

Becoming a More Trauma-Informed Organization

Improving Trauma-Informed Care & Services for The Families We Serve



What is trauma?

- Emotional, psychological, physical wounding
- Traumatic reactions occur when neither resistance nor escape is possible



What is trauma?

- > Traumatic events can be shocking & terrifying
- Can include interpersonal violence
- > Trauma often involves betrayal by trusted person or institution



Why do we need to be "trauma informed?"

- Families we work with have faced/face trauma
- Many actions & responses (coping strategies) that seem ineffective & unhealthy in the present are adaptive responses to past traumatic experiences
- The impact of trauma is often experienced across the lifespan & across generations



Trauma Scenario 1

- Listen to the situation described in the scenario on the next slide. Consider:
 - What traumatic events has this parent & family experienced?
 - What was the response of the school? The children's behavioral health system?
 - What could/should they have done differently?
 - What could parent center staff do now?



The Situation: I am the parent of nine children, several of whom have special needs including mental health needs. I am a single parent; I left my abusive husband when he started beating my children, not just me. When I was overwhelmed by being a single parent; I called child welfare for help. I told them that I was having trouble making ends meet; that my landlord refused to fix my apartment, which had water running down the walls; that my children were struggling in school; that my son was running with drug dealers and coming in at all hours of the day and night, scaring my other children and even hitting them; that I was worried about my own health because I was having trouble breathing; and that I didn't know where to turn for help.



What happened next? I got connected with the Care Management Organization for children and youth with challenging behavior and they started the process of evaluating my son to see what his needs were and what they could do. But whenever they would come by my house, my son would be gone and so it was taking a long time to get the evaluation done and I wasn't getting any supports or services. One night my son came home and was physically violent to me and another one of my children. I was scared and so I called Value Options and they sent out the mobile response unit. When they got there, they seemed to take my son's side and kept calling me, "Mom," and telling me that my expectations for a curfew for my son were unreasonable. I felt so helpless and hopeless. At the same time, I got a visit from DYFS. It seems that, even though I was putting my son with disabilities on the school bus every morning, he wasn't getting to school. There was construction by the school and they were letting the kids off the bus a few blocks from school, and no one was walking them to the school to make sure they got there.



And then what happened 7 So my son was skipping school and no one from the school ever contacted me – until DYFS showed up at my door. Apparently the school called DYFS and reported me for educational neglect. When I told DYFS my story, they said that it was still my responsibility to make sure my child got to school on time, not matter what. When DYFS saw how many of us were living in one apartment with so few rooms and water running down my walls, they told me they were going to take my children away because I wasn't taking good enough care of them. I even spoke with the DYFS supervisor, and when my case got before the judge, he ordered me to take parenting classes. He didn't care that the school wasn't doing what it was supposed to do. Everything seemed to be closing in on me. And I still wasn't getting an evaluation or services for my older son, who was staying out all night and scaring all my other children whenever he did come home. And then to top it all off, my landlord threatened to evict me! I just don't know where to go or who to turn to.

Adverse Childhood Experiences Study

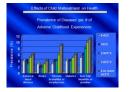
- Largest public health crisis study examining health & social effects of adverse childhood experiences throughout the lifespan (17,421 participants)
- 66% of women reported at least one childhood experience involving abuse, violence, or family strife



Adverse childhood experience on adulthood

- Adverse childhood experiences determine the likelihood of the 10 most common causes of death
- With an ACE score of 0, the majority of adults have few, if any, risk factors for these diseases
- With an ACE score of 4 or more, the majority of adults have multiple risk factors for these diseases or the diseases themselves





Strong relation of ACE to:

- Smoking
- COPD
- Hepatitis
- Heart disease
- Diabetes
- Obesity
- Alcoholism
- Other substance abuse
- DepressionAttempted suicide
- Teen pregnancy
- Teen paternity
- STD
- Occupational injuries
- Poor job performance
- Job/school absences





What is "trauma informed?"

- Realizes the widespread impact of trauma
- Recognizes that "symptoms" are often adaptive coping mechanisms
- Resists re-traumatization
- Responds by integrating knowledge about trauma into policies, procedures, practices, & settings



Oualities of a Trauma-Informed System XOXOXOX

- Intentionality: Action rooted in "knowing"
- Mutuality: Healing happens in relationships
- Commonality: We all have a story
- Potentiality: Healing is possible for all



Potentiality



Trauma Scenario 2

Example of Impact Related to Qualities of a Trauma-Informed System

Name that Quality.

