


Illinois HEALS Training Plan

- Effective, accessible,

Audience	Core Competencies	Known trainings
<p>Community Members /Family Members</p> <p>“Trauma Aware”</p> <p>45 mins: Introductions-10 35 content</p> <p>Questions-8 mins</p>	<div data-bbox="358 478 954 688">  <p>RECOGNIZE</p> <p>Recognizing children and youth experiences with violence means becoming attuned to the varied ways in which victims express and cope with victimization. Relying on victims to disclose their experiences overlooks other ways in which adults can recognize something is wrong, such as through other verbal and behavioral cues or a child's physical appearance or affect. These indicators can be a launching point for further follow up to better understand the nature and extent of victimization, its impacts, and the need for intervention.</p> </div> <hr/> <p>Knowledge of Trauma (5 min)</p> <p>1 Slide. Introduction to the Three Es.</p> <p>1 slide Events</p> <ul style="list-style-type: none"> - Describe the many different types of traumatic events that children can be exposed to and distinguish the difference in impact between one-time and chronic events. <p>1 slide Experiences</p> <ul style="list-style-type: none"> - Understand that not all children exposed to traumatic events will have the same response. - Understand how the culture identity of a family may affect a child's experience and ability to heal from traumatic stress. <p>1 slide Effects</p> <ul style="list-style-type: none"> - Understand that Child Traumatic Stress (CTS) is a psychological reaction with both emotional and physical effects that some children, including infants, may have in response to their exposure to trauma. - Recognize the potential emotional and behavioral symptoms when CTS is not addressed. <p>Nature of Trauma (5 min)</p> <p>1. Describe childhood trauma within the context of types of events, including ACES, that can cause childhood trauma, distinguishing between one-time and chronic events.</p> <p>2. Understand the differences between positive, tolerable, and toxic stress.</p>	<p>https://developingchild.harvard.edu/resources/category/multimedia/</p> <p>-Stories for Children that Grown Ups can Watch</p> <p>- Victim Blaming video: https://www.youtube.com/watch?v=Op14XhETfBw</p> <p>- Child Adult Relationship Enhancement (CARE)</p> <p>- A/YMHFA (would need more)</p> <p>- Trauma 101</p> <p>- NCTSN Core Concepts</p> <p>- ITCT Core Concepts</p> <p>- Harvard center on the Developing child short videos</p>

3. Understand the study of epigenetics and stay current with research studies regarding positive and negative impact on child traumatic stress.

4. Identify how a child's age and developmental level affects the child's responses to trauma, and how trauma experiences at different ages can affect the long-term behavioral, emotional, and functional impact of trauma.

5. Recognize the varied manifestations of childhood traumatic stress, including how trauma symptoms can re-emerge across the lifespan, and how unaddressed traumatic stress can manifest in later health and intergenerational consequences.

6. Understand how a child's previous exposure to traumatic events and adaptations to them can influence their reactions and adaptations to subsequent trauma experiences. This may include in utero exposure to drugs, alcohol and domestic violence.

7. Understand how a child's culture and background may influence their reactions and adaptations to trauma or exposure to trauma, and how societal inequities and racism affect likelihood of exposure to trauma.

8. Identify the intrinsic (internal) factors such as age, gender, and developmental level that can affect physical, behavioral, and emotional adaptations of those exposed to trauma.

9. Identify the extrinsic (external) factors such as social support, poverty, racism and micro-aggressions, and community characteristics that can affect a child's adaptation to trauma exposure.

10. Recognize the early physical, behavioral and emotional adaptations that often go unrecognized.

11. Recognize that while some of children's behavioral and emotional reactions are adaptive, many may be maladaptive and impede children's growth and development.

Impact of Trauma (5 min)

- Stories

1. Understand and describe BOTH the short-term and long-term ways in which children's brain development, learning and relationships may be impacted by trauma and traumatic stress.

2. Understand and describe BOTH the short-term and long-term characteristics that a child impacted by trauma or traumatic stress may display. 3.

Understand that BOTH the short-term and long-term

characteristics that a child impacted by trauma or traumatic stress may display are misunderstood by treatment providers and others who could provide support for the child.

4. Locate resources for the assessment of the possible symptoms or effects of childhood trauma and traumatic stress, interventions and treatment options.

