

# Trauma-Informed Care Healing-Centered Engagement



Annie Roepke, PhD (she/her) with NPTC | 2023

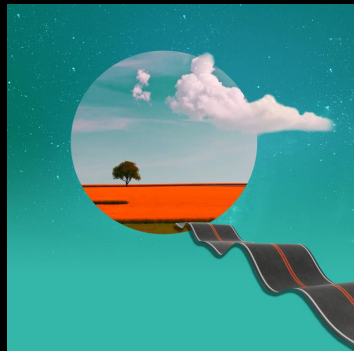
Evoke Training and Consulting PLLC | [ann.marie.roepke@gmail.com](mailto:ann.marie.roepke@gmail.com)  
Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Activity



Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Our roadmap



- What is trauma informed care?
- Understanding trauma
- TIC skills and/or screening and treatment
- Equity and culture
- Self-care and team-care
- Wrap-up

This training is intended for educational and informational purposes, and not intended to diagnose/treat any disorder, provide medical advice, or create a nurse-therapist or other relationship. Please consult a professional as needed.

## Three invitations:



- Take care of yourself
- Jump in and co-create this
- Share perspectives about culture & equity

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Grounding exercise



Take part if you'd like

- Why take part?
- Why not take part?

Options to adapt it

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Our roadmap



- **What is trauma informed care?**
- Understanding trauma
- TIC skills and/or screening and treatment
- Equity and culture
- Self-care and team-care
- Wrap-up

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Trauma-informed practice



- A lens
- An approach to service delivery that involves:
  - Understanding trauma & stress responses
  - Steering clear of retraumatizing people
  - Fostering safety, trust, choice, control, healing
  - Peer support
  - Attention to culture and equity

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## The 4 Rs:

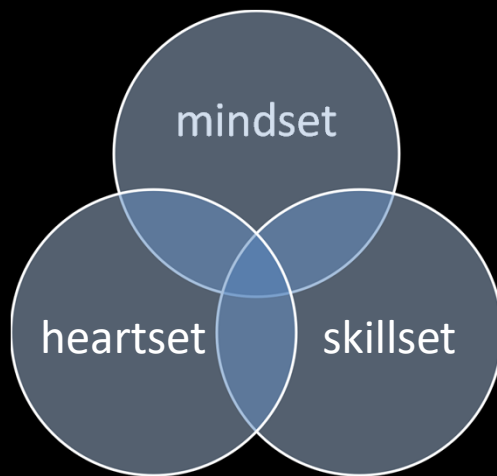
A trauma-informed provider/organization...



- **Realizes** the impact of trauma
- **Recognizes** the signs and symptoms of trauma
- **Responds** in its policies & practices
- **Resists** re-traumatization

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke. (SAMHSA, 2014)

## Trauma-informed care



Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

“What is **WRONG** with them?!!”

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

“What might have happened to them...”

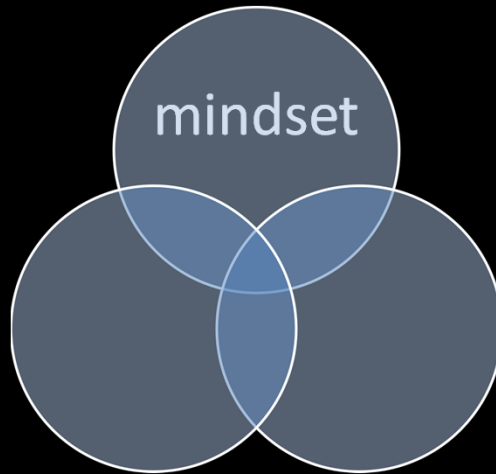
“...and how did they creatively and  
intelligently adapt to survive?”

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

“Can I see their suffering and  
their strengths?”

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

Seeing challenging behaviors as coping efforts;  
Understanding impact of trauma;  
Attitudes about the helping relationship



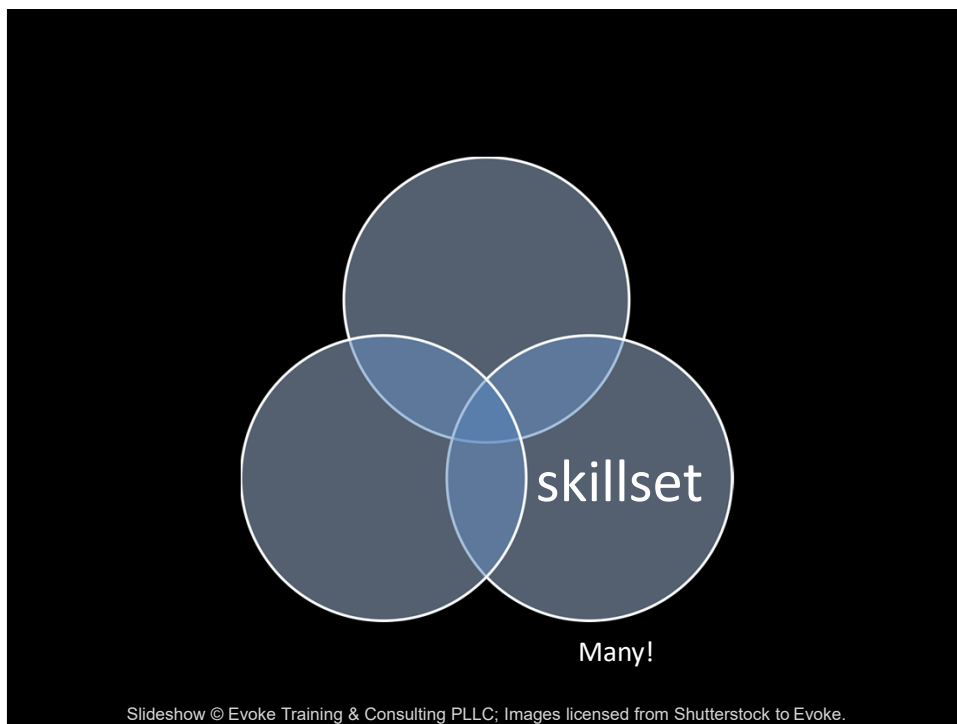
Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

