

# Trauma-Informed Practices in Higher Education



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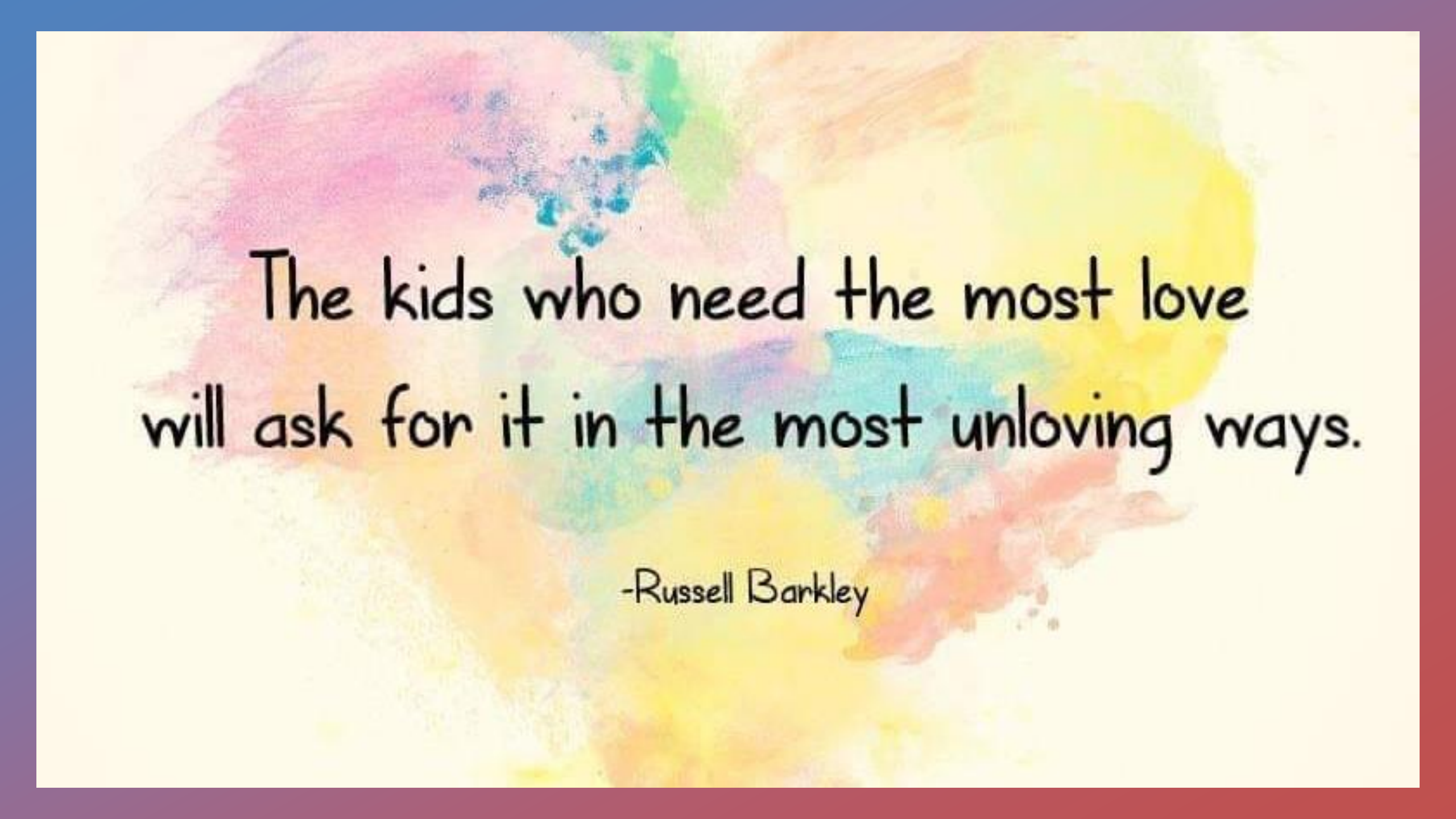
# ISU Land Statement

Illinois State University was built on the land of multiple native nations. These lands were the traditional birthright of Indigenous people who were forcibly removed and have faced centuries of struggle for survival and identity in the wake of dispossession and displacement. We would like to acknowledge that our campus sits on the lands that were home to the Illini, Peoria and the Myaamia, and later due to colonial encroachment and displacement to the Fox, Potawatomi, Sauk, Shawnee, Winnebago, Ioway, Mascouten, Piankashaw, Wea, and Kickapoo Nations. We also express honor to those Indigenous people who we may have excluded in this acknowledgement due to erasure and historical inaccuracy.

