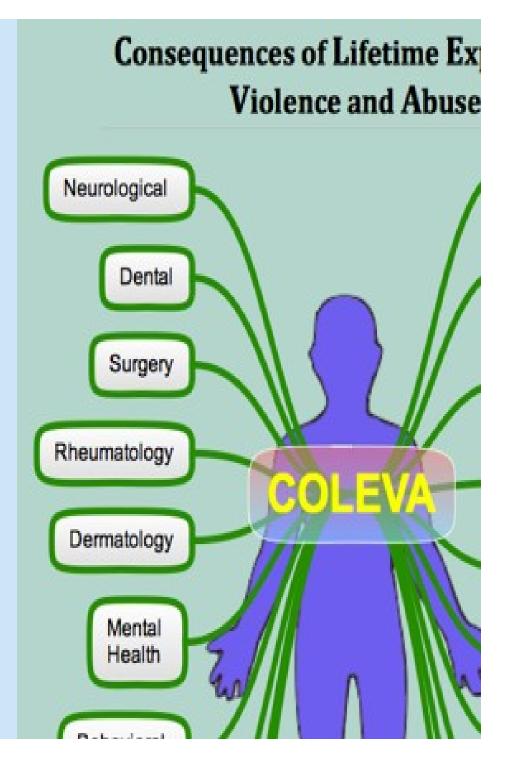
Risk Associated with Trauma

On average, people with an ACE score of 6 or higher will have a lifespan shortened by 20 years.



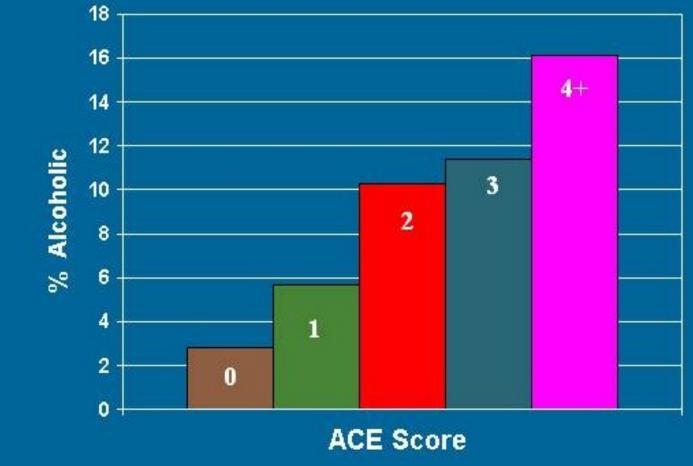
Increased ACE score is correlated with problems with:

- Alcoholism and alcohol abuse
- Chronic obstructive pulmonary disease (COPD)
- Depression
- Fetal death
- Health-related quality of life
- Illicit drug use
- Ischemic heart disease (IHD)
- Liver disease
- Risk for intimate partner violence
- Multiple sexual partners
- Sexually transmitted diseases (STDs)
- Smoking
- Suicide attempts
- Unintended pregnancies
- Early initiation of smoking
- Early initiation of sexual activity
- Adolescent pregnancy