A Venn diagram consisting of three overlapping circles. The bottom-left circle is labeled 'heartset'. The circles overlap in the center, and each pair of circles also overlaps. The circles are light blue with white outlines.

heartset

Safety, trust, choice, collaboration, empowerment\*...  
empathy and being kinder than strictly necessary

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.



## TIP is not:



- Not a type of therapy
- Not discussing trauma in depth
- Not a specific checklist
- Not defining people by their trauma history
- Not about pathologizing an individual, group, or culture



- "...I explained the impact of stress and trauma on brain development and how trauma can influence emotional health. As I was explaining, one of the young men in the group named Marcus abruptly stopped me and said, "I am more than what happened to me, I'm not just my trauma". I was puzzled at first, but it didn't take me long to really contemplate what he was saying... The term 'trauma informed care' didn't encompass the totality of his experience and focused only on his harm, injury and trauma. For Marcus, the term 'trauma informed care' was akin to saying, you are the worst thing that ever happened to you."

-Shawn Ginwright, Ph.D.

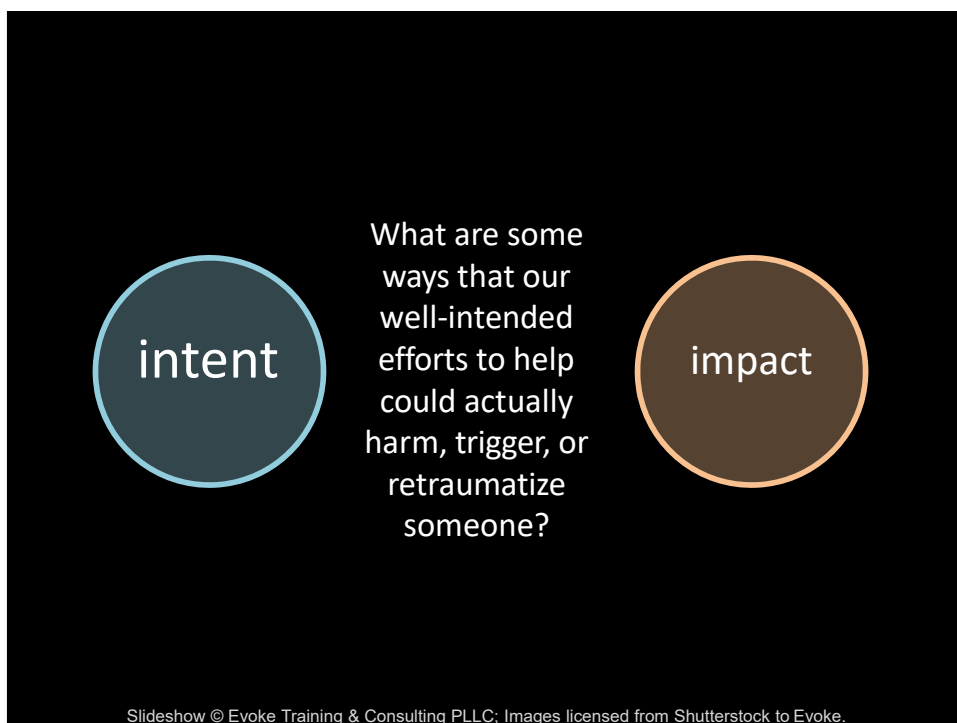
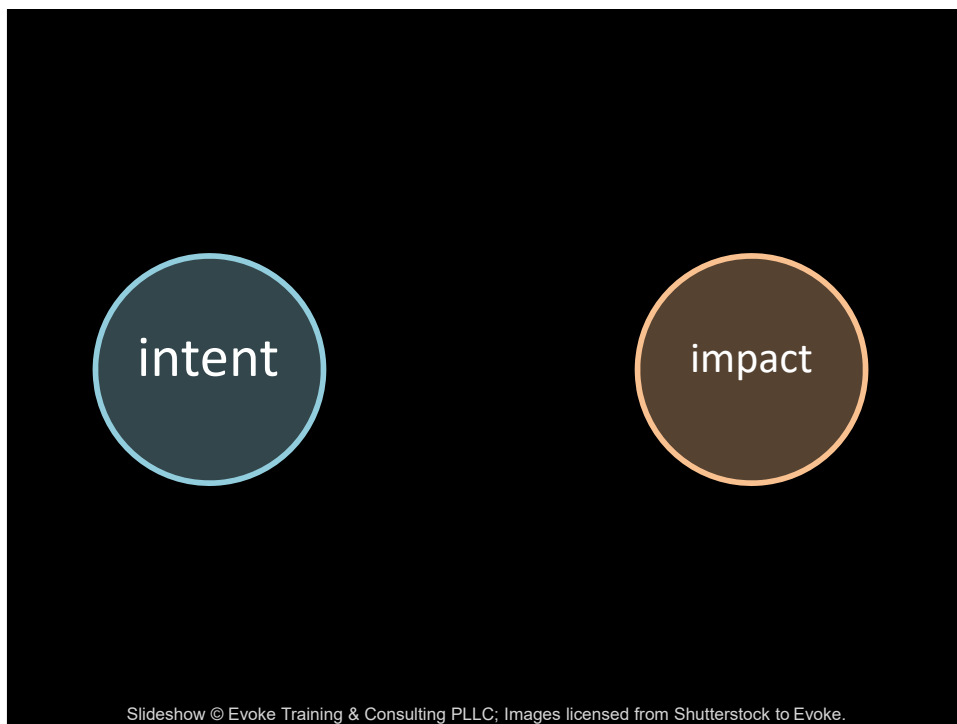
Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Why TIP?



