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**Trauma-Informed Care Training for Multidisciplinary Teams
(MDTs)**

PARTICIPANTS MANUAL



Acknowledgement

The Trauma-Informed Care Training Package for Multidisciplinary Teams: Participants' Manual and Facilitator's Guide - has been produced within the framework of the CARING 2.0 project, developed and authored by Suzana Lutolli, Trauma-Informed Care Consultant.

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WELCOME NOTE FROM YOUR TRAINER

Dear You,

Welcome. You being here is no small thing. You showed up, and that matters more than you know. This isn't just a training, it's a space for truth-telling, for slowing down, for honoring the stories we all carry. Whether you work in a hospital, a school, a courtroom, a center, a shelter or anywhere in between, you are here because you care. And in a world that often rushes past pain, choosing to care is a quiet act of hope.

Over the next two days, we'll talk about trauma, about systems, about the science of what helps and what harms. But we'll also talk about healing, about presence and about the power of small moments. Because sometimes, the smallest shift in how we show up, with a child, a family, a colleague, or even ourselves, can change everything.

You don't have to have all the answers, and you don't have to be perfect. You just have to be willing; Willing to pause, to reflect and to stay open, even when it's uncomfortable.

You are welcome here just as you are.

Bring your tiredness, your uncertainty, your questions, your care. If something stirs in you, grief, resistance, recognition, that is okay. Let it, because that too is part of the work.

My hope is that you leave this space not just informed but inspired. Not just equipped but anchored. Not just learning new things but remembering something deeper: that how we treat people matters. That healing is possible and that you—exactly as you are—can be part of that healing, every single day.

Thank you for being here. Let's begin.

*With deep care,
Suzana Lutolli - Master Trainer & Author*

INTRODUCTION

Why This Training Matters

Every day, children and young people navigate life with stories we cannot always see. Some carry fear, grief, or shame. Some have experienced broken trust, instability, or emotional overwhelm—often in the very places meant to protect them.

“In the face of trauma, children are the most vulnerable and bear the deepest wounds. Behind every statistic is a child whose safety, development, and future hang in fragile balance.” (Trainer insight)

This Trauma-Informed Care Training of Trainers is delivered as part of the CARING 2.0 “Multi-disciplinary Prevention of and Response to School-related Violence” project, organised by Terre des hommes Kosovo and funded by the European Union. It responds to a pressing concern across the region: the growing levels of violence, stress, and emotional dysregulation in schools and services.

This training is not just about delivering content. It’s about helping professionals create healing-centered spaces where children feel seen, safe, and supported. Whether you work in education, health, justice, or social care, your presence and approach can become a powerful protective factor in the lives of the children and families you support.

What Is Trauma-Informed Care?

Trauma-informed care is not a checklist. It’s a **way of seeing and being** that centers empathy, regulation, and relational safety.

It means understanding how trauma affects the brain, body, emotions, and behaviour. It means recognizing survival responses for what they are: signs of what someone has been through—not who they are. And it means responding with curiosity, compassion, and care, not control.

At its heart, trauma-informed care is built on the belief that healing happens in safe, trusting relationships. In every moment of connection, we have the opportunity to repair, restore, and empower.

“What’s wrong with them?” becomes “What happened to them”—and what do they need to feel safe?

What You'll Explore

Over the next two days, you will:

- Understand the effects of trauma on development and behaviour
- Explore how stress and trauma show up in different settings
- Learn how to respond in ways that support safety, co-regulation, and trust
- Practice tools for empathy, emotional attunement, and de-escalation
- Reflect on your own well-being, needs, and boundaries
- Consider the cultural, systemic, and identity-based impacts of trauma

Our Approach

This training is experiential, reflective, and evidence informed. It brings together:

- Models like SAMHSA's 6 Principles, the ARC Framework, ACEs, and the Window of Tolerance
- Stories, case studies, and group reflection
- Practical tools you can take back to your setting
- Grounding activities to help regulate and restore

You are invited to bring your mind, body, and heart. Some moments may feel emotional. Others may feel empowered. Please take what you need and leave what you don't.

A Note on Emotional Safety

This is not therapy, but it is a space where emotions may surface.

You are encouraged to:

Pause or step out whenever you need

Share only what feels safe

Support others with care—not pressure

You are not expected to have all the answers. You are simply invited to be present—with yourself and others.

Why You Matter

Whether you are a teacher, health worker, youth mentor, police officer, or case manager—you have the power to create micro-moments of healing every day.

You don't need to be perfect.

You just need to be grounded, curious, and kind.

Let's begin this journey together—with intention, integrity, and care.

'To be trauma-informed is to include ourselves in the circle of care.'

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TRAINING OVERVIEW

This training is more than a workshop—it's a space for learning, reflection, and growth. Over the next three days, we'll explore what trauma really is, how it affects the lives of children and families, and how you—as a professional—can respond in ways that foster safety, connection, and empowerment.

This isn't just about theory. It's about:

- Deepening your empathy
- Strengthening your practical skills
- Feeling more confident supporting children and families
- Bringing meaningful change to the systems you are part of

We'll explore trauma through the lenses of:

- Neurobiology and development
- Emotions, relationships, and lived experience
- Practical tools, language, and techniques
- Grounding, regulation, and self-reflection

Above all, this training centers you as a person—not just a professional. Your voice, your experience, and your well-being are part of this work.

The Learning Journey

Each day is structured with intention. The content builds progressively—from understanding, to practicing, to applying and owning the approach.

Day 1: Safety & Knowing

We begin by creating emotional safety in the group and exploring the foundations of trauma. You'll learn how trauma impacts the brain, body, emotions, and behavior, using accessible language, engaging activities, and powerful metaphors. Together, we will reflect on how trauma shows up, and how it can be understood with care rather than judgment.

Day 2: Empathy & Skills

Building on this foundation, we'll explore how trauma presents in professional settings such as schools, hospitals, courts, and social service environments. You'll strengthen your practical skills to respond in trauma-informed ways and take time to reflect on the emotional cost of care. We will also focus on your own well-being and resilience as a professional.

Be curious

Be present

Be kind to yourself

And stay connected to why you chose to do this work in the first place.

We are honored to walk this journey with you. Welcome to the learning circle. Let's begin.

TRAINING MODULES

This training is built around four progressive modules delivered over two days. Each module builds on the last helping you move from foundational understanding to real-world application.

You'll explore:

- What trauma is and how it affects the brain, body, behaviour, and relationships
- How trauma shows up across sectors like education, health, justice, and social services
- Practical skills to respond with safety, empathy, and regulation
- Ways to look after your own well-being and build resilience

This isn't just about theory—it's about transforming the way we relate to others and to ourselves.

Day	Module	Focus	What You'll Gain
Day 1	Module 1: Foundations of Trauma Understanding	Understanding trauma, the stress response system, and the impact on development. Key frameworks: emotions, brain and the body	A grounded understanding of how trauma affects the brain, nervous system, emotions, and behaviour. You'll begin to build your trauma-informed lens.
	Module 2: Attachment, Safety, and Relational Healing	The role of safe, trusting relationships in recovery. Introduction to the ARC Framework and concepts like co-regulation and mentalizing.	Practical tools to support emotional safety and build trust. You'll explore your own relational style and reflect on safe relationships in your life and work.
Day 2	Module 3: Recognising and responding to development Trauma	How trauma presents in different sectors. Misinterpretation of behaviours. Tools for safe, attuned responses.	Confidence in identifying trauma responses and responding effectively in your own professional context. You'll also reflect on personal experiences of mis-attunement.
	Module 4: Vicarious Trauma and Professional Resilience	Understanding the emotional toll of care work. Compassion fatigue, boundaries, self- and team-care. Introduction to Social GRACES.	Awareness of how trauma impacts you as a professional. Strategies to protect your own well-being and promote resilience in teams.

Day 1 – Foundations of Trauma Understanding / Safety & Knowing

Module 1:

Foundations of Trauma Understanding

- Grounding practice and group agreements
- Inside Out clip and emotion reflection
- Brain-body connection: the hand model, vagus nerve, and stress responses
- Fight, flight, freeze, and fawn
- Understanding trauma: definitions, types, and impact
- The iceberg metaphor and invisible trauma
- “What happened to you?” vs. “What’s wrong with you?”
- Body mapping: where do I hold stress?

Module 2:

Attachment, Safety, and Relational Healing

- Introduction to the ARC Framework: Attachment, Regulation, Competency
- Understanding relational safety and co-regulation
- Activity: safety mapping or relational trust timeline
- Group reflection: safe adults in our own lives
- Circle reflection: “A time I felt safe”
- Exploring trauma-related behaviours: What helps? What doesn’t?

Day 2 – Deepening Trauma Understanding & Practice / Empathy & Skills

Module 3:

Recognizing and Responding to Development Trauma

- What is developmental trauma?
- ACEs and their long-term effects
- Trauma across settings: school, justice, health, and care
- The Window of Tolerance as a self-regulation tool
- Misdiagnosis and misunderstanding of trauma-related behaviour
- The iceberg activity: exploring what’s underneath behaviour
- Mentalizing as a Trauma Informed tool
- Responding with empathy and attuned presence
- SAMHSA’s 6 Principles of Trauma-Informed Care
- Role plays and reflection: “When I’ve seen trauma misinterpreted”

Module 4:

Vicarious Trauma and Professional Resilience

- Understanding vicarious trauma, burnout, and compassion fatigue
- Signs of secondary trauma in professionals
- Shared responsibility: organisational vs individual care
- Wellness and boundary planning
- Activity: “What fills your cup?”
- Trauma, identity, and intersectionality- gallery walk activity
- Preventing re-traumatization: shifting from reactive to relational responses
- Closing circle: “What are you taking away from today?”

KEY FEATURES OF THIS TRAINING APPROACH

This training is grounded in care, connection, and embodiment.

It's designed not just to transfer information, but to transform how we relate—to ourselves, to others, and to the systems we're part of.

We learn best when we feel safe.

We grow when we reflect with honesty.

And we change when we connect meaningfully—with the material, with each other, and with our deeper purpose.

Core Design Principles

Each element of this training reflects a trauma-informed philosophy. These principles guide how the training is structured, delivered, and adapted

➤ ***Relational over transactional***

We learn best in connection—not through information overload.

➤ ***Reflective over reactive***

We create space to pause, ground, and notice what's coming up.

➤ ***Practical and applicable***

Tools like the **ARC Framework**, **Feelings Wheel**, and **Safety Mapping** are designed for real-life use across diverse roles and settings.

➤ ***Modular and flexible***

You're encouraged to adapt the language and pacing to fit your context—but do not dilute the **core trauma-informed principles** that hold this work together.

➤ ***Body-aware***

This training acknowledges that trauma lives in the body.

Movement, grounding, rest, and regulation practices are built in by design.