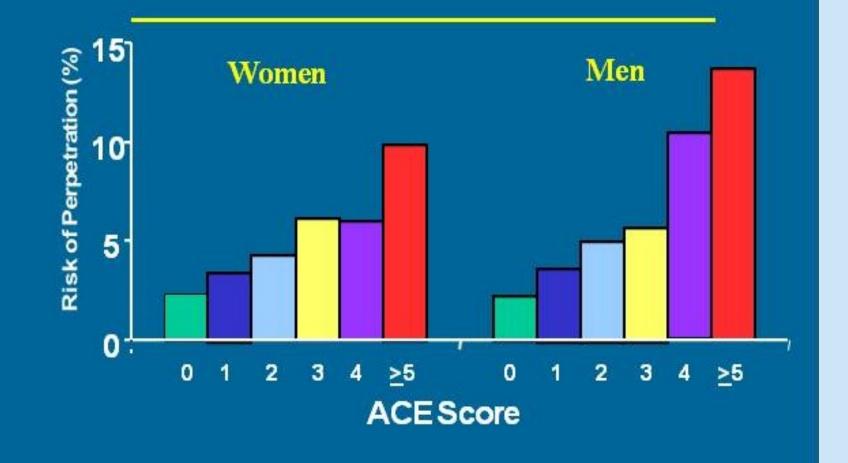
Health Risks

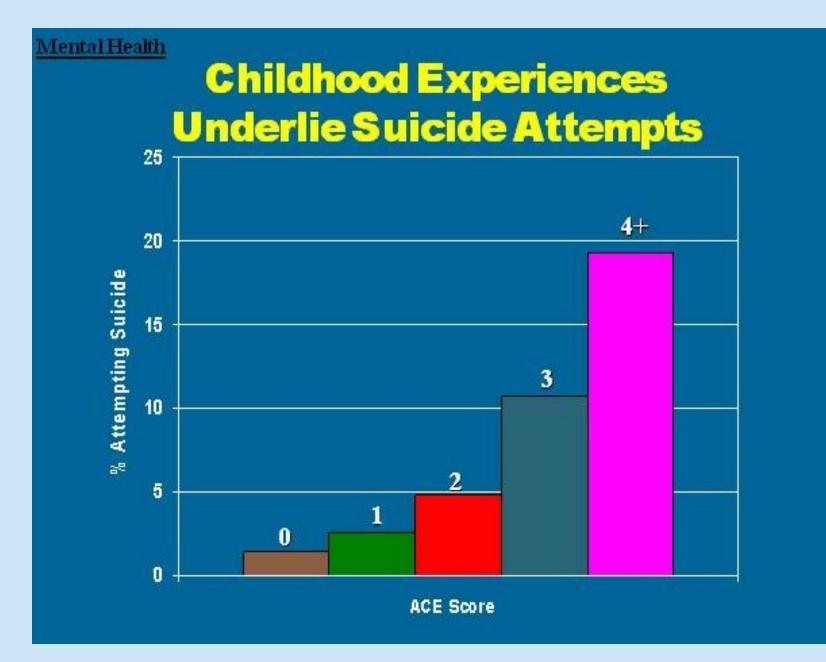
Childhood Experiences vs. Adult Alcoholism



Socialfunction

ACE Score and the Risk of *Perpetrating* Domestic Violence

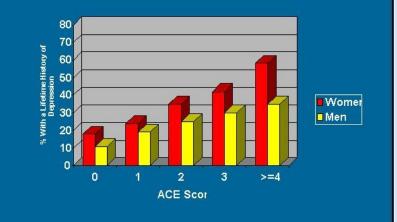




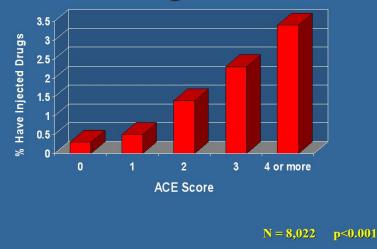


Mental Health

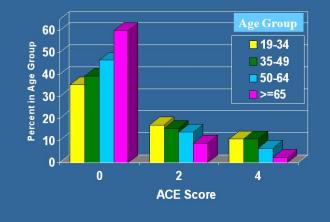
Childhood Experiences Underlie Chronic Depression