- Your reasons?
- Trauma is common
- It affects our thinking & relating... and if/how we engage in services
- TIP can improve outcomes
- TIP can make staff AND those we serve more satisfied
- We have our own history
- To align intent & impact

(Hales et al., 2018)  
Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.



## Resist retraumatizing

- What are some ways that our well-intended efforts to help could actually harm or retraumatize someone?
  - Unwanted advice ⑦ feel coerced, powerless
  - Intensive questioning ⑦ invasive
  - Unwanted physical touch ⑦ unsafe
  - Reassurance ('it's not a big deal') ⑦ invalidated, gaslit
  - Microaggressions meant as 'compliments' ⑦ degrading
  - 'One right way' attitude ⑦ feeling unseen, unheard
  - Leaving our lane (e.g. doing therapy) ⑦ negative experiences, avoidance

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Harm from the mental health establishment



### **Apology to People of Color for APA's Role in Promoting, Perpetuating, and Failing to Challenge Racism, Racial Discrimination, and Human Hierarchy in U.S.**

OCTOBER 2021

The American Psychological Association failed in its role leading the discipline of psychology, was complicit in contributing to systemic inequities, and hurt many through racism, racial discrimination, and denigration of people of color, thereby falling short on its mission to benefit society and improve lives. APA is profoundly sorry, accepts responsibility for, and owns the actions and inactions of APA itself, the discipline of psychology, and individual psychologists who stood as leaders for the organization and field.

The governing body within APA should have apologized to people of color before today. APA, and many in psychology, have long considered such an apology, but failed to accept responsibility.

term impact of our failures as an association, a discipline, and as individual psychologists.

We know too well that history can repeat itself, that the past informs the present, and that many harms will continue to be perpetuated absent purposeful intervention. In offering an apology for these harms, APA acknowledges that recognition and apology only ring true when accompanied by action; by not only bringing awareness of the past into the present but in acting to ensure reconciliation, repair, and renewal. We stand committed to purposeful intervention, and to ensuring that APA, the field of psychology, and individual psychologists are leaders in both

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Harm from the mental health establishment

### Psychology from the Margins

Volume 4 *Applied Psychology and Minoritized Groups: Using History to Inform Present Practices*

Article 2

2022

**DSM Discrimination and the LGBT Community: Using the History of Diagnostic Discrimination Against Sexual Minorities to Contextualize Current Issues in Transgender and Gender Diverse Mental Healthcare**

Ginelle Wolfe  
*The University of Akron*

Nicole Fogwell

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Harm from the mental health establishment

- From asylums to recovery – an outsider movement
  - Video (6min) – content notice

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Our roadmap



- What is trauma informed care?
- **Understanding trauma**
- TIC skills and/or screening and treatment
- Equity and culture
- Self-care and team-care
- Wrap-up

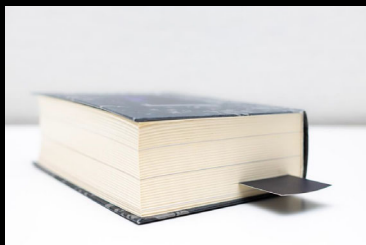
Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Understanding Trauma



Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Trauma



DSM-5: “Exposure to actual or threatened death, serious injury, or sexual violence”

– Direct or indirect

What’s missing?

(American Psychiatric Association, 2013)  
Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.



Stressor > coping resources

– Overwhelm

– Event, experience, effects

“Traumatic events overwhelm the ordinary systems of care that give people a sense of control, connection, and meaning... Traumatic events are extraordinary, not because they occur rarely, but rather because they overwhelm the ordinary human adaptations to life.” - Judith Herman

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

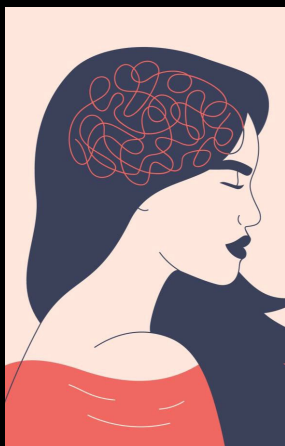


“Trauma almost invariably involves not being *seen*, not being *mirrored*, and not being *taken into account*.”

