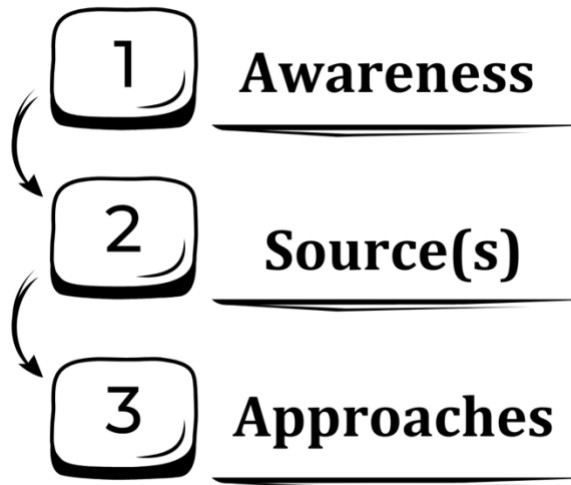


Trauma-informed approaches begin with us – as we work with/for others



A

Be
Aware

D

Don't
Assume

E

Explore
Source(s) & Approaches

Gwendolyn “Gwen” Downing (she/her),
Version 04.24.24

Table of Contents

<i>Trauma-informed approaches begin with us – as we work with/for others</i>	1
Opening	3
Trauma-informed approach	5
Self-care 3-step skill set	7
Awareness of My Body, Behaviors, Thoughts, Emotions	8
Explore possible sources	9
Explore possible approaches	10
Mindfulness-Other	11
Adapted SBNRR Mindfulness Practice	13
The “ADE”	15
“All behavior is communication” – “All experience/exhibit has a source”	15
Be aware	16
Don’t assume	16
Explore possible sources of what they are experiencing/exhibiting	16
Explore possible approaches	17
Considerations when exploring sources or approaches.....	18
Appendix A: Additional sources for self-care and secondary traumatic stress	20

Opening

Acknowledging lived experience, with all the differing degrees, as we proceed, we keep that in mind.

Description

Being trauma-informed has multiple components. Foundationally it begins with our individual well-being. In this workshop participants will identify and explore the three steps of a skill set for self-care; and then build on those three steps, as they identify and explore the components of the ADE framework (be aware, don't assume, explore possible sources and approaches) for working with/on behalf of others.

Trainer and contact

Gwendolyn "Gwen" Downing (she/her) Gwen@connectall.online and www.ConnectAll.online

Information, disclaimers, disclosure

- I understand the issues regarding the word "disability" for some of the areas it is applied to. I use it now and other times, as it is expedient.
- Any sources used are not endorsements of the source.
- As recognized, information is what it is, and may be constantly evolving.
- Provided for informational purposes only.
- Usually done as part of other trainings.
- I am the originator and director of the Connect All initiative, that has 501c3 fiscal sponsorship through We, the World.
- Resource: [Help-lines, apps, and other PDF 03.24.24- ConnectAll](#)

Agenda

- Our trauma-informed approach (TIA) foundation.
- A 3-step self-care skill set for one's body, behaviors, thoughts, emotions.
- The ADE: be Aware, Don't assume, Explore possible sources and approaches

Expectations

A safe, thus brave, community.

- **Trainer:** Trying to model; Self-care; Respect of others, any sharing; Fluid structure; I might, probably will, fail – how do we keep learning and in relationship when I do; Work with you as a community
- **Group:** Self-care; Respect of others, any sharing; Be present and engaged as possible; Learn in what way works for you; Be part of community

Collaboration

Your knowledge, ideas, and resources.

Trauma-informed approach

Substance Abuse and Mental Health Services Administration. SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach. HHS Publication No. (SMA) 14-4884. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2014.

<https://store.samhsa.gov/product/SAMHSA-s-Concept-of-Trauma-and-Guidance-for-a-Trauma-Informed-Approach/SMA14-4884>

Substance Abuse and Mental Health Services Administration: Practical Guide for Implementing a Trauma-Informed Approach. SAMHSA Publication No. PEP23-06-05-005. Rockville, MD: National Mental Health and Substance Use Policy Laboratory. Substance Abuse and Mental Health Services Administration, 2023. <https://www.samhsa.gov/resource/ebp/practical-guide-implementing-trauma-informed-approach>

Trauma-Informed: People recognize and respond to the impact of traumatic stress; personally, and on the global level. Everyone can be trauma informed: individuals; community groups; businesses; systems, such as legal, education, medical, public health.

