Implementing Trauma Informed Care

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Introductions

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Learning Objectives



UNDERSTAND THE BASICS OF TRAUMA AND HOW IT IMPACTS THE DELIVERY OF HOMELESS SERVICES

UNDERSTAND THE PRINCIPLES OF TRAUMA INFORMED CARE IDENTIFY WAYS TO INCORPORATE PRINCIPLES INTO YOUR SERVICE DELIVERY PRACTICES

Understanding Trauma

Definitions

Trauma: Intense stress that overwhelms our biological, psychological and social capacity resulting in vulnerability and a loss of control leaving a person feeling helpless and fearful

Complex Trauma: repeated systematic trauma that occurs over time

Trauma Informed Care: Overarching structure and treatment attitude that emphasizes understanding, compassion, and responding to the effects of all types of trauma with an understanding of the vulnerabilities or triggers a trauma survivor may experience and how they may impact the way the individual accepts and responds to services

Impact of Trauma

- The impact of trauma is related to the level of intensity, duration, importance and uncertainty associated with the event
- Trauma is "in the eyes of the beholder"
- Every person's capacity to respond to trauma is different
- Capacity is increased by protective factors such as healthy lifestyle, positive relationships, sense of control, resiliency and selfconfidence
- Capacity is decreased by unhealthy lifestyle, dysfunctional relationships, lack of enrichment, poverty, addition, long-term intense stress and compounding trauma
- Impacts of trauma are cumulative

Death

Early Death Disease, Disability, and

Social Problems

Adoption of Health-risk Behaviors

Social, Emotional, and Cognitive Impairment

Disrupted Neurodevelopment

Adverse Childhood Experiences

Conception

Mechanisms by Which Adverse Childhood Experiences Influence Health and Well-being Throughout the Lifespan

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Responses to Trauma

- Reactions to trauma impact every aspect of a person's life, including their self-concept, relationships, decision-making ability, physical and mental health
- Responses to trauma are adaptive at the time, particularly as survival skills
- Trauma response are generally based on avoiding pain and seeking pleasure
 - Self-medicating is an attempt to relieve emotional and physical pain and experience some pleasure
- Maladaptive trauma responses should be understood as coping skills that were once useful in the past, and which can slowly be replaced with healthier alternatives

Homelessness is a Form of Trauma

- Many experience multiple pre-existing traumas, but being homeless is also a source of trauma
- The loss of home, community, stability, safety and routine is traumatic
- Chronic traumatic experiences, like those often found in the lives of people who are homeless, can have an impact on the physical, emotional, relational and cognitive aspects of people's lives.
- Managing a trauma response in a harsh environment
- Trauma response often leads to involuntary exit from services creating a cycle that supports mistrust

Impact of Trauma on Service Delivery

Lack of trust in providers

Inappropriate responses

Difficulty asking for and accepting help

Difficulty sustaining long-term relationships

Few coping and problem-solving skills



Clients may experience the system as re-traumatizing



Clients are labeled as resistant or manipulative

Becoming Trauma Informed

What does it mean to be trauma informed?

A system" whose primary mission is altered by virtue of knowledge about trauma and the impact it has on the lives of consumers receiving services." – Maxine Harris

"Understanding, anticipating, and responding to the issues, expectations and special needs that each traumasurvivor may have. At a minimum trauma-informed services should endeavor to do no harm..." - SAMSHA Outcomes of Trauma Informed Services Better overall outcomes for both single adults and families

Positive effect on housing stability

Decreased Use of crisis-based services

More cost-effective

Positive responses from participants

Positive responses from providers

Challenges to being Trauma Informed

- Capacity
- Staff Turnover
- Limited Resources
- Working with multiple systems and providers
- White Dominant Culture Norms

Organizational Transformation



PROGRAM LEADERS MUST HAVE THE AUTHORITY TO INSTITUTE PROGRAMMATIC CHANGE AND THE SUPPORT OF THE BROADER AGENCY TO IMPLEMENT THESE CHANGES **CREATING BUY-IN**

EVERYONE NEEDS TO BE TRAINED AND PRACTICE TRAUMA INFORMED CARE CREATING AN ENVIRONMENT THAT SUPPORTS PEOPLE WHO HAVE EXPERIENCED TRAUMA IS AN ONGOING PROCESS THAT TAKES TIME AND AN ON-GOING COMMITMENT

Organizational Self-Assessments

- Trauma Informed Organizational Self-Assessment
- NHHCC Trauma-Informed Organizational Assessment
- Environmental Assessment
- Self Assessment: Adoption of Trauma Informed Care Practice
- Standards of Practice

