

Welcome to

**TRAUMA & RESILIENCE IN
TRIBAL COMMUNITIES**

THE TRAINING WILL BEGIN SHORTLY

While you're waiting...



Icebreaker Question (answer in the chat)

What's your "go to" way of doing something nice for others?



Survey & Certificate of Completion

Available tomorrow, at the end of the 2nd part of the training

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Hi, We're CalTrin!

Who we are

- The California Training Institute
- Funded by the State of California, Dept. of Social Services, Office of Child Abuse Prevention (OCAP) to provide training to FRCs and CAPCs
- We support child abuse prevention in California through professional development and extended learning.

What we offer

- Live webinars & small group training
- Virtual, self-paced courses
- Job aids & other resources



UPCOMING TRAININGS

mark your calendars!

Visit caltrin.org to view and register for upcoming webinars or workshops



06/13 | Protective Factor of the Month: Social Connections



06/14 | Leading an Effective 15-Minute Huddle



06/20 | Protective Factors & ACEs: Meeting Families with Hope and Healing



06/21 | Child, Family, & Community Well-Being Learning Series: Building the Community Pathway



07/11 | Overview of the Protective Factors



07/12 | Measuring Success: Program Evaluation Basics

Before We Begin...

DURING



Access the note taking slides now! The link can be found in the chat.



This presentation is being recorded.

DURING



Review interactive features for today's session. Locate the controls on the toolbar at the bottom of your screen.

AFTER



Complete the survey at the end of tomorrow's session to receive your Certificate of Attendance.



A follow-up email will be sent to all participants within two days.



TRAUMA & RESILIENCE IN TRIBAL COMMUNITIES

Presenters:
Veronica Willeto DeCrane
Amy Foster Wolferman, M.Ed.



Speakers SPOTLIGHT



Amy Foster Wolferman, MEd
Director, School-Based TTA
National Native Children's
Trauma Center



Veronica Willeto DeCrane
TTA Manager
National Native Children's
Trauma Center

Learning Objectives

- Define key trauma terms and concepts
- Understand the concept of historical trauma in tribal communities
- Understand basic findings of trauma research
- Identify connections between trauma and child development
- Understand the concept of resilience
- Describe protective factors that build resilience



Your wellbeing is important



It is okay to ask for help

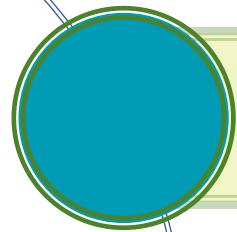




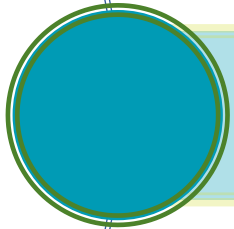
Why do we need to talk about trauma?

- Our most pressing health issues can be attributed to traumatic childhood experiences
- Trauma is preventable
- People can heal from trauma
- Asks the right question

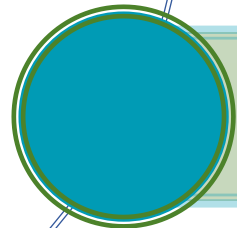
Trauma



The experience of a real or perceived threat to life or safety



or to the life or safety of a loved one



Causes an overwhelming sense of terror, horror, helplessness, and fear.



Types of trauma

Acute: single event

Chronic: multiple different types of events or same type of event experienced repeatedly

Complex: ongoing or repeated trauma exposure + long-term and developmental effects

