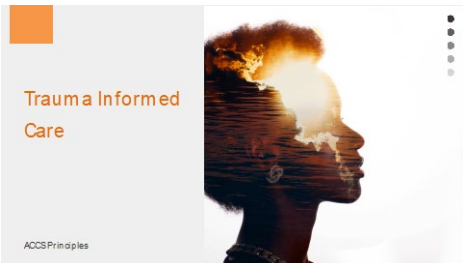
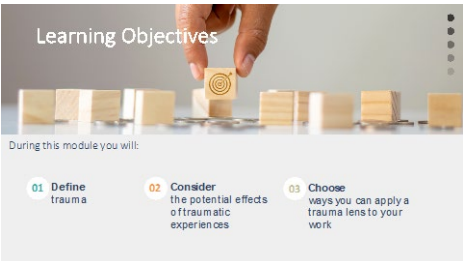
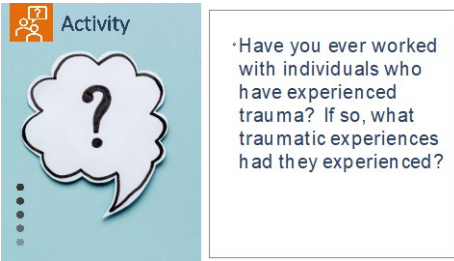


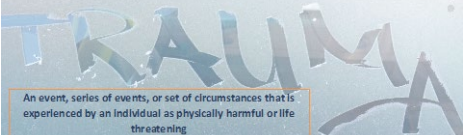




Trauma Informed Care Facilitator Guide

Note: This module has two handouts:

1. Handout #1: Immediate and Delayed Reactions to Trauma.
2. Handout #2 – Strengths-Based Questions

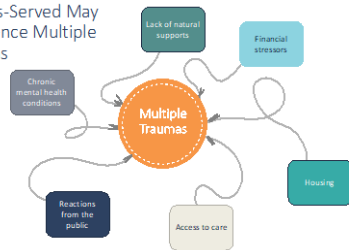
<p>Slide 1</p> 	<p>Slide 1: Title Slide</p> <p>Introduce Trainer</p>
<p>Slide 2</p> 	<p>Slide 2: Learning Objectives</p> <p>Explain:</p> <p>During this module you will:</p> <ul style="list-style-type: none"> - Define trauma - Consider the potential effects of traumatic experiences - Consider ways you can apply a trauma lens in your work <p>A primary goal of this module is to learn how to apply a trauma lens to your work with persons-served</p>
<p>Slide 3</p> 	<p>Slide 3: Introduction/Activity</p> <p>Ask:</p> <p>Have you ever worked with individuals who have experienced trauma? If so, what traumatic events had they experienced?</p> <p>Facilitator instruction:</p> <p>If remote training, have participants write responses in the chat or raise hands</p>
<p>Slide 4</p>	<p>Slide 4: Activity</p>

<div data-bbox="115 191 310 449">  <p>Activity</p> </div> <div data-bbox="337 226 560 369"> <p>What types of traumatic events do you think might have been experienced commonly among persons served by ACCS?</p> </div>	<p>Ask: What types of traumatic events do you think might be most common among persons served by ACCS?</p> <p>Facilitator instruction: If remote training, have participants write responses in the chat or raise hands</p>
<p>Slide 5</p> <p>What is Trauma?</p> <div data-bbox="115 636 321 800"> <p>An Event you Experience that has a negative Effect on you (3 Es)</p> </div> 	<p>Slide 5: What is Trauma?</p> <p>Explain:</p> <p>We define trauma as an Event someone Experiences that has a negative Effect on them (the 3 Es)</p> <ul style="list-style-type: none"> ○ The EVENT is perceived by the person to be shocking, scary, or dangerous. ○ The EXPERIENCE is felt in the body. Sensations include quick, shallow breathing; racing heartbeat; sweaty palms; heaviness in body; change in alertness - - Fight or Flight sensations (“The Body Keeps the Score”) ○ The EFFECT could be acute (an expected traumatic stress response) or the EFFECT could be chronic/persistent. Effects that last beyond a month after the incident would be considered PTSD <ul style="list-style-type: none"> ● Explain that you will break down the 3 E’s in more detail.
<p>Slide 6</p> <div data-bbox="110 1570 570 1829"> <p>E #1: Traumatic Event</p>  <p>An event, series of events, or set of circumstances that is experienced by an individual as physically harmful or life threatening</p> <p>Has lasting effects on the individual's:</p> <ul style="list-style-type: none"> • functioning • mental, physical, social, emotional, or spiritual well-being </div>	<p>Slide 6: E #1: Traumatic Event</p> <p>Explain:</p> <ul style="list-style-type: none"> ● A traumatic event is defined as an event, series of events, or set of circumstances that is experienced by an individual as emotionally or physically harmful or life threatening. <ul style="list-style-type: none"> ○ Trauma can have lasting effects on an individual's functioning as well as their mental, physical, emotional, social, and spiritual well-being

