Mindful Continuing Education

Trauma-Informed Care for Behavioral Health Service Providers

Terminology

1. Behavioral health problems are those that range from unhealthy stress to diagnosable and treatable diseases like serious mental illness and substance use disorders, which are often chronic in nature but from which people can and do recover.

A. True
B. False

Part 1: Trauma-Informed Care: A Sociocultural Perspective-What is Trauma?

2. Each of the following is an accurate statement about the impact of trauma EXCEPT:

A. Two people may be exposed to the same event or series of events but experience and interpret these events in vastly different ways
B. Various biopsychosocial and cultural factors influence an individual's immediate response and long term reactions to trauma
C. Regardless of the severity of the trauma, the immediate or enduring effects of trauma are often met with resilience
D. The event itself is always the determining factor on whether or not something is traumatic

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Trauma and Mental Disorders

3. Research findings propose that traumatic stress plays a significant role in perpetuating and exacerbating mental illness and suggests that trauma often precedes the development of mental disorders.

A. True
B. False

Trauma-Informed Intervention and Treatment Principles

4. A trauma-informed approach incorporates three key elements, including realizing the prevalence of trauma, recognizing how trauma effects all individuals involved with the program, organization or system, and:

A. Reacting to specific trauma-related needs of clients
B. Reinforcing the need to include trauma trauma-related services into behavioral health treatment
C. Responding by putting this knowledge into practice
D. Re-evaluating current practices through a trauma-aware lens

Recognize That Trauma-Related Symptoms and Behaviors Originate From Adapting to Traumatic Experiences

5. When defining client issues from a diagnostic aspect, a trauma informed perspective views trauma related symptoms as abnormal reactions to abnormal situations.

A. True
B. False

6. When professionals embrace the belief that trauma related actions are _____, they can begin to build relationship with clients from a hopeful, strengths-based stance.

A. Adaptive
B. Fundamental
C. Unavoidable
D. Self-preserving

View Trauma in the Context of Individuals' Environments

7. Culture, development processes, and the specific era when the trauma(s) occurred can significantly influence how a trauma is perceived and processed and how an individual or community engages in help-seeking.

A. True
B. False

Exhibit 1.1-3: Understanding the Levels Within the Social-Ecological Model of Trauma and its Effects

8. Family, peer, and significant other interaction patterns are considered individual factors within the social-ecological model of trauma.

A. True
B. False

Minimize the Risk of Retraumatization or Replicating Prior Trauma Dynamics

9. Clients who have histories of trauma may be more likely to experience particular treatment procedures and practices as negative, reminiscent of specific characteristics of past trauma or abuse, or retraumatizing.

A. True
B. False

Create a Safe Environment

10. Establishing a safe environment for clients who have experienced trauma includes:

A. Implementing strategies to help clients cope with triggers that evoke their experiences with trauma
B. Consistency in client interactions and treatment processes
C. Following through with what has been reviewed or agreed upon in sessions or meetings and being dependable
D. All of the above

Incorporate Universal Routine Screenings for Trauma

11. While screening for trauma at initial intake is not recommended because of the reactions it may create, it is recommended that such a screening take place once the therapeutic relationship has been established.

A. True
B. False

Advice to Counselor and Administrators

12. "How did you manage your stress today?" and "What are some of the creative ways that you deal with painful feelings?" are examples of coping-oriented questions.

A. True
B. False

Develop Strategies to Address Secondary Trauma and Promote Self-Care

13. The range of reactions that manifest when behavior health professionals experience secondary trauma can be, but are not necessarily, similar to the reactions presented by clients who have experienced primary trauma.

A. True
B. False

Provide Hope-Recovery is Possible

14. When clients enter into a helping relationship to address trauma, they are often looking for a cure or immediate relief from pain, but they frequently possess a history of _____ that reinforces an underlying belief the recovery is not possible.

A. Unpredictable symptoms and symptom intensity
B. Avoiding difficult or challenging situations
C. Negative feelings or thinking
D. Detachment from support systems

Trauma Awareness-Types of Trauma

15. Each of the following is an example of human-caused trauma EXCEPT:

A. Warfare
B. Famine
C. Genocide
D. Oil spill

Advise to Counselors: Working with Clients who Have Experienced Individual Traumas

16. When working with clients who have histories of individual trauma, counselors should consider that sympathy is the most potent tool they can use because it shows that they can relate to the sorrow the trauma has caused.

A. True
B. False

Trauma Affecting Communities and Cultures

17. Health inequalities such as late prenatal care, inability to afford medications, and limited access to affordable medical services are examples of:

A. Societal trauma
B. Generational trauma
C. Environmental trauma
D. Cultural trauma

Mass Trauma

18. One factor that influences an individual's response to trauma is his or her ability to process one trauma before another trauma occurs.

