

Opening Transcript

Video transcript for SHARE

Slide 1 – Opening Image

Welcome to the Oklahoma Department of Mental Health and Substance Abuse Services three hour training titled Trauma is Just the Beginning, Discover Hopeful Endings. We encourage you to take breaks during this eLearning to enhance your learning and to practice self-care.

In most of the modules, you will have a video to watch that contains the core information and questions will follow to assess your knowledge. A few of the modules will have a video only. At the end of the course, you will be able to print a certificate after you complete a short evaluation.

Thank you for joining us on this journey of learning that trauma is just the beginning. You can discover hopeful endings.

Slide 2 – Technology Requirements

If you want to save your progress in the eLearning, you will need to enable cookies. To do this, go to Internet Options, and be sure the box that says Delete browsing history on exit is NOT checked. If that box is checked, you will have to start the eLearning from the beginning each time you open it. If it is **NOT** checked, your progress will be saved, and you can resume where you left off. Please go and verify your settings now before starting the training. If you experience any technical difficulties, please contact the Helpdesk at the Oklahoma Department of Mental Health and Substance Abuse Services at 405.522.0318.

Slide 3 – Information and Educational Purposes Only

The materials contained in this training are made available for educational purposes only and are not meant to serve as medical advice or to replace consultation with your physician or behavioral health professional. Information about diagnosis and treatment that appears on this eLearning should not be used to diagnose or treat a behavioral health problem without consulting a qualified behavioral health care provider. You are advised to consult your physician or behavioral health provider about personal questions or concerns.

Slide 4 – Self-Care

This training may contain information or materials that, based on your own history and life experiences, could cause distress. Please practice good self-care. If needed, take a break, talk to someone, practice positive coping skills and consult with a behavioral health professional if necessary.

Opening

[Visual: ODMHSAS SHARE, Strengthening Hope and Resilience Everyday]

Hi, my name is Gwen Downing; and I'm the Manager of Hope and Resilience for the Oklahoma Department of Mental Health and Substance Abuse services. I'm going to be with you through many, many modules as we learn together about trauma and its effects on us. One of the reasons we changed my title from the Coordinator of Trauma-informed Services to the Manager of Hope and Resilience is that as we began this journey, we started finding out that people got stuck on the trauma piece and we found that very early on because it was such a learning experience for all of us that it kind of opened doors to things we hadn't understood before that we really, really wanted to understand that. But, if we get stuck on the trauma, then the people we're trying to help are going to get stuck on the trauma too, and what we really want to do in trauma-informed system is create safety , instill hope and build resilience.

And, we're going to talk about that a little bit more in depth later but that's what the focus of this training is going to be about, is to help us accomplish those three goals. This training is going to be more about us as individuals as it will ever be about the people that we serve. In our culture the sources of trauma are so prevalent that the information we're going to learn about is going to be just as important for how we see ourselves, our friends, our family, and our community as it will ever be in our jobs and the reasons that we're taking this training.

We want to understand trauma and its effects so that we can see people differently. This doesn't mean that we aren't going to be holding them accountable for their actions because we're always accountable for our actions, but it helps us understand where things are coming from and help people find different ways of coping with what's happened to them. We want people to understand that trauma is different than anything else we learn about in the behavioral health field. And, the reason is that everything that is from trauma is something external that happens to us. It's not something that we were born with but something that happens to us as we go through life. It's a normal reaction to an abnormal event.

Trauma is something that most of us are going to experience at some point in our lives at some degree. Not everyone who goes through a traumatic event is going to develop symptoms, or if they do, those symptoms may just be short-lived. That doesn't mean that they're going to ever reach diagnostic criteria, even though it might. The majority of people who go through trauma do recover, and they recover often very quickly. So, just because you go through a traumatic event doesn't mean that you'll necessarily reach diagnostic criteria. We all have our own intrinsic personalities, our own coping skills; we all have our own pasts, things that may or may not have made us more resilient or more susceptible to a traumatic event, but it is important that we understand the symptoms since that is something that probably will be shared through people that go through these types of events.

It is also important that we practice the things that we will be doing every day in this work, and that's self-care. No matter how much experience or education you have, that doesn't make you not susceptible to experiencing the same effects as somebody else. So, we want to make sure as you're watching this training, as you're going through these modules that you're practicing good self-care. You're going to have to do it every day at work, and so it's a good place to start is that if there's any of this information that affects you, that you take a break, practice those coping skills, and do the things that you need to do to take care of yourself.

I do have one request before we really get into the meat of this training. One thing I want you to do as you go through this, and that's to keep an open heart and an open mind. It's easy to sit down in any training, but especially one you're doing online, and be like, "Okay, here's the information I need to get, and here's the questions I need to take," and keep going. But when I first learned about trauma, it changed me. It changed the way I saw myself, and it changed the way I saw the people around me. It helped me understand my coworkers and the things that we struggle with, and we're going to talk about that in vicarious trauma. It helped me understand so much why people couldn't get out of places that it didn't seem like no matter which treatment we provided. And, it changed me; and that's why I'm as passionate about this as I am and so if you will just do me a favor and go through this training thinking about every single person that you know, including yourself and the people that you work with, both as coworkers and as people that you serve, and how this information applies to them. Then, hopefully, you'll get the heart of this training; and it'll change the way you see the world and that it'll help you create safety, instill hope, and build resilience for yourself and those that you serve.