Trauma Treatment: Interventions that focus on addressing symptoms & responses to traumatic experiences.

The 4 assumptions of a trauma-informed approach (4 Rs)

- **Realization:** Understand how trauma can affect individuals, families, groups, organizations, and communities.
- **Recognition:** Recognize signs of trauma through different pathways.
- **Respond:** Apply the principles of a trauma-informed approach to all areas of functioning of an organization.
- **Resisting Re-traumatization:** Acknowledging trauma and its context in all operations to avoid reinforcing or repeating a traumatic experience.

The 6 Guiding principles of a trauma-informed approach



https://www.cdc.gov/orr/infographics/6_principles_trauma_info.htm

1. Safety
2. Trustworthiness and Transparency
3. Peer Support
4. Collaboration and Mutuality
5. Empowerment
6. Cultural, Historical, and Gender Issues

- **Physical and psychological safety**
- **For ourselves and others**

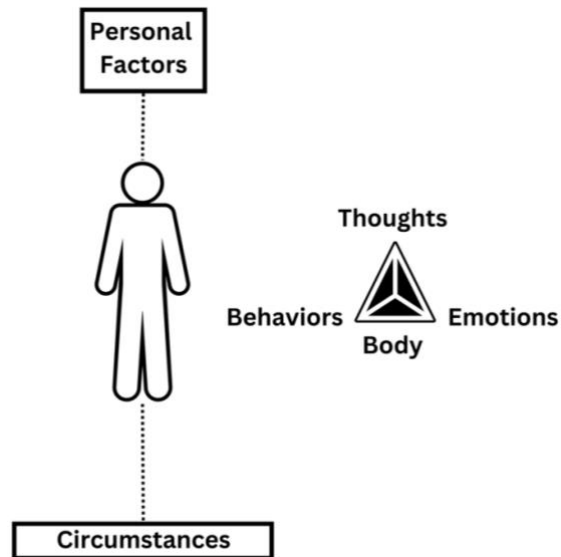
Domains for implementation

SAMHSA has 10 domains to consider for implementation. We are going to focus on 3: Environment, Practice, and Policy.

	Physical Safety	Psychological Safety
Environment		
Practice		
Policy		

- Things we are already doing well
- Things we know we could do/try differently
- Things we want to think/talk/ask/learn more about

Self-care 3-step skill set



We all have internal and external factors, coming from our personal factors and circumstances, creating responses in our bodies, behaviors, thoughts, and emotions*.

*Regarding emotions: There are situations, such as with alexithymia, where individuals truly aren't going to have/experience/identify emotions the same as others do.

How is our body, behaviors, thoughts, and emotions pyramid interconnected?

We want to know our normal in our bodies, behaviors, thoughts, and emotions; and as part of that, any strengths, needs, or challenges we have in those areas.

3-steps:

1. Have awareness of my body, behaviors, thoughts, and emotions
2. Explore possible sources
3. Explore possible approaches

Awareness of My Body, Behaviors, Thoughts, Emotions

Knowing our normal, we want to stay aware of our body, behaviors, thoughts, and emotions. Why is this important? We want to be and do our best, and to do that we have to be aware.

And one way that might help some, is doing routine awareness check-ins.

Example check-in

This can take seconds or as long as needed. You can do the four areas in any order.

Body: What's happening in my body, from the top of my head to my toes? Am I warm, cold; relaxed, tense; numb, stiff, achy; tired, wired; thirsty, hungry; have a headache; and so on?

Behaviors: What are my behaviors? What are my behaviors communicating to myself or/and others about how I'm doing?

Thoughts: What are my thoughts? Am I present? Am I thinking about something I'm excited about, something that is bothering me? Any change from my normal? Are they accurate? Do they line up with my values? So on.

Emotions: What am I feeling? Calm? Happy? Stressed? Furious? Anxious? Need to escape? "Spaced out"? Disconnected? Withdrawn? Bored? Numb? Confident? Proud? Surprised? Embarrassed? Nervous? Indifferent? Envious? Compassionate? So on.

