Trauma Informed Care: Preventive and Goal Oriented Services

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Abstract

Trauma-informed care (TIC) remains the most promising tool available and emerging "best practices." TIC organizational strategies could be detrimental to our civil and social services, and the influence could be unprecedented in understanding trauma on a micro and mezzo level. This paper aims to evaluate the history and present policy and procedures in trauma-informed care. The primary focus is to evaluate the long-term impact of trauma and repetitive stressful events on the body. Further discussions focus on resiliency, preventative measures, awareness, and the sociopolitical disparities that influence our systems and sustainability.

Keywords: Trauma Informed Care, resiliency, sociopolitical, systems and sustainability

Pre-Discussion

Critical events surrounding sociopolitical views and implications of a global pandemic raise

challenging questions about what needs to occur moving forward in trauma care. Crisis

Intervention and Trauma-Informed Care (TIC) services have become a fundamental focus raising

the question of policy and procedural changes in working with vulnerable populations and

individuals impacted by adversities. *Crisis Intervention* is a short-term framework limiting the

potential for long-term physiological trauma (2018). TIC incorporates "emerging best practice

evolved from studying the long-term negative impact of trauma and evidence-based practices

(*Tip 57 trauma-informed care in Behavioral Health Services* 2014).

There are several challenges on the frontlines and another challenge on the horizon, including

what everyday people have witnessed with the recent civil, social, and political unrest during a

global pandemic. As of 2021, "6 out of every 100 people" 6% out of population will develop

PTSD during some lives; approximately 15 million adults, including 8% women and 4% male of

100 population ratio, will develop PTSD (2021). There is need for evidence-based treatments

and fundamental preventive measures limiting exposure to re-victimization to individuals

seeking services and preventive measures when exposed to secondary traumatic experiences and

burnout and compassion fatigue.

With unprecedented potential traumatic events facing everyday people throughout interpersonal

and households to professionals and communities, one question remains, how do we recover and

unravel in our minds so many stressful and potentially traumatic events? A closer analysis must

be on what type of traumatic events and adversities create the exponentially growing need for

TIC services. Understanding awareness, what preventive resources are currently available, and

critical knowledge of how trauma care professionals can create physiological resiliency and prevent burnout and compassion fatigue.

Annotated Bibliography

Gabrielle, S. (n.d.). *The NCSL blog*. NCSL Welcomes Third Cohort of Maternal and Child Health Fellows > National Conference of State Legislatures. Retrieved May 1, 2022, from https://www.ncsl.org/blog/2022/01/11/ncsl-welcomes-third-cohort-of-maternal-and-child-health-fellows.aspx

Gabrielle expands on the understanding of Adverse Childhood Experiences (ACEs) conducted between 1995-1996. The intergenerational pattern in research indicates that children scoring high on ACEs are more likely to commit violence and repeat abuse or neglect on their children. The ACE study expanded the correlations between diverse populations and risk factors impacting treatment services and prevention. The article addresses ongoing research regarding the consequence of Ace's and expansions over research over three decades. ACE's data collected over the years address critical factors of re-victimization and prevention, recognizing violence, economic hardship, familial death, hardship, and direct link to adverse treatment due to race and ethnicity. Health and psychological impact due to prolonged exposure or excessive activation to the sympathetic nervous system, threat-response impacts Ace's study including top 5 of 10 leading causes of death and adverse physical health conditions including heart, respiratory, cancer, and suicide rates. It is essential to emphasize critical elements of development years and implications of chronic stress on the body and the expressions of individuals' DNA that interferes with neural systems and immune systems, and endocrine systems compromised by early development inadequate external support systems. As

researchers gain a deeper understanding of ACE, this article emphasizes the Center for disease control findings and suggests Ace's prevention measures are critical aspects to conditions and risk factors that make ACEs are leading causes of death in America. The Ace's study is a fundamental part of trauma informed care that further influences policies and procedures.