<p>Slide 7</p>  <p>Examples of Traumatic Events:</p> <ul style="list-style-type: none"> • Abuse and neglect • Domestic violence • Community violence • Painful or frightening medical procedures • Car accident • Loss or separation • Natural disasters • War • Forced displacement • Poverty • Human trafficking • Racial (individual and systemic) and intergenerational traumas 	<p>Slide 7: Examples of Traumatic Events</p> <p>Explain:</p> <p>Traumatic events include but are not limited to:</p> <ul style="list-style-type: none"> ○ Abuse and neglect ○ Domestic violence ○ Community violence ○ Painful or frightening medical procedures ○ Car accident ○ Loss or separation ○ Natural disasters ○ War ○ Forced displacement ○ Poverty ○ Human trafficking ○ Racial (individual and systemic) and intergenerational traumas
<p>Slide 8</p>  <p>E #2: Defining Experience</p> <p>Contributing Factors Include:</p> <ul style="list-style-type: none"> • How the individual labels the event • Availability of social supports • Degree of powerlessness • Intersecting identities • How the individual is disrupted physically and psychologically • Cultural differences <p>An event may be traumatic to one person but not another</p>	<p>Slide 8: E #2: Defining Experience</p> <p>Explain:</p> <ul style="list-style-type: none"> ○ An event may be traumatic to one person but not another. ○ Some of the contributing factors for different individual experiences are: <ul style="list-style-type: none"> ▪ How the individual labels the event ▪ Availability of social supports ▪ Degree of powerlessness ▪ Intersecting identities: <ul style="list-style-type: none"> • Explain: this may be due to age; race/ethnicity; immigration status; religion; gender identification; sexual orientation; disability status ▪ How the individual is disrupted physically and psychologically ▪ Cultural differences

Slide 9

Persons-Served May Experience Multiple Traumas



Slide 9: Persons Served May Experience Multiple Traumas

Explain:

Persons-served might experience multiple traumas regularly due to their circumstances, such as:

- chronic mental health conditions;
- lack of natural supports;
- financial stressors;
- housing instability / inadequacy;
- lack of access to care,
- reactions from the public to their cultural background or sexual orientation).

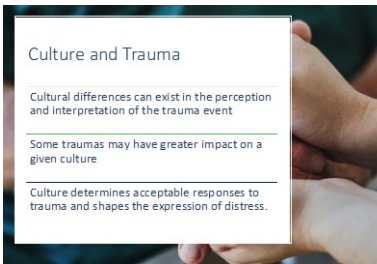
ACCS can help address those by working with the individual to develop a treatment plan that best suits them and their needs

Ask:

Ask questions to ensure understanding:

1. For example, how or why might the experience of siblings who were both removed from an abusive home be different?
(Elicit a few responses from participants)
2. Why might an impending hurricane be triggering for one person, but not for another?
(Elicit a few responses from participants)


Slide 10







Slide 10: Culture and Trauma

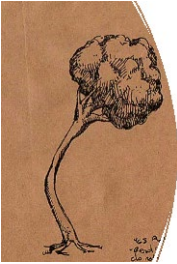
Explain:


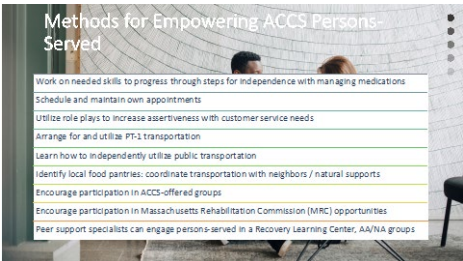
- Cultural differences can exist in the perception and interpretation of the trauma event, the meaning given to the traumatic event and beliefs about control over the event.

