Workforce Resilience Enhancement Project

Supporting Clients Impacted by Community Violence

Community Violence and Its Effects

Many clients of workforce development programs live in racially and economically segregated neighborhoods coping with high levels of community violence. The National Child Traumatic Stress Network defines Community Violence as "interpersonal violence committed in public areas by individuals who are not intimately related to the victim". This may include fights, shootings, or ongoing conflicts between groups. The prevalence and ongoing threat of violent crime in communities affect the health and emotional well-being of those who live in them. In neighborhoods with high levels of violence, it is not uncommon for residents to have been injured, witnessed shootings, or lost a loved one to violent death. These experiences can lead to Posttraumatic Stress Disorder (PTSD) at rates comparable to those seen in combat veterans. Whether or not violent episodes lead to the development of PTSD, living with the ongoing threat of violence has a pervasive effect on people's day-to-day lives and functioning.

Anyone who is physically injured, witnesses violent episodes, or has friends or loved ones killed or injured, must then every day navigate unsafe areas that are constant reminders of traumatic events. Even when directly unscathed by such events, individuals may frequently worry about their own safety and that of their loved ones. PTSD and other common trauma reactions can make meeting workplace demands a complex challenge, especially when working in areas where there is ongoing violence. In order to meet the demands of daily life, work, and relationships, it is natural for people to avoid thinking about trauma or to numb their feelings. Although people may appear unaffected or minimize the impact of violence or traumatic loss, it is important to remember that they carry these experiences with them and past trauma continues to shape how they perceive and respond to what is happening around them in the present.

Despite the fact that neighborhood violence has a major impact on individuals, families, and communities, most areas struggling with high levels of violence have inadequate resources in many domains, including a dearth of support and services to help residents cope with the trauma of the violence around them. Due to this lack of support and the tendency we all have to avoid talking about trauma, many people feel that they must deal with the stress of violence on their own. **Workforce development professionals can provide crucial support to their clients by understanding the violence clients have experienced, talking to them about how those experiences could have affected them, and helping them plan how they will manage demands, especially when trauma reactions are inevitably triggered at work.**

Individual effects of community violence like those described above are common and cause significant distress, but it is important to remember that high levels of violence also do not occur in a vacuum. Violence is highest in racially and economically segregated areas where residents must also cope with the effects of historical trauma and the intergenerational legacy of racism. Individual traumas and their effects interact with forces of systemic or structural violence (e.g., mass incarceration; lack of accessible health care/mental health care; lack of opportunities to earn a living wage) to create a vicious cycle that perpetuates violence and undermines the community fabric. When supporting clients dealing with the effects of community violence, it is important to understand that, in addition to the impact of past experiences, many of them are also dealing with ongoing conflict and violence in their neighborhoods, or Continuous Traumatic Stress.

What is Continuous Traumatic Stress?

People with posttraumatic stress disorder (PTSD) cope with the effects of past trauma that can manifest themselves in such debilitating symptoms as flashbacks, hypervigilance and insomnia. But what happens to people who face trauma on an ongoing basis — the millions who live with the daily reality of community violence, war, and genocide? We need to consider the reality and effects of the many ongoing traumas people face, particularly in the world's poorer, politically unstable regions, as well as in urban areas marked by racial and economic segregation, disinvestment, poverty, and violence in the United States and elsewhere.

Trauma experts in South Africa developed the concept of Continuous Traumatic Stress (CTS) to describe the psychological impact of living in conditions in which there is a _realistic threat of present and future danger_, rather than only experiences of past traumatic events (a distinction to the "post" in PTSD). CTS foregrounds the difficulties of addressing past exposure in the context of an accurate appraisal of the potential for current and future harm. Realistic current and ongoing dangers, can be political or civil conflict, or pervasive community violence. **Many workforce development clients face additional threats of harm from systems of oppression, such as mass incarceration and the possibility of police violence.**

CTS can be a less pathologizing way of understanding trauma than PTSD, which emphasizes individual, internal problems. It's quite problematic to pathologize individuals in contexts that are normatively toxic and dangerous, like community violence. The CTS framework recognizes that people who experience such stress often lack safe places to heal or recover. Therefore, clients need to develop coping strategies to help them function within realistic conditions of ongoing danger as well as advocate for changes to the conditions causing the ongoing traumatic stress.

