

Trauma-Informed Practice And Secondary Trauma



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Curriculum

- I. Overview of trauma
- II. Applying Trauma-Informed Practices
- III. Secondary Trauma & Re-traumatization
- IV. Trauma Responses
- V. Q & A



Why is this issue important for lawyers?



Are you familiar with trauma-informed practice?



Our Primary Focuses Today:

- Defining Complex Trauma
- Defining Trauma-Impacted Populations
- Exploring Trauma-Informed Practices
- Defining Secondary Trauma
- Defining Re-Traumatization



Navigating resources on Trauma can be an exhaustive process on its own.

We're here to help!



I. Overview of Trauma



What is Trauma? How Common is it?

- •Traumatic experiences lead to unbearable or intolerable emotions
 - Trauma: damage resulting from an experience; an injury

- Historically: Physical Trauma & Psychological Trauma
 - A fractured skull, a broken arm, gunshot wound
 - Child sexual abuse, verbal harassment, witnessing death



What is Trauma? How Common is it?

- Now: Trauma as biopsychosocial (BPS)
 - Bio the biology and physiology of trauma
 - Psycho psychological aspects of trauma
 - Social sociological aspects of trauma
 - All three interact constantly to create what we see ("Mind-body connection")
- Additionally: Trauma as BPS-Spiritual-Historical-Cultural
 - Spiritual spiritual aspects of navigating trauma
 - Historical historical contexts and their impact on trauma
 - Cultural cultural impacts on understanding of trauma



Types of Trauma: 3 & 2 Categories

- Acute
- Chronic
- Complex*Invasive
- "Big T"
- "Little T"

- Single-Incident
- Repeated & Prolonged
- Exposure to Varied/Multiple Traumatic Events; Usually

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Types of Trauma: 7 Categories

- Intergenerational
- Vicarious (Secondary)
- Life Transitions
- Historical
- Collective
- Acute
- Complex



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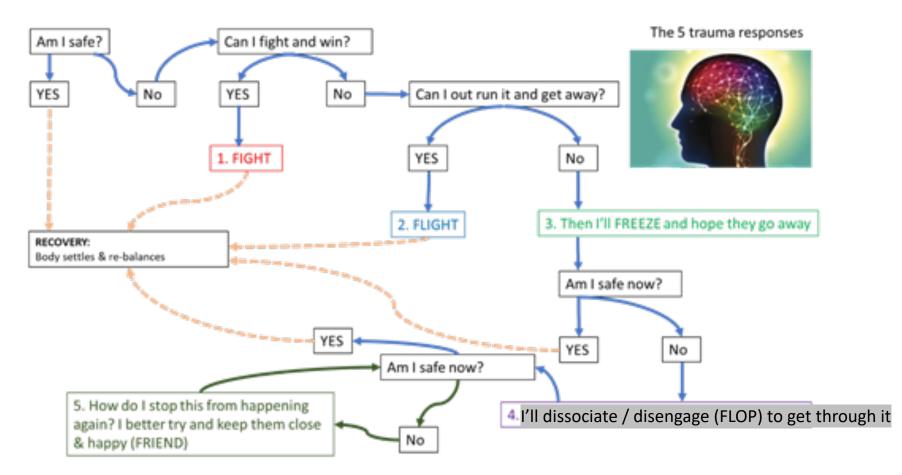
Types of Trauma: Additional Considerations

• PTSD / C-PTSD

- [technical] Psychiatric Disorders
- Triggers & Flashbacks

The famous "Fight, Flight, Freeze (Fawn, Flop)"...