Jame that Quality: My journey has given me wisdom and strength. One of the reasons I reached out to SPAN for help is because their mission statement alone gave me a sign that they would understand what I was going through. I spent many sleepless inghts reading online about different agencies and not one of them seemed to have any supports in place for families. SPAN's website stated right up front that its foremost commitment was to children and families with the greatest need due to disability; poverty; discrimination based on race, sex, language, immigrant, or homeless status; involvement in the foster care, child welfare, or juvenile justice systems; geographic location; or other special circumstances. I felt I had found someplace that I belonged.

Name that Quality

By pairing me up with other parents who had "been there," and who understood my family's unique needs, it brought out the best in me at the worst time in my life



Name that Quality .

Name that Quality.

- Through workshops, trainings and conferences, I learned specific leadership skills (advocacy, effective communication, organizational skills, coping with stress). Their supports impacted me in many ways:
- I was motivated to pursue goals for my child and later for me and the rest of my family. I learned how to manage disagreements with professionals. Most important, I learned how to communicate with ease and clarity. Before I met SPAN I felt hopeless and emotions got in the way of communicating. By SPAN supporting me and teaching me how to advocate for myself and my family, I found my own voice, and now I lend my voice to others who may not be able to speak due to language barrier or disability.



Scenario "Answers"

INTENTIONALITY (Action rooted in "knowing"):

My journey has given me wisdom and strength. One of the reasons I reached out to SPAN for help is because their mission statement alone gave me a sign that they would understand what I was going through. I spent many sleepless nights reading online about different agencies and not one of them seemed to have any supports in place for families. SPAN's website stated right up front that its foremost commitment was to children and families with the greatest need due to disability; poverty; discrimination based on race, sex, language, immigrant, or homeless status; involvement in the foster care, child welfare, or juvenile justice systems; geographic location; or other special circumstances. I felt I had found someplace that I belonged.



COMMONALITY (We all have a story):

It took another parent to understand me and guide me. By pairing me up with other parents who had "been there," and who understood my family's unique needs, it brought out the best in me at the worst time in my life

MUTUALITY (Healing happens in relationships):

Specific things SPAN did that brought out the leader in me. From the very beginning, the issues that my family and I were facing were seen through a Lens of Understanding. The SPAN staff members who worked with me were culturally competent and caring. They understood that parenting is one of the most crucial responsibilities a human being can have.



POTENTIALITY (Healing is possible for all):

- Through workshops, trainings and conferences, I learned specific leadership skills (advocacy, effective communication, organizational skills, coping with stress). Their supports impacted me in many ways:
- I was motivated to pursue goals for my child and later for me and the rest of my family.
- I learned how to manage disagreements with professionals.
 Most important, I learned how to communicate with ease and clarity.
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Trauma Informed Practice

- Reframes the conversation from "what's wrong with you" to "what happened to you"
- Acknowledges the many pathways to recovery
- Recognizes healing happens in relationships
- Focuses on the person, not the label
- Incorporates an understanding of the impact of trauma on the body
- Creates conditions for safety, healing, recovery
- Incorporates the wisdom, experience & expertise of women with lived experience in all aspects of the work



To See (or Hear) Clearly



 It is only with the heart that one can see clearly; what is essential is invisible to the eye.
 The Little Prince

Antoine de Saint Exupery

Elements of Trauma Informed Environment Supportive Environment

- Physical environment
 - Confidentiality/privacy
 - Accessibility
 - Appearance
 - Climate
- Supportive
- environment
- Transparency
- Consistent/predictable
- Resources availability
- · Clear expectations
- Cultural sensitivity

- Inclusive environment
 Voice
- Choice
- Language (Person-First;
- everyday non-clinical) • Relational
- environment
- We all have a story
- Boundaries
- Balanced
- Authentic



Creating Conditions for Safety: Assessing our Environment

- A team with representatives from all levels uses the organizational self-assessment tool to review organizational environment
- The entire team or subgroups are assigned a section of the organizational self-assessment
- As the team reviews the tool questions, ask:
 To what extent do we do this now?
 - Why is it important?
 - · How can we implement this more effectively?
 - Who can help us?



Supporting Trauma-Informed Relationships in Our Work Together





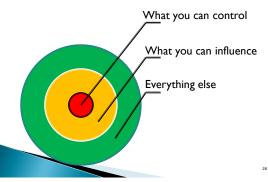


- Identify elements of trauma informed relationships in the workplace
- Identify knowledge, skills and values of trauma informed staff
- Strengthen core competencies for trauma informed staff within our own organizations

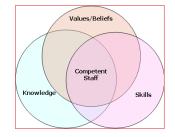




Spheres of Influence & Control



Core Competency Framework



Source:Addressing the Needs of Women and Girls: Developing Core Competencies for Mental Health and Substance Abuse Professionals - SAMHSA

Core Competency Framework

Interconnection of:



We are not what we know but what we are willing to learn."