ACE Score and Intravenous Drug Use



Effect of ACEs on Mortality



0 ACE 60% live to 65 4 ACE less than 3% live to 65

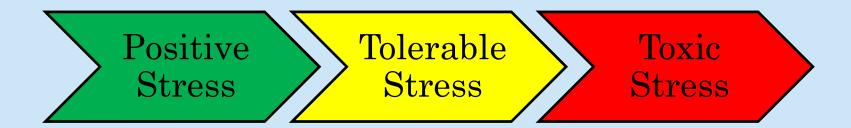


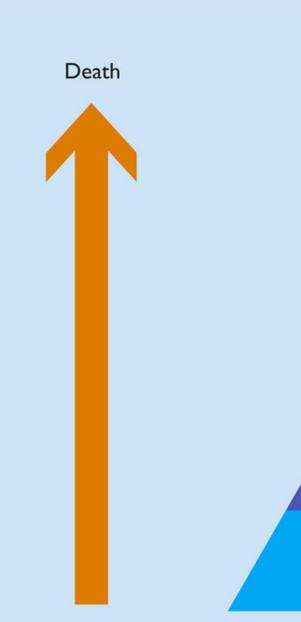


Impact of TRAUMA on the Brain



Types of Stress







Disease, Disability, and Social Problems

Adoption of Health-risk Behaviors

Social, Emotional, and Cognitive Impairment

Disrupted Neurodevelopment

Adverse Childhood Experiences

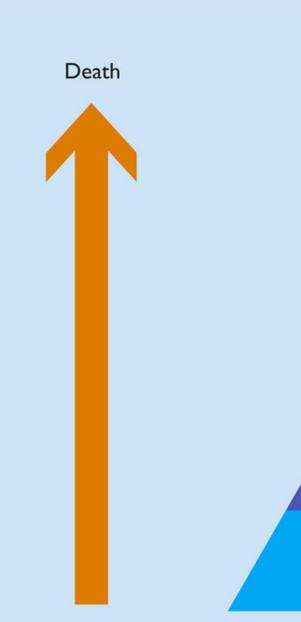
Conception

Mechanisms by which adverse childhood experiences influence health and well-being throughout the lifespan.



These are the brains of two three-year-old children. The image on the left is from a healthy child while the image on the right is from a Romanian orphan who suffered severe sensory deprivation. The right brain is smaller and has enlarged ventricles - holes in the centre of the brain. It also shows a shrunken cortex - the brain's outer layer.







Disease, Disability, and Social Problems

Adoption of Health-risk Behaviors

Social, Emotional, and Cognitive Impairment

Disrupted Neurodevelopment

Adverse Childhood Experiences

Conception

Mechanisms by which adverse childhood experiences influence health and well-being throughout the lifespan.



Misbehavior or Stress Behavior? or Skill That Was Never Learned?

"Read the signs and reframe the behavior."

Respond to right-brain behavior with a right-brain communication.

--From Self-Reg by Dr. Stuart Shanker



Connect, then Redirect

The magic formula...

- 1. Recognize where the person currently is (downstairs brain/emotional tsunami)
- 2. Connect with the emotion (right brain) until temperature reduces Empathize
 - Listening with your heart/right brain it takes effort!
 - Acknowledging feelings first empathize
 - Non verbal signals touching, empathetic facial expressions, nurturing tone of voice, and non-judgmental listening
 - Put yourself into their shoes get a grasp of what is happening for them
- 3. Redirect with the logic (left brain)

RIGHT (feelings) + LEFT (facts) = Whole Brain INTEGRATION

Community Resilience Initiative

Three basic building blocks to success:

Adapted from the research of Dr. Margaret Blaustein

Attachment - feeling connected, loved, valued, a part of family, community, world

Regulation - learning about emotions and feelings and how to express them in a healthy way

Competence - acting rather than reacting, accepting oneself and making good choices





Attachment Strategies

- Calling students by name
- Buddies- especially for new students
- Student groups
- Active and Reflective listening



Trauma-Informed Responses

- "It makes sense that you are feeling this way."
- "Help me understand how you feel."
- "Let's talk about ways I can help you if you are ready."
- "I'm sorry that happened. This is not your fault."
- "I care about you. How can I help?"
- "I am here for you when you are ready for help."



Regulation Strategies

Emotional Regulation

- Feelings identification and vocabulary
- Empathy for others



Regulation Strategies

Body Regulation

- Fidgets
- Bouncing
- Standing
- Exercise
- Chair bands

- Play-doh
- Mandalas
- Coloring sheets
- Gum and chewing
- Rhythm



Competency Strategies

- Student groups
- Support strengths (rather than focus on deficits)
- Give kids jobs



Questions to ask:

Instead of:	Think:
This is intentional misbehavior	This is a lack of a skill
Shaming for lack of skills	How do we build the missing skills
Criticism will help	Nurturance will help
Blaming the individual	Teaching the individual
Punishment will help	Discipline and structure will help



Self-Care

How you treat yourself is how you are inviting the world to treat you.