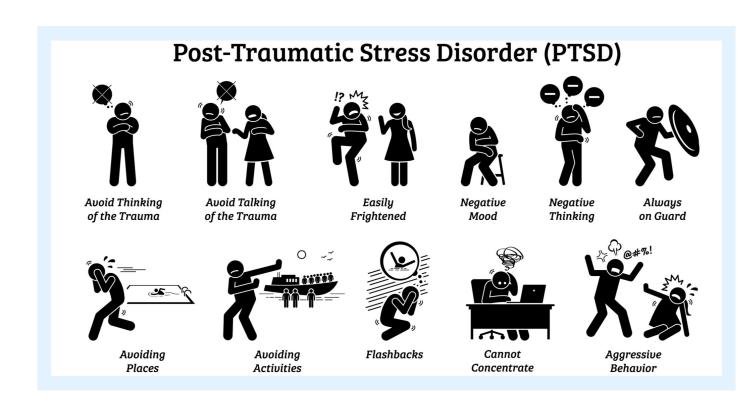






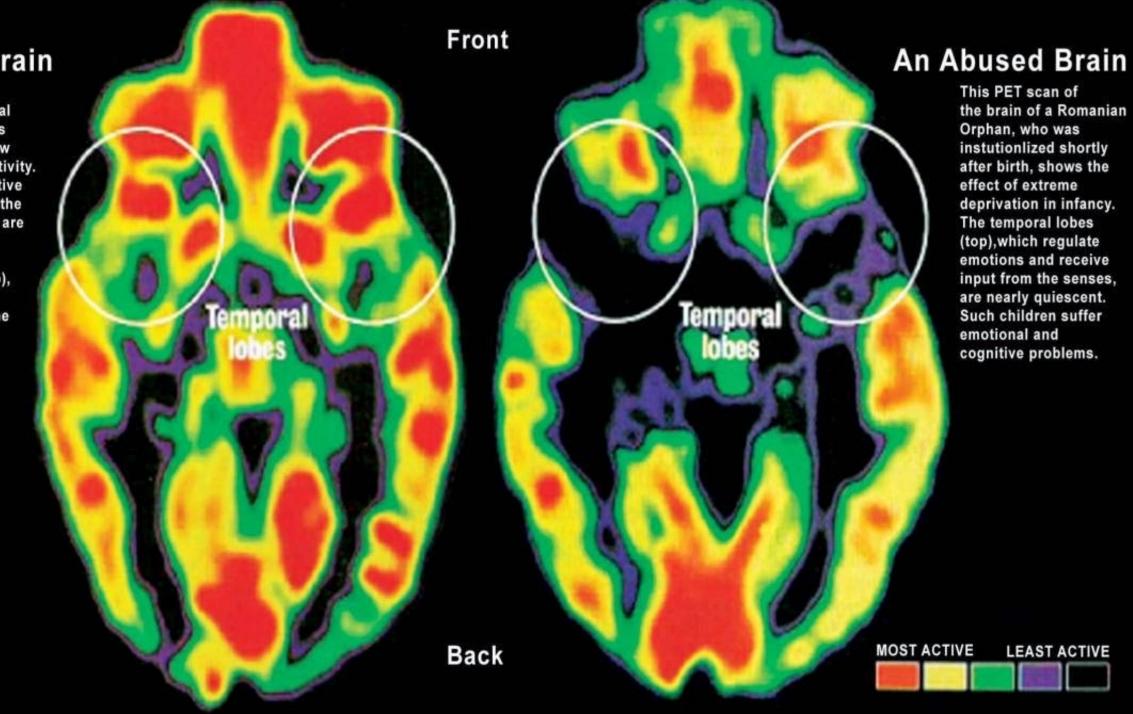
Complex Trauma

- Repeated exposure to abuse at the hands of a trusted adult
- Brain and body adapt as a survival mechanism
- These responses to chronic stress become maladaptive and adversely affect relationships, behavior, and mental health



Healthy Brain

This PET scan of the brain of a normal child shows regions of high (red) and low (blue and black) activity. At birth, only primitive structures such as the brain stem (center) are fully functional; in regions like the temporal lobes (top), early childhood experiences wire the circuits.





II. Applying Trauma-Informed Practices



Benefits to Using Trauma-Informed Practices

- Positive client interactions
 - Mitigates potential harm; can counteract current/ongoing harms
 - Increases client's trust & outlook
- Healthier environment for everyone involved
- Increases ease of legal process on those experiencing trauma
 - Ease of legal process translates to testimonies, etc.
 - Client reliability (regarding cross-examination and counterarguments)
- Ethics-wise: prioritizes client safety and helps prepare individuals for unfavorable verdicts



Defining Trauma-Impacted Populations

- Trauma is, unfortunately, common and complex!
- The simple answer: "you may never know until something happens"
- The nuanced answer...



Defining Trauma-Impacted Populations

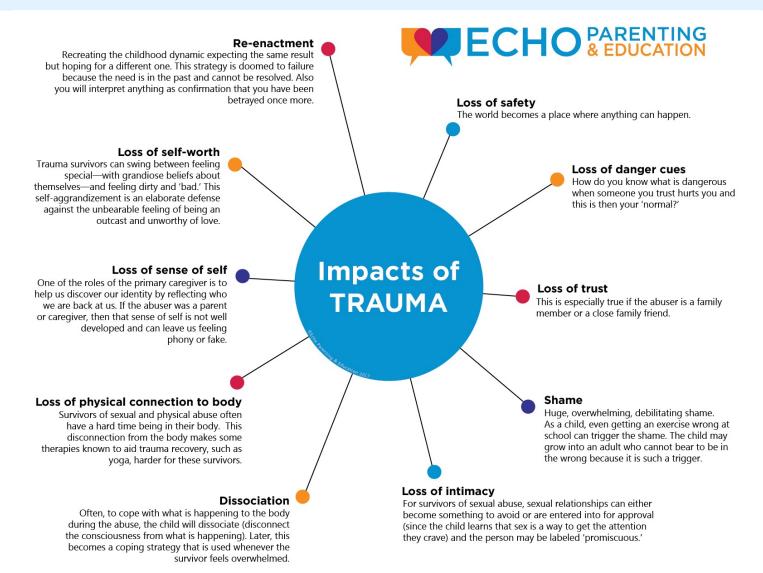
A traumatic experience can inform behavior, emotions, perspective, and more, whether it's been processed or not. It also may go completely undetected or be unnoticeable, even to a trained professional. Growth, time, and healthy processing also do not guarantee reduction of symptoms; progress should be thought of as non-linear.