Core Competency Framework

Knowledge is defined as that what needs to be known to be effective. It may be acquired via:

- Research findings
- Study of best practices
- Feedback from peers and program participants



Core Competency Framework

- **Skills** are specific proficiencies and techniques that enable staff to work with efficacy and intention
 - They are what someone does



Core Competency Framework





Assessing Ourselves

- Complete the selfassessment
 - Rating Scale: C=Demonstrates Competency; N=Needs Further Development; L=Little or no Exposure
- Consider
 - I discovered about myself:
 - I was surprised at:
 I want to learn more about:
 - I need help to:



Demonstrates Knowledge

escribes interconnection of violence, trauma & social issues			
escribes impact of trauma on body, spirit, mind			
inderstands impact of trauma over the lifespan			
inderstands "symptoms" are coping mechanisms from trauma			
Inderstands complex needs of trauma survivors			
inderstands re-traumatization			
inderstands cultural differences in understanding of, responses to, and treatment for traur	na		
Inderstands the Importance of self-care			
inderstands the building blocks of establishing a trusting relationship			
nderstands collaborative decision-making and need to seek common ground			
inderstands need to know peers/families beyond their label, disability, and/or affect			
otal≢ in each category			

Demonstrates Skills:



Demonstrates Skills:

Ability to engage families with empathy, warmth and sincerity		
Ability to practice self-care in an intentional, consistent manner		
Ability to maintain confidentiality		
Ability to identify and use relevant resources to support families		
Willingness to ask for help from supervisor, peers/co-workers, others		
Willingness to learn from families and peers		
Ability to offer true choice to families and honor their choices		
Ability to coach families to know their strengths and talents		
Demonstrates culturally appropriate respect for peers/co-workers and families		
Ability to tailor approach to Individual family's unique goals, strengths & needs		
Total # in each category		

Demonstrates Values:

Believes that families are t	the experts in their own lives		
Believes that healing from	trauma is transformative		
Connections between staf learning	ffer and families are reciprocal and o	ffer opportunities for shared	
Believes that pathways to	recovery are diverse and vary from j	erson to person	
Values the fact that recov	ery from trauma is a spiral path, not	direct or linear	
Believes that healing build	is strength in the "broken places"		
Believes that recovery from	m trauma is possible for all		
Believes that informed cho	oice is central to recovery from trau	na	
Believes that healing happ	oens in relationships		
Total # In each category			

Reviewing Core Competencies

"How Do You Know What You Know?"

- Vignettes, Scenarios, Case Studies
- Observation
- Feedback from peers and program participants
- Feedback from Team Members



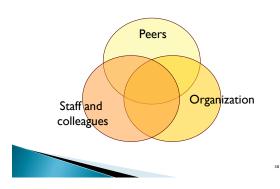
• Prompts in

Supervision

• Self-Assessment

• Annual Performance





Supporting Staff Through Change

When moving to a trauma informed organization, staff roles, responsibilities, knowledge, skills, and values are continually

- Reviewed
- Reflected upon
- Revised (as needed)

What does this mean for you as staff &/or as supervisors?

What is your experience with change?



We are In this Together

In Trauma-informed organizations, staff develop intentional working relationships where

- New knowledge
- Practices
- Courage
- Commitment can develop



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Adapted from Margaret Wheatley

Trauma-Informed Relationships in the Workplace are Built On

- Understanding Trauma and its Impact
- Promoting SafetyEnsuring Cultural
- Ensuring Cultural Sensitivity & Reciprocity
- Supporting Choice and Control
- Sharing Power

- Sharing Leadership
- Mutually Respectful and Trusting Relationships
- Integrating Compassionate Self Observation (Self Care)
- Believing Healing and Recovery is Possible

Cultural Reciprocity

- Recognizes that people process trauma & recovery in different ways
- Understands that recovery happens in relationships
- Requires a sharing of oneself with the person we are seeking to help heal from trauma & develop resilience
- Avoids a "one size fits all" approach
- Believes that each person has it within themselves to develop resiliency...with support

Key Strategies

- Peer support
- Active listening
- Skill building
- Sharing decision-making
- Development of trust
- Recognizing the power of powerlessness, habit, & paralysis • Replace "fixing" with "facilitating"
- > Understand the dynamics of unequal power relationships



Taking Action

- What is the first thing you are going to do when you get back to work?
- · Who else needs to be involved to make this happen?
- Who are your allies?
- Who do you have to inform about your intentions?