THE THREE E'S OF TRAUMA

Based on SAMHSA's *Concept of Trauma and Guidance for a Trauma-Informed Approach (2014)*, Trauma is not defined by a single moment or event—rather, it is **characterised by the presence of three interrelated elements**:

The Event + The Individual's Experience of the Event + The Lasting Effects

This framework—often referred to as the **Three E's**—helps us understand trauma in a more human, nuanced way.

What It Means

- | | |
|----------------------|--|
| 1. Event | A single incident or a series of events that may be physically or emotionally harmful or life-threatening. This could include violence, neglect, loss, abuse, or displacement. But trauma isn't defined by the event itself. |
| 2. Experience | Two people can go through the same event and respond completely differently. What matters is how the event was felt, understood, and processed by the individual. This is why trauma is so personal. |
| 3. Effect | Trauma has lasting effects on a person's emotional, physical, and relational wellbeing. These effects may show up immediately—or years later—and can impact development, behaviour, learning, health, and trust in others. |

✦ ***Trauma is not in the event—it's in the experience and the impact.***

THE FOUR "R"S – KEY ASSUMPTIONS IN TRAUMA INFORMED CARE

These four key assumptions, introduced by SAMHSA, shape all trauma-informed systems and practices. They reflect a shift in how we understand, engage with, and support people affected by trauma.



Realize

Realize the widespread impact of trauma and understand potential paths for recovery

Recognize

Recognize the signs and symptoms of trauma in clients, families, staff, and others involved with the system.

Respond

Respond by fully integrating knowledge about trauma into policies, procedures, and practices.

Resist

Resist re-traumatization of children, as well as the adults who care for them.

Source: Image adapted from: 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. Rockville, MD: Substance Abuse and Mental Health Services Administration.

THE SIX CORE PRINCIPLES OF A TRAUMA-INFORMED APPROACH

	Safety Ensuring physical, emotional, and psychological safety is essential. It means creating environments that are predictable, stable, and calm—where people feel genuinely safe, not just physically protected.
	Trustworthiness & Transparency Trust is built through clarity, honesty, and consistency. Trauma-informed organizations communicate clearly, set realistic expectations, and follow through. Transparency reduces power imbalances and fosters dignity.
	Peer Support Lived experience is a powerful resource for healing. Peer support normalizes struggle, reduces shame, and creates authentic connection. It reminds us: you are not alone.
	Collaboration & Mutuality Trauma-informed work is not hierarchical—it's relational. Power is shared. Diverse perspectives are welcomed. Everyone is a contributor to safety and change.
	Empowerment, Voice & Choice Trauma often strips away control. Recovery involves restoring agency. We support people to express needs, make choices, and participate in decisions affecting them.
	Cultural, Historical & Gender Responsiveness Trauma doesn't happen in a vacuum. It is shaped by culture, history, systems of oppression, and identity. Trauma-informed care must actively reflect on bias, acknowledge inequality, and tailor support accordingly.

Why It Matters

- Greater **client engagement** and outcomes
- Stronger **staff well-being and retention**
- More **responsive, safe systems**

“Trauma-informed care is not what we do to people—it's how we are with people.”

– SAMHSA (2014)

Use this as your compass: every action, policy, and word can help someone feel seen, safe, and supported.



DAY ONE

FOUNDATIONS OF TRAUMA UNDERSTANDING

SAFETY AND KNOWING

Why this approach (Day one)

Traditional interventions often focus on fixing behaviour—but trauma-informed care asks us to look deeper.

When children experience violence, neglect, or ongoing stress, their developing brains and nervous systems adapt to help them survive. These adaptations often show up as challenging behaviours—aggression, anxiety, withdrawal, hypervigilance—not because something is wrong with the child, but because something difficult happened to them.

Trauma-informed care is built on the understanding that:

“What’s wrong with you?” becomes “What happened to you—and how can I help you feel safe again?”

Trauma-Informed Care Is Built on These Understandings:

- **Trauma is widespread:** Many children and families have experienced multiple forms of trauma—often without naming it.
- **Trauma affects development:** It impacts how children regulate emotions, learn, remember, relate to others, and experience their bodies.
- **Behaviour is communication:** What looks like defiance may be a survival strategy. The body remembers what the mind may not express
- **Safety and relationships heal:** Healing happens not through control—but through safe, attuned, and compassionate relationships.

This approach integrates science from neuroscience, developmental psychology, and attachment theory—and brings it into the everyday work of professionals like you.

It’s not about memorizing definitions. It’s about changing how we see, respond to, and support others.

Trauma-informed care is not a one-time strategy—it’s a mindset shift.

It asks us to see the whole child in context and to adjust our approach, so we don’t cause further harm.

What You're Invited to Bring

This is not a lecture—this is a circle of shared learning and reflection.

Openness: Be willing to explore how trauma affects not only children but also your own beliefs, reactions, and ways of working.

Engagement: Participate in group discussions, activities, and self-reflection to deepen understanding.

Self-awareness: Notice what comes up for you emotionally. There is no pressure to share anything that doesn't feel safe.

Purpose of Day 1

- Build a shared understanding of trauma and how it shapes behaviour
- Explore key concepts like fight/flight, the nervous system, and the ARC framework
- Recognize that trauma isn't always visible—like an iceberg, much of it is hidden
- Begin applying trauma-informed principles, starting with yourself and the way you create safety for others

Module 1: Understanding Trauma and Its Impact

Arrival, Welcome & Connection

Welcome to the beginning of our journey in trauma-informed care.

This space has been intentionally created to honour your presence, your wisdom, and your lived experience.

Before we begin learning about trauma, we begin by creating safety within the group. That means building connection—with ourselves, with each other, and with the shared path ahead.

What to Expect

We'll start with a simple but meaningful circle prompt:

“What’s the best and worst experience you’ve had recently?”



There are no wrong answers. This question invites us to reflect on what helps us feel safe, seen, and supported when we’re learning with others.

Co-Creating Group Agreements

Next, we’ll work together to create our Group Agreements, using a flipchart and markers. These are not rules; they are shared values to guide how we want to treat one another during our time together.

You might include things like:

- Listening with full attention
- Taking breaks when needed
- Speaking from the “I” perspective
- Respecting different levels of sharing

GROUP AGREEMENTS

- Take care of yourself
- You don't have to share anything you're not comfortable with
- Speak from your own experience
- Confidentiality is respected
- Listening is just as valuable as sharing

Trauma-informed learning starts by making space for each person to feel safe enough to learn, reflect, and connect.

Emotional Safety Matters

Emotional safety is more than the absence of harm—it's the presence of trust, attunement, and permission to feel.

When emotional safety is present:

- People can be curious instead of guarded
- Emotions can move, rather than become stuck
- Learning, connection, and healing become possible

To understand trauma, we must first understand emotions, because trauma lives in the body and speaks through feelings.

Key Takeaways: “We need to feel safe to feel.”

Emotions are messengers—they arise in the body before they reach our thoughts

Building emotional literacy helps us regulate and connect with others

Emotional safety is the foundation for healing and learning

When people feel safe, they can express, process, and move through emotions more effectively

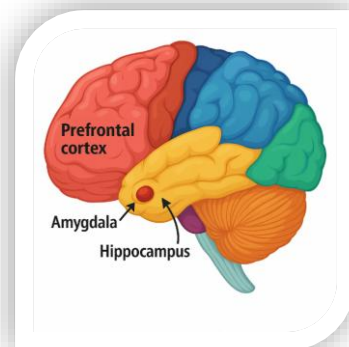
Trauma-informed care begins with noticing—not fixing—what emotions are present



Anatomy of Emotions – Brain & Body

✦ What You'll Learn:

- How our brain is wired for survival
- How emotions are connected to the nervous system
- What happens inside us when we feel threatened



Understanding the Brain: The “Hand Model”

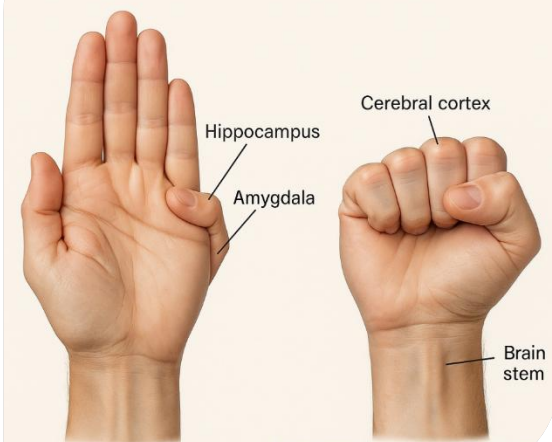
Dr. Dan Siegel created a simple way to understand the brain using your hand.

Make a fist with your thumb tucked inside your fingers. This represents your brain:

- **Fingers curled over** = Thinking Brain (prefrontal cortex)
- **Thumb inside** = Feeling Brain (limbic system)
- **Wrist/palm** = Survival Brain (brainstem)

When we're overwhelmed, we “flip our lid”—our thinking brain disconnects.

Use your hands to imagine your brain



Hand model courtesy of Dan Siegel

When a child is in survival mode, they can't reason or reflect. They need safety, not shame.

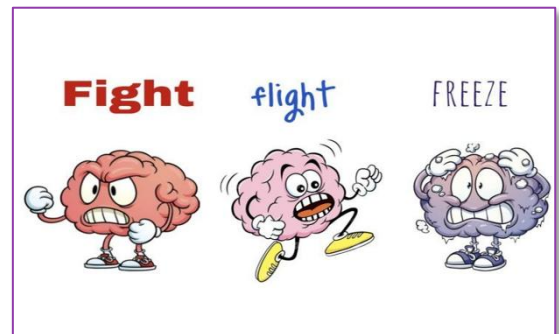
Reflection Prompt: Think of a time you “flipped your lid.” What helped you come back calm?



Threat Response & Dysregulation

What You'll Learn:

- Why fight, flight, freeze, and fawn are survival strategies
- What your own default stress response might be
- How to recognize dysregulation in yourself and others



What Happens Under Threat?

When the brain senses danger (real or perceived), it activates protective states. These are not “bad behaviors”—they are **adaptive responses**.

Response	Felt Experience	Behavior You Might See
 Fight	Anger, injustice, control	Yelling, aggression, tension
 Flight	Panic, fear, urgency	Avoidance, running, fidgeting
 Freeze	Overwhelm, hopelessness	Silence, shutdown, immobility
 Fawn	Appeasing, people-pleasing	Over-compliance, self-abandoning

Personal Reflection:

What's your primary stress response?

How do you react when you feel unsafe, pressured, or misunderstood?

How might your upbringing or past experiences shape that?

- Write down a few patterns you notice in your own response to stress.

