

Understanding Trauma

DEFINING TRAUMA

Trauma is an experience that compromises safety. Safety extends beyond our physical safety to include our social, moral, and psychological safety. Safety is compromised when threats are perceived or experienced to what someone does, says, thinks, values, believes, or desires. Experiences become traumatic when an overwhelming amount of stress causes the chronic activation of the autonomic central nervous system (ANS). Whether a person is traumatized or not, the ANS system can be triggered by thoughts, emotions, senses, actions, and interactions.

TYPES OF TRAUMA

1. **Acute trauma** results from a single incident.
2. **Chronic trauma** is repeated and prolonged such as domestic violence or abuse.
3. **Complex trauma** is exposure to varied and multiple traumatic events, often of an invasive, interpersonal nature.
4. **Developmental Trauma** are the experiences of trauma prior to the age of six, often interpersonal in nature.
5. **Intergenerational Trauma** is the transmission of post-traumatic stress symptoms and adaptations to offspring.

Trauma-Informed Care

Trauma has impacted humans for centuries through cultural norms, behaviors, and patterns passed through generations. Understanding that no human is exempt from trauma enables the understanding that no human is exempt from stress or harmful cultural norms or practices.

Trauma is the chronic activation of the Autonomic Nervous System (ANS) following safety threats, real or perceived. The ANS has three branches: (1) Ventral vagal branch; (2) Sympathetic branch; and the (3) Dorsal vagal branch. The recognition of these stress responses will guide in trauma informed care.

ANS Branch	Description	Indicators of Branch
Ventral Vagal	This is the branch responsible for rest, digestion, relaxation, and intimacy. This branch is active when safety is present.	Rational thinking; thinking clearly; regulated; can feel and think at the same time ; expresses range of emotion; able to use executive functioning; etc.
Dorsal Vagal	This is the branch responsible for the freeze and fawn responses. This branch is active when real or perceived safety threats are present.	Depressed; staring off into space; self-blame; nonchalant; aloof; silence; increase in sleep; isolation; restricted affect; daydreaming; fatigue; tired; overly permissive; shut-down; low motivation; hopelessness; helplessness, dissociation, blank mind, numb, etc.
Sympathetic Branch	The is the branch responsible for the fight and flight responses. This branch is active when real or perceived safety threats are present.	Avoidance; procrastination; irritation; insomnia; trouble sleeping; aggression; minimization; denial; stomach aches; rapid breathing; restlessness; racing thoughts; anger; twitches, poor concentration; poor impulse control, etc.

Responding to Trauma

FOLLOW THESE SIMPLE STEPS TO IMPLEMENT TRAUMA-INFORMED CARE:

1. **Attune to and regulate yourself**

The activation of the autonomic central nervous system is a normal response to stress, anxiety, fear, and anger. Attune to what is coming up for you so that you may achieve the next two steps to the best of your ability. When you are aware of yourself and regulated, you are ready to attune to the teen/parent.

2. **Attune and support regulation of your teen/parent**

Prior to identification of the appropriate intervention, one must attune to teen/parent. Consider what is being communicated non-verbally and verbally about the felt sense of safety. Upon detection of regulation and safety, you are better equipped to identify and implement an effective strategy/action.

3. **Choose an strategy/action**

Once safety and regulation are assessed, it can effectively be addressed. Without safety, regulation cannot occur. Without regulation, executive functioning is compromised and/or unavailable.

4. **Implement the chosen strategy**

Maintain awareness of the stress responses and safety threats that arise for you and the teen or parent to keep a trauma-informed lens and implementation.

5. **Repeat step (s) as necessary**

Engagement & De-escalation Strategies

Use of self is the most important intervention and must accompany all strategies. This is remaining mindful of how you show up and being genuine in your display of empathy and engagement with others. You are the most important intervention and these strategies will be enhanced by your use of self. When you engage someone with these strategies you are promoting safety and resilience through activation of the ventral vagal nerve of the ANS.

Technique	Description
Affirmations Statements	A statement implying that you recognize and accept the person's thoughts, intentions, efforts, feelings, and behaviors as understandable.
I-Statements	A statement beginning with "I" to respectfully communicate your thoughts, feelings, opinions, expectations, boundaries, and needs.
Reflective/Summary Statements	A statement used to summarize the speaker's content, emotion, desires, and/or needs. It allows for clarification and enhances social safety.
Open-Ended Questions	Questions can be used to guide next steps, clarify and explore information, provide options, and demonstrate compassion. Open-ended questions begin with what, when, where, or how.
Choices	Offering choices demonstrates respect, promotes autonomy, and increases motivation and compliance. It may be two simple or complex choices that are developmentally appropriate and within the compliance with policies.
Asking Permission	An explicit request for consent for the desired or intended action (I.e. giving feedback, explaining something, giving resources).