*Bessel van der Kolk*

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Some types of trauma



- Acute vs. chronic
- Adult vs. developmental
- Vicarious vs. direct
- Victimization vs. “natural” disasters
- Being harmed vs. moral injury
- Individual vs. collective, historical, intergenerational, system-induced, racism-based, insidious

See: Drs. Maria Yellow Horse Brave Heart, Lillian Comas-Díaz, Robert Carter, Resmaa Menakem

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Race-based traumatic stress (RBTS)

- “the **mental and emotional injury** caused by encounters with racial bias and ethnic discrimination, racism, and hate crimes... In the U.S., Black, Indigenous People of Color (BIPOC) are most vulnerable due to living under a system of white supremacy... unlike PTSD, RBTS is not considered a mental health disorder. RBTS is a mental injury that **can occur as the result of living within a racist system** or experiencing events of racism.”

(Mental Health America, 2023)  
Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Taraji P. Henson on racism-based stress and trauma



Recommended video; content notice, options

[https://www.youtube.com/watch?v=I\\_j1wMoSxjg](https://www.youtube.com/watch?v=I_j1wMoSxjg)

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.



## Historical trauma: Dr. Maria Yellow Horse Brave Heart (Hunkpapa/Oglala Lakota)



*“The cumulative emotional and psychological wounding over one’s lifetime and from generation to generation following loss of lives, land and vital aspects of culture”*

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Historical trauma: Dr. Maria Yellow Horse Brave Heart

### Historical Loss Scale

- 36%: daily thoughts about the loss of traditional language
- 34%: daily thoughts about the loss of culture
- 24%: angry regarding historical losses
- 49%: disturbing thoughts related to these losses
- 46%: daily thoughts about alcohol’s impact on community
- 22%: discomfort with White people
- 35%: distrustful of the intentions of the dominant White culture due to the historical losses the Native American people had suffered (Whitbeck et al., 2004)

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## weRnative:

### A Native perspective on historical and intergenerational trauma

- Recommended video:

<https://www.youtube.com/watch?v=1TxA-cZbeGA>



Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Debrief

- What stood out to you in each video?
- How might this understanding help us be more effective, trauma informed psychologists?

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

When was the last time you interacted with  
someone who has experienced trauma?

TODAY

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Trauma is very common!

- Trauma (per DSM-5):
  - 70% 1+ events
  - 30% 4+ events
- Adverse childhood experiences (ACEs):
  - 69% 1+ events
  - 21% 4+ events

(Benjet et al., 2016; Cronholm et al., 2015)



## Impact of trauma



What does trauma steal from us?

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.


## Trauma and the body



- At least 5 of the top 10 leading causes of death are linked to ACEs

Image licensed from Shutterstock to Evoke. (CDC, 2021)

## Trauma and the body

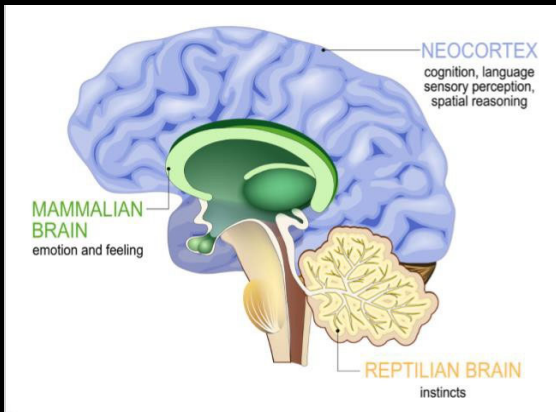


- Racism and discrimination are a public health issue!
- Linked to cardiovascular problems, diabetes, more

“Lose weight and then come back if it’s still an issue.”

Image licensed from Shutterstock to Evoke. (CDC, 2021)

## Trauma and the brain



NEOCORTEX  
cognition, language  
sensory perception,  
spatial reasoning

MAMMALIAN  
BRAIN  
emotion and feeling

REPTILIAN BRAIN  
instincts

“flipping our lid”  
↓ prefrontal cortex, ↑ amygdala

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Some possible trauma-related reactions

Overwhelming emotions	Strong reactions to 'triggers'	Indecisiveness	Shame
Avoidance (topics, appointments, places)	Uneven engagement in care	Poor sleep, fatigue, and nightmares	
Negative view of self, others, world		Fear of being abandoned	
Irritability		Strong startle response	Harmful use of substances/alcohol
Strong reactions to unsolicited advice			Difficulty concentrating or remembering
Risk-taking			Chronic pain
So-called "non-compliance" with care			Depression
Shortened or hopeless view of future			Anxiety, worry, panic
Isolating self			Difficulty trusting; not offering information
Emotionally numbed/shut down		Very low or very high boundaries	Chaotic relationships
Need for control		Suicidal thinking or behavior	Reactions to authority figures
Not expressing true opinion/feeling		Yelling or swearing	Being or looking unmotivated
Trouble "self-soothing"	Seeing self as failure or worthless	Avoiding intimacy/closeness	

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## window of tolerance



Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Trauma and the mind



- Trauma increases risk:
  - Mental health challenges and addictions (up to 14x)
- Epigenetics, “unmasking”

(Bonoldi et al., 2013; Fernandez et al., 2015; Mandelli et al., 2015; Porter et al., 2020)

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Trauma and the mind



- PTSD\*
  - Intrusive thoughts
  - Avoidance
  - Mood & cognition
  - Hyperarousal/reactivity
- Survival response; alarm system

(Bonoldi et al., 2013; Fernandez et al., 2015; Mandelli et al., 2015; Porter et al., 2020)

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Complex PTSD

- Not recognized in DSM-5, but added to ICD-11 (2018)
- Related to chronic, relational, developmental trauma
- Classic PTSD symptoms, plus:
  - affect dysregulation
  - negative self-concept
  - difficulties in relationships
- May respond to similar treatments (?)