Explore possible sources

- What is the possible source(s) for what I am aware of in my body, behaviors, thoughts, emotions?
 - Do I need any assistance to identify the source?
- Can I identify the source?
 - Is it one or more?
 - What's my best guess, if I can make one?

Personal factors (Internal) examples

- Personality
- Intelligence
- Physical ability
- Preferences
- My choices
- Medical
- Mental health
- A need, e.g., hungry, tired
- Disability



Circumstances (External) examples

- Groups: e.g., peer, work, school
- Societal: globally, nation, state, town, neighborhood, etc
- Physical environment
- Postive stress
- Negative stress
- Trauma
- Medical treatment

What do I not know? Sometimes we may need to learn more to understand the possible sources, e.g., how trauma might impact the four areas.

Explore possible approaches

Explore possible approaches for what I am aware of in my body, behaviors, thoughts, emotions.

- Is there something I can do/try about the source?
- Is there something I can do/try about the response?
- Is there anything else I can do/try?

In situations the source(s) aren't known, while we are trying to determine that, the three questions are still valid.

Sometimes all we can do is try things.

Questions

What was something significant to you while going through the three steps?

How might doing these on a routine basis be helpful to you?

How does this help us with trauma-informed approach efforts?

Mindfulness-Other

Possible techniques:

NOTE: Not all techniques work for everyone. And if one works one time, it might not work another time; and vice versa, it might not work then work later.

SBNRR Mindfulness Practice - This can be modified to your needs and time available:

Stop: Stop what you are doing, take the pause, give yourself space. If you need to, use verbal or internal mental cues to do this.

Breathe: Everyone is different. For some, it is helpful to pay attention to your breath and take a moment to breathe in whatever way works for you. For others, you might need a different or combined approach, including skipping and going to Notice. For anyone, you might need to try different approaches at different times.

Notice: Notice what is going on in your body, behaviors, thoughts, emotions. You are not judging yourself, just notice what is going on.

Reflect: Where is this coming from? Why am I thinking/feeling this? Why am I doing this? Any other curious questions that help clarify the source. Remember interaction of body, behaviors, thoughts, and emotions.

Respond: What is the best way to respond to this and move forward? Again, use whatever questions might help you.

5-4-3-2-1 practice - In your mind, out loud, or written:

- 5 things I can see
- 4 things I can touch
- 3 things I can hear
- 2 things I can smell
- 1 thing I can taste

Mental – Physical – Soothing Grounding - Healthline: [30 Grounding Techniques to Quiet Distressing Thoughts](https://www.healthline.com/health/grounding-techniques) (<https://www.healthline.com/health/grounding-techniques>)

A few examples:

Mental: List as many things in a category as you can. Alphabetically list a category. Do math/number exercises. Go through anchoring facts.

Physical: Touch something. Breathing exercise. Physical activity. Use your 5 senses.

Soothing: Think of a face/voice/thing/place that soothes you. Talk yourself kindly through it. List positive things.

SOS Technique - Developed by Julian Ford:

- Slow down - Slow down or stop; as needed, connect to body, and let mind clear.
- Orient - Pay attention to where you are, what you are doing, who you are with, what's important.
- Self-check - How stressed or calm you are in the moment *and* how in control or dysregulated you are.

30 second body scan meditation:

[This 30-Second Exercise Can Reduce Your Anxiety Significantly \(It's True – We've Tried!\)](https://youaligned.com/body-scan-meditation/)

(<https://youaligned.com/body-scan-meditation/>)

1. Get comfortable
2. Find your breath
3. Become the observer
4. Notice even more
5. Give yourself permission to relax

Example other approaches:

- **Thoughts:** Check for value alignment. Check for accuracy. Replace them. Let go. Think about or do something else. Make a plan. Talk to someone.
- **Do a blend of mindfulness and physical.** While stretching, walking, so on: What's the closest/farthest sound I hear? What's the closest/farthest thing I see? What's the loudest/quietest sound? How relaxed/tense? So on.
- **Physical and empty mind.** Maybe focus on the movement or your breath as needed.
 - These stretches may be good for times like mini breaks: [4 Quick Stretches to Do If You've Been Sitting in the Car for Hours](https://www.self.com/gallery/sos-stretch-long-car-ride) (<https://www.self.com/gallery/sos-stretch-long-car-ride>)
- **Physical and** sing, talk nonsense, recite a poem, so on.
- **Relax physically and mentally.** Slump, stretch out, curl up, let your mind empty, let your mind wander...
- **Total stillness**

Mindful Breathing Exercise: [Mindful Breathing Exercise - YouTube](#)

Possibly helpful apps:

NOTE: Some things to consider when using mental health/wellness apps/online services.