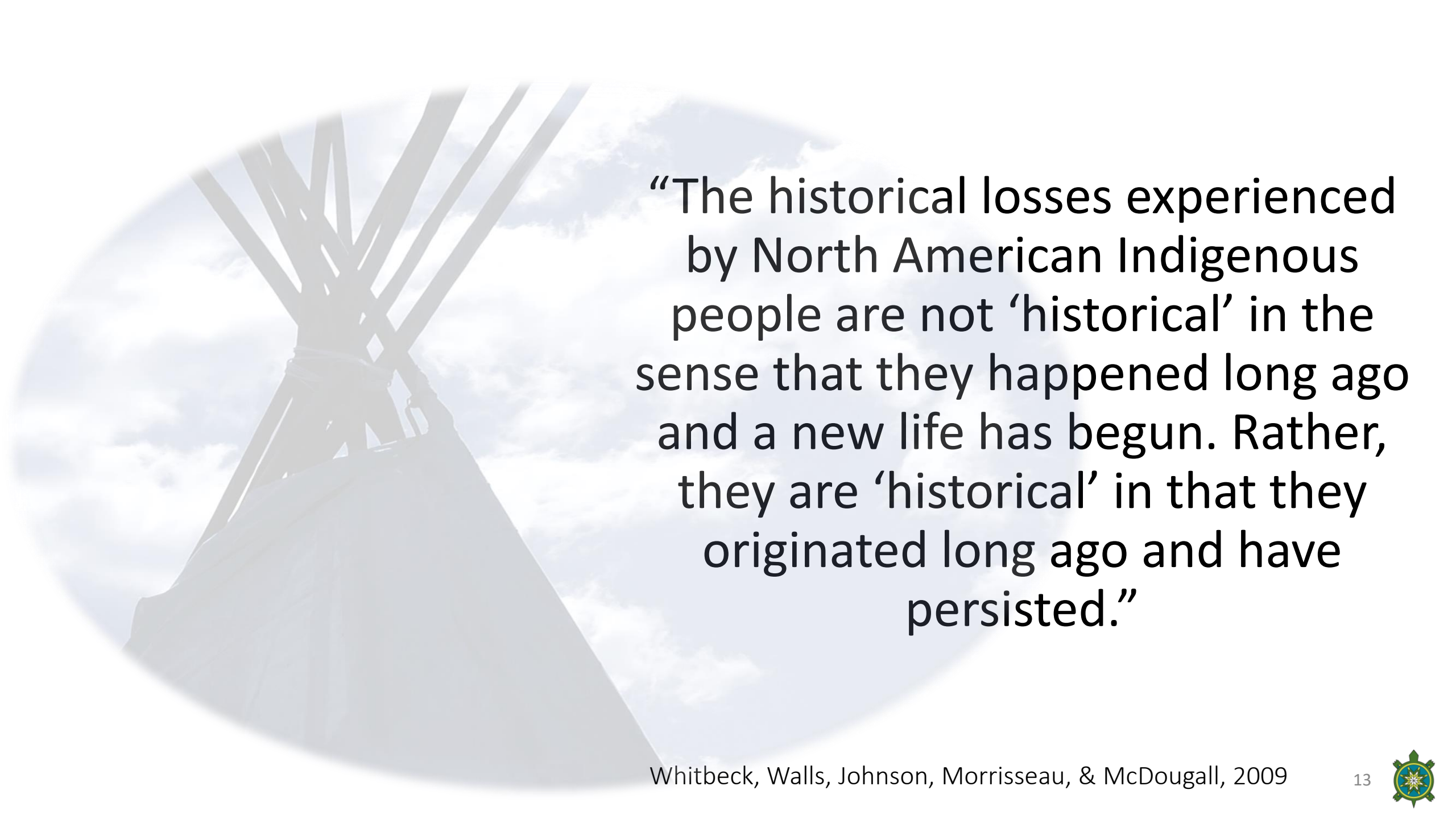
Historical: events or ethnocidal or genocidal intent experienced by a people based on their collective identity



“The cumulative psychological wounding across generations, including the lifespan, which emanates from massive group trauma.”



- Maria Yellow Horse Brave Heart



“The historical losses experienced by North American Indigenous people are not ‘historical’ in the sense that they happened long ago and a new life has begun. Rather, they are ‘historical’ in that they originated long ago and have persisted.”



Historical Trauma Today

Historical Events:

- The establishment of Reservations
- Breaking of treaties
- Forced assimilation
- Boarding schools

Examples of Current Impacts:

- Poor economic conditions on reservations
- Persistent discrimination
- Health disparities
- Underfunding of service systems in Indian Country
- Disparities in child protection and juvenile justice systems



Removal

“A great general has said that the only good Indian is a dead one. In a sense, I agree with the sentiment, but only in this: that all the Indian there is in the race should be dead. Kill the Indian in him, and save the man.”

