TRAUMA: Experience(s) that causes intense physical and psychological reactions. It can refer to a single event, multiple events, or a set of circumstances that is/are experienced by an individual as physically and emotionally harmful or threatening and that has lasting adverse effects on the individual's physical, social, emotional and spiritual well-being.*

*According to the Substance Abuse and Mental Health Services Administration (SAMHSA)

Prevention & Intervention Techniques for Reducing Disobedience & Disruption ~A TRAUMA INFORMED APPROACH~

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Prepared for Mandy Davis, LCSW, PhD

What does it mean to be Trauma Informed?

Philosophy: Trauma Informed practices are a way to engage others, based on the awareness and understanding that the experience of trauma is pervasive and deeply impactful, which can lead to a wide range of vulnerabilities. A Trauma Informed approach prioritizes a commitment to supportive services that avoid retraumatization, in order to facilitate healthy outcomes for all.

Paradigm shift: Preventing re-traumatization and promoting safety, self awareness, stability & regulation are prioritized before disciplinary action and assertion of authority.

Priorities: Safety. Prevention. Predictability. Trust. Relationship. Transparency. Empowerment. Cultural competence. Thwart re-traumatization. Resilience.

Policies, Procedures & Practices: Trauma Informed practices permeate every aspect of the environment. Choice. Explanation. Collaboration. Representation. Accommodation. Clarification.

Perception of Behavioral Process:

Stimulus (environment, sensory experience or thought) LEADS TO *Processing* (assessing, associating or remembering) LEADS TO Action (behaviors).

Benefits of a Trauma Informed Approach

- Work smarter, not harder
- Enjoy students & colleagues more
- Avoid burnout & emotional exhaustion
- Reframe perceptions of personal offense
- Be more effective, especially during difficult times

What is required of me?

AWARENESS

of yourself and others

COMPASSION

for yourself and others

POSITIVE REGARD

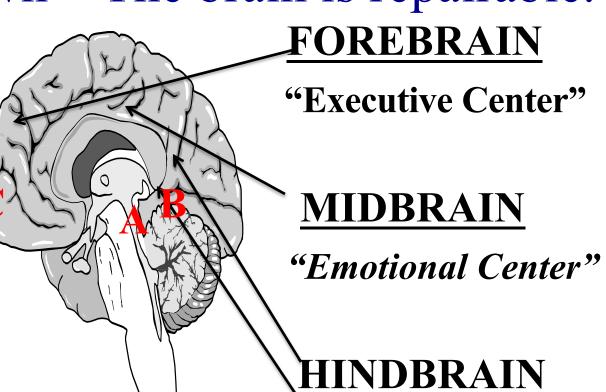
assume the best of people & regard others with empathy

CHANGE

see & do things differently

Brain Science

*The brain is built over time & develops from the bottom up *Development is affected by many factors, such as relationships, environment & experiences (neuroplasticity) *Function is malleable, yet consistently prioritizes survival *Different parts of the brain have specific functions, which can be heightened, altered, disrupted and/or altogether shut down *The brain is repairable.



CORTEX

Rational thought, reason, logic, selective attention & memory **LIMBIC**

"Emotional Center" Emotional reaction, appetite,

CEREBELLUM~BRAINSTEM

Assesses danger, motor operations, & essential physical functions

Left Brain: Language, rationale, logic & analytic thought

Trauma's Affect on the Brain

If exposed to trauma during development, the brain's organization & functioning can experience a cascading impact (bottom up). After a traumatic experience, the brain's detection of & response to stressors remains heightened. As a result, stimulus that might otherwise look nonthreatening can trigger a relived experience of the original trauma response (re-traumatized). This can result in a heightened or dissociative cognitive, emotional and physical response. Re-experienced over time, the central nervous system becomes imbalanced.

Internal Experience~External Expression

- (A) Amygdala: Senses danger & stimulates secretion of stress hormones. When adrenaline & cortisol are secreted the body and mind experience freeze/fright/fight/flight.
 - ~Aroused. Agitated. Sweating. Flushing. Fidgeting~
- (B) Hippocampus: The surge of hormones distracts attention, creates hyper-vigilence and disrupts memory & attention, except for heightened awareness of danger.
 - ~Inattentive. Avoidant. Impaired memory & speech~
- (C) Prefrontal Cortex: Function decreases, impairs planning Childhood: A convergence of Hentges, L., & Lynch, J. J. Counseling Association Ar judgment & reasoning and reduces impulse control *Left/ Right Brain don't communicate. Left Brain shuts off. ~Intensity (emotional & physical). Dissociated (mentally & emotionally). Unable to reason. Impulsive. Reactionary-Mean? [PowerPoint slides]. Retrieved from: http://www.cpe.vt.edu/ocs/sessions/csa-trauma.pdf ~ Evans, J.K. (2013). What does "Trauma-Informed Care" Really Mean?

