

Understanding Trauma



Trauma Affects Many Children, Families and Adults

Experiencing a traumatic event can have a long-term impact on a person and their family's life. Trauma affects people of all ages, races, cultures, and income. Traumatic events impact the body, mind, and relationships and fracture people's basic trust and faith in the safety of their lives.

There are many different types of trauma:

- The unexpected death of a family member or loved one
- Chronic parental conflict or domestic violence
- Emotional, physical, or sexual abuse
- Rape or stalking
- Community violence
- Ongoing bullying
- Automobile accidents
- Serious injuries
- Acts of violence
- Terrorism
- Medical procedures
- Life-threatening natural or man-made disasters

A traumatic event is when the person perceives that his or her life is at risk and he or she has no control over the circumstances. This event is accompanied by feelings of helplessness, hopelessness, intense fear, and loss of control.

Often, what are considered "symptoms" or "behaviors" are adaptations the person uses to cope with the trauma. Trauma overwhelms the ability to experience a sense of control over oneself and the immediate environment. It also makes it difficult to maintain connections to others and to make meaning of experiences.

What is experienced as traumatic for one person may not be traumatic for another. People affected by trauma might be victims themselves or have seen other people be victimized. Many factors may influence individual perception, including age, gender, culture, life history, trauma history,

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The Impact of Trauma

In childhood and adolescence...

- Physical or sexual abuse in childhood increases the chance of being depressed or suicidal as an adolescent or adult by 300%.
- 82% of young people in inpatient and residential treatment programs have histories of trauma.
- Boys who experience or witness violence are 1,000 times more likely to commit violence than those who do not.

In adulthood...

- As many as 80% of men and women in psychiatric hospitals have experienced physical or sexual abuse, most of them as children.
- Up to two-thirds of both men and women in substance abuse treatment report childhood abuse or neglect.
- Nearly 90% of women with alcohol addiction were sexually abused as children or suffered severe violence at the hands of a parent.

Quoted from "The Damaging Consequences of Violence and Trauma," 2004, compiled by Ann Jennings, PhD. Accessed at <http://www.nationaltraumaconsortium.org/index.html>.

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Working with Child and Adolescent Trauma Survivors

Research has found that trauma can result in changes to brain chemistry and affect normal development. Despite this, child and adolescent survivors of trauma can and do recover.

Basing therapy on several principles helps the recovery process:

- Respect the person's coping techniques
- Believe in the person's capacity to heal and thrive in the future
- Take a practical approach to managing symptoms
- Build a nurturing therapeutic relationship of validation and expectation

The following list outlines key strategies for reversing the effects of trauma:

Safety.

This means safety from outside fears, relationships, and self-harm.

Teaching skills include:

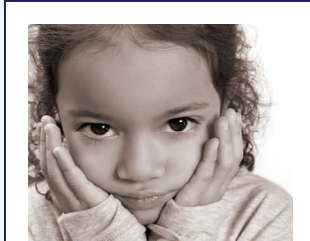
- Making safety procedures to manage outside fears
- Identifying and validating triggers for self-harm
- Planning substitute behaviors (journaling, deep breathing, art, music)
- Helping to build motivation and rewards for changing behavior

Stay Calm.

This means learning to anticipate and manage emotions, or **regulate affect**. Teaching skills include:

- Developing ways of "self-soothing" through imagining a safe place, self-care activities, or being creative, for example
- Providing psycho-education so the person better understands his or her symptoms (like flashbacks, dissociation)

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Let's start to ask, "What has happened to this person? Rather than "What is wrong with this person?"

This article is summarized from a presentation given by Joyanna Silberg, Ph.D. at the May 8, 2008 Trauma Informed Care Conference for Providers of Child, Adolescent, and Family Services, Parents and Caregivers in Pittsburgh, PA.

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and family relationships. What is important to understand is that trauma is a subjective experience.

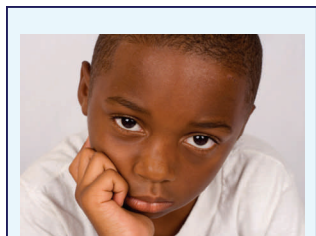
People who have experienced trauma often have feelings of shame, self-blame, and guilt. Individuals all cope with trauma differently. For many, trauma can impact their day-to-day lives in very harmful ways. People coping with trauma may:

- Act very upset and angry
- Have different coping skills
- Become depressed or feel emotionally numb
- Become anxious, fearful, or hyper-vigilant (over alert)
- Withdraw from friends and family (or family and friends withdraw from them)
- Have difficulties with trust and intimacy or forming attachments to others

- Have difficulty initiating and maintaining relationships
- Have trouble eating or sleeping
- Have an inability to focus or concentrate
- Abuse alcohol or drugs
- Feel or act out of control
- Engage in high-risk behavior, whether through violence, unhealthy sexual activity, hurting themselves, or suicide attempts
- Experience panic attacks or obsessive compulsive behaviors

(This list does not include all possible effects of trauma.)