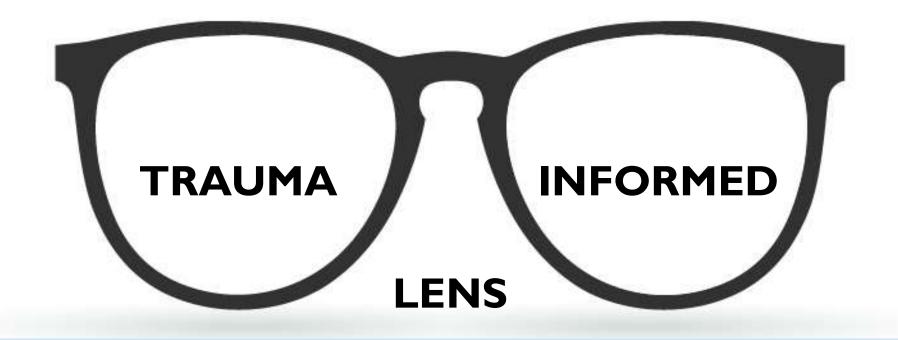
Self-care is not self-indulgence. Self-care is self-respect.



Self-Care

How do we take care of ourselves?

Vicarious Trauma or Secondary Trauma



Creating Trauma-Sensitive Schools

- Training & Professional Development
- Parental Engagement
- Mental Health Services
- Restorative Practices





Definition of a trauma-informed approach

- <u>Realize</u> the widespread impact of trauma
- <u>Recognize</u> the signs and symptoms of trauma in others
- <u>Respond</u> with fully-integrated policies, procedures and practices
- Actively seek to **resist re-traumatization**





Principles of a Trauma-Informed Approach

- Safety
- Trustworthiness and transparency
- Peer support and mutual self-help
- Collaboration and mutuality
- Empowerment, voice, and choice
- Cultural, historical, and gender issues





Ten Implementation Domains of Trauma-Informed Care

- 1. Governance and Leadership
- 2. Policy
- 3. Physical Environment
- 4. Engagement and Involvement
- 5. Cross Sector Collaboration
- 6. Screening, Assessment, Treatment Services
- 7. Training and Workforce Development
- 8. Progress Monitoring and Quality Assurance
- 9. Financing
- 10. Evaluation





School-wide Policies and Practices

- Predictable and safe environments that are attentive to transitions and sensory needs.
- Discipline policies balance accountability with an understanding of trauma.
- Staff support including supervision and/or consultation with a trauma expert and classroom observations.



<u>Classroom Strategies and Techniques</u>

- Activities are structured in predictable and emotionally safe ways.
- Regulation of emotions and modulation of behaviors.
- Classrooms employ positive supports for behavior.



<u>Collaborations with Mental Health</u>

- Policies for mental health referrals.
- Access to trauma-competent mental health services.
- Protocols for helping students transition back to school from other placements.

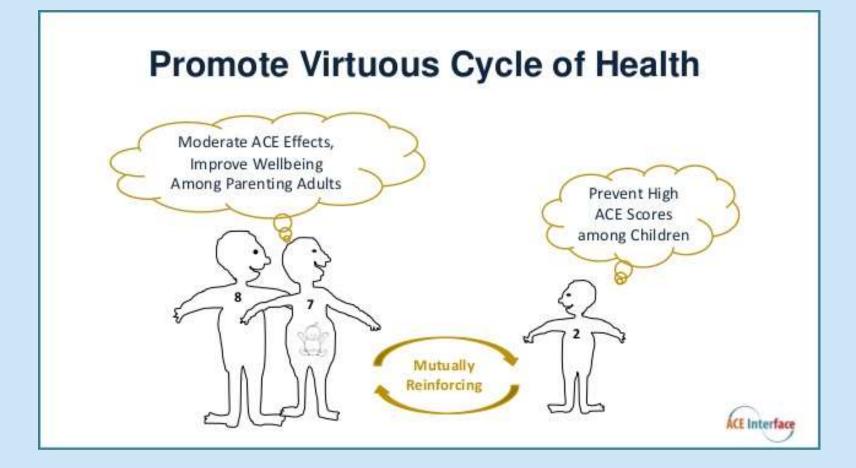


<u>Collaborations with Mental Health</u>

- Policies for mental health referrals.
- Access to trauma-competent mental health services.
- Protocols for helping students transition back to school from other placements.



Creating the Virtuous Cycle



ChildSavers

Thank you for all that you do for our community!

John Richardson-Lauve, LCSW 804-591-3934 jrl@childsavers.org www.childsavers.link/kingsmill