- How do they protect my privacy? Are there steps I can take to protect my privacy?
- Are they ethical in their practices?
- What is the benefit/cost/risk of using them?

PTSD Coach (<https://mobile.va.gov/app/ptsd-coach>): By the Veterans Administration, is for anyone experiencing Post Traumatic Stress, or wanting to know more to help someone else.

WYSA stress: Depression & anxiety therapy chatbot app (has free option).

Moving forward (<https://www.veterantraining.va.gov/movingforward/>): By the Veterans Administration, is for anyone coping with stressful problems.

Woebot - Your Self-Care Expert (<https://woebothealth.com/>): Helps with an array; everyday stresses and challenges, symptoms of depression and addiction.

Mindfulness: Headspace, Insight Timer, Mindfulness Coach, 10% Happier

Other: Provider Resilience, ACT coach, Virtual Hope Box, Well Body Coach, CALMapp

Adapted SBNRR Mindfulness Practice

This can be modified to your needs and time available.

Stop: Stop what you are doing, take the pause, give yourself space. If you need to, use verbal or internal mental cues to do this.

Breathe: Everyone is different. For some, it is helpful to pay attention to your breath and take a moment to breathe in whatever way works for you. For others, you might need a different or combined approach, including skipping and going to Notice. For anyone, you might need to try different approaches at different times.

Notice: Notice what is going on with your body, behaviors, thoughts, emotions. You are not judging yourself, just notice what is going on.

Awareness of My Body, Behaviors, Thoughts, Emotions

- **Body:** What's happening in my body, from the top of my head to my toes? Am I warm, cold; relaxed, tense; numb, stiff, achy; tired, wired; thirsty, hungry; have a headache; and so on?
- **Behaviors:** What are my behaviors? What are my behaviors communicating to myself or/and others about how I'm doing?
- **Thoughts:** What are my thoughts? Am I present? Thinking about something I'm excited about, something that is bothering me? Any change from my normal? Are they accurate? Line up with my values? So on.
- **Emotions:** What am I feeling? Calm? Happy? Stressed? Furious? Anxious? Need to escape? "Spaced out"? Disconnected? Withdrawn? Bored? Numb? Confident? Proud? Surprised? Embarrassed? Nervous? Indifferent? Envious? Compassionate? So on.

Reflect: Where is this coming from? Why am I thinking/feeling this? Why am I doing this? Any other curious questions that help clarify the source. Remember interaction of body, behaviors, thoughts, and emotions.

Explore possible sources, for what I am aware of in my body, behaviors, thoughts, emotions

Can I identify the source(s)? What's my best guess, if I can make one?

Personal factors (Internal) examples

- Personality
- Intelligence
- Physical ability
- Preferences
- My choices
- Medical
- Mental health
- A need, e.g., hungry, tired
- Disability



