COVID 19 Impacts on Trauma Informed Care

Presented by the AmeriHealth Caritas New Hampshire
Clinical Education team

Disclaimer:

The content presented within this training is for informational purposes only and not intended as medical advice or to direct treatment. Physicians and other health care providers are solely responsible for the treatment decisions for their patients and should not use the information presented and accompanying materials to substitute for independent clinical judgment.

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Delivering the Next **Generation** of Health Care

Learning Goal and Objectives Covered in this Series

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- Define Trauma
- Recognize the impact of Trauma
- Review prevalent data
- Realize the physiological responses to trauma
- Understand the core principles of trauma-informed care (TIC)
- Demonstrate understanding of TIC in practice
- Discuss the challenges/effective methods of implementing TIC approaches
- Demonstrate awareness of the Impact of trauma work / review self-care techniques for the front-line worker
- Recognize Covid19's implications to trauma and treatment

What is Trauma?

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"The experience of violence and victimization including sexual abuse, physical abuse, severe neglect, loss, domestic violence, and/or witnessing of violence, terrorism, and disasters."

"One does not have to be a combat solider, or visit a refugee camp in Syria or the Congo to encounter trauma. Trauma happens to us, our friends, our families, and our neighbors."

Source: "Trauma," American Psychological Association, **https://www.apa.org/topics/trauma.**

Types of Trauma

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Single event
- Being in a car crash, natural disaster, sexual assault

Multiple events occurring overtime
- repetitive sexual assault encounters, war, racism, chronic poverty, micro-aggressions

Vicarious or secondary trauma
- Witnessing an event, hearing the stories of those who experienced it first-hand

Multigenerational including historical trauma
- Systemic racism

Complex trauma
- Sexual exploitation, human trafficking

Source: "Recovering emotionally from disaster," American Psychological Association, 2013, **https://www.apa.org/topics/disasters-response/recovering**.

Three Types of Trauma

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1. **Acute Trauma**
   - Single distressing event
     - Accident
     - Rape
     - Assault
     - Natural disaster
2. **Chronic Trauma**
   - Multiple, long-term and/or prolonged distressing events over an extended time.
     - Long term serious illness
     - Sexual abuse
     - Domestic violence
     - Bullying
     - War

Source: Shaziya Allarakha, Pallavi S. Uttekar, "What Are the 3 Types of Trauma?" MedicineNet, Reviewed February 8, 2021, **https://www.medicinenet.com/what_are_the_3_types_of_trauma/article.htm**

Three Types of Trauma, continued

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3. **Complex Trauma**
   - Exposure to varied and multiple traumatic events or experiences.
     - Events are typically between people
     - Childhood abuse
     - Neglect
     - Domestic violence
     - Family disputes
     - Civil unrest

Source: Shaziya Allarakha, Pallavi S. Uttekar, "What Are the 3 Types of Trauma?" MedicineNet, Reviewed February 8, 2021, **https://www.medicinenet.com/what_are_the_3_types_of_trauma/article.htm**

Examples of Traumatic Experiences

- Accidents, injury, serious medical illness
- Deprivation caused by extreme poverty
- Emotional and psychological abuse
- Gang and drug-related violence
- Imprisonment
- Natural Disasters
- Oppression
- Physical abuse/violence
- Repeated abandonment or sudden loss
- Sexual abuse and/or sexual assault
- Severe Neglect
- War
- Witnessed violence and cruelty to others

Source: Center for Substance Abuse Treatment (US). "Trauma-Informed Care in Behavioral Health Services. Rockville, MD: Substance Abuse and Mental Health Services Administration (US), 2014, pp.50-57.

What is a Trauma Informed Care Approach

A Trauma-informed care approach shifts the focus from "What's wrong with you?" to "What happened to you?"

- Realize the widespread impact of trauma and understand paths for recovery.
- Recognize the signs and symptoms of trauma in patients, families, and staff.
- Integrate knowledge about trauma into policies, procedures, and practices
- Actively avoid re-traumatization.