Despite these challenges, many children and adults recover from the impact of trauma. With the help of therapy and a strong support system, people can manage their lives and work for a quality of life that is meaningful to them.



Common symptoms of trauma include difficulty forming attachments, depression or "emotional numbness," hyper-vigilance, and substance abuse.

Ten Principles of Trauma- Informed Services

Services that incorporate an understanding of the enormous effects of trauma on people are **trauma-informed services**.

This understanding is built into all levels of the organization and into all interactions with people receiving services (not just therapy) to help facilitate the recovery process.

The following ten principles can apply to all different service settings and are hallmarks of empowering, recovery-based services.

1. Recognize the impact of trauma on development and coping strategies

Recognizing and validating the long-lasting effects of trauma helps survivors feel safe and hopeful. Understanding the effects of trauma, common coping strategies of survivors, and how to effectively work with survivors is critical.

2. Identify recovery from trauma as a primary goal

Integrating trauma treatment into treatment for mental health and substance abuse is critical.

3. Employ an empowerment model

Taking an empowerment approach means the relationship between provider and survivor is collaborative. Goals are based on what the survivor wants.

4. Maximize choice and control over recovery

Working collaboratively also means having a goal of helping the survivor have life options and control over his or her choices.

5. Develop a relational collaboration

The therapeutic relationship should be based on respect, information, connection and hope.

6. Create an atmosphere of safety, respect, and acceptance

This involves looking at all lev-

els of the treatment experience, from the physical setting to the programming, procedures, and how staff work with people to assure a safe, respectful atmosphere.

7. Emphasize strengths, highlight adaptations over symptoms, and resilience over pathology

Symptoms are often adaptations, and people bring many strengths to treatment.

8. Minimize the possibilities of re-traumatization

Confrontational or invasive practices may trigger trauma responses and should be avoided.

9. Be culturally competent and understand the context of life experiences and culture

Cultural competency helps build a respectful therapeutic relationship.

10. Solicit client input and involve clients in designing and evaluating services

Whether through an advisory board, focus groups, or regular forums, involving survivors in designing and evaluating services can result in stronger services.



This model of trauma-informed care should be integrated into services, no matter the population served—children, adults, or families.

Local and State Efforts to Build Trauma-Informed Services

Many organizations are working to train staff to recognize and help people overcome the effects of trauma:

- The state of Pennsylvania has organized training for Residential Treatment Facilities (RTFs) that work with adolescents. This training has focused on **Sandra Bloom’s Sanctuary Model**, which guides agencies to build a trauma focus and provide treatment to help adolescents who have experienced trauma.
- The Allegheny County Office of Behavioral Health is training all service coordinators who work with children and adolescents in recognizing trauma and teaching staff how to link to trauma informed services.
- A coalition composed of The Allegheny County Office of Behavioral Health, Community Care Behavioral Health, the Conference of Allegheny Providers (CAP), and Allegheny Health-Choices, Inc. has held two trainings on trauma. The coalition will be holding an advanced training for clinicians in the spring.

These principles were compiled based on consensus from nine sites participating in the Substance Abuse and Mental Health Services Administration (SAMHSA) grant project, Women, Co-occurring Disorders and Violence Study, and summarized from the article "Trauma-Informed or Trauma-Denied: Principles and Implementation of Trauma-Informed Services for Women," by Elliott D., et al in the Journal of Community Psychology, (33:4, 2005).

A Journey of Recovery from Trauma and Addiction *by Anonymous*

I speak from experience when I say that the impact of trauma, especially trauma not promptly and properly treated, can last a lifetime. Following seven years of childhood incest and abuse at the hands of a family member and his 'friend' (frequently side by side with my younger sister) I experienced two very violent rapes as a young adult.

Feeling like there was nowhere to turn after the first adult incident, I crumbled into a drug addiction that nearly took my life on more than one occasion. I thank my Creator daily that the consequences of my addiction eventually got bad enough to shock me into recognizing that I was perpetuating my own abuse by staying stuck in destructive patterns of thinking and behavior.

