**Understanding and Treating Trauma** by Teresa Urfer

Trauma 101 was a very fitting title for the workshop I recently attended in Rockford. Because there are so many different types of trauma the 101 course was a great introduction.

The presenter, Raul Alamzar, RN, MA, SAMHSA’s (Substance Abuse And Mental Health Services Administration) Senior Consultant for the National Center For Trauma Informed Care first went over the four types of trauma. Historical trauma carries from generation to generation like the effects of slavery. Community trauma often affects its member’s feelings of safety. A good example of organizational trauma is one that hit close to home for those of us in the literacy non-profits because of the funding crisis. Layoffs and loss of services traumatized those organizations in the literacy community. Then there’s individual trauma, the type we think of most when the word trauma comes up.

When dealing with individuals, the Trauma Informed Approach rather than Trauma Focused Treatment takes a more non-judgmental, holistic approach. According to Alamzar, Trauma Informed Care asks “What happened to you?” instead of “What’s wrong with you?” This type of care, according to Alamzar, believes all behavior has meaning and symptoms are adaptations. Neglected children are 3 times as likely to develop a substance abuse problem according to National Child Abuse stats. Rather than seeing drug abuse as self-destructive those in Trauma Informed Care ask if it may be an attempt at self-healing, like relief of profound anguish dating back to childhood experiences. (Felitti, 1998) Looking at symptoms being adaptations, research has found (Hodas,, 2004) that the basic psychological motive or cause of violent behavior is the wish to ward off or eliminate the feelings of shame and humiliation-feelings that can be painful to the point of being intolerable. Another example, (Almazar) rather than seeing fighting as non-compliant or combative behavior, the adaptive way of looking at it may be that the person is trying to hold onto personal control or power. Passive behavior or someone who is not motivated may be adapting by giving in to those in power and repeating surrender in order not to get hurt.

Almazar used some of Dr. Bruce Perry’s findings on brain trauma in his presentation. It’s important first to remember the human brain is the organ responsible for everything we do. It allows us to love, laugh, walk, talk, create or hate. For each of us our brain’s functioning is a reflection of our experiences (SAMHSA). Trauma even affects the size of the brain and it can also affect IQ by as much as 10 points according to Alamzar. Perry has found that exposure to violence activates a set of threat responses in the child’s developing brain. The hippocampus in the brain plays a major role in memory and learning.
Repeated stress inhibits the growth in this area. The amygdala is part of the brain that is responsible for processing, interpreting, and integrating emotional functioning. It is also affected by trauma.

Knowing the vast effects of stress, in my mind, can help us see people differently.

For example:

- Children who experience child abuse and neglect are about 9 times more likely to become involved in criminal activity.
- 94% of children in the criminal justice system have experienced trauma.
- 97% of homeless women with severe mental illness have experienced physical or sexual abuse.
- Two-thirds of the people in treatment for drug abuse report being abused or neglected as children.

When treating people using TIC, providers must see that their clients feel empowered, given a voice and feel they have a choice in their treatment. Some key principals of SAMHSA’s Trauma Informed Approach are safety, trustworthiness, peer support, collaboration and mutuality. (SAMHSA)

When treating trauma victims providers must realize loss of control, power differential, and lack of predictability may traumatic reminders that trigger behavior related to early abuse. (SAMHSA)

When keeping all the above in mind clients are less likely to be re-traumatized.

The information provided by Raul Almazar, R.N. MA, has allowed me to understand some people in a whole new way. Anyone wanting more information about Trauma Informed Care can go online to Raul@almazarconsulting.com or Google SAMHSA’s National Center for Trauma Informed Care.

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