

### The Integration of Trauma Informed Care into the Child Welfare Licensing Process



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### Who are you??

- ▶ Name
- ▶ Job Title/Duties
- ▶ Who do you work for?
- ▶ How Long?
- ▶ Where did you go on your last vacation?
- ▶ Are you a member of NARA??



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Talking about how trauma affects our self and others we serve may illicit memories of painful times in our past, please feel free to take a break anytime and reach out to trainers or colleagues if needed for support.



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## Training Objectives

- ▶ Shared understanding importance
- ▶ Identification of Trauma
- ▶ Awareness of prevalence
- ▶ Put into Practice



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## Definition



- ▶ **Trauma:** Individual trauma results from an event, series of events, or a set of circumstances that is experienced by an individual as physically or emotionally harmful or threatening and that has lasting adverse effects on the individual's functioning and physical, social, emotional, or spiritual well-being.
- ▶ Anything that overwhelms a person's ability to cope.

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## Definition of TIC

- ▶ **Trauma-informed care (TIC):** Is an approach that explicitly acknowledges the role trauma plays in people's lives. TIC means that every part of an organization or program understands the impact of trauma on the individuals they serve and promotes cultural and organization change in responding to the consumers/clients served.

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## Symptoms of Trauma

- ▶ Symptoms of trauma often are actually adaptations to traumatic events.
- ▶ The 3 "E's" of Trauma: Events - Experience - Effects
- ▶ The focus on **events** places the cause of trauma in the environment VS some defect in the individual. "It's not what is wrong with you, but what happened to you."
- ▶ **Experience** highlights the fact not every person will experience the same event as traumatic.
- ▶ **Effects** reminds us our response must be holistic, it is not enough to focus on the symptoms or behaviors. Our goal is to support and encourage the individual to live a satisfying life.

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## ACES Study

- ▶ The CDC-Kaiser Permanente **Adverse Childhood Experiences (ACE) Study** is one of the largest investigations of childhood abuse and neglect and later-life health and well-being.
- ▶ The original ACE Study was conducted at Kaiser Permanente from 1995 to 1997 with two waves of data collection. Over 17,000 Health Maintenance Organization members from Southern California receiving physical exams completed confidential surveys regarding their childhood experiences and current health status and behaviors.
- ▶ The ACES study established the relationship between trauma exposure and physical health.

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## ACE Score

A total sum of the different categories of ACEs reported by participants, is used to assess cumulative childhood stress.

- ▶ Study findings repeatedly reveal a graded dose-response relationship between ACEs and negative health and well-being outcomes across the life course.
- ▶ Dose-response describes the change in an outcome (e.g., alcoholism) associated with differing levels of exposure (or doses) to a stressor (e.g. ACEs). A graded dose-response means that as the dose of the stressor increases the intensity of the outcome also increases.

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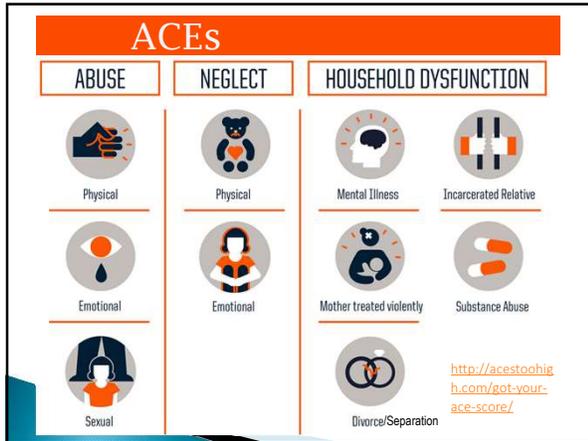
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- Increase # ACE increase risk**
- ▶ Alcoholism and alcohol abuse
  - ▶ Chronic obstructive pulmonary disease
  - ▶ Depression
  - ▶ Fetal death
  - ▶ Health-related quality of life
  - ▶ Illicit drug use
  - ▶ Ischemic heart disease
  - ▶ Liver disease
  - ▶ Poor work performance
  - ▶ Financial stress

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- Increase # ACE increase risk**
- ▶ Risk for intimate partner violence
  - ▶ Multiple sexual partners
  - ▶ Sexually transmitted diseases
  - ▶ Smoking
  - ▶ Suicide attempts
  - ▶ Unintended pregnancies
  - ▶ Early initiation of smoking
  - ▶ Early initiation of sexual activity
  - ▶ Adolescent pregnancy
  - ▶ Risk for sexual violence
  - ▶ Poor academic achievement

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## Activity

- ▶ Group activity to provide opportunity to share thoughts in how this information would be relevant in the work the participant does while working with licensors/licensees
- ▶ Take a few moments to complete the 10 questions handout.
- ▶ Process activity: Note any questions that stood out for you as you think about the events in your life and in the lives of the people you serve.

