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# **Trauma-Informed Care**

# The Four "R"s in a Trauma Informed Approach:

A program, organization, or system that is trauma informed 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; responds by fully integrating knowledge about trauma into policies, procedures, and practices; and seeks to actively resist retraumatization. (SAHMSA, 2014)

### In practice realizing the impact of trauma means:

- Asking people about their experiences and whether they need support (this will not make things worse)
- Noticing how children are playing. Play helps children make meaning out of their experiences.
- Allowing children to play. Play supports positive, healthy development. A lack of play opportunities with toxic stress has negative impact on executive functioning and learning pro-social behaviors.



### In practice recognizing the signs and symptoms of trauma means:

- Knowing what to look for and letting families know if you have concerns by:
  - Demonstrating empathy
  - Asking open ended questions
  - Stating your concerns in a clear and direct manner

### In practice responding to trauma means:

- Offering emotional support, love, and positive role-modeling by:
  - Identifying specific, labeled positives in the child, even when the child is expressing feelings of guilt, anger, or sadness
  - Giving choices to take breaks or to do independent activities while also encouraging them to join the group
  - Assisting children in identifying emotions

     Using feelings charts/emojis, rating
     intensity
    - Use words to describe how you are feeling
  - Having a designated coping space
    - Fidgets, bean bag chairs, pillows/ stuffies, lowered lights, minimal noises
  - Assisting children in setting appropriate social boundaries
    - Having rules about personal boundaries (hula hoop distance apart)
    - \* Asking permission for any touch

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- Offering security, stability, consistency, and structure by:
  - Having clear rules, boundaries, and limits
  - Having a consistent visual schedule to follow
  - Having a good morning and goodbye ritual
  - Being proactive and transparent about schedule changes
  - Implement transition warnings
- Responding to irritable outbursts or oppositional behaviors by:
  - Ignoring it as long as they are safe
  - Praising calm body behaviors
  - Keeping language focused on behavior and not on the child's personality or characteristics
  - Considering the purpose of the behavior in order to meet needs and determine next steps. Outbursts can happen:
    - \* To escape a situation
    - \* To get a tangible need met
    - \* To gain attention of an adult or to test the attachment of the adult
    - To self-stimulate (due to an understimulated or "numb" nervous system)
- Helping children learn about: How to be a good friend, trust, expressing emotions, and safety.



# In practice resisting re-traumatization means:

- Remembering that children are resilient and will likely bounce back from trauma exposure:
  - Express empathy but do not make their identity focused on their trauma (self-fulfilling prophecy could occur otherwise)
  - Be supportive but continue to encourage ageappropriate autonomy
- Building social connections among children to promote self-esteem, problem-solving, and effective communication
- Considering collaborative, non-competitive, groupfocused games where children work together
- ◊ Providing expectations for positive coping
  - "What would your favorite superhero do?"
- Being willing to be a part of the safety plan

### References:

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