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Trauma Informed Care for Individuals With Intellectual and Developmental Disabilities

Slide 1

No voiceover

Slide 2

No voiceover

Slide 3

No voiceover

Slide 4: Mental Health Wellness for Individuals with Intellectual and Developmental Disabilities (MHW-IDD)

Certificates of completion are available for each module. Please print or save your certificate immediately following completion of the course as they will NOT be available to you at a later time.

It is estimated that it will take you 50 minutes to complete this module. It **does** need to be completed in one sitting as your work will be lost if you close out this program during the middle of the module.

You can pause or back up at any time during the training but you cannot fast forward through slides. Slides will automatically advance once the voiceover is complete

Your computer must have speakers or you can attach headphones or ear buds, so that you can hear the information said by the presenter. For those who are deaf or hard of hearing, a narrative of each slide is available in the Resources section of this online training.

Slide 5: Trauma Informed Care for Individuals with IDD

This module is directed towards Direct Service Workers, or DSWs, as they are fundamental to supporting recovery and mental wellness in individuals with IDD with trauma histories. However, the intended audience truly extends beyond those who are paid direct service workers. While the focus is on DSWs, the information in this module applies to all caregivers and other people who support individuals with IDD and who have trauma histories

In this module, we will:

1. Introduce the concept of trauma informed care
2. Review the signs and symptoms of trauma often experienced in people with Intellectual and Developmental Disabilities
3. Identify strategies for working with individuals with trauma histories and Intellectual and Developmental Disabilities

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Outline

- I. Introduction to Trauma Informed Care
- II. What is Trauma?
- III. Trauma-Informed Care: Using A Trauma-Informed Care Approach
- IV. Trauma: The Effects on Our Brain and Behavior
- V. Signs and Symptoms of Trauma
- VI. The Important Ingredients for Mental Wellness

Outcome:

By the end of the module, learners will be able to assist in using a trauma-informed care approach in supporting individuals with Intellectual and Developmental Disabilities IDD.

Slide 6: Introduction to Trauma Informed Care

In your role as someone who supports individuals with IDD, have you ever worked with someone that has become extremely upset, maybe even aggressive at times for no apparent reason? Did you ever support someone who, in particular situations or around certain people, would become almost terrified for reasons that did not seem to make sense to you? Some of these individuals may have even responded in these situations by withdrawing, avoiding them all together, or having self-injurious or aggressive behavior.

It could be that these individuals have experienced some kind of trauma in their lives, perhaps sexual or physical abuse, or excessive bullying. Studies show that trauma experienced early in life can affect the way we think and behave throughout our entire lives.

Slide 7: Introduction to Trauma Informed Care: The Story of Joanne (Slide 1 of 4)

Joanne, was a woman who has moderate intellectual disability and limited functional skills, was abandoned by her family at an early age. She, spent the majority of her life in numerous living facilities to support her needs. Although Joanne did have some limited speech, she generally communicated through signs, gestures or behaviors instead of verbal communication. Tragically, Joanne was raped both by other residents and by staff during her time in several previous living facilities. By the time she moved out in her 30s, Joanne regularly engaged in self -injurious behaviors. Her skin was covered with scars and her ears had pieces of flesh missing. Joanne would also attack people without any reason.

Slide 8: Introduction to Trauma Informed Care: The Story of Joanne (Slide 2 of 4)

Because she had been abused for years by the people she lived with and some who were charged with caring for her, Joanne did not trust anyone. She would test staff that began working with her. She would do whatever she had to in order to get them fired or cause them to quit - often this would involve violence. Joanne was known for being

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aggressive toward others. Some staff felt she had a “bad attitude” and would make comments in front of her about her “bad behavior.” Generally, most DSWs would not want to work with her or spend time with her because of her challenging behavior.

