

## Learning Community Notes:

Sessions included didactic portions focused on the basics of trauma informed approaches, recognition and awareness, agency readiness, trauma informed supervision, process and infrastructure, identifying opportunities, creating a work plan, and implementation and monitoring. Throughout the learning community, our team was able to integrate trauma informed approaches into our work on updating the Joint Ryan White Acuity Scale, creating the accompanying companion guide, and rolling out the changes to subrecipients through training. Check out the [presentation](#) given at the last learning community session and mark your calendars for August 23-26 for the [National Ryan White Conference](#) where Yanitza and Rose will be joining NASTAD as co-presenters to share a brief presentation of the completed pilot activity!

### Definitions

- **Trauma-** broadly defined as experiences that produce intense emotional pain, fear, or distress, often resulting in long-term physiological and psychological consequences. Experiences of trauma, especially in childhood, can change a person's brain structure, contributing to long-term physical and behavioral health problems.
- **Trauma Informed-** Being trauma-informed is an approach to administering services in care and prevention that acknowledges that traumas may have occurred or may be active in clients' lives, and that those traumas can manifest physically, mentally, and/or behaviorally. TIC vs TIA: trauma-informed care is one type of trauma-informed approach. There is SO much more you can do outside of the direct care you and/or your sub-recipients provide.
- **Trauma-informed Care (TIC) vs Trauma-informed Approaches (TIA)-** trauma-informed care is one type of trauma-informed approach. There is SO much more you can do outside of the direct care you and/or your sub-recipients provide.
- **Healing Centered-** non-clinical strengths based approaches that advance a holistic view of healing and recenters culture and identity as a central feature in well being'
- **Vicarious trauma-** the profound shift in worldview that occurs in helping professionals when they work with individuals who have experienced trauma: helpers notice that their fundamental beliefs about the world are altered and possibly damaged by being repeatedly exposed to traumatic material"
  - Can occur in providers as a result of bearing witness to the experiences of trauma in others
  - Can lead to various levels of burnout and compassion fatigue, impacting high rates of turnover

### SAMHSA Principles of TIA

- Physical and emotional safety
  - Staff and clients feel physically and emotionally safe. Environments are safe and welcoming, and privacy and confidentiality are ensured.
- Collaboration and Mutuality

- Recognition that healing happens in relationship and that power and decision making responsibilities are to be shared at all levels of an organization, staff and clients work in partnership
- Trustworthiness and Transparency
  - Program policies and procedures are conducted with transparency with the goal of building trust among staff and clients, while maintaining professional boundaries. There are clear expectations about what happens and why.
- Empowerment, Voice, and Choice
  - Decisions are made with, instead of for, people. Staff and client experiences and choices are honored and respected. Services are customized for the individual and validate strengths and assets. Self-determination is valid and radical empathy is practiced. (radical empathy = encourages people to actively consider another person's point of view – even when we strongly disagree – in order to connect more deeply with them.)
- Peer Support
  - Individuals with lived experience are a part of all aspects of the organizations ( leadership administration, and direct services), inclusion of peers build trust, established safety and empowers staff and clients, Sharing of lived experience promotes recovery and healing
- Cultural, Historical, and Gender Issues
  - Program offers cultural and linguistically responsive services, attends to implicit biases, recognizes and repairs historical (trans-atlantic slave trade, indigenous genocide, holocaust,) and current harms and celebrated culture

### **Trauma-informed and Equity and Social Justice Intersections**

- Intersectionality
  - Class, race, gender, ability, sexual orientation
- Multiple forms of inequality can compound themselves
- You can't change outcomes without realizing where those outcomes come from

### **NEAR Science**

- A more comprehensive understanding of trauma
- Neurobiology, epigenetic, adverse childhood reactions, resilience
  - **Neurobiology**
    - Prefrontal cortex (thinking center), hippocampus (emotions regulations center), amygdala (fear center)
    - Trauma leads to weak relationship btw prefrontal cortex and hippocampus, and a strong relationship between hippocampus and amygdala
    - Amygdala helps you have that “fight or flight” (or freeze or fawn) reaction
      - This can be heightened if you've experienced trauma
  - **Adverse Childhood Experiences (ACEs)**
    - Abuse, neglect, and household dysfunction
    - More ACEs leads to an increase in adverse health outcomes
  - **Epigenetics**

- Why inheritance is weirder than we thought, they don't affect your DNA, but affect the way it is READ/expressed
- Example of the rats and the smell/shock
- Intergenerational trauma can affect our health outcomes
  - Historical trauma
  - Structural racism, devaluation of people of color
- Resilience
  - People can recover and adapt to difficult experiences
  - It serves us to be resilient when we live in a society that is harmful/traumatic

### **Trauma and healing along the HIV Continuum**

- Healing
  - Supportive services
  - Peer and community relationships
  - Reframing HIV as a chronic disease
  - Culturally and linguistically responsive
  - Wraparound services
  - Radical empathy
- Shifting the question from “what’s wrong with you” to “what’s strong in you”