

TRAUMA TREATMENT

QRTP Infosheet: Issue Two

Trauma treatment helps one acknowledge traumatic events and experiences, recognize symptoms of trauma or adversity, and understand how traumatic events have affected one's life. Some people who have experienced trauma need more specialized assistance in managing their responses and trauma treatment can help with that. Trauma treatment approaches often use various therapies that are tailored to the unique needs of the person receiving services. The primary goal of treatment is to determine the severity of one's trauma and work with them to identify triggers, develop a plan that helps one cope and strengthens one's resiliency.

Principles of TIC¹

When implementing an evidence-based trauma treatment, consideration should be given to the Six Principles as Identified by the Substance Abuse and Mental Health Services Administration (SAMHSA).

Safety

- Throughout the organization, staff, and the people they serve feel physically and psychologically safe.

Peer support and mutual self-help

- Peer support and mutual self-help are key vehicles for establishing safety and hope, building trust, enhancing collaboration, serving as models of recovery and healing, and maximizing a sense of empowerment.

Empowerment voice, and choice

- Organization aims to strengthen the staff, client, and family members' experience of choice and recognizes that every person's experience is unique and requires an individualized approach. This builds on what clients, staff, and communities have to offer, rather than responding to perceived deficits.

Trustworthiness and transparency

- Organizational operations and decisions are conducted with transparency with the goal of building and maintaining trust among youth, family members and staff and others involved with the organization.

Collaboration and mutuality

- Importance is placed on partnering and the leveling of power differences between staff and youth and among organizational staff from direct care to administrators. Everyone has a role to play.

Cultural, historical, and gender issues

- The organization actively moves past cultural stereotypes and biases, offers culturally responsive services, leverages the healing value of traditional cultural connections, and recognizes and addresses historical trauma.

¹ Substance Abuse and Mental Health Services Administration. SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach. HHS Publication No. (SMA) 14-4884. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2014.

Factors for agencies to consider in choosing a trauma treatment model

- Local culture and values of the youth, families, staff, and surrounding community
- Developmental factors including age, cognitive and social domains
- Socioeconomic factors
- Logistical and other barriers to help-seeking
- Availability of individual/family/community strength-based resources that can be leveraged
- Setting where intervention or treatment will be offered
- Training requirements including minimum qualifications of staff implementing the treatment or intervention; ongoing professional development
- Potential for sustainability (e.g., can the model continue if the clinician is no longer available)
- Gather additional information on readiness and adoption by discussions and contact with the treatment model developers

The core components of trauma-focused interventions include:²

- Motivational interviewing (to engage youth)
- Risk screening (to identify high-risk youth)
- Triage to different levels and types of intervention (to match youth to the interventions that will most likely benefit them/their need)
- Systematic assessment, case conceptualization, and treatment planning (to tailor intervention to the needs, strengths, circumstances, and wishes of individual youth)
- Engagement/addressing barriers to service-seeking (to ensure youth receive an adequate dosage of treatment to make sufficient therapeutic gains)
- Psychoeducation about trauma reminders and loss reminders (to strengthen coping skills)
- Psychoeducation about posttraumatic stress reactions and grief reactions (to strengthen coping skills)
- Teaching emotional regulation skills (to strengthen coping skills)
- Maintaining adaptive routines (to promote positive adjustment at home and at school)
- Parenting skills and behavior management (to improve parent-child relationships and to improve child behavior)
- Constructing a trauma narrative (to reduce posttraumatic stress reactions)
- Teaching safety skills (to promote safety)
- Advocacy on behalf of the client (to improve youth support and functioning at school, in the juvenile justice/child welfare system, etc.)
- Teaching relapse prevention skills (to maintain treatment gains over time)
- Monitoring client progress/response during treatment (to detect and correct insufficient therapeutic gains in timely ways)
- Evaluating treatment effectiveness (to ensure that treatment produces changes that matter to clients and other stakeholders, such as the court system)

RESOURCES

[Interventions | The National Child Traumatic Stress Network \(nctsn.org\)](#)

[The California Evidence-Based Clearinghouse for Child Welfare \(cebc4cw.org\)](#)

² National Child Traumatic Stress Network