Common Reactions to Community Violence & Continuous Traumatic Stress

When faced with a severe threat, the human brain and body go into "survival mode." During this trauma response, subcortical regions of the brain predominate; attention narrows to focus solely on threat-related information; neurotransmitters and stress hormones prepare the body for fight or flight; and brain regions used to integrate and make sense of experience shut down. As a result, traumatic experiences are not integrated with other types of experience, memories, and aspects of self. Without integration, trauma-related memories and associations remain mostly out of consciousness but exert influence over perceptions and behavior. Traumatized individuals then alternate between functioning as if the traumatic situation is still occurring and functioning as if it never happened. The symptoms of PTSD reflect this back-and-forth between re-living trauma (e.g., flashbacks, intrusive thoughts, strong affective reactions, hypervigilance) and detachment from it (e.g., numbing, avoidance, emotional unresponsiveness.) These different kinds of reactions can be triggered by reminders (both internal or external) of traumatic events or related feelings. Most of the time, when people are triggered, they are not conscious of the links between their reactions and their trauma, and this can lead to a sense that they are "going crazy."

In unsupportive environments, trauma reactions and grief related to traumatic loss can lead to difficulties in daily functioning, such as getting along with others, or meeting the demands of daily life. Each person has a unique reaction comprised of many different, normal reactions. Reactions may be cognitive, physical, spiritual, psychological or relational. Therefore, many people affected by violence may struggle in one or more of the following ways (excerpted from trauma self care):

Cognitive	Difficulty remembering things Hard time making decisions and planning Trouble concentrating, paying attention, or following complex directions Threatened assumptions (that the world is not safe or less safe than before) Intrusive thoughts
Psychological	Feeling helpless, hopeless or powerless Feelings of guilt or shame (e.g., survivor guilt) Anxiety about performance or interaction with others Grief/numbness Increased substance use

Physical	Fatigue/change in sleep habits Eating/appetite problems Headaches Startle reactions
Spiritual	Loss of faith Spiritual doubts Withdrawal from church community Despair
Relational	Withdrawing from others Alienation from friends, family, co-workers who "don't understand" Difficulty trusting others False or distorted generalizations about others

Supporting Clients

> **Avoid making judgments** about client's behavior and circumstances. Many participants in workplace development programs have had the experience of being viewed by systems as having moral, intellectual, or behavioral deficits. **One of the most important things you can do is to change the question "What's wrong with you?" to "What happened to you?"**

Not everyone who is affected by community violence will respond or cope in the same way. Despite differences in what individuals may have experienced or how they reacted, there are common strategies, typically used in psychotherapies, that can be universally implemented to help others manage trauma-related thoughts, feelings, and reactions.

> **Normalize trauma reactions** and provide practical tools for coping with them. Explain that re-experiencing is common and is not a sign of weakness or mental illness. Provide anticipatory guidance emphasizing that peoples' reactions are not crazy and that past traumatic events are not happening now. Teach simple grounding techniques, such as deep breathing, that clients can use to remind themselves where and when they are if trauma reactions occur.

After trauma and violence, it is natural to want to avoid thinking and talking about what has happened. As a result, violence can lead to isolation and the feeling that, "I need to handle it on my own." One of the most important factors in creating supportive environments is directly acknowledging trauma that has occurred or is occurring, and communicating that many people have gone through similar

experiences. Coping with violence, rather than being a hidden individual burden, can be framed as a shared experience to be overcome as a community.

Example: One employer created a space in the workplace where employees could choose to memorialize co-workers or loved ones who had lost their lives to community violence.