5. Identify key indicators of risk factors for trauma and traumatic stress.

6. Develop awareness of effective acute interventions and long-term treatment options.



CONNECT

Violence impacts multiple facets of victims' lives, such as their physical and emotional well-being and professional and personal relationships. To address these impacts, individuals often must interact with numerous systems and providers to access needed services. The burden of seeking help often is placed on the victim and they encounter frequent barriers to successfully connecting to services. Many victims may be unaware if services exist, what services would meet their needs, or whether these services are accessible (e.g., language, transportation, and waitlist barriers). [2]

Prevention/Resiliency etc (5 min)

1. Understand concepts of prevention, such as:

- The importance of strong communities and social and concrete resources in supporting healthy development in children and families, and their role in preventing family stress and family and community violence;
- Early and regular child and family screening and treatment;
- The importance of access to parent support programs such as home visiting and other community resources;
- Knowledge of appropriate crisis response, including psychological first aid, to prevent worsening effects of trauma exposure;
- How to work with medical programs to increase caregiver awareness of invasive procedures potentially causing traumatic stress to children;
- How programs and mental health services for maltreated children and their parents and caregivers can mitigate further trauma responses; and
- How sensitivity training for law enforcement, medical personnel, schools, and other systems may reduce the effects of childhood

traumatic stress.

2. Understand ways to help children and families build resilience, such as:

- Building social and emotional skills, such as affect recognition and tolerance, and healthy communication of feelings;
- Learning family management techniques that include effective communication of needs and concerns and positive discipline;
- Learning to recognize how past traumas can affect current coping, such as the impact of ACEs;
- Learning stress management and self-regulation techniques, such as reaching out and connecting with supportive others, participating in enjoyable social and cultural activities, exercise and body-based relaxation techniques, relaxing with music, and meditation or prayer;
- Learning how to recognize and access concrete and emotional resources and supports from family, friends, faith communities, mental health services, and other sources, in times of stress; and
- Learning effective ways to manage everyday stress
- Learning to recognize the difference between everyday stress and traumatic stress responses, so that children displaying traumatic stress responses can be linked to more targeted support.

IV. Prevention, Resilience and Protective/Promotive Factors

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3. Identify key protective and promotive factors that enhance the well-being of children, caregivers, and their parents, such as:

- Empathic attunement, nurturing, and secure attachment behavior between parents and children;
- Knowledge of parenting skills and realistic expectations of child development
- Parental resilience and social/emotional competence;
- Social and emotional competence of children;
- Supportive extended family and social networks;
- Concrete support systems for children and parents such as opportunities for employment, safe and affordable housing, access to affordable nutritious food, access to affordable medical and mental health care and supports, available hotline and warmline resources, access to competence-enhancing and cultural experiences.
- Safe and supportive schools, communities and work environments that include anti-discriminatory practices.

Victim blaming (5 min)

Part II



Interactions/Intervention

1. Recognize a child's initial responses to the traumatic experience and demonstrate effective communication between professionals and the children and their loved ones about the child's experience.
2. Understand that staff should utilize a "universal precautions" approach to working with those impacted by trauma: engaging without judgement,

such as by asking, "What happened to you" not "what's wrong with you?"

3. Understand and practice techniques to re-establish physical & emotional safety and internal regulation, especially when trauma reminders, triggers or narratives reactivate children and youth.
4. Recognize, reflect on, and make use of the feelings that are evoked through working with survivors of trauma situations to understand both the particular child and family and how one's own unique history/experience impacts a healing process.
5. Understand how culture enhances the meaning of the traumatic experience, the child or family member's reactions, and their expectations for engagement and treatment.
6. Provide support for identifying and utilizing self-regulation skills and provide psycho-education that helps normalize responses to traumatic stress.
7. Understand steps for healing and engagement to restore the connection between the child, loved ones, and their community.
8. Identify appropriate and effective trauma interventions for the survivor, avoid cultural stereotyping, and coordinate treatment among the various providers in the "system of care."
9. Regarding the interactions and interventions for the workforce, understand and encourage organizations to plan on how to prevent or minimize the effects of secondary traumatic stress in their staff who are exposed to the traumatic experiences of children and families.

Interactions/Interventions with Parents and Caregivers

1. Recognize that when children have experienced trauma, their parents and caregivers often have as well, and recognize how trauma symptoms may manifest in adult and parental behavior.
2. Know how to support parents' and caregivers' self-awareness of trauma's

impact on themselves, e.g. immediate need for safety and stability, as well as the kinds of therapies and supports that can benefit adults who have experienced trauma as a child and/or as an adult.

