



UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT *of* CALIFORNIA
HON. LARRY ALAN BURNS, CHIEF JUDGE
JOHN MORRILL, CLERK OF COURT

POWER Act: Pro Bono Opportunities to Help Victims of Domestic Violence

**MCLE Practice Materials
August 20, 2020**

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Helpful Links and Resources from Dr. Ramona Probasco

- Domestic Violence Facts
 - <https://drramona.com/domestic-violence-facts>
- Hotlines and Resources
 - <https://drramona.com/hotlines-and-resources/>
- Document the Abuse: Empowering victims of intimate partner violence to Document the Abuse using an Evidentiary Abuse Affidavit
 - <https://documenttheabuse.com>
- When Dad Hurts Mom: Helping Your Children Heal the Wounds of Witnessing Abuse, by Lundy Bancroft
 - <https://www.amazon.com/When-Dad-Hurts-Mom-Witnessing/dp/0425200310>
- Not to People Like Us: Hidden Abuse in Upscale Marriages, by Susan Weitzman
 - https://www.amazon.com/dp/0465090745/ref=rdr_ext_tmb
- Why Does He Do That?: Inside the Minds of Angry and Controlling Men, by Lundy Bancroft
 - <https://www.amazon.com/Why-Does-He-That-Controlling/dp/0425191656>
- Healing Well and Living Free from an Abusive Relationship: from Victim to Survivor to Overcomer, by Dr. Ramona Probasco
 - <https://www.amazon.com/Healing-Well-Living-Abusive-Relationship/dp/080072965X>

Abuse Evaluation Form

Directions: Circle the words or phrases that you have experienced in your relationship even if it happened only once.

Physical Abuse

The misuse of size, strength or presence to control or hurt someone.

- Pushing
- Shoving
- Backhanding
- Biting
- Strangling
- Punching
- Burning
- Hair pulling
- Kneeling
- Smothering
- Grabbing
- Kicking
- Twisting arms
- Tearing clothes
- Clenching fist as if to hit
- Stab or cut with knife
- Standing or sitting on
- Smacking repeatedly or a single slap leaving a mark
- Banging your head or pinning you against a wall or the floor
- Holding or carrying you against your will
- Trying to hit you with a car or pushing you out of a car
- Driving recklessly in order to scare
- Throwing objects
- Breaking furniture
- Sweeping objects off a table or dresser
- Breaking windshield or windows
- Intentionally breaking your personal items
- Punching or kicking a wall or door
- Blocking a doorway so you cannot leave
- Standing behind your car so you cannot drive away
- Taking your keys so you cannot drive away
- Detaching or disabling phone to prevent a call
- Locking you in or out of the house, in a closet or other confined space
- Abusing or killing a pet

Abuse Evaluation Form**Verbal/Emotional Abuse**

The misuse of words or voice to control or hurt another person.

- Consistently yelling
- Name calling
- Blackmail
- Threatening to abuse, divorce, report to welfare, kill, commit suicide
- Threatening to hurt kids or to take them away or keep them from your family
- Accusations of infidelity
- Having affairs
- Checking up on you, following or stalking
- Controlling who you see, talk to, what you read
- Making you drop legitimate charges
- Limiting outside involvement
- Questioning paternity
- Insults/put downs of yourself or your friends
- Humiliating
- Laughing at or making fun of
- Criticizing appearance
- Preventing attending school or work
- Manipulating
- Lying
- Minimizing your concerns
- Discounting
- Saying you caused their abusive behavior
- Using jealousy to justify abusive actions
- Withdrawal and silence
- Displaying or brandishing weapons
- Coercing you to do something illegal
- Making you feel guilty about the children, mistakes, housekeeping, etc.
- Making you feel afraid; intimidating with looks, actions, or gestures
- Playing mind games
- Denying that the abuse happened
- Treating you like a servant
- Being the only one to define roles in the relationship

Abuse Evaluation Form

Spiritual Abuse (a form of Emotional Abuse)

The misuse and misapplication of religious values or teachings to control or hurt another person.

- Control-oriented leadership, in effect, lording it over you
- Demanding you to be submissive with unquestioning loyalty and obedience
- Not allowing you to question their decisions
- Using guilt, fear, intimidation and Bible verses out of context to control you
- Claiming that questioning them is akin to questioning God

Financial Abuse

The misuse of knowledge, position and relationship to take advantage of someone financially.

- Restricting access to family funds
- Detailed tracking of your money use
- Making you ask for money
- Grilling you for information about your activities and money use
- Taking money, checkbook, credit or bank cards
- Wasting family money on drugs or alcohol
- Refusing to keep a job or to let you work
- Asset fraud
- Lying about how much money they have or do not have
- Not letting you know about family income
- Giving you an allowance
- Gambling family funds

Sexual Abuse

A sexual act committed against someone without that person's freely given consent. Luring, tricking, trapping, coercing or bribing anyone with less maturity or power into a sexual experience.

