

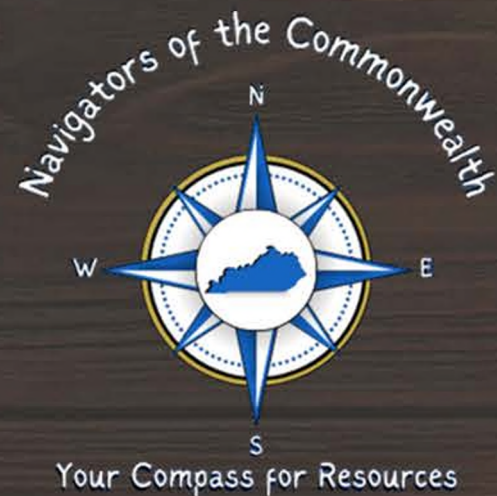
MENTI SLIDE

IN ONE WORD, WHAT HELPS
YOU FEEL EMOTIONALLY AND
PSYCHOLOGICALLY SAFE IN
YOUR WORK?

WORD CLOUD

NAVIGATORS OF THE COMMONWEALTH

YOUR COMPASS TO RESOURCES



College of
Public Health

*Center for Public Health Systems
and Services Research*

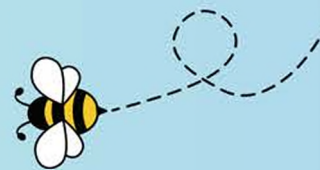


Welcome Navigators!

Our main goal is to foster meaningful connections between those who provide services (the helpers) and those who seek them (the help seekers).

Agenda:

- Navigating the Session
- Breakout Rooms
- NoC Content
- Next Topic
- Q and A



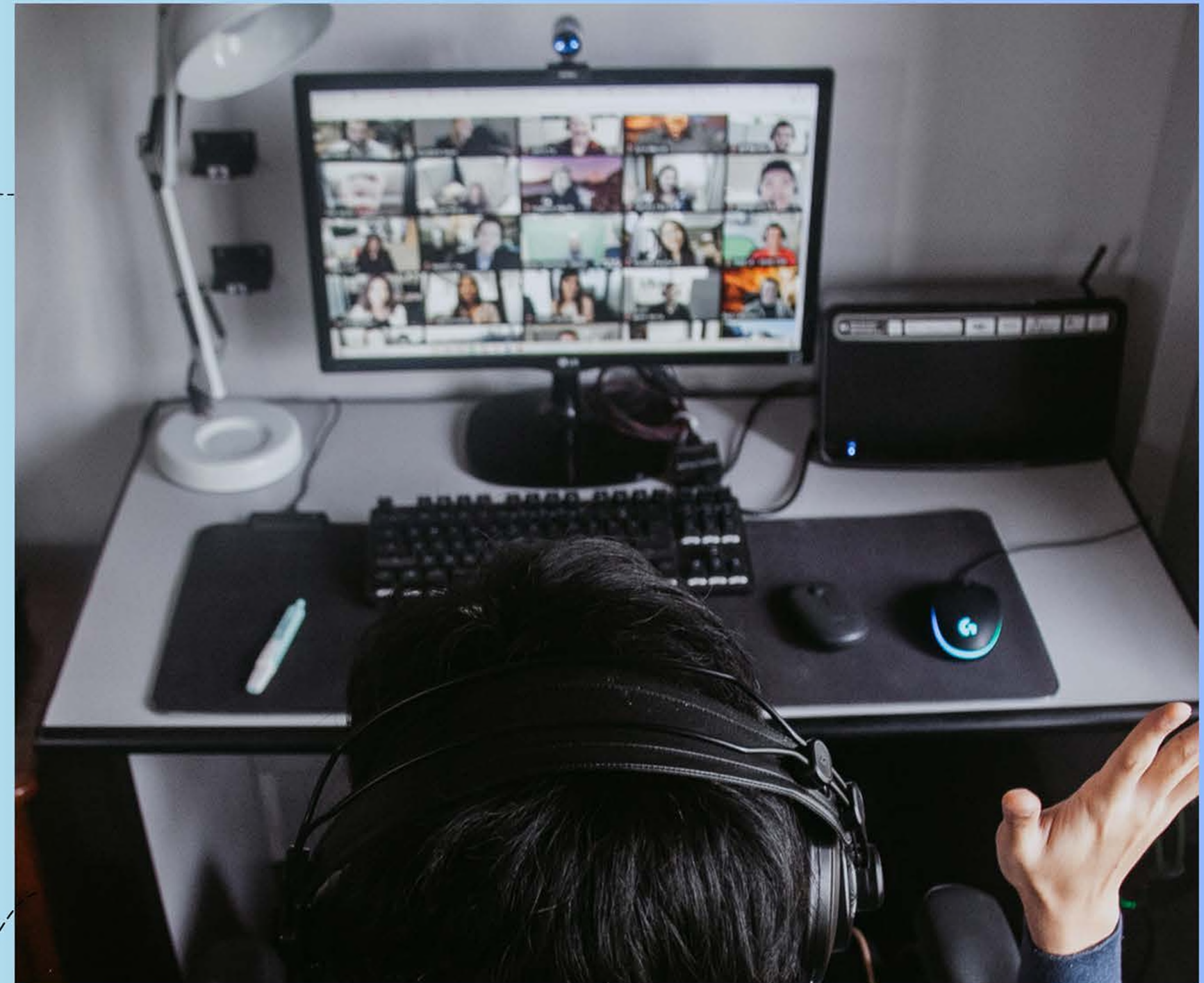
**NoC Session 6:
Trauma-Informed Approaches in
Everyday Interactions within Helping
Systems**



