Brief 4. Strengthening Trauma-Informed Program Practices

Explore this series to learn about trauma and how traumatic events can impact families and staff. Find information to guide your conversations with families. Use these resources to promote healing, resilience, and family well-being. When families know they are understood, they can be more engaged and responsive to support.

Head Start and Early Head Start leaders and staff can use this series to learn about adult trauma and strategies for self-care and healing. This series can help build knowledge and skills for a program-wide trauma-informed culture.

What Is Trauma-Informed Care?

All of us show up to work bringing our histories, our experiences, and our whole selves. We may bring our own history of trauma, and so may other staff. Trauma-informed care includes understanding this—about ourselves and the staff, community partners, families, and children we work with. Program leaders and supervisors can encourage all staff to work to build and share this understanding and apply it to their everyday interactions. Trauma-informed care involves integrating this understanding with all aspects of a program's organizational cultures, policies, and practices.

Trauma-informed care (TIC) recognizes the role that trauma may play in the lives of families and staff. When behaviors and interactions raise concerns, TIC considers the possibility that these behaviors may actually be strategies developed to cope with trauma. TIC asks, “What happened to you?” instead of, “What’s wrong with you?”

Trauma-Informed Care

According to the Substance Abuse and Mental Health Services Administration (SAMSHA), trauma-informed care

“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; responds by fully integrating knowledge about trauma into policies, procedures, and practices; and seeks to actively resist re-traumatization” (SAMHSA, 2014).
SAMSHA (2014) identifies six key principles of a trauma-informed approach:

1. Safety
2. Trustworthiness and Transparency
3. Peer Support
4. Collaboration and Mutuality
5. Empowerment, Voice, and Choice
6. Cultural, Historical, and Gender Issues

How to Use the Head Start PFCE Framework to Strengthen Trauma-Informed Care

The Head Start Parent, Family, and Community Engagement (PFCE) Framework provides programs with a research-based organizational guide for implementing the Head Start Program Performance Standards (HSPPS) for parent, family, and community engagement.

### Head Start Parent, Family, and Community Engagement Framework

Leaders and staff can use the Head Start PFCE Framework to create a trauma-informed program and promote healing. They can look for ways to integrate TIC into each of the program elements of the Framework. (These elements are the systems and services that programs use to promote strong family and child outcomes). Leaders and staff can also consider how to align the program elements to ensure that TIC is program-wide.

### How Program Elements Can Strengthen and Support Trauma-informed Practices

**Program leadership** plays a key role in implementing TIC and practices. Leaders ensure that policies, systems, supports, and resources are in place to support TIC. Leaders allocate resources and funds to ensure that staff members have appropriate training, coaching, and supervision, along with manageable caseloads to support TIC. Leaders can use the Framework to inform program practices, policies, and procedures and to guide resource allocation for TIC.

Leaders ensure coordination and promote teamwork across program systems and service areas, the elements of the PFCE Framework. Leaders develop and maintain effective partnerships with community leaders and organizations. Leaders build relationships that honor the cultures and languages spoken by families and staff in the program.
Programs can use **continuous learning and quality improvement** (CLQI) to inform their policies and practices. They can examine family and community data for evidence of traumatic experiences and effects. They can administer and review assessments of staff knowledge about trauma. CLQI can also support programs to examine the quality of trauma-informed practices among staff. The program can use these findings to make choices about trauma-informed training for professional development.

**Professional development** can include training for staff about how to realize and recognize trauma, and how to respond to and resist it. Leadership can make TIC a high priority and model healing interactions. Program leaders can also provide opportunities for staff to build their knowledge and skills in trauma-informed practice through supervision and coaching.

The **program environment** is often the first way that families experience a trauma-informed culture. A TIC consistently welcomes and values families. A TIC communicates respect for each family’s cultures, languages, and structures. For example, programs can ensure that all spaces are inclusive of all families. Program staff show respect for all families in the program and community. Programs can offer resources about trauma, its impact on children and families, resilience, and healing. Staff can show consistent interest in learning about each family’s cultures, languages, unique strengths, values, hopes, interests, concerns, and needs.

**Family partnerships** can inform TIC. For example, staff can work with families to identify trauma-informed community resources and to assess the quality of services provided. Families who feel comfortable doing so can share information about their experiences using these resources. Other families can provide this information anonymously to staff. For example, did families feel that they were treated with respect by staff at community organizations? Did the services build on families’ strengths and support healing?

**Teaching and learning** are areas where trauma-informed practices can contribute to goal-oriented relationships to support children’s development and learning. For example, families and staff can work together as a team to develop and learn about the goals that families set for their children. Staff can consider the key principles of TIC to guide their conversations with families. These principles include trustworthiness, transparency, collaboration, and mutuality, along with commitments to family empowerment, voice, choice, and cultures. Staff can use these key principles to show respect for families and their experiences. Staff can also learn to recognize the signs and symptoms of trauma in families, staff, and others and consider how these signs and symptoms might impact teaching and learning.

