

**Northwest Law & Mental Health Conference
Continuing Education Test Form**

First, Do No Harm: A Trauma Informed Approach

*Session Speakers #7
March, 2018*

Summary

Participants will learn how trauma, adversity, and toxic stress impact our ability to engage and provide effective practices. We will review the principles of trauma informed care and identify how our systems (criminal justice, child welfare, mental health) often retraumatize the service users preventing them from being able to attend and/or engage in appointments, proceedings, and follow through. The audience will also consider the impact of toxic stress on providers. Throughout the presentation, we will be noting common "hotspots" in justice proceedings and strategies to reduce retraumatization. We will also intersect procedural fairness and trauma informed care.

Learning Objectives

- Define Trauma Informed Care and Purpose.
- Identify situations that could re-traumatize the service user.
- Define the principles of Trauma Informed Care and definition of NEAR science.
- Identify concrete ways to be more trauma informed.



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Director of Trauma Informed Oregon

Test Process

Download and print this test form.

Watch the 90 minute video, *First, Do No Harm: A Trauma Informed Approach*, with Mandy Davis.

Two additional items to support Dr. Davis' presentation, a video and a link to Dr. Davis' Session Handout, are on the conference website.

Complete the ten question test on page three of this form.

You must score 70% or better to receive credit for this test. If your score is lower than 70%, we will send you a message via email and you may retake the test.

To receive 1.25 clinical social work continuing education credit, accredited through the NASW of Oregon, return the completed form and finished test by postal mail with a check for \$20 to:

Northwest Law & Mental Health Conference
PO Box 3641 Portland, Oregon 97208

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Signature

Date

TEST QUESTIONS

1. What does SAMHSA's Concept of Trauma actively resist?

- A Trauma
- B Adoption by faith-based treatment providers
- C Re-traumatization
- D Exposure to critical academic review

2. What are some causes of trauma?

- A Abuse
- B Racism
- C Unexpected, sudden death
- D All of the above

3. What % of 0-17 experienced or witnessed maltreatment, bullying, or assault within a year?

- A 20%
- B 40%
- C 60%
- D 80%

4. How likely will incarcerated women report a history of childhood sexual or physical abuse?

- A Less likely
- B More likely
- C 20% less likely
- D 20% more likely

5. What percentage of of males incarcerated in NJ had history of traumas?

- A 14%
- B 49%
- C 79.8%
- D 97.2%

6. How much higher do native youth experience trauma than their non-native peers?

- A 0.7 times the rate
- B 1.1 times the rate
- C 2.5 times the rate
- D 8.9 times the rate

7. How many social workers experience vicarious trauma?

- A Because of extensive training, almost none.
- B 24%
- C 34%
- D 70%

8. What's a better TIC way to say "Did you take your pills today?"

- A "I see you have left your pills on the table."
- B "Are the medications your doctor prescribed working well for you?"
- C "You know what your mother said about not taking your pills, right?"
- D "Can I mixed those pills with applesauce?"

9. What percentage of law enforcement professionals were willing to seek personal counseling as a result of vicarious trauma?

- A 15%
- B 22%
- C 28%
- D 33%

10. What does epigenetics do for Trauma Informed Care?

- A Understands the impact of toxic stress across generations.
- B Alters the genome to increase resilience.
- C Will inform advanced surgical procedures in near future.
- D Used to map trauma for individuals & distinct groups.

ANSWER FORM - circle your answer

- | | | | | |
|-----|---|---|---|---|
| 1. | A | B | C | D |
| 2. | A | B | C | D |
| 3. | A | B | C | D |
| 4. | A | B | C | D |
| 5. | A | B | C | D |
| 6. | A | B | C | D |
| 7. | A | B | C | D |
| 8. | A | B | C | D |
| 9. | A | B | C | D |
| 10. | A | B | C | D |