Slide 9: Introduction to Trauma Informed Care: The Story of Joanne (Slide 3 of 4)

There was one staff member named Linda that Joanne came to trust. Linda had worked with another individual who had been sexually abused and was not put off by Joanne’s challenging behavior. When Linda first started working with Joanne she noticed that when other DSWs reacted negatively to Joanne it only reinforced Joanne’s behavior. Linda was patient and went out of her way to show kindness and respect to Joanne despite the challenging behavior. Linda was consistent and approachable with Joanne and when Joanne tried to “test” her, Linda did not take it personally. She truly liked Joanne and that came across genuinely. Joanne saw that Linda was not scared of her and that she cared about her.

Slide 10: Introduction to Trauma Informed Care: The Story of Joanne (Slide 4 of 4)

Linda did not tell Joanne what she had to do or what she needed to do, as some of her previous DSWs had done; she knew this could lead to power struggles. Instead, she tried to give Joanne choices when making a decision. Through her encouragement and example, Linda showed Joanne how to advocate for herself instead of using challenging behavior. Because of their connection, Joanne began to show signs of enjoying her life, including smiling, laughing, reduced aggressive behavior towards staff and limited self-injurious behavior. She also stopped having the nightmares that had haunted her as long as she could remember. Joanne finally felt safe and cared about.

Linda did not focus on, or ask Joanne, “What is wrong with you?” Instead Linda approached Joanne by asking, “What has happened to you?” The goal was not to “fix” Joanne or her behaviors. Rather, the goal was to address Joanne’s past trauma by supporting her and helping her to feel safe and valued. Linda achieved this by using a trauma-informed care approach.

Slide 11 What is Trauma?

What is trauma exactly? Trauma is an emotional response which results in feelings of fear, threat to life, horror, and helplessness. It comes from experiences that are physically or emotionally harmful, life threatening, and has lasting effects on the person. These effects can include mental, physical, social, emotional and spiritual well-being.

According to SAMSHA, the governmental agency for substance abuse and mental health administration “Trauma results from an event, series of events or set of circumstances that are experienced by an individual as physically or emotionally harmful or life threatening, and have lasting adverse effects on the individual’s mental, physical, social, emotional, and spiritual well-being.” (SAMHSA, 2014, *SAMHSA’s concept of trauma and guidance for a trauma-informed approach.*)

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Slide 12: What is Trauma? Big “T” Traumas

Francine Shapiro, a well-known trauma psychologist, talks about little t and big T traumas, meaning that trauma comes in all sizes. Trauma can be caused by a single event or through the impact of ongoing abuse over time. Some individuals who experience extreme or repeated trauma develop severe symptoms of trauma and have great difficulty functioning. Big “T” events are things such as a natural disaster, physical assault, sexual assault, death or a horrible accident.

Slide 13: What is Trauma? Little “t” Traumas

There are smaller traumas that also effect people. Little “t” events such as being bullied or excluded, can be devastating to a person who is experiencing them. Individuals with IDD are more prone to experiencing ongoing little “t” traumas, such as:

- Repeated rejection and invalidation
- Bullying, being teased, name calling
- Being discredited or ignored
- A lifetime of people trying to “fix” you
- Living in situations where you lack control
- Having extended hospitalizations, or
- Abandonment by family, relatives, friends or even just expecting a phone call or visit from a relative but never received

It is important to understand that trauma is based on the individual’s experience and perception of the experience. Everyone experiences trauma differently, and so one person may respond differently than another who has gone through the same experience.

Slide 14: What is Trauma? Vulnerability in IDD

In addition to being more likely to experience these traumas, people with IDD may be more vulnerable and easily hurt by these events because they may not be able to process their thoughts as easily as others, or they may have less access to social supports needed to cope with these feelings. Studies have shown that people with friends and social support are far more resilient (recover more quickly from difficult situations) when facing traumatic events than those without such support. There are some people who suffer traumatic events and do not develop ongoing symptoms of a traumatic disorder. More often than not, these people have strong social networks and support. However, this is often not the case for individuals with IDD.