- Sexually stimulating or being stimulated by anyone disempowered by age, size, handicap or situation. This stimulation could be physical, verbal, or visual including discussing or describing, watching, revealing, or fondling
- Derogatory name calling
- Deliberately causing unwanted physical pain during sex
- Deliberately passing on sexual diseases or infections
- Using objects, toys, or other items (e.g. baby oil or lubricants) without your consent and to cause you pain or humiliation

Abuse Evaluation Form

- Pornography use in any form
- Forcing participation in acting out fantasies or scenes from pornography
- Insisting on you watching pornography
- Refusing to use condoms or to allow you to use other forms of birth control
- Forcing an abortion
- Forcing sex, even within marriage
- Forcing sex with others
- Forcing oral or anal sex
- Indecent exposure
- Repeatedly withholding sex within marriage
- Pouting if reasonably declined sex
- Hitting while pregnant
- Rape
- Incest

October 01, 2014

Establishing a Trauma-Informed Lawyer-Client Relationship

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This is the second article in a series focused on advocating for children and families impacted by trauma. The first article, [“Understanding Trauma and its Impact on Child Victims.”](#) by Eva Klain, appeared in the September 2014. issue.

As a lawyer for youth, you know many of your clients have experienced trauma, particularly those involved in the child welfare or juvenile justice systems. Trauma can affect the most fundamental aspects of the attorney-client relationship.

Even though most lawyers are not mental health professionals, a working understanding of trauma, including its origins and its impacts, can be helpful in anticipating and responding to trauma's effects as they surface in our work with clients.

This two-part article presents strategies for building stronger, more trauma-informed attorney-client relationships with youth.

Why focus on the attorney-client relationship?

- Client trust and engagement. A client's trauma history can make it difficult to build trust and actively involve the client with her legal case. By learning to build relationships that better respond to the needs of youth who have experienced trauma, you can improve client engagement and fulfill your mandate as the child's representative.¹

- Attorney-client interactions. Childhood trauma can affect a person's cognitive and psychosocial development, including how one thinks, processes information, and communicates with others. Trauma thus impacts basic attorney-client interactions, such as interviewing, explaining case developments, and counseling and advising clients on case-related decisions.
- Modeling positive relationships. Youth who have experienced trauma, particularly in the context of interpersonal relationships, often expect new relationships to reinforce negative beliefs they have developed about themselves and others; for example, that they are inherently unlikeable or “bad,” or that adults are untrustworthy and will inevitably hurt them. Many experts agree that one of the best paths to healing for traumatized youth can be to develop positive, safe relationships.² Like all professionals who work with these youth, lawyers can either aid in the client's healing or magnify a client's vulnerabilities.

Not all court-involved youth have experienced trauma, and reactions to trauma vary among those who have. Some youth experience few or no long-term effects of trauma. Drawing on the public health principle of “universal precaution,” we advocate adopting a trauma-informed approach to all client relationships, seeking, at minimum, to “do no harm.” At best, lawyers can communicate with and counsel their clients more effectively, achieve more authentically client-directed representation, and help clients move beyond their trauma to healthy developmental paths.³

Challenges of Trauma-Informed Lawyering

Childhood trauma affects how a young person perceives and interacts with the world around her. Trauma's impact is not only psychological, but also physiological: children's brains, incomplete at birth, develop in ways that respond to the child's experiences with traumatic stress.⁴ Clients who experience these responses may think and behave in ways that make it more challenging for the lawyer to build trust, communicate effectively, and engage the client in making decisions about her legal case.

This section draws on knowledge from the mental health and medical fields to describe common effects of childhood trauma. Keep in mind that trauma's impact on a young person varies, depending on the type of trauma experienced, whether the trauma was isolated or repeated, the age at which the trauma was experienced, the young person's gender and cultural identity, and the caregiving and social supports available to the young person before and after the traumatic

events.⁵ We encourage you to consult other resources and mental health professionals working directly with your clients to better understand the impact of a client's experiences with trauma.

Building Relationships

Impaired sense of safety. Traumatized youth often have an impaired sense of safety. Having been exposed to acute or chronic threat—such as maltreatment, neglect, or community or domestic violence—they may perceive even neutral environments as threatening, and their brains are primed to go into “survival” mode. Although youths' survival-oriented behaviors are natural and healthy in the face of real danger, they become maladaptive in nonthreatening social contexts.⁶ These behaviors might be how the youth functions day in and day out (i.e., their baseline level of functioning), or youth might exhibit them when something, consciously or unconsciously, reminds them of a past trauma. This latter phenomenon is known as triggering, and the thing that prompted the survival response is often referred to as a trauma “trigger.”⁷

Youths' survival behaviors vary. Youth may become “hyperaroused,” a state of heightened energy and alertness to threat. Clients who are hyperaroused might appear jumpy, have frequent outbursts, or become confrontational or aggressive.⁸ Another common response is “dissociation”—mentally shutting down, becoming numb, or having “gone elsewhere.” Youth may also deal with perceived threats by altering their behavior and daily patterns to avoid reminders of past trauma.⁹

Dissociation can be harder to recognize than hyperarousal but can still create challenges when building attorney-client relationships. For example, a dissociated client may seem indifferent to the legal proceedings or to the lawyer's efforts at counseling. Avoidance may lead a client to start skipping appointments, causing frustration and logistical challenges for the lawyer.