- Created with input from ISU Native American Studies program, the Department of History, the Department of Sociology, Women's, Gender, and Sexuality Studies and the Multicultural Center

# Labor Statement

- The United States was built using the labor of forcefully enslaved African people. Illinois State University was founded in 1857 at a time when the slavery of Black people was a legal institution in America. The Illinois Black Law of 1853 (repealed in 1865) made it illegal for Black people to emigrate to Illinois. Violators of this law could have their labor sold to the lowest bidder (slavery).
- BIPOC students and faculty have provided a vast amount of labor towards the advancement of diversity, equity and inclusion policy/practices at Illinois State University, this labor was often un-paid.



The kids who need the most love  
will ask for it in the most unloving ways.

-Russell Barkley

# Why Does Being Trauma- Informed Matter?

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Trauma is very prevalent in our world.

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It is likely that many (most?) of the students you encounter have experienced some form of trauma.

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Putting into place Trauma-Informed Practices helps to minimize the likelihood that we will inadvertently re-traumatize those with whom we interact.



# Universal Trauma Precautions

- Assume that all people and connected persons with whom you are working are coping with the effects of trauma and modify your practices accordingly.
- Recognize how your organization, your program, your environment, and your actions could potentially act as a trauma trigger.
- Recognize that you may also have experienced trauma yourself, and you may be triggered by student responses and behavior.

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So What is this  
“Trauma” thing  
you speak of?

How would you define trauma?

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## Definition of Trauma

- Trauma results from an **event**, series of events, or set of circumstances that is **experienced** by an individual as physically or emotionally harmful or threatening and that has lasting adverse **effects** on the individual's functioning and mental, physical, social, emotional, or spiritual well-being. (SAMHSA, 2014, p. 7).





# What is Trauma?

- Trauma is a **biopsychosocial** condition.
  - **Biological:** Changes in the brain & body
  - **Psychological:** Causes emotional distress as well as difficulties with memory, concentration, and focus
  - **Social:** Impacts Relationships
- “Big-T” trauma
- “little-t” trauma


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# Examples of “Big-T” Traumas

- The experience of violence or victimization
  - Sexual abuse or assault
  - Physical abuse
  - Severe neglect
  - Domestic violence and/or witnessing violence
  - Terrorism
  - War
  - Disasters (man made or natural)