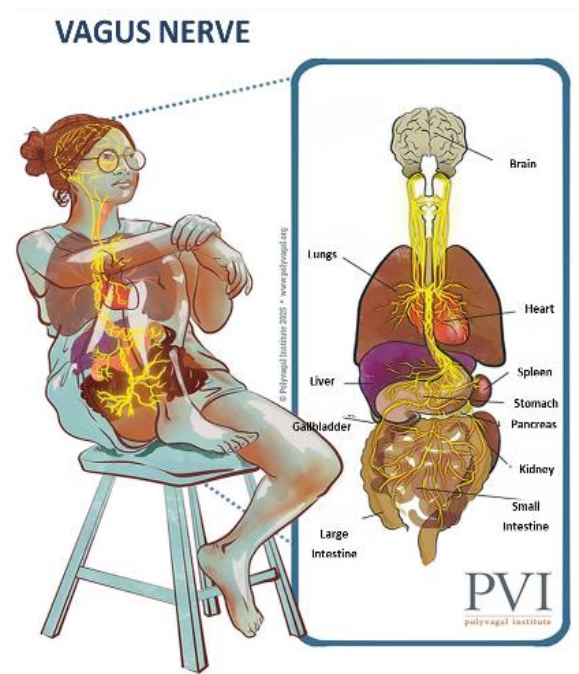
The Vagus nerve: A Built-In Alarm

Your autonomic nervous system helps you keep safe. It scans for danger—sometimes without you even realizing it.

Polyvagal Theory, created by Dr. Stephen Porges. It shows how the nervous system moves between 3 states—think of it like a ladder:

- **At the top, Ventral Vagal:** we feel safe, engaged, connected.
- **The middle, Sympathetic:** we're in fight or flight—anxious, angry, or overwhelmed.
- **At the bottom, Dorsal Vagal:** we shut down or collapse when we feel helpless or hopeless."

"We all move up and down this ladder. Trauma can keep people stuck in the lower states. But with the right tools—breathing, co-regulation, movement—we can help the body return to safety."



Nervous System Role

What It Does

Why It Matters

Sends signals

Alerts us to threat

Fast, automatic reactions

Shapes emotion

Activates fear, anger, freeze

Can override logic

Affects connection

Decides if we engage or shut down

Safety = connection

Key Takeaways:

Survival states like fight, flight, freeze, and fawn are natural, automatic responses—not chosen behaviors.

These patterns develop from past experiences and nervous system adaptations.

Everyone has a default stress response—knowing yours helps build self-awareness.

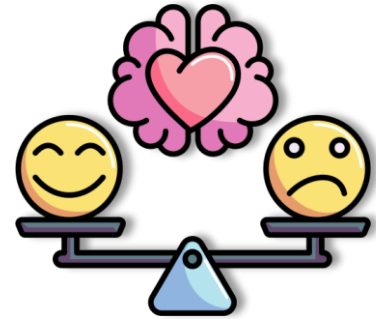
Trauma-informed care means responding to dysregulation with curiosity and compassion, not judgment.

The first step is always noticing your own state—pause, breathe, regulate.

Emotional Regulation: Staying Steady in Big Feeling

✦ What You'll Learn:

- What regulation means and why it matters
- How adults can co-regulate children and colleagues
- How to use the Regulation Ladder to support nervous system shifts



What is Regulation?

Regulation is the ability to return to a steady, calm state after emotional activation. It's not about staying calm all the time. It's about coming back to center.

- **Self-regulation:** What I do to manage my state
- **Co-regulation:** How others help me feel safe enough to regulate

Children learn to regulate through connection with adults—not alone

📖 The Regulation Ladder

The Regulation Ladder helps us map our emotional state and choose the right support.

Level	State	What Helps
Calm & Connected	Social, open, engaged	Group work, play, reflection
Alert/Anxious	Frustrated, panicked, defensive	Movement, safe exit, deep breathing
Shut Down/Disengaged	Numb, withdrawn, flat	Grounding, gentle tone, silence, presence

💡 **The goal is not to push people up the ladder—but to meet them where they are.**

📖 Reflection Prompt:

How does your body tell you when you're dysregulated?

- What helps bring you back to calm?
- What can you do to help someone else regulate?

Grounding – body scan

Benefits:

- Reduces anxiety
- Reduced joint pain
- Reduced fatigue
- Reduced inflammation
- Strengthened immunity
- Improved / deeper sleep
- Normalize biological rhythms
- Reduces electromagnetic sensitivity



Key Takeaways:

Regulation means returning to calm after stress—it's not about always staying calm.

Co-regulation happens in safe relationships—others help us feel steady.

Children (and adults) need connection before correction when dysregulated.

The Regulation Ladder helps us notice where we are and what we need.

Meet people where they are, not where you wish they were—safety first..



Defining Trauma and Its Effects

✦ What You'll Learn:

- What trauma really is—and what it isn't
- The different types of trauma
- How trauma impacts brain, body, emotions, memory, and behavior

What Is Trauma?

"Trauma is not what happens to you. It's what happens inside you as a result of what happens to you."

— Dr. Gabor Maté



SAMHSA's Three E's of Trauma

Trauma is not defined by a single moment or event—rather, it is characterised by the presence of three interrelated elements:

The Event - A single incident or series of experiences that are overwhelming, threatening, or harmful.

The Individual's Experience of the Event - How the person interprets or makes meaning of what happened—this is deeply personal.

The Lasting Effects - The lasting impact on development, emotions, behavior, and relationships.

Two people can go through the same event, but experience it differently based on support, history, and context.

Types of Trauma

Acute	A one-time traumatic event (e.g. car crash, natural disaster)
Chronic	Ongoing exposure (e.g. domestic violence, repeated abuse)
Complex Trauma	Multiple Traumatic events (severe persistent abuse or neglect)
Developmental Trauma	Early trauma during critical growth stages
Secondary Trauma	Indirect exposure to trauma through close contact

Trauma can also be passed down through generations—not by changing our DNA, but by affecting how our genes are expressed. This process is known as *epigenetics*.

How Trauma Affects Us

Trauma lives in the body—not just the mind. It changes how the brain wires itself, how the nervous system responds, and how we relate to others.

Area	Impact of Trauma
Brain	Overactive threat detection, difficulty with concentration and impulse control
Emotions	Anxiety, fear, shame, irritability, emotional numbness
Body	Chronic tension, sleep problems, fatigue, illness
Perception	Misreading social cues, expecting harm, black-and-white thinking
Memory	Gaps, confusion, flashbacks, intrusive images

Reflection Prompt:

- How does this understanding of trauma shift the way you view people's behavior?
- What surprised or stood out to you in this section?

Key Takeaways:

Trauma is not just the event—it's the lasting effect on safety, body, and relationships.

It changes how people feel, remember, and interpret the world.

Reactions like fear, shutdown, or aggression are survival strategies.

Understanding trauma helps us respond with compassion, not control.



Trauma and Toxic Stress

✦ What You'll Learn:

- The difference between stress and toxic stress
- How trauma affects the developing brain and body over time
- How to recognize where stress and emotion show up in the body

What Is Toxic Stress?

Not all stress is harmful. In fact, **positive stress** (like preparing for an exam or learning a new skill) helps us grow.

But when stress is **chronic, overwhelming, and unsupported**, it becomes toxic.

Type of Stress	Definition	Examples
Positive Stress	Short-term, growth-promoting	Public speaking, new experiences
Tolerable Stress	Intense but buffered by support	Loss of a loved one, relocation
Toxic Stress	Ongoing and unbuffered by safety	Abuse, neglect, constant fear

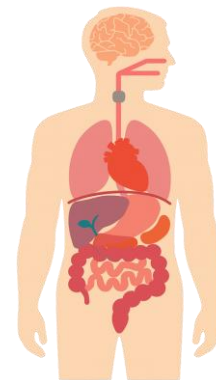
Toxic stress disrupts brain development, emotional regulation, and immune responses.

The Long-Term Impact

When the body is in survival mode for too long, the **stress response system stays on**, flooding the body with cortisol and adrenaline.

Over time, this can lead to:

- Difficulty concentrating or learning
- Sleep and appetite problems
- High anxiety or emotional shutdown
- Increased risk of heart disease, diabetes, depression



Activity: Somatic Body Map

On the body outline (provided in your manual):

Think of a recent stressful moment.

Use color or words to mark where you felt it in your body (e.g., tight chest, clenched jaw, stomachache).

Reflect: Was it hot, cold, heavy, tense, or numb?

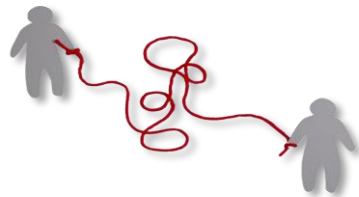
There are no right or wrong answers—this is about awareness.

Module 2: Attachment, Safety & Relational Healing

Trauma and Relationships – The Role of Attachment

✦ What You'll Learn:

- How early relationships shape emotional development
- What attachment styles are and how they form
- How trauma impacts connection and trust



Why Relationships Matter

"If trauma happens in relationships, then healing must also happen in relationships."
– (Siegel, 2012)

From birth, humans need connection to survive. Attachment is how we seek safety and belonging—especially in times of stress.

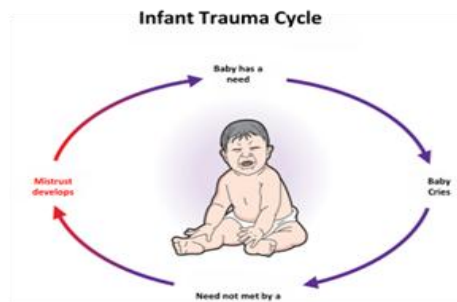
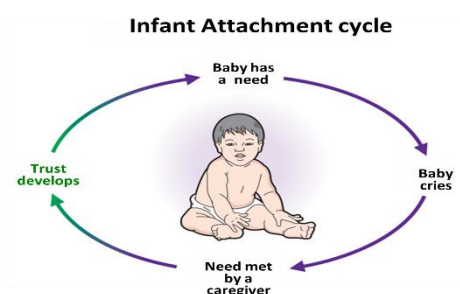


Image source: <https://www.attachmenttraumanetwork.org/what-is-healthy-attachment/>

When children experience consistent care, they develop secure attachment:
"I am safe. I can trust. I matter."

When care is unpredictable, frightening, or absent, children adapt to survive. These survival strategies show up in how we relate later in life.

Attachment trauma doesn't just hurt the heart—it wires the nervous system to expect danger.

Attachment Styles (Simplified)

Attachment Style	Early Experience	Relational Strategy
Secure	Consistent, responsive care	Trusts others, asks for help, regulates emotions
Anxious	Inconsistent care	Seeks closeness, fears rejection, hypervigilant
Avoidant	Dismissive or distant care	Self-reliant, avoids closeness, shuts down
Disorganized	Chaotic, frightening care	Conflicted, unpredictable, dissociative



Attachment behaviors are survival adaptations—not personality flaws

Reflection Prompt:

- What kind of emotional environment did you grow up in?
- How did the adults in your life respond to your needs, fear, or sadness?
- How might this shape how you relate to others today?

Key Takeaways:

Attachment is about survival—early relationships shape how we feel safe, seen, and supported.

Attachment styles are adaptations, not fixed labels—they form in response to how our needs were met or missed.

Relational safety is foundational for healing—trust is built through consistency, empathy, and repair.

Being a **“safe adult”** means responding with curiosity, calm, and connection—even when others are dysregulated.

