



Trauma Informed Care

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AIMS

To gain an understanding of:

- What is trauma?
- Impacts and effects of trauma
- Trauma informed care
- Trauma-informed frameworks for practice
- Self-care

Self-care and group agreement

- If you need to take a break, feel free.
- If you need to talk to someone:
 - Chat with a trusted person from church
 - Contact the Presbyterian Counselling Services (Jericho Road) 1800 818 133 OR
 - Lifeline 13 11 14
- Respect and listen to others

Why is trauma-informed care important?

- We want ministry-places to be safe
 - first
- It makes interactions more effective
- Avoid unintentional re-traumatizing



A note about the language of trauma-informed

When I first heard the term 'trauma-informed, I thought "Why would I want trauma to inform my care? I want the Bible to inform my care!" And rightly so. We need to keep the Bible at the centre...Scripture's view on human suffering, sin and redemption should shape how we understand traumatic experiences...at the same time there is tremendous value in being trauma-informed...research helps us see the impacts that are not immediately apparent.

- Darby Strickland, *Trauma: Caring for Survivors*

An estimated **57%** to **75%** of Australians will experience a potentially traumatic event in their lifetime.

What is trauma?

“Traumatic events...overwhelm the ordinary adaptions to life”

Herman, 1992

Types of Trauma

Acute Trauma

- Single incident of high distress
- Natural disaster
- Time bound
 - E.g. sudden death, car accident, injury

Complex Trauma

- Accumulative/repetitive
- Often involve trusting relationships
- No end/resolution
 - E.g. child sexual abuse, domestic violence, chronic health