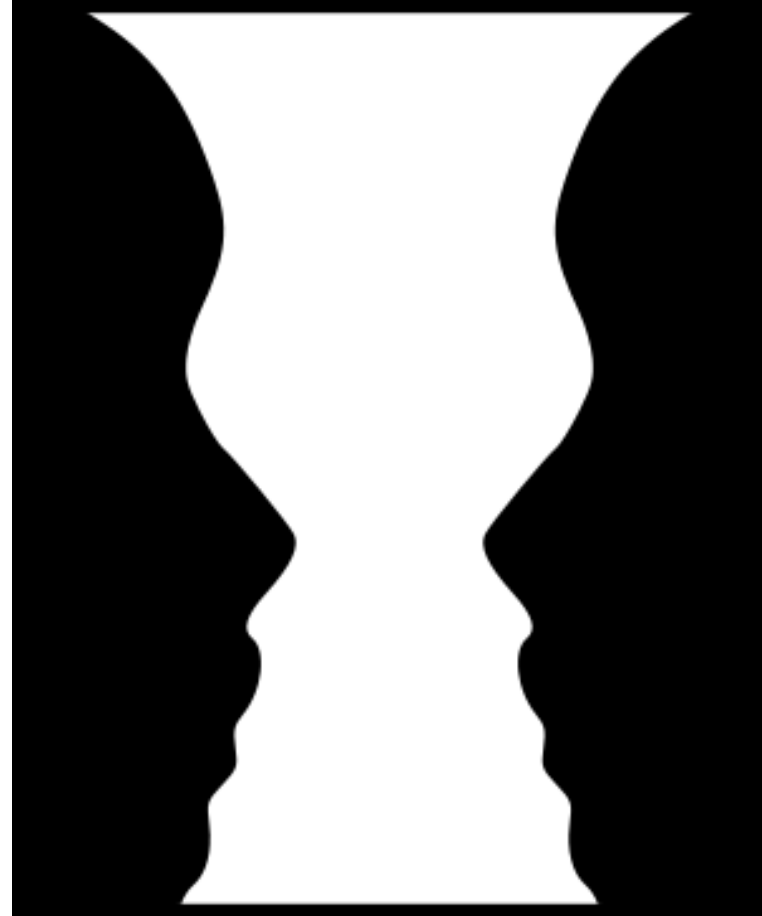


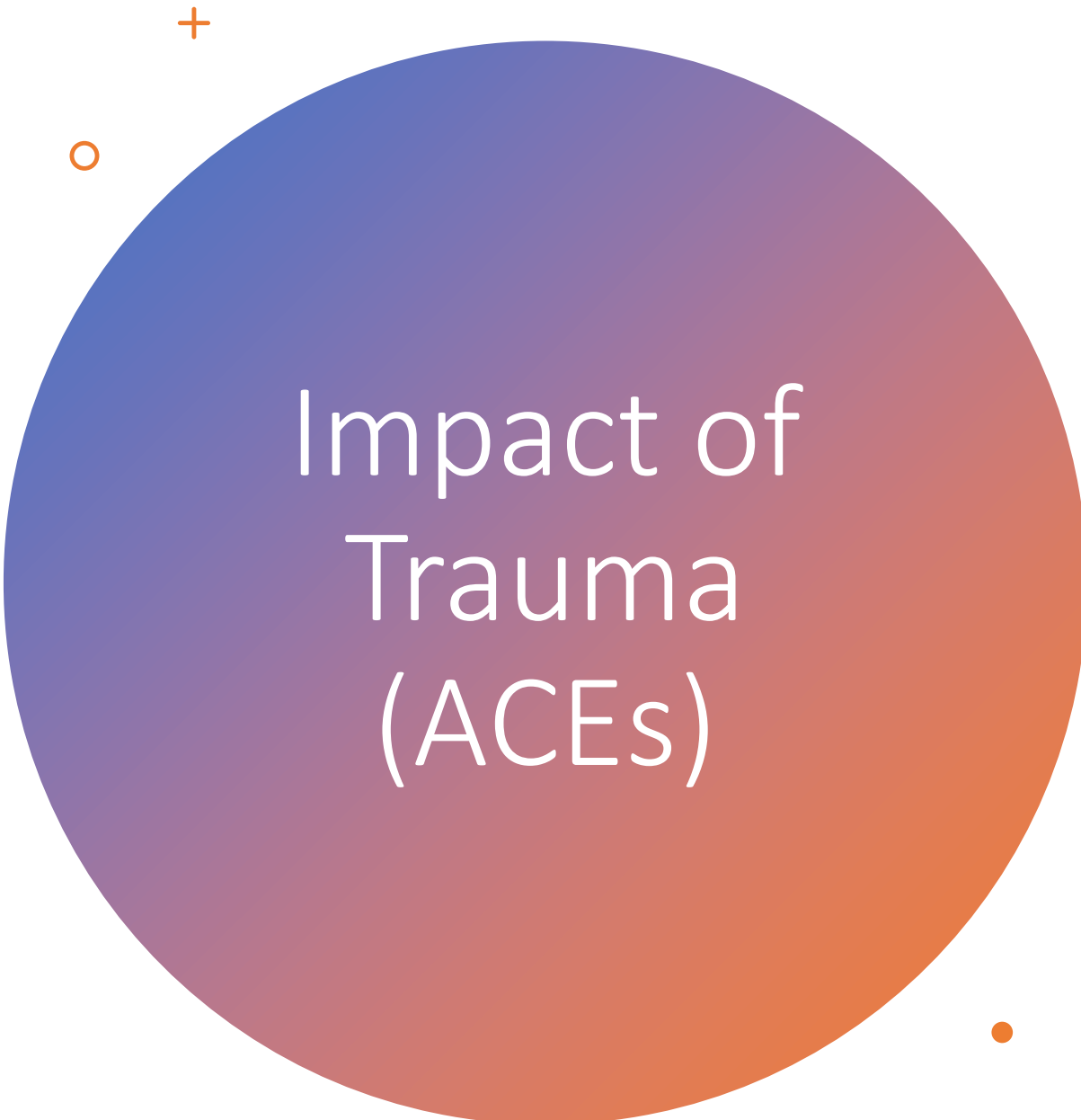
# Less Obvious Traumas (“little-t” traumas)

- Addiction (self or a loved one)
- Bullying
- Verbal abuse, such as being told you are not wanted
- Surgery, chronic illness, medical problems
- Lack of healthcare access
- Discrimination / being “othered”
- Racial Microaggressions
- Loss
- Repeated moves
- Caretaker to younger siblings as a child
- COVID pandemic