Controlling emotions. Children exposed to trauma can have trouble rolling their emotions. The parts of their brains that remain alert to threat have been constantly turned on, while they may have had less opportunity to develop self-regulation skills. They often feel overwhelmed by their emotions and simultaneously lack tools for calming themselves down. To others, they can appear out of control or overly impulsive.¹⁰

Lack of trust. Building trust is a formidable task, particularly with youth who have been exposed to violence or trauma in the context of intimate relationships.¹¹ These youth have learned that adults cannot keep them safe, do not attend to their needs, and may harm them. They are more likely to be hyperalert in social interactions and to misread facial or verbal cues as negative.¹² When building new relationships, youth who have experienced interpersonal trauma may try to push the

adult away or provoke an adverse response. The youth may be modeling how she has been treated in past relationships or trying to achieve control by bringing about negative treatment that she considers inevitable.¹³ Clients may engage in behaviors to “test” whether you will ultimately disappoint and reject them, as other adults have done.

Communication and Counseling

Information processing. Youth impacted by trauma may have trouble with information processing and receptive language. Primarily focused on safety and survival, they may miss much of what is said to them, either because they are on the lookout for threat or because they are dissociated.¹⁴ A client may repeatedly glance at the door, jump each time the phone rings, or seemingly daydream instead of following your questions and explanations.

Impaired self-expression. Clients may also have trouble expressing themselves. Dr. Susan Craig explains that instability in early childhood can impair the development of sequential memory, whereby children learn to organize and remember information and experience in a linear fashion.¹⁵ Further, youth who are neglected or maltreated often have less exposure to verbal language in their early relationships. In particular, talk tends to be instrumental, rather than focused on expressing feelings and needs.¹⁶ These deficits can make it harder for youth to construct clear narratives or verbally express their emotions.¹⁷

Youth may also have grown up in homes where secrets are common and disclosure is discouraged, inhibiting the youth's comfort speaking up about experiences. Overall, a client's experiences with trauma can create many barriers to getting a smooth or reliable narrative from the client. Instead, lawyers may find that clients' narratives involve long, confusing discourses, include gaps in recall, or appear split off from emotion.¹⁸

Difficulty sharing trauma histories. Challenges arise when clients are asked to discuss matters directly relating to their trauma histories. Youth may be hesitant to share their experiences because adults have told them not to talk about their traumas or, when the youth did, shut them down or rejected their accounts as untrue. Clients may also keep quiet out of shame, feeling they bear responsibility or “deserved it,” or out of loyalty to family or others involved in their traumas.¹⁹

Decision making. Trauma's cognitive impacts may also affect how youth approach case-related decision making. Children exposed to violence may have trouble understanding cause and effect, having been subjected to harm without any apparent cause. As Dr. Craig explains, because their

own behavior has led to unpredictable responses from others, these youth may not see themselves as capable of impacting outcomes and may struggle with predicting consequences.²⁰

Building Better Attorney-Client Relationships

A strong working relationship is key to effectively represent youth who have experienced trauma. In addition to facilitating traditional lawyering functions, discussed further in part two of this article, building strong relationships with traumatized clients has value in and of itself. While maintaining perspective about your relative importance and place in your clients' lives, also recognize that all positive relationships can be restorative, allowing a young person gradually to change negative beliefs she has developed about herself, how she can expect to be treated by others, or what is possible for her.²¹

Adopting a Trauma-Informed “Stance”

Trauma-informed lawyering is not a step-by-step formula. In part, it rests upon characteristics intrinsic to all positive human relationships: empathy, responsive listening, restraint from judgment, demonstration of authentic care and concern. At the same time, lawyers should incorporate changes into their practice that respond to the vulnerabilities common among traumatized youth. Drawing on a framework recommended by Dr. John Sprinson, we suggest lawyers begin by adopting a trauma-informed “stance”: a set of principles that inform your interactions with your client at all times. These principles seek to avoid exacerbating the client's impaired sense of safety, difficulty with trust, and negative beliefs about herself and her relationships with others.

The basic elements of a trauma-informed stance are:

Transparency – Be fully transparent with the client about her legal case, in age-appropriate terms. Transparency promotes trust and minimizes the youth's feelings of powerlessness—a common trauma “trigger”—in the face of what is likely a bewildering or overwhelming process. Transparency also helps distinguish your relationship from past relationships the client may have had that were characterized by secrets or mystification.

Predictability – Repeatedly preview for the client what is to come, both in the attorney-client relationship and in the broader legal process. For example, regularly preview upcoming case milestones, decisions the client will have to make, and events the client will need to attend, such as court hearings or meetings. Create routines with the client, such as always holding meetings on the

same day or in the same place. Because of their heightened alertness to threat, youth who have experienced trauma often have difficulty with the unfamiliar or unexpected, whereas predictability and routine can help them feel safe.

Client Control – Give clients a voice in decisions that affect them, in a way that is purposeful and exceeds baseline ethical requirements. Actively empower the client to exercise her agency by validating the client's strengths and helping her develop decision-making and related life skills. These efforts counteract feelings of powerlessness caused by past traumas and can also provide a sense of mastery, which research shows is critical for healthy development post trauma.

