Supporting Women Impacted by Substance Use, Interpersonal Violence & Child Welfare Involvement

Trauma-Informed Care Simplified

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**Today...**

<table>
<thead>
<tr>
<th>Explain</th>
<th>Explain the challenges facing women who are impacted by the intersection of substance use, interpersonal violence, and child welfare involvement.</th>
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</thead>
<tbody>
<tr>
<td>Recognize</td>
<td>Recognize trauma responses experienced by women who are impacted by the intersection of substance use, interpersonal violence, and child welfare involvement.</td>
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<tr>
<td>Respond</td>
<td>Respond with neurobiologically-informed, trauma-informed techniques to support women in management and reduction of trauma symptoms.</td>
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</tbody>
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Managing Session Triggers

Awareness of yourself and your body.
- Pay attention to your heart rate.
- Pay attention to the tension in your muscles and physical discomfort.
- Pay attention to your thought content.

Use of your breath
- Longer exhales to decrease heart rate.
- Longer inhales to increase heart rate.
- Mindful breathing
Women and Trauma

Intersection of Substance Use, Interpersonal Violence, and Child Welfare Involvement
Women, Substance Use and Interpersonal Violence

- In 2019, in Florida, 41-50% of parents struggled with alcohol or other drug abuse and/or child removal by the state.
- Up to 85% of women with a history of substance use have experienced a form of interpersonal violence.
- 23-82% of women have experienced childhood sexual abuse.
- 10-82% of women reported experience of multiple traumas, with up to 42% experiencing 5 or more.
- 18-30% of women have experienced rape.
- 30-75% of women report experienced interpersonal violence.
Women, Substance Use, and Child Welfare

91-100% of mothers involved in the child welfare system have experienced at least one traumatic event.

Women of African Descent experiences of trauma is exacerbated by historical trauma and racist incidents.

Most of the women participating in the study were involved with the child welfare system because they gave birth to an infant exposed to substances.
Two Levels of Challenges

Systemic
- Lack of funding
- Lack of preparation for complex issues accompanying trauma
  Too much required for trauma-informed approach with allotted programmatic time

Professional
- Belief that trauma is a secondary treatment priority
- Belief that individuals they treat get clean through same process they received
Exacerbated Challenges

- Contributes to challenges with adequate compensation and staff retention
- Contributes to punitive, confrontational, and inflexible approaches
- Contributes to lack of professional development honing skills of professionals
Child Welfare Involvement and Substance Use

• Explored barriers with engagement and completion of treatment of women involved in the child welfare system and who used substances

• 2 Internal and 2 external forms of expression found

• 35% experienced all 4 forms of the expressions

• 57% experienced 3 of the expressions

• 8% experienced 2 expressions

• Loss of custody more likely for those with external expressions and/or all 4 expressions
4 Areas of Expressed Challenges

Internal
- 92% experienced negative self views
- 73% experienced guilt and shame

External
- 88% experienced anger directed towards provider
- 69% experienced lack of trust in providers
Understanding Trauma

Recognizing and Responding to Trauma Symptoms
Loss of Safety

Safety Types

Physical
The integrity of the physical body. Is your body safe? Is there shelter, food, and clothing?

Social
The integrity of the self in the social context. Can you express yourself freely?

Moral
The integrity of values and basic needs. Are your values aligned with your interactions and actions?

Psychological/Mental
The integrity of thoughts and opinions about yourself and/or situation. Are your thoughts and opinions helpful, encouraging, and compassionate?
Reaction to Stress and Trauma

Stress Response

Starting in the brain, stress sends information to the section of our brain responsible for emotional processing. Then, a distress signal is sent to our hypothalamus (our control center), which sends the information to the rest of our body through the Automatic Nervous System (ANS). The ANS controls involuntary bodily functions and has two divisions:

- **Sympathetic**
  - **Fight**

- **Parasympathetic**
  - **Flight**
  - **Freeze/Fawn**
  - **Regulation**
    - Dorsal Vagal Nerve
    - Ventral Vagal Nerve
Trauma Types

1) **Acute trauma** results from a single incident with a start and end date.

2) **Chronic trauma** is repeated and prolonged, such as domestic violence or abuse.

3) **Complex trauma** is exposure to varied and multiple traumatic events, often of an invasive, interpersonal nature.

4) **Developmental Trauma** are the experiences of trauma prior to the age of six, often interpersonal in nature.

5) **Intergenerational Trauma** is the transmission of post-traumatic stress symptoms and adaptations to offspring.

6) **Historical Trauma** is the post-colonial distress following colonization of indigenous people by European settlers and the subsequent inequities and disparities.
Chronic Stress

Source: Harvard Center on the Developing Child
7 Domains of Impact

- Biology
- Cognition
- Attachment
- Affect or emotional regulation
- Dissociation
- Behavioral Control
- Self-Concept
Responding To Trauma

Trauma-Informed Care Engagement and Response Strategies
Need for an Integrated Approach

• **Guides understanding of presentation as trauma responses.**
• **Trauma experienced by women impacts their mental health, interpersonal relationships, and parenting.**
• **Use of trauma-informed care in the field of substance abuse is supported by 2 decades of literature.**
• **Integrated programs are less likely in the Midwestern, South, and Western regions of the USA**
• **Research illustrates the need and effectiveness of trauma-informed care and trauma-focused strategies to treatment of substance use.**
Trauma-Informed Care in Practice

- Recognition that stress responses may impair ability to engage the women and have “success” with interventions/programs.
- Helps to guide implementation of adaptations and selection of interventions.
- Helps to guide understanding of women’s presentation and behavior.
- Provides predictability and choices offered to enhance sense of safety and control for the women.
- Assists professionals in managing vicarious trauma and burnout.
SAMHSA’s Trauma-Informed Integrated Approach

Components
• Realization of widespread impact and pathways for recovery
• Recognizes signs of trauma of all people involved in the system
• Responds with integration of knowledge of trauma
• Resisting retraumatization is an active goal

6 Core Principles
- Safety
- Trustworthiness and transparency
- Peer support
- Collaboration and mutuality
- Empowerment, voice, and choice
- Cultural, historical and gender issues
5 Simple Steps

• Notice your stress responses and current distress levels.
• Assess for safety threats and stress responses of the woman.
• Choose an intervention.
• Implement the intervention.
• Repeat steps, as necessary.
Engagement and Response

• Grounding
• Use of relationship
  • Active Listening
  • Validation
• Affirmation
• I-Statements
• Open-ended questions
• Explain the process
• Ask permission
• Offer options
• Assess trauma history and/or triggers
Case Study

You are working with a mother who has become involved with your program because of a referral from her CPS case worker. She is requested to complete substance use treatment as part of her service plan. When she arrives to your office, she is often irritated and defensive when you inquire about her use over the past week. At times, she is verbally aggressive and uses profanity. She has not stopped using since entering the program. She has reported days where she has used less than normal. She has reported a trauma history of interpersonal violence, childhood sexual abuse, and physical abuse.

• What present and/or potential stress responses can you predict for yourself and the woman?
• What are the potential safety threats for yourself and the woman?
• How can you use the techniques to engage the woman?
• How will knowing her trauma history impact your understanding of the behavior?
References