Slide 15: What is Trauma? Statistics

In 2012 the Spectrum Institute surveyed over 7,000 individuals with disabilities nationally and found that 70 percent reported experiencing physical, sexual or financial abuse. Ninety (90) percent of these said that it was ongoing, and only 37 of these

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percent reported anything to the authorities. And these statistics reflect only individuals who use words to communicate and may not have advocates who report such abuse. (<http://disability-abuse.com>)

Research has shown us, experiences of trauma can have serious negative impacts on psychological, social, and medical outcomes throughout a person's life. Individuals with IDD who have experienced trauma, can and do experience the same types of mental health conditions as any of us. Sometimes we just need to look a little harder to recognize it.

For more information on the impacts of early traumatic experiences and associated negative outcomes, you can access the following resource. <http://www.cdc.gov/violenceprevention/cestudy/>

Slide 16 Trauma-Informed Care: Using a Trauma-informed Care Approach (Slide 1 of 3)

Let us next move on to how to use a trauma informed care approach. A trauma-informed care approach is one in which the service providers

- 1) *Realize* the widespread impact of trauma and *understand* the path to recovery,
- 2) *Recognize* the signs and symptoms of trauma, and
- 3) *Seek* to put knowledge about trauma into practice.

"A trauma-informed care approach can be implemented in any type of service setting or organization." (<http://www.samhsa.gov/trauma>)

Slide 17: Trauma-Informed Care: Using a Trauma-informed Care Approach (Slide 2 of 3)

The trauma-informed care approach looks at challenging behavior in a new way. People with IDD who have a history of trauma may have challenging behavior which we do not always recognize as symptoms of their trauma. Do not assume that behaviors are due to a person's disability. For a person who has experienced trauma, behavior can be a learned way of keeping themselves physically and mentally safe. Behavior also lets us know what is going on with an individual and it is often up to the direct service worker (DSW) or caregiver to figure out what the individual is unable to tell us. If you focus solely on an individual's behavior instead of the individual's mental wellness, this can greatly reduce the chances for helping the person achieve a better quality of life. This factor is important to remember because you may not always be aware of the history of trauma in the people you support.

Slide 18: Trauma-Informed Care: Using a Trauma-informed Care Approach (Slide 3 of 3)

In a trauma informed care approach, we show each person respect and dignity. We help people to feel safe and accepted in a way that helps them to move forward in their lives and have a new level of hope each day.

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It is good for everyone to interact in this way, even with those who have not experienced a trauma. All of us need to be treated with dignity and respect. For individuals who have been traumatized, it is especially important that we are thoughtful in our approach.

Slides 19 and 20: Application exercise

Slide 21 Trauma: The Effects on Our Brain and Behavior (Slide 1 of 3)

How does trauma affect our brain? There is a part of our brain that stores all of our emotional memories called our amygdala (a-mig'-da-la). It flashes danger whenever it sees something that looks like it will bring harm. A harsh word, a flash of a knife, a threatening situation are examples of possible triggers that may cause an amygdala to start flashing "danger! danger!" A trigger is something that occurs that sets off a certain reaction or behavior. When something reminds an individual of a traumatic experience, it can trigger them to re-experience, or re-live the trauma all over again.

Triggers are sights, sounds, smells or touches that remind a person of trauma. Almost anything could be a trigger to someone. And that is why we need to find out what is upsetting the individuals we support as well as what helps them get through those tough moments. The DSW who is aware of someone's trauma history, is alert to triggers in the environment which will help them to be responsive, using a trauma-informed care approach.

Slide 22: Trauma: The Effects on Our Brain and Behavior (Slide 2 of 3)

For example, if an individual's trigger is being in the woods, because that is where their abuse happened, if while watching a movie, there is a scene in the woods, the DSW or caregiver will acknowledge it and may:

- Acknowledge the fear and empathize. Offer a calming comment like, "You look scared. I wonder if you are worried that you will be hurt again" or, "you are safe here with me."
- Respect the individual's feelings and try to offer choices to the individual, such as offering a break or a different movie option.
- Be patient. If the individual has become upset it may require the DSW to put in some time to help support the individual. If the individual cannot communicate verbally or has more severe disabilities, the DSW may also need to be more patient to make sure that the individual feels safe and that their choices are met. For instance, Don't assume they are traumatized and turn off the movie just because they see a scene with woods.

