

TRAUMA

*In staff and
professionals.*

AIMS OF THIS GUIDE

What is trauma?

Types of traumas

Trauma & the brain

Signs & symptoms of trauma

What you can do to support
yourself and your teams.



*Advice for
Professionals*

What is trauma?

Trauma is a person's **emotional response** to a **stressful, frightening** or **distressing** experience or event. A traumatic experience often involves a **threat** to an individual's physical or **emotional safety**, and a sense of being trapped, powerless or unsupported in the face of a perceived danger or in the time afterwards. The harm can be **physical or emotional, real or perceived, directly experienced or witnessed**, and it can threaten the **person** directly or **someone close** to him or her.

Types of traumas

Acute trauma reflects intense distress in the immediate aftermath of a one-time event and the reaction is of short duration. Like a car crash, an assault or sudden loss of a loved one.



Physical or
Sexual Assault



Sudden
Grief



Serious
Accident



Serious
Incident



Bullying



Neglect



Abuse



Domestic
Violence

Chronic trauma can arise from harmful events that are *repeated* or *prolonged*. It can develop in response to persistent behaviours the young person is exposed to.

Complex trauma can arise from experiencing *repeated* or *multiple* traumatic events from which there is no possibility of escape. Like other types of trauma, it can undermine a sense of safety in the world and lead to hypervigilance, constant monitoring of the environment for the possibility of threat.



War



Serious
Illness



Mental
Illness



Substances



Family in
prison



Divorce

Adverse Childhood Experiences (ACEs) cover a wide range of difficult situations that children either *directly face* or *witness* while growing up, before they have developed effective coping skills.

ACEs can disrupt the normal course of development and the emotional injury can last long into adulthood.



Trauma & the brain



When a person experiences something traumatic, adrenaline and other neurochemicals rush to the brain and **print a picture** into the amygdala (which holds emotional memories and fear responses).



The traumatic memory is stored in the amygdala as **sensory fragments** (sight, sounds, smells etc) rather than a story and can **loop** in the emotional side of the brain, disconnecting from the part of the brain that conducts reasoning and cognitive processing. The reasonable part of the brain is **unable to help** the emotionally loaded part of the brain get away from the trauma.



Consequently, after trauma, the brain can **easily be triggered** by sensory input, reading normal circumstances as **dangerous**. For example, a barbecue had been just a barbecue, but now it sounds like an explosion. The sensory fragments are **misinterpreted**.



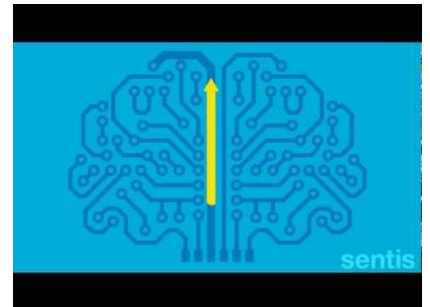
People's brains can remain in a constant state of **hypervigilance** due to losing its ability to discriminate between what is threatening and what is normal. They can experience exaggerated **fight, flight, or freeze** responses or exaggerated **startle responses** because they are in **survival mode** when they are not in danger.



THIS CAN BE FIXED...

Neuroplasticity is the brain's ability to change – to **rewire, relearn** and **strengthen** important connections. Think learning a new language, driving a new journey or playing a new game. When we encounter a new experience (good or bad) our brain will change in response to it.

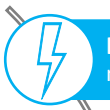
The neuroplasticity that enables **brains to change** in response to trauma also allows them to **heal**. The majority of people's brains **process trauma** over a period of **4 – 6 weeks** following an event.



Exercises that can help promote neuroplasticity includes:

- Mindfulness
- Music and dance
- Art
- Gaming
- Exercise i.e. yoga
- Memory tasks and games i.e. crosswords and sudoku

Signs & symptoms of trauma



Intrusive Thoughts, Images or Flashbacks i.e. memories or thoughts about the event



Strong emotions i.e. sad, angry or anxious



Overreacting i.e. finding it hard to calm down when distressed



Disturbed sleep i.e. not being able to sleep or having nightmares



Withdrawal and Avoidance of things similar or may make you think about what happened.



Disturbed eating i.e. eating more or less than usual



Increased alertness, feeling threat all around.

Trauma affects everyone **differently** but it is **normal** to experience these types of symptoms in the first **4–6 weeks** following the event.

80% of people have these symptoms within the **first month** after a trauma. They can feel horrible and scary, but they are the brain trying to **process** the trauma that the person has been through or witnessed.

For the majority of people these symptoms will **resolve on their own**. However, for a small percentage they may stay, and they may develop **PTSD** and need psychological intervention.

