



Pathways RTC Webinar

RESEARCH & TRAINING CENTER FOR PATHWAYS TO POSITIVE FUTURES



Trauma-Informed Care in Youth-/Young Adult Serving Organizations

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Trauma Informed Oregon

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Welcome - Agenda

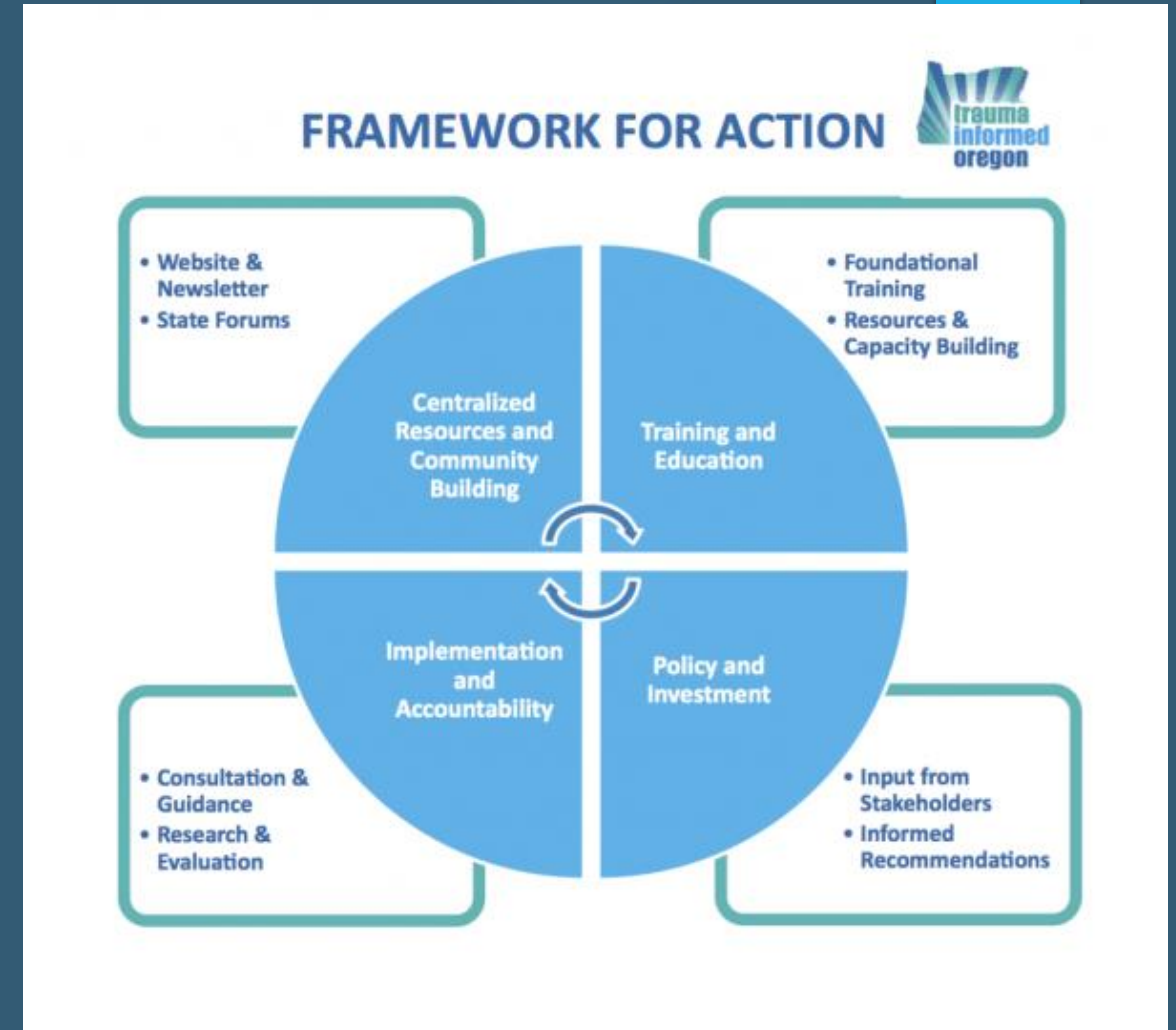
- ▶ Introductions
- ▶ What is TIC and why it is important
- ▶ Science and principles
- ▶ Implementation tools and activities
- ▶ Resources
- ▶ Questions