	<ul style="list-style-type: none">• Some traumas may have greater impact on a given culture because those traumas represent something significant for that culture or disrupt cultural practices or ways of life• Culture determines acceptable responses to trauma and shapes the expression of distress. For example, some families and cultural groups are less comfortable responding to personal questions about emotional distress• In addition to shaping beliefs about acceptable forms of help-seeking behavior and healing practices, culture can provide a source of strength, unique coping strategies, and specific resources.
<div>Slide 11</div> <div><div>E #3: Adverse Effects</div><div><div>Effects may be immediate and/or delayed</div><div>Duration of the effects may be short to long term</div><div>Effects can impact the victim, the family system, an organization, and the community's sense of safety and trust</div></div><div></div></div>	<div>Slide 11: E #3: Adverse Effects</div> <div><div>Explain:</div><div>Adverse Effects:<ul style="list-style-type: none">• May be immediate or delayed• Duration of the effects may be short or long-term• Can impact the victim, their family system, an organization, or community's sense of safety and trust</div><div><div>Facilitator note:</div><div>STATE When trauma affects an organization sometimes it can organize its procedures around that trauma and that is not an effective reaction.</div></div></div>
<div>Slide 12</div> <div><div>Common Responses to Trauma</div><div><div><div>Emotional</div><ul style="list-style-type: none">• Numbness• Denial• Anxiety• Guilt• Sadness• Helplessness• Mood swings</div><div><div>Physical</div><ul style="list-style-type: none">• Appetite changes• Gastrointestinal issues• Sleep disturbances• Nightmares• Fatigue• Elevated heart/beat• Hyperarousal</div><div><div>Cognitive</div><ul style="list-style-type: none">• Difficulty concentrating• Rumination• Memory problems• Intrusive memories or flashbacks• Difficulty making decisions</div><div><div>Behavioral</div><ul style="list-style-type: none">• Startled reaction• Restlessness• Increased use of substances• Social relationship difficulties• Engagement in high-risk behaviors</div></div></div>	<div>Slide 12: Common Responses to Trauma</div> <div><div>Explain:</div><div>This slide presents various ways in which trauma can manifest</div><div><div>Read through slide</div></div></div>
<div>Slide 13</div>	<div>Slide 13: Activity/ Reviewing Handout #1</div>

<div data-bbox="121 189 162 231"></div> <div data-bbox="170 199 243 226">Activity</div> <div data-bbox="121 241 284 420"></div> <div data-bbox="381 189 519 220">Review Handout #1: Immediate and Delayed Reactions To Trauma</div> <ul style="list-style-type: none"> Have you noticed any of these reactions in the people you have served in the past? Which ones? Are any of the trauma reactions on the list surprising or unexpected to you? 	<p>Review /Explain:</p> <p>Review Handout #1: Immediate and Delayed Reactions to Trauma and explain this is a list of more examples of immediate and long-term effects of trauma.</p> <p>Ask:</p> <ul style="list-style-type: none"> Ask participants if they have noticed any of these reactions in the people they have served in the past? Which ones? Are any of the trauma reactions on the list surprising or unexpected to you?
<p>Slide 14</p> <div data-bbox="129 787 300 850">What Integrated Teams Can Do To Help Understand the Person's Experience</div> <div data-bbox="129 871 300 997"> <p>Understand emotional reactions by asking about and responding to specific behaviors (sleep and eating patterns, jitters, etc.)</p> <p>Listen to and incorporate the person served's terms for what they are experiencing into discussion and treatment planning</p> </div> 	<p>Slide 14: What Integrated Teams Can Do To Help Understand the Person's Experience</p> <p>Explain:</p> <ul style="list-style-type: none"> Understand emotional reactions by asking about and responding to specific behaviors (sleep and eating patterns, jitters, etc.) Listen to and incorporate the person served's terms for what they are experiencing into discussion and treatment planning
<p>Slide 15</p> <div data-bbox="162 1291 495 1491"> <p>A trauma-informed program, organization, or system</p> <ul style="list-style-type: none"> Realizes <ul style="list-style-type: none"> Realizes widespread impact of trauma and understands potential paths for recovery Recognizes <ul style="list-style-type: none"> Recognizes signs and symptoms of trauma in clients, families, staff, and others involved with the system Responds <ul style="list-style-type: none"> Responds by fully integrating knowledge about trauma into policies, procedures, and practices Resists <ul style="list-style-type: none"> Seeks to actively resist re-traumatization <p>From SAMHSA's Concept Paper</p>  </div>	<p>Slide 15: A Trauma Informed Approach (Four R's)</p> <p>Explain:</p> <p>What are the "Four R's" of the trauma-informed program, organization, or system?</p> <ol style="list-style-type: none"> Realizes <ul style="list-style-type: none"> Realizes widespread impact of trauma and understands the potential paths for recovery Recognizes <ul style="list-style-type: none"> Recognizing signs and symptoms of trauma in persons served, staff, families, and other who are involved with the system Responds <ul style="list-style-type: none"> Fully integrating knowledge about trauma into practices, procedures, and policies. Resists <ul style="list-style-type: none"> Seeks to actively resist re-traumatization
<p>Slide 16</p>	<p>Slide 16: Transitions</p>