Slide 23: Trauma: The Effects on Our Brain and Behavior (Slide 3 of 3)

Keep in mind, when the trauma that someone has experienced is excessive, that person may begin to think they are always in danger and can behave in a way that may seem

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strange to us, as though being threatened, when they are in fact safe. They may fight a lot, run away or become upset about everything. They may need constant attention in order to feel safe.

Slide 24: How to help Using a Trauma-Informed Care Approach: Introduction

When an individual is feeling unsafe and is responding to a trigger that is causing them to re-experience the trauma, this can be a crisis for the person. It can also result in the person demonstrating challenging behavior consequently distressing a DSW or caregiver who wants to help calm the individual down.

It is important to remember that this person is re-living the trauma and it is not the time to attempt to negotiate with them (e.g., saying things like “you need to calm down or you won’t be allowed to go on the outing”).

Similarly, interventions such as restraint do the opposite of making someone feel safe, by making the person feel fearful, overpowered and totally out of control. In fact, individuals who have been restrained or even DSWs who have participated in a restraint can suffer trauma. In more cases that not, if we catch the person when they are showing signs of being triggered or unsafe, we can help reassure and comfort them and, in that way, avoid any possible use of restraints. Using a trauma-informed care approach will help to prevent situations where crises occur.

Slide 25: Application Exercise

Slide 26: How to help Using a Trauma-Informed Care Approach: Examples

Often, if we are able to see that the person is beginning to see himself as being in danger (we may see their behavior escalate), we are going to want to help that person to feel safe, comforted and grounded before they become dangerous to themselves or others. Having an established connection with the individual, being aware of what the person’s triggers are and knowing what their strengths are will help support them through the crisis. It is possible to support someone in crisis without knowing these things. A person who is having a trauma response needs to feel safe and supported before all else. You can assist them in calming down by:

- Listening to the person’s feelings
- Being present and unafraid of them
- Being patient and undemanding
- Not engaging in power struggles
- Offering an alternative situation or stimulation that is calming such as deep breathing, music or going to a sensory room

Slide 27 Signs and Symptoms of Trauma (Slide 1 of 4)

Let’s talk next about some symptoms of trauma that people experience. Some people have intrusive thoughts or memories, meaning traumatic memories from the person’s

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past may frequently upset them and interfere with his or her ability to live in the present moment. They may re-experience a trauma over and over. A person may have recurring nightmares. Often these nightmares can be so disturbing that they disturb the person's daily life.

The person may experience flashbacks. A flashback is when someone believes the traumatic event that happened in the past is actually happening to them at the present moment. It can be extremely horrifying and may even feel life threatening. For a DSW, supporting someone who has IDD, this can even be mistaken for mental illness, because it looks like the person may look as though they are hearing or seeing things that are not there; they may get a "glassy-eyed look" and won't respond to attempts to bring them out of it. These events may come without any warning.

Slide 28 Signs and Symptoms of Trauma (Slide 2 of 4)

Sometimes people who've experienced trauma will avoid people, places or things that remind them of the trauma. For example, there have been many instances of people with disabilities who have experienced unwillingness to shower and it was later discovered that they had been sexually abused in the shower in the past. People can develop obsessions with a thought or activity and people perform rituals or odd routines and exhibit self-injurious behavior in order to avoid feeling unsafe. These can take the form of rocking, head banging, skin-picking and hand biting. For these individuals, these ritualistic behaviors can relieve stress.

Of course it does not mean that everyone with IDD who doesn't want to take a shower or who has obsessive behaviors has been traumatized. These are just common symptoms that people who've experienced trauma often do live with. But knowing these symptoms does help us in developing a trauma-informed approach and to support the individuals who've experienced trauma in achieving wellness.

Slide 29 Signs and Symptoms of Trauma (Slide 3 of 4)

Some people might be fearful of things that seem enjoyable to others. They can suffer from depression and may always expect something bad to happen. Some DSWs may know an individual that they support who has experienced trauma that has physical complaints or seems to be sick all the time, but has been to the physician and has no obvious physical problems. This can be a symptom of trauma.