A comprehensive approach to trauma-informed care must be adopted at both the clinical and organizational levels

"If you want a strong community from which to draw employees, you want a healthy community, Your employees have ACEs; their kids have ACEs. This isn't a problem from the YMCA or social services to figure out, this is a problem for your business."

Source: What is Trauma-Informed Care?, Trauma Informed Care, Center for Health Care Strategies, https://www.traumainformedcare.chcs.org/what-is-trauma-informed-care

What is Trauma Informed Care?

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Trauma Informed Paradigm

"What happened to this person?"

"What's wrong with you?"

Historical trauma informed:

"What types of trauma did your lineage and culture experience over time?"

"How did your school and education discipline you?"

Source: What is Trauma-Informed Care?, Trauma Informed Care, Center for Health Care Strategies, https://www.traumainformedcare.chcs.org/what-is-trauma-informed-care

What is Trauma Informed Care?

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Standard Paradigm

"What's wrong with this person?" "What's wrong with you?"

- NOT asking about collective tribal history
- NOT asking about boarding school history or other tribal-specific experiences and culture

Source: What is Trauma-Informed Care?, Trauma Informed Care, Center for Health Care Strategies, https://www.traumainformedcare.chcs.org/what-is-trauma-informed-care

Principles of Trauma Informed Care

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- Safety
- Trustworthiness and Transparency
- Peer Support and mutual self-help
- Collaboration and mutuality
- Empowerment, voice, and choice
- Cultural, historical, and gender issues

Source: SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach, Substance Abuse and Mental Health Services Administration
https://youth.gov/feature-article/samhsas-concept-trauma-and-guidance-trauma-informed-approach

Benefits of Trauma Informed Care

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It benefits our patients and our staff

- Individuals engage more fully in their health care
- Develop a trusting relationship with their providers
- Improve long-term health outcomes.
- Trauma-informed care can also help reduce burnout among health care workers
- Reduces staff turnover.
- 25 and 70% of our community problems are attributable to ACEs.
- In 2017, there were 1.4 million suicide attempts in the United States.
- Sixty seven percent of those attempts were attributed to ACEs.
- If we eradicate ACEs, we have the opportunity to save 940,000 lives per year.

Source: What is Trauma-Informed Care?, Trauma Informed Care, Center for Health Care Strategies,
https://www.traumainformedcare.chcs.org/what-is-trauma-informed-care

What the TIC Model Does:

- Reframes survivors' symptoms as adaptation, rather than as pathology.
- Recognizes strengths such as every response and symptom helped a survivor in the past and continues to help in the present – in some way.
- Emphasizes resilience in human response to stress.
- Reduces shame
- Engenders hope for clients and providers alike.

Source: Trauma-Informed Care in Behavioral Health Services, Substance Abuse and Mental Health Services Administration Center for Substance Abuse Treatment, HHS Publication No. (SMA) 14-4816

COVID 19 Implications on Trauma

- The COVID-19 pandemic presents us with a variety of death and non-death losses.
- Elements that were identified pre-COVID-19 to predict high risk for complicated mourning and failures in adaptation are now routinely found in today's situations.

This part of the presentation is taken from: Rando, T. A. Coping with the sudden death of your loved one: A self-help handbook for traumatic bereavement. Covid 19 Addendum. Indianapolis. IN : Dog Ear Publishing, 2020.

Common Traumatic Experiences related to a pandemic

- **Accidents, injury, serious medical illness**
- **Deprivation caused by extreme poverty**
- **Emotional and psychological abuse**
- Gang and drug-related violence
- Imprisonment
- Natural Disasters
- **Oppression**
- **Physical abuse/violence**
- **Repeated abandonment or sudden loss**
- **Sexual abuse and/or sexual assault**
- **Severe Neglect**
- War
- **Witnessed violence and cruelty to others.**

Source: Center for Substance Abuse Treatment (US). "Trauma-Informed Care in Behavioral Health Services. Rockville, MD: Substance Abuse and Mental Health Services Administration (US), 2014, pp.50-57.