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**Topic Checklist for Training About Trauma-Informed Care**

Trauma-informed care (TIC) begins with learning about trauma. Trauma-informed programs help all staff and families sustain hope in the face of trauma and adversity. Programs can offer training about key topics in TIC and healing, which should include:

- Signs and symptoms of trauma
- Healing
  - What healing is
  - How the process of healing unfolds
  - What program staff can do to promote healing in themselves, their peers, and the children and families they work with
- Self-regulation and coping with thoughts and feelings
- Conflict and repair in relationships
- Vicarious trauma
- Occasions when trauma around us triggers our trauma history

See the following briefs in this series for more information about these topics:

- Brief 1. **Defining Trauma**
- Brief 2. **Caring for Ourselves as We Care for Others**
- Brief 3. **Coping and Healing**
Leaders and staff can identify opportunities to strengthen the delivery of trauma-informed services through community partnerships. Trauma-informed community agencies know that trauma is a common experience. They understand that trust is built over time through predictable, reliable, consistent relationships. Their staff understand that in order to heal, families need to be able to tell their own story and be understood, with acceptance and without judgment. The staff take great care to protect confidentiality as families keep control over what they choose to reveal.

Programs can strengthen access and continuity by engaging former and current families in order to understand better how families experience TIC. Programs can offer new families an orientation about trauma-informed opportunities in the program to strengthen family well-being. Programs can offer to all families resources about trauma, its impact on children and families, and resilience and treatment. Programs can use their knowledge of TIC to analyze community assessment data to prioritize enrollment of families with the greatest need, including families experiencing homelessness or domestic violence, and children who are in foster care.

Programs can use the PFCE Framework to identify the roles that the program elements of the Framework can play in trauma-informed practices. Programs can align the elements to strengthen TIC and healing across the program.

How to Promote Healing in Systems of Care

Traumatic events and experiences affect children, families, staff, and programs. They also affect whole systems of care. To make TIC effective at every level, staff and programs can work together with community partners and service providers. Together they:

- Learn about the effects of trauma, and the ways these effects appear in this community
- Recognize and respond to the impact of traumatic stress on children, families, staff, and service providers
- Infuse and sustain trauma awareness, knowledge, and skills into their organizational cultures, practices, and policies
- Support healing for children and families through trauma-informed practices

Specifically, programs, community partners, and service providers in systems of care:

- Routinely screen for trauma exposure and related symptoms
- Use evidence-based, culturally responsive assessment and treatment for traumatic stress and associated mental health symptoms
- Make resources available to children, families, and providers on trauma exposure, its impact, and treatment
- Engage in efforts to strengthen the resilience and protective factors of children and families impacted by and vulnerable to trauma
- Address parent and caregiver trauma and its impact on the family system
- Emphasize continuity of care and collaboration across child-service systems
- Maintain an environment of care for staff that addresses, reduces the occurrence of, and treats secondary traumatic stress, and that increases staff wellness

Together, these partners in the system of care work to build meaningful partnerships among children, families, caregivers, and staff. They address how trauma is influenced by cultures, history, race, gender, location, and language. They acknowledge the impact of structural inequity and respond to the unique strengths and needs of diverse communities.
Here are a few insights from one community that engaged in a sweeping effort to address system-wide trauma and what systems need to heal:

- “Like people, organizations are susceptible to trauma in ways that contribute to fragmentation, numbing, reactivity, and depersonalization” (Trauma Informed & San Francisco Department of Public Health, 2017).
- “A system cannot be truly trauma-informed unless the system can create and sustain a process of understanding itself” (Bloom & Farragher, 2013).
- “Trauma-informed system principles and practices support reflection in place of reaction, curiosity in lieu of numbing, self-care instead of self-sacrifice, and collective impact rather than siloed structures” (Epstein, Speziale, Gerber, & Loomis, 2014).

**Related Resources**

Learn more about the topics in this brief. Explore the following resources available on the Head Start Early Childhood Learning and Knowledge Center (ECLKC) website.

**Creating Trauma-Informed Systems (National Child Traumatic Stress Network)**

Find guidance for creating trauma-informed systems that recognize and respond to the impact of traumatic stress. Learn what children, caregivers, and service providers can do to facilitate the recovery of the family and support their ability to thrive.

**Head Start Parent, Family, and Community Engagement Framework**

Explore this research-based, organizational guide for implementing the Head Start Program Performance Standards for parent, family, and community engagement.

**Integrating Strategies for Program Progress (ISPP)**

Help your program prioritize PFCE strategies and clarify how they connect to one another. Complete the exercise in this resource in teams, and learn from one another by sharing questions, successes, and challenges related to family engagement.

**Resource Guide to Trauma-Informed Human Services: Resources Specific to Early Childhood Programs (Administration for Children and Families)**

Programs can use this guide to foster healing by adopting trauma-informed practices and strategies, such as creating a physically and emotionally safe space for children and families and understanding how trauma impacts children, families, staff, communities, and systems.

**Strategies for Implementing the Head Start Parent, Family, and Community Engagement Framework**

Review sample strategies that programs and families can use to make progress toward each of the seven family outcomes in the PFCE Framework.
References


Substance Abuse and Mental Health Services Administration. (2014). SAMHSA’s concept of trauma and guidance for a trauma-informed approach, HHS Publication No. (SMA) 14-4884 (pp. 9–10). Rockville, MD: Substance Abuse and Mental Health Services Administration.