# “Trauma is in the Eye of the Beholder”

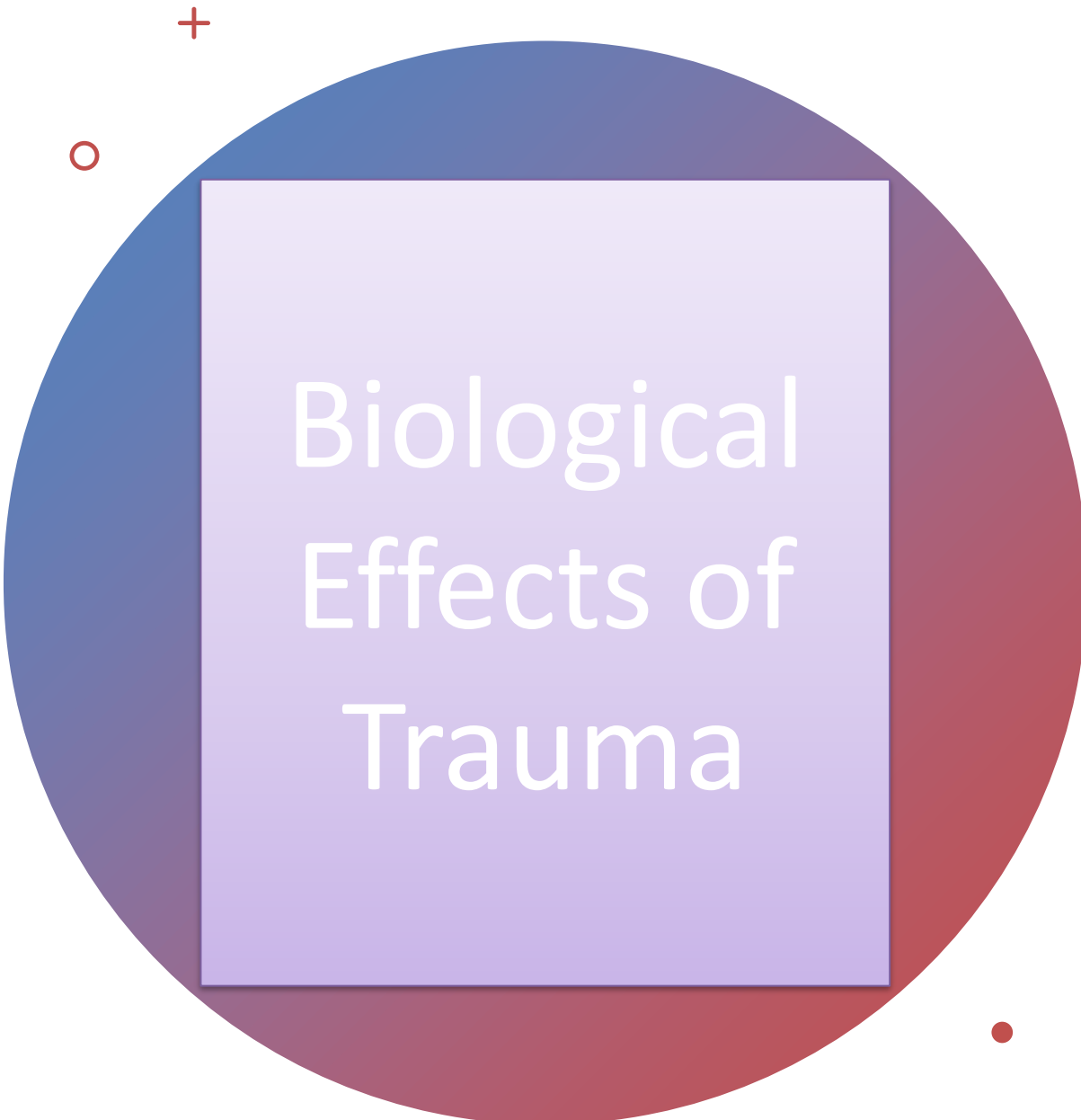
- Perception of trauma varies vastly among individuals.
- Trauma is something that overwhelms our coping capacity
- Trauma can be
  - Single Event
  - Recurrent
  - Complex (Developmental) Trauma
  - Historical/Generational Trauma