The ARC Framework and Relational Safety

✦ What You'll Learn:

- What “relational safety” means—and how to create it
- How the **ARC Framework** helps us support healing from trauma
- What it means to be a “safe adult” in practice



What is Relational Safety?

Relational safety is when people feel:

- **Seen and heard**
- **Emotionally safe**
- **Accepted without judgment**
- **Free to express themselves without fear**

For children (and adults) recovering from trauma, **relational safety is the foundation for healing.**

The ARC Framework

ARC stands for:

Attachment - Build safe, stable, trusting relationships

Regulation - Help manage strong emotions and impulses

Competency - Support confidence, identity, and skills

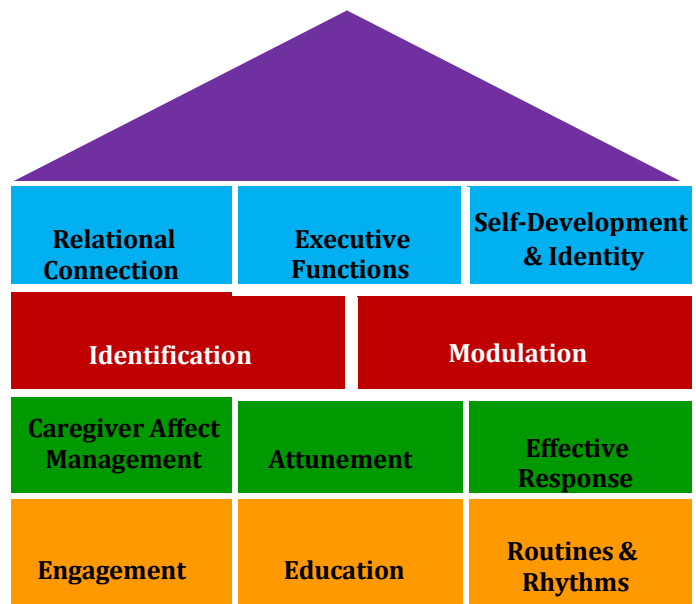


Image adapted from: <https://yourexperiencesmatter.com/learning/attachment-regulation-competency-arc/>

ARC reminds us that healing is **relational, emotional, and developmental**.

💡 ***If a child is dysregulated, they don't need a consequence—they need connection.***

Practice Prompt: Being a Safe Adult

Think of a child or young person you support. Ask yourself:

- Do they feel emotionally safe around me?
- How do I respond when they're dysregulated?
- How do I model calm, empathy, and boundaries?

✦ *“A safe adult is someone who makes others feel safe without needing to say it.”*

Healing attachment disruptions begins with safe, consistent, attuned relationships.

This applies to caregivers, teachers, social workers, and frontline staff.

Co-regulation, curiosity, and calm presence rebuild trust over time.

Reflection Prompt:

- What helps you feel emotionally safe with someone?
- What does “relational repair” look like in your work or life?

Key Takeaways:

ARC is not a checklist—it's a flexible framework to guide us in creating safe, responsive environments

The ARC framework helps guide trauma-informed responses rooted in connection, regulation, and growth.

To be trauma-informed is to become a safe, regulating presence for others.

Recognising Trauma in Children – What Helps, What Doesn't

✦ What You'll Learn:

- How trauma-related behaviors often show up in children
- Why behavior is communication—not defiance
- What kinds of adult responses help children feel safe (and which don't)

Understanding Behavior Through a Trauma Lens

When children feel seen, they don't need to act out to be noticed

Trauma can affect how children behave, learn, connect, and regulate emotions. What may appear as defiance, aggression, or withdrawal is often a **survival response**.

These behaviors are **not choices**—they are **adaptations to protect themselves** in a world that may have felt unsafe.

Common Trauma-Related Behaviors in Children

Behavior	What Might Be Underneath
Aggression or tantrums	Hyperarousal, fear, lack of safety
Withdrawal or silence	Freeze response, shutdown, overwhelm
Attention-seeking	A need for connection or reassurance
“Oppositional” or controlling	Fear of unpredictability or powerlessness
Confusion, forgetfulness	Memory gaps, stress, or disassociation

The question is not “What’s wrong with this child?” but “What has this child experienced?”



What helps and what doesn't

✗ What Doesn't Help

- Shouting, shaming, or punishment
- Ignoring emotional needs or behavior signals
- Assuming the child is choosing to be “difficult”
- Rigid rules without flexibility or empathy

✓ What Helps

- Calm tone, consistent presence, and predictable boundaries
- Validating emotions without needing to fix or solve
- Offering co-regulation and simple grounding tools
- Staying curious instead of reactive
- Repairing after moments of stress or disconnection

💡 *Safety is not just about protection—it's about connection.*

📖 Reflection Prompt:

- Think of a time when you witnessed a child in distress. What response helped—or didn't help?
- How can you begin to view challenging behavior as communication?

Key Takeaways:

Trauma impacts behavior—what looks like defiance may be a stress response.

Children show us how they feel through actions, not always words.

Harsh or dismissive responses can re-traumatize or escalate fear.

What helps most is presence, empathy, and emotional regulation from a safe adult.



Closing the Day



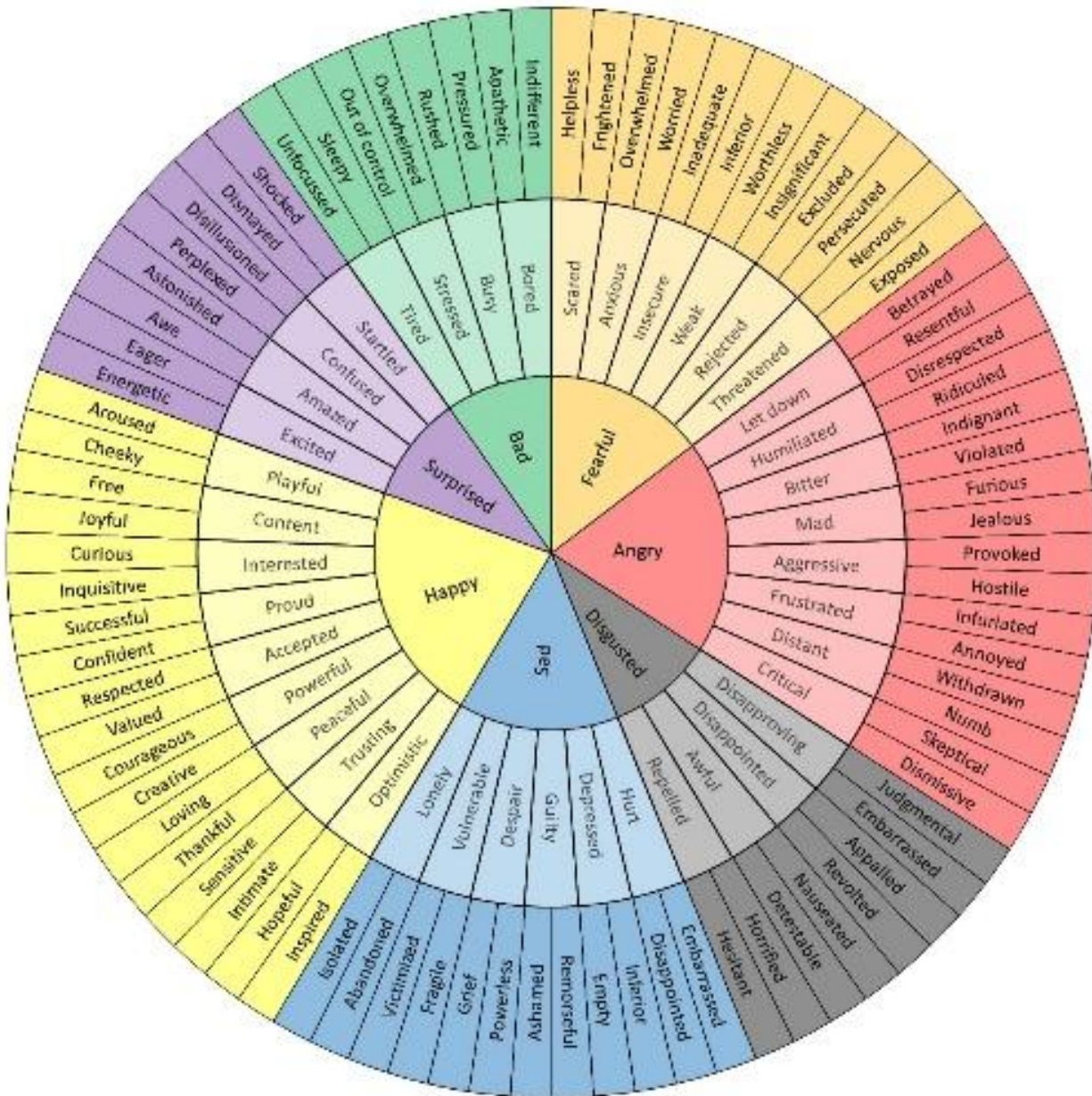
We end with a circle reflection:
What is one thing you're taking
with you today?
Share a word, phrase, or image
that represents your experience.

Regulation is the foundation of healing. Before we can think or learn, we need to feel safe.



ACTIVITY SHEETS

Feelings wheel



PAIR SHARE SHEET: “INSIDE OUT” EMOTIONAL REFLECTION

1. Watch the clip and notice:

Which emotions stood out for you?.....

How did they interact or shift?

2. Reflect for yourself (2 minutes):

Emotion I hide at work:

Emotion needing more space in my life:

3. Pair-Share (take 6 minutes; 3 minutes each)

- ◆ When it's your turn, share:

The emotion I chose and why it matters:

.....

Physical sensations or thoughts that surfaced:

.....

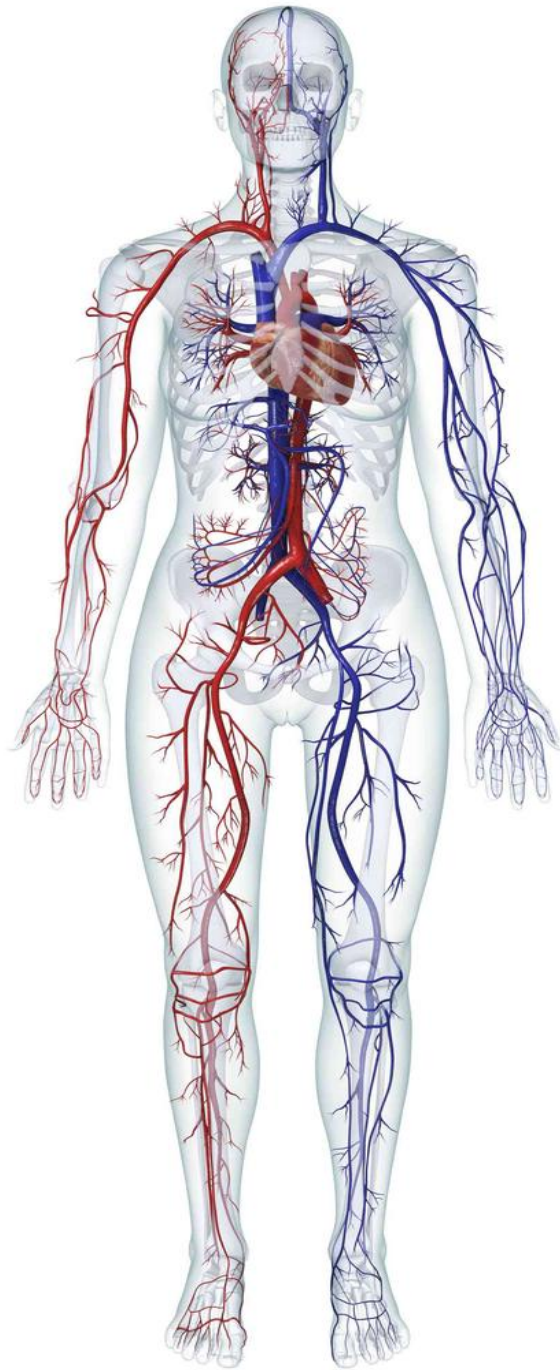
4. (Optional) Insight to Share with the Group: (Please feel free to skip this if you'd like.)

