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## The trauma informed human service

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## What percentages of mental health client have histories of trauma?

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- 90% of public mental health clients have been exposed to (and most have actually) experienced multiple experience of trauma. (Goodman, Rosenberg et al., 1997; Mueser et al., 1998)
- 75% of women and men in substance abuse treatment report abuse and trauma histories. (SAMHSA/CSAT, 2000)
- 97% of homeless women with mental illness experienced severe physical and/or sexual abuse, 87% experienced this abuse both as children and as adults. (Goodman, Dutton et al., 1997)
- Nearly 8 out of 10 female offenders with a mental illness reports having been physically or sexually abused. (Smith, 1998)



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## Definition of trauma informed models

- "Trauma-informed" services are not specifically designed to treat symptoms or syndromes related to sexual or physical abuse or other trauma, but they are informed about, and sensitive to, trauma-related issues present in survivors.
- A "trauma informed" system uses the understanding to design service systems that accommodate the vulnerabilities of trauma survivors, and allow services to be delivered in a way that will avoid re-traumatization and will facilitate consumer participation in treatment.



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## Understanding of Trauma

### Traditional Human Services Paradigm

- Trauma is viewed as a discrete event
- The impact of trauma follows a definable course with specifiable time limits



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## Understanding of Trauma

### Trauma Informed Human Service

- The impact of trauma is seen in multiple, apparently unrelated life domains
- Trauma begins a complex pattern of actions and reactions which have a continuing impact over the course of one's life.



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## Understanding of Consumer/Survivor

### Traditional Human Services Paradigm

- The consumer's problem is understood as an individual problem independent of context
- The problem and the symptom are synonymous
- The consumer is often given either too little or too much responsibility



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## Understanding of Consumer/Survivor

### Trauma-Informed Human Services Paradigm

- An integrated, whole person view of both of the individual and her problems
- Symptoms are understood not merely as complaints but also as attempts to cope and survive
- Appropriate and collaborative responsibility allocation



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## Understanding of Services

### Traditional Human Services Paradigm

- The primary goals of services are stability and the absence of symptoms



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## Understanding of Services

### Trauma-Informed Human Services Paradigm

- Primary goals are empowerment and recovery



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## Understanding of Service Relationship

### Traditional Human Services Paradigm

- Hierarchical provider/consumer relationship
- The consumer is seen as a passive recipient of services
- The consumer's safety and trust are taken for granted



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## Understanding of Service Relationship

### Trauma-Informed Human Services Paradigm

- A collaborative relationship between the consumer and the provider of her choice
- The consumer is an active planner and participant in services
- The consumer's safety must be guaranteed and trust must be developed over time



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## Common Trauma Themes

- Betrayal occurs at the hand of a trusted caregiver or supporter (trust, security)
- Hierarchical boundaries are violated and then re-imposed at the whim of the abuser, and the victim is powerless to leave the relationship (powerless)
- Secret knowledge, information and relationships are maintained or even encouraged(secret)



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### Common Trauma Themes(2)

- Reality represents the values and beliefs of the abuser (hopeless for the change)
- The victim's feeling is under-estimate, and the voice of the victim is unheard, denied or invalidated (helpless, autonomy)
- They were blamed for their problem (low self value)



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### The issue of Re-traumatization and Re-enactment

- The risk of the traditional human service paradigm re-enacting the abusive situation and relationship
- Induction of strong emotion, resistance and traumatic response in the treatment
- The reinforcement of the feeling of victim



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### 5 Core Elements of a Trauma-Informed System

- Administrative Commitment
- Universal Screening for Trauma Histories
- Training and Consultation
- Hiring and Human Resources Practices
- Review of Provision of Services and Policies



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### Administrative Commitment

- Administrative leadership supports a long-term commitment to project
- Executive director to get buy-in and issue policy statement
- Form sub-committee to produce plan for developing a trauma-informed service network



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### Universal Screening for Trauma History

- Develop a trauma screening tool
- Implement the screening throughout the agency



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### Training and Consultation

- Conduct training in basic curricula for all staff
- Trainings conducted by survivors of trauma



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### Hiring and Human Resources Practices

- Hire new staff with understanding of trauma dynamics
- Hire trauma survivors in professional and peer positions
- Recognize and reduce the impact of vicarious traumatization on staff



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### Recognize & Reduce the Impact of Vicarious Traumatization on Staff

- Work can be very difficult
- Recognize that many staff members are survivors themselves
- This work can cause re-traumatization
- Build supports in Supportive supervisors
- Peer processing
- Self-soothing skills



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### Review of Provision of Services and Policies

- Review agency policy and procedures with regard to development of trauma services



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