
How to Support Families from a Trauma-Informed Lens

*National Nurse-Led Care Consortium
and the Joseph J. Peters Institute*

Zoom Orientation

1

Captions

To adjust or remove captions, click the “Live Transcript” button at the bottom of your Zoom window and select “Hide Subtitle” or “Show Subtitle.”

CC
Live Transcript

2

Questions

Please add your questions for the speaker and comments for the group into the Q&A box.

Q&A

3

Technical Issues

Please message Zaharaa Davood in the chat.

Chat



●●● Accreditation Statement

Accreditation Statement: The National Nurse-Led Care Consortium is accredited as a provider of nursing continuing professional development by the American Nurses Credentialing Center's Commission on Accreditation. This session, *How to Support Families from a Trauma-Informed Lens*, has been approved for 1.0 NCPD contact hour.

Success Completion Requirements: To obtain the 1.0 contact hour of nursing continuing professional development, you must attend the entire activity and complete the evaluation.

Please rename yourself on your Zoom profile (not in the chat) with the name you used to register for the training, thank you!



The National Nurse-Led Care Consortium (NNCC) is a nonprofit public health organization working to strengthen community health through quality, compassionate, and collaborative nurse-led care. NNCC's mission is to advance nurse-led healthcare through policy, consultation, and programs to reduce health disparities and meet people's primary care and wellness needs.

Joseph J. Peters Institute (JJPI) is a non-profit mental health organization that provides outpatient, trauma-informed services to survivors of trauma as well as individuals with histories of violence and abuse. JJPI's mission is to restore hope with dignity, we do that by providing compassionate person-centered evidence-based practice interventions that provide healing and mental health wellness. JJPI is one of the few providers on a national level that provides comprehensive trauma treatment that encompasses the entire cycle of abuse.

The Philly Supporting Parenting Relationships through Outreach, Understanding, and Training (Philly SPROUT) will support children and their caregivers participating in NNCC's home visiting programs, Nurse-Family Partnership (NFP) and Mabel Morris Family Home Visit Program (MM), through mental health services provided by JJPI mental health clinicians. The program will also enhance the capacity of Philadelphia-based child and family service providers through infant and early childhood mental health (IECMH) training and learning collaboratives.

This training was made possible by Grant Award #1H79SM086431-01 from SAMHSA. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of SAMHSA.





Subject Matter Experts



Chou Hallegra, MA, CTCP

Program Manager

Philadelphia Family Support Projects, Vision for Equality



Sarah Leaman, M.Ed.

Family Support Specialist

Philadelphia Family Support Projects, Vision for Equality





How to Support Families in Crisis from a Trauma Informed Lens

Chou Hallegra, MA, CTCP
Sarah Leaman, M.Ed.



Sarah Leaman

Sarah Leaman is a Family Support Specialist for the Philadelphia Family Support Projects at Vision for Equality. She is a parent of four children, two of her children have disabilities, including a developmental disability. For most of her career, she was a special education teacher, working with students with high medical, physical, and communication needs. Now, she is dedicated to supporting individuals with disabilities and their families navigate services and supports within their community. Sarah has a Master of Education, to include Autism, ABA, Transition in Special Education graduate certificates. She is a Certified Trauma Sensitive Professional.

She can be reached by email at,

Sleaman@visionforequality.org

Or by phone

(215) 923-3349 ext. 207



Chou Hallegra

Chou Hallegra is the program manager for the Philadelphia Family Support Projects at Vision for Equality. She identifies as a person with disabilities and is the parent of three individuals impacted by medical and developmental differences including autism and cerebral palsy. She has been involved with different initiatives in PA for over a decade and has devoted her life to helping people with disabilities and their caregivers to live fulfilling lives. Furthermore, Chou completed post-graduate training in rehabilitation counseling and extensive training on trauma-informed care. She is a certified person-centered thinking trainer, a certified trauma-competent professional, and a certified mindfulness trainer and coach.

She can be reached by email at challegra@visionforequality.org or by phone at 215-923-3349 Extension 213.



