

Trauma Informed Care

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What is trauma?

- Individual trauma results from an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life-threatening and that has lasting adverse effects on the individual's functioning and mental, physical, social, emotional, or spiritual well-being.

-Substance Abuse and Mental Health Services Administration (SAMHSA)

Examples of trauma include,

- Experiencing or observing physical, sexual, and emotional abuse
- Childhood neglect
- Having a family member with a mental health or substance use disorder
- Experiencing or witnessing violence in the community
- Poverty and systemic discrimination

What are Adverse Childhood Experiences (ACEs)?

- Adverse Childhood Experiences (ACEs) are traumatic experiences that children experience before the age of 18 that can have lasting impacts on their mental health, physical health, and general well-being.

What are examples of Adverse Childhood Experiences (ACEs)?

- Experiencing physical or emotional abuse
- Abandonment or neglect
- Losing a family member to suicide
- Growing up in a household with substance abuse or alcoholism
- Having a mentally ill parent
- Having an incarcerated parent
- Being a child of divorce or parental separation

Adverse childhood experiences are traumatic experiences

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Examples of ACEs include,

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Risk Factors For Adverse Childhood Experiences

- Coming from a low-income family
- Coming from a family with a low level of education
- Growing up with high levels of family stress
- Growing up with high levels of economic stress
- Growing up in a family that is not close-knit and doesn't speak openly about feelings
- Having parents who used spanking or corporal punishment
- Having parents who themselves had been abused or neglected
- Living in a community with high rates of violence
- Living in an economically disadvantaged community
- Living in a community with high levels of substance abuse
- Living in a community with few resources for youth

Factual Data

Prevalence of Individual ACEs for Children in Various Racial/Ethnic Groups

	Hard to cover basics like food or housing somewhat or very often	Parent or guardian divorced or separated	Parent or guardian died	Parent or guardian served time in jail	Saw or heard parents or other adults slap, hit, kick, or punch in home	Victim of or witness to violence in neighborhood	Lived with anyone mentally ill, suicidal, or severely depressed	Lived with anyone with problem with alcohol or drugs
United States								
White, NH	22	23	3	7	5	3	9	10
Black, NH	37	35	7	16	9	7	6	8
Asian, NH	14	7	2	1	2	2	2	1
Other race, NH	31	27	4	11	7	6	11	12
Hispanic	29	28	3	8	6	4	6	9
All children	25	25	3	8	6	4	8	9

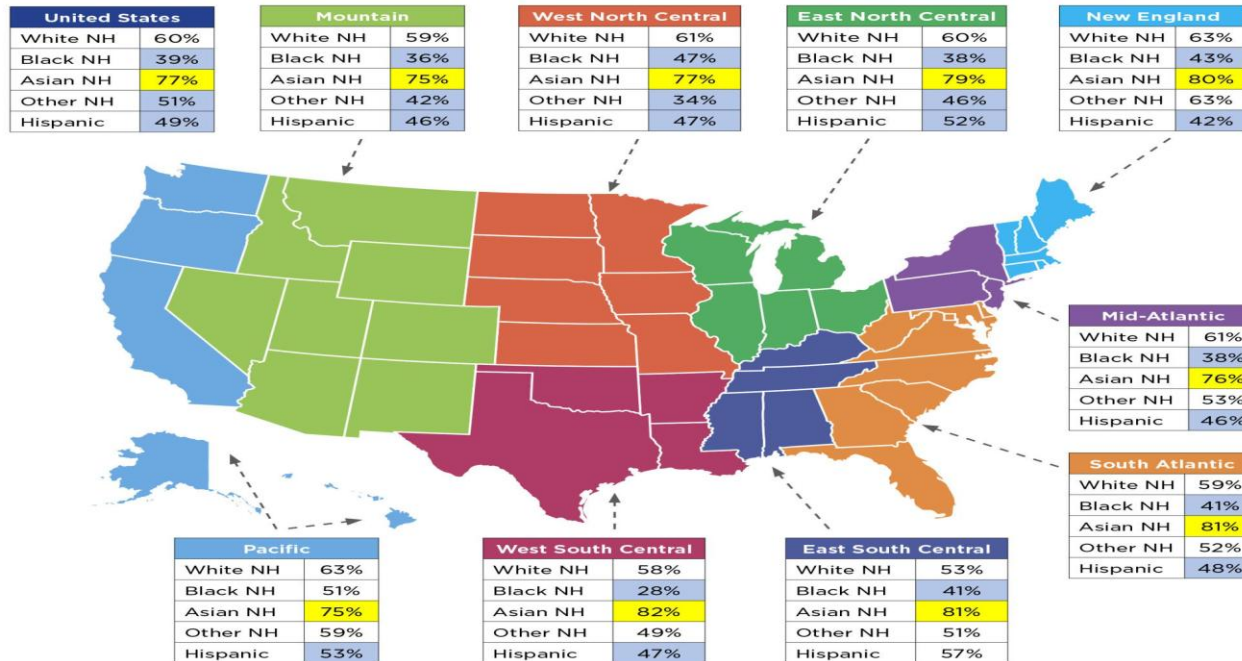
Yellow shading white non-Hispanic children at a statistically significant level.
 Blue shading = Percentage is lower than white non-Hispanic children at a statistically significant level.
 Red shading = Estimate should be interpreted with caution because the relative confidence interval is greater than 120 percent. See the "About the data used in this report" section for more information.