People responding to trauma are often misunderstood. Sometimes we might think that an individual is being deliberately aggressive or manipulative, when in reality they are merely trying to protect themselves from some perceived danger. These symptoms may appear to be solely behavioral problems but the individuals experiencing them often do not respond to medication or traditional behavioral interventions.

Slide 30: Signs and Symptoms of Trauma (Slide 4 of 4)

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These symptoms described in these last few slides are all very serious. A person dealing with symptoms of trauma is in pain and what they need most is support.

To learn more about the signs and symptoms of trauma, including information on Post-Traumatic Stress Disorder, or PTSD, please refer to the Resources section of this course. A list of more specific examples is available for you. Additionally, the first module of this online training includes specific symptoms on PTSD.

Slide 31: The Important Ingredients for Mental Wellness And How You Can Make A Difference: Introduction

We have now reviewed how people with IDD are affected by traumatic events, big and small, and we've discussed the effects of trauma on the body and behavior and symptoms trauma. Now let's talk about how people move beyond their trauma to achieve wellness. According to Judith Herman, a world-renowned trauma specialist there are three important ingredients for healing. . Therapy is important as well, but she points out in her book, *Trauma and Recovery*, that therapy is not effective without these three ingredients. They are

- 1) Safety
- 2) Connection
- 3) Empowerment

Let us look at each of these three ingredients in the lives of people with IDD.

Slide 32: The Important Ingredients for Mental Wellness and How You Can Make A Difference: Safety (Slide 1 of 5)

Someone who has experienced a traumatic event or some form of ongoing trauma knows that safety becomes a big priority. Am I safe from further trauma? Has my situation changed enough that I will not be vulnerable again? What is the next bad thing that is going to happen? These are the questions that people ask themselves who have been traumatized.

Safety is an emotional issue for people, especially for those who've endured trauma. The individuals we support have to know that the people they are depending on truly have their best interests at heart and have no intention to hurt them. In order to help people feel safe, we need to communicate that we are safe people and that we care about them. This may seem obvious, but it has to be made clear over and over to the person with a history of trauma.

Slide 33: The Important Ingredients for Mental Wellness and How You Can Make A Difference: Safety (Slide 2 of 5)

We need to give people who have experienced trauma a lot of reassurance. We also need to be honest with them about what their limits are. For example, If we reassure them that we will be going to the doctor's office for a checkup and there is nothing to

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worry about and then upon arrival they find out that blood will be drawn, this may damage their sense of safety and relationship with you.

We can establish safety by controlling factors in the environment so that the person does not become triggered or upset. If we know a person's triggers, we can make sure, when possible, that those triggers are not part of the immediate environment. We can also prepare for the events when the triggers will be around. We can prepare the person we are supporting; we can practice calming techniques; and we can make sure that there are extra supports in place when possible, and let them know what to expect to minimize their stress and reduce the chance of a crisis.

Slide 34: The Important Ingredients for Mental Wellness and How You Can Make A Difference: Safety (Slide 3 of 5)

When a person is having symptoms of trauma or having challenging behavior, a technique that a DSW can use to calm the person down is to say something like, "Walk with me, talk with me." The point of this is to help the individual with IDD walk away from the triggering event and share his or her feelings verbally, if possible, instead of behaviorally. Even those who are unable to communicate verbally can be comforted by a supportive staff member who understands them and can help them walk away from a difficult situation.

Did you know that only a small fraction of your communication is verbal? The large majority of how we communicate is through body language and tone of voice. People use gestures, facial expressions, voice tone, posture and behavior to communicate. Understanding what someone is "telling" you or "listening" to them, doesn't always mean that they are verbally communicating with you. A DSW knows there are a lot of ways that we can learn to understand and connect with the people we support.

Listening, being present, and guiding the person in a warm manner helps an individual escape from the thing that that is causing the response and move into a safe and comforting space. Just assisting that person in calming down by providing emotional support at that crucial moment can be highly effective.