Greene. (2018). Cultivating Professional Resilience in Direct Practice: A Guide for Human

Service Professionals. Journal of Teaching in Social Work, 38(4), 450–451.

https://doi.org/10.1080/08841233.2018.1489658

Newell introduces the importance of crucial competency-based self-care practices associated with burnout and compassion fatigue associated with resiliency and self-care practices. In recent years, closer evaluations regarding efficacy and sustainability with social service professionals working in trauma-related care. Council on Social Work Education (CSWE) and the Accreditation Standards (EPAS) have yet to establish aspects to field education and appropriated textbook curriculum on disciplines about self-care and professional resilience factors. Newell introduces pragmatic and theoretical approaches as critical elements in working with child welfare and trauma-related services and brings organizational structure into a broader framework.

Newell emphasizes social service professionals' holistic practices and personal self-care and resiliency approaches to professionals working directly in trauma-related services. Emotional challenges in trauma-related care raise higher risks for professional burnout and compassion fatigue. Newell dives deeper into organizational constructs using an ecological-systems perspective to best practices of professional behaviors that involve

personal daily resilience skills that include whole person; physical, interpersonal, Familia. Newell brings realistic social aspects into self-care concepts, including impact reactional activities, family and friends, overall physical health, spirituality, and mindfulness. Understanding competency-based professional practices in trauma-informed care concerning one's own whole-self self-care practices show promise in maintaining resiliency and sustaining the passion and purpose of social worker professionals working in trauma-related services. This article emphasized key concerns in regard to professionals exposed to burnout and compassion fatigue.

Fletcher, J. M., & Schurer, S. (2017, April). *Origins of adulthood personality: The role of adverse childhood experiences*. The B.E. journal of economic analysis & policy. Retrieved May 1, 2022, from https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6063370/

> Origins of adult personality; The role of adverse childhood experiences was a study conducted longitude data representing a group of young Us Americans focusing on environmental and genetic factors across siblings. An analysis is exploring the Big five personalities of a lifespan. New evidence has emerged in recent years. However, lack of empirical evidence of the disadvantages of early life achievement and skills" The study evaluated parental maltreatment exposure and the indirect impact on health. The study revealed a direct correlation between personalities exhibiting consciousness experiences, neuroticism, and openness to new experiences. The study revealed that neglect and sexual abuse are linked to neuroticism, while decreased contentiousness links to neglect. The study suggests that the mental health and physical health of adolescents and the impact of

maltreatment impact adult personalities. One key aspect of this study was the significance of human capital of individuals' long-term abilities to become economically productive and overall healthy. The adult labor market may considerably influence the consequences of awareness in adults and conscientiousness. Additionally, it is essential to note that personality traits do not necessarily influence genetic predispositions. Studies have shown genetic components; moreover, 50% of the variation directly connects to personal experiences. Understanding underlying issues in trauma and personality traits shows promise in emerging "best practices."

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one's whole-self self-care practices show promise in maintaining resiliency and

sustaining the passion and purpose of social worker professionals working in

trauma-related services. Emerging research has shown that resiliency and focus

on whole self is a critical aspect in sustainability.

Felitti V. J. (2019). Origins of the ACE Study. *American journal of preventive*

medicine, *56*(6), 787–789. https://doi.org/10.1016/j.amepre.2019.02.011

The Origin of the Ace Study outlines the Adverse Childhood Experiences (ACE)

study reviews a twenty-year review highlighting broader developments in the

ACE's groundbreaking findings. The ACE study by far challenges any other

understanding past and present on the impact of trauma throughout one's lifespan.

The ACE study pertains to potentially traumatic experiences prior to 18 that

interfere with health and opportunity. The ACE study conducted by the Center for

Disease Control and Prevention (CDC) and Kaiser Permanente from 1995-1997

included over 17,000 adults with childhood experience ranging from "emotional,

physical and sexual abuse, incarceration, violence and mental illness." In

conclusion of the study, researchers linked ACE exposure to higher risks of

detrimental consequences, including: "negative health and behavioral outcomes

later in life." These negative impacts included "heart disease, diabetes, and

premature death." Ace's study research confirms that children exposed to ACE

were impacted by "physical abuse and neglect to their children, and to be

revictimized in the future." The ACE study has gained attention on the impact

associated and revenant to costs associated with "state healthcare, education, child

welfare, and correctional systems." Ace's study has revealed critical assessments,

evaluations, and findings associated with adversities through early life and the

detrimental impact it can have throughout one's lifespan.