Navigating the Session

Our Commitment to Successful Collaboration:

- Active participation
- Be present
- Stay open and curious but respect confidentiality
- Use technology respectfully
- Have fun



Up Next:
Dr. Dan Siegel's
Hand Model Of The Brain

Dr. Dan Siegel's Hand Model Of The Brain





Reflection Breakout:

Think of a moment when a client felt 'difficult' to engage. What behaviors did you notice? How did you respond at the time?

Prompts:

- How might that have been trauma showing up?
- What do you wish you'd done differently?
- What support do you need to do that?



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Menti or Zoom Poll?

When someone is harder to connect with, what kinds of behaviors do you tend to notice?

- They're late or ghost you
- They challenge everything you say
- They avoid eye contact / shut down
- They over-explain or talk a lot
- They lash out or get emotional
- They seem too quiet / too compliant
- They joke when things get serious



What Trauma Can Look Like: Direct Service + Help-Seeking Relationships

- Always late, or ghost completely
- Interrupt, over-talk, seem rude
- Challenge everything you say
- Joke constantly, even during serious moments
- Lash out at you, even when you're trying to help
- Over-apologizing, or never
- Being super helpful to everyone else but never asking for help themselves
- Being private/walled off
- Avoiding authority figures
- Avoiding direct help
- Become emotional during seemingly routine questions or comments





What Trauma Can Look Like: Colleague-to-Colleague or Peer Helper Dynamics

- Avoiding conflict
- Come off as negative, focusing on worst-case scenarios
- Rigid, inflexible
- Overperform/under-function/both
- Good at advocating for others, but terrible at speaking up for themselves
- Shut down if they feel misunderstood, or explode over small things
- Overreact to feedback, or avoid it

Everyday Situations That Can Re-Trigger Trauma



Paperwork & intake processes

- Filling out forms with detailed personal questions (especially about housing, income, relationships, or parenting)
- Asking for legal documents like custody orders, restraining orders, or ID
- Saying, "We can't help you unless you fill this out."
- Being aware of physical spaces, such as sitting clients with their backs to the doors or confined spaces, may be triggering
- Asking for more details than needed about history in intake discussions

Medical and physical contact

- Gynecological/reproductive health care without checking in about trauma
- Touching someone without asking or socially pressuring it (hug, arm pat)
- Rushing physical procedures, screenings, or asking for quick decisions during appointments



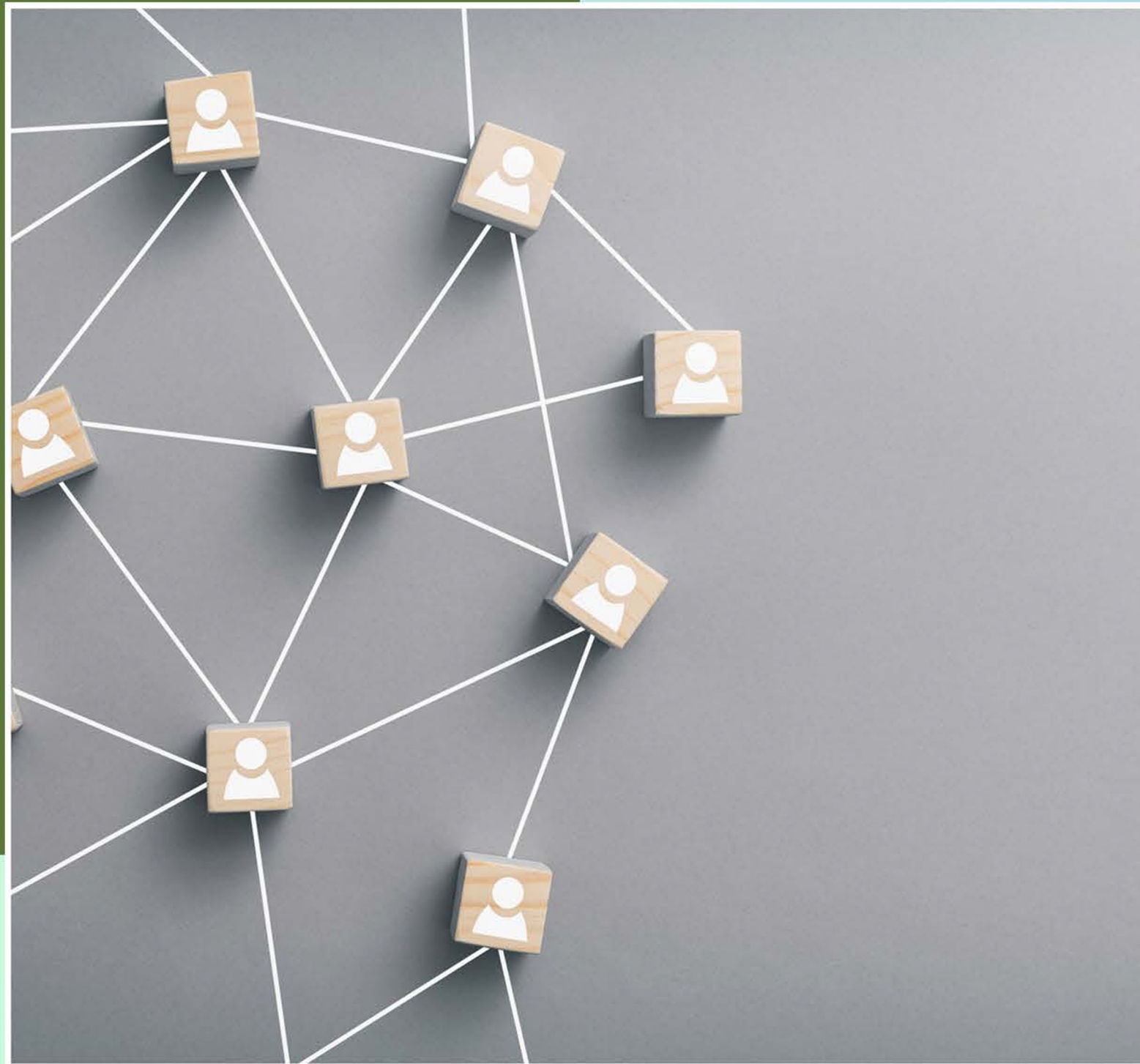
Everyday Situations That Can Re-Trigger Trauma