Factors which can affect our experience of trauma

Past history

Age & life-stage

Personality

Supports

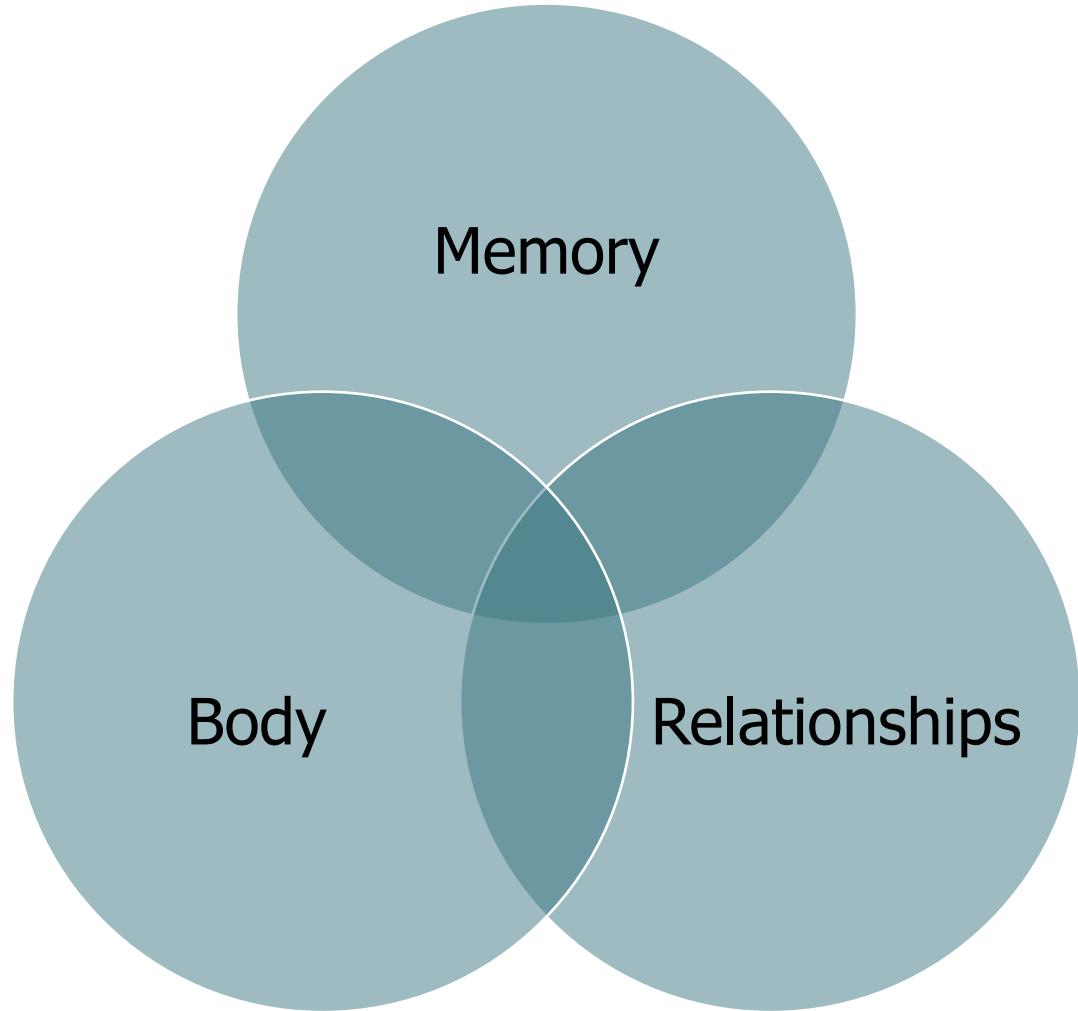
The event itself

Spiritual beliefs

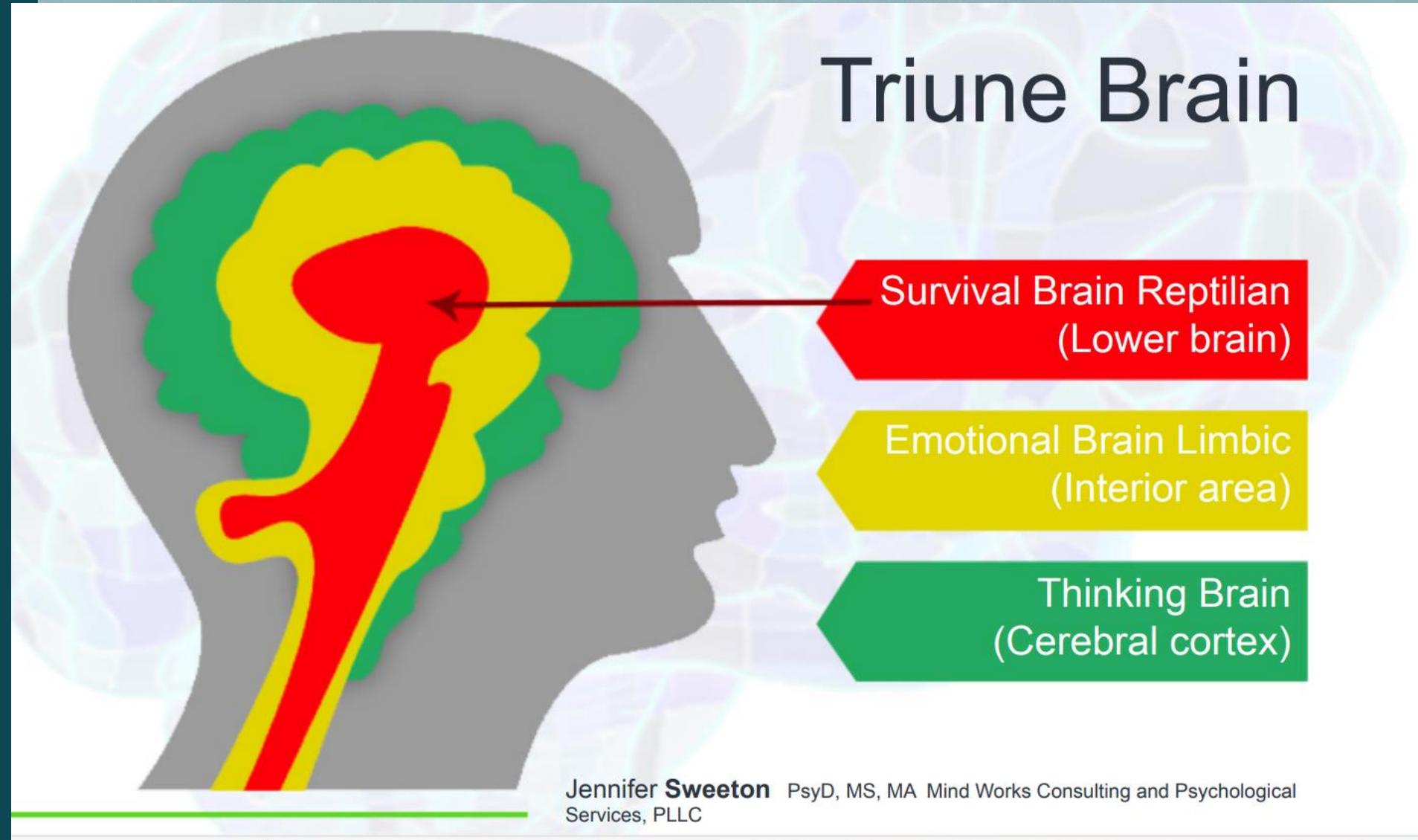
Culture

Community response

How trauma can affect response



The brain and stress



Trauma and Relationships

- Isolation
