

Greater Richmond
Trauma-Informed Community Network (TICN)

# TICN Training Guide for use when facilitating: Introduction to Trauma and Resilience

**Training Guide** – This document will serve as a reference for providing examples of must have learning objectives/topics, as well as resources to share when conducting the Introduction to Trauma and Resilience training. The guide also provides a comprehensive outline that includes additional training topics and resources for use when customizing the training to fit special populations and groups.

#### Tip:

-Use stories connected to practice and to the specific audience – people remember stories and experiences better than lectures

# **Introduction to Trauma and Resilience: Training Outline**

Items in Blue are required topics to be covered in every training. Items in green are optional content/activities
Items in pink are additional resources

#### **Icebreaker/ Mindfulness Activity**

- Figure 8
- Chime activity
- Deep breathing

#### 1. Understanding Trauma

#### Why is it important? – Impact

Review definition and the various types of trauma

- SAMHSA's definition (Event, Experience, Effect)
  - Use stories to explain this (two brothers, exposed to same event, but have different experience and effect)
- NCTSN definition (acute, chronic, complex, neglect)
- Review potentially traumatizing events

#### **Adverse Childhood Experience Study**

- What are ACEs and what are the long-term outcomes?
  - ACES handout
    - (if discussing ACES survey, make sure you address that this is not to be used as an assessment tool without further training to implement this into practice could re-traumatize clients)
  - o Nadine Burke Harris Ted Talk- Well Story
    - <a href="https://www.ted.com/talks/nadine\_burke\_harris\_how\_childhoo">https://www.ted.com/talks/nadine\_burke\_harris\_how\_childhoo</a>
       d trauma affects health across a lifetime
- Trauma is a major health issue; long term impact (provide relevant data)
  - o need to focus on the cause of the problem, not just symptoms

#### What does it mean to be Trauma Informed? (SAMHSA's 4 R's as framework)

- o Realize, Recognize, Respond, Resist Re-traumatization
- Focusing on what's strong, not wrong "what happened to you" vs.
   "what's wrong with you" reiterate this concept through training
- Review SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach <a href="https://www.samhsa.gov/nctic/trauma-interventions">https://www.samhsa.gov/nctic/trauma-interventions</a>
  - Six key principles of a trauma informed approach: 1. Safety
     2. Trustworthiness and Transparency 3. Peer Support 4.
     Collaboration and Mutuality 5. Empowerment, Voice and

Choice 6. Cultural, Historical, and Gender Issues

## 2. Trauma's Impact On The Brain And Behavior

#### How the brain develops and wires

- O What is a neuron?
  - Nerve cells that are building blocks of the nervous system
  - Experiences create connections between neurons (pathways)
  - Neurons that fire together, wire together
    - Linking neurons is the basis for memory and learning Neuroplasticity - how experience shapes changes in the brain's structure
    - For more info on neuroplasticity\_ www.drdansiegel.com/blog/2015/01/07/brain-insightsand-well-being-2/
    - Use example of interstate vs. country road and how this relates to children who can go from calm to explosive in seconds
    - This relates to PTSD triggers sounds, smells that become associated with the traumatic event, etc.
- o Left vs. right brain function
  - Left/right brain conflict activity (say the color of the word)
- Why left right brain integration is important
- We used to think there were right and left brain functions − i.e.
   Referring to people as "a right or left brained person". Research has shown us that the brain is much more complex than that.
  - Predominantly Left brain functions language, logic, linear functions (sequencing/order)
  - Predominantly Right brain functions emotions, experience, memory, creativity
  - We need <u>all parts</u> of the brain working together don't want to live in an emotional desert or emotional flood
  - trauma is stored as experience (right brain) which can make it difficult to talk about (language left brain function)

#### **Trauma's Impact on:**

- o <u>Fear Response</u> (fight, flight or freeze, etc.)
  - can make the brain underreact to big things or overreact to small things—reference barking dog and wise owl
  - show the normal vs. extreme neglect brain slide trauma is a physical injury to the brain
- o <u>Dan Siegel hand model</u> (upstairs and downstairs brain model)
  - Hand Model Handout
  - Activity teach the hand model of the brain (upstairs –