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## ACE Long Term Effects

- ▶ We recognize the long-term effects of adverse childhood experiences such as child abuse and neglect.
- ▶ The need to address trauma is increasingly viewed as an important component of effective service delivery.
- ▶ The impact of trauma is experienced by children, families, caregivers, and the social service providers who serve them.

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***"We have this incredible proof about the expense that trauma is causing our society and how all of these physical ailments are related. And yet, what do you do to change it? It's not like, 'Well, eat more broccoli.' "***

Patricia Wilcox, head of the Traumatic Stress Institute  
Klingberg Family Centers in New Britain



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**Indicators highly associated with the incidence of toxic stress, trauma, and the resulting conditions**

- ▶ Ohio population 11.5 million
- ▶ 7<sup>th</sup> most populous state in the US
- ▶ Approximately 20% of households have children under the age of 18
- ▶ 6.2% are under the age of five
- ▶ Nearly **one in four** children in Ohio live in households with incomes less than the Federal poverty level
- ▶ Close to **half** live in poverty or near poverty
- ▶ **Poverty** is the single best predictor of child abuse and neglect

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**Trauma and children in foster care**

- Children with a history of trauma may present to caregivers, pediatricians and professionals with
  - Sleep problems
  - Toileting problems
  - Anger
  - Aggressive behaviors
  - Depression
  - Difficulties sustaining attention
- Although trauma is nearly universal in children who have been adopted or placed in foster care
  - Events may be remote
  - History buried among old records
  - Prenatal exposure may not be detectable in obstetric records
  - Significant details lost in caretaker transfers and handoffs/transitions

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**National Statistics**

- ▶ 60% of children 17 or younger are exposed to violence every yr (Finklehor 2009)
- ▶ 3 million children are maltreated or neglected every yr. (Child Welfare Information Gateway 2013)
- ▶ 3.5-10 million children witness violence against their mother every yr. (Child Witness to Violence Project 2013)
- ▶ 1 in 4 girls and 1 in 6 boys are sexually abused before adulthood (NCTSN Fact Sheet 2009)
- ▶ 94 % of children in a study of juvenile justice settings have experienced trauma (Rosenberg 2014)

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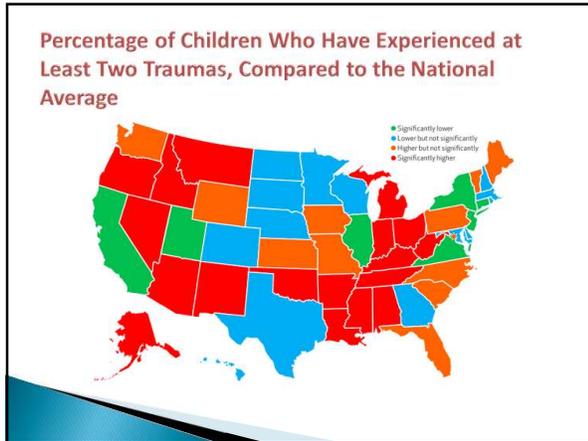
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### What is Trauma Informed?

A program, organization or system that is trauma-informed:

- Realizes the widespread prevalence and impact of trauma
- Understands potential paths for healing
- Recognizes the signs and symptoms of trauma and how trauma affects all people in the organization, including:
  - Consumers/patients
  - Staff
  - Families
  - Others involved with the system
- Responds by fully integrating knowledge about trauma into practices, policies, procedures, and environment.

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### TIC Training

- Trauma-informed approaches factor in how an individual's past experiences can affect their reactions and perceptions now.
- In an effort to understand what drives an individual's behavior we need to recognize the underlying unmet need or we miss ques something more is driving a specific behavior.
- Examples
- All Licensing Leadership & staff within the department should receive TIC training annually.
- All Licensees should receive TIC training initially and annually.