# Impact of Trauma (ACEs)

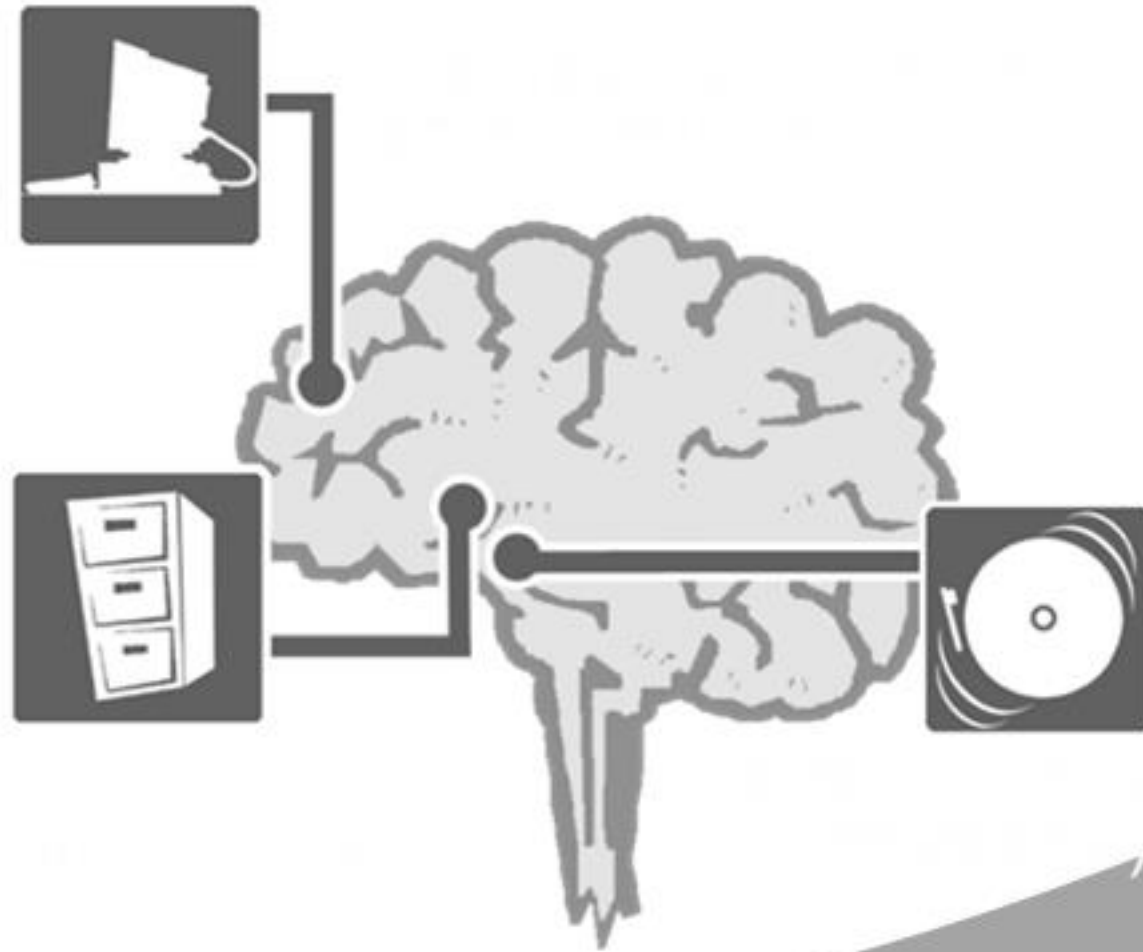
- Adverse Childhood Experiences (ACE) Questionnaire
  - 10 questions, score 1 point for each experience
  - Scores of 4+ showed significant correlations with:
    - Chronic Depression
    - Adult Alcoholism
    - Risk of Perpetrating Domestic Violence
    - Prevalence of Hepatitis
    - Prevalence of COPD
    - Future Suicide Attempts
    - Eating Disorders
    - Impaired Worker Performance