Collin-Vézina D, Brend D, Beeman I. When it counts the most: Trauma-informed care and the

COVID-19 global pandemic. Developmental Child Welfare. 2020;2(3):172-179.

doi:10.1177/2516103220942530

Collin-Vezina et al. address practices and policies in the Trauma-Informed Care

(TIC) practices and preventive measures are fundamentals in family services

moving forward in the covid-19 global pandemic. Article Raises Concerns of

those impacted by lack of services and support to children who have been subject

to maltreatment and family violence. According to the Substance Abuse and

Mental Health Service Administration, the article evaluates six fundamentals of

trauma-informed care. TIC services include safety, peer support, collaboration,

mutuality, empowerment, choice- cultural, historical, and gender issues. TIC movements created a global "outcry" induced by sociopolitical environments creating awareness to expand policies within systematic structures and mental health care services. Family violence has become a critical focus point relevant to the current social crisis creating a more significant risk for dysfunction and negative coping skills. Individuals' sense of belonging and supportive external connections impacted raise concerns due to social service accessibility and covid-restrictions. Collin-Vezina et al. present findings from the UNICEF and include ineffective and unreliable services to populations most vulnerable to the barriers mentioned above. Emphasis on trauma-informed care practices and policies include focusing on organizational structures in children and youth that maintain focus on sensitivity and cultural change in the context of transparency and trustworthiness. Children and youth who can understand and process emotions and make sense of those traumatic experiences benefit from trauma-informed evidence-based practice.

Post-Discussion

Trauma-Informed Care (TIC) has gained momentum in research and practices over the past decade. However, with concerns of sustainability and resiliency with the current sociopolitical environment and recovering from the impact of a global pandemic, best practices remain a critical concern. Understanding the origin of the Adverse Childhood Experience (Ace) study is critical in understanding its impact on individuals, families, communities, and society (2019). Understanding social disparities, including ethnic and cultural barriers, are vital to understanding resilience and prevention (2019).

The Ace study provides valuable insight into how trauma impacts the whole body over one's lifespan. This study provides grave insight into the need for trauma-informed care awareness. The Ace's conducted in 1995-1997 has expanded over twenty years and bringing awareness to critical statistical data suggesting physical and economic barriers influenced childhood adversities is an underlining core issue in raising awareness of preventive care (2021).

Self-care practices have been deemed essential for those impacted by trauma, and in recent years concerns of professional burnout and compassion fatigue in social services workers share similar concerns. Exposure to trauma creates emotional challenges that restrict passion and purpose in the field (2018). A broader and good look into an organizational structure in individuals on a professional and personal level utilizes fundamental resilience, and self-care concepts are crucial in TIC services. Holistic approaches focusing on resiliency measures included social and interpersonal support, physical health, spirituality, mindfulness. Professionals working in trauma services require a more profound engaging response to trauma in the context of their own lives. It is crucial to utilize these skills to move through these experiences rather than a barrier to avoid emotional processing through trauma exposure.

A primary concern is the cascading impact of long-term repetitive events and the potential for traumatic exposure of extended periods. The impact of a global pandemic and continuous barriers that prevent best practice proposes a greater risk of organizational and structural breakdown. The concern for reliable services and lack of services during pandemics create frustration and an ongoing potential threat to vulnerable populations (2020). For crisis interventions and TIC to function correctly, there must be a higher level of self-compassion and self-competency in viewing trauma.

Today it is critical that social services providers have education and training in trauma care services. Policies and procedures are critical to implementing emerging best practices and include critical aspects of resilience and self-care for individuals receiving care and professionals combating burnout and compassion fatigue. Understanding the origin of trauma in the United States and focusing on awareness and prevention is crucial in advocating and raising awareness. Developing strategies to help those struggling with crises or traumatic events has been essential in social service fieldwork and repetitive secondary exposure. Trauma impacts us all, and the key in understanding trauma is just as complicated as finding a solution. Moving through trauma is essential to building resilience, and avoidance exacerbates the resolution process. If we cannot talk about trauma, we cannot discover true resilience.

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