- Helplessness
- Loss of trust
- Crisis of faith
- Shame

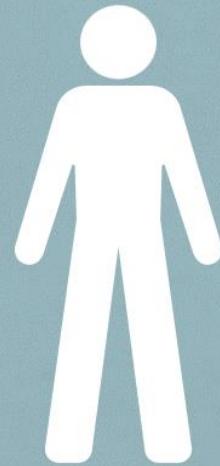


Trauma and Relationships

- “This guy is out of control!”
- “Why does she overreact to everything?”
- “What he’s saying doesn’t make any sense!”
- “She doesn’t remember anything I tell her!”
- “Things go in one ear and out the other!”
- “How can they think God has forgotten them?”



Stress Response



Hand model of the brain – Dan Siegel





intrusive memories

overwhelm

poor concentration

insomnia

chronic pain

feeling numb

hypervigilance

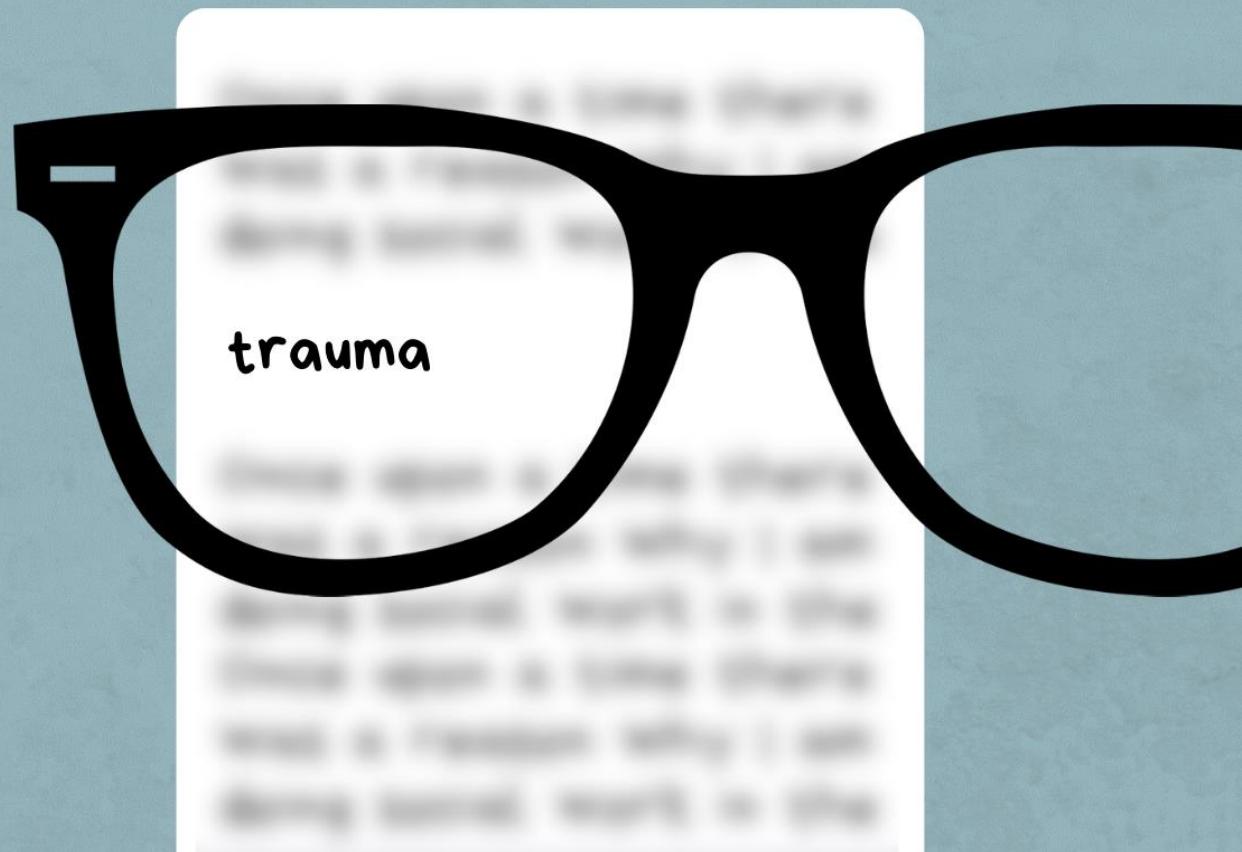
feeling 'out of body'

self-destructive behaviours

shame

What is trauma-informed care?