- downstairs barking dog/wise owl)
- Dan Siegel explaining the hand model https://www.youtube.com/watch?v=gm9CIJ74Oxw
- Depending on the audience (if training direct service providers) you may want to briefly discuss interventions for the upstairs and the downstairs brain. Downstairs brain activities focus on regulation (sensory tools, breathing tools, removing triggers etc.)
- Upstairs brain activities focus on skill building and maintaining regulation (mindfulness, developing a language for emotions, trigger mapping etc.)
  - Cognition/learning
    - can impact executive functioning, linear thinking and future orientation)
      - When the brain is focused on survival, safety and looking for potential threats, it is hard to focus on learning things like algebra, etc.
  - o Attachment, relationships and social connection
    - An overactive fight or flight system can make the brain function on high alert
    - Hyper aroused/hypervigilant and fear relationships, adult authority, control etc.
    - Can affect intimate relationships because close connections can make the individual feel vulnerable/unsafe
    - Can affect relationships with peers also children are often developmentally delayed and have poor social skills
  - Sensory processing / hyper-arousal refers to the way the nervous system receives messages from the senses and turns them into appropriate motor and behavioral responses.
    - Website: https://www.spdstar.org/basic/about-spd
    - Sensory processing issues can present as behavioral problems as well as other diagnoses (ADHD, ODD etc.)
    - Kids may fidget with things, move around a lot, be sensitive to sound or make sounds, lay their body across objects or people, etc.

#### o Self-regulation

- When brain wiring is impacted by trauma, it can make it difficult for children/adults to manage their emotions and behavior
- Discuss what need is underlying the behavior what does the child need in that moment

#### • Examples:

- Know what individuals need to help them with self-regulation

  – fidgets, music, drawing, movement
- Know what the triggers are and how adults can help
- Trigger mapping
- when a child becomes dysregulated, try to get them moving - bilateral movement can help walking, throwing a ball back and forth, using both arms
- o Chewing gum
- o Temperature change cold drink, popsicles

#### o Behavioral control

- Connect before you connect (focus on regulation first)
- Trauma can look like other things (ADHD, bipolar, ODD, etc.)
- Can't vs. won't if someone has flipped their lid they may not be able to control their behavior
- Focus on the need. What does the individual need in this moment?
- Memory trauma can impact memory storage and retrieval
- Self-concept and world-view (NCTSN Essential Elements of Trauma Informed Child Welfare Practices #3)
- Video: Remembering Trauma: Connecting the Dots between complex trauma and misdiagnosis in youth. Part 1 (part 2 is the same video with expert commentary)
   video - http://www.rememberingtrauma.org/
- Video followed by small group discussion Possible discussion questions How did the helpers in Manny's life (teacher, probation officer) help or not help Manny? What was really going on with Manny? Was he capable of making better choices? Why or why not? What did the teacher tell the psychologist might be wrong with Manny? How might a diagnosis of Bi-Polar Disorder influence treatment approaches? (RX) Would this be helpful or not? What were the helpers in Manny's life missing (understanding of trauma's impact on the brain and behavior) at the end of the video, what did the therapist say she was going to do differently to help Manny?
- Recognition of the long term impact of trauma and how it manifests across the lifespan.

Trauma's Impact on the Helping Professional: (Trauma Exposure)

Vicarious Trauma- what is it (signs and symptoms) and ways it can impact us

- o Emphasize focus on building resilience and incorporating self-care
- o Review Secondary Traumatic Stress Fact Sheet (NCTSN)
- o Discuss strategies to create culture of wellness at your organizations

### 3. Strategies to Build Individual Resilience

Definition of resilience – ability to recover from challenging experiences/trauma

Characteristics of resilience (attachment/relationships, regulation, competence – from the ARC Framework)

- i. Ability to form and maintain healthy relationships/attachments
- ii. Ability to manage strong emotions and delay responses, act vs. react
- iii. Ability to solve problems and anticipate consequences, evaluate outcomes, make decisions, develop a strong sense of self (current and future), be able to be future oriented

Video - What is Resilience? https://www.youtube.com/watch?v=cqO7YoMsccU Video - How is Resilience Built? : https://www.youtube.com/watch?v=xSf7pRpOgu8

Examples of strategies to build resilience in children

# (From NCTSN Essential Elements of Trauma Informed Child Welfare Practices)

- 1. Maximize the child's sense of safety (physical and psychological)
- 2. Assist children in reducing overwhelming emotion
- 3. Help children make new meaning of their trauma history and current experiences
- 4. Address the Impact of trauma and subsequent changes in the child's behavior, development and relationships
- 5. Coordinate services with other agencies
- 6. Utilize comprehensive assessment of the child's trauma experiences and their impact on the child's development and behavior to guide services
- 7. Support and promote positive and stable relationships in the life of the child
- 8. Provide support and guidance to the child's family and caregivers
- Providing a predictable structure and routine
- Teach a language of emotions
- Teaching children about the thinking and feeling parts of their brain and how to identify when they are in their upstairs vs. downstairs brain

- Recognizing their cues that they are becoming dysregulated
- Help children identify and express emotions
- Talking often doesn't work; you have to engage them
- Alternate calm then active then calm activities to modulate states of arousal
- Breathing, movement, sensory experiences
- Focusing on strengths vs. deficits (what children do right vs. wrong)

(Trainer should provide concrete examples from their experience and preferably related to audience)

Activity: Can use ACES cards to show ways to build resilience (cards can be purchased at <a href="http://resiliencetrumpsaces.org/">http://resiliencetrumpsaces.org/</a>)

Resilience Tips Handout

Attunement and Brain Games - Snap, Clap, Stomp Games 123 game

- stomp, clap number game
- Mirroring each other's hands
- Mirroring back sounds (drumbeats, guitar notes, etc.)

