

Trauma Informed Care: Education and tools to support those who have experienced trauma.
Victoria Villa, MSW
Southwest California Synod, ELCA
Socalsynod.org/disaster-relief

Topics

1. Understanding Trauma: What trauma is, how it affects the brain and body, and trauma vs. PTSD
2. Effects of Trauma: Cognitive, emotional, and physical impacts of trauma
3. Cultural Diversity in Trauma Informed Care: How culture shapes the experience and expression of trauma
4. Implementing Trauma Informed Care: Trauma-informed approaches, language, listening, and grounding tools
5. Caring for Ourselves as Helpers: Vicarious trauma, boundaries, and self-care as stewardship

Why does trauma informed care matter? **“A trauma-informed system is not just about being kind—it’s about being radically aware of what people carry and making sure we do no more harm.”** — *Dr. Sandra Bloom, Psychiatrist and Founder of the Campaign for Trauma-Informed Policy and Practice (CTIPP)*

What is trauma?

- The American Psychological Association defines trauma as: “Any disturbing experience that results in significant fear, helplessness, dissociation, confusion, or other disruptive feelings intense enough to have a long-lasting negative effect on a person’s attitudes, behavior, and other aspects of functioning.”
- Trauma can come from a violent event or an accident like a car crash or a natural disaster. It can manifest from the prolonged suffering that comes with abuse, neglect, a grave illness, or domestic violence. Trauma can also stem from strained living conditions, like war, famine, difficult relationships, or profound hardship.
- Trauma can shake a person’s trust in safety and stability, and unaddressed triggers can keep us stuck in a trauma response.
- Other experiences that may be traumatic include:
 - Physical, sexual, and emotional abuse
 - Childhood neglect
 - Poverty
 - Racism, discrimination, and oppression
 - Sudden, unexplained separation from a loved one

Trauma can occur at any age and has particularly debilitating long- term effects on children’s brains.

Effects of Trauma

- Everyone’s trauma reactions are different and shaped by

- their own experiences
- available support they have around them
- cultural background
- responses of the larger community that they are living in.
- Reactions can be delayed or immediate
- They can be subtle or destructive
- Traumatic stress reactions are normal reactions to abnormal circumstances.

Effects of trauma

- **Emotional:**
 - Feelings of “going crazy”
 - Anger, Sadness, Shame, Numbness
 - Feeling overwhelmed
 - Challenges with regulating emotions
 - Feeling unsafe
 - Feeling like your beliefs have been shattered/ changed
- **Cognitive:**
 - Intrusive thoughts and memories
 - Triggers- a stimulus that sets off a memory of a trauma
 - Trouble concentrating
- **Physical:**
 - Link between trauma and chronic health conditions (Adverse Childhood Experiences study)
 - Nightmares
 - Trouble sleeping
 - Headaches
 - Chest pain
 - Feeling low energy/ chronic exhaustion
 - Where do you feel it in your body?

What happens to the brain when a person experiences trauma?

- Traumatic events can change the anatomy and functioning of the brain
- Going through trauma makes our brains shift into survival mode to deal with the perceived threat
- The body responds to trauma by releasing adrenaline, the stress hormone that triggers “fight or flight” mode.
- Adrenaline stimulates the amygdala, the part of the brain that plays a significant role in emotions, behavior, and fear processing. In cases of trauma and PTSD, the amygdala continues to over-react, even in “ordinary” situations
- All of this is your brain’s way of protecting you from perceived danger

- **Boston University**

Trauma and PTSD

- **Trauma**
 - At least 70% of people experience at least one traumatic event in their lifetime
 - Trauma is the emotional or psychological response to a deeply distressing experience or situation.
 - The effects of trauma may or may not have long lasting effects on well-being, but do gradually lessen
- **PTSD**
 - Post-traumatic stress disorder, aka PTSD, is a psychological disorder that develops in response to a traumatic event
 - The symptoms of PTSD are more severe, with the mind staying in a state of psychological shock
 - Three main types of PTSD symptoms:
 - Re-experiencing the trauma through intrusive flashbacks and/or nightmares
 - Emotional numbness and avoidance of places, people, and activities that remind you of the trauma
 - Heightened arousal – trouble sleeping, difficulty concentrating, feeling jumpy, irritability
 - Supportive relationships and early coping strategies **can reduce the risk** of trauma developing into PTSD.