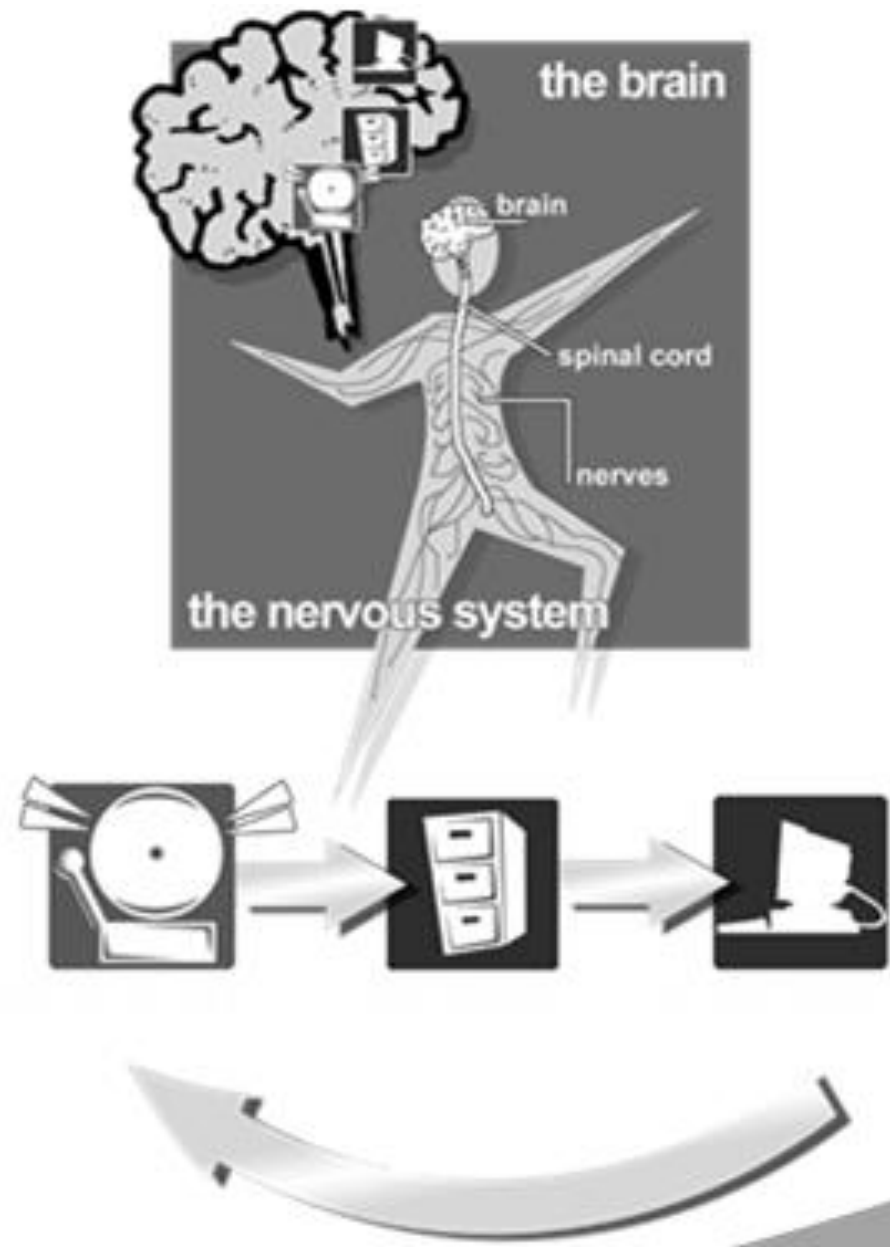
# Biological Effects of Trauma

- Survival Brain
  - Fight, Flight, or Freeze
  - 3 Primary Brain Centers Involved
    - Alarm—Amygdala
    - Filing Center—Hippocampus
    - Thinking Center—Pre-frontal Cortex

# Alarm-Filing- Thinking

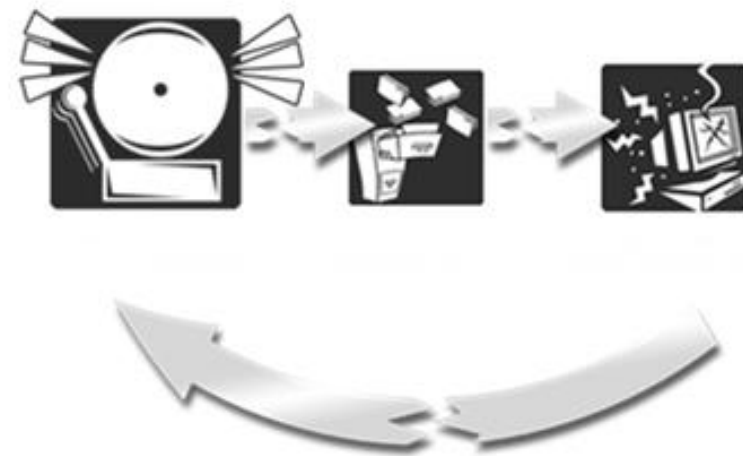
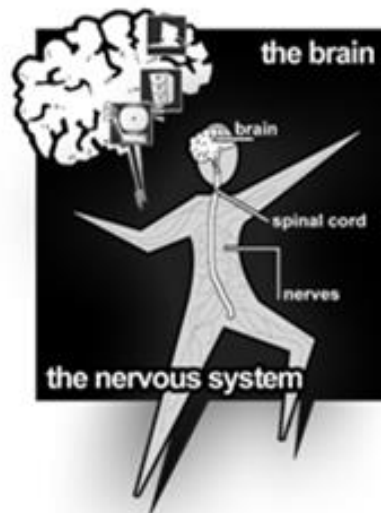


# Normal Stress

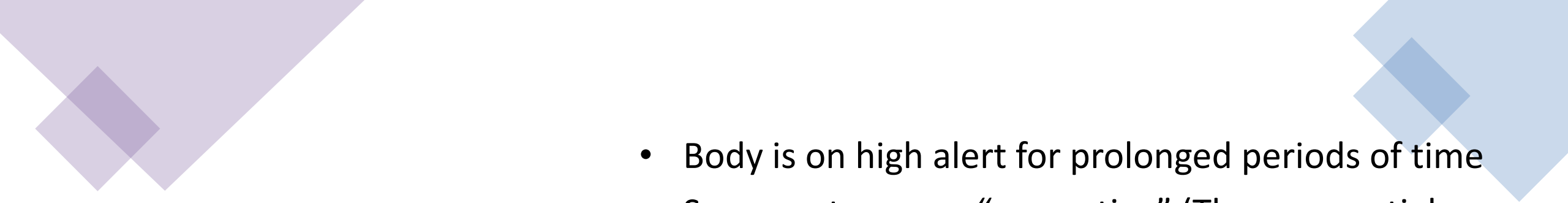





# Extreme Stress/Trauma



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# Why Does the Body Respond So Strongly to Stress?