.....

Use Tips:

- Feel free to jot bullet points or keywords.
- Be respectful and listen with presence when your partner is sharing.

BODY MAPPING – WHERE IN MY BODY DO I FEEL THE STRESS?



ATTACHMENT STYLE – SELF REFLECTION ACTIVITY

This handout summarizes the four common attachment styles and offers space for personal reflection. These styles are not fixed labels, but adaptive strategies developed in response to early relationships. Use this as a tool for deeper self-awareness or journaling.

Attachment Style	How It Might Look	Reflection Prompts	Answers
Secure	Feels safe, trusts others, can seek help and comfort.	When do I feel safe enough to reach out or ask for help? Who helped me feel safe growing up?	
Avoidant	Minimizes needs, avoids closeness, disconnects emotionally.	What situations make me want to pull away? When did I learn to handle things alone?	
Ambivalent	Craves connection but fears abandonment or inconsistency.	Do I worry about people leaving or not caring enough? How do I respond to uncertainty in relationships?	
Disorganized	Fears both closeness and distance, feels unsafe in relationships.	Have I felt both drawn to and afraid of people? What makes it hard to trust others fully?	

SAFETY MAPPING WORKSHEET

This worksheet helps you reflect on the people, places, and strategies that contribute to your emotional and physical safety. Use this map to explore what supports your well-being, and what to do when you feel dysregulated or unsafe.

1. People Who Help Me Feel Safe:

2. Places Where I Feel Safe:

3. Activities or Tools That Help Me Feel Safe:

4. When I Start to Feel Unsafe, I Might Notice:

- My body feels...
- My thoughts become...
- I tend to...

5. Things I Can Do to Reconnect to Safety:

Use this worksheet for personal reflection or share it with someone who supports you. Safety mapping can be an ongoing practice.



DAY TWO

Deepening Trauma Understanding & Practice

Empathy & Skills

Why this approach (Day two)

“Children are not giving us a hard time—they are having a hard time. When we understand their trauma, we can respond with compassion that transforms.” (trainer insight)

On Day 1, we laid the foundation: understanding how trauma impacts the developing brain, emotions, behavior, and relationships.

Today, we take that learning a step deeper—from understanding what trauma is, to recognizing how it shows up in the lives of children and young people.

Children rarely say, “I’m traumatized.”

Instead, trauma communicates through behavior: outbursts, withdrawal, resistance, fear, hyperactivity, or emotional numbness.

Without a trauma-informed lens, these survival responses can be misunderstood as defiance, laziness, attention-seeking, or mental illness. This can lead to:

- Misdiagnosis
- Inappropriate interventions
- Re-traumatization
- Missed opportunities for healing

This approach helps professionals:

- **See behavior as a form of communication, not a problem to fix**
- **Understand how trauma can show up differently across sectors—in classrooms, courtrooms, clinics, or casework**
- **Avoid harmful labeling and respect adaptive coping**
- **Respond with strategies that support safety, regulation, and empowerment—not shame or punishment**



Caring Comes with a Cost

Today's session also holds space for you—the professional. When you work closely with trauma, you carry some of its weight.

Vicarious trauma, **burnout**, and **compassion fatigue** are real risks in this work.

That's why a trauma-informed approach must also include **staff well-being and organizational care**. You cannot pour from an empty cup—and children cannot feel safe with adults who are constantly overwhelmed.

By deepening your understanding and applying practical, sector-specific strategies, you'll be better equipped to:

- Prevent re-traumatization
- Promote healing
- Protect your own mental and emotional well-being

What You're Invited to Bring

Deepen Your Awareness

- Stay curious—look beneath behavior, not just at it
- Reflect on how trauma may be misunderstood or misdiagnosed in your sector
- Gently examine and expand your assumptions

Engage in Skill-Building

- Take part in role plays, discussions, and group reflections
- Apply trauma-informed principles to your real-world context
- Share your experiences to support collective learning

Practice Self-Awareness

- Notice your emotional responses during scenarios
- Reflect on how your identity, culture, and story shape your lens
- Stay open to both your strengths and learning edges

Contribute to a Healing Culture

- Remember: trauma-informed care is both individual and systemic
- Explore how your role and organization can foster safety and reduce harm
- Value supervision, peer support, and reflection as tools for resilience



Purpose of Day 2

- Deepen understanding of how trauma impacts behavior, emotions, learning, and relationships
- Identify and avoid common misinterpretations or misdiagnoses
- Explore how trauma manifests across **sectors and settings**
- Strengthen practical skills for **trauma-informed, emotionally safe responses**
- Apply **SAMHSA's six principles** of trauma-informed care in context
- Raise awareness of **secondary trauma, burnout, and compassion fatigue**
- Explore individual and organizational strategies for **well-being and resilience**
- Promote **peer learning, collective care, and professional growth**



Module 3: Recognizing and Responding to Development Trauma

Arrival, Grounding, and Reconnection

✦ What You'll Do:

- Reconnect as a group
- Ground yourself in the present moment
- Reflect on what you're bringing into Day 2
- Revisit Day 1 themes and prepare for what's ahead



Grounding Practice: Arriving Fully

Before we dive in, let's take a moment to settle.

- Sit comfortably, feet flat on the floor
- Take a slow, steady breath in... and out
- Feel the ground beneath you
- Notice one thing you can hear... one thing you can feel...
one thing you can see



There's no rush to be "ready." It's okay to arrive just as you are.

Check-In Prompt

Take a moment to reflect, then turn to a partner or small group:

"What are you arriving with today?"

It might be a thought, a feeling, a word, or even just your breath.

You can write it down here if you prefer:

📅 Today, I'm arriving with... _____

Recap of Day 1. Yesterday, we explored:

- What trauma is, and how it shows up in the brain, body, and behavior
- The power of emotional and physical safety in healing
- Our own nervous system responses and how to build regulation
- Why relational connection is at the heart of trauma-informed care

Focus of Day 2. Today, we'll take that learning further by focusing on:

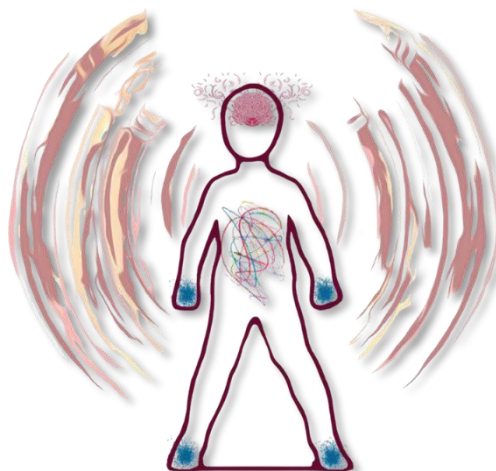
- Empathy: understanding what's behind challenging behavior
- Identity: recognizing how our lens and bias influence interpretation
- Skills: practicing how to respond in ways that create safety and connection

✦ **This isn't just about knowing more—it's about showing up differently.**

Developmental Trauma

✦ What You'll Learn:

- What developmental trauma is and how it differs from other trauma
- How early trauma impacts brain development, attachment, and emotional regulation
- How trauma can shape behavior across different ages and settings



What Is Developmental Trauma?

Developmental trauma happens during early life stages, when the brain and body are still growing. It often involves chronic stress, neglect, or exposure to danger—especially in environments where a child is meant to feel safe.

Unlike a one-time traumatic event, developmental trauma:

- Happens over time
- Affects the brain during sensitive periods
- Involves the people the child depends on most

When safety isn't consistent, the nervous system stays in a constant state of alert.

How It Impacts Development

Area Affected



Brain



Attachment



Emotional Regulation



Perception

Impact

The brain becomes wired for survival, not learning. Thinking shuts down; reacting takes over.

Children may struggle to trust, connect, or feel worthy of care.

Emotions can feel overwhelming or inaccessible. The child may shut down or explode.

They may interpret safe situations as dangerous or misread social cues.

Real-Life Examples

A 4-year-old who hits and kicks when separated from a caregiver may not be “naughty”—they may be reliving early abandonment or neglect.

A teenager who seems numb or unmotivated may be frozen, not lazy.

ACEs – Adverse Childhood Experiences

★ What You'll Learn:

- What the ACEs study is and what it taught us
- How early adversity and stress affect long-term health and wellbeing
- The difference between risk and resilience
- Why ACEs are a starting point—not a diagnosis