A. True
B. False

Interpersonal Traumas

19. Which of the following is NOT a correct statement about Intimate partner violence (IPV)?

A. Intimate partner violence is a pattern of actual or threatened physical, sexual, and/or emotional abuse
B. Incidents of this form of violence are often isolated
C. IPV differs from simple assault in that the perpetrator is an intimate partner of the victim
D. Trauma associated with IPV is normally ongoing

Developmental Trauma

20. Developmental traumas are those that are related to adverse childhood experiences (ACEs) or that result from tragedies that occur outside and expected developmental or life stage.

A. True
B. False

Political Terror and War

21. Anything that threatens the existence, beliefs, well-being, or _____ of a community is likely to be experienced as traumatic by community members.

A. Cohesiveness
B. Livelihood
C. Perseverance
D. Values

Torture and Captivity

22. The impact of torture and captivity incorporates each of the following EXCEPT:

A. Torture traumatizes by taking away an individual's personhood, since to survive victims have to give up their sense of self and will
B. Inevitably, the shame of the victim is enormous because the focus of torture is to humiliate and degrade
C. The methods of establishing control over another person are based upon the systemic, repetitive infliction of psychological trauma
D. Freed victims will usually share their trauma immediately in an attempt to quickly regain their selfhood

Characteristics of Trauma

23. A series of traumas happening to the same person over time is known as prolonged trauma.

A. True
B. False

24. A particularly severe pattern of ongoing trauma, sometimes referred to as _____, occurs when multiple traumas happen in a pattern that does not allow an individual to heal from one traumatic event before another occurs.

A. Evolving trauma

B. Cascading trauma
C. Progressing trauma
D. Perpetual trauma

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25. When a trauma is isolated from the larger context of life, a person's response to it is more likely to be contained and limited.

A. True
B. False

Subjective Characteristics

26. Survivors' unique cognitive interpretations of an event, that is, their _____, contribute to how they process, react to, cope with, and recover from the trauma.

A. Insight and perception
B. Reasoning and understanding
C. Beliefs and assumptions
D. Deductions and mindset

History of Prior Psychological Trauma

27. Minimization, dissociation and avoidance are common defenses for many trauma survivors, so prior traumas are not always consciously available, and when they are, memories can be distorted to avoid painful affects.

A. True
B. False

Sociodemographic Factors-Gender

28. Gender impacts trauma in which of the following ways?

A. In the United States, women are at greater risk than men for being exposed to stressful events
B. Lifetime PTSD occurs at about three times the rate among women as it does men
C. Women in military service tend to be subject to fewer trauma risks than men
D. Men's traumas often occur in public while women's are more likely to take place in private settings

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People Who Are Homeless

29. Rates of trauma symptoms are particularly high among people who are homeless, with approximately 80-90% of women being impacted and 50-60% of men.

A. True
B. False

Understanding the Impact of Trauma-Sequence of Trauma Reactions

30. According to the authors, which of the following is NOT one of the factors that impacts survivors' immediate reactions to the aftermath of trauma?

A. Their overall emotional and physical health
B. The accessibility of natural supports and healers
C. Their coping and life skills and those of immediate family
D. The responses of the larger community in which they live

Common Experiences and Responses to Trauma: Exhibit 1.3-1

31. Immediate emotional reactions to trauma include irritability, hostility, and grief reactions.

A. True
B. False

32. The biological process whereby emotions are detached from thoughts, behaviors, and memories is known as anesthetizing.

A. True
B. False

Biology of Trauma

33. Exposure to trauma leads to a cascade of biological changes and stress responses including:

A. An increase in neutrophlilic leukocytes
B. Changes in limbic system functioning
C. Constriction of the peripheral blood vessels
D. Increased serum calcium and blood glucose

Triggers and Flashbacks

34. A flashback is a stimulus that sets off a memory of a trauma or a specific portion of a traumatic experience.

A. True
B. False

Dissociation, Depersonalization and Derealization

35. The experience of _____ refers to psychologically 'leaving one's body,' as if watching oneself from a distance as an observer, which leads to a sense that what is taking place is unfamiliar or is not real.

A. Dissociation
B. Derealization
C. Depersonalization
D. Decompensation

Advice to Counselors: Working With Clients Who Are Self-Injurious

36. To respond appropriately to a client who engages in self-harm, counselors should learn the client's perspective on self-harm and how it "helps", and understand that self-harm is often a coping strategy to manage the intensity of emotional and/or physical distress.

A. True
B. False

Social/Interpersonal

37. Trauma survivors may readily rely on family members, friends or other social supports, or they may avoid support, either because they believe that no one will be understanding or trustworthy or because they perceive their own needs as a burden to others.