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Trauma Informed Oregon

Trauma Informed Oregon

- ▶ A statewide collaborative aimed at preventing and ameliorating the impact of adverse experiences on children, adults, and families.
- ▶ Primarily funded by OHA.
- ▶ Oregon Trauma Advocates Coalition (OTAC)
- ▶ Oregon Pediatric Society & Oregon Health Science University.
- ▶ Advisory board with lived experience, public health, office of equity, provider.



Trauma Informed Care

“A program, organization, or system that is trauma-informed **realizes** the widespread impact of trauma and understands potential paths for recovery; **recognizes** the signs and symptoms of trauma in clients, families, staff, and others involved with the system; and **responds** by fully integrating knowledge about trauma into policies, procedures, and practices, and seeks to actively **resist re-traumatization**”

(SAMHSA's Concept of Trauma and guidance for a Trauma-Informed Approach, 2014
<http://store.samhsa.gov/shin/content/SMA14-4884/SMA14-4884.pdf>)

What is Trauma?

- ▶ Can be single event.
- ▶ More often multiple events, over time (complex, prolonged trauma).
- ▶ Interpersonal violence or violation, especially at the hands of an authority or trust figure, is especially damaging.
- ▶ Collective, historical, generational
- ▶ Event, Experience, Effect (SAMHSA)

Trauma Specific v. Trauma Informed

- ▶ Trauma Recovery/Trauma Specific Services
 - ▶ Reduce symptoms
 - ▶ Promote healing
 - ▶ Teach skills
 - ▶ Psycho-empowerment, mind-body, other modalities.
- ▶ Trauma Informed Care
 - ▶ Guide policy, practice, procedure based on understanding of trauma
 - ▶ Assumption: every interaction with trauma survivor activates trauma response or does not.
 - ▶ Corrective emotional experiences.
 - ▶ Parallel process

Why is it important?

- ▶ Trauma is pervasive.
- ▶ Trauma's impact is broad, deep and life-shaping.
- ▶ Critical for those who have experienced adversity
- ▶ Trauma differentially affects.
- ▶ Trauma affects how people approach services.
- ▶ The service system has often been activating or re-traumatizing.

Definition and Frame

- ▶ Original framework for TIC focused on Safety – Power – Value
- ▶ At TIO* we currently use SAMHSA's definition of TIC (realize, recognize, respond, resist retraumatization) – encourage system specific definitions
- ▶ Focus on how organizations and systems can apply the principles of TIC to:
 - ▶ Reduce toxic stress ,traumatization, and retraumatization,
 - ▶ Increase engagement,
 - ▶ Promote 'whole-brain' – healthy workforce
- ▶ Focus on systemic oppression and institutional abuse – anti-oppressive practice
- ▶ Utilize NEAR science frame (neuro, epigenetics, ACE, Resilience)