(Cloitre, 2020; Karatzias, 2019)

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Relationships



- Trust & vulnerability
- Power & authority
- Boundaries
- Reactivity/'Triggers'
- Shame
- Avoidance

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.



## Activity



Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Reasons for hope



What keeps you hopeful?  
40 developmental assets  
Neuroplasticity  
Healing & recovery  
Cultural / community strength  
Posttraumatic growth

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.



Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

Stress-Related Growth

# Posttraumatic Growth

Adversarial Growth

Benefit-Finding

Altruism Born of Suffering

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke. (Tedeschi & Calhoun, 1996)

PTG: Positive change experienced as a result of the struggle with a major crisis or trauma



Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke. (Tedeschi & Calhoun, 1996)

## PTG

- Have you ever noticed PTG in people you know, or in yourself?
  - What does it look like?



Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke. (Tedeschi & Calhoun, 1996)

Relationships  
Personal strength  
Appreciation of life  
New possibilities  
Spirituality



(Tedeschi & Calhoun, 1996)  
Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Who experiences PTG?

- About half of people who survive adversity
- People who suffer
- People with certain traits/experiences/coping...

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

# What makes PTG more likely?

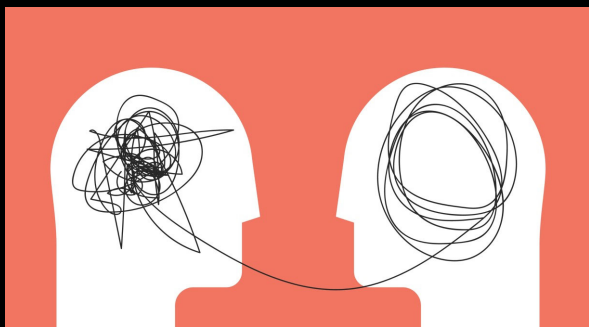
acceptance (.20)  
positive reappraisal (.38)  
religious coping (.38)  
optimism (.27)  
social support (.26)  
religiosity (.17)  
spirituality (.23)  
denial (.16)  
perceived threat (.14)

Plus:  
\*time passing  
\*sharing negative emotions  
\*event centrality  
\*coping flexibility  
\*personality factors

(Helgeson et al., 2010)  
(Prati & Pietrantonio, 2009)

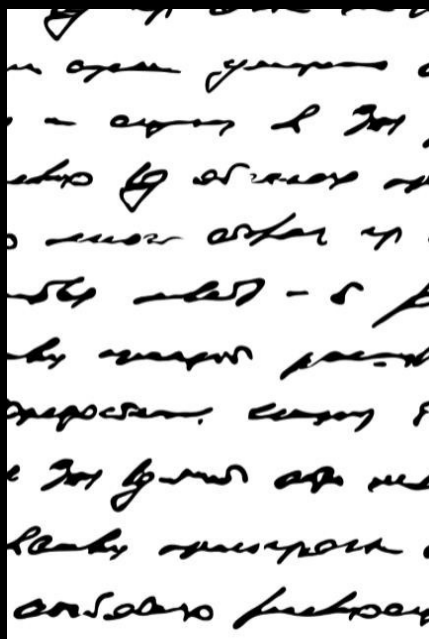
Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

# Therapy helps!



Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

# Writing helps!



Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Writing

### **Expressive Writing (see: Pennebaker, 1996)**

In your writing, I would like you to really let go and explore your very deepest emotions and thoughts about the most traumatic experience in your entire life. You might tie this trauma to other parts of your life: your childhood, your relationships with others, including parents, lovers, friends, relatives, or other people important to you. You might link your writing to your future and who you would like to become your future, or to who you have been, who you would like to be, or who you are now. Not everyone has had a single trauma, but all of us have had major conflicts or stressors, and you can write about these as well. All your writing is confidential. There will be no sharing of content. Do not worry about form or style, spelling, punctuation, sentence structure, or grammar.

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

# Writing

## **Prospective Writing (see: Roepke et al., 2017)**

After difficult experiences, many people feel a sense of loss: It feels that certain opportunities or 'doors' have closed in their life. Sometimes, people also find that new doors open and new opportunities present themselves. These new opportunities could be almost anything (new activities, goals, role models, friends, job-related changes, ideas, or ways to help people). The existence of new opportunities does not mean that losses are unimportant or less painful; important losses can exist alongside some potentially important new opportunities. We would like to know if you have noticed any new doors opening in your own life in the past six months. For the next 15 minutes, please write down whatever comes to mind about the new opportunities or 'new doors' that have opened, or might open. All of your writing will be completely confidential. Don't worry about spelling or grammar. The only rule is that once you begin writing, continue to do so until 15 minutes have passed.

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Grounding break?



Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Our roadmap



- What is trauma informed care?
- Understanding trauma
- **TIC skills and/or screening and treatment**
- Equity and culture
- Self-care and team-care
- Wrap-up

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## 6 Pillars of TIC:



Safety  
Trust  
Collaboration  
Choice/empowerment  
Peer support  
Attention to EDI

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.