- **Mental Health America**

Cultural Diversity in Trauma-Informed Care

- Trauma-informed care is most effective when it is also culturally responsive. Culture shapes how individuals experience, express, and heal from trauma. Without cultural awareness, even well-intentioned support can feel unsafe, dismissive, or harmful.
- Trauma-informed care requires cultural competence and humility to build trust, reduce barriers, and respect diverse perspectives.
- Trauma-informed support must acknowledge how historical and systemic inequities (e.g., racism, immigration status, language barriers) impact both access to care and willingness to engage with services. Using respectful communication, providing translated materials, and partnering with trusted community organizations can help reduce these barriers.
- **Note:** This does not mean you need to understand the trauma responses of every culture, religion, or ethnic group. Rather, it means recognizing that each person's response is shaped by diverse experiences—and being willing to approach each individual with openness, curiosity, and respect.

Examples of Cultural Differences in Trauma-Informed Care

- **Trust of Institutions**
 - Some communities: May readily seek help from government or official agencies.

- Others (including many immigrant communities): May have deep mistrust due to past experiences with authorities, immigration enforcement, or corruption in home countries.
- Be transparent about who you are and what your role is. Clearly explain confidentiality and its limits. Some may fear that sharing information could lead to consequences- especially in mixed- status families. Clearly explain how information will (and will not) be used.
- **Communication Styles**
 - Direct communication: Common in mainstream U.S. settings.
 - Indirect or high-context communication: Common in many cultures, where meaning is conveyed through tone, silence, or context.
 - Do not automatically interpret lack of eye contact or silence as disengagement. Allow more time for responses. Pause and ask if anyone has questions. Use interpreters when needed, and avoid relying on children to translate. Find resources in their language of preference.
- **Expression of Trauma**
 - Western/clinical norm: Individuals may describe emotions like anxiety, depression, or PTSD.
 - In many cultures: Trauma is often expressed through physical symptoms (headaches, fatigue, stomach pain) or described as “stress” rather than emotional distress.
 - Do not assume someone is “fine” if they don’t verbalize emotional pain. Listen for indirect cues and validate physical experiences as real and possibly connected to trauma.
- **Decision- Making Dynamics**
 - Individual decision-making: Common in Western contexts.
 - Family/elders-led decision-making: Common in many cultures.
 - Ask who should be involved in decisions: “If you are having trouble deciding in your own, is there someone you can trust to help you make a decision that feels right for you?” Avoid pressuring individuals to decide quickly without consulting family.
- **Other Considerations**
 - Build trust first- as you would with any client
 - Do not assume that all individuals from the same background share the same beliefs or experiences. Ask open-ended questions instead.
 - Understand that trauma does not happen in a vacuum—it is shaped by history, identity, and community.
 - Faith, family roles, gender, and cultural values often influence how people interpret suffering and healing.
 - Acknowledge what you don’t know.

What do we do?

- The good news is that trauma and its effects can heal and its impacts reversed with the right support and treatment.

- Understanding trauma isn't meant to overwhelm us. It's meant to help us respond with more patience, clarity, and compassion.

How to support people experiencing trauma

- It's about the approach: What is wrong with you? **VS** What happened to you?
- A trauma-informed approach is deeply interested in the whole situation surrounding a person and not just a single problem that they may be encountering.

What does trauma informed care look like?

According to SAMHSA (Substance Abuse and Mental Health Services Administration), a trauma-informed approach is built on these key principles:

1. **Safety** – Ensure people feel physically and emotionally safe, with secure environments and respectful interactions.
2. **Trustworthiness and Transparency** – Be open and honest in decisions and operations to build trust with clients, families, staff, and partners.
3. **Peer Support** – Use the lived experiences of survivors and their peers to build trust, hope, and healing. For children, peers can include supportive family members or caregivers.
4. **Collaboration and Mutuality** – Value everyone's role—staff, volunteers, and clients alike—in creating a supportive, healing environment.
5. **Empowerment, Voice, and Choice** – Recognize strengths, share decision-making, and support self-advocacy so people can shape their own recovery.
6. **Cultural, Historical, and Gender Sensitivity** – Respect and respond to people's cultural identities, histories, and needs, while challenging stereotypes and addressing past injustices.

