Building Resilience

A Community Response to Situational Trauma

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What happened in the first place?

• Where were you when...?
• Trigger warning...
  • Sensitivity to reactions
  • But...
• One parent’s narrative
Key Strategies for Building Resilience

- Unique resource in OSU’s MFT program and the CFS
- Parents and teachers are first line of defense
  - Security and stability
  - Must be grounded themselves
- First response for the CFS
  - Meet with parents/teachers stabilize concerned/dysregulated
  - Allow for space to tell their story
  - Help children become grounded
    - 4, 3, 2, 1
    - TFCBT informed
Key Strategies for Building Resilience

- Triage with children
  - Enhance sense of connection to others
  - Help identify, label, and express emotions
  - Facilitate opportunities for regain sense of mastery and control
  - Make meaning of the crisis/trauma/stress
  - Resume age-appropriate roles and activities
    - Natural adaptive/resilient process

- Later...
  - Key eye out for symptom emergence
  - Preoccupation, hypervigilance, and avoidance
    - Interference with daily functioning
  - Be aware of subtle stimuli that can reconnect synapses
Key Strategies: *Lessons Learned

- Importance of parents as a resource
  - Often overlooked
    - We have tendency to want to help; our unresolved issues may retraumatize
  - Devil in the details
    - Not all parents equipped the same; kids are different (internalize/externalize)
  - Complex trauma; compounding process

- Ongoing process of recall, re-exposure (news stories, homecoming parade 2016, other transitions or traumas)

- *Overarching need for system plans for responding to crisis and trauma
  - List of contacts/resources/network
  - Practice/rehearse action plan
    - Who calls who/does what
  - Community action team for mental health first aid (CAPE; via OCES)