Reliability – Be reliable, always following through on responsibilities, commitments, and appointments. Never make a promise that you might break. Commitment to this principle should go beyond basic requirements of professionalism. A youth who has experienced trauma, particularly in the context of relationships, often expects betrayal and disappointment from others. Even minor breaks in trust reinforce the client's belief that adults are untrustworthy and potentially dangerous.

Proactive Support – Anticipate issues that may arise during your representation and in the legal case that may be distressing or destabilizing for your client. Consult with mental health professionals and other adults in the client's life to identify situations that may be stressful or even “triggering,” as well as supports that will be available to your client when needed.

Patience – Building connections takes time. Despite your best intentions, missteps with the client are certain. You will likely disappoint the client, and the client may blow up at you or push you away. Remain patient, present, and available to the client. This shows that you will not desert her despite inevitable bumps in the relationship or her efforts to “test” you.

Role Definition and Boundaries

Roles. Adopting a trauma-informed “stance” creates the background conditions for strong client relationships. It is also crucial to have clear conversations with the client about your role. This maximizes predictability and provides a baseline against which the client can evaluate your reliability. We suggest covering the following topics as soon as possible with the client. Note that it may be necessary to revisit conversations about your role repeatedly during the representation.

- Explain your role, services you do and do not provide, and what you can and cannot expect to accomplish for the client.

- Clarify how you differ from other adults in the client's life and in the legal case.
- Explain the client's role and which decisions are within her control. If you represent the client's "best interests," be clear early on about when you might need to advocate against your client's wishes to avoid "blindsiding" the client and creating a sense of betrayal.
- In client-driven representation, emphasize the client's power and agency. Many young children have trouble understanding that they, not the adult lawyer, have decision-making power. This tendency can be exacerbated in youth who respond to trauma by being excessively compliant with adults, either out of fear that missteps might yield retribution or as symptomatic of a dissociative response to the trauma. Clients who respond to trauma by acting out versus shutting down are often seeking power and recognition. Offering them an alternate way to be seen and heard and have their voice respected in the attorney-client relationship may disrupt their internal belief that acting out and aggression are the only means to obtain status and recognition.
- Explain confidentiality and its limits.
- Give the client reliable information about your schedule, availability, and how to contact you. You do not need to be available at all times to be "reliable;" it is better to have scheduled check-ins that you are able to keep.
- Explore the client's assumptions about the attorney-client relationship. Has the client had prior attorneys? What were those relationships like? What worked well, and what didn't? By asking the client to express her opinions about working with an attorney, you can better anticipate bumps in your relationship and avoid creating a dynamic that the client feels powerless to alter in the future.²²

Boundaries. Role definition is crucial because it helps establish boundaries in the attorney-client relationship. Many traumatized youth have experienced grievous violations of their personal boundaries, or have grown up in environments where the lines between children and adults are

blurred.²³ Establishing clear boundaries creates predictability and can help the youth feel safe. It is especially important not to create a false sense that you can rescue your client or her family, or to foster a dependence on you that will become another loss to your client when your role in her life is over. Recall that your journey with the client has a beginning, middle, and an end. Preview that end from the beginning, and keep it alive throughout the relationship, as a conscious recognition of the limits of your availability.

Repairing Ruptures. While building strong client relationships, recognize that ruptures in the relationship are inevitable. Creating opportunities to repair those ruptures is part of strengthening the relationship with the client.²⁴ Despite best intentions, you risk doing or saying something that breaks the client's trust or triggers survival responses. Clients may also try to push you away, or transfer to you feelings, such as anger or frustration, that they cannot bear. If you can stay calm and committed, or bear something the client finds unmanageable, the client benefits from observing that capacity in another.

By remaining engaged and reliable, you disprove the client's belief that you will abandon her or that her feelings are "too much" to handle.²⁵ This also shows respect for your client's adaptive behaviors by recognizing that such adaptations were born out of self-preservation. It is not your role as lawyer to suggest the client abandon these behaviors for your sake.

Preparing for and Responding to Triggering

Among the more severe trauma-related reactions you might encounter over the course of the representation is "triggering," which occurs when something in the youth's environment activates a memory of the trauma, evoking an intense and immediate reaction from the youth.²⁶ As revisiting content related to a specific traumatic event can be triggering, so can the effects of a traumatic event. For example, the emotional state of hyperarousal, which the client may have felt while experiencing the trauma, can itself be a trigger.²⁷ Common triggers include unpredictability; transition; loss of control; feelings of vulnerability, loneliness, or rejection; sensory overload; confrontation; embarrassment or shame; intimacy; and even positive attention.²⁸ While most lawyers are not trained to judge in a clinical sense whether a client is being "triggered," the following reactions can be signs that a client may be triggered:²⁹

1 Jumping up or lashing out

- 2 Difficulty tracking the lawyer's questions
- 3 Difficulty making oneself clearly understood (e.g., a long tangled narrative)
- 4 The client gives a brief, clipped narrative, or claims not to remember.
- 5 The client shuts down, develops a flat affect, becomes lost in the conversation, can't remember what she was talking about, or appears to have "gone somewhere else."
- 6 Regressive behaviors (e.g., thumbsucking)
- 7 With the client's consent, consult mental health providers and other adults in your client's life to understand what things are known to trigger your client and how your client reacts (and subsequently recovers) when triggered. Ideally, each client who comes into contact with the legal system should receive appropriate assessments of her present level of functioning, trauma history, needs, and strengths, and have access to coordinated services as needed.