Trauma Informed Care



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graph TD; A[Trauma Informed Care] --> B[Commitment to Trauma Awareness]; A --> C[Understanding the Impact of Historical Trauma]; B --> D[Policies, Procedures and Practices that]; C --> D; D --> E[Create Safe Context through:]; D --> F[Restore Power through:]; D --> G[Support Self-Worth through:];
```

The diagram illustrates the components of Trauma Informed Care. At the top is a purple box labeled 'Trauma Informed Care'. Two arrows point down from this box to two blue boxes: 'Commitment to Trauma Awareness' on the left and 'Understanding the Impact of Historical Trauma' on the right. From these two blue boxes, two arrows point down to a central text 'Policies, Procedures and Practices that'. Below this central text are three green boxes, each representing a different goal: 'Create Safe Context through:', 'Restore Power through:', and 'Support Self-Worth through:'. Each green box contains a list of specific elements that contribute to that goal.

Commitment to Trauma Awareness

Understanding the Impact of Historical Trauma

Policies, Procedures and Practices that

Create Safe Context through:

Physical safety
Trustworthiness
Clear and consistent boundaries
Transparency
Predictability
Choice

Restore Power through:

Choice
Empowerment
Strengths perspective
Skill building

Support Self-Worth through:

Relationship
Peer Support
Collaboration
Respect
