

TRAUMA SUPPORT IN COMMUNITIES: Trauma Resources & Trauma-Informed Strategies for Faith Leaders

In the face of trauma, faith leaders often provide solace and support. With so many New Yorkers struggling during the COVID-19 pandemic, that role is more important than ever. An understanding of trauma and trauma-informed practices can help you support community members and safeguard your own wellbeing.

WHAT IS TRAUMA?

"Trauma results from an **event**, series of events, or set of circumstances, that is **experienced** by an individual as emotionally harmful or life-threatening and that has lasting adverse **effects** on the individual's functioning and mental, physical, social, emotional or spiritual wellbeing." Trauma can be caused by natural disasters, violence, loss, abuse, neglect, and other emotionally or physically stressful experiences. This definition is often referred to as "The Three E's of Trauma" (Event, Experience of events, Effect), a phrase coined by the Substance Abuse and Mental Health Services (SAMSHA), a branch of the U.S. Department of Health and Human Services.²

Depending on the causes, trauma can come in different forms:

- **Psychological Trauma** is caused by an adverse experience, for example neglect or abuse, that leads to an injury that impairs how the brain functions.
- Vicarious Trauma is caused by exposure to traumatic information or stories that are reported to an individual by someone else, which can have a similar emotional affect as experiencing trauma first-hand.³
- Racial Trauma is caused by experiencing or witnessing racial bias and ethnic discrimination, racism, or hate crimes.⁴
- Community Trauma is caused by exposure to intentional acts of interpersonal violence committed in public, for example bullying or gun violence.⁵
- Collective Trauma is caused by widespread exposure to a large-scale event, for example the COVID-19 pandemic or a natural disaster, that disrupts the normal functioning of society and produces a shared emotional reaction.⁶

How to recognize the signs and symptoms of trauma⁷

Two people who experience the same trauma may have different reactions and experience different repercussions on their mental health: one may move forward without a lasting psychological impact, while the other may have serious and lingering mental health challenges. These different reactions to trauma can depend on many things, including social and cultural factors, one's financial safety net, coping strategies, and the support networks people have in place.

Traumatic events (including the loss of loved ones or loss of employment) are not experienced equally across all communities. Black and Brown New Yorkers have been disproportionally impacted by COVID-19 infection and death, and job and wage loss. Black and Latinx workers who have lost their jobs are also less likely than White workers to receive governmental assistance. This can contribute to the difference in trauma experienced by Black and Latinx people as compared to White people, who may experience the same event but with access to more resources.⁸

Trauma during the COVID-19 pandemic:

Psychological trauma can be felt in many ways and is an ongoing public health crisis across our city and nation. The COVID-19 pandemic has brought an unprecedented loss of life, financial distress, and social isolation, which worsen the feelings of trauma that many experience. Many New York City (NYC) residents are also reeling from incidents of police brutality, racial injustice, and inequity, and working to confront centuries of historical trauma experienced by Black and Brown communities, and other communities of color. These concurrent public health crises are significant stressors that can contribute to the trauma and sense of loss many are experiencing.⁹

All types of trauma have the potential to have short- and long-term negative effects on mental health.

Common behavioral signs and symptoms of trauma include:

- Sleep disturbance and nightmares
- · Irritability, anger, and interpersonal conflict
- Intrusive memories and thoughts
- Withdrawal and avoidance
- Emotional numbness
- Disorientation and helplessness
- Anxiety and panic
- Self-blame and self-loathing
- Hypervigilance

Trauma can also lead to a somatic response (i.e. a bodily expression of emotional distress). Somatic responses often result from biological changes that affect the limbic system (cognitive and emotional functions) and reduces cortisol production (the body's stress response hormone).¹⁰

Common physical signs and symptoms of trauma include:11

- Racing heart, headaches, stomachaches
- Obesity
- Respiratory difficulties (such as asthma)
- Drug and alcohol misuse
- Chronic medical and mental illness.