Recognizing that there are many normal ways of responding to trauma increases the likelihood that people will feel comfortable sharing that they are struggling. Workforce development professionals who have gone through experiences similar to those of their clients may want to share specific ways they were affected and how they overcame them. Normalizing trauma reactions and providing practical tools for coping with them can free up internal resources to focus on work.

Example: One manager built time into team meetings during which people could ask for support related to their work or things happening in their neighborhoods. Another manager acknowledged that many team members are affected by what is happening in our communities and started every meeting with team members taking three deep breaths together.

Validating

Emotional validation is the process of learning about, understanding, and expressing acceptance of another person's emotional experience. Regardless of whether or not the listener actually agrees with the content, individuals are being treated with genuine respect as a legitimate expression of their feelings, rather than marginalized or dismissed. Emotional validation is distinguished from emotional invalidation, in which another person's emotional experiences are rejected, ignored, or judged. Some emotional validation examples would include, "I understand that you are angry." "You seem really sad to lose another loved one. It makes sense to feel that way." "I've noticed that you…" It is important for individuals to expand their emotional vocabulary, while learning to *identify (e.g., anger, sadness)*, *express ("I feel upset, disappointed, angry)*, and *regulate (e.g., taking deep breaths to lessen intensity of emotions)* their feelings related to the effects of community violence, and additional stressors. A safe culture and climate is needed to allow individuals to express themselves. Reminding individuals that "it's okay to not be okay," and keeping them in the present moment can be a powerful experience and help them build stamina to tolerate intense emotions.

Telling clients to "not worry," or telling them they "shouldn't feel that way," is invalidating their lived experience and reduces opportunities to discuss how they truly feel. You should let them explain how they're feeling and express why, and validate those feeling by saying things like, 'I've had similar worries. Let's brainstorm ideas on how we can make things better.' There are no unhealthy emotions, although different ways of dealing with them can be more or less helpful. The goal is to help clients label (disappointed, anger, scared), express (e.g., using "I" statements) and regulate their emotions appropriately (e.g., rate intensity of emotion on a scale of 1 to 10 and use stress management to reduce intensity).

Prioritize Safety

Feeling physically, socially, or emotionally unsafe may cause extreme anxiety and/or depression in a person who has experienced trauma, potentially causing re-traumatization. Therefore, creating a safe environment is fundamental to successfully engaging clients. Establishing a sense of safety is a foundational component to help individuals recover from past trauma or cope with ongoing trauma, such as community violence.

- **Internal Sense of Safety:** clients can be trained to employ relaxation techniques, often accompanied by guided imagery of places that represent safety. Immediate anxiety reduction techniques to employ in situations of elevated distress also include breathing retraining or other breathing techniques, modified forms of progressive relaxation, grounding or other mindfulness exercises, meditation activities, or body scanning.
- **External Safe Spaces**: In the context of community violence, it is useful to map out with individuals what parts of their environment they can afford to engage in activities without being "on guard" and for them to also map out external safe spaces they can occupy and relax. Safety mapping is one approach to safeguarding clients. Example: a client drawing a map of their home in their community or a route from their home to work or grocery store would include identifying safe and unsafe areas to navigate. The workforce professional can then discuss the map with the client and discuss their experiences based on the map. These experiences are crucial in shaping how clients move through their local neighborhood, and how they keep themselves safe. By carrying out safety mapping with clients, workforce professionals can learn and understand about where clients feel safe or at risk.
- **Social-Emotional Environment**: To avoid or minimize re-traumatization, attending to clients' social and emotional needs is important to promote safety Examples include: welcoming clients and ensuring that they feel respected and supported; maintaining interpersonal boundaries and managing conflict appropriately; keeping consistent schedules and procedures; offering sufficient notice and preparation when changes are necessary; maintaining communication that is consistent, open, respectful, and compassionate; and being aware of how an individual's culture affects how they perceive trauma, safety, and privacy.
- **Enhance Engagement:** Engagement is critical since betrayal of trust and avoidance are core issues for traumatized individuals. The following strategies are helpful to increase engagement for clients: a) identify helpful people in the workplace who can enhance resilience and safety and diminish risk and danger; b) provide education about common reactions to trauma and how it affects a person's thoughts, behaviors and emotions; c) validate experiences and beliefs, for example "Your thoughts and feelings are normal," "It makes sense that you worry all the time. Let's figure out ways to help you feel safe," "Somehow through all of this, you keep going." See Self-Care section below for more details.