A. True
B. False

Specific Trauma-Related Psychological Disorders

38. Acute stress disorder (ASD) represents a normal response to stress and includes which of the following characteristics:

A. Symptoms develop within 2 weeks of the trauma and can cause significant levels of distress
B. Most individuals who have acute stress reactions develop further impairment or PTSD
C. ASD is highly associated with the experience of long term exposure to chronic traumatic stress
D. Diagnostic criteria includes the persistent inability to experience positive emotions such as happiness, satisfaction, or loving feelings

Posttraumatic Stress Disorder

39. People with PTSD often present varying clinical profiles and histories, and they can experience symptoms that are activated by environmental triggers and then recede for a period of time.

A. True
B. False

Posttraumatic Stress Disorder: Timing of Symptoms

40. Although symptoms of PTSD usually begin within 4-6 weeks of a trauma in adulthood, there can be a delay of several months before symptoms appear for some people.

A. True
B. False

Complex Trauma and Complex Traumatic Stress

41. When individuals experience multiple, prolonged and repeated trauma during childhood they may experience unique characteristics of complex trauma, which is now recognized diagnostically in the DSM-5.

A. True
B. False

People With Mental Disorders

42. The most common co-occurring disorder in people who have experienced trauma and are diagnosed with PTSD is:

A. Major depressive disorder
B. Substance use disorder
C. Anxiety
D. Somatoform disorder

Exhibit 1.3-6 PTSD and Substance Use Disorders: Important Treatment Facts

43. Treatment outcomes for clients with PTSD and a substance use disorder are worse than for clients with other co-occurring disorders or who only abuse substances.

A. True
B. False

Screening and Assessment

44. Without trauma screening, clients' trauma histories and related symptoms often go undetected, leading providers with information that may only partially explain client presentations and distress.

A. True
B. False

Screening and Assessment-Screening

45. The first two steps in screening are to determine whether the person has a history of trauma and whether he or she has:

A. Received any treatment for previous trauma
B. Trauma related symptoms
C. Any co-occurring or other substance use disorders
D. Any co-occurring or other substance use disorders

Timing of Screening and Assessment

46. Initial questions about trauma should be immediate and specific so that the client understands that it safe to discuss the topic without fear.

A. True
B. False

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47. When approaching the screening and assessment process, each of the following is recommended for clinicians EXCEPT:

A. Clarify for the client what to expect in the screening and assessment process
B. Approach the client in a matter-of-fact, yet supportive manner
C. Elicit details of the client's traumatic experience in order to determine the appropriate course of treatment
D. Provide culturally appropriate symbols of safety in the physical environment

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48. Grounding techniques are important skills for behavioral health service providers as they help the client who may be overwhelmed by memories or strong emotions or who is dissociating.

A. True
B. False

Barriers and Challenges to Trauma-Informed Screening and Assessment

49. The two main barriers to the evaluation of trauma and its related disorders in behavioral health settings are clients not reporting trauma and providers overlooking trauma and its effects.

A. True
B. False

Awareness of Co-Occurring Diagnoses

50. Experts recommend the use of symptom checklists to gather information about how clients are currently feeling and to screen for specific disorders.

A. True
B. False

Cross-Cultural Screening and Assessment

51. Cultural factors, such as norms from _____, defining trauma, and seeking help in dealing with trauma, can affect how traumas are experienced and the meaning assigned to the events:

A. Demonstrating vulnerability
B. Self-disclosing personal issues
C. Maintaining privacy
D. Expressing psychological distress

Choosing Instruments

52. General considerations in selecting standardized instruments to screen for trauma include purpose, population, practical needs such as availability and cost of the instrument, and:

A. Instrument quality
B. Time constraints
C. Whether it provides immediate feedback
D. None of the above

Trauma-Informed Screening and Assessment-Establish a History of Trauma

53. A person cannot have ASD, PTSD, or any trauma-related symptoms without experiencing trauma, so it is necessary to inquire about painful, difficult, or overwhelming past experiences.

A. True
B. False

Screen for Trauma-Related Symptoms and Disorders in Clients with Histories of Trauma

54. The Trauma Resilience Scale (TRS) is a brief screening tool that asks clients to identify the trauma in their past that is most disturbing to them currently, including the current rate and frequency of trauma-related symptoms.

A. True
B. False

Clinical Issues Across Services-Prevention and Treatment Objectives

55. The purpose of trauma informed care (TIC) is to focus on identifying individuals who have histories of trauma and traumatic stress symptoms, and to create an environment that helps them recognize the impact of trauma and determine the next course of action in a safe place.

A. True

B. False

Provide Psychoeducation

56. Psychoeducation is used as a first-line or complementary approach to trauma-specific therapies to enhance coping strategies in key areas, including safety, emotional regulation, help-seeking, avoidant behavior, and so forth.

