



FOR EVERY CHILD, A CHANCE



 THE NATIONAL CENTER ON
Family Homelessness


Understanding Traumatic Stress in People Experiencing Homelessness
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Treatment for Homeless Technical Assistance Workshop
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What is Traumatic Stress?

- Overwhelming experience.
- Involves a threat.
- Results in vulnerability and loss of control.
- Leaves people feeling helpless and fearful.
- Interferes with relationships and beliefs.

Source: Herman, J. (1992). *Trauma and recovery*. New York: Basic Books.

Sources of Traumatic Stress



- Loss of a loved one
- Accidents
- Homelessness
- Community/school violence
- Domestic violence
- Neglect
- Physical abuse
- Sexual abuse
- Man made or natural disasters
- Terrorism

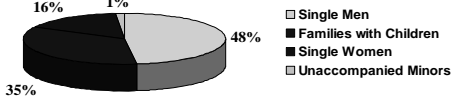
Trauma and the General Population

- Trauma exposure was considered to be rare (e.g., combat, natural disasters).
- More common than previously thought.

Trauma and Homelessness



The Faces of Homelessness



Category	Percentage
Single Men	16%
Families with Children	48%
Single Women	35%
Unaccompanied Minors	1%

Source: Annual Homeless Assessment Report to Congress. (2007). U.S. Department of Housing and Urban Development Office of Community Planning and Development. Available at www.huduser.org/publications/pd1/ahar.pdf.

History of Trauma Among Single Adults

Childhood:

- 27% lived in foster care, group home, or other institutional setting.
- 25% were physically or sexually abused.
- 21% were homeless.

Adulthood:

- 23% are veterans.
- 15.3% of jail inmates have been homeless at some point and have high rates of other traumatic experiences:
 - 31% have been physically or sexually abused.
 - 46% have been shot at (excludes military combat).
 - 49% have been attacked with a knife or other sharp object.

Many are also vulnerable to violent victimization while homeless.

Source: Burt, M. R. et al (1999). *Homelessness: Programs and the people they serve: Summary report -findings of the National Survey of Homeless Assistance Providers and Clients*. Washington, DC: The Urban Institute; Greenberg & Rosenheck (2008). *Jail incarceration, homelessness, and mental health: A national study*. *Psychiatric Services*, 59(2), 170-177; National Coalition for the Homeless (2007). *Hate, Violence, And Death on Main Street USA: A Report on Hate Crimes and Violence Against People Experiencing Homelessness 2007*. Available at www.nationalhomeless.org

History of Homelessness Among Single Adults (con.)

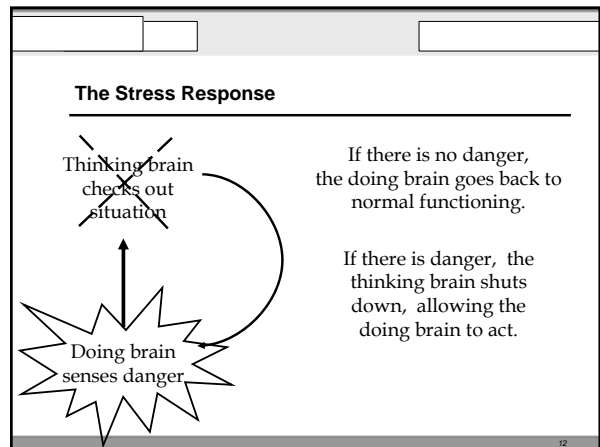
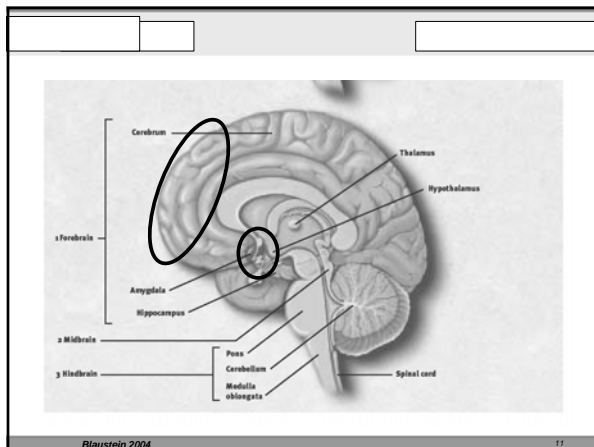
- 37% homeless three or more times.
- 34% homeless more than 25 months.

