Supporting Workforce Development

Trauma Informed Training

Siobhan Martin, Outreach Counsellor/Psychotherapist Kerry Quorn, Outreach Counsellor/Psychotherapist

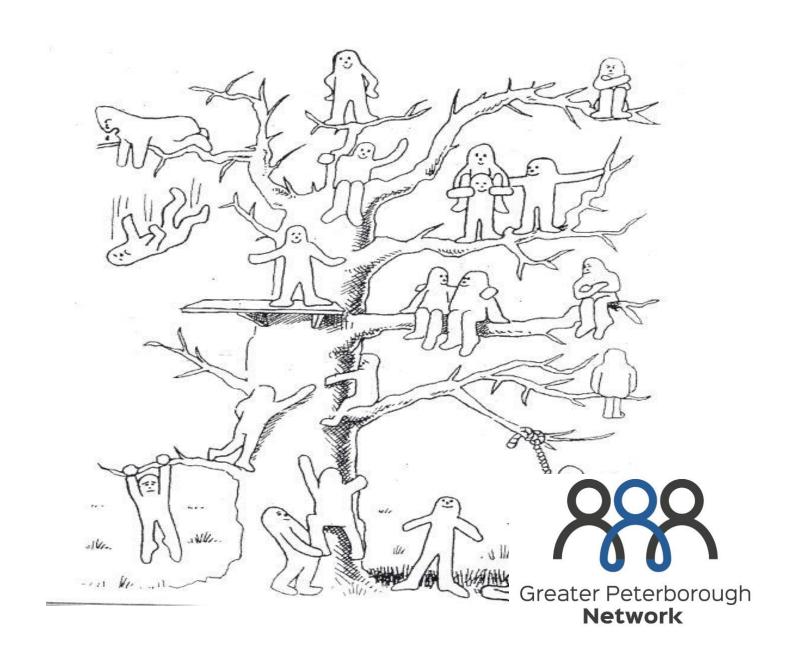


Aims and Objectives of the Training

- To have a better understanding of what trauma is
- To have a better understanding of what happens for someone physiologically and mentally when they experience trauma
- What happens for someone after a traumatic event
- When does Trauma develop into the clinical symptoms of PTSD
- How to work with clients who have experienced trauma
- How to look after yourselves at work



Introduction and Group Safety



What actually is Trauma

What about an event makes it "traumatic?"

DSM-III classified trauma as an event existing "outside the range of usual human experience"





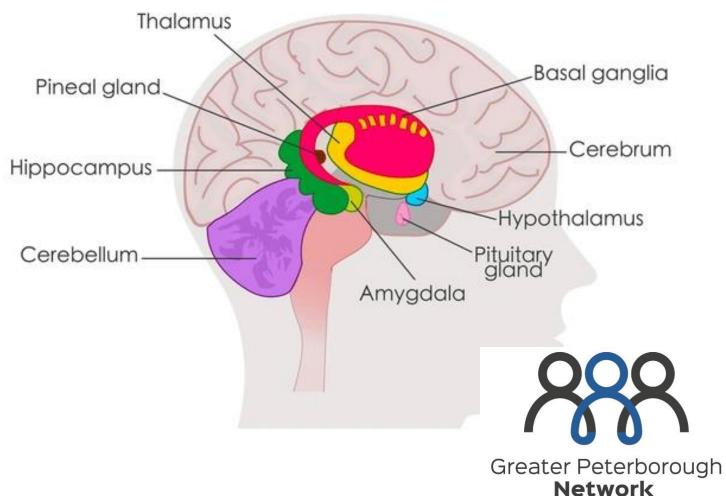
Types of Trauma

 What type of trauma have the people you work with experienced?



Limbic System

What happens in a traumatic event



What happens after a traumatic event



What happens after the event is important Recovery

- Telling someone that believes you
- Getting support, reassurance and help
- Having access to professional help
- Allowing yourself recovery time
- Not dismissing your own reactions, responses and feelings
- Support to not avoid certain places and/or activities



Why does trauma develop into the clinical symptoms of PTSD?

Trauma is much more than a story about the past that explains why people are frightened, angry or out of control.

Trauma is re-experienced in the present, not as a story, but as profoundly disturbing physical sensations and emotions that may not be consciously associated with memories of past trauma.

Bessel van der Kolk (2014)

Exhibit 1.3-4, DSM-5 Diagnostic Criteria for PTS Informed Care in Behavioral Health Services - N (nih.gov)



Physical Including; Symptoms of stress/stomach issues /memory issues/ Tiredness/ feels sick /panic attacks /flashbacks /nightmares/aches and pains/ headaches/sleep problems /dissociation / nightmares

Emotional

May feel shame/ self-blame /low self-worth/ trust issues / Anger //Huge anxiety /depression/numb/loss of joy /disgust / feeling distant from others/trouble experiencing positive feelings/

Behavioural Over or under reacting

Hypervigilant /jumpy

Avoidance of thoughts/feelings /situations that remind. Difficulty making and sustaining relationships

Difficulty with sex

Self-harm

Eating disorders/ substance Misuse

Suicidal ideation

Irritable/angry outbursts /aggression Taking risks

Cognitive

The world is unsafe/ I am unsafe

I can't trust

Negative thinking patterns

Difficulty accessing helpful strategies

Not be able to think when put on the spot.

Always expecting the worst /

Memory issues/forgetfulness





COFFEE BREAK



How to work in a trauma-informed way

'Bad' Behaviour Iceberg



Principles of trauma-informed approaches

DO NO HARM

Emphasis on safety: physical and emotional

Choice

Empowerment

Trust

Genuine collaboration: not 'done to'

Cultural Considerations



The Three R's

Realise

Recognise

Respond



How to look after yourself at work



Feelings are Contagious

Being aware of what are your feelings/emotions and what are the clients

Always speak with a colleague/senior about your concerns.

Know that you did everything that you could; there is only so much you can do.

The patient is part of a wider network of support including things that we may not be aware of e.g. supportive pets/internal support.

You need to do what you need to go home feeling OK.



Vicarious Trauma

 "The expectation that we can be immersed in suffering and loss daily and not be touched by it is as unrealistic as expecting to be able to walk through water without getting wet."

(Remen 2006).



Symptoms of Vicarious Trauma

- Symptoms parallel those of PTSD, including anxiety, despair, intrusive imagery, sleep disruption, cynicism, hostility, difficulty maintaining helping relationships.
- Thought processes include "this situation is hopeless" "the clients bring it on themselves" and "there's nothing anyone can do to help."



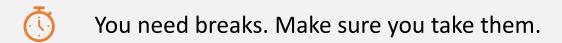
Differences Between Vicarious Trauma and "Burnout"

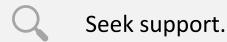
- Burnout is a feeling of exhaustion and lack of motivation.
- Vicarious trauma can overlap with stress and burnout, but it has specific symptoms parallel to PTSD.
- Burnout can often be alleviated by time off, encouragement, professional training or motivational workshops.
- Vicarious trauma requires more intensive efforts to target it specifically.



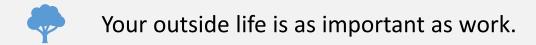
Final Thoughts











Awareness, balance and connection.

Support your colleagues. Notice when people don't take breaks, change in behaviours, withdrawing.