In addition to seeking individualized guidance, the following roadmap can guide your response if you are with the client when she is in a triggered state.³⁰ These recommendations also apply when a client is in a lesser state of emotional distress, and are useful when you are unsure if the client is being "triggered."

- Trust your ability to read the client. If it appears your client is becoming distressed, address that distress instead of simply moving forward.
- When someone's "survival brain" has been triggered, that turns off the prefrontal cortex—the brain's reasoning center. Dr. Joyce Dorado uses the analogy that the "rider is off the horse." Before doing anything else to ameliorate the situation, get the rider back on the horse. Do nothing to startle the young person; do not be confrontational and do not escalate the situation. Do what you can to help the youth feel safe and in control. Give gentle reminders that the youth is safe, you are here, and you will wait for her to tell you when she is ready. Once the

rider is back “on the horse,” you can ask what led to her distress.³¹

- Tell the client her reactions to trauma are normal. There is not something “wrong” with her.
- Tell the client you will watch for signs that she is becoming upset in the future, to help her anticipate and ward off those moments. In so doing, you counter past relationships the youth may have had with adults who were not attuned to her needs.
- Prepare for the next time you are going to confront the trigger. Thank the client for letting you know she was uncomfortable, and tell her she can let you know next time she is getting upset. If it will be necessary to confront the trigger again during the legal case discuss this with the client, as well as how it fits with your efforts to help her attain her goals.
- Ensure the client has trusted adult(s) to follow up with as needed.
- If your client is willing to participate, link her to trauma-focused therapy that can help her develop strategies for regulating emotions. These therapies often rely on parent or caregiver involvement. You can also identify caring adults who may be willing to help the client build these critical emotion-regulation skills.

Conclusion

To create a solid foundation for working effectively with traumatized youth, lawyers should focus on building strong attorney-client relationships that respond to common effects of childhood trauma. Part Two of this article will address strategies for interviewing and counseling traumatized youth and talking with them directly about their trauma experiences.

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reviewing our draft recommendations for trauma-informed legal services. Gena developed a trauma training for attorneys in the San Francisco Bay Area and also invested considerable time discussing and reviewing our draft recommendations. We also thank Susan Craig, PhD, Frank Vandervort, JD, and Jessica Feierman, JD, for their invaluable feedback.

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Endnotes

1. This article focuses on the traditional lawyer-client role; however, the recommendations also apply to lawyers who practice in jurisdictions where their role is a modified lawyer role requiring representation of the child client's "best interests."
2. Vandervort, Frank E., Jim Henry & Mark Sloane. *Building Resilience in Foster Children: The Role of the Child's Advocate*, 2012, 11; Cole, Susan F., et al. *Helping Traumatized Children Learn: Supportive School Environments for Children Traumatized by Family Violence*, 2005, 38-39.
3. Attorneys familiar with guidance on lawyering for children may recognize that some of our recommendations mirror that guidance. Some proposals may already be considered good practice in light of considerations about child and adolescent development, the context in which lawyers and/or other public officials find themselves involved in the private sphere of the family, or attorney ethics requirements. We restate them here to introduce trauma as another motivation for those practices.
4. Jack P. Shonkoff et al. *The Lifelong Effects of Early Childhood Adversity and Toxic Stress*, 2012, e235-38; American Academy of Pediatrics. *Helping Foster and Adoptive Families Cope with Trauma*, 2013, 2-4 ("AAP").
5. Vandervort et al., 2012, 3; Bassuk, Ellen L., Kristina Konnath & Katherine T. Volk. *Understanding Traumatic Stress in Children*, 2006, 3.
6. AAP, 2013, 8; Craig, Susan E. *Reaching and Teaching Children Who Hurt*, 2008, 98-99; Kinniburgh, Kristine et al. "Attachment, Self-Regulation, and Competency." *Psychiatric Annals*, 2005, 427-28.