Principles of Trauma Informed Care



Understanding Trauma

Concept

- Understand the pervasive impacts of trauma
- Understanding behaviors of traumatized individuals as adaptations to past threat
- Understand that problems/symptoms are interrelated responses to or coping mechanisms to deal with trauma
- Begin to think about ways of developing new adaptations that might lead to more productive outcomes

- Implement a staff policy of 8 hours of initial training in trauma concepts and at least 2 hours each subsequent year
- Analyze communications and materials for <u>trauma informed</u> <u>language</u>
- Materials should acknowledge consumers' trauma and experiences of homelessness as traumatic, and how this impacts service delivery
- <u>Hiring interviews</u> include demonstration of knowledge and understanding of trauma

Promoting Safety

Concept

- Emotional Safety: emotions and psychological state are validated and supported
- Physical Safety: absence of harm or injury that can be experienced by any person from a physical object
- Psychological Safety: mental well-being, which encompasses perceptions, relationships, and personal trauma triggers
- Crisis Management: the process by which an organization deals with a sudden emergency

- Ensure all staff receive training in trauma and de-escalation with regular refresher courses
- Utilize a <u>Critical Incident Stress Debrief</u> model to mitigate trauma and learn from practice

Creating Physical Safety

- Seating areas where no one can walk behind them (as with their back to the wall or a partition)
- Ensure stalls and single-occupancy restrooms can be locked
- Maintaining the overall environment fixing things when they are broken, sweeping/dusting/mopping, and spraying for bugs — conveys respect for clients
- Orienting clients to the living space, such as being shown light switches and the locations of restrooms and how to lock them, increases their sense of ease and control
- Create a calming atmosphere
- Reflect the talents and cultures of the people you serve in your environment
- Include developmentally appropriate materials, and toys that give children opportunities for creative play

Creating Emotional Safety

Convey respect

- Before having an interview or examination, explicitly ask consumers about any concerns, fears, or past negative experiences related to the service or intervention
- Ask only those pieces of information that are necessary to know at the time
- Be consistent and predictable
- Follow through with commitments
- Utilize <u>Safety Plans</u> and <u>Crisis Prevention Plans</u>
- Set healthy emotional boundaries
- All the additional principles of Trauma Informed Care help to create emotional safety

Healing Happens in Relationship

Concept

- Experiencing safe, authentic, positive relationships can be tremendously restorative to survivors of trauma
- Positive relationships promote a feeling of safety and trust
- Peer support and mutual selfhelp are key vehicles for establishing safety and hope, building trust, enhancing collaboration, and utilizing their stories and lived experience to promote are recovery and healing

- Have a plan in place to handle staff transitions so that clients aren't retraumatized by staff turnover
- Provide programming that encourages the development of relationships among consumers
- Develop a paid <u>Peer Support</u> program
- Hire persons with lived experience of homelessness

Cultural Sensitivity & Humility

Concept

- Honoring the voices and experiences of marginalized groups and the intersections of identities
- Learning about diverse cultures and experiences
- Acknowledge the impact of historical oppression and trauma
- Incorporating Racial Equity into policy and practice
- Identifying the role of <u>white</u> <u>privilege</u>

- Provide trainings on racial equity and explicitly marginalized populations
- Consult a cultural humility calendar when scheduling events or to identify holidays to acknowledge
- Always utilize professional interpreters
- Offer opportunities to share identities and cultural background including how they view this as a strength in providing quality care or engaging in services
- Develop a formal process to ensure staff and leadership reflect the same cultural, racial, and ethnic backgrounds as the people being served
- Developing an <u>Anti-Racist</u> organizational mission

Consumer Control, Choice and Autonomy

Concept

- Informed consent
- Sharing information in meaningful and understandable ways
- Ensuring full knowledge of the benefits, risks and consequences of decisions
- Supporting autonomy, freedom, and control of participants without pressure or coercion

- Ensuring that housing is not contingent upon participation in any other services
- Create a section in the case notes/treatment plan specifically for consumer feedback/ comments
- Create a process to ensure consumers are offered the option to select a provider based on gender, race, or other preferences
- Help consumers think through choices and options using if/then statements to understand ramifications of decisions

Compassion & Empathy

Concept

- Interacting with understanding and respect for the individual
- Demonstrate positive regard for their experiences, feelings and opinions
- Focus on potential rather than negative circumstances
- Validate people's experiences and feelings
- Recognize behaviors as understandable given the circumstances
- Focus on the relationship even if there is a difference of opinion