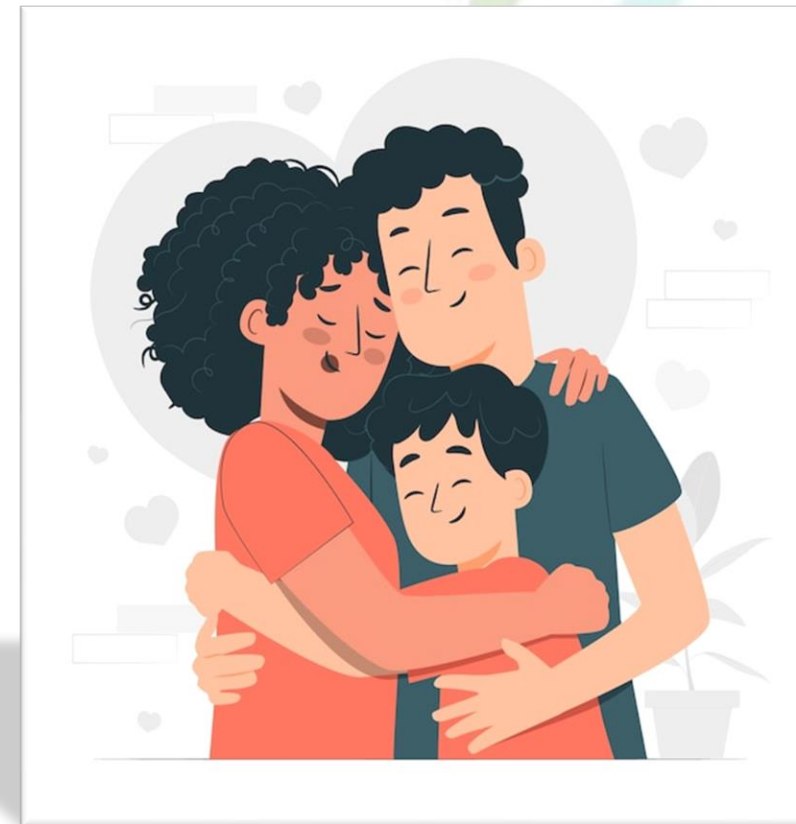
What We Do



Vision for Equality
Serving People with Disabilities and Their Families

Our Systems Navigation Project

- Families get hands-on training from a peer to help them navigate systems of care.
- Families learn better ways to manage their encounters with I/DD and autism systems.
- Families learn positive approaches to address loved ones' needs and troubleshoot challenges.
- Families feel less isolated, more connected, and supported.



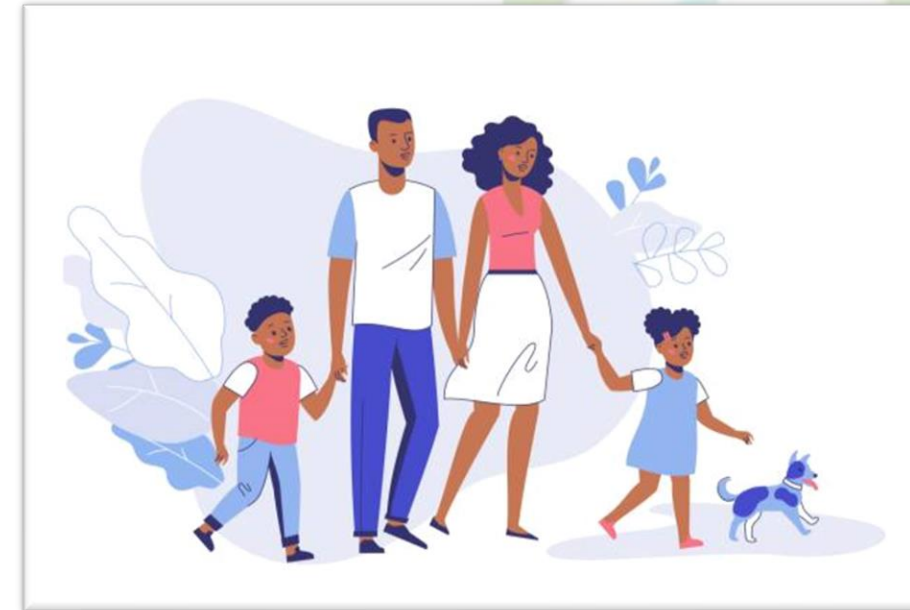
Our Trauma Informed Care Project

- **Training:** Our Caregiver Stress Series is comprised of 1hour virtual workshops on different topics related to caregiver stress.
- **Trauma Therapy:** Referrals and financial support for it.
- **Support Group:** A safe place to share experiences and resources, process emotions and learn evidence-based coping skills (Cognitive-Behavioral Therapy techniques, Tapping, Journaling, Meditation, Mindfulness, etc.).
- **Peer-to-peer support** provided to families: a listening ear, a shoulder to lean on.



Our Birth-Five Project (Targeting Families with Young Children)

- Finding families with younger children before or at the time of diagnosis.
- Inspiring hope for the future and helping to plan for everyday life utilizing family-friendly tools such as the LifeCourse tools.
- Connecting with someone who has been there.
- Empowering them to presume competence.
- Providing a safe place to process grief and loss that many caregivers experience.



Agenda

- The Impact of Stress on Families
- What is Trauma?
- How to Effectively Support Families in Crisis