General Richard Henry Pratt
Carlisle Indian Industrial School
Carlisle, Pennsylvania





Meet Reggie

- What signs of historical trauma do you see in Reggie's story?
- How might these traumas be influencing Reggie's life?

The way Reggie remembers it, he was born speaking his own language, which he has always associated with the strong, peaceful features of his grandfather's face. But then he was sent off to school and told it was wrong to use his own words. When he came back home after school nobody knew him. His grandfather had long since died, and his mother had passed, too, while he was away. Reggie is not proud of the way he lived when he was a young man. He drank and ran around on his wife, and she did the same. When his wife left for good, she left their daughter Shari with her mother, Reggie's mother-in-law. Reggie got clean, though, and he married again, to Cecilia. With Cecilia's encouragement Reggie took his daughter back in. By this time Shari was 11 years old and her grandmother was in bad health. Soon enough Shari was acting like her mother, only at a younger age, and it was not just alcohol nowadays, it was drugs. Reggie could not contain his anger at his daughter's behavior. After the fourth or fifth time he and Cecilia caught Shari stealing from them, Reggie told Shari to leave and not come back. Shari was 18 at the time. Maybe being on her own would be good for her, he thought. Young people have to learn their own lessons. If he was able to figure out his own problems and get his life together, then his daughter should be able to do the same.



Link: <https://youtu.be/sWzwP-f36iA>

Adverse Childhood Experiences (ACEs)



ACEs in Indian Country

| Population Sample | Trauma Category | Trauma Exposures | |
|---|-----------------|------------------|---|
| | | 1+ | Multiple/Severe |
| 36 incarcerated AI/AN in NM (De Ravello et al., 2008) | Childhood ACEs | 97.2% (35 of 36) | 81% 53% reported childhood SA |
| 288 youth ages 14-24 from one NP reservation (Brockie et al., 2015) | Childhood ACEs | 78% | 40% 37% reported 3-6 exposures |
| 233 adults aged 50 and older living in rural off-reservation locations in MN and SD (Roh et al., 2015) | Childhood ACEs | 75.6% | Mean ACE score = 2.6 31.8% reported 4+ exposures |
| 516 adults from 7 tribes in SD (Warne et al., 2017) | Childhood ACEs | 83.15% | 61.57% 50.04% reported household substance abuse |



Other traumatic events not included in the original ACE Study:

- Traumatic grief
- Community violence
- Serious injury/accident
- School violence
- Medical trauma
- Physical assault
- Natural disaster
- Forced displacement
- War/terrorism



Community & systems traumas experienced in many tribal communities

- Racism/discrimination
- Poverty
- Food insecurity
- Housing instability
- Involvement with the juvenile justice system
- Involvement with the child welfare system
- Zero-tolerance school policies
- Underfunded and/or inadequate medical facilities



Meet Shari

- What are the individual, community, system, and/or historical traumas apparent in Shari's story?
- What are some of her behaviors that may be linked to those traumas?



Shari recently moved back to her home community with her new husband Stan and her two children, 10-month old Josie, who is Stan's daughter, and 8-year-old Damian, whose father has never been in the picture. Shari's father Reggie and stepmother Cecilia have agreed to house them while Shari and Stan look for a place of their own. Shari wants to make a fresh start, and she wants to feel the support of her family. But she has so many bad memories to get past. When her parents were still living together, they didn't bother to keep her safe during the many parties they had. One of their so-called friends repeatedly sneaked into Shari's room and abused her. Then when her mother left and her father decided not to bother raising her, Shari felt like it was more of the same: nobody cared. She got more confirmation of this when Reggie kicked her out of the house during her senior year of high school. Because of that she never got her degree. The school here is another issue she is worried about. Shari will be sending Damian to the school she went to, just off the reservation, in a farming and ranching community. Almost all of the teachers are white. Shari had made As and Bs in elementary and middle school, and before her grandmother died, she felt sure she would be able to go to college. Her grandmother talked about how she would get a scholarship. They would make it happen. Then in high school, living with her dad and stepmother after her grandmother's health declined, Shari started drinking and using drugs, and she got shoved into special ed. The school back then put Native kids into special ed so they could forget about them, it felt like. She is afraid the same thing will happen to Damian. Since she left home Shari has struggled. In between relationships she has had to live in her car for long stretches of time. She knows this has been tough on Damian. There were times when she left him in the car by himself for hours and times when she left him exposed to people who she shouldn't have trusted. One of her relationships ended when she found out her boyfriend had photographed Damian in his underwear. At the same time Shari doesn't know how to manage Damian's out-of-control behavior. She sometimes loses her temper with him, warning him that he will end up like his no-good father. Pretty much the only time she knows she can calm him down is if she lets him play on her phone.



