

***ILOTA***

***PEDIATRIC SIS TOWN HALL:***  
**TRAUMA INFORMED CARE**

Jessica Weiler, OTD, OTR/L, CTRP

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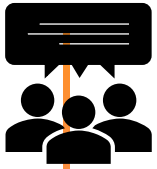
- I am a pediatric occupational therapist currently working in early intervention and private practice
- My career has focused on mental health promotion, trauma informed care, strengths-based approaches, and neurodiversity affirming practices
- Occupational therapy's history is founded in mental health practice, and I enthusiastically believe that we have the unique and specialized skills to integrate trauma informed practices in our therapeutic interventions in any practice setting





**POLL QUESTION 1:**

**WHAT SETTING DO  
YOU WORK IN?**



**Schools/ Education**



**Hospital/ Medical**



**Early Intervention/ Birth to 3**



**Clinic/ outpatient/ private practice**

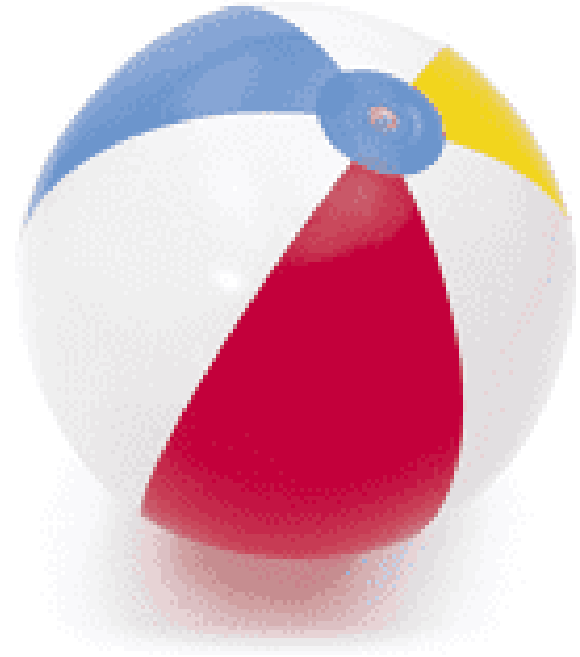


**Other**



## POLL QUESTION 2:

- + ○ HOW MUCH KNOWLEDGE DO YOU HAVE ON THE TOPIC OF TRAUMA INFORMED CARE? + ○



# Participation

- Poll Questions
- + • Chat Questions
- Questions in the Chat
- 

## SYMBOL KEY



Website link



+  
Document ○  
•



Question or  
discussion

# Guiding Structure

- + 1. TRAUMA DEFINED
- 2. TRAUMA AND THE BRAIN
  - 3. PHYSICAL IMPACT OF TRAUMA
- 4. OTS AND TRAUMA
- 5. SUPPORTING TRAUMA
- 6. APPLICATIONS IN VULNERABLE POPULATIONS

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# TRAUMA DEFINED





# CHAT QUESTION 1:

HOW WOULD YOU  
DEFINE TRAUMA OR

WHAT WORDS COME  
TO MIND WHEN YOU  
THINK OF TRAUMA?

# WHAT IS TRAUMA?



# TRAUMA IS PERVASIVE

The national average of child abuse and neglect victims in 2013 was **679,000**, or **9.1 victims** per **1,000 children**.<sup>2</sup>



About **1 in 7** children experienced child abuse and neglect in the last year.



[SAMHSA](https://www.samhsa.gov)



[CDC](https://www.cdc.gov)



# Understanding Child Trauma



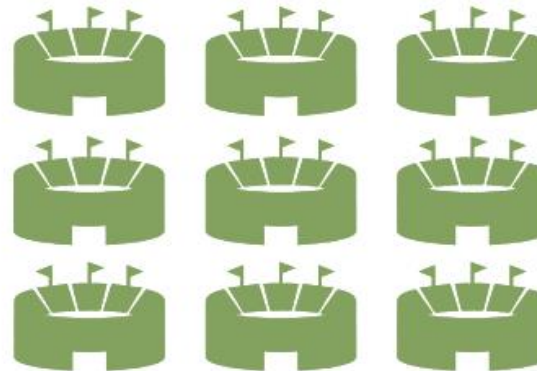
Child trauma occurs more than you think.