Trauma may affect their... In the following ways

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Bodies	<ul style="list-style-type: none"> • Inability to control physical responses to stress • Chronic illness, even into adulthood (heart disease, obesity)
Brains	<ul style="list-style-type: none"> • Difficulty thinking, learning, and concentrating • Impaired memory • Difficulty switching from one thought or activity to another
Emotions	<ul style="list-style-type: none"> • Low self-esteem • Feeling unsafe • Inability to regulate emotions • Difficulty forming attachments to caregivers • Trouble with friendships • Trust issues • Depression, anxiety
Behaviour	<ul style="list-style-type: none"> • Lack of impulse control • Fighting, aggression, running away • Substance abuse • Suicide

What you can do

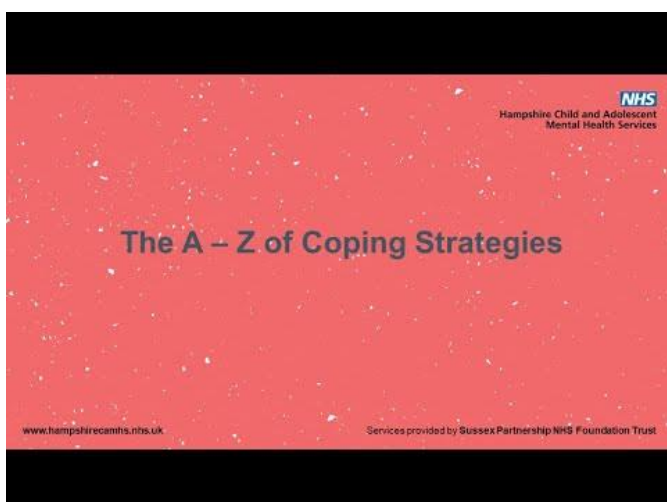
Whilst trauma can have **serious, lasting effects**, there is **hope**. With the help and **support of others** people **can and do recover**. The [Royal College of Psychiatrists](#) (RCPsych) advise that work environments can be **supportive in aiding recovering** from trauma that has occurred either **within or outside of work**. Traumatic events can cause people to feel **unsafe and hyper-alert** to future threats; therefore, a supportive response can create a **sense of safety** and **reduce** the chance of symptoms escalating to a Post-Traumatic Stress Disorder (PTSD) which requires longer-term treatment. A supportive response during the initial **6 weeks** can mitigate the risk for developing PTSD.

For you

- **Identify your trauma triggers** – invest some time in thinking about what can trigger your symptoms. These will be your trauma triggers. If possible, avoid situations that evoke your trauma triggers at least until more healing has occurred.
- **Spend time with people who care for you** – Being in the presence of those that care for you as well as talking to them can be helpful.
- **Do things you know you enjoy** – activities that are soothing, relaxing, or fun, for example, cooking a meal, taking a walk or watching a movie. Try to develop a regular / predictable routine.
- **Show self-kindness** - Use kind words. Give yourself some time. Be kind to yourself when finding things difficult, remember it is normal to have trauma symptoms. Take your time and encourage yourself the way you would others.
- **Practice Grounding & Mindfulness** – coping strategies that are designed to immediately connect you with the present moment and can distract from upsetting thoughts feelings or memories. See these [examples](#).
- **Practice Self Care** - Self-care put simply, is the little things that can help look after someone's mental health. It is the practice of looking after and prioritising your own mental and physical wellbeing. So, listen to how you are feeling and understand what you can do to care for yourself. This will look different for everybody. See these [examples](#).

For your team

- **Talk about what happened** - Allow people to talk about the event at their own time and their own pace. Some people may find it helpful to discuss the event with colleagues for others having external support may be helpful.
- **Create opportunities to check in** - Create a positive environment at work where talking together is encouraged. Normalise stress reactions and provide opportunities for support.
- **Make reasonable adjustments** - To staff's workloads during this initial processing phase. Ask what might be helpful and where possible implement these reasonable adjustments.
- **Reduce Pressure** - During the processing phase cognitive functioning can be affected so where possible reduce pressures associated with deadlines and reduce extra responsibilities.
- **Help to relax** – encouraging all to engage in relaxation and mindfulness strategies to lower high arousal states.
- **Cancel or rearrange** - non urgent or critical events to provide additional time for individuals to process events and to support one another.
- **Seek support and training for your team if needed** - Whether it be through your existing relationships within the school or reaching out to statutory or independent organisations. Seek support for your staff and training if needed.



If symptoms last **longer than a month** and **stop** you doing the things you **normally used to do** then **speak to your GP** to access services to support you.