Vision for Equality
Serving People with Disabilities and Their Families

The Impact of Stress on Families



Vision for Equality
Serving People with Disabilities and Their Families

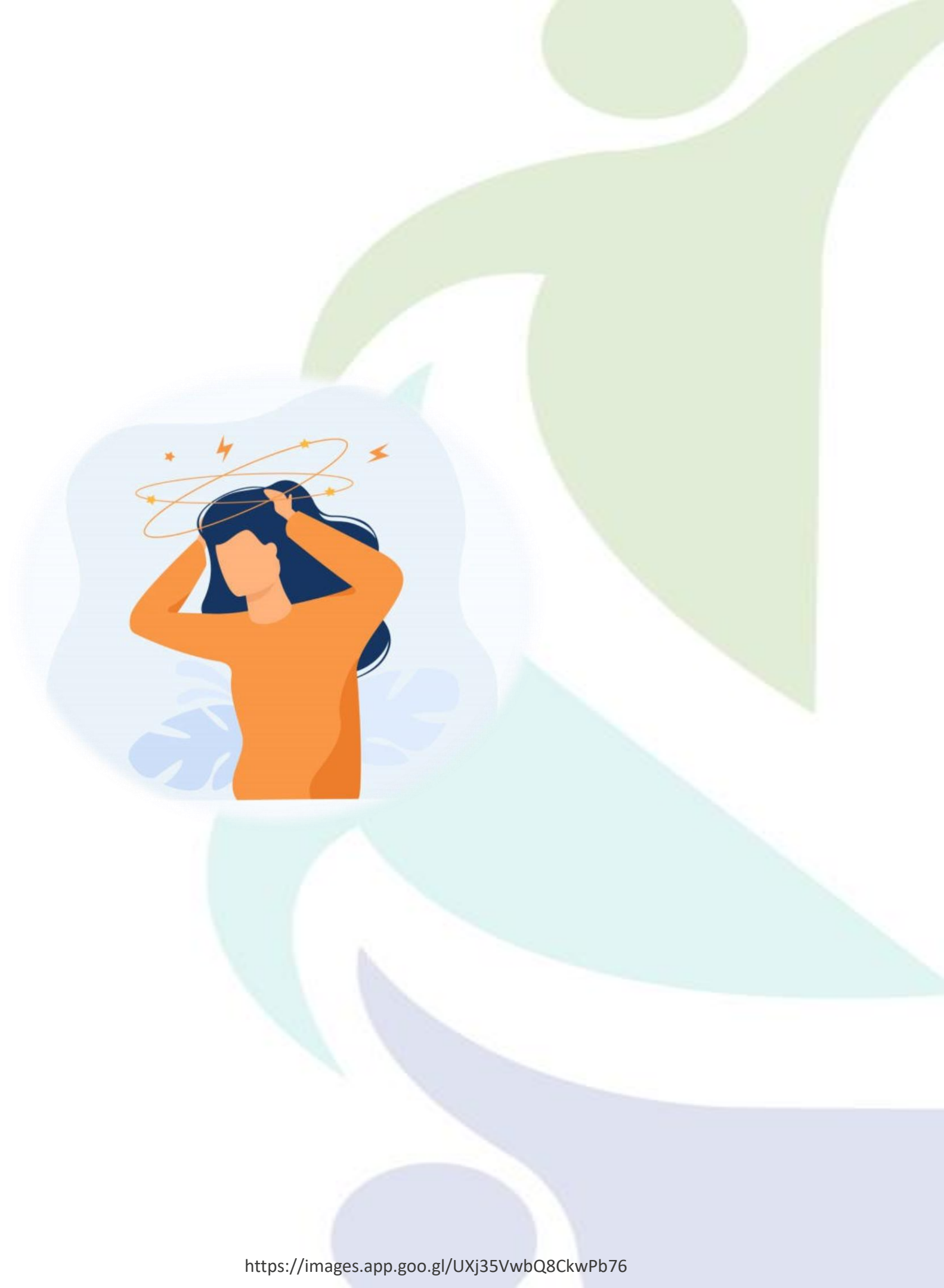
Common Stressors for Caregivers

- The impact of other relationships with partner, siblings, extended family, and friends.
- Concerns about the future, the child's long-term care needs and potential challenges as they grow older.
- The physical strain of providing personal care, lifting, and managing child's needs.
- Balancing work, home, caregiving, and personal needs.
- Political climate, how it can impact the access to resources, services, and advocacy efforts.



Common Stressors for Caregivers

- Dealing with challenging behaviors.
- High cost of medical care, specialized equipment, therapies and potential loss of income due to reduce work hours.
- Social isolation and feeling disconnected from social activities.
- Difficulty finding reliable and affordable respite care to allow for personal time and breaks.
- Complexities in navigating insurance, accessing services, and advocating for child's needs.
- Worrying about the child's access to appropriate education and support services.



How Stress Impacts Caregivers

- 66.6% of unpaid caregivers report at least 1 mental or behavioral health symptoms.
- 32.9% of unpaid caregivers report mental or behavioral health problems i.e. Anxiety, depression, or substance abuse as compared to only 6.3% of individuals who are not caregivers.
- Caregivers are 3.3% more likely to report using substances to cope.
- 30.7% of unpaid caregivers report having seriously thought about suicide which compares to 3.6% of individuals who are not caregivers.
- 6 of every 10 caregivers would rate their own health as moderate or poor.
- 34% of caregivers report being under significant financial strain due to having to reduce their hours or stop working

Stress continuum

Thriving "I got this."	Surviving "Something isn't right."	Struggling "I can't keep this up."	In Crisis "I can't survive this."
<ul style="list-style-type: none"> • Calm and steady with minor mood fluctuations • Able to take things in stride • Consistent performance • Able to take feedback and to adjust to changes of plans • Able to focus • Able to communicate effectively • Normal sleep patterns and appetite 	<ul style="list-style-type: none"> • Nervousness, sadness, increased mood fluctuations • Inconsistent performance • More easily overwhelmed or irritated • Increased need for control and difficulty adjusting to changes • Trouble sleeping or eating • Activities and relationships you used to enjoy seem less interesting or even stressful • Muscle tension, low energy, headaches 	<ul style="list-style-type: none"> • Persistent fear, panic, anxiety, anger, pervasive sadness, hopelessness • Exhaustion • Poor performance and difficulty making decisions or concentrating • Avoiding interaction with coworkers, family, and friends • Fatigue, aches and pains • Restless, disturbed sleep • Self-medicating with substances, food, or other numbing activities 	<ul style="list-style-type: none"> • Disabling distress and loss of function • Panic attacks • Nightmares or flashbacks • Unable to fall or stay asleep • Intrusive thoughts • Thoughts of self-harm or suicide • Easily enraged or aggressive • Careless mistakes and inability to focus • Feeling numb, lost, or out of control • Withdrawal from relationships • Dependence on substances, food, or other numbing activities to cope

WINDOW OF TOLERANCE

The window of tolerance and different states that affect you



HYPERAROUSAL

- Abnormal state of increased responsiveness
- Feeling anxious, angry and out of control
- You may experience wanting to fight or run away