- **Real Danger vs. Trauma Reminder:** Many people who experience continuous traumatic stress have difficulty distinguishing between real and perceived danger because they are in a state of constant hyperarousal. Ongoing trauma tends to reinforce clients' distortions or unhelpful thoughts about safety. Challenging unhelpful thoughts can support a client to better differentiate real and perceived danger. Help clients distinguish real on-going threats and dangers from trauma reminders (perceived danger) by talking about **both** types of situations, and discuss thoughts, feelings, and plans related to these situations.

Self- Care

Encourage your clients to take care of themselves by practicing healthy coping strategies in order to prevent normal, though challenging, reactions from progressing into mental health concerns. To aid in emotional recovery and to help restore a sense of well-being and safety, consider suggesting these self-care strategies for your clients:

- **Turn off the news:** Limit news consumption. Whether one watches, listens to, or reads the news, being overexposed to it can cause negative emotions to resurface and increase stress and anxiety.
- **Talk to others:** Reach out to your support system. Talk about the event and your reaction to it if you want to, though the most important thing is to spend time with friends and family and stay connected to other people. The compassion and support you receive from those who care about you helps to maintain a sense of well-being.
- **Balance your perspective:** Distressing events can leave you with a negative outlook towards the world around you. Take some time to think about the positive moments, events, and people in your life. Doing so can help counteract negative thinking and balance your perspective.
- **Get some sleep:** Lack of sleep can have an adverse effect on your physical and mental well-being even when life is going well. Aim to keep a sleep schedule that will provide you with an adequate amount of sleep every night. Limit screen time and create a soothing environment. Keep electronics away from your bedroom and create a cool, dark, and clean atmosphere. If you experience sleeplessness, try applying some relaxation techniques.
- **Practice relaxation:** Taking deep breaths, listening to soothing music, or meditating can reduce your stress and anxiety, and promote relaxation. You can even try active relaxation techniques, such as taking a walk, stretching, or practicing yoga or the other relaxation tools described in the Prioritize Safety section (breathing techniques, modified forms of progressive relaxation, mindfulness exercises, meditation tools, grounding and body scanning). Practicing stress management multiple times daily - prior to work, mid-day, and at the end of work or before bedtime, increases the likelihood that these strategies will be used with consistency and yield positive benefits in mental health (cite).
- **Engage in physical activity:** Make exercise part of your lifestyle. A regular fitness routine not only builds your physical resilience and strength, but it can also burn away stress hormones and promote the release of endorphins that make you feel good.

- **Do something positive and meaningful:** Try to schedule an activity that you look forward to each day or find ways that you can help in your community. Volunteering and helping those in need is an excellent way of making a positive difference and will help you feel better too.
- **Routines and Rituals:** Routines and rituals provide a sense of safety, predictability, and consistency. It allows for individuals to have a sense of control in a chaotic world. Discuss with clients their common routines (exercising, going for walks) and rituals (e.g., spiritual care, daily affirmations) and establish a plan to implement or maintain routines and rituals.

Problem Solving

The symptoms of PTSD can greatly interfere with many aspects of a person's life, and as a result, a person with PTSD may need to engage in a good amount of problem-solving throughout their daily life. Further, people under chronic traumatic stress, like community violence are much more preoccupied with the present and future than with the past, so, again, the focus on helping clients find realistic coping strategies and on working toward systemic solutions is critical for recovery. Exploring and enhancing social support and addressing barriers to accessing those supports is important to work through problem solving.