 <p>Transitions can be scary and trigger a trauma response- but our approach can help</p>	<p>Explain:</p> <p>Transitions can be scary and trigger a trauma response – but our approach can help if we are aware that persons-served may be really scared</p>
<p>Slide 17</p>  <p>Team Discussion</p> <p>How should team members approach Mae in a first encounter to transition her into your program?</p> <p>Using a strengths-based approach, how might you approach her to:</p> <ul style="list-style-type: none"> • Ensure physical / emotional safety • Establish trust • Offer choices <p>How would you collaborate with her in her treatment planning?</p> <p><small>Mae is a 37-year-old Korean American woman with both mental and physical health conditions. She was recently discharged from a brief inpatient stay into the care of her 66-year-old aunt, who provides some care for her, but it is temporary. This will be the first time Mae has received ACCS services.</small></p>	<p>Slide 17: Group Activity – Handout #2 Strengths-Based Questions</p> <p>Explain:</p> <p>Referring to Handout #2 – Strengths-Based Questions, explain these are ways you might approach one’s trauma reactions and coping skills in a strengths-based manner.</p> <p>Describe group activity:</p> <p>Pretend you are members of the integrated treatment team assigned to Mae. This is the first encounter from any members of your team with Mae.</p> <p>Read scenario:</p> <p><i>Mae is a 37-year-old Korean American woman with both mental and physical health conditions. She was recently discharged from a brief inpatient stay into the care of her 66-year-old aunt, who provides some care for her but it is temporary. This will be the first time Mae has received ACCS services.</i></p> <p>Instruct groups to discuss as a team:</p> <ol style="list-style-type: none"> 1. How a team member (or members) should approach Mae in a first encounter to transition her into your program. <p>Using a strengths-based approach, how might you approach her to:</p> <ul style="list-style-type: none"> ○ Ensure physical/Emotional safety ○ Establish Trust ○ Offer choices <ol style="list-style-type: none"> 2. How would you collaborate with her in her treatment planning? <p>Facilitator instructions:</p>

	<ul style="list-style-type: none"> ○ Split individuals into groups of no more than 5 and ideally no less than 3 (if there are few attendees create groups of two). ○ Leave slide up. ○ Note they may use some of the handout questions in this exercise <p>Facilitator notes: Group responses may include:</p> <ul style="list-style-type: none"> ● Meeting at a mutually-agreed upon location that is private, safe, and has good lighting ● Be mindful and track any possible trauma reactions she may be having then make adjustments in current conversation ● Being upfront, honest, and transparent ● Review the team’s availability, accessibility, and on-call procedures ● Avoid judgment language ● Explore “what happened to you” as opposed to “what’s wrong with you” ● Review the various groups, helpers, and resources ACCS has to offer; ask what they think might be helpful ● Explore which goals she might like to start with ● Explore what supports she currently has and ways to increase those supports ● Explore strengths, accomplishments, and what’s been working for her so far
<p>Slide 18</p>  <p>What Does it Mean to be Resilient?</p>	<p>Slide 18: <u>What does it mean to be resilient?</u></p> <p>Explain: The picture of the tree represents the ability of an individual to bend, but not break, to bounce back, and to “adapt well in the face of adversity, trauma, tragedy, threats, or even significant sources of stress”</p> <p>It’s important to point out that being resilient doesn’t mean that a person won’t experience difficulty or distress. It means that even when stimulated/triggered, a highly resilient person can still remain connected to others, still keep their thinking deliberate, and be responsive rather than reactive. Even if they become dysregulated by a stressful event, they have the skills to recognize those sensations inside of them and use coping skills to calm themselves.</p>

	<p>Social resilience is the ability for the team or program to grow together, problem-solve together – it is powerful when everyone as a team is collectively resilient</p>
<p>Slide 19</p> 	<p>Slide 19: Ways the integrated treatment team can help persons-served strengthen resilience:</p> <p>Read slide:</p> <ul style="list-style-type: none"> • Assist with accepting and working through the distressing situation • Help them connect to others who have been able to overcome similar situations • Increase overall support network • Teach healthy emotion regulation / distress tolerance skills • Assist with problem-solving by using strengths-based questions • Offer new opportunities / experiences • Empower them to gain independence <p>1.</p>
<p>Slide 20</p> 	<p>Slide 20: Methods for Empowering ACCS Persons Served</p> <p>Explain/give examples:</p> <p>Provide some examples about how to help persons-served gain independence, thereby promoting resiliency. Try to bring some of these back to the example with Mae:</p> <ol style="list-style-type: none"> 1. Work on needed skills to progress through steps for independence with managing medications 2. Schedule and maintain own appointments 3. Utilize role plays to increase assertiveness with customer service needs 4. Arrange for and utilize PT-1 transportation 5. Learn how to independently utilize public transportation 6. Identify local food pantries: coordinate transportation with neighbors / natural supports 7. Encourage participation in ACCS-offered groups 8. Encourage participation in Massachusetts Rehabilitation Commission (MRC) opportunities 9. Peer support specialists can engage persons-served in a Recovery Learning Center, AA/NA groups

Slide 21



Closing Activity

What is one take-away from today that you will share with someone else?

● ● ● ● ●

Slide 21: Closing Activity

Ask:
Ask participants to share one take-away from today that they will share with someone else after the training.