Slide 35: The Important Ingredients for Mental Wellness and How You Can Make A Difference: Safety (Slide 4 of 5)

DSWs who are practicing a trauma-informed care approach ask a person "What happened to you?" or "How are you feeling?" rather than "What's wrong with you?" A DSW needs to understand what the individual may have been through. To be able to express your feelings without being judged or corrected helps us all. It is so important for people with IDD, some of whom have never had someone who cared enough to listen to them, to be validated.

It may take extra time and effort to discover what they are communicating, but the time

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and effort will pay off if it results in the individual feeling safe and valued.

Slide 36: The Important Ingredients for Mental Wellness and How You Can Make A Difference: Safety (Slide 5 of 5)

Here are a few suggestions on what you can do to help individuals feel safe.

- Establish rapport with the person. Get to know them.
- Listen to the person! This does not have to be verbally. It can be through their actions and behaviors- find out what the person's language is and learn what they are trying to tell you.
- Respect their personal space and property.
- Make yourself available to the person.
- If you are assisting the person with a personal task (i.e. bathing), let the person know what you are doing. This may be especially important for someone that has been sexually abused.
- Learn the person's triggers. Help them to avoid triggering situations and be prepared to help them if they come across something that triggers past trauma.
- Identify the person's strengths and learn what helps them to calm down. Practice these skills.
- Be honest with the person even if you think they will not be happy about the outcome. This shows that you respect them and that they can trust you.
- "Walk with me, talk with me"

Slide 37: The Important Ingredients for Mental Wellness and How You Can Make A Difference: Connection (Slide 1 of 3)

The next ingredient to effective support is connection. We now know that the more friends and support systems people have the more resistant they are to the negative effects of traumatic events. Our friends and support networks help us move beyond our past traumas and can also help us to be stronger in the present. It is so important for people with intellectual and developmental disabilities to be included in this wonderful process. They need strong support networks and this starts with having people in their lives who genuinely care for them and enjoy being with them.

Slide 38: The Important Ingredients for Mental Wellness and How You Can Make A Difference: Connection (Slide 2 of 3)

DSWs can wear many hats - a supporter, an encourager, a friend, a teacher. They can be essential in helping an individual see their potential. The DSW can do something as simple as help the individual make a phone call or do something more complicated like support the person over time, through their dedication and encouragement, find strengths that they did not know they had.

The nature of the relationship with the DSW is just as important. A positive and trusting connection makes all the difference in the world. When we are consistent with the people we work with and communicate genuine concern for their well-being, we can

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eventually form a strong and positive connection with them. This connection actually helps people get over the bad things that happened in the past and enjoy the present.

Slide 39: The Important Ingredients for Mental Wellness and How You Can Make A Difference: Connection (Slide 3 of 3)

Here are a few suggestions on what you can do to help individuals feel connected!

- Be respectful; use person centered language
- Be conscious of your tone of voice and even how fast you talk
- Be patient and give the person the time *they* need. You are there to support them
- Be aware of your body language. This may be especially important to remember when an individual has challenging behavior that upsets you
- Find the person's strengths and celebrate them.
- Help the person build upon already established connections, such as friends, family, church groups, community groups, sports teams, etc
- Help the person get involved in things they like to do

Slide 40: The Important Ingredients for Mental Wellness and How You Can Make A Difference: Empowerment (Slide 1 of 2)

The last ingredient is empowerment. Nobody wants to be without power and control over his or her life. Everyone wants the opportunity to make some choices. Feeling powerless can be even more challenging for someone with IDD who is dependent on others to have their daily needs met. That is why it is important we find ways in which the individuals who we support can have real choices in as many aspects of their life as possible. It is just as important not to mislead individuals about the amount of control they have. For example, a DSW should not tell an individual that they do not have to take a bath, only to have the person find out later that bathing is not optional. A DSW may offer the individual the choice of taking a bath in the morning after they wake up or after they've had a chance to eat breakfast or in the evening. They may also offer a shower vs. a bath. A sense of control is critical in moving past trauma and achieving recovery and mental wellness.