It did not happen overnight, but I slowly began to learn a different way to live. Getting help for my drug addiction was one huge first step in the right direction, but the treatment that helped me face and recover from my addictions did little, if anything, to help overcome the impact of the trauma I had endured.

In fact, as I personally experienced, treatment can often re-traumatize or reinforce a false sense of guilt. When my daughters were born, I sought help with a vengeance. My desire to protect them from what had happened to me

consumed me. When they reached the age I had been when my abuse started, I was devastated every time I looked at them.

How could anyone abuse such an innocent young child? How was I supposed to make sense of what happened to me, at that young age or in the years that followed? Could I trust myself to take care of them when I was so full of sorrow that no one took care of me, and so full of guilt that I did not take care of my younger sister?

Even with years of weekly therapy, there were often times when I felt totally incapable of dealing with the responsibilities and day-to-day issues of parenting – let alone the backlog of feelings I was trying to catch up on. It was extremely hard work even with the wonderful, insightful, and knowledgeable therapists I found to help me. And that work did not end with just me. My parents, siblings, and I made the conscious choice to engage in therapy together as a family in an attempt to repair our relationships.



"It did not happen overnight, but I slowly began to learn a different way to live... When my daughters were born, I sought help with a vengeance."

I made the decision to go back to school and have been gainfully employed and financially independent for over ten years. I no longer fear I will always be a failure. I no longer abuse others or myself nor allow anyone to abuse me. My daughters are now in their early twenties, having grown to be intelligent, independent-minded, and confident young women, and we are very close.

I no longer fear relationships, men, or intimacy (sexual or otherwise) and have a healthy and fulfilling marriage and social life. I no longer require weekly therapy, am not on any psychotropic medication, and have demonstrated my ability to take good care of myself. I am committed to my continued growth and well-being, and seek additional help, if needed, given life's changing circumstances.

The impact of the abuse still affects me more than I wish it did, but I have learned to accept and adjust. Life can still be hard, but today I have tools and methods to help me respond in healthier, proactive, and productive ways.

Other Recovery Stories... at www.ahci.org/tic.php

"For me, therapy was a lifeline of support along with my strong faith in God. As of today, I feel so whole again and healed beyond my wildest imagination."

Read more about one woman's recovery after the trauma of her husband's arrest and conviction as a sexual offender.

"What I eventually discovered is that, for me, recovery from my own trauma could be painstakingly difficult and surprisingly rewarding."

Read more about a therapist's recovery from the trauma of a car accident.

"I continue to learn about the art of medicine from my patients who share the depths of their suffering...I recognize the importance of a genuine, caring relationship."

Read more about building a safe treatment environment from a local psychiatrist, Dr. Stephanie Richards.

Local Agencies for Trauma Services

Center for Victims of Violence and Crime

Assists with trauma services for crime-related trauma and provides information and referrals for trauma services.

Office: 412-482-3240 Hotline/24 Hrs.: 412-392-8582

Pittsburgh Action Against Rape (PAAR)

Assists with information and trauma services for sexual trauma, rape, incest, and child sexual abuse. Services for adults, children and families.

Office-412-432-5665 Hotline/24 Hrs.: 1-866-363-7273

Allegheny General Hospital's Center for Traumatic Stress in Children and Adolescents

Serves children and families who experience traumatic events in their lives, providing evaluation and treatment of children who have experienced a variety of traumatic life events.

Main Number: 412-330-4328

Women's Center and Shelter/Greater Pittsburgh

Assists with trauma services for domestic violence. Services for adults, children and families. Provides information and referrals for trauma services.

Hotline: 412-687-8005 Toll Free: 877-338-8255

re:solve Crisis Network

Confidential telephone or face-to-face counseling is available 24 hours a day, 365 days a year, regardless of insurance coverage or ability to pay.

1-888-7-YOU CAN (1-888-796-8226)

Accessing Services and Interviewing a Counselor

If you or your child needs trauma-related services, you can start with the resources listed on this page or call your insurance company. If you do not have insurance, you can call the Allegheny County Office of Behavioral Health at 412-350-4457.

Finding a counselor you feel comfortable with can be intimidating. It is helpful to bring a list of questions to your first appointment to make sure you understand how the counselor will work with you and/or your child.

Questions to ask include:

- How she or he can help with a specific issue (anger, relationships, addiction).
- What approach he or she takes during sessions, for example using art, writing, talk, etc.
- If she or he refers you to another provider for medication needs.
- How long and how often appointments are scheduled.
- How he or she responds to emergencies, and if you can call if you experience a crisis.
- How much the sessions cost.