WHAT WORKS: APPROACHES TO ADDRESS TRAUMA

With appropriate support, individuals can overcome traumatic experiences. Trauma-informed approaches can help people become resilient, heal, and go on to lead meaningful and productive lives. Developed by SAMHSA, trauma-informed approaches are guided by the "4 Rs":12

"A program, organization, or system that is trauma-informed **realizes** the widespread impact of trauma and understands potential paths for recovery; **recognizes** the signs and symptoms of trauma in clients, families, staff, and others involved with the system; and **responds** by fully integrating knowledge about trauma into policies, procedures, and practices, and seeks to actively **resist** re-traumatization."

- Realize: Understand how trauma can affect individuals, families, groups, and communities
- Recognize: Identify the potential signs and symptoms of trauma through education and/or screening
- **Respond:** Employ programs and policies that integrate an understanding of how trauma affects individuals
- **Resist re-traumatization:** Prevent or limit stressful environments that can trigger painful memories

TIPS FOR DEVELOPING A TRAUMA-INFORMED APPROACH TO SUPPORT YOUR FAITH COMMUNITY

Faith leaders can build on the "4 Rs" to develop a trauma-informed approach to supporting their communities. According to SAMHSA, consider the following six principles as you shape your approach:¹³

1. Safety

Safety refers to both psychologically and physically safe spaces, as defined by the individual who has experienced trauma.

Tip #1: Speak with community members about the types of spaces in which they feel most comfortable. Consider environmental (i.e. furniture, noise, decoration) and interpersonal (i.e. who occupies the space and when) factors. If a community member shares with you what would make them comfortable, do your best to meet with them in a time and place that accommodates their needs.

2. Trust and accountability¹⁴

Consistently communicating with transparency can promote trust and accountability, which can reduce or mitigate stress responses. Research also shows that trust and distrust are developed over time based on small details and interactions.

Tip #2: Offer frequent updates about public health, current events, and community decisions. Share the rationale for decisions and follow-up on your commitments.

3. Peer support¹⁵

Social support gives us the feeling of being loved, cared for, and respected. When support comes from someone who has a shared experience of trauma or other mental health challenges (a "peer"), it can foster hope, resiliency, and healing. Strong social support systems can improve or protect mental health and decrease symptoms of depression and anxiety.¹⁶

Tip #3: Bring together groups of people who have common experiences through either formal or informal gatherings. Make time and space for them to share and reflect. You can also encourage community members to connect to peer-led mental health support groups (see the resources list at the end of this document for information on how to find support groups).

4. Collaboration and mutuality

Shared power and decision-making can help to build a sense of control and autonomy and can help to strengthen a sense of purpose and belonging.

Tip #4: Invite input on community activities and offer opportunities for individuals to join in shaping them.

5. Empowerment

Placing individuals' experiences and strengths at the forefront can provide a foundation to promote healing. To help people who have experienced trauma, support them in making their own choices and setting their own goals.

Tip #5: Include individuals in conversations about their health and wellbeing. Offer them choices and autonomy in selecting which strategies they will use to address their trauma.

6. Cultural, historical and gender issues

Consider how your house of worship's programs, policies and communications reflect the racial, ethnic and cultural needs of your community members, and how they address historical and intergenerational trauma.

Tip #6: Be inclusive in the development of new initiatives by ensuring they reflect the identities and needs of diverse community members.

TIPS FOR BUILDING RESILIENCE¹⁷

Resilience is the ability to bounce back from a difficult situation. Promoting safety, transparency and collaboration within relationships, communities and organizations can ease stress and promote resilience. Faith leaders can use these strategies to care for themselves and also share these strategies with community members to help build their resilience:

- Acknowledging that feelings of grief, loss and sadness are natural can promote resilience: Accept your feelings. Heal at your own pace and in your own way. Be patient with yourself.
- Build supportive connections: Humans are social beings who look to others
 for validation, belonging and security. Building connections through supportive
 relationships fosters a sense of safety and community that can support healing.
 Reconnecting with friends and family members can also be a powerful source of
 support.
- Identify and use your strengths: Community crises can create opportunities to identify personal strengths and qualities (such as bravery, humor, and compassion) that can be used to manage the stress resulting from adversity.
- Use your skills to help others through activities, such as volunteering to help you cope: To find volunteer opportunities, visit Help Now NYC or NYC Service.
- Focus on things you can change: Identify challenges and focus on what is within your control. Practice mindfulness and engage in healthy activities.
- Respond to others with compassion and care and recognize that people are impacted by COVID-19 differently: Be respectful; check in with people and let them know you are ready to listen to experiences that may be different to yours.