- Mindset/lens
- It is an approach to ALL people, not just those who we know are experiencing trauma





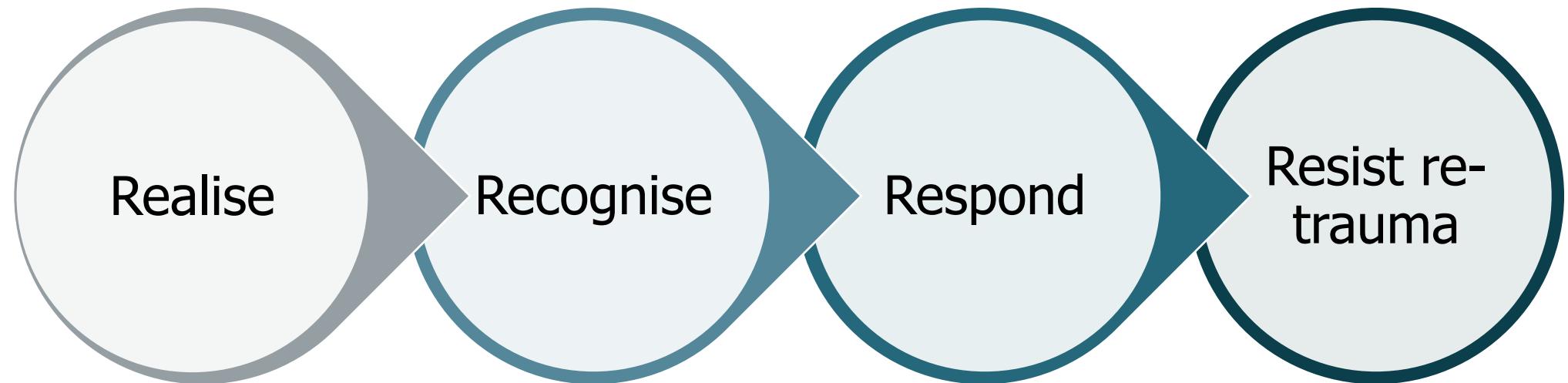
What is wrong
with you?



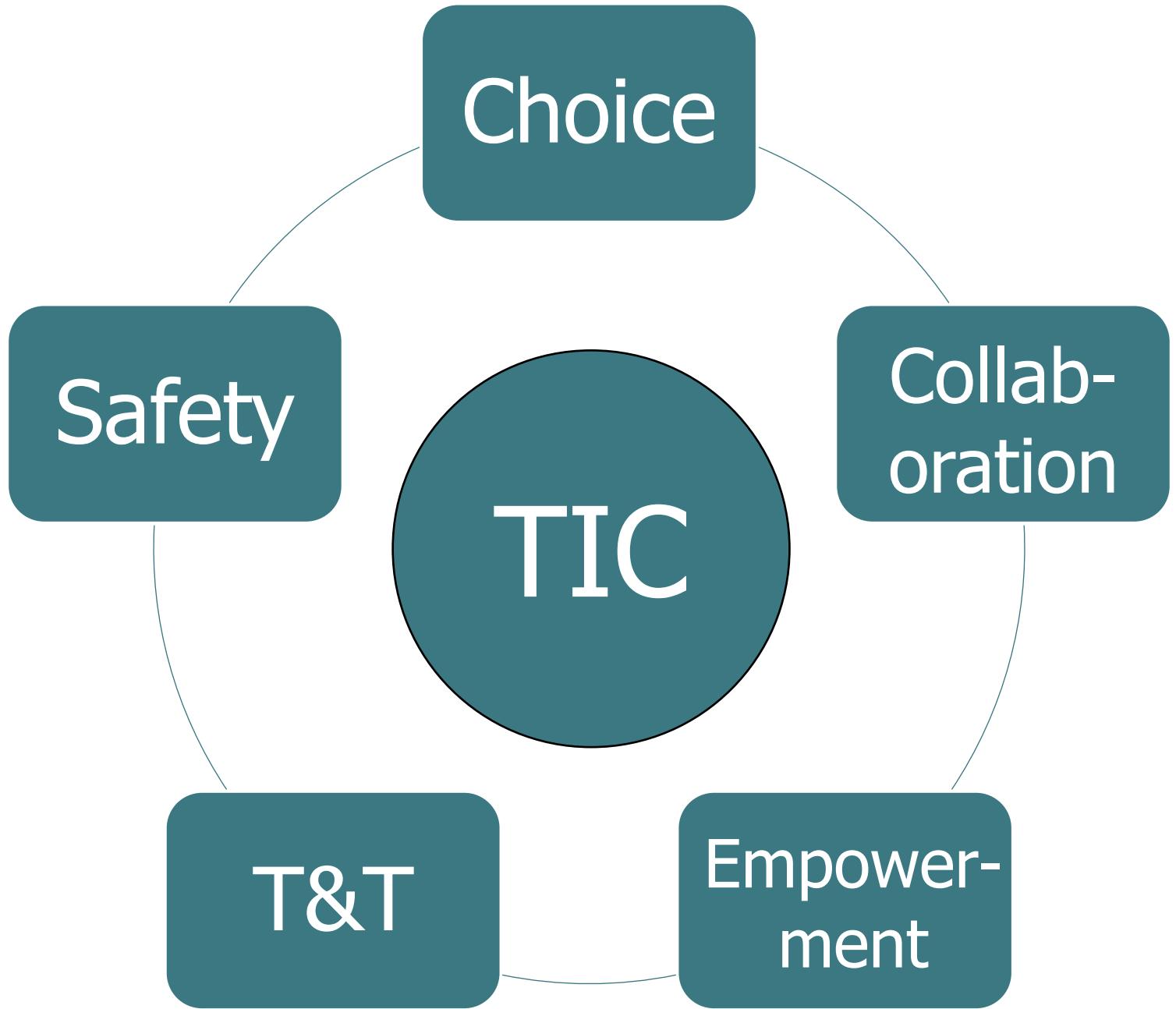
What might
have HAPPENED
to you?



