

## Trauma-informed Care: An Overview

### Addressing Trauma in Families and Organizations

You may encounter a child, youth or parent who reacts or responds in a way that seems excessive or strange. It can be easy to dismiss these responses and people – for example, “She’s being manipulative.” But most likely, what you’re encountering is a traumatic response – a misplaced coping or survival mechanism. The underlying question you should then ask is not “What’s wrong with you?” but “What happened to you?”

The Substance Abuse and Mental Health Services Administration’s (SAMHSA) definition of trauma has three elements.

Individual trauma results from an **event**, series of events, or set of circumstances that is **experienced** by an individual as overwhelming or life-changing and that has profound **effects** on the individual’s psychological development or well-being, often involving a physiological, social and/or spiritual impact (SAMHSA 2019).

Understanding trauma and its impacts is the first step to creating a trauma-informed care organization that addresses everyone’s trauma histories – not just the child’s or youth’s.

### What Is Trauma-informed Care?

As you encounter people who have survived trauma, it’s important to remember that they need to be surrounded with support and understanding. We use this understanding to inform how we interact, communicate, learn from and care for each other. When we are trauma-informed, we remain curious about what happened to an individual, family, organization or community and strive to respond in a way that builds resilience and promotes healing. [SAMHSA’s](#)<sup>1</sup> four Rs outline that a trauma-informed program, organization or system:

- **Realizes** the widespread impact of trauma and understands potential paths for recovery.
- **Recognizes** the signs and symptoms of trauma in clients, families, staff and others involved with the system.
- **Resists** re-traumatization.
- **Responds** by fully integrating knowledge about trauma into policies, procedures, practices and settings.

The components of a trauma-informed care (TIC) organization can look like:

- A safe, calm and secure environment with supportive care for members, patients and staff.
- System-wide understanding of trauma prevalence, impact and trauma-informed care. This includes clients, administrative staff, executive leadership and clinical staff.
- Cultural competency and humility – recognize and understand your own cultural biases and be open and humble to learning about someone else’s culture.
- Consumer voice, choice and advocacy – working with member and patients in collaboration and partnership.
- Access to recovery-oriented, consumer-driven trauma-specific services.
- **Most important:** healing, hopeful, honest and trusting relationships between staff, between staff and leadership and staff and members or patients.

## A Special Note for Care Staff: Secondary Trauma, Compassion Fatigue and Burnout

Working with people with traumatic histories can be rewarding, but because of their complex and intense needs, care staff can experience secondary traumatic stress, also known as compassion fatigue. Symptoms include insomnia, nightmares, irritability and poor focus or memory. Chronic secondary trauma can lead to burnout, where someone experiences emotional exhaustion and a lack of feeling personal accomplishment. Burned out employees can ultimately leave an organization, which can negatively impact the continuity of care for children and families. Helping staff with self-care activities, maintaining better boundaries and joining support groups can help prevent burnout and staff turnover.

### What You Can Do

So, how can you use a TIC lens in your work? Here are nine quick tips.

1. **Be patient and persistent.** To build trust and help people to feel safe, focus on the relationship, honor voice and choice and understand that people will need time to open up.
2. **Be respectful.** Trauma survivors' actions and reactions may seem disrespectful, but they're doing the best they can. Responding in a respectful way is the best choice.
3. **Validate and affirm your client and their feelings.** Remember Q-TIP: quit taking things personally. Usually, it's not about you and listening is often the most helpful response.
4. **Read clients' needs and respond accurately.** A member or patient may come with an initial problem but may have underlying issues that need your attention. Listen carefully about what's being said and not said and be responsive.
5. **Set realistic expectations and goals.** Set the member or patient up for success by recognizing your limits and theirs.
6. **Provide ongoing choices and supports.** Explore with the member or patient the consequences of their choices while realizing that they have the final say in how they live their lives.
7. **Know your role.** You're a partner and a guide for the member or patient. Understand how you can walk with the member or patient while not stepping in to do all the work.
8. **Follow through with what you say you will do.** Keep your word, and when you fail to do so, be transparent and admit when you dropped the ball.
9. **Provide consistency and minimize surprises.** To prevent re-traumatization and to keep a sense of safety and security for the member or patient, be consistent and provide universal expectations of how everyone will be treated: with respect and openness, and to listen to understand.

### Resources

SAMHSA (2019). Trauma and Violence [Text]. Retrieved from <https://www.samhsa.gov/trauma-violence>

Secondary Traumatic Stress: A Fact Sheet for Child-Serving Professionals [Text]. Retrieved from The National Child Traumatic Stress Network website: <https://www.nctsn.org/resources/secondary-traumatic-stress-fact-sheet-child-serving-professionals>

Trauma Informed Care. Retrieved from National Council website: <https://www.thenationalcouncil.org/areas-of-expertise/trauma-informed-behavioral-healthcare/>

TIP 57: Trauma-Informed Care in Behavioral Health Services | SAMHSA Publications. Retrieved from <https://store.samhsa.gov/product/TIP-57-Trauma-Informed-Care-in-Behavioral-Health-Services/SMA14-4816>

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<sup>i</sup> <https://store.samhsa.gov/system/files/sma14-4884.pdf>