7. Craig, Susan E. *Reaching and Teaching Children Who Hurt*, 2008, 100.
8. AAP, 2013, 8; Perry, Bruce D. *Effects of Traumatic Events on Children: An Introduction*, 2003, 2-5; Vandervort, 2012, 4.
9. AAP, 2013, 8; Perry, 2003, 7-8; Vandervort et al., 2012, 4.
10. AAP, 2013, 12; Craig, 2008, 98-99; Kinniburgh et al., 2005, 427-28.
11. Craig, 2008, 96.
12. Kinniburgh et al., 2005, 428.
13. Craig, 2008, 90; Sprinson, John & Ken Berrick. *Unconditional Care: Relationship-Based, Behavioral Intervention with Vulnerable Children and Families*, 2010, 58-59.
14. Cole et al., 2005, 21-24; Craig, 2008, 51-52.
15. Craig, 2008, 26-27.
16. Cole et al., 2005, 25.
17. Craig, 2008, 47-48.
18. Dr. John Sprinson, *Training at Legal Services for Children*, Feb. 8, 2013 (on file with authors) (“Sprinson Training 2/8/13”).
19. Sprinson Training 2/8/13.
20. Craig, 2008, 22-24.
21. As Sprinson and Berrick explain, “Children . . . are actively construing their experience and working to construct images of what drives the behavior of others, of who they are in relation to others, and of what they can expect in the future. . . . [A] child who has suffered a pattern of sustained hurtful early experiences such as loss, neglect, or abuse will have a way of representing the self and the world that is consistent with or reflects that experience. She may believe she is bad, damaged, or in some way deserving of this treatment and will expect the treatment to continue. . . .

These ideas are not easy to revise in the face of new experience and are especially resistant to alteration by language.” Thus, adults working with these youth should “work to provide the child with experiences in relationships that are different from those encountered in past relationships and to support the child in very gradually constructing a new model of how these relationships might unfold.” Sprinson & Berrick, 2010, 57-59.

22. Sprinson Training 2/8/13.

23. Sprinson & Berrick at 7; Craig, 2008, 90.

24. Sprinson & Berrick, 2010, 47.

25. Sprinson Training 2/8/13.

26. Craig, 2008, 100-01.

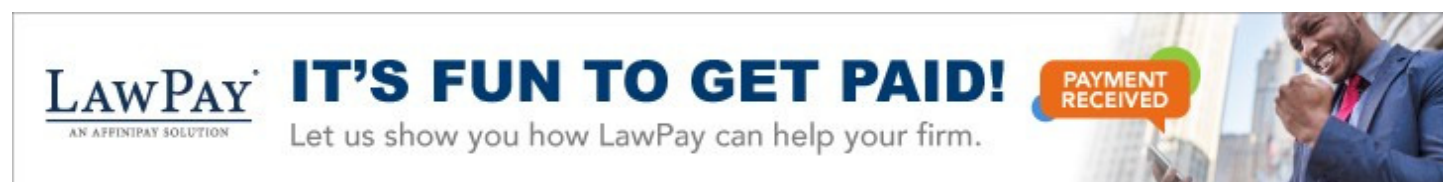
27. Ibid.

28. Dorado, Joyce. Healthy Environments and Response to Trauma in Schools (HEARTS), University of California San Francisco (UCSF). *Promoting School Success for Students Who Have Experienced Complex Trauma: Creating Trauma-Sensitive School Environments*, 2013, 29 (on file with authors).

29. Dr. John Sprinson, Training at Legal Services for Children, Feb. 22, 2013 (on file with authors).

30. We are grateful to Dr. John Sprinson and Gena Castro Rodriguez for their assistance in compiling these recommendations.

31. Dorado, 2013, 36, 39.



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To join this program email the Open Doors Program Coordinator Erin Hilts at erin@freetothrive.org

Survivors of Trafficking Empowerment Program (S.T.E.P.)

Human trafficking survivors experience a variety of legal barriers that stand between them and their freedom and future success.

S.T.E.P. breaks down legal barriers by connecting our clients to skilled pro bono attorneys to assist with their specialized legal needs including: business/nonprofit law (formation, employment, intellectual property, contracts, real estate, etc.), civil rights, worker's rights, prisoner's rights, immigration, civil litigation, bankruptcy, benefits appeals, identity theft, personal injury, medical malpractice, eviction/landlord tenant and much more.

S.T.E.P. builds opportunities for our clients to gain their financial independence and thus their freedom from the economic ties that bind them to their traffickers, exploiters and abusers.

If you have a legal expertise in one of these areas and are interested in serving survivors of human trafficking please email the S.T.E.P. Coordinator Kristy Forteza at kristy@freetothrive.org



Family Justice Program

Human trafficking survivors are often unable to access justice in family court matters due to a lack of resources and traumatization.

The Family Justice Program provides human trafficking survivors with trauma-informed legal advocacy in family law and related matters including: domestic violence restraining orders, divorce, child custody, and advocacy in dependency cases.

This program also helps our clients legally change their names to stay safe from their traffickers/abusers and get a fresh start.

This program is supported by pro bono family law attorneys who are trained in trauma-informed lawyering.

If you are a family law attorney and are interested in taking a case pro bono, please contact the Family Justice Program Manager Nicholas Moore at nick@freetothrive.org

**“As a retired IP lawyer, I didn’t
anything about criminal prac
vacatur, and was unsure of ho
interact with a survivor. But
trauma-informed, practical
and supervision from FTT, I w
meet with, represent, and m
difference in the life of a survi
needed help.”**

**- Roger Martin, Free to
Thrive Pro Bono Attorney**

Pro Bono Opportunities

**CHANGE THE LIFE OF A
HUMAN TRAFFICKING
SURVIVOR TODAY!**



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Safety Planning

This plan contains suggestions for safety. Following these suggestions is not a guarantee of safety, but applying them to your own situation could improve your level of safety in an abusive relationship. You may be able to complete a more detailed, specific safety plan with a local domestic violence advocate.