Circumstances (External) examples

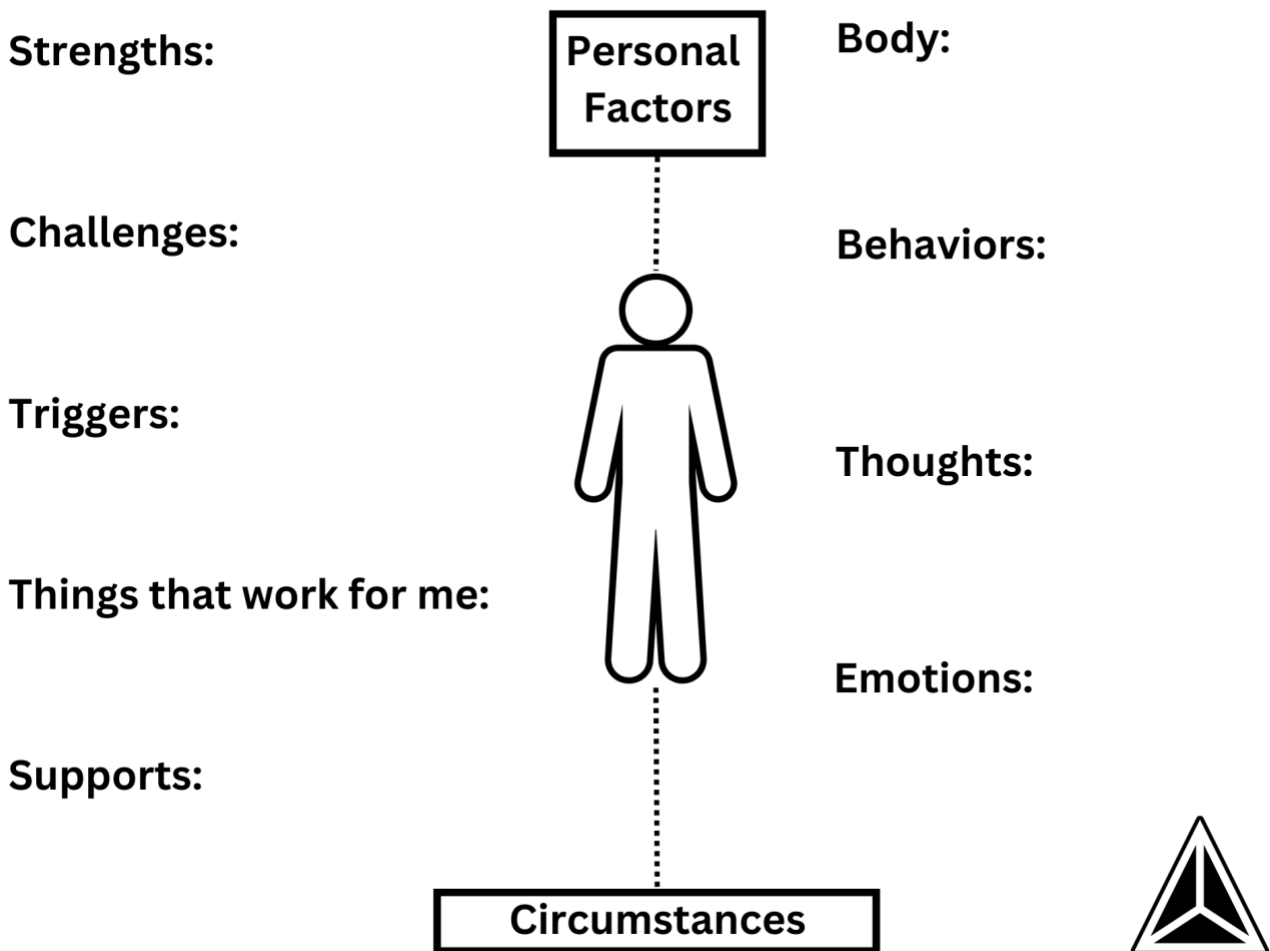
- Groups: e.g., peer, work, school
- Societal: globally, nation, state, town, neighborhood, etc
- Physical environment
- Postive stress
- Negative stress
- Trauma
- Medical treatment

Respond: What is the best way to respond to this and move forward? Again, use whatever questions might help you.

Explore possible approaches for what I am aware of in my body, behaviors, thoughts, emotions

- Is there something I can do/try about the source?
- Is there something I can do/try about the response?
- Is there anything else I can do/try?

Sometimes all we can do is try things.



The “ADE”

be Aware, Don't assume, Explore sources and approaches

By Gwendolyn Downing, version 04.23.24

Objective

Be attuned and responsive to a person.

The ADE can help us

- Learn a person's typical state – their normal needs, strengths, and challenges.
- Recognize when there is a change in the person – again, with needs, strengths, or challenges.
- Think through and explore possible sources for what they are experiencing/exhibiting.
- Think through and explore possible approaches for needs, strengths, and challenges.

“All behavior is communication” – “All experience/exhibit has a source”

“All behavior is communication,” doesn't mean every behavior is us consciously communicating something; it means that every behavior has a source for it, that is being communicated. And we want to go beyond this; changing behavior to exhibiting, and include experiences, e.g., pain.

