

# Handout: Trauma Informed Care

Trauma;

- occurs from the result of violence, abuse, neglect, loss, disaster and other emotionally harmful experiences (SAMHSA, 2014). It can be physically or emotionally harmful or life threatening. For some the effects can last a lifetime, with early intervention people are able to overcome the effects of trauma;
- SAMHSA, (2014), refers to the three 'E's' of Trauma being Event(s), Experience(s) and Effect. This refers to each individual and how they can have similar or very different effects from the event even if they are siblings experiencing the same event the experience can be different. Different levels of feelings and behaviours can be displayed from humiliation, guilt, shame, betrayal, silencing and powerlessness.
- Early childhood trauma has neurobiological, cognitive, socio-emotional and behavioural consequences that can potentially reverberate throughout the lifespan of the individual (Vericat Rocha & Ruitenber, 2019, pg 141) .
- Is not isolated to age, gender, socioeconomic status, race, ethnicity, geography or sexual orientation (SAMHSA, 2014);
- It is psychologically distressing event that is outside the range of normal childhood experience and involves a sense of intense fear, terror and helplessness (Perry, 2002, as cited in WHEALTH, 2012);
- Impact is different for different individuals. Two siblings could go through the same situation and be affected differently based on the physical and cultural environment and the environment during pregnancy, the nature of care provided and genetics, temperament, health issues and disability (WHEALTH 2012).
- Is revisited and child can be retraumatized and will express their emotions in different ways from withdrawal, compliance, numbness, acting out, anger as some examples as in early childhood they don't have the words to express how they are feeling.
- Needs a collaborative approach between government, community and childhood service and or school.
- Experienced by children from birth to six can lead to serious physical and mental health problems. Children at this age are reliant on their guardians support to survive and if they witness a threat to safety of say their mother then they feel this as a threat to their own safety ( Bartlett and Smith 2019).
- Can affect children's emotional development such as forming secure attachments, coping with stress, low self esteem, feelings of hopelessness, worthlessness, feeling responsible for bad things, poor social skills and behavioural problems (Bartlett and Smith 2019).
- Children can be affected by trauma through transgenerational effects where a parent who experienced trauma can affect another such as the Australian Indigenous culture affected by the stolen generation, substance abuse, poverty and dispossession (Stanley et. al, 2003).

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- Understand theories and practices to help support children such as (Wall et, al., 2016 pg 16)
  - Attachment Theory—John Bowlby, forming secure attachments between child and caregiver and how this informs children being able to have secure adult interpersonal relationships. During trauma attachments can be broken and insecure and trauma informed care builds on attachment and relationships to support self concept and wellbeing;
  - Circle of Security;
  - Social cognitive theories of self-regulation helps us to perhaps understand how children respond to trauma. Trauma informed care allows children to regulate their response to trauma and have a sense of mastery over their environment, a sense of security and safety.
  - Fundamental attribution error—where people consider the kind of person rather than the social and environmental impact on the person. One example may be where we blame the victim rather than understand and seek further information. It is important not to rush and judge people.
- Understand and/or be informed child’s development, age, situation, culture and family
- Notice things the child does well, look at their strengths and build on their skills.
- Provide consequences not punishment
- Always respond with kindness and look at everything as a learning opportunity for all involved.
- Communicate and build relationships with families/guardians.

## References

Australian Government Department of Families, Community Services and Indigenous Affairs, (2012). Trauma and young children—a caring approach project Women’s Health Goulburn North East available at <https://www.whealth.com.au/documents/work/trauma/LiteratureReview.pdf>

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## Handout: Trauma Principles

There are key principles fundamental to trauma informed approaches and these are (SAMHSA, 2014);

**Safety:** Children and all stakeholders feel physically and psychologically safe.

**Trustworthiness and transparency:** Service practices and processes are transparent and trusting.

**Collaboration:** levelling power differentials between staff and clients to ensure a collaborative approach to healing.

**Empowerment:** For recovery and support. Beware of your own status as an educator and not put your self in a position to exert a power play. Teach skills in relation to social and emotional development for coping, responding and repairing.

**Cultural, historical and gender issues:** processes responsive to the cultural needs of clients. Does not stereotype and is not biased by race, ethnicity, sexual orientation, diverse ability, age, religion, gender identity, geography, marital or any other status. Builds cultural connections and incorporates a service culture of connectedness and inclusion. With practices, processes and policies that support and are responsive to address trauma and historical trauma.