Trauma-Informed Advocacy on College Campuses

Rachel Ramirez Hammond, MA, MSW, LISW-S
Ohio Domestic Violence Network
rachellr@odvn.org
How we are is as important as what we do

National Center on Domestic Violence, Trauma and Mental Health
What is a trauma-informed approach?
A trauma-informed approach includes four elements:

- **REALIZE**
  - REALIZING the prevalence of trauma

- **RECOGNIZE**
  - RECOGNIZING how trauma affects all individuals involved with the program, organization or system, including its workforce

- **RESPOND**
  - RESPONDING by putting this knowledge into practice

- **RESIST**
  - Seeks to actively RESIST retraumatization

SAMHSA, 2015
Trauma-informed care shifts the philosophical approach from

“What’s wrong with you?”

to

“What happened to you?”
Rule #1
Do No Harm
REALIZING the prevalence of trauma
Trauma and college students

- Trauma exposure not well tracked on college campuses
- 2/3 of college students reported at least one traumatic life event

RECOGNIZING how trauma affects all individuals involved with the program, organization or system, including its workforce.
Resilience - what is it?
Resilience

• Ability to “bounce back” from stress

• **EVERYONE** has it, but we often miss it.

• Resilience feeds itself
Very important resource

The Power and Price of Survival

Understanding Resilience, Stress, and Trauma

Pamela Woll, MA, CADP
Human Priorities

http://xrl.us/humanpriorities
Resilience

“The fact remains that we are resilient. That’s what we’re built to be, and there are more resources for resilience within us and around us than we can ever imagine. Our job is to look for and use those resources, and never stop believing in ourselves, no matter how hard it is.

Survival is much, much more than just staying alive. And the power of survival is written into us—all of us—down to the smallest cell.”

The Power and Price of Survival
Extreme stress will always impact us. But resilience can help protect us and help our bodies react in ways that are less extreme.

The Power and Price of Survival
Advocacy Tip #1

Highlight and encourage resilience by helping people discover and/or identify their resources for resilience within them and around them.
Surviving trauma and trauma symptoms are examples of resilience and strength.
What is trauma?
Generally what we think:

“What do I do when a person’s behavior gets in the way of the work, gets in the way of them responding to the information we give, and with them using the services we have?”
What if we thought...

“What do I do when trauma’s impact gets in the way of the work, gets in the way of them responding to the information we give, and with them using the services we have?”
“The set of changes in the body and the brain that are set in motion when there are overwhelming threats to physical or psychological well-being.”

From Neurons to Neighborhoods, National Resource Council and Institute of Medicine.
The stress continuum

Positive stress

• Brief increases in heart rate
• Mild elevations in stress response hormones

Tolerable Stress

• Serious, temporary stress responses
• With supportive relationships, unlikely to cause long term problems

Toxic Stress

• Prolonged activation of the stress response system
• Absence of supportive relationships

Traumatic Stress

• When our internal and external resources are inadequate to cope
• It overwhelms us

Positive Stress

Traumatic Stress

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What is traumatic stress?

An EVENT, series of events or set of circumstances that is EXPERIENCED by an individual as physically or emotionally harmful or threatening and has lasting adverse EFFECTS on the individual’s functioning and physical, social, emotional or spiritual well-being.

SAMHSA, 2015
Increased.....

- Tension, anxiety, panic, emotional volatility
- Need for control and aggressive behavior
- Avoidance, constriction and disassociation
- Use of drugs, alcohol or other addictions to manage feelings
Decreased ability to....

- Manage and regulate feelings
- Self-soothe
- Trust others
- Thoughtfully plan
- Have the energy to get things done
- Connect with others
- Tell stories
Traumatic stress is:

In the eyes of the beholder
Traumatic reactions are NORMAL responses to ABNORMAL situations.
The stress response system

The human brain and body has a built-in alarm system that signals us when we may be in danger.
Humans are the only mammals for whom 50% of brain development occurs after birth through experience dependent maturation of neuronal systems.

Putnam, 2004
Experiences shape our brain
The Brain:

• **DOING BRAIN**: Limbic system, where response to threat, danger and intense emotions is housed—our “fast” brain

• **THINKING BRAIN**: Cortex, responsible for planning, problem solving, and organizing—our “slow” brain
What happens when you perceive a threat?
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What happens when you perceive a threat?