Five Populations Targeted that are more likely to experience complicated grief or trauma response

- Persons contending with *general non-death trauma and loss* in the pandemic.
- Persons who in addition to general trauma and loss are contending with *loss of a loved one to COVID-19-related death.*
- Persons who in addition to general trauma and loss are contending with *loss of a loved one from non-COVID-19-related death* (e.g., cancer, heart attack, car crash).
- Persons who in addition to general trauma and loss are contending with *loss of a loved one to death from social or economic consequences of the pandemic* (e.g., suicide, unintentional **overdose, domestic violence).**
- Professionals who in addition to general trauma and loss in their personal life are contending with *work-related trauma and loss.*

Key Concepts of Loss

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Death Loss

Non-Death Loss

- Physical, tangible loss (home, body part)
- Abstract (job, violation of the assumptive world

Secondary Loss

Key Concepts of Trauma

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Psychological trauma is an event, perceived to be inescapable, that confronts a person with actual or threatened death or serious injury (physical, psychological, or spiritual) to the self or another. When this occurs, it brings about four sets of effects, each of which dysregulates the person.

- Instantly propels the brain into "survival mode"
- Overwhelms one's usual coping abilities
- Creates significant psychological distress and dysfunction
- Violates the assumptive world

Problems with Co-Incidence of Trauma and Loss

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Personal traumatization (Comes from the trauma elements and requires trauma mastery)

- Increases problems and distress
- Decreased coping abilities and psychological functioning

Loss under abrupt, unexpected, or traumatic circumstances (Comes from the loss elements and requires healthy grief and mourning)

- Complicates mourning and adaptation

Problems with Co-Incidence of Trauma and Loss

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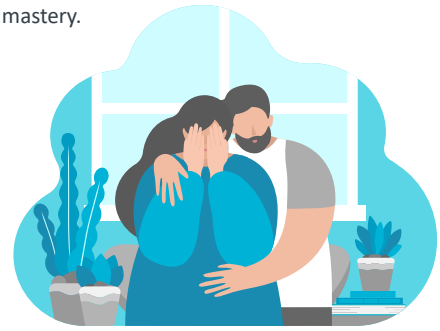
The trauma-loss combination (Comes from the mixture of trauma and loss in which each can compromise each other.

- Traumatic stress interferes with grief over loss.
- Grief over loss interferes with trauma mastery.



Problems with Co-Incidence of Trauma and Loss

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Trauma and loss come from **General circumstances of this Pandemic**

- Societal destabilization
- Economic downturn
- Social distancing
- Isolation
- Loss of support
- Loss of others to **give** feedback (e.g., to point out if one needs help or is doing/not doing certain things)
- Situations that challenge one's view of oneself and world view
- Physical disconnection from coping resources

Problems with Co-Incidence of Trauma and Loss

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- Traditional supports and sources of pleasure **(e.g.,** faith communities, social activities, "old" way of life, sports, etc.)
- Social and professional stresses when working from home (e.g., loneliness, decreased contact with mentors, no more learning around the water cooler)
- 24/7 media coverage with distressing Images and stories of trauma, loss, and death
- Conflicting information/advice and politicization of issues
- Social unrest and escalated political conflict
- No definite end of crisis
- Concern about future "waves" of COVID-19

Problems with Co-Incidence of Trauma and Loss

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Trauma and loss come from **Personal Circumstances in this Pandemic**

- Loss of loved one
- Not being able to care for loved one, say goodbye, or be present at death
- Not having traditional post-death rituals (e.g., washing body, having a wake/ funeral)
- Not receiving in-person consolation , physical touch, and "grounding" from others
- Heightened sense of unreality of death
- Being challenged by competing demands in bereavement during a pandemic (e.g., grieving while working, home schooling children, and being anxious about illness)

Problems with Co-Incidence of Trauma and Loss

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Trauma and loss come from **Personal Circumstances in this Pandemic**