As we've seen, any and every aspect of a person's life, behavior, and psyche may be impacted by trauma. While an individual's experiences will be unique to them, there are some overarching ideas to consider:

- Epigenetics Physiology, Memory, Psychology, etc.
- ACEs (let's rethink of them as potential indicators instead of prescriptive, absolute ones)
- Trauma can happen at any life stage; the same goes for processing it

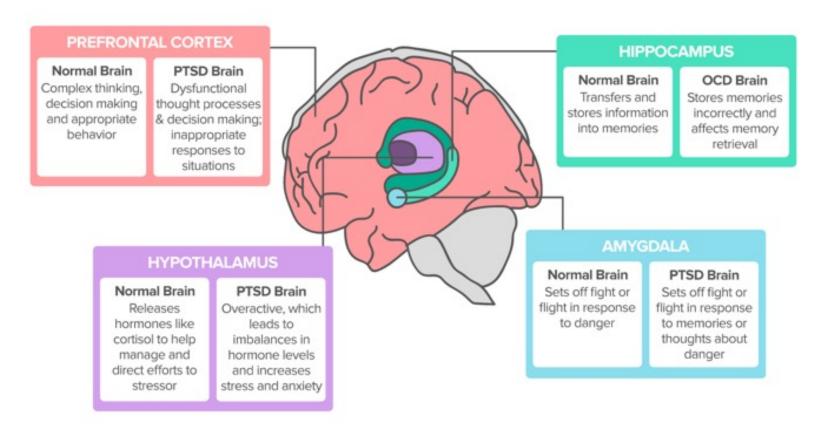




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NORMAL INFORMATION PROCESSING AND PTSD MALFUNCTIONS IN THE BRAIN





How Trauma Impacts Four Different Types of Memory

EXPLICIT MEMORY

EPISODIC MEMORY

EMOTIONAL MEMORY

IMPLICIT MEMORY

PROCEDURAL MEMORY

The memory of how to perform a

common task without actively thinking

You can ride a bicycle automatically, with-

out having to stop and recall how it's

The memory of general knowledge and facts.

SEMANTIC MEMORY

How Trauma Can Affect It

make a semantic memory.

Related Brain Area

Trauma can prevent information (like words, images, sounds, etc.) from differ-

ent parts of the brain from combining to

You remember what a bicycle is.

What It Is

The autobiographical memory of an event The memory of the emotions you felt or experience - including the who, what, and where.

You remember who was there and what street you were on when you fell off your bicycle in front of a crowd.

What It Is

during an experience.

When a wave of shame or anxiety grabs you the next time you see your bicycle after the big fall.

How Trauma Can Affect It

After trauma, a person may get triggered and experience painful emotions, often without context.

How Trauma Can Affect It

Trauma can change patterns of procedural memory. For example, a person might tense up and unconsciously alter their posture, which could lead to pain or even numbness.

Related Brain Area

How Trauma Can Affect It

The temporal lobe and inferior parietal cortex collect information from different brain areas to create semantic memory.



The hippocampus is responsible for creating and recalling episodic memory.

Trauma can shutdown episodic memory

and fragment the sequence of events.



Related Brain Area

The amygdala plays a key role in supporting memory for emotionally charged experiences.



Related Brain Area

The striatum is associated with producing procedural memory and creating new





So, What *Are* Trauma-Informed Practices for Law?

In many ways trauma-informed practices are simpler than we often think they are, at least on the surface. Refining one's ability to utilize them takes time and repetition.

- Language Choice & Design
- Reading Body Language & Tone
- Patience; Procedural Modifications may prove useful (are there other ways to reach the necessary outcome?)
- "Bedside Manner"; Hospitable, Adaptable Environments & Behaviors
- Transparency & Clear Communication of Procedure, Expectations, etc.
- Maintaining Clients' Agency
- Consulting & coordinating with affiliated professionals (e.g. psychologists, therapists, self-care routines, etc.)



Know who you're working with!





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Just as every client's case is unique, so too are their behaviors.

Even between individuals with similar experiences, expressions of trauma can – and *will* – look different!



Trauma-Informed Practice is critical, but it doesn't *promise* an impact.

Instead, it *increases* the likelihood of positive affect.