Link: <https://youtu.be/sWzwP-f36iA>

Adverse Childhood Experiences (ACEs)





- Hyperarousal
- Re-experiencing
- Avoidance or Numbing
- Changes in Affect
- Sense of Foreshortened Future
- Cognitive Distortions

Normal Responses to Abnormal Situations



Trauma Reminders

- The body responds to senses and/or emotions associated with a traumatic experience.
- A person can be “triggered” back into the moment or the aftermath of the event.
- The body reacts as though the trauma is actively occurring.

FIGHT, FLIGHT, FREEZE



Trauma's Impact on Emotional Development

- Difficulty with self-regulation
- Difficulty describing feelings/internal states
- Difficulty communicating wishes and desires
- Often feel self critical, anxious, worried, fearful, ashamed, guilty - rarely experience joy



Trauma's Impact on Social Development

- Isolation and withdrawal
- Persistent distrust and suspiciousness of others
- Continued expectation of maltreatment
- Difficulty in perspective-taking and enlisting others as allies
- Difficulty with establishing appropriate social boundaries



Trauma's Impact on Cognitive Development

- Reduced ability to attend, concentrate, memorize, engage
- Less experience with executive functioning
- Decreased communication skills
- Feelings of frustration with tasks
- Increased special education referrals



Adaptive Responses to Trauma

| | | | | | |
|-------------------------------|-------------|------------------|-------------------|---------------------|-------------------|
| Hyperarousal Continuum | Rest | Vigilance | Resistance | Defiance | Aggression |
| Dissociative Continuum | Rest | Avoidance | Compliance | Dissociation | Fainting |
| Internal State | Calm | Alert | Alarm | Fear | Terror |

Bruce Perry, M.D.



Threat Appraisal and Detection



Dr. Seth Polak



Meet Damien

- What are the problematic behaviors Damien exhibits?
- What past traumas could his behavior be linked to?



Damian started 2nd grade in January. He struggled to answer ordinary questions about his family, where he had moved from, and what kinds of activities he liked, but he otherwise appeared to be a bright, cheerful boy with a noticeable desire to please. After a couple of months, though, Damian began getting into trouble for stealing small items from his classmates, and his art assignments often included gruesome depictions of himself committing violence against other people. In the mornings before the first bell, Damian was allowed to play on the classroom computers, but he would not leave the computer when the bell rang or when his teacher told him to do so. Damian's teacher eventually involved the principal because Damian's refusal to leave the computer was disrupting the whole classroom. The second time she was called in, the principal placed Damian in a small unoccupied office and told him he would have to sit alone in the room until he could behave himself. Damian began screaming and flailing, refusing to be left alone in the room, striking the principal when she tried to grab him by the shoulder to get him in a chair, pulling books off shelves and destroying some framed documents and photos that had been hanging on the wall. The principal and school counselor discuss Damian's situation and decide that they need to refer him to IHS Behavioral Health.





Take A Moment

- Remember to breathe.
- Recovery from trauma is probable.

Thank you!

Veronica Willeto DeCrane

Veronica.Willeto@mso.umt.edu

(406) 998-8953

Amy Foster Wolferman

Amy.FosterWolferman@mso.umt.edu

(406) 531-9261

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Thanks for joining us!

WHAT'S NEXT?

- Check now to make sure you have tomorrow's session on your schedule (10:00am-Noon PDT)
- Survey and certificate available tomorrow
- Follow-up email with resources within two days



STAY CONNECTED FOR MORE FREE TRAINING & RESOURCES!