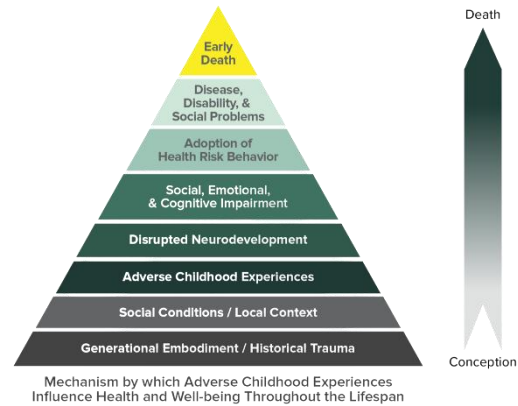
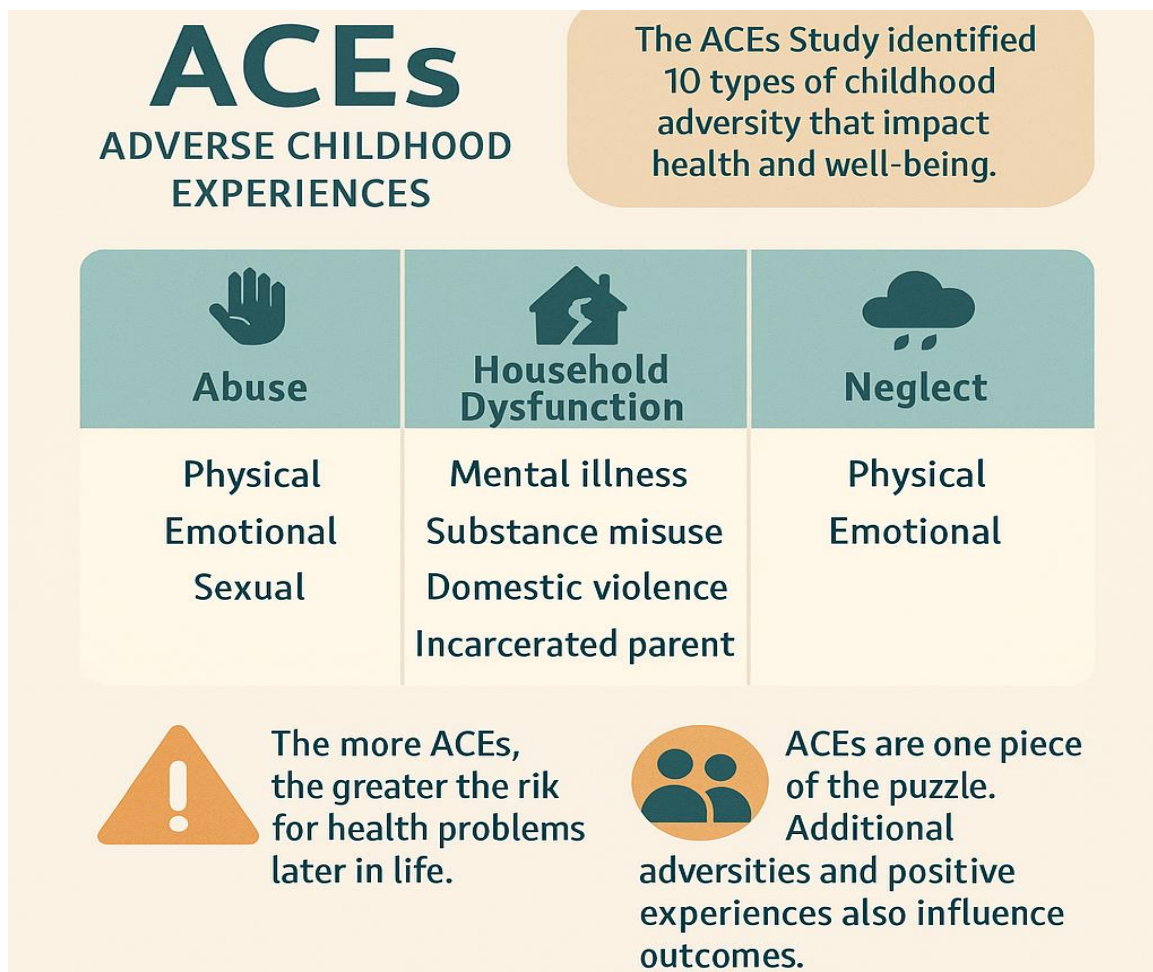


Image from: CDC-Kaiser ACE Study

The ACEs Study (1998)

The original study by the CDC and Kaiser Permanente identified 10 types of adversity experienced before age 18.



Beyond Original ACEs

Since then, the framework has expanded to include:

- Poverty and community violence
- Discrimination, racism, and intergenerational trauma
- Loss of cultural identity, war, and displacement
- School exclusion or justice involvement
- Bullying (in person and online)



 ***ACEs show how trauma accumulates—but they don't tell the whole story.***

Risk ≠ Destiny

ACEs are not a checklist or a diagnostic tool.

Two children may have the same number of ACEs but very different outcomes depending on:

Protective Factors:

- Stable, nurturing relationships
- Community support
- Cultural identity

 ***Resilience grows when children are seen, supported, and connected.***

Personal Reflection

“How does this relate to what I see in my work?”

What ACEs are most common in the children/families you support?

How has this framework helped—or limited—your understanding?

 Write or share your reflections here.....

Key Takeaways:

Trauma in early life shapes how children learn, behave, and relate

Developmental trauma is complex, often invisible, and relational in nature

ACEs are a helpful lens—but not a full picture

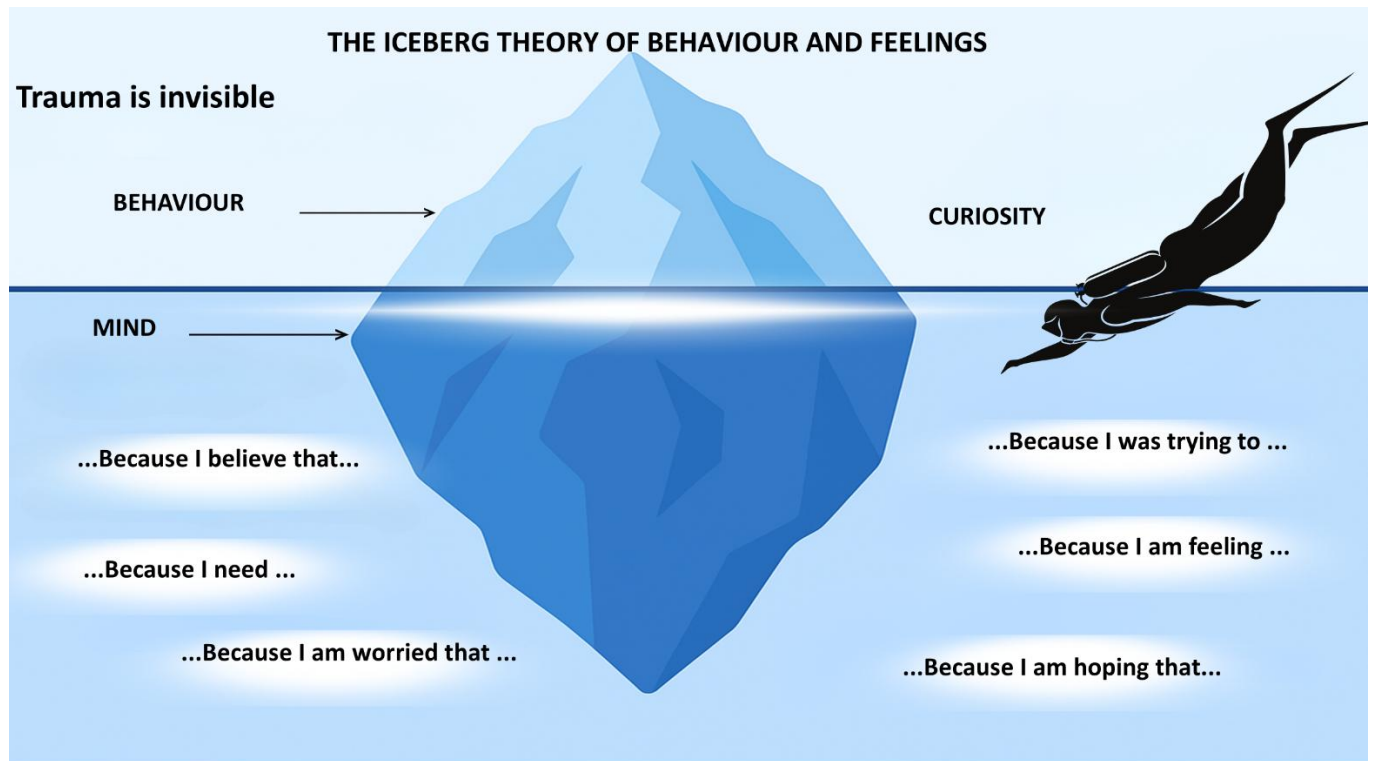
Healing is possible through safety, connection, and co-regulation

Recognising and Responding to Trauma

✦ What You'll Learn:

- How to see behavior as a communication of unmet needs
- Why trauma-informed practice means looking beneath the surface
- How to stay curious instead of reactive

Trauma is Invisible - The Iceberg Metaphor:



What We See vs What's Beneath

Just like an iceberg, most of what drives behavior is invisible—beneath the surface.

- ◆ **Above the Surface**- Observable behavior: yelling, refusing, withdrawing
- ▼ **Below the Surface** - Fear, shame, grief, unmet needs, unmet attachment, survival strategies



The behavior may be loud, but the story underneath is often silent.

Behavior Is Communication

A child's "acting out" is often their way of showing what they can't say.

Instead of asking, "How do I stop this behavior?", trauma-informed care asks:

- "What might this behavior be protecting them from?"
- "What unmet need is being expressed here?"

Activity: What's Beneath the Surface?

Explore this scenario:

A 12-year-old refuses to participate in class, disrupts others, and shouts at the teacher when asked to sit down.

Use the Iceberg Tool to reflect:

What might be going on underneath the behavior?

What emotions, history, or unmet needs could be at play?

How might you respond with curiosity instead of control?



Stay Curious, Stay Regulated

This session introduces the concept of **mentalizing**—our ability to hold someone else's inner world in mind.

We'll go deeper into this in the next session.

Mentalizing & Empathic Presence

✦ What You'll Learn:

- What mentalizing is and why it matters
- How trauma and stress shut down our ability to reflect on others' experiences
- How to stay present and grounded when others are dysregulated
- Tools for co-regulation and reflective listening



What Is Mentalizing?

Mentalizing means imagining what might be going on in someone else's mind—while staying connected to your own.

Make sense of behavior

It's a core human skill that helps us: **Respond with empathy**

Stay open and curious

When we are present and grounded we are able to mentalize:

- We stay open to what others might be feeling—even when they're hard to be with
- We model emotional safety and co-regulation
- We move from reaction to reflection

When we're stressed, triggered, or overwhelmed, mentalizing goes offline and lose access to this skill.



We can't help others feel safe if we're disconnected from ourselves.



Reflection:

- When is it hardest for me to stay present and curious?
- What helps me regulate so I can mentalize again?

Activity: Let's Dive in- Mentalizing in action

 **Curiosity is the antidote to reactivity**



What we see/hear?	How we may perceive/label it?	What might the child / young person be feeling (Trauma Lens)?	What might the child's / young person's need be (Mentalizing > Supportive Response)?
A child / young person punches another			
A student swears at a teacher			
A child / young person is not paying attention			
A child / young person laughs during a serious situation			

Key Takeaways:

Behavior is just the tip of the iceberg—look beneath for meaning, emotion, and unmet needs

Trauma and stress can shut down our reflective brain—we go offline

Mentalizing helps us respond, not react—and build trust even in hard moments

Staying grounded and empathic helps others regulate, connect, and feel safe

Module 4: Secondary (Vicarious Trauma and professional Resilience

The Cost of Caring - Vicarious Trauma & Professional Resilience

“Understanding our emotional bandwidth”



We will start by watching the Beacon House video (approx. 12 min)

The Window of Tolerance – Beacon House <https://youtu.be/nZnJMyNT620?si=g3-ZEsBJRypPsG9K>

What is the Window of Tolerance?

Your Window of Tolerance is your optimal zone of functioning—where you can think clearly, feel present, and respond flexibly.