g = Percentage is higher than

(Sacks & Murphy, 2008)

Factual Data

Percentage of children with no ACEs



NH=Non-Hispanic

Yellow shading = Percentage is higher than white non-Hispanic children at a statistically significant level.
 Blue shading = Percentage is lower than white non-Hispanic children at a statistically significant level.
 Red shading = Estimate should be interpreted with caution, because the relative confidence interval is greater than 120 percent. See the "About the data used in this report" section for more information.

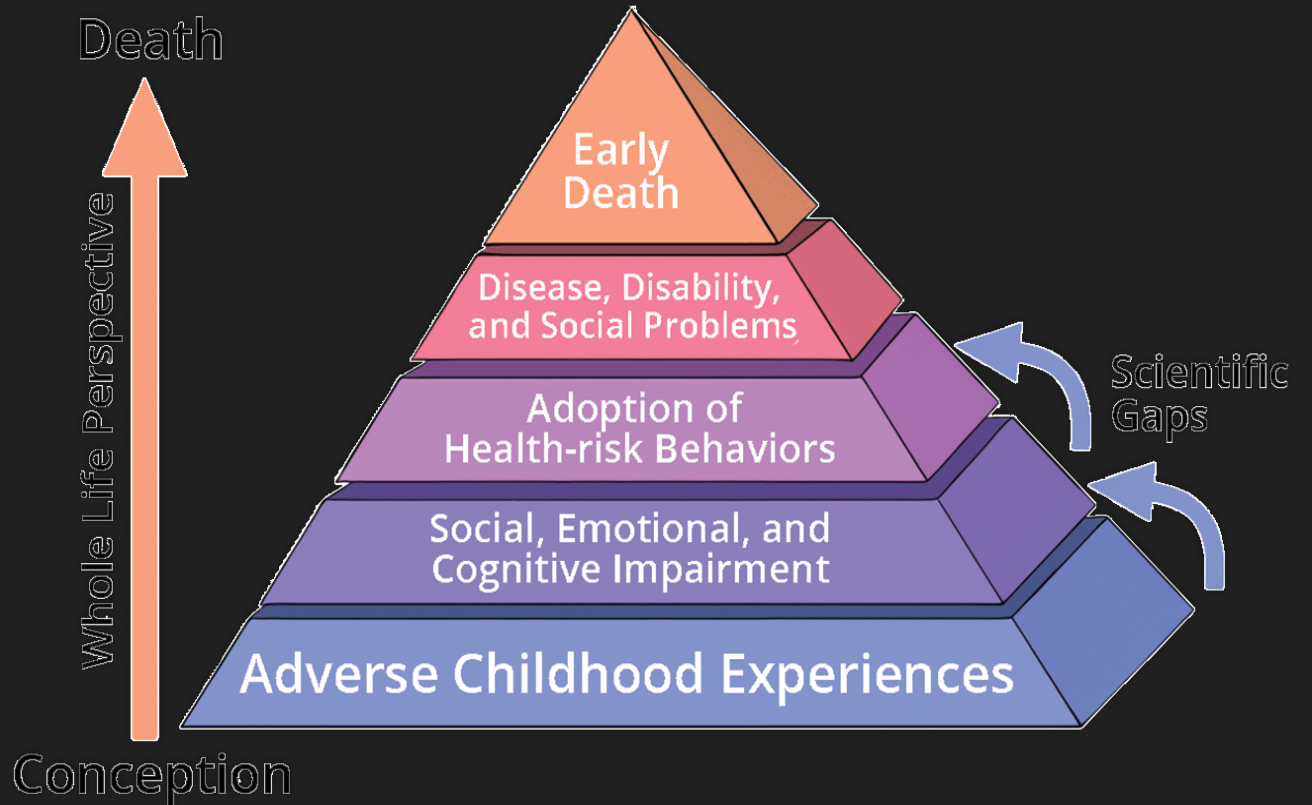
(Sacks & Murphy, 2008)