- Body is on high alert for prolonged periods of time
  - Some systems are “overactive” (Those essential for survival)
    - Cardiovascular system, muscle extremities (necessary to fight or flee)
    - These systems become fatigued over time
  - Some systems are “underactive” (non-essential for survival)
    - Digestion, reproduction, immune system
    - These systems start to “atrophy” over time
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# Psychological Effects of Trauma

- Moodiness, Irritability
- PTSD, Depression, Anxiety
- Substance Abuse/Misuse
- Hypervigilance (alarm system is always “on”)
- Disconnection to body / emotions (Dissociation & numbing)
- Lack of sense of safety
- Loss of connectedness to others
- Memory impairment



## Social Effects of Trauma

- Inability to trust others
- Disconnection and withdrawal (flight)
- Aggression toward others (fight)
- Pattern of unhealthy relationships

## What Does a Trauma Effect Look Like?

- Different for every person:
  - Aggression, yelling, blaming (fight response)
  - Withdrawing, avoiding (flight response)
  - Detaching, being “stuck” and “unmotivated” (freeze response)
  - Difficulties with concentration, organization, planning, follow-through
  - Memory impairment



Prime Directive

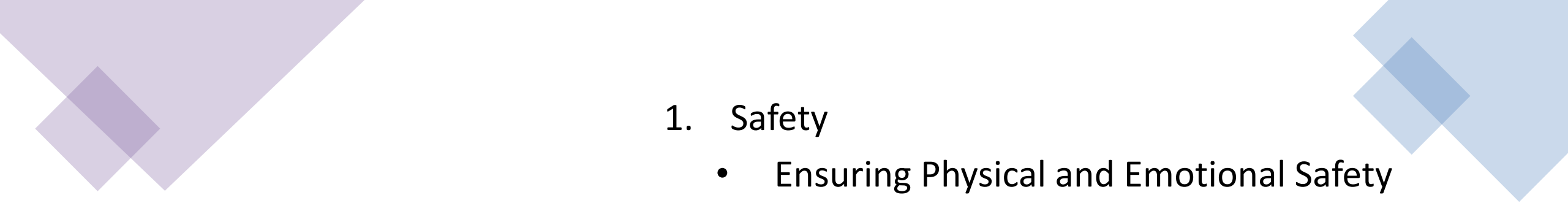
First, Do No *More* Harm

## 6 GUIDING PRINCIPLES TO A TRAUMA-INFORMED APPROACH


The CDC's [Office of Public Health Preparedness and Response \(OPHPR\)](#), in collaboration with SAMHSA's [National Center for Trauma-Informed Care \(NCTIC\)](#), developed and led a new training for OPHPR employees about the role of trauma-informed care during public health emergencies. The training aimed to increase responder awareness of the impact that trauma can have in the communities where they work. Participants learned SAMHSA'S six principles that guide a trauma-informed approach, including:



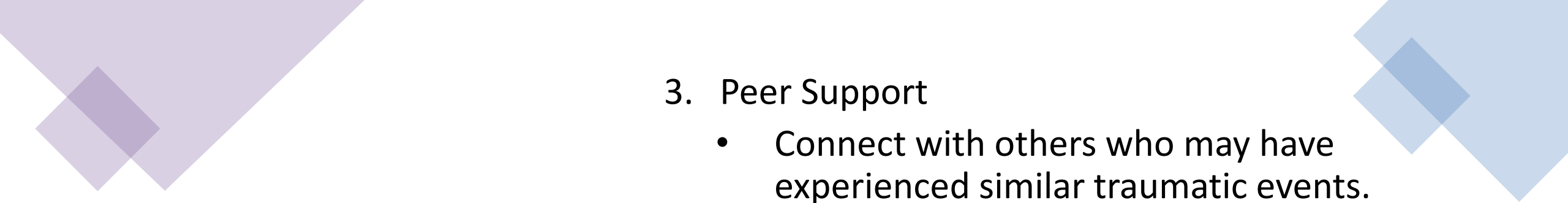
Adopting a trauma-informed approach is not accomplished through any single particular technique or checklist. It requires constant attention, caring awareness, sensitivity, and possibly a cultural change at an organizational level. On-going internal organizational assessment and quality improvement, as well as engagement with community stakeholders, will help to imbed this approach which can be augmented with organizational development and practice improvement. The training provided by [OPHPR](#) and [NCTIC](#) was the first step for CDC to view emergency preparedness and response through a trauma-informed lens.