Source: Burt, M. R., Aron, L. Y., Douglas, T., Valente, J., Edgar, L., & Britta, I. (1999). *Homelessness: Programs and the people they serve: Summary report -findings of the National Survey of Homeless Assistance Providers and Clients*. Washington, DC: The Urban Institute.

Homelessness and Trauma

- The experience of becoming homeless is traumatic.
- Homelessness involves loss of:
 - Place
 - Belongings
 - Loved ones
 - Routines
 - Sense of safety, security, and control

The human brain has a built-in alarm system that signals us when we may be in danger.






Chemical Response to Stress

- Prepares the body for action when threat is detected.
- Helps the body respond to stress effectively.

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Fight, Flight, Freeze

To protect itself, the body uses increased energy to respond to danger in 1 of 3 ways:

Fight  Flight  Freeze 

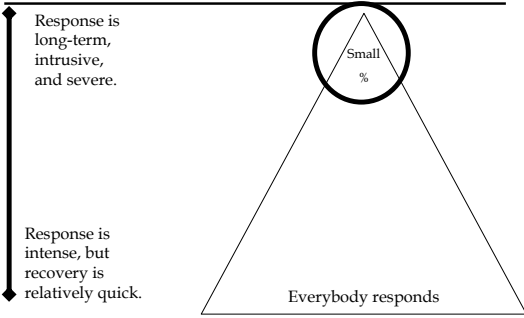
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Triggers

- Triggers include seeing, feeling, or hearing something that reminds us of past trauma.
- Triggers activate the alarm system.
- When the alarm system is activated, but there is no danger, it is a false alarm.
- The response is as if there is current danger.

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Continuum of Responses



Response is long-term, intrusive, and severe.

Response is intense, but recovery is relatively quick.

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What Determines How People React to Trauma?

- Response to trauma depends on many "mediating factors."
- Identifying these factors is essential to understanding client responses and risk for long-term difficulties.

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Factors that Influence Responses to Trauma

1. History and current status.
2. Characteristics of the traumatic event.
3. Culture.
4. Stage of development.
5. Nature of relationships and social supports.

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1. History and Current Functioning Influences Response to Trauma

- Prior exposure to trauma
- Mental health concerns
- Current living situation
- Strengths/coping skills

} History

} Current Functioning

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2. Characteristics of Traumatic Events Influence Response to Trauma

- What was the nature of the event?
- How severe was it?
- How long did it last?

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3. Culture Influences Response to Trauma


“A broad understanding of culture leads us to realize that ethnicity, gender identity and expression, spirituality, race, immigration status, and a host of other factors affect not just the experience of trauma but help-seeking behavior, treatment, and recovery.”

-National Child Traumatic Stress Network

Source: National Child Traumatic Stress Network, *Culture and Trauma Briefs*. (2006). Volume 1(4). Available at www.NCTSN.org.

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4. Developmental Status Influences Response to Trauma



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Development and Trauma

- Skills specific to each developmental stage build on learning from previous stages.
- Children exposed to trauma invest energy into survival instead of developmental mastery.
- Development in adulthood may continue to be impacted.

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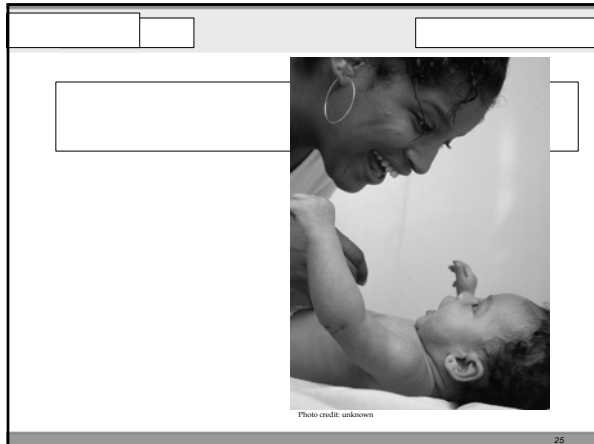
5. Nature of Relationships and Social Supports Influences Response to Trauma

“The interactive ‘dance’ [between caregiver and child] lays the foundation for the exchanges that the baby, then child, then adult will echo throughout life...Adult relationships – be they between politicians or business people or a shopper and the grocery clerk in the check out line – are all influenced by this, our first and most profound relationship.”