- Lack of healthy diversions
- Not the same environment as before to help indicate loved one is missing and changes must be undertaken
- Increased guilt
- Uncertainty and uncontrollable changes
- Health and welfare of self and others (including life threat)
- Job loss
- Economic insecurity
- Ability to attend to needs of others (e.g., children , elderly) when so overwhelmed by demands of situation

Problems with Co-Incidence of Trauma and Loss

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Trauma and loss come from **Personal Circumstances in this Pandemic**

- Loss of milestone events (e.g., graduations, weddings, senior year experiences, birth of child, etc.)
- Loss of personal freedom
- Relative loss of light -heartedness, joy, spontaneity, and freedom from anxiety and worry

Sudden Traumatic Death in General

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- It is the most commonly reported traumatic experience in studies across the world.
- It causes higher prevalence of PSTD than any other traumatic event.
- It can trigger mental health issues in adults with no history of psychiatric conditions.
- Mental health disorders are more elevated after sudden death than following natural deaths.
- The process of recovery appears to be slower after sudden deaths than after natural deaths.
- The sudden traumatic death of a loved one leaves the survivor with a mixture of trauma and loss.

Consequences of Traumatic Loss in COVID 19 Pandemic

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Losses during this Pandemic can involve a "perfect storm" of three adversities

1. General consequences of any traumatic loss at any time
2. Consequences of traumatic loss transpiring specifically within the pandemic
3. Consequences of impacts of heightened mental health distress, substance abuse, domestic violence, child abuse, "deaths of despair"

Strategies when working with Individuals dealing with Traumatic Loss during the Pandemic

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EDUCATE AND CREATE A PROPER MINDSET REGARDING COVID-19 ISSUES

Information Is power.

Understand the realities of trauma and loss in this pandemic

Provide permission to mourn

Recognize that *other issues can be created, exacerbated, or triggered,* such as:

- Previous losses and trauma Substance abuse
- Serious mental illness
- Psychological symptoms (e.g., OCD, anxiety , depression)

Strategies when working with Individuals dealing with Traumatic Loss during the Pandemic

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EDUCATE AND CREATE A PROPER MINDSET REGARDING COVID-19 ISSUES

- Appreciate the need to address one or more specific traumatic bereavements **(ex.,** the death of a loved one) *within an ongoing, general* context of trauma and loss
- Understand that one is dealing not just with *today' s* traumatic loss, but with what 's been triggered from the *past* and what mourner is concerned about in the *future*
- Be prepared one may or may not be able to grieve/mourn as one would ordinarily do because of *other ongoing demands*

Strategies when working with Individuals dealing with Traumatic Loss during the Pandemic

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PROMOTE HEALTHY THINKING, FEELING, SELF-STABLIZATION, AND SELF-CARE

- Principles of cognitive behavioral therapy (CBT) have been helpful to treat trauma and bereavement to identify cognitive distortions and correct them by generating rational alternative counter thoughts.
- Recognize that the overwhelming impacts of traumatic loss can lead the mourner to overestimate the danger and the likelihood of negative events occurring.
- Mourners may underestimate their abilities to cope with such negative events.
- Be aware of cultural, social , religious, and other influences upon the mourner's ability to handle emotions and incorporate this awareness into treatment.
- Develop the mourner‘s capacities to self-soothe, ground self and self-stabilize.

Strategies when working with Individuals dealing with Traumatic Loss during the Pandemic

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PROMOTE HEALTHY THINKING, FEELING, SELF-STABLIZATION, AND SELF-CARE

- Encourage the practice of good *self-care*
  - Tend to physical health
  - Replenish oneself
  - Engage in positive activities

Coping Strategies

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Limit time watching the news or being on social media.

Help the individual *on a daily basis* make sure to build in actions directed towards their:

- Body (e.g., move, exercise, etc.)
- Mind (e.g., learn something new, exercise your mind with games, puzzles, etc.)

