2020 / Treatment Innovations / Lisa Najavits, PhD

**Training on *Trauma Informed Care***

This training can be done as a half day or full day, or adjusted to other lengths as needed. A timed outline for a half day and a full day option are provided later in this document.

**Possible titles (choose one):**

Trauma-informed care

The link between trauma and addiction

Listening to themes: Trauma-informed care

**Trainer:** certified to provide this training by Lisa Najavits, the developer of *Seeking Safety*. To see or verify our list of certified trainers, please see www.treatment-innovations.org / About us / Team.Lisa supervises each trainer on each training, including preparation and materials. Slides, videos, and content are identical to those Lisa uses the trainer audiotapes all trainings (including the one at your site, if you allow it) so they can be reviewed for quality.

**Intended audience:** A broad range of staff from substance abuse, mental health, medical, and other programs, including those who directly treat clients, but can also include other staff (e.g., administrators, mental health aides, counselors, nurses, advocates, etc.) No prior training nor any particular professional degree is required.

**Summary:** This presentation explores general principles of treating traumatized clients in a variety of contexts (e.g., addiction treatment, mental health, medical, etc). Information on trauma, posttraumatic stress disorder (PTSD) and co-occurring disorders will be provided, such as definitions, rates, and clinical presentation. In addition key themes relevant for this population will be discussed, including dissociation, self-injury, reenactments, and stage-based models of treatment, emotional responses by staff, staff self-care, and diversity issues. Trauma-informed versus trauma-specific treatment will also be highlighted, with the idea that all staff can become trauma-informed, and a smaller number may be providing actual trauma counseling. The workshop will be highly clinically-oriented and offer opportunity to role-play client scenarios. Real-world challenges are emphasized, including power struggles, threatened harm to self or others, help-rejecting patterns, and reenactment of classic trauma roles. Assessment and resources will also be provided.

**Educational objectives/outcomes:**

1. To learn information on trauma and PTSD (definitions, rates, and clinical presentation)

2. To develop increased compassion for how trauma affects recovery.

3. To discuss typical dilemmas that may arise in various treatment settings (e.g., boundary issues, intense emotions, triggering, self-injury, power struggles, trauma reenactments).

4. To learn specific strategies and principles for responding to challenges with this population ranging from formal therapy to interventions that any staff can do even if not doing formal counseling.

**Schedule for a 1-day training**

The typical 1 day training is 9a-4p but this is adjustable.

I. Trauma in context 9a-10a

a. Impact of trauma, rates, clinical challenges, gender differences

b. Clinical issues (dissociation, self-injury, impulsive behavior, reenactment of trauma roles, behavioral problems including addictions, family context)

II. What Helps? 10a – 12p (with a 15 minute break around 10:30a)

a. Phases of recovery

b. Principles of trauma–informed care and environments

c. Principles of trauma-informed counseling models (present- versus past-focused, other approaches); evidence base

d. Grounding and Safe Coping Skills 12:30p-1:15p

Lunch 12p-12:30p

IV. Resources 12:30p-1p

V. Video on trauma-related symptoms and discussion, and 1p-1:45p

V. Group toolkit exercise on creating trauma-informed care in your setting 1:45p-2:30p

Mid-afternoon break 2:30p-2:45p

VI. Clinician aspects: emotional responses, self-care, triggering, Professional Quality of Life Scale 2:45p- 3:15p

VII. Group brainstorming of “tough cases” – working empathetically with challenging situations from a trauma-informed care perspective 3:15p-4p

**Schedule for a half-day training**

The typical half-day training is 9a-12:15p but this is adjustable.

I. Trauma overview 9a-945a

a. Impact of trauma, rates, challenges

b. Principles of trauma–informed care and environments

c. Resources

II. Treatment overview 10a–11a

a. Phases of recovery

b. Principles of trauma-informed counseling models (present- versus past-focused, other approaches); evidence base

c. Grounding and Safe Coping Skills

d. Clinical challenges

Morning break 15 minutes 11a-11:15a

III. Group toolkit exercise on creating trauma-informed care in your setting 11:15p-12p

IV. Next steps, including clinician self-care 12p-12:15p

**Audiovisual:**

LCD projector or other method to view slides

Audio to play videos

Microphone (any type is fine)

Trainer will bring a laptop computer (but it is always a good idea to have a backup)

**References:**

Black, C. (2018). *Unspoken Legacy: Addressing the Impact of Trauma and Addiction within the Family*. Las Vegas: Central Recovery Press.

Briere, J. N., & Scott, C. (2012). *Principles of Trauma Therapy: A Guide to Symptoms, Evaluation, and Treatment (2nd edition)*. Thousand Oaks, CA: Sage Publications.

Felitti, V. J., Anda, R. F., Nordenberg, D., Williamson, D. F., Spitz, A. M., Edwards, V., et al. (1998). Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults. The Adverse Childhood Experiences (ACE) Study. *Am J Prev Med, 14*(4), 245-258.

Herman, J. L. (1992). *Trauma and Recovery*. New York: Basic Books.

Lenz, A. S., Haktanir, A., & Callender, K. (2017). Meta-Analysis of Trauma-Focused Therapies for Treating the Symptoms of Posttraumatic Stress Disorder. *Journal of Counseling & Development, 95*, 339-353. doi:DOI: 10.1002/jcad.12148

Najavits, L. M. (2002). *Seeking Safety: A Treatment Manual for PTSD and Substance Abuse*. New York: Guilford Press.

Najavits, L.M. (2019). *Finding your best self: Recovery from addiction, trauma or both.* New York: Guilford.

Pearlman, L. A., & Saakvitne, K. W. (1995). *Trauma and the Therapist: Countertransference and Vicarious Traumatization in Psychotherapy with Incest Survivors*. New York: WW Norton.

Substance Abuse Mental Health Services Administration (SAMHSA) (2014). Trauma-Informed Care in Behavioral Health Services, *Treatment Improvement Protocol (TIP) Series*. Washington, DC: Substance Abuse Mental Health Services Administration (SAMHSA), Department of Health and Human Services. **Note: this can be freely downloaded via the link below. It is highly recommended to also order several hard-copy versions, which are also free, for use during the training.** http://store.samhsa.gov/product/TIP-57-Trauma-Informed-Care-in-Behavioral-Health-Services/SMA14-4816

van der Kolk, B. A. (2014). *The Body Keeps the Score.* New York: Penguin.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

© Najavits, 1996 (updated 2020), Treatment Innovations, Newton Centre, MA.

Downloaded from www.treatment-innovations.org / Training