

Trauma-Informed Practice for Community-Based Practitioners

Building Connections: Supporting Community-Based Programs to Address Interpersonal Violence and Child Maltreatment

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Building Connections: Supporting Community-Based Programs to Address Interpersonal Violence and Child Maltreatment

- An early intervention program that promotes the development and mental health of infants and young children who are at-risk due to maternal substance use by promoting the health of pregnant and parenting women, and supporting the mother-child relationship
- FASD prevention and early intervention program, with FASD assessment and diagnostic services
- Funded by PHAC's CAPC and CPNP Program, and Ontario's Ministry of Children and Youth Services



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BTC Partner Agencies

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- Mothercraft
- Children's Aid Society of Toronto
- Catholic Children's Aid Society
- Toronto Public Health
- St. Michael's Hospital
- St. Joseph's Health Centre
- Toronto Western Hospital – Woman's Own Detox
- Ministry of Community Safety and Correctional Services
- Association of Ontario Midwives



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BTC PROGRAMS AND SERVICES

Addictions

- Relapse Prevention Group
 - Recovery Group
 - Life Skills Group
- Individual Counselling
- *Connections* Group

Mental Health Counselling

Health/Medical Services

- FASD Assessment/Diagnostic Clinic
- Pre-Postnatal Counselling

Basic Needs Support

- Food • Clothing • Transportation



Developmental Clinic

- Screening and Assessment
- Developmental and Interactional Guidance
- Parent-Child Psychotherapy
- Home Visiting
- Early Intervention

Child Care

Pregnancy Outreach Program

Probation and Parole Services

Parenting

- New Mom's Support Group
- Hanen 'You Make the Difference'
- Nobody's Perfect Parenting Program
- "Learning Through Play" Group
- Cooking Healthy Together
- Access Visits
- Parent-Child "Mother Goose" Program



Admission Criteria

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Women/Mothers

- Who are pregnant and/or parenting children 6 years;
- Who are experiencing problems of substance use and recovery;
- Who desire support around their substance use or recovery.



Infants/Young Children

- Who have been exposed to alcohol and/or other substances during the prenatal period;
- Who have been exposed to parental alcohol/substance use in postnatal period



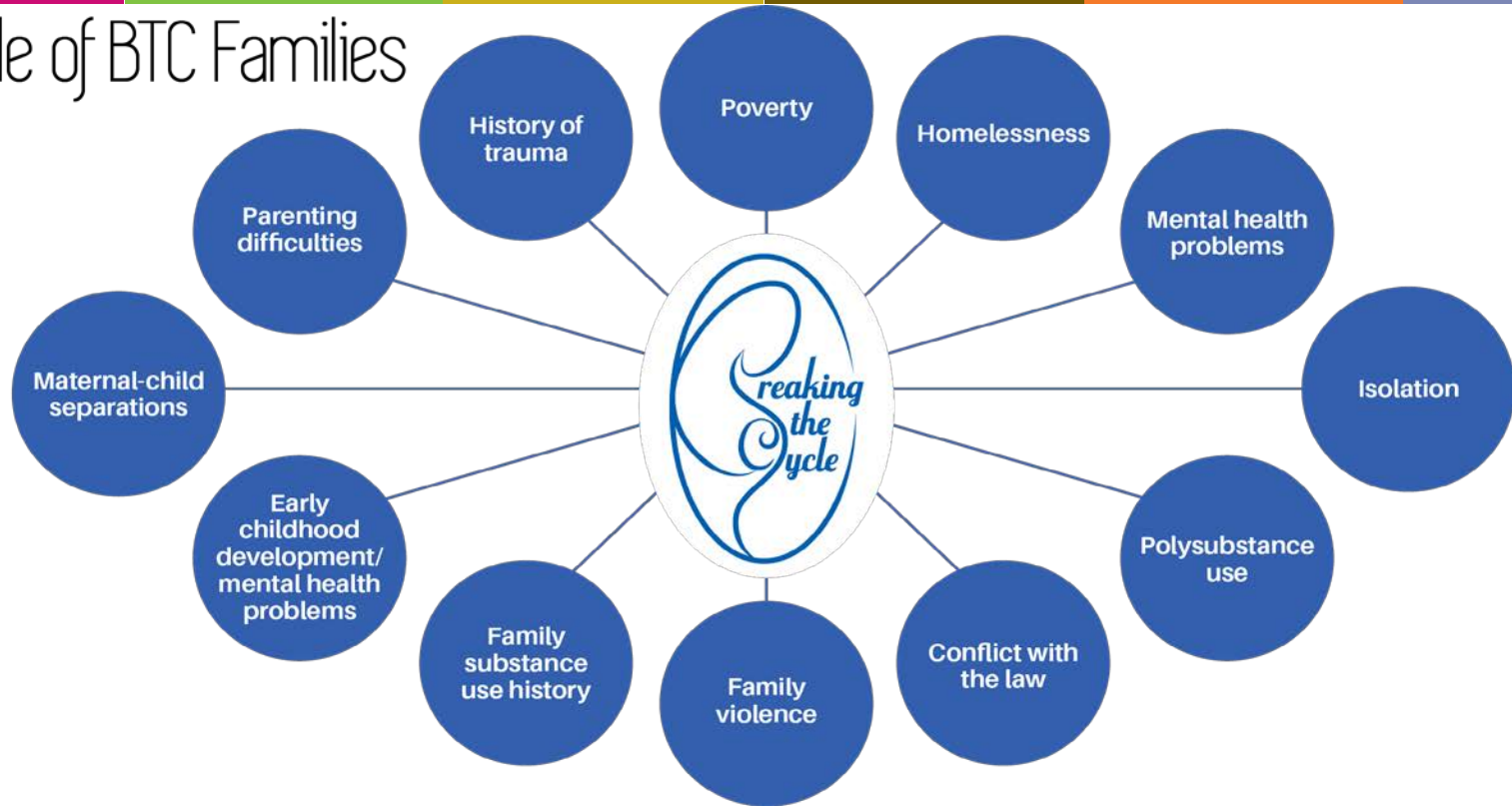
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Profile of BTC Families