- Humor and distraction: Humor can be a powerful coping strategy, and finding opportunities to participate in fun activities can counter some of the negative and painful messages you are experiencing and hearing through the media. Recognize that both can also be avoidance strategies in response to trauma. Using humor and distraction as a long-term coping strategy can enable avoidance or suppression of painful feelings which may reemerge in potentially harmful and more traumatic ways.
- Acknowledge the pain of racial trauma: Experiences of racial trauma are often ignored or minimized. Creating opportunities to discuss your experiences of racism and seeking support from people you trust can be empowering and healing. You can also find your voice through activism to help manage your pain.
- Generate hope: Think, plan, and look forward to positive outcomes. Look to
 people in your community and social network who are helping, and know that
 there is a community behind you, even if you do not see them. Acknowledging
 and supporting each other in these moments can allow us to emerge stronger
 and in greater solidarity.

Mental health support can help:

Trauma, mental health challenges and illnesses can be addressed with various treatment interventions and/or medications. Getting mental health treatment can:¹⁸

- Improve quality of life by reducing symptoms
- Strengthen relationships
- Improve performance at school or work
- Decrease interpersonal conflict
- Decrease risk of substance misuse and/or medical issues

TIPS TO CONNECT A COMMUNITY MEMBER TO MENTAL HEALTH SUPPORT

- Set up a time to speak privately with the individual and share that you are concerned.
- Let them know that you care and explain that you would like to refer them to a mental health professional.
- Reassure them that mental health services are confidential and effective.
- If you have the option, try to present different possibilities of referral to the person concerned. You can find a provider by reviewing the resources below or by calling NYC Well (1-888-NYC-Well) to be connected with a provider.
- Discuss matters such as fees, location, accessibility, etc.

• Assure the person that you will continue to be there for them. You might even suggest accompanying him or her to the first visit with the professional.

MENTAL HEALTH SUPPORT IS AVAILABLE

- (1) Access a range of free mental health services by phone or online. If you or someone you know needs support, we encourage you to reach out to the programs listed here. Help is available regardless of insurance coverage or immigration status.
- (2) Visit NYC Well's website, which offers a number of well-being and emotional support applications that can help you cope. If your symptoms of stress become overwhelming, reach out for support and help. You can contact NYC Well, a confidential helpline for mental health and substance misuse services. Trained counselors can provide you with support 24 hours a day, 7 days a week, in over 200 languages. CALL: 1-888-NYC-Well (1-888-692-9355), TEXT: "Well" to 65173, or CHAT ONLINE at nyc.gov/nycwell. Services include:
- · Crisis counseling
- Immediate peer support
- Short-term counseling
- Mobile crisis teams
- Connection to ongoing mental health and substance misuse services, including peer support groups and other trauma-informed professional mental health services

- (3) Call the New York State's COVID-19 Emotional Support Helpline at 1-844-863-9314 to talk to specially trained volunteer professionals. They are available to listen, support and offer referrals from 8 a.m. to 10 p.m., seven days a week.
- (4) Speak with a Crime Victims Advocate through the Safe Horizon Hotline at 1-866-689-HELP which operates 24/7 or the Crime Victim Assistance Program, which operates in precincts and Housing Police Service Areas citywide. The program has dedicated victim advocates for survivors of domestic violence and additional advocates for victims of every other category of crime. The program provides supportive counseling, connections to individual or group therapy, and help navigating the legal and financial challenges that can emerge in the aftermath of crime. Click here to find an advocate in your community.
- **(5) Call Aging Connect** for referrals to resources, services and opportunities for older adults and their families. Call 212-Aging-NYC (1-212-244-6469).
- (6) Contact the Early Childhood Mental Health Network to access mental health support for young children and their families. Seven early childhood therapeutic centers, open to all New York residents, are located throughout the city and offer specialized mental health treatment for children from birth to age five, as well as access to family peer advocates and connection to ongoing support. Click here to find your nearest clinic.
- (7) Continue learning about mental health and strategies to support community members by downloading ThriveNYC's Mental Health Toolkit for Faith Leaders here.