DYSREGULATION

- When you start to deviate outside your window of tolerance you start to feel agitated, anxious, or angry
- You do not feel comfortable but you are not out of control yet

SHRINK your Window of Tolerance

Stress and trauma
can cause your
window of
tolerance to
shrink

Think of the window of tolerance as a river and you're floating down it. When the river narrows, it's fast and unsafe. When it widens, it slows down and you:

- are at a balanced and calm state of mind
- feel relaxed and in control
- are able to function most effectively
- are able to take on any challenge life throws at you

WINDOW OF TOLERANCE

Meditation,
listening to music,
or engaging in
hobbies can
expand your
window of
tolerance

EXPAND your Window of Tolerance



DYSREGULATION

- You start to feel overwhelmed, your body might start shutting down and you could lose track of time
- You don't feel comfortable but you are not out of control yet



HYPOAROUSAL

- Abnormal state of decreased responsiveness
- Feeling emotional numbness, exhaustion, and depression
- You may experience your body shutting down or freeze

Your "Window of Tolerance"

.....and why you'll feel better when you can
find it and stay in it.....



**How does stress
impact the families that
you support?**



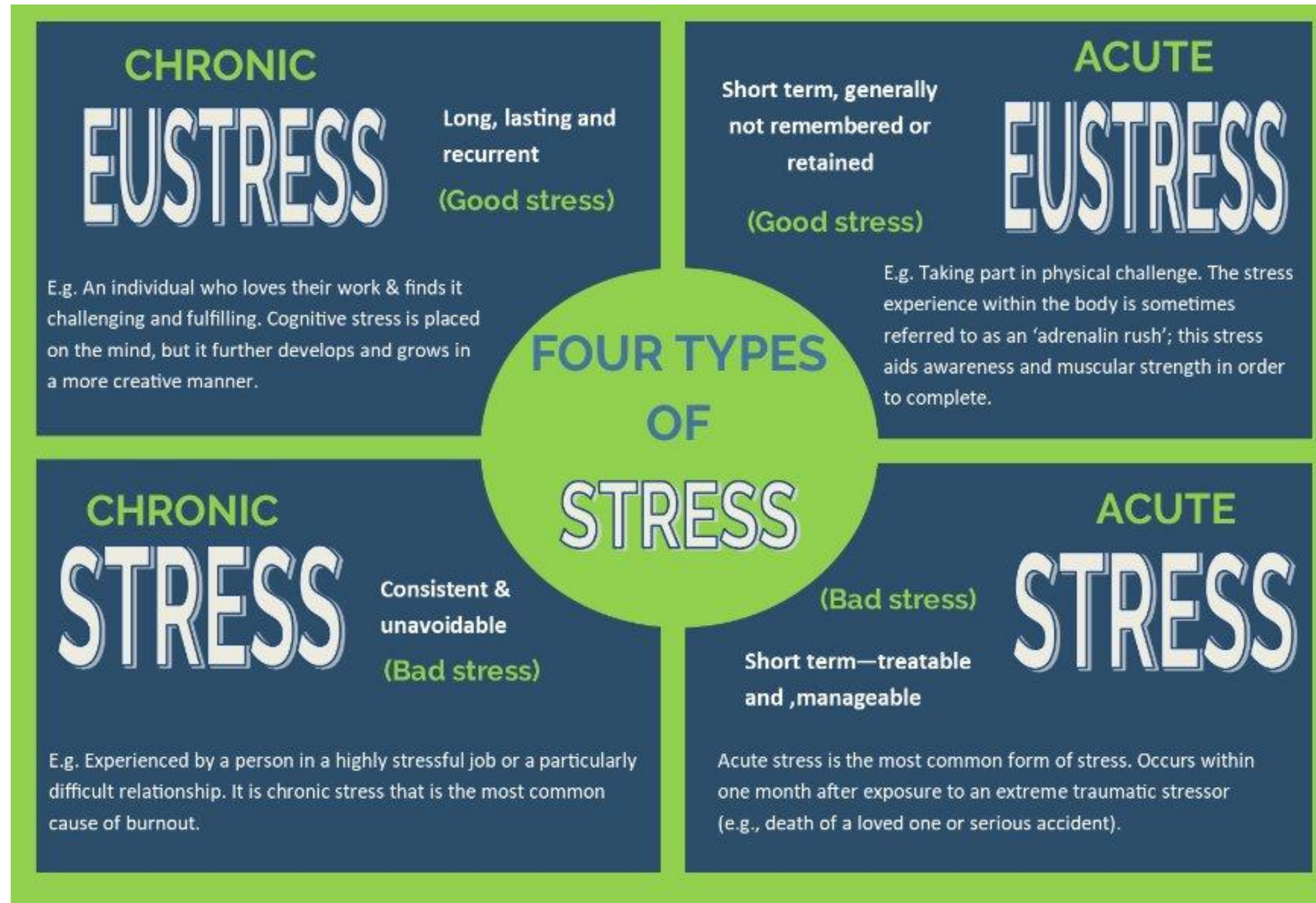
Vision for Equality
Serving People with Disabilities and Their Families

What is Trauma?