- Ask consumers for feedback on how to make the program more welcoming, supportive and healing
- Review policies for involuntary end of services to ensure they are trauma informed and low barrier
- Review internal and external communication to ensure the program uses "people-first" and descriptive language rather than characterizing terms to describe consumers
- All staff should acknowledge consumers verbally and behaviorally when moving about the building
- Check in with consumers when seeing them outside of regularly scheduled sessions

Trust

Concept

- Consistency across time and individuals provides safety and allows consumers to anticipate
- Be flexible to serve individuals in the way that works best for them
- Maintain consumer privacy and confidentiality and provide autonomy over release of information
- Respect healthy boundaries

- Create private and confidential spaces for assessments or personal conversations with consumers
- Develop a written policy outlining boundaries between staff and consumers, including contact outside of work activities, self-disclosure, sharing resources, and physical contact
- Coach staff to respond when they hear other staff talk about consumers in common spaces, or in disrespectful ways

Strengths Based

Concept

- Acknowledge that every individual is an expert in their own life
- Focus on assets and resources over problems or deficits
- Allowing clients to define their goals and metrics of success
- Provider is there as a facilitator rather an expert or decision maker
- Being proactive with a "future orientation" to prevent further crisis and avoid retraumatization

- Review assessments, intakes, and other forms to determine where language is deficit- or problembased, and reframe questions with a strengths-based lens
- Role play with staff ways to convey that consumers are the expert in their own experience
- Ensure consumers are encouraged to set their own goals, and that those goals are respected and validated
- Implement hiring practices which weight lived experience equivalent with formal education
- Utilize <u>motivational interviewing</u>

Share Power and Governance

Concept

- Being completely transparent with every element of service delivery and programming
- Sharing complete and accurate information and managing expectations
- Equalizing of power in relationships between clients and providers and between staff across all levels of an organization
- Perception is reality
- Accountability to the people and communities being served

- Explain why questions are being asked and how client data will be used
- Have a written policy outlining expectations of consumer behaviors and potential consequences
- Develop, post, and make accessible "Consumer Rights and Responsibilities" in multiple languages
- Develop a formal process for soliciting responding, and incorporating feedback from consumers on all existing and newlydeveloped policies and procedures
- Being transparent and sharing information about how we conduct "room checks" and other inspections
- Support clients in running a "resident voice" meeting, put them in charge of developing the agenda and facilitating the discussion

Caring for Staff

A trauma informed organization incorporates these principles for their staff as well as their clients

A State of Well-Being

- Supporting polices and practices that support physical, emotional, relational and cognitive well being.
- Physical well being includes behavior choices to ensure health, avoid preventable diseases and conditions, and live in a balanced state of body, mind, and spirit
- Emotional well being includes not only stress management technique, but behaviors that promote resiliency and generate positive emotions
- Relational well being is fostering genuine connection with those around you and support during difficult times
- Cognitive well being includes self-realization and evaluation of life overall and specific domains such as job satisfaction

Secondary Trauma & Compassion Fatigue

- Secondary trauma and compassion fatigue are the natural consequences of working in traumatic and stressful environments
- These conditions characterized by emotional and physical exhaustion, leading to a diminished ability to empathize or feel compassion for others
- Just as consumers develop maladaptive trauma responses, so will staff
- Organizations must be mindful of the impacts and mitigate them

Caring for Staff in Practice

- Allow staff to utilize sick time for self-care
- Ensure benefits packages include supportive services such as mental health care, employee assistance programs, positive well being benefits
- Ensure there is regular programming during working hours designed solely for staff self-care
- Explicitly ask staff privately and in group settings about their workload, and adjust staffing patterns as needed to support staff self-care and optimal effectiveness
- Create and promote a dedicated space for staff to relax and de-stress with elements of nature and positive and hopeful imagery
- Prioritize and work to optimize staffing patterns and workloads that support staff
- Include standing agenda items in staff meetings or supervision to ask about the impact the work has on staff

Mitigating Compassion Fatigue and Burnout



Awareness: Involves accepting that compassion fatigue is common to our work and doesn't imply anything negative about us



Balance: Consider the rule of thirds. A third of the day is spent working, a third spent playing, and a third spent resting.



Connection: Includes both professionally and personally. Remember the second principle, Healing happens in relationships. Just as our clients need relationships to be healthy, so do we. Isolating ourselves is a sure-fire way to become burned out.

Self-Care

- Know your triggers and warning signs
- Be alert to what you expose yourself to outside of work
- Set boundaries
- Add variety to your work
- Maintain your relationships inside and outside of work
- Build <u>Stress Management</u> into your routine at work and at home

Questions?