Social connectedness

Don' t remain isolated

- Reach out and do something for someone

Provide Anxiety Management Strategies

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Educate the individual about anxiety

Assist the individual to manage anxiety physiologically

- Relaxation techniques
- Deep breathing retraining
- Muscle relaxation
- Meditation and mindfulness

Physical movement/exercise

Massage

Proper sleep

Proper nutrition

Medication (allopathic) and/or supplements (naturopathic)

Coping Strategies

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- Support the individual name and claim feelings
- Support positive self-talk
- Help the individual identify and focus on what they can control
- Help individual undertake healthy generic coping techniques
- Work with the individual to make a plan for what to do at times they're really distressed (e.g., have lists of self-soothing activities, positive diversions, people to connect with, etc.)
- Practice Gratitude

Connect Individual to Supportive Others

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Research repeatedly confirms the therapeutic benefits of social connectedness and social support

Help the Individual work to develop, maintain , or strengthen connections with others

- In person
- Online

With virtual grief support communities

With professionals or support groups via telehealth or in person

Resilience Factors Reducing the Risk for Trauma Response

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- Seeking out support from friends, family, or support groups.
- Learning to feel okay with one's actions in response to a traumatic event.
- Having a coping strategy for getting through and learning from a traumatic event.
- Being prepared and able to respond to upsetting events as they occur, despite feeling fear.

Source: Risk Factors and Resilience by National Institute of Mental Health

We must stay healthy too…

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***While the COVID-19 pandemic presents us with significant numbers and types of trauma and loss experiences on the parts of our patients/clients and of ourselves, there Is much we can do to help** others **and** ourselves*

The research supports that we can make profound and therapeutic difference to those impacted by traumatic loss.

Remember…in order to help others, we must stay healthy too.

Source: Rando, T. A. *Coping with the sudden death of your loved one: A self-help handbook for traumatic bereavement. Covid 19 Addendum.* Indianapolis. IN : Dog Ear Publishing, 2020.

Caregiver Check-IN

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Please share one way you plan to address your self-care as a provider remains a priority.

Please share as comfortable, something that has helped you cope with the Pandemic.

COVID 19 Implications on Diversion and Inclusion

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- COVID–19 is a virus that doesn't discriminate and does not respect international borders.
- The spread of the virus has shown us that we have a lot more in common than we usually admit to.
- The effects of the virus are impacting everybody – from health to economics – without prejudice

Source: "The diversity dilemma of COVID 19," Diversity Q, 2020,: **https://diversityq.com/the-diversity-dilemma-of-covid-19-why-diversity-and-inclusion-is-more-important-than-ever-1509513/.**

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Evidence of risk of exposure to COVID 19

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Neighborhood and physical environment:

- Those in racial and ethnic minority groups are more likely to live in areas with high rates of new COVID 19 infections.

Housing:

- Crowded living conditions and unstable housing contribute to transmission of infectious diseases and can hinder COVID-19 prevention strategies like hygiene measures, self-isolation, or self-quarantine

Occupation:

- Close contact with the public or other workers, not being able to work from home, and needing to work when sick because they do not have paid sick days

Source: "Risks of COVID 19", Centers for Disease Control and Prevention, 2020, **https://www.cdc.gov/coronavirus/2019-ncov/community/health-equity/racial-ethnic-disparities/increased-risk-exposure.html.**

COVID 19 Implications on Diversion and Inclusion

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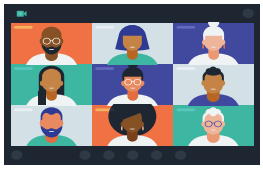
- Workplaces play a really important role in challenging these inequalities.
  - Educate employees on creating a fairer society, which they take back to their families around the dinner table after work.
  - They bring diverse people together under one organization to collaborate and work towards common goals, visions, missions and create safe cultures where people feel like they belong.
  - Our workplaces are much more diverse than our circle of friends and family.