The Four Rs of Trauma-Informed Care



The Five Principles of Trauma-Informed Care



1. SAFETY

- Build a sense of safety both physical and psychological
- Keep the person informed
- Do what you say you will do
- Confidentiality



“What do you need
to feel safe?”

2. CHOICE

- Listen
- Offer choices where possible
- Explain
- Validate concerns



3. COLLABORATION

- Ask what others need
- Be clear about what others can input
- How is partnership developed?



4. TRANSPARENCY & TRUSTWORTHINESS

- How does Session and CoM communicate plans and decisions with the congregation?
- Is there a goal of building and maintaining trust?



5. EMPOWERMENT & VOICE

- Validate people's feelings
- Listen to what they need
- Don't take over
- Recognise strengths



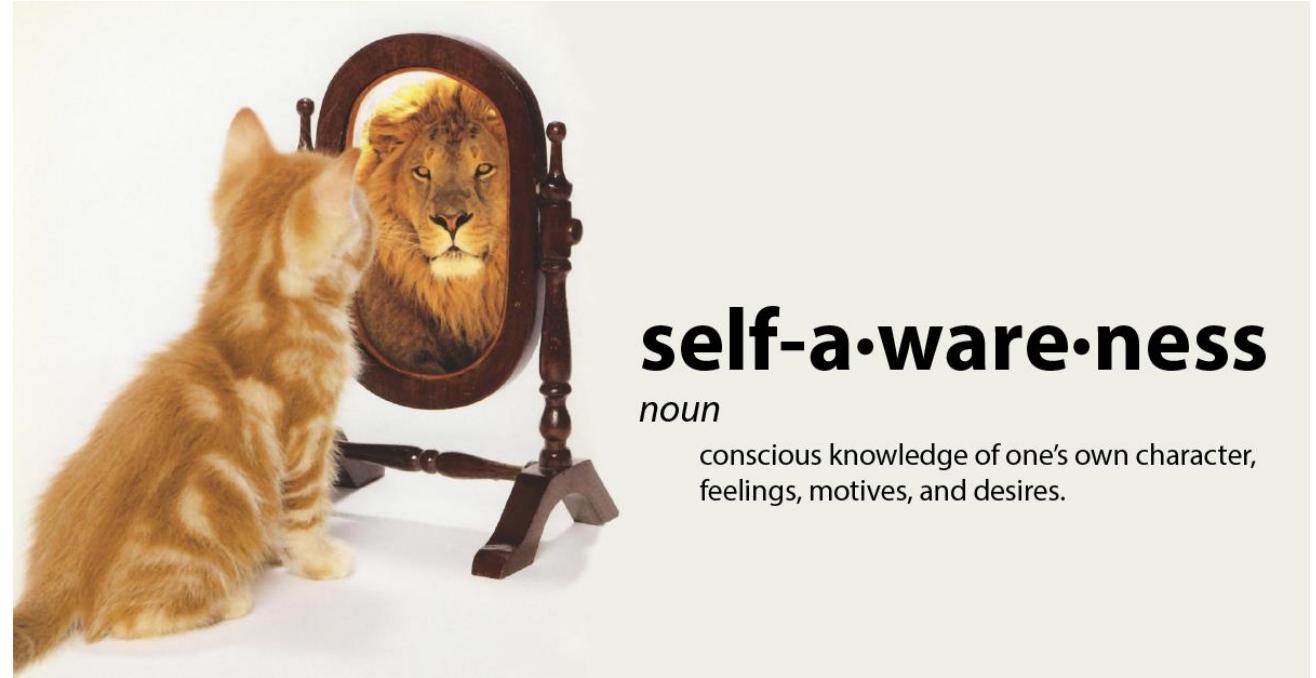
Trauma Informed practices

- Physical environment
- Team relationships
- Organisational communication
- Organisational structures
- Decision-making processes
- What is the culture of the workspace?



Self - Awareness

- Personality, values & strengths
- Our own trauma & triggers
- Our conflict management style



self-a·ware·ness

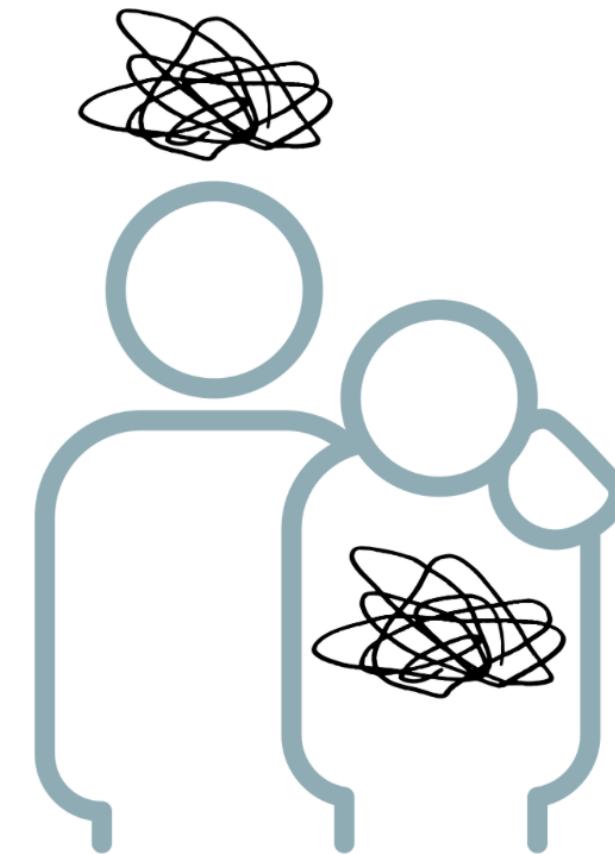
noun

conscious knowledge of one's own character, feelings, motives, and desires.

Vicarious Trauma

Watch out for:

- Cynicism
- Intrusive thoughts
- Chronic fatigue
- Emotional exhaustion
- Anger, shame
- Feeling disconnected
- Physical illness and absenteeism



Self - Care



SOCIAL

activities that help
nurture your rela-
tionships with others

PHYSICAL

activities that
improve your
physical health



MENTAL

activities that
stimulate your
mind



PRACTICAL

tasks that help
prevent future
stress

EMOTIONAL

activities that help
you connect
and reflect



SPIRITUAL

activities that
nurture your
spirit



Where to from here...

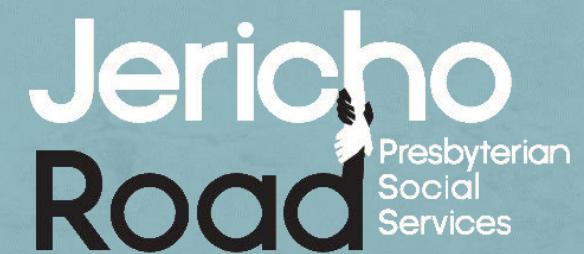
The key question

it's about doing church care better

Your ministry spaces

Looking after yourself

The redemption story...



Resources

- Dr Stephen Midgley *"Understanding Trauma: A Biblical Introduction for Church Care"*
- www.mentalhealthinstitute.org.au