Vision for Equality
Serving People with Disabilities and Their Families

Good Stress vs. Bad Stress



How Stress Can Turn into Trauma

READY (Green)	REACTING (Yellow)	INJURED (Orange)	ILL (Red)
DEFINITION <ul style="list-style-type: none"> Optimal functioning Adaptive growth Wellness FEATURES <ul style="list-style-type: none"> At one's best Well trained and prepared In control Physically, mentally, and spiritually fit Mission focused Motivated Calm and steady Behaving ethically Having fun 	DEFINITION <ul style="list-style-type: none"> Mild and transient distress or loss of functioning Always goes away Low risk for illness CAUSES <ul style="list-style-type: none"> Any Stressor FEATURES <ul style="list-style-type: none"> Feeling irritable, anxious, or down Loss of motivation Loss of focus Difficulty sleeping Muscle tension or other physical changes Not having fun 	DEFINITION <ul style="list-style-type: none"> More severe and persistent distress or loss of function Leaves a "scar" Higher risk for illness CAUSES <ul style="list-style-type: none"> Life Threat Loss Inner Conflict Wear and Tear FEATURES <ul style="list-style-type: none"> Loss of control Panic, rage, or depressed mood Substance Abuse Not feeling like normal self Excessive guilt, shame, or blame Diminished sense of purpose, meaning, or hope in the future 	DEFINITION <ul style="list-style-type: none"> Unhealed stress injury causing life impairment Clinical mental disorder TYPES <ul style="list-style-type: none"> PTSD Depression Anxiety Substance Dependence FEATURES <ul style="list-style-type: none"> Symptoms persist and worsen over time Sever distress, social or occupational impairment
Unit Leader Responsibility	Individual, Peer, Family Responsibility		Caregiver Responsibility

Stress Doesn't Always Lead to Trauma

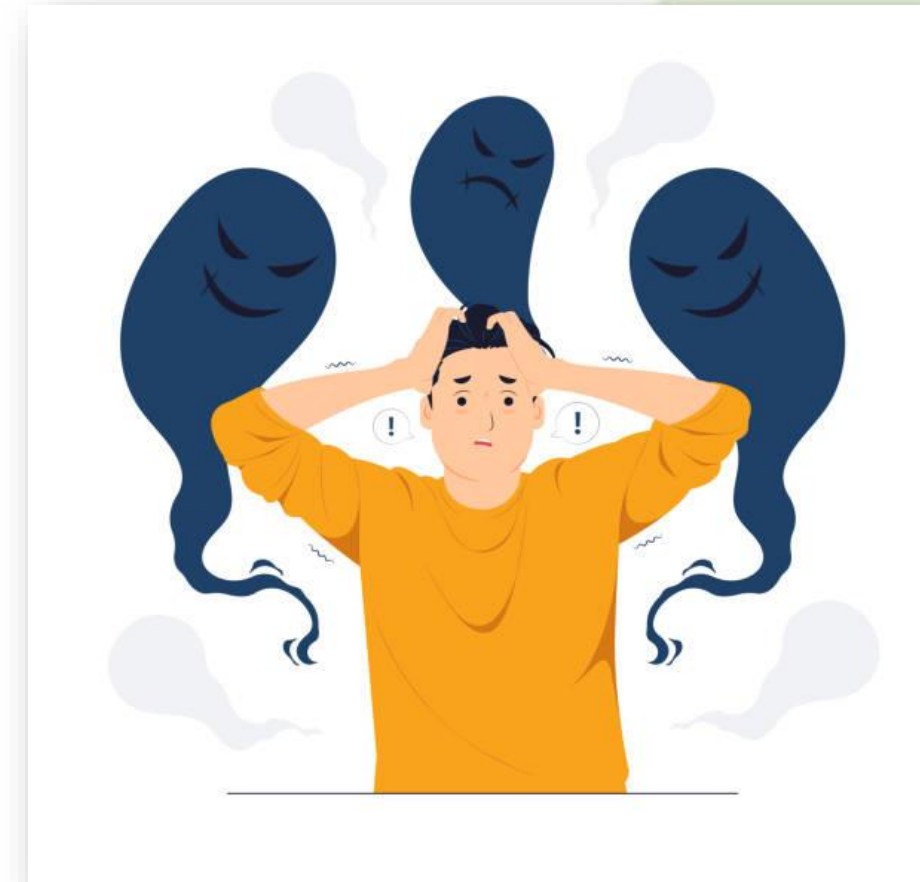
***"Not every drama
is a trauma."***

(Robin Glasco Jones)

- Not every stress is traumatic.
- Not every trauma turns into post-traumatic distress.
- Toxic stress can become traumatic.

Trauma

- One or series of distressing events that cause psychological injury to the one who experiences it.
- A person's emotional response to a distressing experience.



Trauma can include events where you feel:

- Frightened
- Under threat
- Humiliated
- Rejected
- Abandoned
- Invalidated, for example your feelings or views have been dismissed or denied
- Unsafe
- Unsupported
- Trapped
- Ashamed
- Powerless



Prevalence

About 6 of every 10 men (or **60 percent**) and 5 of every 10 women (or **50 percent**) experience at least one trauma in their lives.

~ *National Center for PTSD* ~

“Individuals with disabilities are **four times more likely to be victims of crimes** as non-disabled (Sobsey, 1996); prevalence of **sexual abuse for children with autism spectrum disorder (ASD)** is **16.6 percent compared to 8 percent** for general population; the risk of **abuse increases 78 percent due to exposure to the disability service system** (Sobsey & Doe, 1991).”

~ *Traumatic Stress Institute* ~

<https://www.traumaticstressinstitute.org/trauma-and-developmental-disabilities/>



Some groups are more likely to experience trauma than others and experience it more often.