III. Secondary Trauma & Re-traumatization



Understanding Secondary Trauma

- Secondary trauma is caused by an individual hearing about the firsthand trauma experiences of someone else.
- Clients are not the only ones who can experience secondary trauma!
- Often mischaracterized as Burnout!

<u>Common Opportunities for Secondary Trauma</u>:

- Hearing experiences of others / clients
- Sharing spaces with others experiencing trauma
- Working with clients experiencing trauma
- Unfavorable outcomes of cases involving traumatic events
- Frequent, intensive practice of empathy



Understanding Re-Traumatization

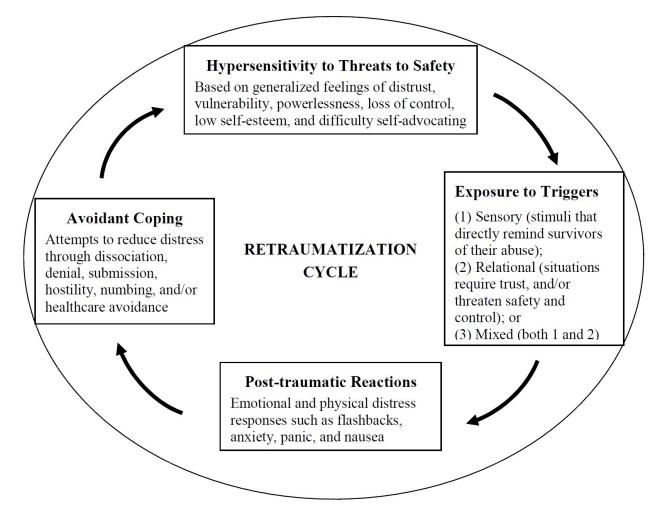
- Similar to, yet different from, Secondary Trauma.
- Any experience, interaction, or cognitive process which re-exposes an individual to, or revisits, their trauma. These have variable effects on the individual.
- Clients are not the only ones who can be re-traumatized!

Common moments for Re-Traumatization:

- Testimony
- Cross-Examination
- Sharing Space with Perpetrator
- Revisiting experiences
- CSA-specific: Delayed Disclosure



The Re-Traumatization Process



(Dallam, 2010).



Trauma is both objective and subjective, and, therefore, is regularly at risk of being invalidated or misunderstood.



Protective Factors Against Secondary Trauma:

- Distance and Time
- Self-Care Techniques
- Social Connection
- Movement! (Physical Activity)
- Professional Help & Supervision
- Work-Life Balance



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Recognizing mental health symptoms of secondary trauma



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HYPO AROUSAL:

WATCH FOR THESE EARLY CUES:



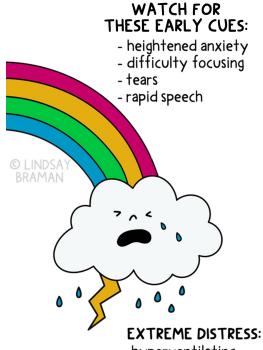
EXTREME DISTRESS:

- slowed breathing
- flat affect
- dissociation

The **Window of Tolerance** is an individual's unique, contextual capacity for how "much" they can take.

Just as there is a Window of Regulation for folks experiencing Primary Trauma, there's also one for Secondary Trauma!

HYPER AROUSAL:



- hyperventilating
- extreme emotion
- panic attack



IV. Trauma Responses



Examples of trauma response?



"Ever since being robbed, I find myself looking over my shoulder when walking alone."

"Ever since being robbed, I find myself looking over my shoulder when walking alone. My chest feels tight, and I find myself walking faster than I usually would."

"I don't trust the judge to believe me."

Examples of trauma response:

"I am afraid of seeing my former boss in the courtroom."

"My former boss will say it was consensual, but it wasn't. I didn't resist because I was afraid."

"I am worried that I won't be able to say what happened because my old boss will be there." "I no longer let others into my house."

"I do not see a future where I am romantically involved with anyone."

"I can't bring myself to drive since the accident."

"Since the accident, I clench the steering wheel and feel anxious whenever I drive."

"I don't remember much from my childhood."



Some Additional Post-Traumatic Reactions:

- Hypervigilance
- Difficulties with memory
- Dysregulation / strong emotions
- Defensive Behaviors
- Behavioral Pattern Modification

- Depression / Anxiety / etc.
- Codependency
- Dependency
- Stockholm Syndrome
- Expressions from Re-Traumatization Cycle



Q & A





Further Reading + Resources

- https://childusa.org/toolkits/
- https://childusa.org/library/legal/
- Forthcoming resources from CHILD USA
- Game Over Commission
- Our Handouts from Today
- The Deepest Well: Healing the Long-Term Effects of Childhood Trauma and Adversity, by Nadine Burke Harris
- It Didn't Start with You: How Inherited Family Trauma Shapes Who We Are and How to End the Cycle, by Mark Wolynn

For more information, visit www.childusa.org

Contact Us: info@childusa.org



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