In some cases, some individuals who feel powerless will engage in dangerous behavior, such as aggression or self-injury to try and gain some control over their lives. For people who have more severe disabilities or fewer verbal skills, this is often a primary means of expressing their control. The more people can have real positive choices and power, the less they will resort to negative disruptive behaviors to regain control. This is an important part of achieving mental wellness.

Slide 41: The Important Ingredients for Mental Wellness and How You Can Make A Difference: Empowerment (Slide 2 of 2)

Here are a few suggestions on what you can do to empower people.

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- Support the person in making decisions for themselves. Give them real options whenever you can.
- Be collaborative. Instead of making decisions for an individual, support them in make choices as much as they are able.
- Provide the person with opportunities to learn new skills, based on their strengths and interests.
- Assume that the person is able to participate in their care and wellness.
- Appreciate where the person is coming from and do not be scared of them or the trauma they've faced.
- Give the person honest and frequent praise for their successes.

Slide 42: The Important Ingredients for Mental Wellness and How You Can Make A Difference: Summary

People with IDD are people first. We all need safety, connection and empowerment in order to achieve mental wellness.

You are some of the most important people in the lives of those who have IDD and have experienced trauma. What DSWs do every day provides a foundation for the individual's ongoing recovery. The DSW is a critical part of that individual's team. When trauma symptoms are affecting an individual, often, therapy and trauma treatment are valuable in the process of recovery. But the role of the DSW is foundational. The entire team works together with the DSW at the center of this life-saving work!

Slide 43: Application Exercise

Slide 44: The Important Ingredients for Mental Wellness and How You Can Make A Difference: The Toll Taken

It is true, that sometimes being the DSW or caregiver who directly works with an individual who is traumatized and has challenging behavior can take its toll. You may find yourself somewhat traumatized after a difficult behavioral event. You may also feel a sense of horror at the events individuals share with you that occurred in their lives. And finally, you might have endured difficult circumstances yourself and have your own trauma. It takes dedication and commitment to support individuals with IDD who've experienced trauma and it's not always easy!

It is important to practice self-care and find ways to release stress in the healthiest manner possible that fits your personality and life style. For some, its exercise and sports, for others its hobbies like cooking, gardening, playing or listening to music. For others it's finding time to be with friends and family; and for some it's all of the above!

Slide 45: The Important Ingredients for Mental Wellness and How You Can Make A Difference: Self-Care

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We all need to take care of ourselves if we are going to be able to do this important and life-changing work. It helps to know that as a DSW you are a part of a team and not working in isolation. Sometimes support from a coworker can make all the difference in the world. Remember that your team can be a source of self-care, when they are supportive of each other and attentive to each other's level of stress.

In addition, many employers offer mental health assistance that is confidential via programs called Employment Assistance Programs or EAPs. Please see the references for these programs. These are additionally available to you in the Resources section of this online training. Still other employers promote physical health through incentivized health care. One way or another, taking time for yourself is a must!

Slide 46: Application Exercise

Slide 47: The Important Ingredients for Mental Wellness and How You Can Make A Difference: Self-Care Examples

Self-care activities may include:

Go to a quiet place, close your eyes and breathe deeply

Relax your muscles

Take time to get up and stretch for 5 minutes 5 times each day

Take a walk every day for at least 10-15 minutes

Exercise

Listen to some music that you like

Practice art, or just doodle

Write in a journal

Meditate

Keep a clean workspace

Read a non-work related book that you like

Slide 48: The Important Ingredients for Mental Wellness and How You Can Make A Difference: Resources

Here are some additional resources available to you. These can be found in the Resources section of this online training. :

- PTSD hotlines: <http://ptsdusa.org/get-help/hotline-crisis-numbers/>
- SAMSHA Trauma Informed Care and Alternatives to Seclusion and Restraint: <http://www.samhsa.gov/nctic/trauma-interventions>
 - o SAMSHA Suicide Prevention 24/7 hotline: [1-800-273-TALK](tel:1-800-273-TALK) (8255)
 - o SAMSHA National Helpline for MH/SA treatment referral: 1-800-662-HELP (4357)
 - o SAMSHA Disaster Distress Hotline: 1-800-985-5990 or text TalkWithUs to 66746 (provides crisis counseling and support to people experiencing emotional distress related to natural or human-caused disasters)
- If you are faced with a **medical emergency**, please dial 9-1-1.