Print and Online Resources for Survivors, Families, and Providers

BOOKS FOR ALL AUDIENCES:

- *The Post-Traumatic Stress Disorder Sourcebook*, by Glenn R. Schiraldi, Ph.D.
- *Take Time for Your Life*, by Cheryl Richardson
- *The Courage to Heal*, by Ellen Bass and Laurie Davis
- *The Family*, by John Bradshaw
- *Victims No Longer, Men Recovering from Incest and other Sexual Child Abuse*, by Mike Lew and Ellen Bass

BOOKS FOR PROVIDERS:

- *Creating Sanctuary: Toward the Evolution of Sane Societies*, by Sandra L. Bloom, M.D.
- *Trauma and Recovery*, by Judith Herman, M.D.
- *Healing Trauma: A Pioneering Program for Restoring the Wisdom of Your Body*, by Peter Levine
- *Getting Through the Day*, by Nancy Napier
- *Treating Trauma and Traumatic Grief in Children and Adolescents*, by Anthony Mannarino, Ph.D. and Judith Cohen, M.D.

WEB SITES:

- Substance Abuse and Mental Health Administration, National Center for Trauma-Informed Care: <http://mentalhealth.samhsa.gov/nctic/trauma.asp>
- Sidran Institute, Traumatic Stress Education and Advocacy: www.sidran.org
- Sanctuary Model for Trauma-Informed Care: www.sanctuaryweb.com
- Risking Connection: www.riskingconnection.org
- David Baldwin, Trauma Information: www.trauma-pages.com
- Child Trauma Academy: www.childtrauma.org
- International Society for The Study of Trauma and Dissociation: www.isst-d.org

Working with Child and Adolescent Trauma Survivors

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Increase Self-Awareness.

Dissociation is a lack of connection between things that should be associated; it is often called emotional numbness and is very common for trauma survivors. An example would be not feeling fear when remembering a sexual assault.

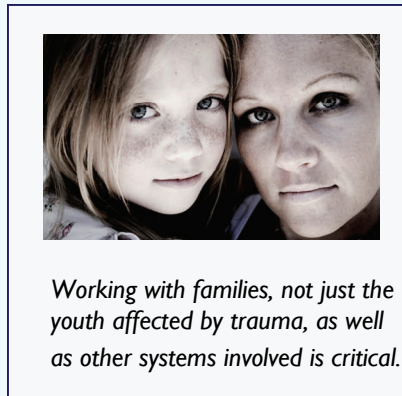
Teaching strategies include:

- Helping to rebuild the connections and to become more self-aware.
- Promoting self-acceptance and destigmatizing the event.

Take Action.

Guiding the person toward actions can be helpful, including:

- Creating physical activities to handle flashbacks.
- Planning the future.
- Getting justice.
- Focusing on mastery.



Develop Reciprocal Relationships.

Children and adolescents often learn from trauma that people can't be relied on and as a result have trouble forming attachments to others.

The relationship between the therapist and the youth serves as an example of a positive relationship. The therapist should always:

- Show acceptance, appreciation, respect and unconditional affection.
- Give choices and discuss consequences as logical outcomes, not punishment.
- Reinforce positive attempts of the youth to change behavior and care for him/herself.

Working with the family is critical to build reciprocal relationships. Treatment also involves:

- Educating parents about trauma and dissociation.
- Teaching parents skills that can help manage and support the youth.
- Helping to resolve attachment issues between youth and parents.



444 Liberty Ave., Suite 240 Phone: 412-325-1100
 Pittsburgh, PA 15222 Fax: 412-325-1111
 Web: www.ahci.org

OUR MISSION IS TO SUPPORT EQUITABLE ACCESS ACROSS ALL POPULATIONS TO QUALITY, HOLISTIC, COST-EFFECTIVE BEHAVIORAL HEALTH CARE.

Allegheny HealthChoices, Inc. (AHCI) is an innovative non-profit agency dedicated to supporting the provision of high-quality mental health and substance abuse treatment. Our services cover a range of areas:

- System Development and Planning
- HealthChoices (Medicaid) Oversight
- Assertive Community Treatment (ACT) and Community Treatment Teams (CTT)
- Information Systems
- Housing

Are you interested in training or learning more about trauma? Please let us know by completing a short survey. Go to <https://www.surveymonkey.com/TIC>

Or complete and return the printed copy of the survey (for people who receive the printed report).

All respondents will be entered to win a \$50 VISA gift card.

One entry per person. Responses must be submitted by July 1, 2009.

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