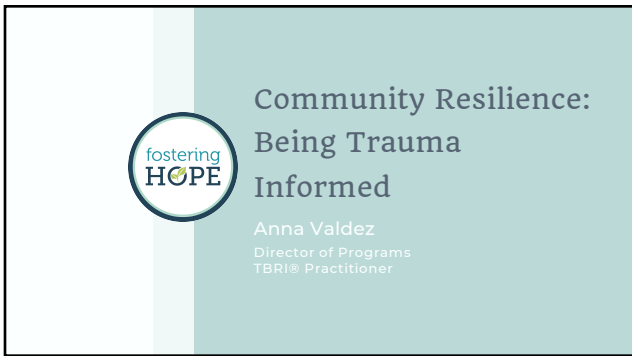


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There are children and families in our community that have been impacted by trauma.

Resilience is the ability to recover when faced with adversity. The brain is plastic and the body wants to heal.

4

To become aware and realize how trauma impacts child development and family health.

To gain tools to respond to those that have been affected by trauma and create safe spaces for them.

To resist re-traumatization in our community services and make way for healing.

Why do we need Trauma-Informed Care in our community?

5

CREATING COMMUNITY RESILIENCE

Looking at those in our community from a trauma informed lens

 Child
  Family
  Our Team

6

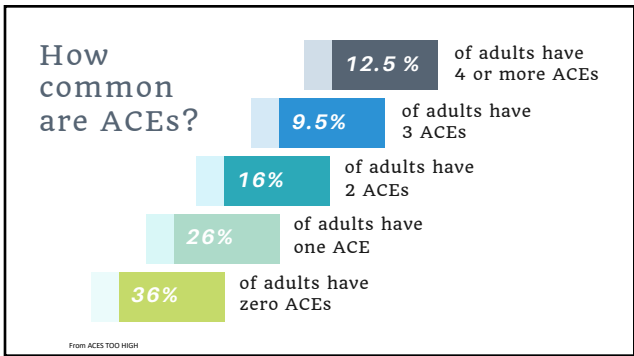
Adverse Childhood Experiences

64% of American adults have experienced at least 1 Adverse Childhood Experience

Survey of 10 childhood traumas
 -five personal
 -five related to family members
 -proven to have a lifelong impact.

From ACES TOO HIGH

7



8

6 Risk Factors For Development Of Emotional And Behavioral Issues

1. DIFFICULT PREGNANCY
2. DIFFICULT BIRTH
3. EARLY HOSPITALIZATION OR SEPARATION

4. ABUSE
5. NEGLECT
6. TRAUMA


From TBRI®

9

TRAUMA is your body's response to an overwhelming situation or event.

TRAUMA impacts one's brain, body, beliefs, biology, and behavior.

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What can I learn from this?

Am I loved?

Am I safe?

Trauma and the Brain

Pre-frontal Cortex and the Amygdala

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FEAR IS A BULLY

- *Shuts off cortex*
- *Causes them to use protective strategies*
- *Shuts off voice*
- *Positions fight, flight or freeze*
- *Makes it unable to discern the needs of others*

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01 Safety 02 Choice 03 Collaboration

The Goals of Trauma Informed Care

04 Trustworthiness 05 Empowerment

From University of Buffalo School of Social Work

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Ensuring that the physical and emotional safety of an individual is addressed is the first **important** step to providing **Trauma-Informed Care**.

From University of Buffalo School of Social Work

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Being Trauma Informed

- 1 Awareness of Trauma
- 2 Know Signs and Symptoms of Trauma
- 3 Integrate appropriate trauma responses into everyday practices
- 4 Avoid Re-traumatization (with FELT-SAFETY)

From University of Buffalo School of Social Work

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Creating Safe Spaces

Questions to Ask Ourselves

01	02	03	04	05
Does the child have their physical needs met?	Am I/my team making child and family feel safe?	Have I created a safe space for the child and family?	Have I built trust through connection?	What is the meaning behind this child an/or family's behavior?

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Does the child have their physical needs met?

Hydration every 2 hours Nutrition every 2 hours Exercise every 2 hours

From TBR®

17

Does the child feel safe?

Know Fear Indicators: physical symptoms

Body Positioning: towering over child, getting too close, ask before touch, soft eyes

Voice: soft voice, use least authority possible

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Have I created a safe space?

<p><i>Transitions</i></p> <p>let them know how it works and about changes when possible</p>	<p><i>Rituals</i></p> <p>use rhythm, routine and relationship</p>	<p><i>Sensory</i></p> <p>use tools for over-responsive, avoid sensory overload</p>
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From TBR®

19

Am I Connected?

<p><i>What do I bring to this?</i></p> <p>Do we come from a hard place? Are we stressed?</p>	<p><i>Connected Responses</i></p> <p>More than being friendly. Creating trust. Voice tone and cadence, and soft eye contact</p>
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20

Look for the meaning behind behaviors

<p><i>What could parents be feeling?</i></p> <p>Have there been any big changes in the family?</p>	<p><i>What is their story?</i></p> <p>Are the children from a hard place?</p>	<p><i>Correct behaviors at their root</i></p> <p>for true healing</p>
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WE MUST CHANGE OUR QUESTION FROM:

What's wrong with you?

to

What happened to you?

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How have your lenses changed?

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Thank you for joining us!

Anna Valdez
anna@fosteringhopeaustin.org

Find more of our trainings at:
fosteringhopeaustin.org

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