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Profile of BTC Families



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Supporting Community-Based Programs to Address Interpersonal Violence and Child Maltreatment



CRÉER DES LIENS

Soutenir les programmes communautaires pour lutter contre la violence interpersonnelle et la maltraitance des enfants



Definition of Trauma

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Trauma is when we have encountered an out of control, frightening experience that has disconnected us from all sense of resourcefulness or safety or coping or love.

Burch 2011

Definition of Trauma

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- A traumatic event can involve a single experience, or enduring repeated events, that completely overwhelm the individual's ability to cope or integrate the ideas and emotions involved in that experience.
- Regardless of its source, trauma contains three common elements:
 - It was unexpected.
 - The person was unprepared.
 - There was nothing the person could do to stop it from happening.

Types of Trauma

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- Interpersonal trauma
 - Child maltreatment
 - Intimate partner violence
- War-related trauma
- Historical trauma
- Systemic trauma

Trauma is transmitted across generations through the parenting relationship

(Fraiberg, 1980; Benoit & Parker, 1994)



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Toxic Stress: Infancy and the Early Years

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- Strong, frequent or prolonged activation of the stress management system
- Events are chronic, uncontrollable, and unpredictable
- Events are experienced without access to support from caring adults
- Has an adverse effect on brain development
- Has an adverse effect on mental health – anxiety, depression, helplessness and dissociation
- Has an adverse effect on regulation – sleeping, eating, emotion modulation



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Disorganized attachment

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- Has been linked to fear of the parent, uncertainty about how a parent will react, and a history of contradictory responses by the parent
- Infants classified as “disorganized” lack a coherent/ organized strategy for dealing with distress
- Cannot find solution to their distress; ***fear without solution*** (Main & Hesse, 2002)
- Their dilemma is that their source of safety and comfort is also the source of their fear and distress
- Strategies are not sufficient to restore feelings of safety in the presence of the attachment figure.



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Disorganized attachment

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*I grew up with alcoholic parents, and every time they would drink, which was nearly all the time, I would feel nervous, wondering how long it was going to last this time before something went bad. I was scared most of the time and I didn't know what to do. All I knew is that I was afraid, and I thought that was life. Because I grew up on a reserve, in a village, and that's all that happened there, was drinking, and I didn't know nothing else until I started going to foster homes. So I don't know. I know I felt scared most of the time and confused about why they took me away and brought me back and took me again and that was my life, I guess. **I was scared most of the time and I didn't know what to do.***