Triggers & trauma responses

- **Triggers** are reminders that can activate trauma responses by signaling danger to the nervous system, even when a person is currently safe. These reactions are automatic and not a conscious choice.
- Common triggers after disaster include:
 - **Dates & anniversaries** (evacuation orders, fire anniversaries, loss dates)
 - **Smells** (smoke, ash, burning, chemicals)
 - **Sounds** (sirens, helicopters, alarms, wind)
 - **Visual cues** (damaged landscapes, emergency vehicles, news footage)
 - **Weather patterns** (high winds, heat, red flag warnings)
- Trigger responses may show up as:
 - Anxiety, irritability, or emotional shutdown
 - Difficulty concentrating or making decisions
 - Physical symptoms (tight chest, nausea, fatigue)
 - Avoidance or sudden withdrawal

When a Trigger Shows Up: What Helps

- If someone appears activated or overwhelmed:
 - Pause the conversation and **slow things down**
 - Name safety: *“You’re here, and you’re safe right now.”*
 - Invite grounding (deep breathing, press feet into the ground, notice the room)
 - Offer choice: *“Would you like to take a break or keep going?”* or *“If something starts to feel like too much, please let me know and we can pause.”*
- Small actions can help regulate the nervous system and restore a sense of control.

How to support people experiencing trauma

- **Practice using sensitive communication techniques.** Taking the time to validate others’ experiences and being present in challenging moments can help build trust, which is essential for building, maintaining, and improving relationships. You can make an empathetic statement such as, “I can see that was really challenging for you.”
- **Recognize that people communicate on many different levels.** A large percentage of communication is non-verbal. Be mindful of your tone of voice, gestures, and facial expressions
- **Be an attentive listener.** According to research published by the American Psychological Association, people tend to identify others’ emotions more accurately when they listen opposed to solely relying on facial cues. Listening also validates the speaker and allows their voice to be heard. **WAIT method- Why Am I Talking?**
- **Support individuals in identifying different levels of social support.** We know that supportive relationships are essential in building resilience. Help individuals identify/build their network of supportive and nurturing relationships (such as family, friends, community members, therapists, providers, and even pets).
- **Focus on individuals’ strengths.** Help individuals recall and make a list of how they successfully handled challenges in the past. Maintain a strength-based perspective by identifying and building off past successes.
- **Support the development of coping skills.** Coping skills increase resilience because they help people learn how to properly handle uncomfortable emotions and reactions that result from trauma. Coping skills can include things like walking, talking to a friend, taking breaks, smelling a favorite smell, reading a book, texting a positive message to a loved one, and much more.
- **Help maintain hope.** The effects of stress can be devastating, but it’s really important to remember that there is always hope. Research shows that hope helps people cope with and recover from illness/adversity.

- UCLA Prevention Center of Excellence

Language

Instead of...	Try...
Well at least...	I'm so sorry to hear things have been so difficult.
You must be feeling...	Would you share with me about how you are feeling?
See, it's not all bad!	Even though things have been challenging, it seems you have found support/ something that brings you comfort
Try to be more positive.	I can hear how (frustrated) you are. Can you tell me what I can do to lessen that feeling?
Everything happens for a reason.	Sometimes terrible things happen, and we don't have a reason. But you have a community of people who care and want to help

Other Tips

- If you see someone is becoming emotionally activated (tears, struggling to find words) reassure them that it is okay, and they can take their time.
- Check in every once in awhile to see how they are processing the information.
- How are you beginning/ ending your conversations?
 - Beginning conversations with how long you expect to meet for, and what you hope to do during your time together
 - Ending a session by summarizing action steps, asking about other available support, and deep breathing/ grounding if the session was emotionally charged.
 - Offer to write down reminders/ send them a follow up email
- Is your office set up in a way that is trauma informed?
 - Having tissues, mints, and water available
 - Plants, throw pillows, blankets
 - Natural light and lamps- avoid overly harsh, direct artificial light
 - Warm colors and cooler tones- blues, greens, purple
 - Having referral lists are always helpful- national and local resources

Grounding techniques are primarily used to bring an individual back to the present moment and promote a sense of calm and stability. They are helpful for managing overwhelming emotions, anxiety, dissociation, and flashbacks by redirecting attention to the immediate surroundings and engaging the senses.