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- If you are **contemplating suicide**, please call
 - 1-800-273-TALK (8255) or TTY 1-800-799-4TTY (4889)
 - Red Nacional de Prevencion del Suicidio 1-888-628-9454

Slide 49: The Important Ingredients for Mental Wellness and How You Can Make A Difference: The Story of John (Slide 1 of 3)

John was 34 years old and had Downs Syndrome. He was raised in a loving and caring family his entire life until his father had a heart attack and died in front of him in their home. John was traumatized by this experience. His mother, who had been diagnosed with dementia, was placed in a nursing facility several weeks after his father's passing. John's world was shattered. John came to a provider agency and received day and residential services and supports there. He was continually talking about seeing his father die in front of him. He would repeatedly say, "I told him to get up! I told him to wake up!" John, who had never had any challenging behavior, would now at times become aggressive at home and at work. He began hitting other residents and co-workers. He sometimes threw things and broke furniture. Sometimes, when he saw someone asleep at home, such as his housemates, he would start screaming that the person might be dead. He would often burst into tears and say again "I told him to wake up!" Later, John would state that during those times he saw his father's body.

Slide 50: The Important Ingredients for Mental Wellness and How You Can Make A Difference: The Story of John (Slide 2 of 3)

One day John got a new DSW, named Ed. Ed had been through a lot of loss himself and understood John. Ed did not tease John and instead spent a lot of time getting to know him. He saw John on a daily basis and learned about some of John's interests and strengths. Ed listened to John, and even though John's verbal communication was limited and at times difficult to understand, Ed took the time to really hear him. He learned that John used to enjoy playing basketball and that he used to play for the Special Olympics, but had not done that since his mother had been diagnosed with dementia. Ed also learned that John really liked country music and was able to help John to get a CD player and some of his favorite country music CDs. John's love of listening to country music was something that soothed him when he became upset. Ed used this information to help develop a plan for when John was triggered. He now had tools he could use to help John calm down if he was in crisis. When John became aggressive one day, Ed did not react emotionally. He acknowledged that John seemed upset; he let John know that he was there and that it was safe and asked John he would like to listen to listen to his music, as they had practiced.

Slide 51: The Important Ingredients for Mental Wellness and How You Can Make A Difference The Story of John (Slide 3 of 3)

Ed took John to different places in the community that he seemed to enjoy. He got John involved in a monthly basketball game at the local community center and encouraged John to make friends with other members. Ed made a point of helping John visit his

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mother in the nursing facility. He helped John visit his brother and nephews as well. By assisting John to strengthen his connections with his family, John began to feel a part of his family again and re-connected to these relatives. Through Ed's listening to John and assisting him in making more choices about his daily life, John's quality of life improved.

After roughly 6 months of Ed helping John create new connections and making his home environment more enjoyable, including being free from teasing, John's behavior completely changed. He was with someone who really understood him, communicated with him, and cared about him. Ed made all the difference in John's world and as a result, John finally began achieving recovery and mental wellness.

Slide 52: Trauma Informed Care: Summary

To summarize, here are some things to consider when supporting individuals with IDD using a trauma-informed approach

- Approach the individual by trying to determine "what happened to him," instead of asking "what's wrong with him."
- Focus on building a trusting relationship by supporting the individual rather than making choices for them.
- Remember that behavior is a form of communication and try to determine what the individual is trying to tell you through their behavior.
- Instead of simply trying to change or manage an individual's behavior, consider seeking consultation by a mental health professional and getting a comprehensive mental health evaluation. Always consider a multi-modal approach.
- Be the friend you would want to have.
- Don't give up on the individual!
- Recognize that people with IDD do experience mental illness, including the impact of trauma, and with quality mental health treatment and support they can recover.
- Recognize when you need to step back and take care of yourself so that you will be able to have a positive impact on the person you are trying to support.

Slide 3 Final quiz