More than **TWO THIRDS OF CHILDREN** reported at least 1 traumatic event by age 16.<sup>1</sup> Potentially traumatic events include:

- PSYCHOLOGICAL, PHYSICAL, OR SEXUAL ABUSE
- COMMUNITY OR SCHOOL VIOLENCE
- WITNESSING OR EXPERIENCING DOMESTIC VIOLENCE
- NATURAL DISASTERS OR TERRORISM
- COMMERCIAL SEXUAL EXPLOITATION
- SUDDEN OR VIOLENT LOSS OF A LOVED ONE
- REFUGEE OR WAR EXPERIENCES
- MILITARY FAMILY-RELATED STRESSORS (E.G., DEPLOYMENT, PARENTAL LOSS OR INJURY)
- PHYSICAL OR SEXUAL ASSAULT
- NEGLECT
- SERIOUS ACCIDENTS OR LIFE-THREATENING ILLNESS

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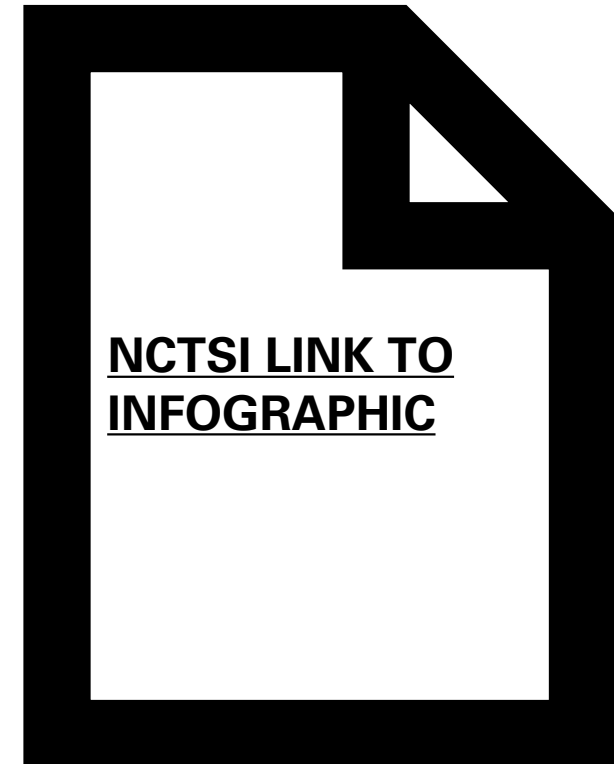
Each year, the number of youth requiring hospital treatment for physical assault-related injuries would fill **EVERY SEAT IN 9 STADIUMS.**<sup>3</sup>



**1 IN 4** HIGH SCHOOL STUDENTS was in at least **1 PHYSICAL FIGHT.**<sup>4</sup>



1 in 5 high school students was bullied at school; **1 IN 6 EXPERIENCED CYBERBULLYING.**<sup>5</sup>



**NCTSI LINK TO INFOGRAPHIC**

# TRAUMA IS A PERSONAL EXPERIENCE

- “When a child feels intensely threatened by an event they are involved in or witnesses, we call that event a trauma. There is a range of traumatic events or trauma types to which children and adolescents can be exposed” (NCTSN, 2022)
- There are different types of trauma
- Adverse Childhood Experiences
- How childhood trauma affects health across a lifetime