ACEs can lead to early death

Findings showed that people who experienced four or more adverse childhood events had:

- increased risk for smoking, alcoholism, and drug abuse
- increased risk for depression and suicide attempts
- poor self-rated health
- 50 or more sexual partners
- greater likelihood of sexually transmitted disease
- challenges with physical inactivity and severe obesity

("The ACE Study", 2008)



ACE Score is associated with

- likelihood of attempted suicide across the lifespan
- increased risk of broken bones
- heart disease
- lung disease
- liver disease
- multiple types of cancer
- impaired job functioning
- homelessness
- criminal justice involvement

Childhood Risk Factors for Child Delinquency and Later Violent Juvenile Offending

Individual Factors

- Early antisocial behavior
- Emotional factors such as high behavioral activation and low behavioral inhibition
- Poor cognitive development
- Low intelligence
- Hyperactivity

Family Factors

- Witnessing violence in the home
- Divorce
- Teen parenthood
- Maltreatment
- Parental Mental illness
- Family violence
- Large family size/family structure

Peer factors

- Association with deviant peers
- Peer rejection

School and community factors

- Failure to bond to school
- Poor academic performance
- Low academic aspirations
- Living in a poor family
- Neighborhood disadvantage
- Disorganized neighborhoods
- Focus on delinquent peer groups
- Access to weapons

(Wasserman, Gail, et al., 2003)

Source: This list is largely based on R. Loeber and D.P. Farrington, eds. 2001. Child Delinquents: Development, Intervention, and Service Needs. Thousand Oaks, CA: Sage Publications, Inc.

Symptoms of Trauma in At-risk youth

- Aggression
- Anger
- Anxiety
- Overreacting to minor irritants
- Unexplained irritability
- Not Trusting of Adults
- Manipulative behaviors (Prevent Unwanted Outcomes)
- Difficulties forming healthy and stable relationships
- Disturbed sleep
- Developmental Regression
- Dissociation
- Easily startled
- Talking about the traumatic event and or reacting to reminders (trauma triggers)

How do we respond to youths trauma?

- Be aware of symptoms and signs of trauma.
- Do no harm.
- Do not expect or force youth to share their traumatic experiences. (Can cause secondary traumatic stress)
- Constantly assess self by doing self-evaluations while working with hostile youth.
- We want to recognize trauma symptoms in the youth we serve and meet them at their specific need because of that trauma.

How do we handle youth with care?

- Be aware of symptoms and signs of trauma.
- Gently and **repetitively** reinforce new positive expectations of trust, fairness, and transparency.
- Gently and **repetitively** redirect inappropriate beliefs and negative behaviors due to trauma.
- Do not take the youth's aggressive behaviors and words personally. (**Do No Harm**)
- Keep and maintain professional **boundaries with youth**.

Maslow's Hierarchy of Needs



Key Ingredients to Trauma-Informed Organizational Practices.

1. Leading and communicating about the transformation process
2. Engaging patients in organizational planning
3. Training clinical as well as non-clinical staff members
4. Creating a safe environment
5. Preventing secondary traumatic stress in staff

(Menschner, Christopher, and Alexandra Maul, 2016)

References

ACE Response (2008). "The ACE Study". http://www.aceresponse.org/who_we_are/ACE-Study_43_pg.html

Menschner, Christopher, and Alexandra Maul. "Key Ingredients for Successful Trauma-Informed Care Implementation." *Substance Abuse and Mental Health Services Administration*, Apr. 2016, www.samhsa.gov/sites/default/files/programs_campaigns/childrens_mental_health/atc-whitepaper-040616.pdf. Accessed 6 Oct. 2023.

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Wasserman, Gail, et al. "The Prevalence of Adverse Childhood Experiences, Nationally, by State, and by Race or Ethnicity." *Child Trends*, Apr. 2003, www.ojp.gov/pdffiles1/ojjdp/193409.pdf. Accessed 9 Oct. 2023.

Wisner, Wendy. "What Are Adverse Childhood Experiences (Aces)?" *Verywell Mind*, Verywell Mind, 24 Feb. 2022, www.verywellmind.com/what-are-aces-adverse-childhood-experiences-5219030.

PDF & LINKS

- [Trauma Informed Care Implementation.pdf](#)
- [What Are Adverse Childhood Experiences \(ACEs\)? \(verywellmind.com\)](#)
- <https://www.childtrends.org/publications/prevalence-adverse-childhood-experiences-nationally-state-race-ethnicity>
- <https://www.ojp.gov/pdffiles1/ojdp/193409.pdf>
- [http://www.aceresponse.org/who we are/ACE-Study 43 pg.html](http://www.aceresponse.org/who_we_are/ACE-Study_43_pg.html)