



Therapeutic
Relationships
in Trauma-Informed Care



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THE HELPING RELATIONSHIP IN TRAUMA-INFORMED CARE

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The concept of a helping relationship was defined by Carl Rogers in the late 1950s as a special type of relationship where at least one individual shows up with the intent to promote the growth and development of the other person. It covers a wide range of human connections that have the potential to be helping relationships (including parent-child, physician-patient, counselor-client, and teacher-student) if the intent and skill is present. The focus is not on imposition or coercion, but on empowering deeper appreciation, expression, and access to the individual's own inner resources.

In a trauma-informed care setting (whether outpatient, residential, or community-based) the ability of frontline workers to connect effectively with young people is essential for post-traumatic growth and restoration. These roles have the greatest impact on the quality of care. They are the most vulnerable to risk and often have the least education and training of everyone on the care team.

For a young person who has experienced trauma, life feels overwhelming and unpredictable. The brain and body are flooded with stress hormones and significant resources are allocated to survival. Curiosity is inhibited and there is a surge of distrust of others and one's own intuition and strengths. Skilled frontline workers are able to create space (both physically and emotionally) for the young person to express their trauma and explore new ways of living without the threat of being retraumatized.

The difficulty is that when a young person's brain and body are focused on survival their response to a helping relationship may look and feel like defensiveness or resistance. It's often more likely a lasting response to stress and an attempt to protect or avoid further pain. It takes kindness and specific relational skills to persist long enough to ease those fears.

TRAUMA-INFORMED CARE REQUIRES A DIFFERENT APPROACH

Experiences of trauma - especially those which occur in early childhood - impact the way we make meaning out of life. It can shape the worldview of a young person and how they understand and interact with others around them. They may come to believe that the world or people around them are unsafe. They may internalize feelings and thoughts that they are unimportant or of no value in the world.

When a person struggles there is always a reason why. It may be that behind troubling behavior there is grief, fear, anxiety, or despair. It may be that in that moment they have limited access to their own inner resources to reflect and respond to a perceived threat or stress. It's our task to recognize and respond to the need behind the behavior. Supportive co-regulation, not compliance, is the goal.

Coercive practices such as point systems, seclusion, suspension, and restricting access to healthy activities in the community must be minimized. They place the young person in a place of feeling out of control and are retraumatizing. Other than in instances of immediate safety concerns, they are simply outdated practices and the professional field now knows better.

IS IT PERSONAL OR PROFESSIONAL?

Meaningful connection is difficult to achieve, if at all, in rigidly prescribed roles that emphasize social and emotional distance from the young person. Authentic, genuine presence involves entering the helping relationship with our own unique personal history, strengths, and experiences. It's a profoundly personal work in the context of a professional role. It is impossible to separate these two domains because we bring our whole self to every interaction.

It's important that frontline workers get the support needed from their leaders and organization to navigate this unique and vulnerable role.

FRONTLINE WORKERS ARE UNIQUELY POSITIONED IN THE HELPING RELATIONSHIP

Young people affected by trauma have valuable things to teach us and contribute to the world. Their healing and restoration aren't facilitated by the provision of a service, or the application of a model or treatment. It is nurtured by the experience of themselves in connection with other caring individuals in their everyday lives who support them in giving voice and meaning to their experiences.

The experience of the relationship is always the most influential factor, regardless of the practice setting, specific role, or program model. It is something that trained, skilled frontline workers are uniquely positioned to offer.



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METHODOLOGY

CYCLE OF SAFETY™

CONCEPTUAL MODEL

The Cycle of Safety illustrates the reciprocal nature of a trauma-informed interaction from the moment of contact, the experience of psychological safety, and the rise of the opportunity where both individuals take the risk of a continued encounter.



COMPETENCY FRAMEWORK

- A** Showing up with authentic **presence** that builds trust and initiates/responds to bids for connection
- B** Supportive **co-regulation** that holds space for the expression of trauma without being retraumatized
- C** Creating **experiences** that facilitate post-traumatic growth and access to one's own inner resources

MENTORING THEMES

- 1 Ethics of Care & Child Rights
- 2 Contact Boundaries
- 3 Reciprocity & Power
- 4 Trauma Awareness
- 5 Comfort, Controls & Rhythm
- 6 Safety & Threat Responses
- 7 Empowering Growth
- 8 Words of Hope
- 9 Signals of Worth

Cycle of Safety is a trademark of Training Grounds LLC.



An act of kindness creates a shift

of perspective
of connection
of life
from a primal to powerful state
a pause in the rush of the world

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LEADERSHIP
WAS AT ITS ABSOLUTE
BEST?**

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James Freeman, MA, CYC-P has distilled over 30 years of professional experience in trauma-informed care with youth and families into a framework for mentoring rising leaders in health and social services.

He has trained around the world and his advocacy in the field has been recognized with a president's award from the Association for Child and Youth Care Practice and a career achievement award from the National Staff Development and Training Association.

His focus on the interpersonal process and integration of organizational psychology equips others to lead mission-driven teams and organizations with clarity, alignment, and impact.



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