# POLL QUESTION 3:

*TRUE OR FALSE*

**TRAUMA IS A SENSORY  
EXPERIENCE**



# **TRAUMA IS A SENSORY EXPERIENCE**

**BUT WHAT DOES THAT MEAN?**



# QUESTION CHECK IN

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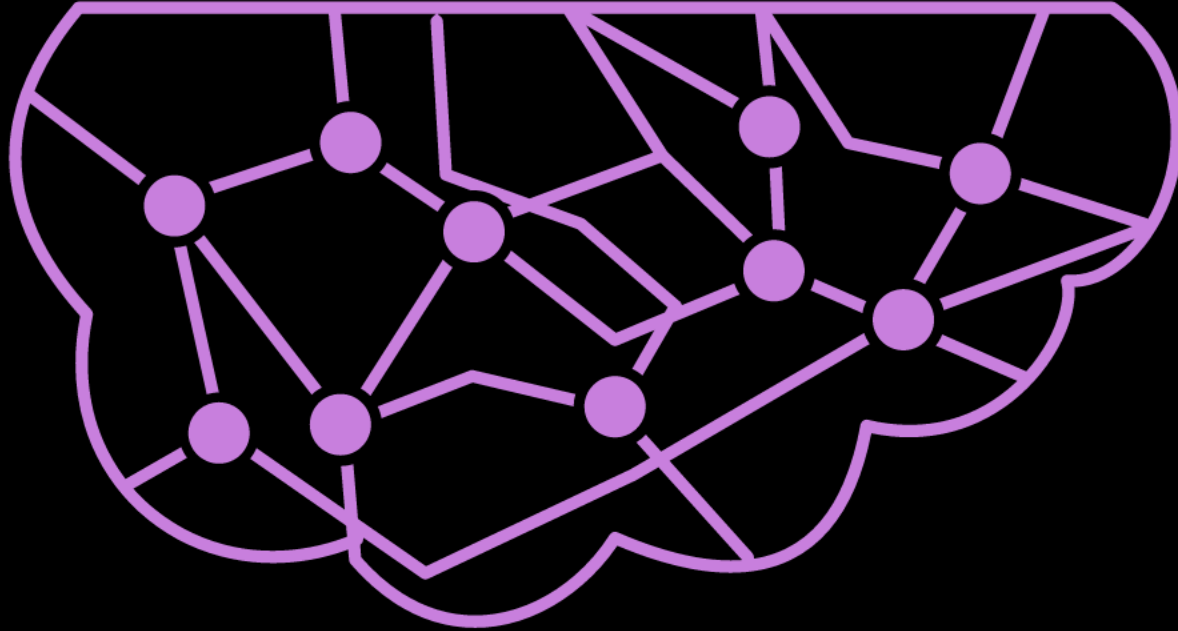




# TRAUMA AND THE BRAIN



# Trauma and the Brain



[Trauma and the Brain  
– YouTube](#)



[Childhood Trauma  
and the Brain | UK  
Trauma Council –  
YouTube](#)



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# PHYSICAL IMPACT OF TRAUMA





# Physical Impact of Trauma



[The in Utero Experience: Trauma Before Birth](#)



[Physical Impacts of Trauma](#)



[How childhood trauma affects health across a lifetime | Nadine Burke Harris - YouTube](#)



## CHAT QUESTION 2:

**ANYTHING THAT  
SURPRISES YOU  
ABOUT THE PHYSICAL  
IMPACT OF TRAUMA?**

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## CHAT QUESTION 3:

WHAT DOES TRAUMA  
INFORMED CARE MEAN  
TO YOU?



# TRAUMA-INFORMED CARE SHIFTS THE FOCUS FROM

*“WHAT’S WRONG WITH YOU?”*

TO

*“WHAT HAPPENED TO YOU?”*

# TRAUMA INFORMED CARE SEEKS TO

- Understand the widespread impact of trauma and potential supports
- Recognize the signs and symptoms of trauma
- Integrate knowledge about trauma into policies, procedures, and practices
- Actively avoid re-traumatization



- [Trauma-Informed Care Implementation Resource Center](#)



# PRINCIPLES OF TRAUMA INFORMED CARE

- Safety
- Trustworthiness and transparency
- Peer support
- Collaboration and mutuality
- Empowerment, voice, and choice
- Cultural, historical, and gender issues



**WHAT ARE  
OCCUPATIONAL  
THERAPISTS SAYING  
ABOUT TRAUMA  
INFORMED CARE?**







+



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# OTS ARE TALKING ABOUT AND RESEARCHING TRAUMA



## A Sensory Integration-Based Intervention Perspective to Trauma-Informed Care for Children

Teresa A. May-Benson, ScD, OTR/L, FAOTA

### Background

The importance of early parent-child interactions in the social, emotional and communicative development



### *THE ISSUE IS . . .*

## Childhood Toxic Stress: A Community Role in Health Promotion for Occupational Therapists

Meredith P. Gronski, Katherine E. Bogan, Jeanne Kloeckner, Ryan Russell Thomas, Steven D. Taff, Kimberly A. Walker



**CHAT QUESTION 4:**

**IN WHAT WAYS CAN  
OTS BE TRAUMA  
INFORMED?**

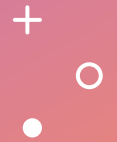
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# HOW DO WE SUPPORT?