When we're inside the window, we can:

- Focus, listen, and relate
- Feel emotions without becoming overwhelmed
- Stay grounded even under pressure

When we're outside the window, we may go into:

Hyperarousal

Fight/flight mode
Anxiety, anger, restlessness
Fast heart rate, racing thoughts

Hypoarousal

Freeze/shutdown mode
Numbness, exhaustion, disconnection
Flat affect, low energy, spaced out



Trauma can shrink our window. Regulation practices help us widen it again.

Reflection: Know Your Window

Take a few moments to reflect on your own experience.

What does it feel like when I’m inside my window? (e.g., calm, connected, focused)



What are my signs of hyperarousal?
(e.g., irritability, racing mind, snapping at others)



What are my signs of hypoarousal?
(e.g., zoning out, feeling numb, shutting down)



Regulation Tools – “What Helps Me?”

Think about practices, people, or settings that help you return to your window.

Regulation Strategy	What works for you?
Grounding (senses, breath)	
Movement (walk, stretch)	
Connection (talk to someone safe)	
Self-talk or reframing	
Nature, music, creativity	

 *Different things work at different times. The key is knowing your options.*



The Cost of Caring – Vicarious Trauma & Self-Protection

✦ What You'll Learn:

- How caring for others can impact our own emotional and physical health
- The signs of vicarious trauma, compassion fatigue, and burnout
- The role of the nervous system in absorbing stress
- Tools to support your regulation, resilience, and boundaries
- Why well-being must be a shared responsibility in trauma-informed systems

You can't walk through water without getting wet.

When we care deeply, we are changed.

Working with trauma affects us—emotionally, physically, and mentally.

This is not weakness. It's the cost of caring.

💡 *To be trauma-informed is to include ourselves in the circle of care.*

Vicarious Trauma – What Is It?

“Vicarious trauma” is the emotional residue that professionals carry after listening to others’ pain over time.



It is not the same as burnout:

Burnout = exhaustion from workload, poor conditions

Vicarious trauma = emotional changes from absorbing others' trauma

Compassion fatigue = the weariness of continual empathy

Common signs include:

- Sleep disturbances, irritability, numbness
- Difficulty connecting with others
- Intrusive images, low energy, and reduced empathy



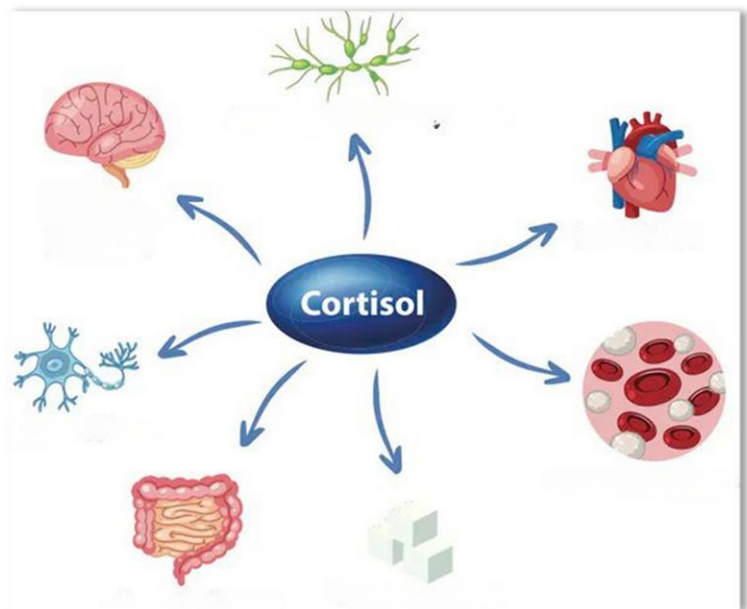
Cortisol, the “Stress Hormone” and the Impact on Health

When we are under chronic stress, cortisol floods our system.

This can lead to:

- Impaired memory, mood, and focus
- Reduced empathy and reactivity
- Long-term health issues (e.g., digestion, immunity, heart)

But we are not helpless—our bodies also produce healing hormones like oxytocin, serotonin, and endorphins.



 **Connection, movement, and joy are not luxuries—they are protective.**

Activity: What Fills Your Cup?

We explored that you can't pour from an empty cup. In small groups or alone, reflect on:

- What fills your cup?
- What depletes it?
- How can you build daily micro-practices that restore you?

Use color, words, or symbols to build your own “cup.”



In

Grounding & Boundaries Toolbox

Practical self-protection strategies:

-  **Grounding** - Box breathing, 5-4-3-2-1 sensory check, physical movement
-  **Boundaries** - Saying no, pausing before reacting, scheduling decompression time
-  **Connection** - Peer debriefs, reflective supervision, joyful connection
-  **Restoration** - Laughter, rest, creativity, nature, nourishment

Self-Care is a Shared Responsibility

Self-care is essential—but not enough.

Trauma-informed systems must:

- Create space for reflection and peer support
- Offer regular supervision and check-ins
- Promote a culture of psychological safety
- Respect boundaries and encourage balance

✨ *Well-being is not optional—it's foundational to safe, effective care.*

To be trauma-informed is to include ourselves in the circle of care.

Key Takeaways:

Vicarious trauma is a real and normal response to caring deeply

The nervous system carries what we absorb—emotionally and physically

Regulation, rest, and reflection are essential—not indulgent

Self-care is important, but systems must carry the weight too



Trauma and Social Identity: The Social GRACES Framework

What You'll Explore:

- How identity, power, and systems shape people's experiences of trauma
- Why understanding social context is central to trauma-informed care
- How to reflect on your own social positioning, power, and voice
- What safety means through different lived experiences

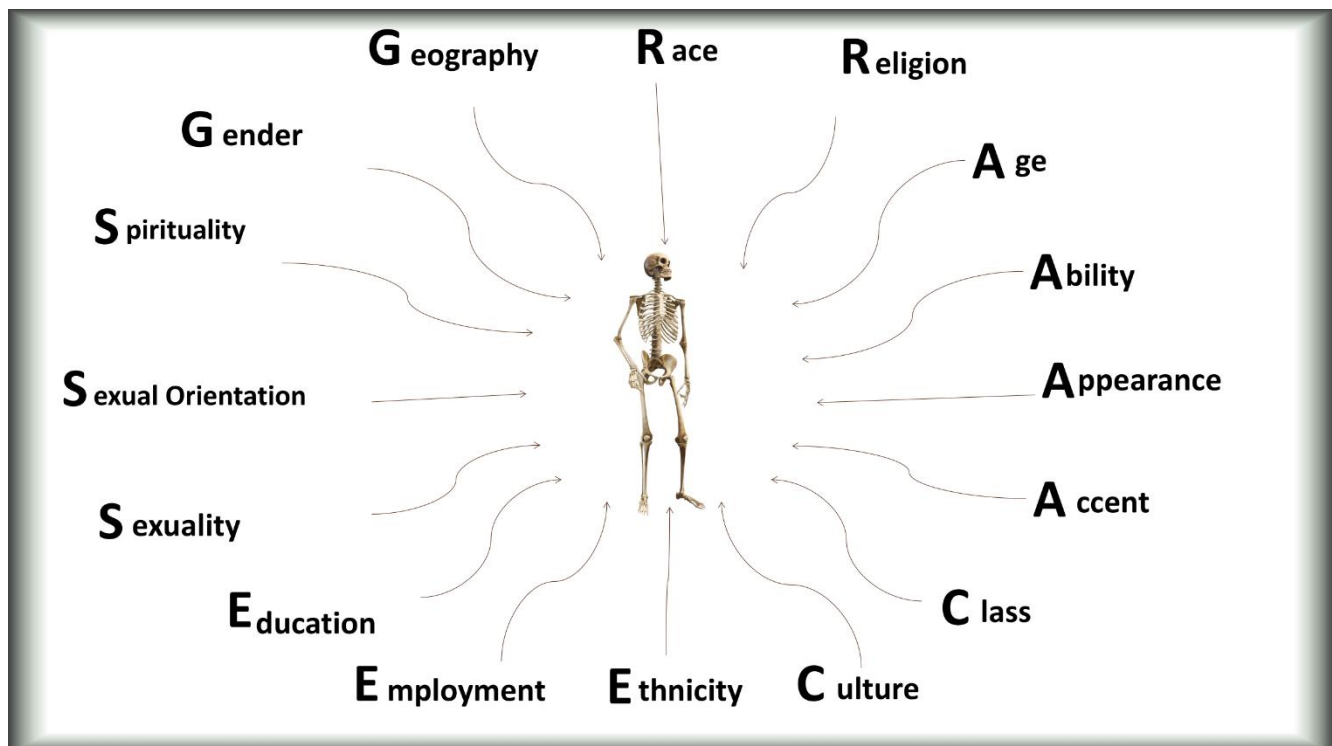


Social GRACES & Intersectionality (Burnham, 1993)

Not all wounds are visible. Not all safety looks the same.

We each carry multiple identities—some visible, some hidden.

These include aspects like:



Social GRACES help us reflect on:

- What parts of ourselves are seen or unseen
- Where we may hold power or privilege
- Where we may feel vulnerable or excluded

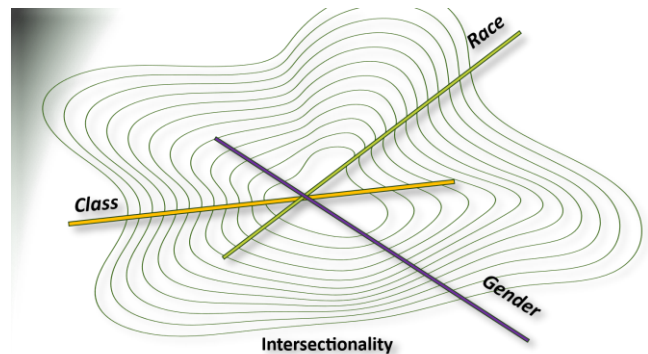
✨ *To be trauma-informed is to be identity-informed.*

This lens helps us understand how trauma is experienced differently depending on someone's social identity and environment.

Activity: Gallery Walk – “What Shapes Safety?”

Reflect on your own Social GRACES. These may include:

- What parts of your identity feel most visible in your work?
- Where do you feel your voice is heard? Where is it quieted?
- When have you felt excluded, unsafe, or misunderstood?
- What biases or blind spots are you willing to examine more deeply?



Why This Matters

Trauma doesn't occur in a vacuum—it interacts with culture, history, discrimination, and power. When we ignore this, we risk re-traumatizing the very people we want to support.

What feels “safe” for one person may feel threatening to another—based on past harm, cultural expectations, or social context.

Trauma-informed care must be equity-informed.

Key Takeaways:

Our identities shape how we experience trauma and how we heal

Power and privilege must be considered in every helping relationship

Emotional safety is not one-size-fits-all

Trauma-informed practice means being curious, not certain—especially about people's lived experience

Re-Traumatization & Relational Alternatives

What You'll Explore:

- How systems and interactions can unintentionally echo past trauma
- How to recognize signs of re-traumatization in everyday settings
- What relational alternatives support emotional safety
- What it means to move from reactive to responsive practice

What Is Re-Traumatization?