OTHER TRAUMA RESOURCES

If you are interested in continuing to learn about trauma, we encourage you to check out the following resources:

• New York State Trauma-Informed Network

- National Center on Domestic Violence, Trauma and Mental Health
- Child Mind Institute Trauma Guides

ENDNOTES

1 SAMSHA'S Concept of Trauma and Guidance for a Trauma-Informed Approach. Substance Abuse and Mental Health Services Administration website. https://ncsacw.samhsa.gov/userfiles/files/SAMHSA_ Trauma.pdf. Published July 2014. Accessed March 25 2021, P.8

2 Ibid.

3 "The Vicarious Trauma Toolkit." Office for Victims of Crime, ovc.ojp.gov/program/vtt/introduction. Accessed March 20, 2021.

4 Helms, J. E., Nicolas, G., & Green, C. E. (2010). Racism and ethno-violence as trauma: Enhancing professional training. Traumatology, 16(4), 53-62. doi:10.1177/1534765610389595. Accessed March 20, 2021.

5 Peterson, Sarah. "Community Violence." The National Child Traumatic Stress Network, 25 May 2018. Accessed March 20, 2021.

www.nctsn.org/what-ischildtrauma/trauma-types/community-violence.

6 Hirschberger, Gilad. "Collective Trauma and the Social Construction of Meaning." Frontiers in Psychology, Frontiers Media S.A., 10 Aug. 2018, www.ncbi.nlm.nih.gov/pmc/articles/PMC6095989/.

7 Center for Substance Abuse Treatment (US). "Understanding the Impact of Trauma." Trauma-Informed Care in Behavioral Health Services., U.S. National Library of Medicine, 1 Jan. 1970, www.ncbi.nlm.nih.gov/books/NBK207191/. 8 NYC Department of Health and Mental Hygiene, "Acknowledging Psychological Trauma and Promoting Resilience during COVID-19". https://www1.nyc.gov/assets/doh/downloads/pdf/covid/covid-19-trauma-resilience.pdf. Accessed March 20,

2021. **9** Ibid.

10 Center for Substance Abuse Treatment (US). "Understanding the Impact of Trauma." Trauma-Informed Care in Behavioral Health Services., U.S. National Library of Medicine, 1 Jan. 1970, www.ncbi.nlm.nih.gov/books/NBK207191/.

11 "Penn Psychiatry." What Is Psychological Trauma? Penn Center for Youth and Family Trauma Response and Recovery. Perelman School of Medicine at the University of Pennsylvania, www.med.upenn.edu/traumaresponse/trauma.html.

12 SAMSHA'S Concept of Trauma and Guidance for a Trauma-Informed Approach. Substance Abuse and Mental Health Services Administration website. https://ncsacw.samhsa.gov/userfiles/files/SAMHSATrauma.pdf. Published July 2014. Accessed July 27, 2020, P. 9.

13 Ibid.

14 Menschner, Christopher. Key Ingredients for Successful Trauma-Informed Care Implementation. Center for Health Strategies, April

2016, www.samhsa.gov/sites/default/files/ programs_campaigns/childrens_mental_health/atc-whitepaper-040616.pdf.

15 Davidson, L., Bellamy, C., Guy, K., & Miller, R. (2012). Peer support among persons with severe mental illnesses: A review of evidence and experience. World Psychiatry, 11, 123-128.

16 Gros DF, Flanagan JC, Korte KJ, Mills AC, Brady KT, Back SE. Relations among social support, PTSD symptoms, and substance use in veterans. Psychol Addict Behav. 2016;30(7):764-770. doi:10.1037/adb0000205.

17 NYC Department of Health and Mental Hygiene, "Acknowledging Psychological Trauma and Promoting Resilience during COVID-19". https://www1.nyc.gov/assets/doh/downloads/pdf/covid/covid-19-trauma-resilience.pdf. Accessed March 20, 2021.

18 "Mental Illness, Diagnosis and Treatment." Mayo Clinic, Mayo Foundation for Medical Education and Research, 8 June 2019,

www.mayoclinic.org/diseases-conditions/mentalillness/diagnosis-treatment/drc-20374974. Accessed March 25, 2021.