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The following key principles of trauma-informed care should serve as a guide for all health care providers and staff:

Establish the physical and emotional safety of patients and staff; Build trust between providers and patients; Recognize the signs and symptoms of trauma exposure

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on physical and mental health; Promote patient-centered, evidence-based care

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Trustworthiness & transparency; Peer support; Collaboration & mutuality; Empowerment & choice; Cultural, historical & gender issues; Adopting a trauma-informed approach is not accomplished through any single particular technique or checklist.

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The ability to tolerate emotion (self-soothe; regulate affect) is a primary task of treatment, and accounts for the importance of Phase I. Attempts to 'process' trauma in the absence of ability to self-regulate can precipitate overwhelm and re-traumatisation. 'Processing' of complex trauma is a Stage II task and

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Should not be encouraged in the absence of the foundational self-regulatory work of Phase I.

Best practice principles for complex trauma client work

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Relevant to Counselor Training in
Trauma - Informed Treatment Settings

179 Exhibit 2.2-2: Guidelines for Training
in Mental Health Interventions for

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To Symptoms, Evaluation
Trauma..... 183 Exposed Populations 180
Exhibit 2.2-3: Trauma-Informed
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terminology and application may be
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Trauma-focused cognitive-behavioral therapy (TFCBT) is a type of CBT developed specifically to treat symptoms

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related to trauma in children (Cohen, Mannarino, & Kinnish, 2017 (Briere & Scott, 2015)).

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