## Breakout:



What are some things you say and do to build trust, safety, & empowerment in your work?

What aspects of your current workplace are trauma informed?

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

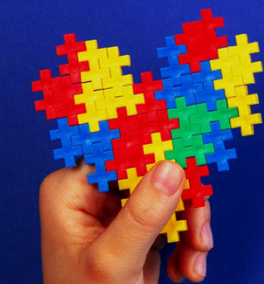
## Some things to do



- *offer as much choice as possible*
- *explain procedures*
- *be transparent*
- *educate the person about their rights*
- *keep our word whenever possible*
- *own it when we make mistakes, microaggressions...*
- *(usually) don't touch people*
- *respect privacy, boundaries*

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

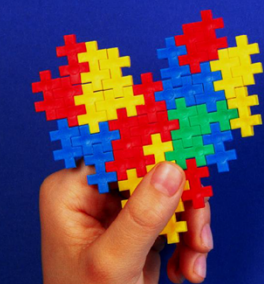
## Some ideas for the environment:



- *Comfortable chairs, various sizes*
- *Position of chairs*
- *Reading material: different types, languages, levels*
- *Culturally appropriate décor/art*
- *Inclusive bathrooms*
- *Respectful/thoughtful signage*
- *Tea, coffee, water*
- *Stress squeezers, etc.*
- *Vibe: Home or institution?*
- *What's playing on the TV?*
- *How does intake form ask about gender, pronouns, etc.?*

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Some things to say



- *"Welcome! Thanks for coming in today. I'm glad to be working with you."*
- *"I'm [x], what name do you go by?"*
- *"What questions do you have about this program?"*
- *"How would you like to use our time?"*
- *"I like to write notes during these meetings, because what you're saying is important and I want to remember it right. You're welcome to look at my notes if you want."*
- *"I'm sorry."*

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Some things to say



- *“What do you think would help?”*
- *“How can I support you with that?”*
- *“I’m so sorry to say we can’t do X, but would Y or Z be helpful?”*
- *“What concerns do you have?”*
- *“What are you most interested in knowing about X?”*
- *“Would it be OK if I...?”*
- *Why **NOT** “I’m a safe person/this is a safe place?”*

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Case #1

- You’re working with a 38-year-old OIF Veteran named JP (who identifies as a white man) and providing Prolonged Exposure therapy for his combat-related PTSD.
- In his initial assessment, JP indicated that the trauma that most troubles him now is a moral injury event (without sharing details of the event). When you do the first imaginal exposure session, he tells the story of a different narrative/event (a training accident). While it does indeed seem very distressing to him, you had the impression this was not actually his ‘index trauma.’
- How do you address this?

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Case #2

- You're working with an 18-year-old woman named Shira who identifies as Alaska Native (Athabascan) and white. She was mandated to attend mental health treatment as a condition of probation after she was charged with bringing cannabis to her high school campus.
- Shira sits down in your office, crosses her arms, and says, "Just to be clear, I don't have a drug problem, I don't need to be here, and I don't trust you."
- What do you say first? Next?

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Case #3

- You're a new intern and one of your responsibilities is facilitating a well-established, long-running group focused on recovery from trauma and substance use concerns.
- One woman on the group roster, Ella, has not attended either of the 2 sessions you've held so far. Your supervisor tells you that the policy is that if someone no-shows 3 times, they're removed from the group.
- You call Ella and she picks up the phone. How do you proceed? What do you say?

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Case #4

- You receive an email from someone named Krissy. She says: “Hi, I am trying to get approved for gender affirming surgery and I was told I need another letter from a doctoral level therapist. If this is something you can do, please let me know, thank you.”
- You set up a brief consultation call to discuss further.
- What are some things you would want to say, ask, or be mindful of in this call?

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## TIC communication skills



- Non-verbals
- Validation
- Open-ended questions
- Affirmations
- Reflections
- Sandwich method for advice (ask-offer-ask)

\*\*\*STAY TUNED FOR MOTIVATIONAL INTERVIEWING TRAINING SEPTEMBER 1!

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Grounding break?



Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Our roadmap



- What is trauma informed care?
- Understanding trauma
- TIC skills and/or screening and treatment
- **Equity and culture**
- Self-care, team-care
- Wrap-up

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Cultural responsiveness & equity



Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

What thoughts and feelings come up  
for you as we get ready to talk about  
diversity, equity, inclusion...  
race, racism, privilege, gender,  
oppression...

?

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

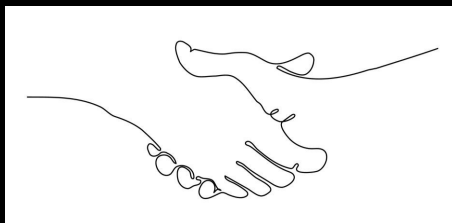
## Equity, diversity, inclusion (EDI)



- **Diversity:** the presence of differences
- **Inclusion:** diverse people of all identities actually feel and are welcomed, valued, respected
- **Equity:** ensuring that access, resources, and opportunities are provided for all to succeed and grow, especially for those who have been historically excluded

(University of Washington, Tuskegee University Cooperative Extension)  
Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Courageous conversations



- stay engaged
- expect to feel discomfort
- speak your truth
- expect and accept a lack of closure

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.