- Box Breathing: Inhale for 4, hold 4, exhale 4, hold 4. Repeat for 1–2 minutes.
- 5–4–3–2–1 Senses: Name 5 things you see, 4 feel, 3 hear, 2 smell, 1 taste.
- Feet on the Floor: Press feet firmly into the ground and notice the support beneath you.
- Temperature Change: Hold a cool object, sip cold water, or notice the air on your skin.

Let's Talk about self-care

Self-Care is setting boundaries

- You can maintain empathy without becoming over-involved in clients' personal lives
- Clarify what you CAN and CAN'T assist with, and then refer out when necessary
- Setting limits on office hours, availability for emergencies, and frequency of meetings.
Example: "I am available to meet with clients on weekdays between 9 am and 5 pm. I typically meet with each client once a month."
- Avoid taking on guilt, blame, or emotional responsibility for someone else's choices.
- Create spaces in your life that don't involve thinking about disaster or your work.

Vicarious Trauma & Related Impacts

- **Vicarious Trauma:**
 - Internal changes from chronic exposure to others' trauma
 - Common in helping roles (hearing traumatic stories over time)
 - Builds gradually and can lead to emotional distress and burnout
 - Can shift worldview (e.g., seeing the world as more dangerous)
 - Contributing Factors:
 - Frequent exposure to trauma
 - Limited coping mechanisms
 - Lack of supervision/support
 - High empathy
 - Unresolved personal trauma
 - Example: A domestic violence worker begins to believe healthy relationships aren't possible
- **Related Concepts:**
 - **Secondary Trauma:** Direct exposure to another's trauma; often immediate
 - Example: First responder at a crash scene or a family member of someone impacted
 - **Compassion Fatigue:** Emotional and physical exhaustion from prolonged exposure to others' suffering
 - Example: Disaster relief worker helping wildfire survivors for weeks, feeling drained and emotionally numb
 - **Burnout:** The cumulative impact of ongoing stress and trauma exposure, often worsened by systemic pressures and organizational demands
 - Example: Case worker feeling detached after months of high caseloads and limited support
 -

Self-Care

- Goes beyond buying yourself treats and resting
- It is the deep commitment to exploring your own wellness, as well as what causes you harm
- How do you allow yourself to be treated?

- How often do you take your work home with you?
- Who is in your network of support?
- Do you avoid saying “No,” even when you know you should?
- Do you advocate for yourself and your needs as intentionally as you advocate for other people?
- Do you celebrate your victories?
- How often do you engage in activities that are not your work?

What can self-care look like?

- Create rituals for yourself
- Seek collaboration with others in your profession
- Educate yourself about trauma, how it impacts the brain, and coping strategies
- Know yourself- What brings you peace? What situations are more likely to trigger you?
- Dopamine Menu
- Coping strategy examples:
 - Journaling
 - Meditation or breath work
 - Singing, dancing, art
 - Talking with supportive people/ getting therapy
 - Taking a vacation
 - Getting enough sleep
 - Make an “All Done List”

Sources

- [Understanding the Impact of Trauma - Trauma-Informed Care in Behavioral Health Services - NCBI Bookshelf](#)
- [The Effect of Trauma on the Brain | Danielle Rousseau](#)
- [OMB-Review Trauma-Informed Course Guidebook 9-29-2023.pdf](#)
- [Trauma and Resilience Informed Tips - UCLA Prevention Center of Excellence](#)
- [Grounding Techniques | Article | Therapist Aid](#)
- [Trauma-Informed Care | ACEs Aware – Take action. Save lives.](#)
- [Self-Care Trending: Creating a "Dopamine Menu" - NAMI Tri-Cities](#)