Safety While in an Abusive Relationship

- If weapons are kept in your home, try to hide guns, ammunition, knives, and any other weapons, unless hiding the weapons would further jeopardize your safety. If this isn't possible, try to make them inaccessible.
- Think about your home; identify the areas that are easiest to escape from and are free of potential weapons. Try to move to those areas during an argument. Avoid going to rooms like the kitchen where there are knives and other potential weapons and the bathroom that has hard surfaces and most likely doesn't have a second exit.
- Try to have a phone accessible at all times. Consider hiding a prepaid cell phone to use in emergencies.
- Create a code word with friends and family in order to communicate to them that you need help.
- If an abusive incident seems imminent, trust your judgment. Sometimes it is best to leave; sometimes it is best to placate the abuser.
- Make a habit of backing your car into the driveway. Try to always have some gas. Keep the driver's door unlocked and lock all other doors. Have a copy of the car key made and hide one in the car.
- If leaving is not possible:
 - Try to move into safe areas of your home.
 - Make yourself physically smaller by curling into a ball and covering your head and face with your hands.

Safety While Preparing to Leave an Abusive Relationship

- Be aware that cellular phones can contain GPS tracking devices. If possible, plan to get a new phone and new service plan when you leave, and leave your original phone behind.
- Know that leaving an abusive relationship can be the most dangerous time for you.
- Try to set aside money, even in small amounts. Start your own savings or checking account. Use the address of a trusted friend or family member when setting up the account.
- Keep a written list of important phone numbers with you.
- Have a packed bag ready. Keep it hidden in your home or leave the bag with friends, family, or at work if possible.
- Items and documents to take:
 - Birth and marriage certificates
 - ID and Social Security Cards
 - Keys
 - School and Medical Records

- Passports, green cards, work permits
- Protective order, divorce papers, custody orders
- Bank papers and credit cards
- Medicine
- Talk to your local domestic violence agency to find out about help they may be able to offer. In an emergency, call 911 first.

After Leaving an Abusive Relationship

- If you have a protective order, always carry a copy with you. Make and keep copies for work, your car, and your home. Call the police and document when the protective order is broken.
- Consider letting friends, neighbors, and co-workers know about your situation and how they can help you stay safe.
- Try to carry a cell phone with you, and program it to dial 911.
- Change your regular travel habits. Try not to frequent the same stores or businesses you did when with your abuser.
- If you are moving:
 - Consider talking to your local shelter program about temporary shelter or other services they could provide.
 - If you need to conceal your new location, consider an address confidentiality program.
- If you are staying in your home:
 - Consider changing your locks or installing stronger doors.
 - If the exchange of children is necessary, arrange a safe, neutral place to do the exchange.
 - If your abuser comes to your home, you do not have to let him in. Keep the doors closed and locked, and call the police.

Safety and Technology

- Know that your computer activity can be monitored or checked without your knowledge. It is not possible to delete or clear all of the "footprints" from your computer or online activities. If you are being monitored, it may be dangerous to change your computer behaviors such as suddenly deleting your entire Internet history if that is not your regular habit.
- If you think you may be monitored on your home computer, be careful how you use your computer since an abuser might become suspicious. You may want to keep using the monitored computer for non-personal activities, like looking up the weather or reading the news. Use a safer computer to research an escape plan, look for new jobs or apartments, bus tickets, or ask for help.
- Consider opening a free email account that your abuser doesn't know about. Only check it from public or otherwise safe computers (libraries, schools, a friend's home).
- If you use have a cell phone, be aware that even calls that are toll-free will likely show up on your phone bill. If you are on a joint plan or access your phone bill online, others may have access to it. Consider making calls to shelters, lawyers, or other confidential services from a payphone or prepaid cell phone.
- Call your local domestic violence program and ask them about free cell phone programs. Usually these phones will allow you dial 911.

Please call the 24-Hour National Domestic Violence Hotline at 1-800-799-SAFE (7233) or TTY 1-800-787-3224 to discuss your concerns and questions.



VICARIOUS TRAUMA

(Excerpted from *Understanding and Addressing Vicarious Trauma*)

Dr. Laurie Anne Pearlman and Lisa McKay (2008), Headington Institute

Humanitarian workers often assist people who have been victimized. They work in and with communities that have been devastated by natural forces or conflict, and this work can be extremely challenging. They themselves are sometimes the targets of violence. As a result of all these things, humanitarian workers are likely to experience lasting psychological and spiritual changes in the way that they see themselves and the world.

Some of these changes can be positive. Humanitarian workers often talk about how witnessing (and sometimes sharing in) the sufferings of people they are there to help has led to personal changes they appreciate – such as more compassion and gratitude, and a deeper understanding of what they value in their own lives and why.

However, some of the changes that can come from witnessing and experiencing suffering can be more problematic, leaving potentially permanent scars.

What is Vicarious Trauma?