They include:

- LGBTQ
- Intellectual and developmental disabilities
- BIPOC
- People who have served or who are serving in the military
- People who are in prison or have been in prison in the past
- Refugees and asylum seekers
- People experiencing poverty



What can trigger a trauma response?



Behavioral Patterns in Dysregulation

YOUR F TYPE AND THE CLUTTER IT CREATES



F TYPE	THOUGHT	CLUTTER IT CREATES
FIGHT	"I want to prove I'm right!"	<ul style="list-style-type: none">• Blaming so you don't have to take responsibility• Passive aggressive behaviors to avoid doing chores• Lots of excuses• Creating conflict and pushes others away
FLIGHT	I don't want to deal with this.	<ul style="list-style-type: none">• Dump items instead of putting away• Always in a hurry, restless and unable to stay at home• Lots of piles everywhere• Avoiding dealing with problems
FREEZE	"I don't know what to do."	<ul style="list-style-type: none">• Procrastination, can't bring yourself to do anything• Overwhelmed and unclear so don't do anything• Postponing things over and over• Lots of sentimental items
FAWN	I want everyone to be happy.	<ul style="list-style-type: none">• Always helping others and not taking care of yourself• Your life clutter piles up - no time to address it• Conflict avoidant - agreeing to solutions that don't work for you

Trauma Is....



We are going to assume trauma.
All families should be treated as if they have
experienced trauma.