[Visual: So Why Hope and Resilience?]

We've talked about the theme of this training and that is that trauma is just one piece of someone's story and that when we can create safety, instill hope, and build resilience, we give them the power to discover hopeful endings. And, I think that's really important that we discuss those three aspects and why we chose them as the bedrock for this.

The first one is SAFETY. And when we talk about safety, we aren't just talking about physical safety, but we're talking about psychological safety and social safety. Let's define those a little bit. PHYSICAL SAFETY is something we all understand or we think we understand, that, you know, there's no immediate danger. There's a clean room; it's sheltered; it's locked doors--things of that nature.

Opening Continued

What may be safety to us may not be safe to someone else because we all have our own internal psychological safety; and you aren't really safe until you are safe inside yourself. Let me give you an example of that. You may be working with someone who's been in a really, what you consider, horrific, traumatic situation, whether it's an adult in domestic violence, a child in a serious abuse situation; and you get them and put them in a new safe place, a place that we define as safe. Now, the thing is that they're in a brand new environment with people they don't know with rules they don't know and in a world that is filled with chaos. So, how do they feel inside? While we're saying you're safe now, you're safe now, do they truly feel safe? And that's something we have to consider throughout this training and when we're working

with people is understanding that it's not just us going, "Well they're safe now, what's the big deal?" But, do they feel safe and do they have that sense of safety inside of them?

The next part of safety is SOCIAL SAFETY. So, I may be in a safe place; I may be starting to feel that I can be safe. But then there is what we call SOCIAL SAFETY. And this is so very important in the work that we do and not just at work but who we are as individuals in our community because who we are and, as we talk about culture, creates that sense of social safety, that they are safe with other individuals. This comes from dealing with things like stigma; it comes from dealing with a lot of those rules they've been taught—that you aren't supposed to trust, you aren't supposed to think, you aren't supposed to feel. And, that when we give permission and that we become cognizant of how trauma affects someone, we help create that sense of social safety. And that's important—not just in the milieu that we work in. and the milieu itself should become therapeutic, but also again as our role of individuals in a community. That as we help break down stigma and we help talk about trauma with our friends and our coworkers and neighbors and we make it a very common understanding, that helps create that social safety outside of the therapeutic environment for when they are actually in their homes and communities.

Our second principle is to instill hope. That seems very vague or really high concept but it's really the most important part of the work that we do. When one looks at the ten fundamental components of recovery, out of the ten, the one that they identified that was the most important is hope, that it was the catalyst to everything else, that without hope, those other pieces of recovery wouldn't come together, that the person wouldn't be able to experience it. And when we talk about hope, it's important that we really understand how to give hope and do it appropriately. When we come into this work, most of us have this passion to share hope and to give hope to the people that we serve and work with.

The problem is that sometimes we have so much hope when they're in a place that they can barely handle a drop. If you think about it, someone who's in the dark for a very, very long time, they can't take a room to be suddenly flooded with light. They just need a single candle to be lit for that capacity to build in them to experience the light. It's the same thing with hope.

When we meet someone who might be in the very worst moment of their life, I can't be telling them about what a wonderful life they'll have five years from now because they can't see it and they can't understand it. But what I can do is maybe give them hope for ten minutes from now, to make it through one night, to make it through one day. And then, as we work together, we keep creating that capacity for hope until they have the same hope we have for them to have that five-year lifetime hope for things to be better and things to change.

We give hope when we meet people right where they are in that moment, when we see them for who they are, and when we offer the simplest things. Sometimes, it is nothing more than being present; it may be nothing more than offering something to drink or something to eat. But, that is how we give hope; and hope is the catalyst for everything else. And it actually leads us into resilience because Bruce Perry says that resilience can't exist without hope.

Resilience needs to be thought of not as a personal character trait but as a skill, something that's developed. And the reason we focus on resilience so much is because it's not just about as recovery but it's about understanding that life is going to continue to happen. And while it may not be the same thing that happened to you before, the probability of another event happening is so high that we all need to be as resilient as possible. And, we understand that. Part of teaching that resilience is helping the person understand what resilience is, that it is about strength, and it is about the ability to bounce back, but that it also has its limits and that no person on this planet is 100% resilient to everything. Anything that has strength and that has strength inherent in it--whether it's our brains, our bodies, bridges or buildings, no matter how strong they are, no matter what they have been created to bear, they all have a limit. And when they hit that limit, part of being resilient is being able to recognize that and go "I need relief, I need other support, or I need help." And, that being resilient is knowing when to get help when you need it as much as being able to withstand what's happening and come back from it.

Many of the children and family that we work with have never been given the opportunity to develop healthy coping skills or to have those things that lead to resilience in their lives. And, one of the main things that, no matter whether you're looking at the medical association or the psychological association or any of the groups that speak on resilience talk about, it's the importance of having that one person in your life, that one person that sees you, that loves you and accepts you unconditionally.