Mother at Breaking the Cycle

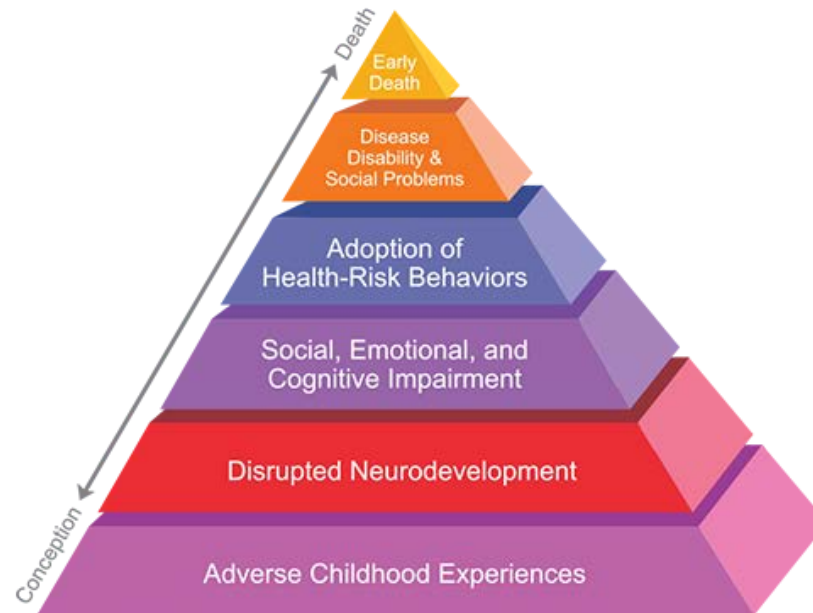


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Adverse Childhood Experiences (ACEs) Study

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Mechanisms by which Adverse Childhood Experiences Influence Health and Well-being Throughout the Lifespan



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Adverse Childhood Experiences (ACEs) Study

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Abuse by Category

- Psychological abuse
- Physical abuse
- Sexual abuse
- Emotional neglect
- Physical neglect

Household Dysfunction by Category

- Substance abuse
- Mental illness
- Mother treated violently
- Criminal behaviour in household
- Divorce



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Adverse Childhood Experiences (ACEs) Study: Findings

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- Over 2/3 of study participants reported at least one ACE
- More than one in five reported three or more responses
- Dose-response relationship between ACEs and negative health and well-being outcomes across the life course

Felitti et al, 1998, American Journal of Preventive Medicine

Cues that a child might be living with trauma

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- **Physical complaints:** stomach aches and headaches that could be related to anxiety and stress
- **Problems with regulation:** such as sleep difficulties, changes or disruptions in eating habits, lack of emotional control (irritability, excessive crying, temper tantrums)
- **Signs of disorganized attachment:** fear responses; being passive or appearing helpless; being constantly on guard (hypervigilance); restricted play; clingy and showing separation anxiety (beyond what would be expected)
- **Signs of maltreatment**
- **Developmental delays or regressions**
- **Behavioural problems:** aggression, poor impulse control, fear of being alone, immature behavior. (Baker and Jaffe, 2002)



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Childhood maltreatment, trauma and interpersonal violence

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- Children who were not kept safe by their own parents, or who were exposed to early traumatic stress:
 - Often have confused expectations and perceptions of “normal” relationships.
 - May not have an understanding of safety in relationships
 - May have developed a high tolerance for danger and maltreatment in relationships.



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Impact of Trauma on Relationships

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- There is a strong relationship between childhood maltreatment and violence in adult relationships:
 - Almost half (48%) of women who experience IPV as adults also have experienced physical and/or sexual abuse as a child (Canadian Centre for Justice Statistics, 2016)
 - About 20% of women who experience IPV witnessed abuse committed by a parent, step-parent or guardian as a child (Canadian Centre for Justice Statistics, 2016)



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*You're in a situation where you're
uncomfortably comfortable. You think you're
safe but you're not.*

BTC Participant

Trauma and Parenting

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Trauma is linked to maternal mental health problems, including:

- Depression, anxiety disorders and post-traumatic stress disorder (PTSD)
- Sleep disorders and eating disorders
- Misuse of alcohol and other drugs

Trauma and Parenting

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Unresolved trauma can interfere with:

- A mother's availability as a source of safety
- A mother's ability to assess her own safety and the safety of her children
- Her ability to regulate her emotions and behavior
- Her sense of self
- Her belief in herself and her ability to change
- Her interpersonal relationships
- Her capacity to trust and function in social relationships



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Providing Trauma-Informed Services

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- Service providers do not need to be specialists in trauma-specific treatment in order to implement trauma-informed practices.
- Being trauma-informed means that service providers:
 - **Understand trauma as a core issue for all clients**
 - **Understand the impact of trauma on parents and children**
 - **Understand behavior through a trauma-informed lens**
- Trauma-informed practices do not require disclosure of details about a client's experiences of trauma

Providing Trauma-Informed Services

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- Think about action both in a therapeutic way but also at the level or organizational and system reform;
- Recognize that trauma is ubiquitous among the parents and children we see;
- Engage in collaboration and planning focused on protection and safety
- Intervene early to interrupt cycles of trauma
- *Supporting a mother's relationship with her child means helping her protect her child from the kinds of experiences that cause **her** pain.*
(Pawl, 1994)



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Safety

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*Supporting a mother's relationship with her child means helping her protect her child from the kinds of experiences that caused **her pain*** (Pawl, 1994)



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In her own words

Tameka

Contact Information

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