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## TIC Training

- ▶ Who should have training?
- ▶ Foster Parents
- ▶ Adoptive Parents
- ▶ Child Care Staff
- ▶ Adult Care Staff
- ▶ Medical and Health Care Staff
- ▶ Agency Staff
- ▶ Human Resources
- ▶ EVERYONE!



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## Agency Self Assessment

- ▶ The Agency Self-Assessment for Trauma-Informed Care is intended to be a tool that will help you assess your organization's readiness to implement a trauma-informed approach.
- ▶ Honest and candid staff responses can benefit your agency by helping to identify opportunities for program and environmental change, assist in professional development planning, and can be used to inform organizational policy change.

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## Core Guiding Principles in TIC



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### Safety

- ▶ Throughout the organization, staff and the people they serve feel physically and psychologically safe.
- ▶ Safety throughout the organization, staff and people served
- ▶ Physical and psychological safety
- ▶ Physical Setting is safe
- ▶ Interpersonal interactions promote a sense of safety

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### Trustworthiness and Transparency

- ▶ Organizational operations and decisions are conducted with transparency and the goal of building and maintaining trust among staff, clients, and family members of those receiving services.
- ▶ Maximizing trustworthiness, making tasks clear, and maintaining appropriate boundaries
- ▶ Organizational operations and decisions are conducted with transparency
- ▶ Constantly building trust

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### Peer Support and Mutual Self-Help

- ▶ These are integral to the organizational and service delivery approach and are understood as a key vehicle for building trust, establishing safety, and empowerment.
- ▶ Understood as the key vehicle for building trust, establishing safety and empowerment
- ▶ Utilizing their stories and lived experience to promote recovery and healing

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### Collaboration and Mutuality

- ▶ Maximizing collaboration and sharing of power with consumers and families
- ▶ Leveling of power differences between staff and clients and among organizational staff from direct care staff to administrators
- ▶ Recognition that healing happens in relationships and meaningful sharing of power and decision-making
- ▶ Everyone has a role to play in TIA: "one does not have to be a therapist to be therapeutic."

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### Empowerment Voice and Choice

- ▶ Throughout the organization and among the clients served, individuals' strengths are recognized, built on, and validated and new skills developed as necessary.
- ▶ The organization aims to strengthen the staff's, clients', and family members' experience of choice and recognize that every person's experience is unique and requires an individualized approach.

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### Cultural Historical and Gender Issues

- ▶ Organization actively moves past cultural stereotypes and biases
- ▶ Offers gender responsive services
- ▶ Leverages the healing value of traditional cultural connections
- ▶ Recognizes and addresses historical trauma

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### Discussion Questions

- Can you think of examples from your work setting of empowerment, voice and choice for people served?
- What about for staff?
- Can you think of policies, regulations, or practices that do the opposite through taking voice, choice, and decision making away? Could any of those be reworked/changed?

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### Guidance & Implementation

- ▶ The change process for becoming a trauma-informed organization is conscious, intentional and on-going.
- ▶ Developing a trauma-informed approach requires change at all levels of an organization and systematic alignment with the 6 key principles discussed.
- ▶ You are encouraged to examine how a trauma-informed approach will benefit stakeholders, yourself, and agency/organization as a whole.
- ▶ Collaboration across sectors is built on a shared understanding of trauma and principles of a trauma-informed approach.

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### Summary

- With support people can survive and thrive even after experiencing devastating trauma and protective factors really make a difference in how an individual responds to trauma.
- Even people with extremely high ACEs scores live long & healthy lives especially if they have support.
- Recommend watching the video on line: "Behind Closed Doors" the story of 4 women which is a case study of how trauma can and does heal.
- What will you do differently tomorrow, based on what you learned today?

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Questions  
are  
guaranteed in  
life;  
Answers  
aren't.

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### That's All Folks..

- ▶ Thank you for your time!
- ▶ Donna & Joyce

**Not everyone will understand your journey. That's fine. It's not their journey to make sense of. It's yours. (rawforbeauty.com)**

Resources: material adapted from NCTIC Trauma Curriculum; SAMSHA's Trauma-Informed Approach: Key Assumptions and Principles ; Ohio Department of Mental Health and Addiction Services ; Initiatives Trauma Informed Care

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