Trauma Truths

Trauma is: An insult to neurodevelopment. A wound. Life altering. Cumulative. Preverbal. Acute. Chronic. Complex. Vicarious/Secondary. Toxic Stress. Experiencing trauma: Changes the nervous system. Freezes thinking. Results in lasting internal chaos. Alters perception of the world & future experiences. Can result in PTSD. Disrupts the stress~ hormone system. Increases susceptibility to future (re)traumatization. *Trauma creates*: Long term impact on developing brain. Memory lapses. Learned helplessness. Shame. Elevated stress hormones. Contamination of future experiences. Compulsions to repeat or recreate trauma. context memory & attachment Outward expressions of internal chaos and confusion.

Trauma Can be Triggered During Times of Safety

A trigger is a stimulus that prompts an embedded memory Right Brain: Thought, intuition, creativity & emotional processing of past trauma/traumatic experience, which recreates the experience of trauma, even in an otherwise safe conditions. Triggers are a sensory reminder which are not necessarily consciously associated, may/not be specific to the traumatic content or environment, and might be miniscule, remote or benign to others (such as a blue shoe). Once triggered, the brain and body respond as they did to the initial trauma/ traumatic experience.

Trauma Informed Approach to Triggers

~Triggers can't always be anticipated or predicted~ Commitment to the principles and practices of being Trauma Informed reduces the likelihood of triggering and increases awareness of the signs/behaviors of someone who is being triggered. Prevention might include giving a warning before exposing others to intense, unusual or unexpected stimulus.

Examples of School Triggers: Public reprimand. Bullying. Fight. Fire alarm. Emotional content (writing prompt, movie or reading). Substitute teacher. Pop quiz. Racism. Shaming.

Reducing Triggers & Their Impact: Prioritize safety. Establish class rules & routines. Create plan for students who get triggered. Promote self worth. Teach self regulation Maintain positive relationships/regard. Provide external executive function for students. Use color coding. Be predictable. Provide students legitimate choices. REFERENCES & RESOURCES

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[PowerPoint slides]. Retrieved from: http://www.cpe.vt.edu/ocs/sessions/csa-trauma.pdf ~ HelpGuide.org Emotional and Psychological Trauma: Symptoms, [continued...

Possible Student Behaviors When Triggered

Frequently sick. Relationship troubles. Angry. Overtired Mood swings. Disorganized. Easily startled. Illogical. Highly reactive. Absent. Late to class. Decreased reading ability. Daydreaming. Drug & alcohol use/ abuse. Unprepared. Disobedient. Agitated. Poor listening. Fighting. Not following direction. Distracted Irrational. Skipping class. Emotionally intense. Chronic irritability. Inattentive. Talking out of turn. Aggressive. Isolated. Frustrated. Diminished impulse control.

Modeling/Promoting De-escalation & Self Regulation **DE-ESCALATION BEFORE ENGAGEMENT**

The skills of self-regulation can be taught like any other subject, by introducing the concepts, providing examples & explanations of techniques and modeling for students.

- -Identify & calmly express personal frustration.
- ~Verbalize attempt to slow thoughts down by using techniques of mindfulness: deep breathing, getting grounded (sit down, feet on floor, hands on knees) & slowing thoughts down.
- Think out loud. Voice executive thought process: identify thoughts and feelings, assess physical state, evaluate environment, consider options, and evaluate possible outcomes to determine best course.
- -Normalize: Assure the person they are normal; it is the experience/effects of trauma that is not ordinary.

Mitigate shame & maintain positive regard.

- Provide time/space for triggered students to: Breathe. Drink water. Get grounded. Eat a healthy snack (no sugar or caffeine). Practice mindfulness. Move their body. Leave the room. Walk. Re-engage when regulated.

TACTICS & TIMING MATTER

REFRAMING RESPONSE TO DISOBEDIENCE & DISRUPTION

A direct attempt to assert power, control or discipline over someone during an acute experience (of trauma or re-traumatization) amplifies the negative affects. Diffuse first. Address others issues once regulation, sense of safety & full cognition has been restored.

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