3. Understand how parents' and caregivers' trauma experiences and symptoms impact their interactions with their children, and how both child's and adult's symptoms, feelings and behavior influence each other.
4. Understand best practice interventions and interactions to support the parent/caregiver/child relationship when both have experienced trauma.
5. As necessary, develop resources and referrals to improve interactions and interventions in communities.
6. Develop strategies within program and system structures (policy, procedures, protocols, training, human resources) to support parents and caregivers who have experienced trauma, such as including parent/caregiver voice in programming, supporting staff in work with adults, and to "share power" identifying their own strengths and needs.
7. Understand how cultural influences may impact the child, youth and/or family engagement and reaction to treatment.
8. Understand the emotional and personal challenges parents or caregivers face when parenting a child with traumatic stress symptoms and help to identify needed supports.

Self-care and Other Interventions to Support Professionals

1. Define and discern differences between terms such as burn-out, secondary traumatic stress, compassion fatigue, and vicarious traumatization.
2. Recognize physical, emotional, and behavioral symptoms of these various reactions to indirect trauma exposure.
3. Recognize how their own cultural backgrounds and values may impact their work with children, youth and families from similar and different cultures.

	<p>4. Identify factors that can lead to the different types of reactions, and understand that preventing and addressing each of these stressors may differ among different individuals.</p> <p>5. Learn methods to prevent stress reactions through self-care, such as building adaptive capacities and reducing daily stressors.</p> <p>6. Learn options and methods for addressing symptoms through self-care when they do occur.</p> <p>7. Develop strategies to cope with vicarious trauma symptoms, especially chronic exposure.</p> <p>8. Identify countertransference responses to children and family members impacted by traumatic stress.</p> <p>9. Learn how to use thoughts and feelings to deepen empathy and understanding of oneself and other colleagues.</p> <p>10. Utilize reflective supervision to prevent and/or lessen the impact of indirect trauma exposure to self and/or staff.</p> <p>11. Seek professional assistance for you or other colleagues who are reexperiencing personal trauma, have increased arousal or avoidance reactions, memory and perception changes, low levels of energy, increase anger or fear, and/or overwhelming guilt or hopelessness.</p> <p>12. As a supervisor, manager and/or administrator, understand and be able to build and implement key organizational and structural systems (policies, procedures, and practices) that prevent undue stress reactions to trauma exposure, and supports a work environment of recovery and healing for staff.</p> <p>Local Resources</p>	
<p>Educator s/School Personnel</p>	<p>Knowledge of Trauma Nature of Trauma Impact of Trauma Prevention/Resiliency etc Victim blaming Interactions Vicarious Trauma/Self Care Local Resources</p>	<p>- Child Adult Relationship Enhancement (CARE) in the Classroom</p> <p>- DCFS Mandated Reporter Training</p> <p>- A/YMHFA</p>

Advocate s/Resource Coordinator s	Knowledge of Trauma Nature of Trauma Impact of Trauma Prevention/Resiliency etc Victim blaming Interactions/Interventions Local Protocols, Resources Vicarious Trauma/Self Care	- DCFS Mandated Reporter Training
Case Manager s	Knowledge of Trauma Nature of Trauma Impact of Trauma Prevention/Resiliency etc Victim blaming Interactions/Interventions Local Protocols, Resources Vicarious Trauma/Self Care	- DCFS Mandated Reporter Training
Clinicians	Knowledge of Trauma Nature of Trauma Impact of Trauma Prevention/Resiliency etc Victim blaming Interactions/Interventions EBPs Trauma Informed Supervision Local Protocols, Resources	- DCFS Mandated Reporter Training
Executive Leadership		

Model for Dissemination:

Facilitators with videos with key point questions.

- How do you respond to discussion questions or conversations
- Facilitator guide

Focus group for content, understanding, and reactions.

Questions they have afterwards and we can create handouts for them when they walk out.

Slideshow draft started:

<https://docs.google.com/presentation/d/18nmMmlz6cW2pd25DCSrM7KVnt3sQB11S/edit#slide=id.p1>

Various samples of slide decks used for trainings:

<https://drive.google.com/drive/folders/1rOu393C3uK1gafQl38hPPVNVqIJdHN9f?usp=sharing>