Source: "The diversity dilemma of COVID 19," Diversity Q, 2020,: **https://diversityq.com/the-diversity-dilemma-of-covid-19-why-diversity-and-inclusion-is-more-important-than-ever-1509513/.**

COVID 19 Implications on Diversion and Inclusion

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- Leaders must prioritize inclusion.
- Organizations are much more likely to be innovative in the face of this crisis if they seek input from a diverse group of employees who approach problems from a variety of perspectives.
- Employees from historically underrepresented groups may feel less safe about speaking up.

Source: "The diversity dilemma of COVID 19," Diversity Q, 2020,: **https://diversityq.com/the-diversity-dilemma-of-covid-19-why-diversity-and-inclusion-is-more-important-than-ever-1509513/.**

COVID 19 Implications on Diversion and Inclusion

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- Ensure that all employees have equal access to technology for remote work .
- Make virtual meetings equitable by turning on closed captioning, sending

  documents, and collecting input in advance.
- Begin meetings with acknowledging everyone in the room.
- Understand how gender bias may show up.
- Check in with employees who may be disproportionately impacted by this crisis.
- Above all, show compassion.

Source: "The diversity dilemma of COVID 19," Diversity Q, 2020,: **https://diversityq.com/the-diversity-dilemma-of-covid-19-why-diversity-and-inclusion-is-more-important-than-ever-1509513/.**

Ways to support employees during the pandemic

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- Develop channels for employees to connect on a personal level
- Work with managers to help them understand how differences in workstyles, personalities, life styles and family situations impact employees right now
- Provide a way for employees to support those who have been furloughed, working on the front lines through messages of encouragement, relief funds, shared sick time etc.
- Provide employees with training on inclusive teamwork, resiliency & watching for biases under pressure

Source: "The diversity dilemma of COVID 19," Diversity Q, 2020,**: https://diversityq.com/the-diversity-dilemma-of-covid-19-why-diversity-and-inclusion-is-more-important-than-ever-1509513/.**

Ways we can support ourselves during the pandemic

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- Make a list of your personal and professional strengths and how they can help you during the pandemic
- Explore gaps in your skills and how you can improve them now through books, videos, blog posts, articles etc.
- Take time to breathe.
- Make and take action on steps to improve your personal resiliency including taking media breaks, strengthening your relationships, watching the stories you tell and paying attention to your self talk.

Source: "The diversity dilemma of COVID 19," Diversity Q, 2020,: **https://diversityq.com/the-diversity-dilemma-of-covid-19-why-diversity-&…. inclusion-is-more-important-than-ever-1509513/.**

Lessons Learned

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- Flexible work is the future.
- Privilege is invisible to those who have it.
- Everyone has mental health impacts.
- It's time to rethink how we interact with each other.
- We must commit to challenging biases in ourselves and others.

Source: "The diversity dilemma of COVID 19," Diversity Q, 2020,: **https://diversityq.com/the-diversity-dilemma-of-covid-19-why-diversity-and-inclusion-is-more-important-than-ever-1509513/.**

Conclusion: "Keep Being Curious"

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Recommended books to continue your learning on Trauma Informed Care.

- The Deepest Well by Dr. Nadine Burke Harris
- Healing Racial Trauma: The Road to Resilience Sheila Wise Rowe
- Trauma Stewardship An Everyday Guide to Caring for Self While Caring for Others Laura van Dernoot Lipsky with Connie Burk Foreward by Jon R. Conte, PhD
- The Body Keeps the Score Brain, Mind, and Body in the Healing of Trauma Dr. Bessel Van Der Kolk, MD
- My Grandmother's Hands: Racialized Trauma and the Pathway to Mending Our Hearts and Bodies Resmaa Menaken
- The Boy Who was Raised as a Dog: And Other Stories from a Child Psychiatrist's Notebook. Bruce Perry and Maia Szalavitz
- Wherever You Go, There You Are: A Mindfulness Meditation in Everyday Life. Jon Kabat-Zinn
- Waking The Tiger-Healing Trauma Peter Levine

Comments and Closing

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Feedback

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https://www.surveymonkey.com/r/POP_Health_Integration_Ed_External

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