When people are faced with problems, they may begin to feel overwhelmed or experience worry about the future. They may feel stuck and not know where to begin in addressing the problem. These experiences may be worse for someone with PTSD who already may be experiencing a tremendous amount of stress and anxiety. **Problem-solving is a basic coping strategy. When done correctly, it can help someone experience a greater sense of control and predictability with regard to a problem.** As a result, stress and anxiety may be reduced. There are five steps to problem-solving:

- **Identify the Problem:** The first step in solving a problem is to recognize what the problem is. This might sound like common sense; however, this is a very important step. Try to get clients to describe the problem as objectively as possible, as opposed to focusing on the potential consequences or implications of the problem. This can give them a better sense of what they are specifically dealing with.
- **Define and Analyze the Problem:** In this step, clients will need to figure out what caused the problem, what the problem looks like at this moment and the urgency of addressing the problem. In this step, clients will need to also learn as much as they can about the problem. Be flexible in your approach when helping the client. Do research on the problem. Look at the problem from different perspectives. Evaluate all of the different ways in which the problem could impact them.
- **Generate Potential Solutions:** Brainstorm and come up with as many solutions as possible for the problem. Be creative and don't focus at this point with how feasible the solutions may be. List a number of different options to choose from. This process of generating solutions can also help clients look at the problem from multiple perspectives. Keep in mind that it may be impossible to address all areas of a problem. When this is the case, break the problem down and try to generate solutions for parts of the problem (as opposed to the problem as a whole).

- **Decision-Making:** In this step, evaluate the solutions that came up in step 3. Weigh the short- and long-term pros and cons of each solution. In addition, in this step, start to evaluate how feasible each solution is. That is, how easily can the client implement the solution to the problem?
- **Implement a Solution and Evaluate its Success:** In this final step, choose a solution and implement it. Take action. In choosing a solution, weigh the pros and cons of each potential solution, and it is generally a good idea to start out with a solution that is associated with low risk and that is compatible with the clients' priorities and future goals. Once the solution has been implemented, evaluate how it was and was not successful. If the solution did not completely address the problem, then move back through some of the different stages to address other areas of the problem or pick another solution to implement.

Build, Enhance, or Restore Social Support Networks

Social support is a crucial factor in reducing the impact of trauma. In the case of post trauma and CTS, it is evident that broader relational networks are generally non-functional for a range of reasons and that trusting others and one's environment have been severely compromised, not only through direct violations but also through the failure of designated social structures to prevent, protect and sanction. It is important to encourage the (re)building of social relationships and networks based on what is environmentally possible and appropriate. Not only are such relationships likely to alleviate isolation and reduce time for rumination of anxious or negative thoughts, but they may normalize through shared confirmation of difficulties and perceptions and may create the possibility of collective agency in some instances. Encouraging and assisting clients to build [relational connections](#) is a key goal of intervention.

Providing Advocacy

Providers can advocate for their clients that contribute to their safety and well-being. Advocacy efforts may vary in different settings and can include: empowering the adults to learn how to gain access to other services (e.g., educational, health, shelter, food, sanitation, etc.); identifying a list of organizations that provide different social services or spiritual care; encouraging clients to engage and [support social justice efforts](#) that prevent violence and promote equity, in health, education, employment opportunities, etc.

5 Key Messages to Support Trauma Recovery

1. It is not happening now.
2. You are safe here.
3. What's inside you (thoughts, feelings, dreams, impulses) cannot harm you or others.
4. You are good. Whatever you have had to do to survive, you are a good, strong person who can contribute to your community.
5. You have a future.

Additional Resources

- If you're experiencing emotional distress related to community violence, you can contact the Substance Abuse and Mental Health Services Administration (SAMHSA) Disaster Distress Helpline at 800-985-5990 or text TalkWithUs to 66746 for support and counseling.

- Handouts for Survivors of Trauma
https://www.ptsd.va.gov/professional/treat/type/PFA/VA_NCPTSD_ALL_508.pdf