Vicarious trauma (VT) is the process of change that happens because you care about other people who have been hurt, and feel committed or responsible to help them. Over time this process can lead to changes in your psychological, physical, and spiritual well-being. If you are a humanitarian worker, it is important to understand the process of vicarious trauma, because it will almost certainly impact you in some way. But that's not all. It will also impact your family, your organization, and the people you are working to help.

- Vicarious trauma is a process that unfolds over time. It is not just your responses to one person, one story, or one situation. It is the cumulative effect of contact with survivors of violence or disaster or people who are struggling.
- Vicarious trauma happens because you care – because you empathize with people who are hurting. Empathy is the ability to identify with another person, to understand and feel another person's pain and joy.
- Vicarious trauma happens because you feel committed or responsible to help and at times, you are unable to fulfill that commitment. It can lead to very high (and sometimes unrealistic) expectations of yourself and others, and for the results you want to see from your work. Your sense of commitment and responsibility can eventually contribute to you feeling burdened, overwhelmed, and hopeless in the face of great need and suffering. It can also lead you to extend yourself beyond what is reasonable for your own well-being or the best long-term interests of beneficiaries.
- A key component of vicarious trauma is changes in spirituality, which can deeply impact the way you see the world and your deepest sense of meaning and hope.



Who may be most at risk for Vicarious Trauma?

- VT may be more problematic for people who tend to avoid problems or difficult feelings, blame others for their difficulties, or withdraw from others when things get hard.
- Those who have experienced trauma themselves may identify more closely with particular types of pain or loss others have experienced, and may be more vulnerable to experiencing vicarious trauma.
- Added stress in other areas of your life can make you more vulnerable to vicarious trauma.
- A lack of connection with a source of meaning, purpose, and hope is a risk factor for developing more problematic vicarious trauma.
- Lack of good social support—having people to talk to who care about you and your welfare—puts you at increased risk for vicarious trauma.
- Unsustainable professional and work-life boundaries and unrealistic ideals and expectations about work can contribute to more problematic vicarious trauma.
- Research suggests that humanitarian workers who have more work-related exposure to trauma survivors are likely to experience more problematic vicarious trauma.
- Humanitarian organizations that don't foster an organizational culture of effective management, open communication, and good staff care, increase their staffs' risk of vicarious trauma.
- Not understanding cross-cultural differences in expressing distress and extending and receiving assistance can contribute to an increased risk of vicarious trauma.
- Humanitarian work as a profession is often characterized by self-neglect, toughing it out, risk-taking, and denial of personal needs. All of these can contribute to more severe vicarious trauma.

Common Signs of Vicarious Trauma

Some common difficulties associated with vicarious trauma include:

- Difficulty managing your emotions;
- Difficulty making good decisions;
- Problems managing the boundaries between yourself and others (e.g., taking on too much responsibility, having difficulty leaving work at the end of the day, trying to step in and control other's lives);
- Problems in relationships;
- Physical problems such as aches & pains, illnesses, accidents;
- Difficulty feeling connected to what's going on around and within you; and
- Loss of meaning and hope.
- *Vicarious trauma can negatively affect your work, your colleagues, the overall functioning of the organization, and the quality of assistance being provided to those you are working to help.*
- *Vicarious trauma influences the way you act and interact with people you love. This affects your family and friends.*



Coping with Vicarious Trauma

Coping with vicarious trauma means identifying strategies that can both help prevent vicarious trauma from becoming severe, and help manage vicarious trauma during times when it is more problematic. Good coping strategies are things that help you take care of yourself – especially things that help you *escape*, *rest*, and *play*. Among other things, these might include:

- **Escape:** Getting away from it all, physically or mentally (books or films, taking a day or a week off, playing video games, talking to friends about things other than work);
- **Rest:** Having no goal or time-line, or doing things you find relaxing (lying on the grass watching the clouds, sipping a cup of tea, taking a nap, getting a massage); and
- **Play:** Engaging in activities that make you laugh or lighten your spirits (sharing funny stories with a friend, playing with a child, being creative, being physically active).

Transforming Vicarious Trauma

Transforming vicarious trauma means something deeper than just coping with it. Remember that, over time, one of the key components of vicarious trauma is changes in your spirituality. You can come to question your deepest beliefs about the way life and the universe work, and the existence and nature of meaning and hope.

At the deepest level, **transforming** vicarious trauma means identifying ways to nurture a sense of meaning and hope. What gives life and work meaning, and what instills or renews hope?

You likely have sources of meaning, purpose, hope, and perspective in your life. Some ways to connect (or reconnect) with these may be:

- Reminding yourself of the importance and value of humanitarian work;
- Staying connected with family, friends, and colleagues;
- Noticing and deliberately paying attention to the “little things” – small moments like sipping a cup of coffee, the sound of the wind in the trees, or brief connections with others;
- Marking transitions, celebrating joys, and mourning losses with people you care about through traditions, rituals, or ceremonies;
- Taking time to reflect (e.g., by reading, writing, prayer, and meditation);
- Identifying and challenging your own cynical beliefs; and
- Undertaking growth-promoting activities (learning, writing in a journal, being creative and artistic).

HOW TO HELP?

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