**AOTA**  
Continuing Education Article

**Earn .1 AOTA CEU**  
(one contact hour and  
1.25 NBCOT PDU).  
See page CE-8 for details.

# Understanding and Applying Trauma-Informed Approaches Across Occupational Therapy Settings

**Figure 1. Trauma-Informed Care (TIC) in Action: Do's, Don'ts, and Associated Principles**

Do	Don't	Associated TIC Principle(s)
Ask, "What happened to you?"	Ask, "What's wrong with you?"	Safety
Always ask preferred pronouns.	Assume pronoun based on name or appearance.	Cultural, historical, and gender issues
Ask permission for everything.	Assume that individuals will be willing to say or do anything you ask them to do.	<ul style="list-style-type: none"> <li>• Safety</li> <li>• Collaboration and mutuality</li> <li>• Empowerment, voice, and choice</li> </ul>
Provide TIC training for all providers and support staff.	Provide training only for certain staff, based on title or role.	<ul style="list-style-type: none"> <li>• Safety</li> <li>• Trustworthiness and transparency</li> <li>• Peer support</li> <li>• Collaboration and mutuality</li> <li>• Empowerment, voice, and choice</li> <li>• Cultural, historical, and gender issues</li> </ul>
Administer an Adverse Childhood Experiences screening to all clients.	Ignore the pervasiveness of trauma in all areas of practice.	<ul style="list-style-type: none"> <li>• Collaboration and mutuality</li> <li>• Safety</li> <li>• Trustworthiness and transparency</li> <li>• Cultural, historical, and gender issues</li> </ul>
Assess and follow up with trauma-related needs.	Ignore trauma-related needs.	<ul style="list-style-type: none"> <li>• Collaboration and mutuality</li> <li>• Safety</li> <li>• Trustworthiness and transparency</li> </ul>
Acknowledge that there may be aspects of the environment that you cannot change to support well-being, such as loud noises from machines.	Ignore those things over which you have no control.	Trustworthiness and transparency



# “What do I do?”

## Trauma-Informed Support for Children

**1 Create safety**  
If the child is overwhelmed, perhaps guide them to a quiet corner or allow them to decompress by visiting the restroom. If you are in a classroom, maybe you have a peace corner that you've outfitted with blankets or a screen so that it feels like a safe place.

**2 Regulate the nervous system**  
Stress brings a predictable pattern of physiological responses and anyone who has suffered toxic stress or trauma is going to be quickly stressed into hyperarousal (explosive, jittery, irritable) or hypoarousal (depressed, withdrawn, zombie-like). No matter how ingenious our regulation strategies, how artsy-crafty we get with tools, the child has to find what works for them.

**3 Build a connected relationship**  
This is the number one way to regulate the nervous system. When we are around people we care about, our bodies produce oxytocin, which is the hormone responsible for calming our nervous system after stress. If we stay connected, then eventually the calm discussion of each person's feelings and needs can take place.

**4 Support development of coherent narrative**  
Creating predictability through structure, routines and the presence of reliable adults helps reduce the chaos a child may feel and allows them to start creating the kind of logical sequential connections that not only help them understand their own narrative, but are also the fundamental requirement of many types of learning.

**5 Practice 'power-with' strategies**  
One of the hallmarks of trauma is a loss of power and control. When someone is wielding power over you with no regard to your thoughts or feelings, the toxic shame of the original trauma may come flooding back. As adults, we should use our power well. If we model a 'power-with' relationship with children it's our best chance of creating adults who will treat others with dignity and respect.

**6 Build social emotional and resiliency skills**  
Trauma robs us of time spent developing social and emotional skills. The brain is too occupied with survival to devote much of its energy to learning how to build relationships and it's a good chance we didn't see those skills modeled for us. Learning to care for one another is the most important job we have growing up.

**7 Foster post-traumatic growth**  
We know that there are qualities and skills that allow people to overcome the most devastating trauma and not just survive but find new purpose and meaning in their lives. Problem solving, planning, maintaining focus despite discomfort, self-control and seeking support are all known to lead to post-traumatic growth and are skills we can foster in children.

