The Trauma-Informed, Multidisciplinary Approach to Child Sexual Abuse and Exploitation
Part 1: Trauma Informed Care

**APPLIED MENTAL HEALTH RESEARCH GROUP
JOHNS HOPKINS BLOOMBERG SCHOOL OF PUBLIC HEALTH**

STEPHANIE SKAVENSKI VAN WYK, MSW, MPH

When a child discloses sexual abuse or exploitation what happens next...

- What feelings do you think a child and the child's family experience throughout the process of reporting?
- What resources do you think are necessary for a child and family to even begin the process of reporting?
- What other internal and external barriers might get in the way?
- Given all of this how feasible do you think it is for a family to report?

And we wonder why cases are so often underreported!

Applying a Trauma Informed Care Lens

THE PROCESS OF RECIEVING LEGAL, MEDICAL AND PSYCHOLOGICAL CARE AND TREATMENT CAN CAUSE MORE HARM THAN GOOD IF A TRAUMA INFORMED APPROACH IS NOT TAKEN.

What is a trauma informed approach?

"ONE DOES NOT HAVE TO BE A THERAPIST TO BE THERAPEUTIC"

Trauma Informed vs. Trauma Specific

- Trauma Specific diagnostic and treatment approaches
  - Designed to treat symptoms and disorders that result from the direct experience of a traumatic event
  - Examples include TFCBT, CPT, EMDR, grounding techniques
- Trauma informed services
  - Not designed to treat symptoms or syndromes related to trauma
  - Services that are informed of and sensitive to the issues faced by trauma survivors
  - Environment that recognizes the vulnerabilities of a trauma survivor and actively works to prevent re-traumatization

Trauma Informed Approach

- Rudimentary definition trauma informed approach is simply understanding how trauma affects survivors and families of survivors. (Raja et al., 2015)
- SAMHSA's concept of a trauma-informed approach, "A program, organization, or system that is trauma-informed:
  - Realizes the widespread impact of trauma and understands potential paths for recovery;
  - Recognizes the signs and symptoms of trauma in clients, families, staff, and others involved with the system;
  - Responds by fully integrating knowledge about trauma into policies, procedures, and practices; and
  - Seeks to actively resist re-traumatization."

Principles of Trauma Informed Approach

- Safety
  - Staff and clients feel physically safe in the environment
- Trustworthiness and Transparency
  - Operations and procedures of organization are transparent to build trust with staff and clients
- Peer support
  - Seen as a vehicle for promoting safety and empowerment
- Collaboration and mutuality
  - Partnership with mutual respect between colleagues and families to work as a team for the benefit of the child
  - Healing happens in a relationship with shared power and decision making
- Empowerment, voice and choice
  - Recognizing the individuals strengths and differences and being able to provide individualizes services
- Cultural, Historical and Gender Issues
  - Violence and trauma can have different meaning across cultures, and healing can only take place within a specific survivor's cultural context.

SAMSHA, 2014

Do's and Don't's of working with survivors

- **DON'T** assume everyone in your organization understands the prevalence and impact trauma can have on survivors and their families. **DO** promote on the job learning and training opportunities for staff.
- **DON'T** discuss your clients case in public spaces with them or with colleagues. **DO** ensure that you provide safe confidential spaces for clients and case consultations with colleagues.
- **DON'T** judge or impose your expectations on the child or family. i.e. why are you just coming to us now? **DO** listen openly to the experiences and wishes of the client and family.
- **DON'T** assume a child or family has support or access to other services. **DO** provide holistic care if possible at your organization or refer out when needed.
- **DON'T** assert your power by forcing them to talk about the trauma or do things they don't want to. **DO** respect the child and families right to autonomy and choice.
- **DON'T** conceal information from the child or family. **DO** make the process as transparent as possible.

Group Work

WITH YOUR ORGANIZATION OR MEMBERS WORKING IN THE SAME

Assessing your practice and organization

Does your organization meet the criteria for trauma-informed practice?

(1) Do all staff employed by the organization understand what trauma is and how it can affect children and families? If so how do you provide that information and how often?

(2) Do you routinely screen for trauma exposure? If so how?

(3) Do you use culturally appropriate evidence-based assessment and if applicable treatment for traumatic stress and associated mental health symptoms or refer to organizations who offer treatment? If so what measures do you use? What services do you provide or who do you refer to?

(4) Do you ensure that children and families have access and referrals to other services that may be needed that are outside your organizations scope? i.e. medical, legal, mental health and child protection services? If so who are the providers you refer to? How well do you know them and what is their experience in working with child survivors?

(5) Do you ensure resources are available to children, families, and providers on trauma exposure, its impact, and treatment? If so what resources do you make available?

(6) Do you engage in efforts to strengthen the resilience and protective factors of children and families impacted by and vulnerable to trauma? If so how?

(7) Do you address safety of your clients in your organization? If so how?

(8) Do you emphasize continuity of care and collaboration across child-service systems? How and with whom?

(9) Do you maintain an environment of care for staff that addresses, minimizes, and treats secondary traumatic stress, and that increases staff resilience? If so then how?

Needs Assessment

- In looking at your responses to the 9 questions are there areas your organization still needs to address?
- Choose one area to target first!
  - Create a list of all steps that need to be taken to address this gap
    - For example: What resources are needed? Who needs to be involved in the conversation?
- What are some barriers (both internal and external) to putting these changes into place?
- Make a decision on what you can do this week to start making change.