• Flooded with stress hormones (adrenaline and cortisol), so your body is ready for emergency action if need be.
What happens when you perceive a threat?

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• Heart rate increases
What happens when you perceive a threat?

- Flooded with stress hormones (adrenaline and cortisol), so your body is ready for emergency action if need be
- Heart rate increases
- Blood pressure increases
What happens when you perceive a threat?

- Flooded with stress hormones (adrenaline and cortisol), so your body is ready for emergency action if need be
- Heart rate increases
- Blood pressure increases
- Breath quickens
What happens when you perceive a threat?

• Flooded with stress hormones (adrenaline and cortisol), so your body is ready for emergency action if need be

• Heart rate increases

• Blood pressure increases

• Breath quickens

• Senses become sharper
What happens when you perceive a threat?

• Flooded with stress hormones (adrenaline and cortisol), so your body is ready for emergency action if need be
• Heart rate increases
• Blood pressure increases
• Breath quickens
• Senses become sharper
• Become more externally aware
What happens when you perceive a threat?

• Flooded with stress hormones (adrenaline and cortisol), so your body is ready for emergency action if need be

• Heart rate increases

• Blood pressure increases

• Breath quickens

• Senses become sharper

• Become more externally aware

• Lose sense of time, brain gets “dumber”
Why?
Why?

• Increase strength and stamina
Why?

• Increase strength and stamina
• Speed reaction time
Why?

• Increase strength and stamina
• Speed reaction time
• Enhance your focus
Why?

• Increase strength and stamina
• Speed reaction time
• Enhance your focus
• Prepare you to do what you need to do
Why?

- Increase strength and stamina
- Speed reaction time
- Enhance your focus
- Prepare you to do what you need to do

TO GET OUT OF DANGER IF NECESSARY!!
The Stress Response
The Stress Response

Doing brain senses danger
The Stress Response

Thinking brain checks out situation

Doing brain senses danger
The Stress Response

Doing brain senses danger

Thinking brain checks out situation

If there is no danger, the doing brain goes back to normal functioning.
The Stress Response

Thinking brain checks out situation

If there is danger, the thinking brain shuts down, allowing the doing brain to act.

Doing brain senses danger
The Stress Response

If there is danger, the thinking brain shuts down, allowing the doing brain to act.
The Stress Response

If there is no danger, the doing brain goes back to normal functioning.

If there is danger, the thinking brain shuts down, allowing the doing brain to act.

From Homelessness Resource Center Traumatic Stress Training Package
Fight, Flight or Freeze

In order to protect itself, the body uses increased energy to respond to danger in 1 of 3 ways:

Fight

Flight

Freeze

From Homelessness Resource Center Traumatic Stress Training Package
What is a trauma trigger?

Page 24-25, TIC manual
Triggers

- Reminds us of trauma
- Activate the alarm system.
- Often a false alarm
- Body responds is as if there is danger
- Fight, flight and freeze responses activated.
- Not in the rational part of brain
RESPONDING by putting this knowledge into practice.
Advocacy tip #2

Educate survivors on traumatic stress reactions.
Trauma and You

What is Trauma?

People who become victims of a stressful or life-threatening event or accident often experience the event as an emotional shock. Examples of traumatic events include being a victim of a crime, experiencing domestic violence or sexual assault, being abused as a child, surviving a natural disaster, or the death of a loved one. These events are beyond a person's control, and can happen to anyone.

The hallmark of a traumatic experience is that it typically overwhelms an individual emotionally, mentally, and physically. These events can cause feelings of terror, intense fear, horror, helplessness, and physical stress reactions. The ways in which we cope with stressful events are ineffective in the face of traumatic experiences.

The impact of these events does not simply go away when the event is over. Traumatic experiences are profound and sometimes can change the way in which people see themselves and the world. Traumatic events can often produce lasting changes in your emotions, your thoughts, and your body's stress response and how you body feels.

This handout provides information on common reactions to trauma, focusing on the trauma of domestic violence. We hope it will assist you in understanding the way in which your experiences have impacted you, and knowing that these reactions are normal, valid responses. We wish you the best as you move on your journey towards regaining a sense of safety and control over your life and work on healing and moving forward.