# Examples of strategies to build resilience in Parents/Caregivers (Also mentioned in the ARC Framework)

- Develop Co-Regulation Skills
- Attunement
- nurturing
- Identify peer supports
- Developing self-awareness
- Teach and Encourage Self care
- Modeling desired behaviors
- Identifying their own cues
- Breathing, movement, sensory experiences

#### Examples of strategies to build resilience in providers

- Manage professional and personal stress (from NCTSN Essential Elements of Trauma Informed Child Welfare Practices
- Understanding the impact of working with trauma victims-vicarious trauma
- Create a culture of wellness / self-care
- Breathing, movement, sensory experiences
- Ongoing commitment to skill building
- Organizational supports
  - o Giving voice and choice to staff
  - o Providing weekly trauma informed supervision / reflective

- supervision
- O Developing a sense of safety
- o Providing ongoing training

# 4. Strategies to Build Community Resilience

- Develop a TICN in your community
  - o What is a TICN

From <a href="http://grscan.com/trauma-informed-community-network/">http://grscan.com/trauma-informed-community-network/</a>

The Trauma Informed Community Network (TICN) in Virginia is a diverse group of individuals, convened by Greater Richmond SCAN (Stop Child Abuse Now), who share a commitment towards the creation of a more trauma informed and resilient community within the Greater Richmond region. The Greater Richmond TICN was formed in the fall of 2012 and is currently comprised of over 360 members from more than 140 different organizations representing a wide range of systems that include public, private, non-profit, state and local government agencies.

- How to make your agency or organization trauma informed
  - O Spread awareness of trauma informed care to everyone you interface with
  - O Educate/Train your community (staff, providers, caregivers, systems, community etc.)
  - O Provide a trauma sensitive physical environment
  - O Be aware of the impact of trauma on self and others
  - O Provide routine trauma screenings
- Provide prevention services and offer resources
- Create a climate for change across the community to integrate trauma informed approaches in all service provision organizations
- Advocate for policy changes
- Promote professional peer supports
- Promote cross system collaboration to decrease ACEs
- Provide training and workforce development
- Ensure quality assurance
- Develop trauma informed leadership teams (TILTs)
  - Your system needs to make a plan to implement trauma informed screenings and be prepared to respond to clients. **Reminder**: if discussing ACES survey, make sure you address that this is not to be used as an assessment tool without further training to implement this into practice could re-traumatize clients

Resilience Frameworks - Options include:

- i. ARC Framework (see Blaustein, M.E., & Kinniburgh, K. M.)
- ii. Kenneth Ginsburg (7 C's) (see Fostering Resilience website)
- iii. Other

**During Wrap up** – provide audience with local and national resources of where they can go if they need further support and education on trauma informed care.

#### **RESOURCES**

CDC (Center for Disease Control): Adverse Childhood Experience Info: www.cdc.gov

NCTSN (National Child Traumatic Stress Network): http://www.nctsn.org/

SAMHSA (Substance Abuse and Mental Health Services Administration): https://www.samhsa.gov/

Center for Healthcare Strategies: <a href="http://www.chcs.org">http://www.chcs.org</a>

Greater Richmond SCAN - http://grscan.com/trauma-informed-community-network/

Resilience Trumps Aces Website - http://www.resiliencetrumpsaces.org/

Aces Too High Website: www.acestoohigh.com

Resilience Documentary: Resilience – the biology of stress and the science of hope https://vimeo.com/137282528 (film trailer)

Paper Tigers Documentary:

Healing Neen Documentary: https://vimeo.com/15851924

Every Opportunity (video clip: <a href="https://www.youtube.com/watch?v=VxyxywShewI">https://www.youtube.com/watch?v=VxyxywShewI</a>

Beyond the Cliff (TED Talk – Laura van Dersnoot Lipsky: Impact of Vicarious Trauma): https://www.youtube.com/watch?v=uOzDGrcvmus&t=239s

Why Mindfulness is a Superpower – Dan Harris (video clip): https://www.youtube.com/watch?v=w6T02g5hnT4

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