## Combining a TIC lens & an equity lens

- Attention to 'cultural, historical, and gender issues' is often included in core of TIC
- "You can't be trauma-informed without being anti-racist; you can't be anti-racist without being trauma-informed" (Kevonya Elzia)
  - What does this mean to you?

Psychological Health Center of Excellence (PHCoE), 2018  
Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Combining a trauma-informed lens & an equity lens

- Racism and other oppression creates trauma
  - Personal level and system level
- Crucial that we foster healing vs. retraumatization
  - Individual level and system level

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## The allegory of the garden by Dr. Camara Jones



Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## 4 pitfalls

adapted from Fong & Lease (1997)

- 1) **Unintentional racism** (by well-intentioned providers avoiding or bungling topic)
- 2) **Power dynamics** (may be exaggerated when the provider is part of the dominant group and the other person is not)
- 3) **Trust and vulnerability** (vulnerable people encouraged to trust providers, when they may have little reason to do so)
- 4) **Communication issues** (differing styles, misunderstandings)

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Breakout

- What can we do to be actively anti-racist, anti-oppressive, and culturally responsive?
  - Think about your different identities... how can you work in a good, trauma-informed way with someone with different identities (especially identities connected to marginalization or trauma)?

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## What can we do?

- Proactively bring up topics of racism, sexism, transphobia, ableism, bias, microaggressions
  - “How does racism/homophobia/transphobia/etc impact you and your stress level?”
  - “I’m wondering how you feel discussing this with me, a [cis/white/able-bodied/etc person]...?”
  - “Would you be interested in us exploring how I might support you with these issues?”

\*Thank you to Dr. Kelly Alfred for consultation on these topics.  
Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## What can we do?

- Support their autonomy in dealing with these issues
  - If they want to address it with the offending party (or not)
  - If they want to talk with you about it (or not)

\*Thank you to Dr. Kelly Alfred for consultation on these topics.

## What can we do?

- Believe people!
  - Validate
  - Don't gaslight
  - Don't try to cognitively restructure it away

\*Thank you to Dr. Kelly Alfred for consultation on these topics.

## What can we do?

- Apologize and make a repair
  - Acknowledge impact (not just intent)
  - Don't make it about you
  - Make a repair
  - Offer (but don't force) exploration

\*Thank you to Dr. Kelly Alfred for consultation on these topics.

## What can we do?

- Advocate at the institutional level
  - “Building resilience in the face of oppressive systems is not enough.”
  - Advocate for policy changes, programming, support groups/services, culturally responsive care

\*Thank you to Dr. Kelly Alfred for consultation on these topics.

## Our roadmap



- What is trauma informed care?
- Understanding trauma
- TIC skills
- **Self-care and team-care**
- Wrap-up

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Being trauma-informed with *ourselves*



We are companions on a journey toward healing  
...where both people may have wounds

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## The wounded healer: ancient myth, modern research



(Barr, 2006)

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Survivor mission

- Therapists who have experienced similar challenges as clients are (often) more deeply engaged in their work



(Eskreis-Winkler, Shulman, & Duckworth, 2014)

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## A double-sided coin



Drive, Empathy, Skills      Over-engagement  
Vicarious trauma

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Burnout, vicarious trauma, & compassion fatigue



- Burnout:
  - Emotional exhaustion
  - Depersonalization
  - Feeling of low accomplishment

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.



## Vicarious /Secondary Trauma



Being exposed to someone else's trauma

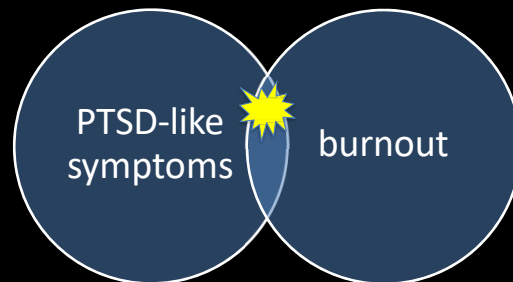
- Witnessing it happen
- Hearing about it
- Seeing the aftermath

May or may not lead to traumatization  
(secondary traumatic stress)

Stishov@EvokeTraining&ConsultingPLLC Images licensed from Shutterstock to Evoke.

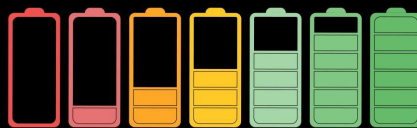
## Compassion fatigue

*“stress resulting from exposure to a traumatized individual. CF has been described as the convergence of secondary traumatic stress (STS) and cumulative burnout” (Cocker & Joss, 2016)*



Stishov@EvokeTraining&ConsultingPLLC Images licensed from Shutterstock to Evoke.

## Compassion fatigue



- Taking on the suffering of those we help
- Empathy battery running out
- Can involve PTSD-like symptoms
- Issues with safety, trust, intimacy, control, self-esteem, hope

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.  
Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

“You need to do more self-care!”



Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.  
Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Risk factors for burnout

- Ideals vs. work demands
- Workplace policies
- Workplace politics
- Lack of appreciation
- Lack of control
- Short-staffing
- Long hours &/or taking tasks home
- Documentation demands
- Bureaucracy
- Lack of support from team
- Lack of support from supervisor
- No opportunity for advancement
- Racism, inequity, bias
- Personal factors (e.g., perfectionism, self-criticism, isolation, sleep loss)



Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke. (Sindair, 2017; Sorenson, 2016)

## Risk factors for compassion fatigue

- Working closely with those impacted by trauma
- Stressful / unsupportive workplace
- Less experience/training
- Delivering bad news
- Personal history of trauma
- Isolation
- Lack of coping skills

(Sindair, 2017; Sorenson, 2016)

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.  
Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## What can be done?