Domestic Violence and Trauma

When we experience trauma at the hands of someone we love and trust, it often impacts us profoundly and in many areas of our lives. Domestic violence involves a pattern of coercive and controlling behavior that your partner uses against you to obtain power and control over you and your life. By using such tactics as intimidation, coercion and threats, economic abuse, emotional abuse, and using your children, your partner’s actions might make you feel fearful, powerless, and hopeless, as you struggle to stay as safe as you can in a dangerous situation. Even if you decide to leave the relationship, your partner might still pose a significant risk to your emotional and physical safety, which often means that healing from abusive experiences takes additional time and effort. Yet many victims of domestic violence do heal, and go on to live fulfilling and enriching lives. You can too.
How Do People React to Trauma?

There are three common “clusters” of the body and brain's response to trauma. They include:

Hyperarousal: This refers to the physiological (body) changes that occur in the brains and bodies of trauma survivors, which prepare them to respond to perceived danger. You might feel like you are constantly on the alert for danger, startle easily, and feel like you are “on” all the time. These physical responses can occur weeks, months or years after the event, when a person is reminded of the trauma.

Intrusion or re-experiencing events: These symptoms refer to the experience of the trauma “intruding” upon your life after a traumatic event is over. This involves having memories of a disturbing event when you don’t want to or weren't even thinking about it. This often makes people feel that they aren’t in control.

Constriction or avoidance reactions: Often our brain responds to stress by trying to keep us safe through ignoring or avoiding anything related to the trauma. This can include “numbing” of feelings and thoughts connected with the traumatic situation. You might feel the urge to avoid all circumstances associated with the trauma and may withdraw from others as a way of seeking emotional safety.

How Can Trauma Impact Me?

Each person is impacted differently by their experiences with trauma. We do know that trauma can have a huge impact on many areas of your life. Trauma often impacts a person's ability to control their emotions, make themselves feel better, make decisions, and develop plans. It is very common for victims of domestic violence to feel like their relationship has changed their lives in multiple ways they would have never imagined. Survivors often talk about the ways in which abuse has affected their physical health, mental health, emotional health, feelings about themselves and others, their relationships with loved ones and other people, their spiritual relationships, and their understanding of the world. Trauma often changes people, but we know that survivors of trauma are strong. We know that recovering and healing from traumatic experiences is possible and happens often.

What Can Help Me Heal?

Give yourself some time: It can take time to recover from traumatic events, but understanding it takes time to heal and process things does seem to help almost everyone. It helps to get some sleep and make sure you are eating and attending to your body’s needs.

Talk about your traumatic experiences: Telling your story to those who care about you is essential to healing. Breaking the silence about your experiences can be an important means of coping, and will help you process what happened to you.

Re-establish a sense of safety: Feeling safe is the first step in healing from trauma. Often this begins with regaining a feeling of control over your body. Pay attention to your body’s reactions and think about how you can calm down when you are stressed.
ODVN brochure

- Arousal symptoms
- Re-experiencing symptoms
- Avoidance symptoms
  Emotional numbing or disassociation
- Negative impact on moods and thoughts
Advocacy tip #3

Normalize people’s reactions to their experience.
Advocacy tip #4

• Make trauma survivors feel RICH
• Respected
• Informed
• Connected
• Hopeful
Safety is the cornerstone of our ability to CONNECT and REGULATE!

**Physical Safety:**
The ability to keep one’s body safe from harm.

**Psychological/Emotional Safety:**
The ability to be safe with one’s self and others, and having access to environments where it is safe to express yourself & your feelings.

**Social Safety:**
The ability to be safe in groups, which includes people respecting each other and their differences.

**Moral Safety:**
Access to environments that support honesty and justice.

From Mary Vicario, DODD Webinar series #3 (taken from Sanctuary Model by Dr. Sandra Bloom)
Strategy

Create physically and emotionally safe spaces for EVERYONE (including you).

How?
Strategy: taking our temperature

• Figure out where we are and what we are doing now
• Make sure that people receiving services are central to this
and actively RESIST RETRAUMATIZATION.
Resisting retraumatization

• Identify ways in which we might be retraumatizing people unintentionally

• Prepare and support survivors in non-trauma informed systems
How does this approach benefit survivors?