# Six Guiding Principles to a Trauma-Informed Approach

1. Safety
    - Ensuring Physical and Emotional Safety
    - Meeting people where they are
    - The person's culture is respected and incorporated
    - Calm environment and Predictable routines
  2. Trustworthiness & Transparency
    - Maximizing trust through transparency, clarity, consistency, and interpersonal boundaries.
    - Follow-through with what you say, and if you can't, take responsibility.
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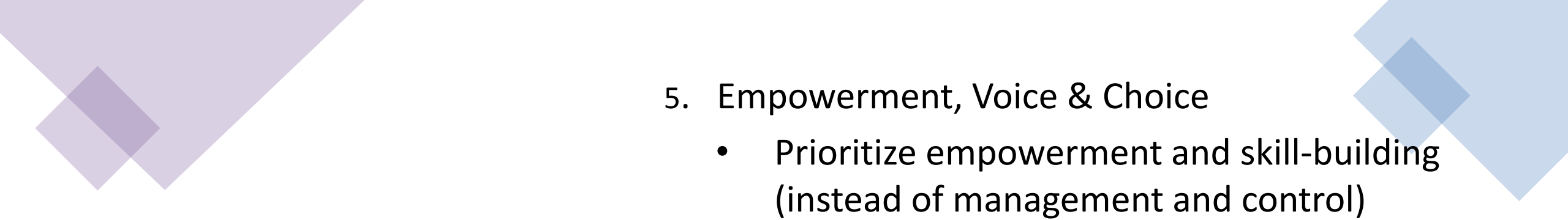
# Six Guiding Principles to a Trauma-Informed Approach

## 3. Peer Support


- Connect with others who may have experienced similar traumatic events.
- Normalizing & Validating
- Mutual self-help

## 4. Collaboration & Mutuality

- Sharing of power
  - What are the student's goals and priorities? (may not be mine)
  - Shared expectations for the helping relationship
  - During emotionally difficult times ask, "How can I support you right now?"
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# Six Guiding Principles to a Trauma-Informed Approach

5. Empowerment, Voice & Choice
    - Prioritize empowerment and skill-building (instead of management and control)
    - Build upon strengths and promote resilience
  
  6. Cultural, Historical, and Gender Issues
    - Move past cultural stereotypes and biases
    - Recognize & utilize the healing value of traditional cultural connections
    - Be responsive to the racial, ethnic, and cultural needs of individuals served
    - recognize and address historical trauma
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@pcxd13

cashier at target saw me buying hair bleach, looked me dead in the eyes, and said “baby is everything ok” and THAT’S trauma informed care

09:51 · 21/11/2021 · [Twitter for iPhone](#)





# What Can I Do?

## Don't take it personally!!

- Recognize that a student's "over-the-top" behavior is likely a trauma response to a past trigger or other event in their life.

## Self-Awareness

- Is the student's behavior triggering you? If so, can you manage your reactions? Do you need a break? Can you "tag out"?

## Offer a break, if necessary.

- Is there a place they can rest and regroup? Can you take a few deep breaths together?



# What Can I Do?

## Collaborate

- Work together to find a solution. Offer available choices, even if it is not the choice you would take.

## Perfection is NOT Necessary (or even possible)

- You don't have to have a perfect solution or the perfect thing to say. Simply caring is enough.

## Be honest and transparent

## Follow-through on what you promise



# What Can I Do?

## Be Mindful of Implicit Bias

- Challenge internal thoughts of stereotyping or over-generalizing

## Know when to reach out

- If you are overwhelmed and can't self-regulate, ask for help!
- If the student is overwhelmed, you can refer to SCS walk-in.

## Self-Care is ESSENTIAL!!

- What do you do for self-care?

# Self-Care

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**“Compassion for others begins  
with kindness to ourselves.”**

**-Pema Chödrön**





## Post-Traumatic Growth

- Increased compassion, connection, and appreciation for life.
- This is not an implication that traumatic events are good. **Just because individuals experience growth does not mean they will not suffer.**
- The level of trauma must be high, but if it's too high, people may fold instead of grow.
  - “Extreme pain helped me break through the illusion [of avoiding pain], and it has so enriched my life. There is pain in life. Don't be afraid of it. Through our difficulties, we discover our humanity.”  
(client quote)



# Resources

WellConnect: 1-866-640-4777 (school code: ISU)

WellTrack: Phone app that offers free resources for self-help

Student Counseling Services (309) 438-3655

- Phone emergencies 24 hours
- Walk-in emergencies during open hours
- Group Counseling
- Individual Counseling
- Relaxation Room

Off Campus Supports:

- Psychologytoday.com—find a clinician
- PATH: 211



In a world  
where you  
can be  
anything,  
choose to  
be kind.