A. True
B. False

Offer Trauma-Informed Peer Support

57. Peer support provides opportunities to form mutual relationships, to learn how one's history shapes perspectives of self, others, and the future, and it defines recovery as:

A. A normal course of action
B. An interactive process
C. A growth opportunity
D. A fix for a life-long problem

Identify and Manage Trauma Related Triggers

58. Most clients who experience intrusive thoughts, feelings, sensations, or environmental cues of trauma are able to draw an immediate connection between the internal or external trigger and his or her reactions, which can be very distressing.

A. True
B. False

Draw Connections

59. A treatment goal for trauma survivors is helping them gain awareness of the connections between their histories of trauma and subsequent consequences, as seeing the connections can improve clients' ability to work on recovery in an integrated fashion.

A. True
B. False

Teach Balance

60. Trauma experts recommend that survivors tell each of their stories and share all of their traumatic experiences in a safe environment in order to be able to fully recover.

A. True
B. False

Build Resilience

61. Building or reinforcing resilience with those who have experienced trauma helps prevent further development of trauma related symptoms and disorders, and helps to establish a _____ approach for clients.

A. Growth-focused
B. Strengths-based
C. Problem-solving
D. Coping-oriented

Build Trust

62. Establishing a safe, trusting relationship is paramount to healing, yet this takes time in the counseling process, so counselors and other behavioral health professionals need to be consistent and patient throughout the course of treatment.

A. True
B. False

Acknowledge Grief and Bereavement

63. When grief lasts for more than three months, it is considered chronic bereavement, and it is especially important to have these clients process their physical losses before confronting their internal experiences.

A. True
B. False

Monitor and Facilitate Stability

64. Helplessness or hopelessness expressed verbally or behaviorally and isolation are considered normal or typical traumatic stress reactions.

A. True
B. False

Client Engagement

65. Clients who have histories of trauma will express ambivalence about treatment similarly to others, except that clients who have traumatic stress can feel more "stuck" and perceive themselves as:

A. Being unable to change
B. Lacking ability to follow through
C. Having fewer options
D. All of the above

Length of Treatment

66. Many factors influence decisions regarding the length of treatment for a given client, including trauma, age at which the trauma occurred, level of social support, and the existence of mental disorders and/or substance abuse.

A. True
B. False

Forgiveness

67. Each of the following is an accurate statement about addressing forgiveness with trauma survivors EXCEPT:

A. Survivors must be allowed their feelings about forgiveness even if they conflict with the counselor's own responses
B. It's important to encourage clients to make a decision about forgiveness early in the recovery process as it will likely help guide the therapeutic process
C. Even in latter stages of recovery, it's not essential for the clients to forgive in order to recover
D. With trauma that impacts a group of people, such as the apartheid conflicts in South Africa, forgiveness may become part of the long term healing process for people and for the community

Culturally and Gender Responsive Services

68. Cultural competence is rooted in _____ toward someone whose social and cultural background is different from one's own.

A. Respect, validation, and openness
B. Understanding, consideration, and acceptance
C. Reverence, support, and tolerance
D. Courtesy, interest, and receptiveness

Sexual Orientation

69. Lesbian, gay, bisexual, and transgender (LBGT) clients sometimes think that others can't understand them and their specific needs and thus are reluctant to engage in treatment programs in which clientele is predominately heterosexual.

A. True
B. False

Chapter 6: Trauma-Specific Services-Introduction

70. Present-focused trauma therapies primarily focus on understanding the impact that the trauma story has on current functioning, and they identify how the trauma survivor experiences emotions that were too overwhelming to experience in the past.

A. True
B. False

Trauma-Specific Treatment Models-Immediate Intervention

71. In the first 48 hours after a traumatic event, a hierarchy needs to be established that includes safety, security, health, orientation to services, and communication with friends, family, and community.

A. True
B. False

Interventions Beyond the Initial Response to Trauma

72. An emerging approach to understanding human growth and change is _____, which is founded on the premise that individuals are the experts on their own lives and can access their existing intrapsychic and interpersonal resources to reduce the impact of problems in their lives.

A. Cognitive processing therapy
B. Affective regulation therapy
C. Interpersonal regulation therapy
D. Narrative therapy

Integrated Models for Trauma

73. In the Addiction and Trauma Recovery Integration Model (ATRIUM), challenging old beliefs that arose as a result of trauma occurs in which stage?

A. Outer circle
B. Middle circle
C. Inner circle
D. Final circle

Trauma Recovery and Empowerment Model

74. The trauma recovery and empowerment model is a group intervention designed for female trauma survivors with severe mental disorders, which includes:

A. Empowerment
B. Trauma recovery
C. Modifications for special populations
D. All of the above

Emerging Intervention-Mindfulness Interventions

75. Mindfulness techniques help trauma survivors stay grounded in the present, and assist them in observing their experiences, increasing awareness, and tolerating uncomfortable emotions and cognitions.

A. True
B. False