Examples:

- If you are with someone and they throw up, that behavior/exhibiting is communicating to you that something is wrong. What it doesn't tell you, is whether: it is intentional; a stress reaction; they have a health issue – and if it is a health issue, what kind; they are stressed and have a health issue; and so on. And then if a week or so goes by and they throw up again, the source(s) could be the same or different. Or maybe it's not that they are throwing up, it is they have (experiencing) a headache; and there are multiple possible sources for that. And if later, they have another headache, the source(s) could be the same or different. We don't want to assume the source(s) for an experience/exhibit one time is the same for the same experience/exhibit another time.
- If a person wants something to eat, might be: really are hungry; feel hungry because stressed; fear of no food later; habit; et cetera.
- If a person appears lost in thought, might be: they are intelligent and imaginative; a stress response; et cetera.

Skill set

Be aware

We need to know them well enough to know what is typical for them, including their needs, strengths, and challenges. And then, we will also be able to recognize when there is any change.

Awareness includes:

- Information from them
- What I garner from my interactions with them
- What I garner from observing them
- Information from others
- Depending on situation, whatever historical information possible from the person or/and other sources

With experiences/exhibiting, as applicable, we want to be aware of details, such as: when; where; with who; what is the circumstance; how often; when does it not happen.

Don't assume

We want to check ourselves that we are being unbiased; and think through all possible sources of what they are experiencing/exhibiting.

Reminder on misattribution: Misattribution is any time we incorrectly identify the source of something. While obviously we never want to misattribute (if avoidable), it can literally be a matter of life or death, or serious injury.

Why is this point important for individuals we are here for today?

Explore possible sources of what they are experiencing/exhibiting

Sources can help us get to needs, strengths, challenges, and approaches. Depending on what is going on, for this step, they/we might need other people such as doctors*; the individual might need testing; etc. (*Remembering that when someone is a "professional" they are still a person, and there may be a lack of education and biases.)

Reminder on what is not misattribution: In situations where there is a delay, difficulty, or inability to identify the source(s), when we acknowledging we don't know, it is not misattribution.

- What is the possible source(s) for what they are experiencing/exhibiting?
 - Is any assistance needed to identify the source?
- Can the source be identified?
 - Is it one or more?
 - What's the best guess we have, if one can be made?

Explore possible approaches

Three general questions to consider

- Is there something they/I/we can do/try about the source?
- Is there something they/I/we can do/try about the response?
- Is there anything else they/I/we can do/try?

In situations the source(s) aren't known, while they/I/we are trying to determine that, the three questions are still valid.

Some basic considerations

- Ask them. Examples:
 - What do you need?
 - What do you think might help?
 - What's worked for you before? (If person – I don't know, I haven't dealt with this before. You - Okay. What's something that's helped you with something else?)
 - Anything you want me to do?
- Consider their strengths or things they like to do – e.g., Reading, is there a way they can use that skill in this situation?

Considerations when exploring sources or approaches

These considerations are worded for those in a caregiver role for another person of any age (infant to elder).

Ask them.

Consider their strengths or things they like to do: e.g., Reading, is there a way they can use that skill in this situation?

Be honest: If a person can understand us, we want to be honest about exploring. And, even if we think they can't, it's best practice to do so anyway.

Using language they can understand, share:

- What our intent is.
- Why it might or might not work.
- How we will listen to them.
- And as needed, we will keep trying.

Example, "I want you to both be and feel safe. Sometimes you/I/we don't know what will work for you. As you/I/we are trying to figure that out, everything you tell me helps us both identify what might. Also, sometimes, when we try things that don't work, it might seem like we did something that made things worse. But it's okay. We were just trying, and we will talk about it. (Person- What if I can't think/talk about this sometimes because of how much it upsets me) When you can't, I'll keep trying."

Give positive feedback: We want to give positive feedback anytime we take a step – regardless of the outcome.