Group work/shared spaces, and peer settings

- Group therapy, support groups, or shared housing environments without clear boundaries or sensory accommodations
- Public praise or singling someone out for a “success story” in front of peers
- Saying “everyone has a voice here” without making room for silence or different processing styles

Time, scheduling, and control

- Expecting people to be on time or meet deadlines without flexibility
- Not explaining why something is being asked or why a process is required
- Assuming that because someone is quiet or compliant, they are comfortable



Everyday Situations That Can Re-Trigger Trauma

Communication and boundaries

- Asking “what happened to you?” without context or consent
- Giving unsolicited advice, especially about parenting, relationships, or legal matters
- Using professional jargon or acronyms without translation
- Over-commenting on what they share, which may be perceived as passing judgment

Power dynamics and structural triggers

- Having to “prove” trauma or need to access help
- Being told “there’s nothing we can do” without offering alternatives
- Expecting disclosure before building trust

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* QUICK CHALLENGE (POP QUIZ): TRAUMA -
TRIGGER OR NOT? ZOOM POLL OR MENTI
MULTIPLE CHOICE*

WHICH OF THESE IS A POTENTIAL TRAUMA
TRIGGER? SELECT ALL THAT APPLY.

- ASKING FOR LEGAL DOCUMENTS
- HUGGING SOMEONE AFTER A GOOD SESSION
- TELLING SOMEONE "THIS GROUP IS SAFE"
- USING ACRONYMS LIKE SUD OR DV
- ASKING WHY THEY DIDN'T FILL OUT THE FORM
YET



Practical Trauma-Informed Responses: What to Do When You See This

When someone's behavior feels "off," assume protection before you assume defiance.

Instead of reacting to the behavior, try to respond to the **need** underneath



Example Scripts:

Late/ghosting

- "Hey, I know it's been hard to connect. We can go at your pace. I'm still here when you're ready."

Interrupt/over-talk

- "I want to make sure I hear everything you're saying. Let's slow down and walk through it together."

Constant challenging

- "I hear you, sounds like you've had to be really careful about who to trust. You don't have to decide anything right now."

Repeat story/Can't focus

- "This sounds like something important to you. Want to take a breath and then figure out what part we can work on today?"

Get mad/shut down

- "I want to check in, was that question okay? We can pause or come back to it later."

Joking about serious things

- "I hear the humor, and I also want you to know I'd take you seriously if you ever needed support."



The Truth About Being Trauma-Informed

- Trauma isn't always disclosed, it shows up in behavior
- "Difficult" people are often traumatized people protecting themselves
- What feels normal to you might feel dangerous to them
- Systems (yes, even ours) can feel just like abuse
- Powerlessness, not pain, is the core wound of trauma

Your job isn't to fix them. It's to create safety when the world hasn't.



Final Takeaway

Language/perspective shift:

They're being difficult → They're activated, this is trauma in real-time

Being trauma-informed doesn't mean having the right answers. It means creating conditions where people feel safe enough to show up as they are, even when they can't explain why.



**Up Next:
Next Session Topic**



MENTI SLIDE

WHAT SEED ARE YOU PLANTING
TODAY IN YOUR PRACTICE?



Community Resource Guides

Total County Count: 2938

**Next Topic:
What Resource Guide
Platform to Use When**



**NoC Session 7:
July 30, 11-12 EST**



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THANK YOU!!!



College of
Public Health

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