1. I have a voice again.
2. I can begin to re-establish a sense of safety and control.
3. I have space to talk about the impact of domestic violence and other traumatic experiences:
   - Essential to healing AND to providing effective advocacy and support.
4. Helpers heard, validated, and witnessed my reality, which can take power away from traumatic experiences.
And staff?

1. We can stop seeing trauma responses as personal attacks.
2. We can get the information we need to effectively support and advocate for survivors.
3. We can focus on recovery and healing.
4. We can become aware of when work is impacting us in a problematic way and get support and assistance with that.
5. The impact of this work becomes a part of the normal conversation which leads to healthier employees and organizations.
And organizations?

1. We **LEARN** about domestic violence and other traumatic experiences and common impacts of trauma on survivors, staff, and organizations

2. We **USE** this knowledge of trauma and its impact to:
   
   Define, shape, modify and maybe change **what we do** and **how we do** things with victims of traumatic experiences and our staff

3. We create systems that are more likely to really help survivors and promote a healthy staff that can better fulfill the organization’s mission.
RESOURCES to help us do this work
TRAUMA-INFORMED APPROACHES

PROMISING PRACTICES AND PROTOCOLS FOR OHIO’S DOMESTIC VIOLENCE PROGRAMS

Funded by: The Ohio Department of Mental Health
Sonia D. Ferencik, MSSA, LISW
Rachel Ramirez-Hammond, MA, MSW, LISW
Using the TIC manual

• **Individual level**
  – Learn about trauma
  – Identify trauma reactions
  – Respond sensitively and appropriately
  – Validate
  – Normalize
  – Educate and empower
  – Avoid retraumatization
  – DO NO HARM
Using the TIC manual

- Organizational level
  - Educate advocates on trauma
  - Use best practices
  - Incorporate protocols
  - Review policies and procedures for trauma-sensitivity
  - Avoid retraumatization
  - DO NO HARM
Trauma-Informed Care: Best Practices and Protocols for Ohio’s Domestic Violence Programs

Go to www.odvn.org

Scroll down on homepage for a copy
Trauma-Informed Care Best Practices and Protocols

• Introduction
• Understanding trauma
• Responding to trauma
• Best practices
• Protocols
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Each individual seeking services has her own unique history, background, and experience of victimization. Treat each survivor as an individual.

Key point: It is important to understand that each individual seeking services is an individual—whether they are a teen, child or adult, whether they are male or female. Each person has their own unique history, background and experience of victimization.

Advocates need to be cautious in listening to a survivor’s accounts because most advocates have listened to many women describe their experiences of abuse and harm.

Listening to hard stories over and over can result in a lack of sensitivity to the survivor in front of you. Although the tactics batterers use can be similar, we must listen carefully to the way that each survivor has experienced domestic violence, so we can properly support and assist her in obtaining safety.

Remembering each person is unique and deserving is a trauma-informed approach. Listening with a fresh perspective to each account is essential.

For instance, one approach in working with survivors is to remember that each woman comes with her own “herstory”. She arrives through the doors with a personal, original, individual story and her own life experience that brought her to this point in her life. Her journey is unique.

**Putting it into Practice:**

The advocate needs to actively listen to the survivor’s sharing of her experience as if it is the first time she has listened to a survivor describe victimization.

While the advocate is listening, she should be incorporating her knowledge about batterer characteristics, trauma and trauma reactions in order to assist the individual in normalizing her experience and providing support.

Advocates need to hear what is unique in each survivor’s experience and recognize each survivor’s distinct experience.
Resources for Presentation

• Developing Trauma-Informed Practices and Environments: First Steps by Terri Pease
  http://www.nationalcenterdvtraumamh.org/trainingta/webinars-seminars/

• Dr. Bruce Perry and the Child Trauma Academy
  www.childtrauma.org

• Homeless Resource Center Traumatic Stress Training Package
Check out this website

www.nationalcenterdvtraumamh.org

Under “Resources and Publications”

• Conversation Series
• Tipsheet Series
And this one too:

Building Comprehensive Solutions

Supporting critical thinking, learning and victim-defined advocacy

www.bcsdv.org, check out resources
Thank you!!

Rachel Ramirez, MA, MSW, LISW-S
Training Director
rachelr@odvn.org