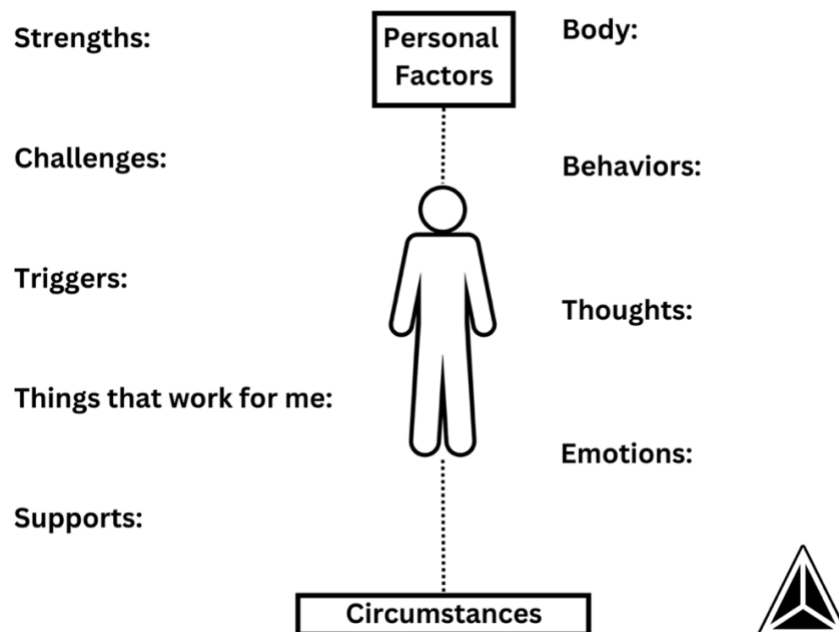
Examples:

- "Thank you for telling me that humming or talking to yourself helps you feel calm, and for giving me permission to check in with you if there is anything else I can do to help. Hopefully, we can identify things to change or do, so you don't feel the need to calm yourself as often."

- “To be honest, I was nervous when you told me that you wanted to cook dinner for everyone without help. You did such an amazing job. Would you be willing to show me how you made _____?”
- “That coping skill didn’t work for you, and I’m sorry it didn’t. And, I really appreciate, that as hard as it is, you keep trying different skills to find something that does work.”

Use a framework: This can help them/you, think it through and track information, before they/you try, as they/you try, and after they/you try.

Example:



Questions

What was something significant to you while going through the ADE?

How might doing these steps on a routine basis be helpful?

How does the ADE help us with trauma-informed approach efforts?

Appendix A: Additional sources for self-care and secondary traumatic stress

[CalTrin \(California Training Institute\)](https://www.caltrin.org/) (<https://www.caltrin.org/>)

- [CalTrin Self-Paced Courses](#)
 - [Understanding Compassion Fatigue and Secondary Traumatic Stress](#)
 - [Strategies for Addressing Compassion Fatigue and Secondary Traumatic Stress](#)
- [CalTrin Training Archive](#)
 - [Secondary Traumatic Stress and Reflective Practice/Supervision](#)
 - [Trauma, Compassion Fatigue & Secondary Traumatic Stress](#)
 - [Organizational Strategies: Addressing Compassion Fatigue & Secondary Traumatic Stress](#)

[Secondary Traumatic Stress Consortium – free resources](https://www.stsconsortium.com/free-resources) (<https://www.stsconsortium.com/free-resources>)

[Secondary Traumatic Stress: Understanding the Impact on Professionals in Trauma-Exposed Workplaces. National Child Traumatic Stress Network’s learning center](#) (<https://learn.nctsn.org/>)

[Southern Regional Children’s Advocacy Center – Secondary Traumatic Stress Resources](https://www.srcac.org/reflect-refuel-reset/) (<https://www.srcac.org/reflect-refuel-reset/>)

[University of Kentucky Center on Trauma and Children’s Secondary Traumatic Stress Innovations and Solutions Center](https://ctac.uky.edu/projects-and-programs/secondary-traumatic-stress-innovations-and-solutions-center-sts-isc) (<https://ctac.uky.edu/projects-and-programs/secondary-traumatic-stress-innovations-and-solutions-center-sts-isc>)

- [Staying Inside the Window of Tolerance: An Advanced Training on Secondary Traumatic Stress and Resiliency](#)

[Using the Secondary Traumatic Stress Core Competencies in Trauma-Informed Supervision - NCTSN](https://www.nctsn.org/resources/using-secondary-traumatic-stress-core-competencies-trauma-informed-supervision) (<https://www.nctsn.org/resources/using-secondary-traumatic-stress-core-competencies-trauma-informed-supervision>)

[Virtual Calming Room - Sacramento City Unified School District](https://calmingroom.scusd.edu/) (<https://calmingroom.scusd.edu/>): Has strategies and tools for students, families, and staff.