Trauma-informed care isn't just about *what we do*—it's also about what we *avoid*. Sometimes, without realizing it, professionals, policies, or routines can mirror the powerlessness, fear, or exclusion that someone has already experienced. This is called **re-traumatization**.

It can happen when people:

- Use harsh tone or judgmental language
- Enforce rules with no flexibility or explanation
- Touch without consent or come too close
- Ignore sensory or emotional needs
- Remove someone from a group or space



These may seem like “normal” ways of managing situations—but for someone with a trauma history, they can feel unsafe or threatening.

Moving From Reactive to Responsive

Being trauma-informed means responding to distress with curiosity and compassion, rather than control or punishment.

Let's compare some everyday responses:

Instead of...	Try...
“You need to calm down!”	“I see you’re upset. I’m here with you.”
Punishing emotional outbursts	Supporting regulation first, then discussing behaviour
Zero-tolerance rules	Flexible, relational approaches to conflict
Calling parents to ‘scare’ a child	Working together to understand and support the child

Reflection: What Could Be Different?

Reflect in pairs or small groups:

- Where in your work might re-traumatization be happening without intention?
- What kinds of tone, routines, or discipline could feel unsafe to someone?
- Where is there room for more flexibility, collaboration, or choice?
- Write down one trauma-informed shift you'd like to try.

Why This Matters

Re-traumatization breaks trust.

Trauma-informed care builds it.

*The way we speak, structure services, and respond to distress **can either deepen harm—or begin to heal it.***

Key Takeaways:

Re-traumatization can happen through tone, rules, or routine

Trauma-informed care is about emotional safety, not just behaviour management

Connection, regulation, and collaboration help people feel safe again

Small relational shifts can prevent further harm

Closing Circle: Integration and Return

As we prepare to close our second day, we gather once more in circle. We invite you to speak from the heart:

“What is one thing you’re taking with you today?”

You may share a word, an image, or simply presence.



Regulation is the foundation of healing. Before we can think or learn, we need to feel safe.

Thank you for your courage, your stories, and your presence.

ACTIVITY SHEETS

My Window Tolerance Map

How do I feel when I'm in my window of tolerance?

.....

What pushes me into hypo-arousal?

.....

What helps me return to my window of tolerance?

.....

EMPTY CUP / FULL CUP ACTIVITY

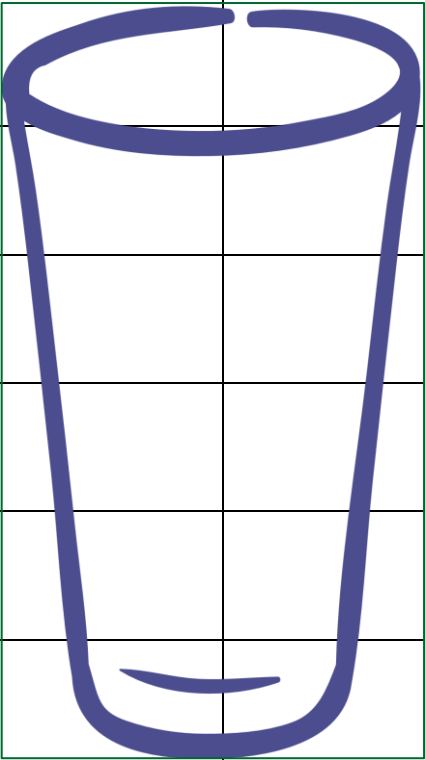
In pairs, each person shares:

- One thing that’s currently draining their energy in their work.
- One thing that replenishes it.

Listen to your partner non-judgmentally and with presence

After both have shared, reflect together on:

- What small shift could you make this week to protect your energy?

🔹 Drainers (What depletes your energy?):	🌱 Fillers (What restores your energy?):
	

CIRCLE OF INFLUENCE AND CONTROL ACTIVITY

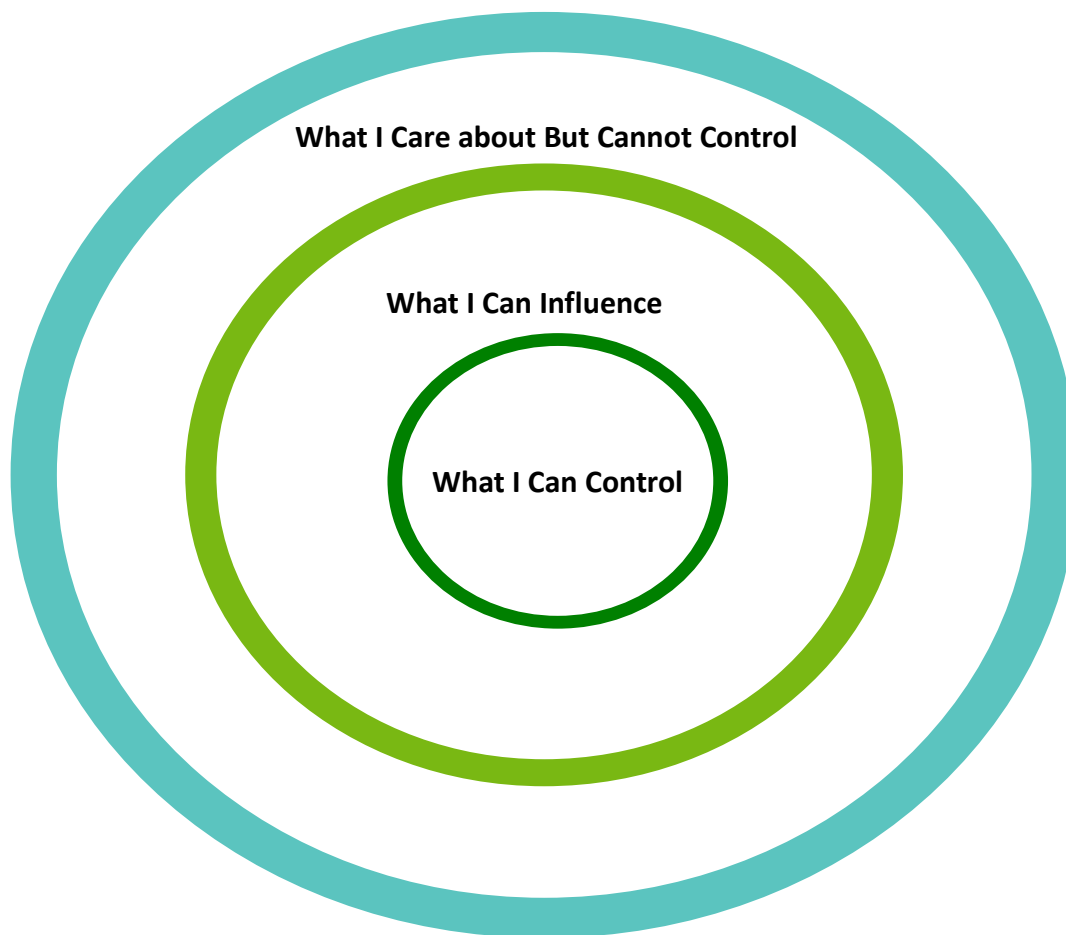
This activity helps you reflect on where you're placing your emotional energy and how to shift focus toward what you can control or influence—key to trauma-informed resilience.

Instructions

1. Think of a situation or challenge that's been emotionally draining.
2. Write elements of that situation into the circles based on how much control or influence you have.
3. Reflect on where you're currently spending most of your energy.

My Circle of Influence

Use the space below to draw your circles or write down your thoughts.



Reflection Questions

- What surprised you?
- Where are you currently placing most of your energy?
- How does it feel to name what you cannot control?
- What would help you shift your energy toward what you can control or influence?
- What is one small action you can take this week within your circle of control?

CONCLUSION: CARRYING IT FORWARD

As you reach the end of this training, remember:

Trauma-informed care is not a destination. It's a way of being.

Each child, young person, and family carries a unique story.

So does each professional.

And through this journey, you've deepened your understanding of how trauma affects bodies, brains, behaviors, and relationships—and how healing begins with safety, trust, and connection.

What You Now Carry:

*The ability to pause and ask: “**What happened to you?**” instead of “What’s wrong with you?”*

*The courage to **see behavior as communication**—not just something to manage, but something to understand*

*The responsibility to reflect on your own **power, presence, and role** in creating **safe spaces***

*The reminder that even **small changes in approach** can plant seeds of **resilience***

What This Manual Has Offered:

- Foundational knowledge of trauma and its effects
- Practical strategies to respond with empathy, flexibility, and skill
- Tools and frameworks that can be adapted across education, social work, health care, and justice
- Space to reflect on your own identity, needs, and well-being

What Comes Next Is Yours:

Creating trauma-informed systems is a shared commitment. It requires leadership. Reflection. And above all—**human connection**. *As you return to your work:*

- Stay curious. Stay compassionate. Stay grounded.
- Model what safety feels like.
- Be the calm in someone’s storm.
- Speak up when systems cause harm—and help shape new ways forward.

Final Thoughts

Every child deserves to feel safe, seen, and understood, just as every professional deserves support, reflection, and space to grow.

You are not just delivering services—you are building trust, holding hope, and making healing possible. Together, we are reimagining what care, justice, and education can feel like.

This is the heart of trauma-informed care. And it begins with you.

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ONLINE RESOURCES:

FEELINGS WHEEL – <https://feelingswheel.com/>

INSIDE OUT MOVIE CLIP - https://youtu.be/ZAL0nwCo0h8?si=QF_Ja2D1HgngGNc9

HAND MODEL OF THE BRAIN - <https://youtu.be/f-m2YcdMdFw?si=LJ1QrqNUaFDZL1IK>

BRAIN ANATOMY / AMYGDALA HIJACK - <https://www.simplypsychology.org/amygdala-hijack.html#:~:text=Amygdala%20hijack%20is%20a%20term,at%20someone%20you%20care%20about.>

POLYGAL THEORY - <https://www.polyvagal institute.org/whatispolyvagaltheory>

TOXIC STRESSES AND IMPACT ON DEVELOPMENT - <https://developingchild.harvard.edu/resources/videos/toxic-stress-derails-healthy-development/>

ATTACHMENT TRAUMA - <https://centerforattachment.com/>

ARC FRAMEWORK - <https://arcframework.org/what-is-arc/#:~:text=The%20Attachment%2C%20Regulation%20and%20Competency,wide%20range%20of%20symptoms%20presentations.>

ADVERSE CHILDHOOD EXPERIENCES - https://uktraumacouncil.org/research_practice/aces-research

MENTALIZATION - <https://youtu.be/MJ1Y9zw-n7U?si=OPZAfodldLtxcMGi>

WINDOW OF TOLERANCE - <https://youtu.be/nZnJMyNT620?si=g3-ZEsBJRypPsG9K>



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**Multi-disciplinary prevention of and response to school-related violence
Trauma-Informed Care**

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