

In 2020, Community Prevention Initiative (CPI) hosted the *Trauma-Informed Care: Research to Practice* virtual conference for California’s prevention community. This **5 Bites** brief offers five “sound bites” from the *Individual and Collective Trauma* presentation by Elizabeth Waetzig, JD (Change Matrix). Each sound bite is explained and unpacked for quick learning.

What is a trauma-informed approach? Why is it necessary? How can we bring a trauma-informed approach to our work with individuals, communities, youth, families?

For a deeper dive, [watch Elizabeth’s presentation](#) or [access recordings of all sessions](#)

*The ideas, information, and opinions in this “5 Bites” brief derive from Elizabeth Waetzig’s presentation. They are reproduced here as an alternative learning modality, with appreciation to Elizabeth.*



**“We really have to understand that (trauma) is experienced by an individual or a group in a way that they see it. They decide if it’s a traumatic event for themselves.”**

Trauma is defined as an event or series of events that is experienced by an individual as harmful or life threatening and that has lasting adverse effects on the individual.<sup>1</sup> The “experience” component can be the most difficult to understand. With trauma, what is meaningful is the individual’s or group’s own *experience*. Their experience—and not the provider or the system—defines whether or not something is traumatic.

*Individual trauma* is complex: events impact people differently, even within the same community, culture, or family. However, our culture plays an important role in determining whether we experience something as traumatic. If we understand the ways that individual trauma is shaped by collective, community, and intergenerational trauma, we can design more responsive policies and practices.

Learn more about trauma-informed human services: [Q & A Trauma-Informed Services](#) (Administration for Children and Families)



**“You can see the impact of (community) trauma in the cultural environment, in the social environment, as well as in the built environment.”**

*Community trauma* is not *just* the trauma experienced by a group of individuals. Community trauma is reflected in three specific areas: people, place, and equitable opportunity. People in communities impacted by collective trauma experience a decrease in social relationships and a loss of norms. The natural or built environment (or place) may be unhealthy, lack green spaces, and have crumbling infrastructure. There is a lack of equitable opportunity and a disinvestment of resources. Groups who have experienced this community trauma see more community violence and have less ability, trust, or resources to come together and create positive change.

Learn more about community trauma: [Adverse Community Experiences and Resilience: A Framework for Addressing and Preventing Community Trauma](#) (Prevention Institute and Kaiser Permanente)

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**“When we look at trauma from an individual perspective, what we don’t get is the context. What we don’t get is the family, the group, the identity, the multigenerational impact of trauma that really shows up and aggravates individual trauma, compounds it.”**

*Intergenerational trauma* is a form of collective trauma with three components: a traumatic event, experienced by a group, with multigenerational effects. The Holocaust, slavery, internment, and the theft of land from Indigenous nations are just a few examples of events that have produced intergenerational trauma. Trauma can be passed down through generations at a cellular level, as well as through family and parenting practices at the social level. When adults have experienced trauma, it can make it harder for them to provide care, create a sense of safety, and promote resilience for their children.

Learn more about historical or intergenerational trauma: [The Role of Prevention in a Trauma-Informed Approach to Wellness \(CPI\)](#)

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**“There’s a direct line between the system racism and racial narratives that we’ve been living with and people’s health outcomes.”**

*Racism and race-based trauma* impact not only the emotional wellbeing, but also the physical wellbeing, of Black, Indigenous, and People of Color (BIPOC). Systemic racism—including redlining policies, the school-to-prison pipeline, and unequal treatment of the crack cocaine and opioid epidemics—influences the way people live and the opportunities they have. This racism “still lives inside of people, inside of communities, and between communities—and in the fabric of our systems.” Repeated experiences of racism and discrimination, adversity, and marginalization also contribute to early aging and health deterioration, and even increased hospitalizations and death from COVID-19. <sup>ii, iii</sup>

Learn more about [Racial Trauma](#) (Mental Health America)

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**“(It’s so difficult) for folks who have been traumatized by systems to trust systems to provide help.”**

Trustworthiness is a central tenet of a trauma-informed approach. However, people who have been traumatized or marginalized by systems are unlikely to easily trust systems to help, not harm. In order to be trauma-informed, a provider, agency, or system must be aware of the widespread impacts of trauma and paths to healing, and it must recognize and respond to signs of trauma through policy, procedure, and practice. A trauma-informed approach in systems of care is family driven, youth guided, and culturally responsive. For prevention practitioners, that includes learning about and being responsive to the community’s experience.

Take a deeper dive into the “how” of trauma-informed services in Elizabeth’s second presentation: [Delivering Trauma-Informed Services Through a Culturally Responsive Lens](#).

<sup>i</sup>Substance Abuse and Mental Health Services Administration. SAMHSA’s Concept of Trauma and Guidance for a Trauma-Informed Approach. HHS Publication No. (SMA) 14-4884. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2014. <https://store.samhsa.gov/product/SAMHSA-s-Concept-of-Trauma-and-Guidance-for-a-Trauma-Informed-Approach/SMA14-4884>

<sup>ii</sup>Marshall, W. F. Coronavirus infection by race: What’s behind the health disparities? Mayo Clinic. <https://www.mayoclinic.org/diseases-conditions/coronavirus/expert-answers/coronavirus-infection-by-race/faq-20488802>

<sup>iii</sup>Wakeel, F., Njoku, A. (2 February 2021). Application of the Weathering Framework: Intersection of Racism, Stigma, and COVID-19 as a Stressful Life Event among African Americans. *Healthcare* (2): 145. <https://pubmed.ncbi.nlm.nih.gov/33540498/>