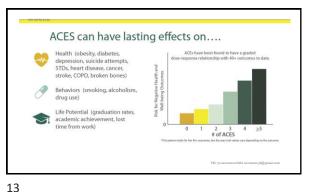
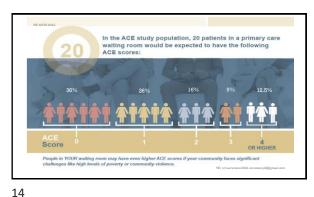
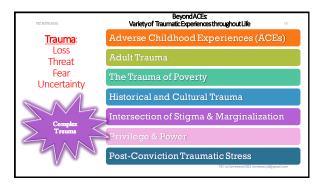
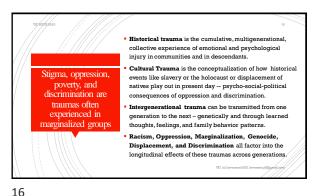


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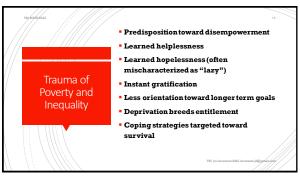


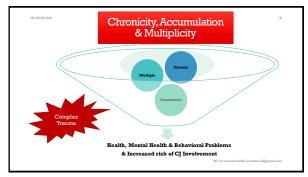


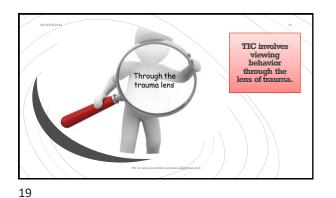




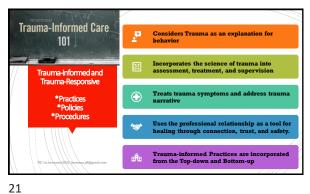
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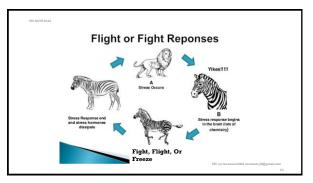


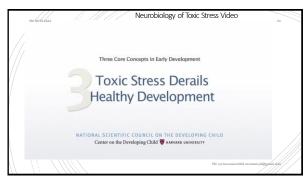


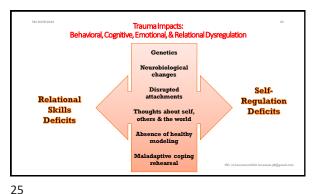


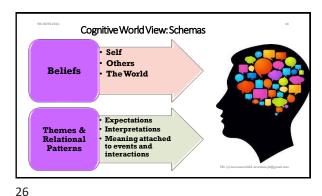


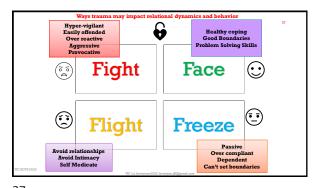




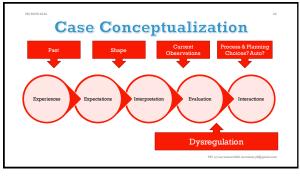




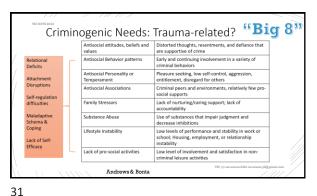


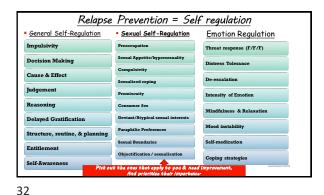




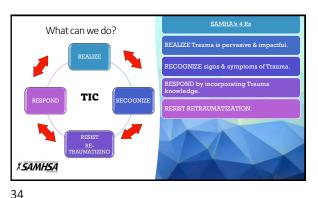












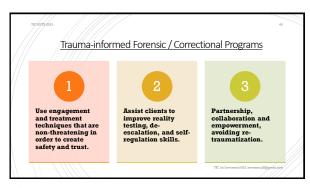


Traditional Paradigm	Trauma-Informed Paradigm
Clients are sick or bad	Clients are wounded
Bad behavior is due to immorality, bad character, or lack of motivation	Problematic behavior is viewed through the lens of early experiences
Emphasis on Control/Compliance	Emphasis on Collaboration
Emphasis on Pathology	Emphasis on Strengths & Adaptation
We need to manage client behaviors	We need to help clients improve self regulation and healthy coping skills
Clients are resistant	Clients are ambivalent about change & help-seeking
Addictive, self-destructive, or abusive behaviors are just bad choices	Maladaptive behaviors are reflective of survival skills
Focus on presenting problems	Presenting problems are often symptoms of underlying trauma responses

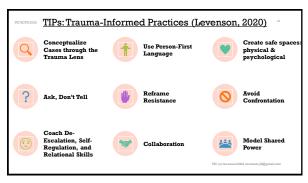


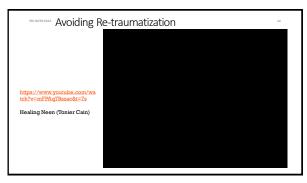


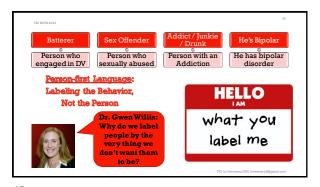


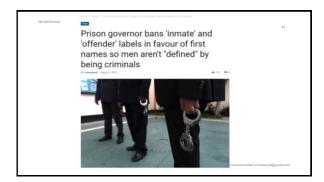


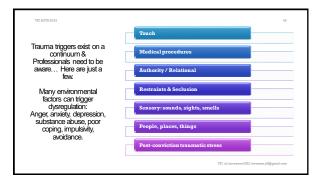
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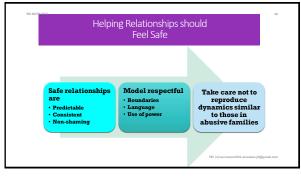




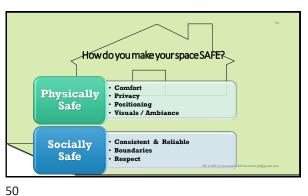


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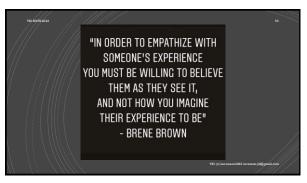


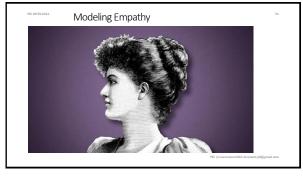




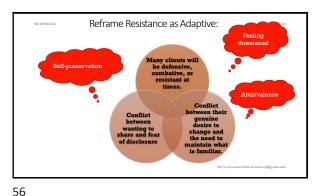


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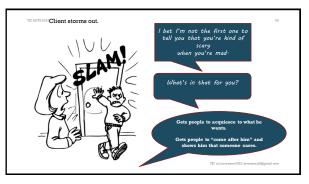












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