**How are you helping
families grow from
adversity?**

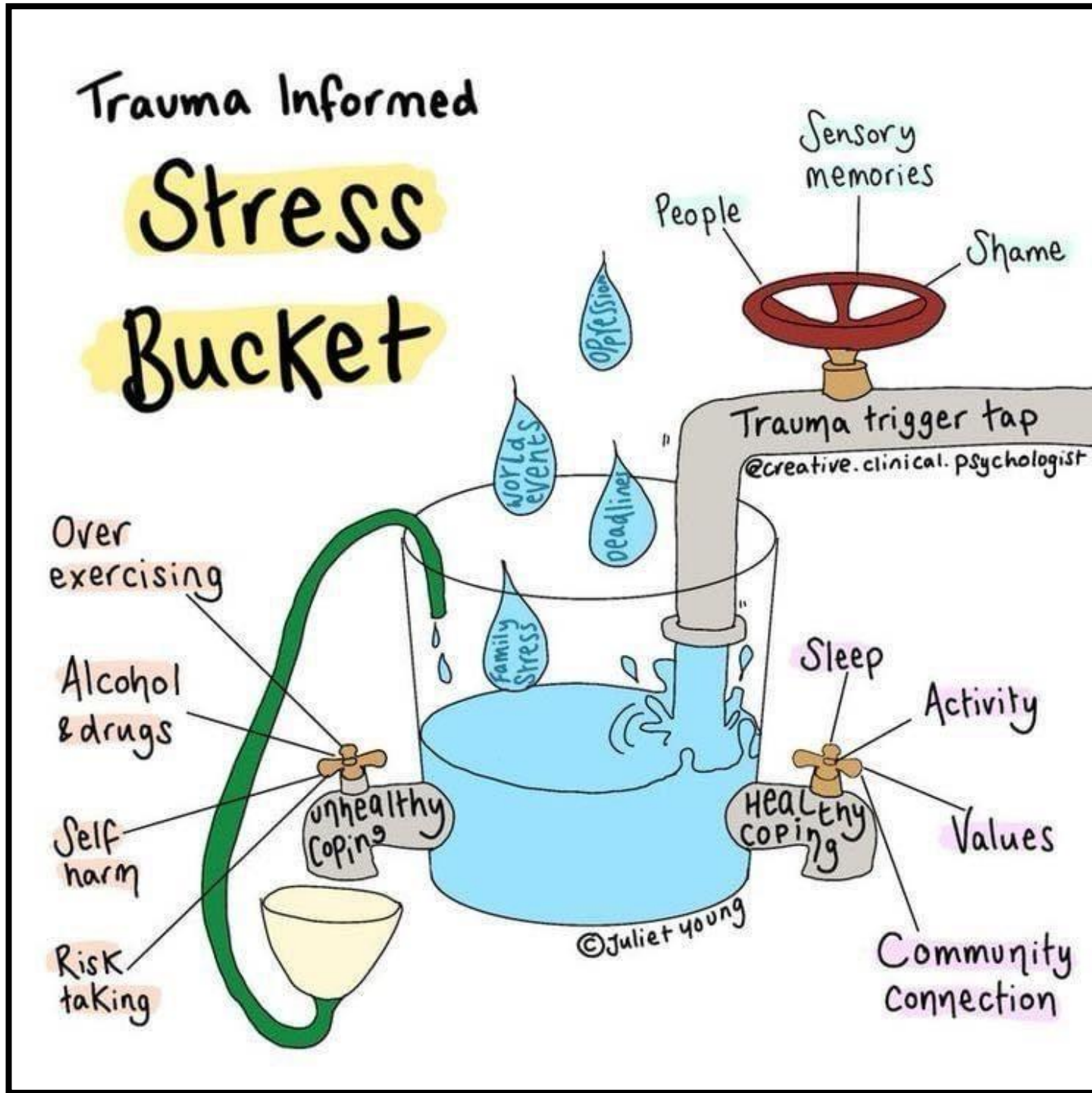


Vision for Equality
Serving People with Disabilities and Their Families

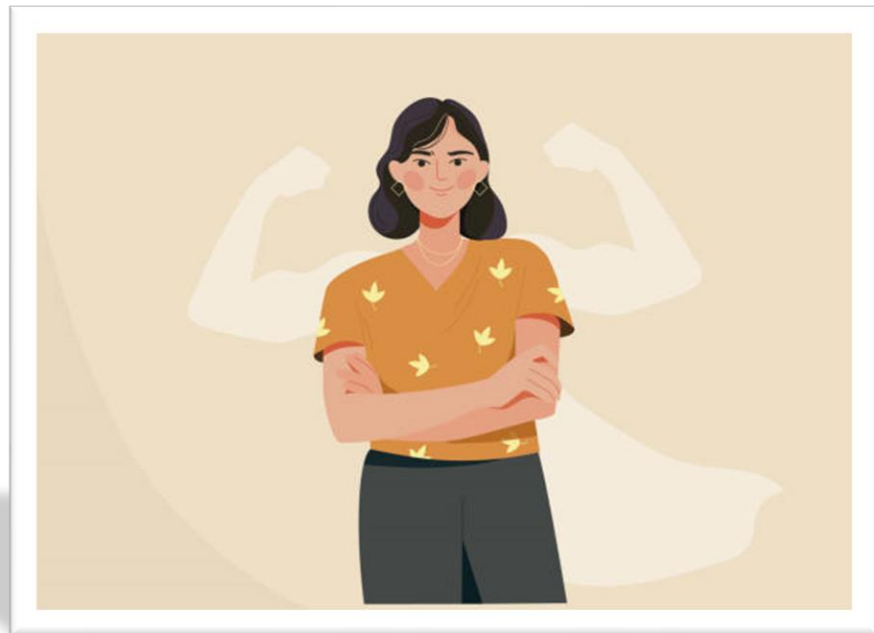
How to Effectively Support Families in Crisis



Vision for Equality
Serving People with Disabilities and Their Families



As providers, our goal is to empower and build resilience in caregivers.



Practices in providing effective and compassionate care

- Presume competence
- Foster collaboration
- Involve families in the decision making
- Validate emotions and experiences
- Build trust and rapport
- Share information and resources



<https://parentsinc.org/parent-professional-partnerships-for-children-with-disability/>

<https://developingminds.net.au/articles-for-professionals/2018/12/3/working-with-parents-of-children-with-extra-needs-8-things-to-do-and-avoid>

<https://images.app.goo.gl/TzR7G4hsTJ2NAL3z6>

Presume competence

- Assuming an individual, including those with disabilities, can learn, think, and understand.
- We understand that ability takes many forms and that everyone has strengths to build from.
- Address and actively challenge ableism.



Foster collaboration

- Facilitate open communication.
- Engage in regular communication.
- Use multiple modes of communication.
- Use clear and simple language.
- Ensure caregivers understand your role and responsibilities.
- Respect cultural differences.
- Focus on strengths.



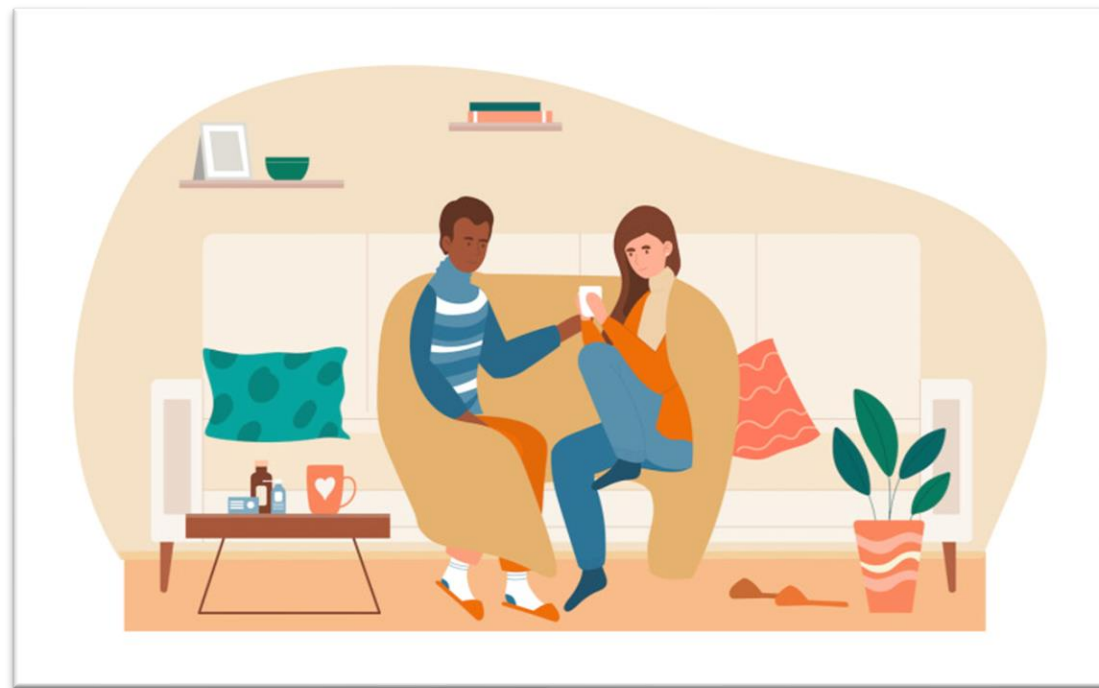
Involve families in the decision making

- Engage in teamwork.
- Respect their expertise.
- Respect their autonomy.
- Actively seek the caregiver's input.
- Ensure caregivers understand their rights and responsibilities regarding their child's healthcare, education, and other services.
- Participate in joint problem solving.
- Offer choices.
- Clearly and simply explain the available options.