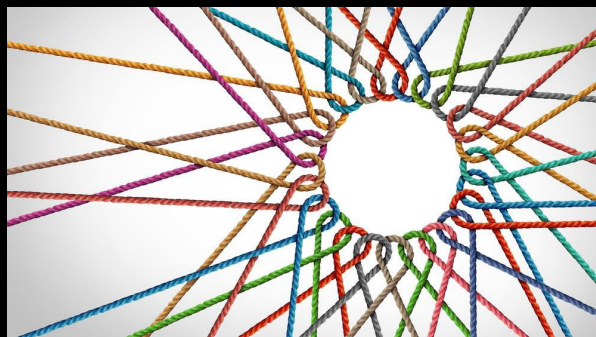


- System level
- Team level
- Personal level

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## 1. You deserve to work in a system that works.



Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## 2. You deserve team care (not just self care!)



Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

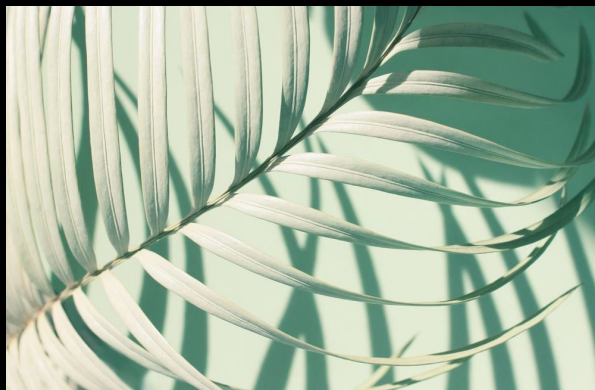
Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Team care

- You and your team know better than I do!
- Monitoring workloads
- Job crafting
- Autonomy/control
- Getting the training you want/need
- Supportive management
- Employee resource groups
- Self-care \*during\* work hours
- Making meetings manageable
- Frequent appreciation
- Re-inspiring regularly with positive stories
- Openly discussing burnout (e.g., 1-5 rating system)

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

3. You deserve self-care  
(or whatever we want to call it!)



Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

A close-up photograph of a hand holding a red heart. The hand is positioned on the left side of the frame, with the palm facing up. The heart is a vibrant red color and is held gently in the center of the palm. The background is a dark, solid color, which makes the hand and the heart stand out prominently.

Skill # 1:  
Self-compassion

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Self-judgment & suffering



Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

How can we tap into self-compassion?  
(different than self-indulgence or self-pity!)

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## RAIN tool

- **Recognize** what's going on ('I'm feeling anxious/sad/ashamed/down')
- **Allow** it to be there ('OK, looks like this is where I'm at right now')
- **Investigate** with kindness ('What am I thinking, or telling myself? How does my body feel?' 'What is this really about?')
- **Nurture** yourself with some compassion ('It makes sense to feel this. I'm not the only one going through this. These are hard times. I'm doing my best and that's gonna have to be enough.')



## Skill # 2: Savoring meaningful moments



Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.




A close-up photograph of a person's open palm holding a bright red, paper-cut heart. The background is a dark, teal-green color.

**Skill # 3:**  
Getting the most  
bang for your  
self-care buck

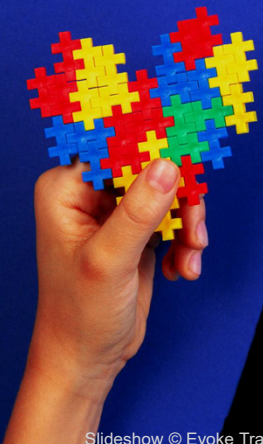
Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

**Activity**

A photograph of several white, cloud-like and speech bubble-like shapes hanging from thin gold strings against a blue background with soft, out-of-focus white clouds.

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Wrap Up



- One thing you learned?
- One skill/action you'll try out?
- One thing you want to learn more about?

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

## Resources & References

- *SAMHSA TIP 57 on TIC*: <https://store.samhsa.gov/product/TIP-57-Trauma-Informed-Care-in-Behavioral-Health-Services/SMA14-4816>
- *Helping* – Edgar Schein
- *Listening Well* – Bill Miller
- *Motivational Interviewing* – Miller & Rollnick
- *Connecting Paradigms: A Trauma-Informed & Neurobiological Framework* – Bennett
- *My Grandmother's Hands: Racialized Trauma and the Pathway to Mending Our Hearts and Bodies* – Resmaa Menakem
- Greater Good Science Center: <https://greatergood.berkeley.edu/>
- NMAAHC self-care toolkit: <https://nmaahc.si.edu/learn/talking-about-race/topics/self-care>
- Feel free to contact me ([ann.marie.roepke@gmail.com](mailto:ann.marie.roepke@gmail.com)), or check out my podcast (*Psychological Resilience in the Time of Coronavirus*)

Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.

# Thank you! Take care.

Thanks to: YOU lovely people, Kelly Allred, Ken Kraybill



Slideshow © Evoke Training & Consulting PLLC; Images licensed from Shutterstock to Evoke.