- R. Karr-Morse & M. Wiley

Source: R. Karr-Morse & M. Wiley (1997) *Ghosts from the nursery*. New York: The Atlantic Monthly Press.

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Attachment

- Enduring emotional bond.
- Biologically driven.
- Determines future relationships and self-regulation.

Photo credit: unknown

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Secure Attachment	Insecure Attachment
<ul style="list-style-type: none">• Secure “container”• Provides for basic needs and safety• Gives the freedom to explore and learn	<ul style="list-style-type: none">• Lack of availability and predictability• Lack of safety and security• Diminished ability to develop trusting relationships and coping skills

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Attachment in Adulthood

- In adulthood, relationships expand beyond primary caregiver.
- Early trauma makes forming adult relationships difficult. It decreases our ability to trust, seek out safe supports, etc.
- Leads to decreased social supports.

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Risk Factors for More Severe Trauma Responses

- Poor current functioning and history of trauma.
- Traumatic experiences across the lifespan are chronic and severe.
- How the particular event is perceived/viewed by specific cultural group.
- Trauma early in development.
- Insecure attachment/poor early relationships and limited current social support.

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Complex Trauma

- Prolonged, persistent traumatic stress.
- Often occurs within the caregiving system during critical developmental stages.
- Leads to immediate and long-term difficulties in many areas of functioning.

Source: Slide adapted from NCTSN, 2005

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The Stress Response and Complex Trauma

- When danger is ever-present, alarm goes off too frequently.
- Brain treats all potential threats as actual threats.
- Brain continues to release chemicals, so body becomes unbalanced.

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Triggers and Complex Trauma

- More reminders of past danger.
- Brain is more sensitive to danger.
- Thinking brain automatically shuts off in the face of triggers.
- Past and present danger become confused.

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Common Triggers

- Reminders of past events.
- Lack of power/control.
- Conflict in relationships.
- Separation or loss.
- Transitions and routine/schedule disruption.
- Feelings of vulnerability or rejection.
- Feeling threatened or attacked.
- Loneliness.
- Sensory overload.

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Continuum of Responses

Response is long-term, intrusive, and severe.

Small %

Everybody responds

Response is intense, but recovery is relatively quick.

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Impact of Complex Trauma

- Emotional
- Physical
- Cognitive

Photo credit: M. Roe

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Common Mental Health Issues Related to Trauma

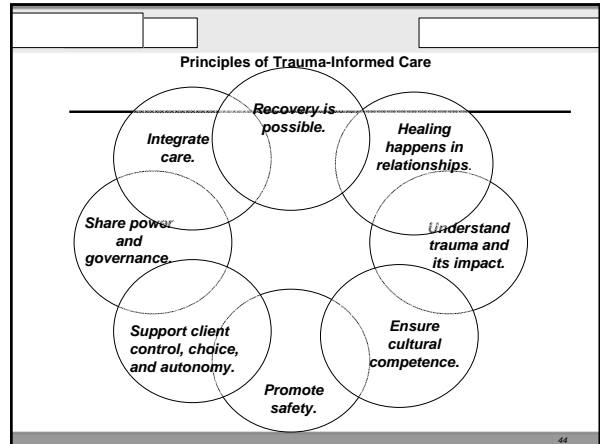
- Anxiety
- Depression
- Post Traumatic Stress Disorder (PTSD)
 - Re-experiencing
 - Hyperarousal
 - Avoidance

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Trauma-Informed Services (con.)

A system "...whose primary mission is altered by virtue of knowledge about trauma and the impact it has on the lives of consumers receiving services."

Harris, M. (2004, July). *Trauma informed services: The evolution of a concept*. PowerPoint Presentation. www.womenandchildren.treatment.org/media/presentations/plenary/Harris.ppt



Importance of Being Trauma-Informed

- Create responsive services/programs.
- Avoid re-traumatizing clients.
- Help clients on their path to recovery.

Jahn Moses, D., Glover Reed, B., Mazelis, R., & D'Ambrosio, B. (2003). *Creating trauma services for women with co-occurring disorders: Experiences from the SAMHSA women with alcohol, drug abuse and mental health disorders who have histories of violence study*. Delmar, NY: Policy Research Associates (Women and Violence Coordinating Center).

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Thank You