# QUESTION CHECK IN



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# VULNERABLE POPULATIONS





# POPULATIONS AT RISK

- Some groups of children and families are disproportionately represented among those experiencing trauma. This means that they may be exposed to trauma at particularly high rates or be at increased risk for repeated victimization.
- For some populations, co-occurring issues and unique adversities can complicate recovery from trauma. Others may face significant challenges related to access to services or require services that are specially adapted for their needs.

# CHAT QUESTION #5:

+  
• ○ DO YOU WORK WITH A  
POPULATION  
VULNERABLE TO  
TRAUMA?

+  
• ○



# POPULATIONS AT RISK

Substance use	Economic stress	Military and veteran families	Unhoused youth
LGBTQ youth	Post-institutionalized children	Foster care	Medically fragile
Neurodivergent	Autistic	Inner city/ Lower income	Anxiety

# CHAT QUESTION #6:

+ WHAT IS A STEP YOU  
• CAN TAKE TO  
◦ IMPLEMENT TRAUMA  
INFORMED PRACTICES  
IN YOUR WORK?



# QUESTION CHECK IN





*Thank  
you!*





# CONTACT INFORMATION

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  - [jessicaweiler@thrivetherapyot.com](mailto:jessicaweiler@thrivetherapyot.com)
  - Visit me through ThriveTherapyOT.com
  - Come chat with other OTs on Facebook at OTs for Pediatric Mental Health: <https://www.facebook.com/groups/395557154330473>
  - Listen to me being interviewed by Sarah Zera, The Moxie OT: <https://www.moxieot.com/podcast/e9-jessica-weiler>
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- Ashley Hettlinger, ILOTA Pediatric SIS co-chair
  - [ashleybuksa1@gmail.com](mailto:ashleybuksa1@gmail.com)



# REFERENCES AND RESOURCES

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  - SAMHSA <https://www.samhsa.gov/child-trauma/understanding-child-trauma#:~:text=Fast%20Facts,for%20physical%20assault%2Drelated%20injuries.>
  - CDC <https://www.cdc.gov/violenceprevention/childabuseandneglect/fastfact.html>
  - Children’s Bureau Child Maltreatment Report 2020 [Child Maltreatment Report 2020 | The Administration for Children and Families \(hhs.gov\)](https://www.hhs.gov/child-maltreatment-report-2020/)
- Trauma is a personal experience
  - The National Child Traumatic Stress Network <https://www.nctsn.org/what-is-child-trauma/trauma-types>
  - CDC-Kaiser ACE Study <https://www.cdc.gov/violenceprevention/aces/about.html>
  - Nadine Burke Harris YouTube on Adverse Childhood Effects <https://www.youtube.com/watch?v=95ovIJ3dsNk>
- Trauma and the brain
  - (8:44) YouTube ‘Trauma and the Brain’ [https://www.youtube.com/watch?v=4-tcKYx24aA&list=PLDnjnsmeSjTa65FQh\\_KeXYtzlAA\\_cdjWp&index=6](https://www.youtube.com/watch?v=4-tcKYx24aA&list=PLDnjnsmeSjTa65FQh_KeXYtzlAA_cdjWp&index=6)
  - (5:10) YouTube ‘Childhood Trauma and the Brain UK Trauma Council’ <https://www.youtube.com/watch?v=xYBUY1kZpf8>
  - (4:28) YouTube ‘Trauma and the Brain’ [https://www.youtube.com/watch?v=ZLF\\_SEy6sdc](https://www.youtube.com/watch?v=ZLF_SEy6sdc)
- The Physical Impact of Trauma
  - The In Utero Experience- Trauma Before Birth [https://www.communityservices.act.gov.au/\\_data/assets/pdf\\_file/0006/1549761/The-in-utero-experience-web.pdf](https://www.communityservices.act.gov.au/_data/assets/pdf_file/0006/1549761/The-in-utero-experience-web.pdf)
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- How do we support
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  - <https://www.echotraining.org/trauma-informed-support-for-children/>
- Vulnerable Populations
  - <https://www.nctsn.org/what-is-child-trauma/populations-at-risk>