Validate emotions and experiences

- Avoid dismissing or minimizing their feelings.
- Acknowledge the importance of understanding and respecting the caregiver's experiences.
- Participate in active listening.



Build trust and rapport

- Be transparent.
- Encourage goal setting.
- Celebrate success.
- Seek feedback.
- Be responsive and reliable.
- Treat families with dignity and respect.
- Show a sincere interest.
- Say sorry.
- Focus on solutions.



Share information and resources

- Provide education.
- Encourage support networks.
- Advocate for families.



**Based on what you
learned today, what
is one approach you
will use to support
families in crisis?**



Vision for Equality
Serving People with Disabilities and Their Families

References:

- Anderson, B. (2024, August 7). *What to know about parent empowerment for children with disabilities*. WebMD. <https://www.webmd.com/children/what-to-know-about-parent-empowerment-for-children-with-disabilities>
- Chefalo, S. (2023, November 14). *Universal precautions in practice: 11 tips for trauma-informed leaders*. Chefalo Consulting. <https://www.chefaloconsulting.com/post/universal-precautions-in-practice-11-tips-for-trauma-informed-leaders>
- *Culturally-sensitive trauma-informed care: Patient centered care and trauma informed care for pediatric patients - healthcare toolbox*. Culturally-Sensitive Trauma-Informed Care | Patient Centered Care and Trauma Informed Care for Pediatric Patients - HEALTHCARE TOOLBOX. (n.d.). <https://www.healthcaretoolbox.org/culturally-sensitive-trauma-informed-care#:~:text=Working%20within%20and%20through%20the%20family%20structure:,helpful%2C%20may%20positively%20impact%20assessment%20and%20treatment>.
- Developing Minds. (2018, December 3). *Working with parents of children with extra needs – 8 ideas for what to do and avoid*. Developing Minds. <https://developingminds.net.au/articles-for-professionals/2018/12/3/working-with-parents-of-children-with-extra-needs-8-things-to-do-and-avoid>
- Moore, C. (2025, March 20). *Parents of disabled children traumatised by the public bodies that should be supporting them*. Special Needs Jungle. <https://www.specialneedsjungle.com/parents-disabled-children-traumatised-public-bodies-support/>
- Stephanie Lemek, S. (2023a, May 5). *Building trauma informed workplaces-it all starts with safety*. Medium. <https://medium.com/hlwf-healthcare-healthtech-lifesciences-wellness/building-trauma-informed-workplaces-it-all-starts-with-safety-3cc98a0d1d46>
- Stephanie Lemek, S. (2023b, June 2). *Building trauma informed workplaces-empowerment (part 1)*. Medium. <https://medium.com/hlwf-healthcare-healthtech-lifesciences-wellness/building-trauma-informed-workplaces-empowerment-part-1-968ffdd5324a>
- Stephanie Lemek, S. (2023c, June 9). *Building trauma informed workplaces-empowerment (part 2)*. Medium. <https://medium.com/hlwf-healthcare-healthtech-lifesciences-wellness/building-trauma-informed-workplaces-empowerment-part-2-6115cdd6cd35>
- Weaver, J. (2022, October 28). *Parent-professional partnerships for children with disability*. Parents Inc. <https://parentsinc.org/parent-professional-partnerships-for-children-with-disability/>
- What is trauma? | types of mental health problems | Mind - Mind. (2023, December). <https://www.mind.org.uk/information-support/types-of-mental-health-problems/trauma/about-trauma/>



Questions



Vision for Equality
Serving People with Disabilities and Their Families

*"Healing takes place in the context
of healthy relationships"*
(Diane Wagenhals)

*"Relationships are the agents of
change and the most powerful
therapy is human love"*
(Dr Bruce Perry)



Vision for Equality
Serving People with Disabilities and Their Families

For more info or to refer a family,
contact:

Chou Hallegra, MA, CTCP

Program Manager

challegra@visionforequality.org

Tel: **(215) 923-3349 ext. 203**

Philadelphia Supports Projects

<https://www.visionforequality.org/programs/family-support-projects/>



Vision for Equality
Serving People with Disabilities and Their Families

Closing



Evaluation

- The evaluation link will be sent to attendees in a follow up email.
- If you are applying for the 1.0 NCPD contact hour, you must attest to attending to the entire session and complete the evaluation.
- The evaluation will close **EOD Thursday, July 24, 2025.**



Trainings

July 30

12:00 - 1:30 PM | *Holding and Healing: Practical Trauma-Informed Strategies for Young Children's Social Emotional Development*

Presented by Dr. Sandhya Iyengar, Attending Physician, Developmental and Behavioral Pediatrics, CHOP

Learning Collaboratives

Discussion-based meetings, which will cover **Reflective Supervision** and **Multigenerational / Kinship Care**, to be scheduled later this summer.
More information and how to register coming soon!

The Philly SPROUT Project appreciates your continued engagement.

Continue learning with our upcoming trainings focused on IECMH. Scan the QR code for more details!



Upcoming Trainings & Learning Collaboratives



●●● Contact Information



Christine Simon, MPH
NNCC | Director of Workforce Development
csimon@phmc.org



Zaharaa Davood, MPH
NNCC | Assistant Director
zadavood@phmc.org



Jilian Bohn, MPH
NNCC | Manager
jbohn@phmc.org



Kat Soll, MPH
NNCC | Public Health Project Coordinator
ksoll@phmc.org