Compassion
Mutuality
Acceptance and Non-judgment

SAMHSA's Concept of TIC

<u>3 E's of Trauma</u>	<u>4 R's Key Assumptions</u>	<u>6 Key Principles</u>	<u>10 Implementation Domains</u>
<ol style="list-style-type: none">1. Events2. Experience3. Effects	<ol style="list-style-type: none">1. Realization2. Recognize3. Responds4. Resist Re-traumatization	<ol style="list-style-type: none">1. Safety2. Trustworthiness and Transparency3. Peer Support4. Collaboration and Mutuality5. Empowerment, Voice, and Choice6. Cultural, Historical, and Gender Issues	<ol style="list-style-type: none">1. Governance and Leadership2. Policy3. Physical Environment4. Engagement and Involvement5. Cross Sector Collaboration6. Screening, Assessment, and Treatment Services7. Training and Workforce Development8. Progress Monitoring and Quality Assurance9. Financing10. Evaluation

Substance Abuse and Mental Health Services Administration. *SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach*. HHS Publication No. (SMA) 14-4844. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2014.
<http://store.samhsa.gov/shin/content/SMA14-4884/SMA14-4884.pdf>

Trauma Informed Care Logic Model

So what to what
to what.....

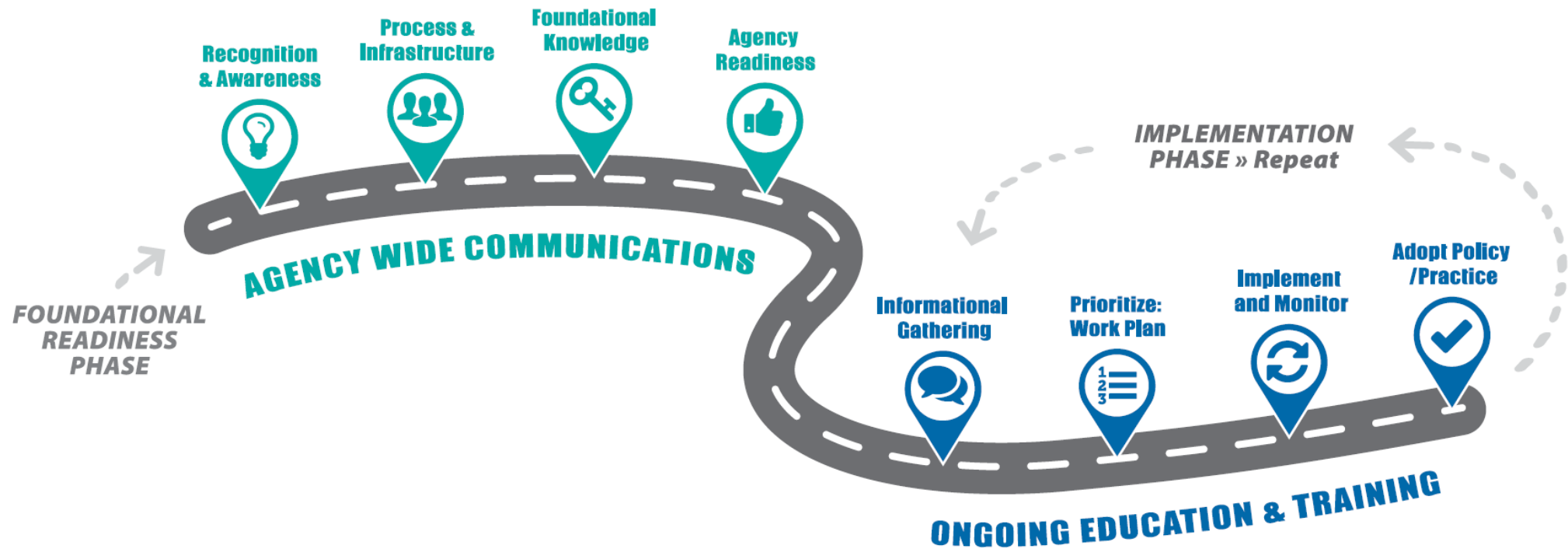


Assumptions

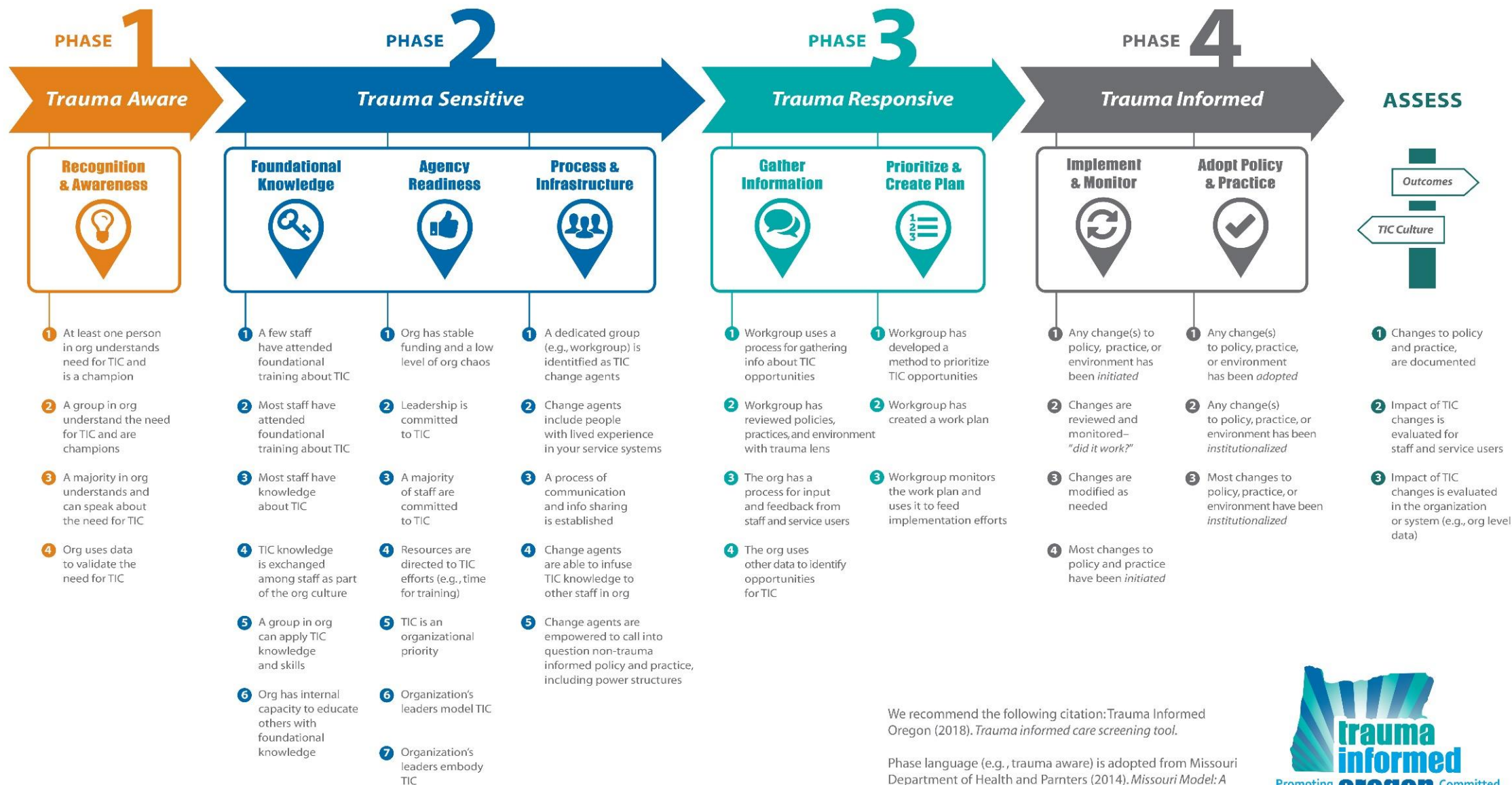
1. Human service settings are populated with people (service users and staff) with experience of past or present trauma.
2. Services and settings can be re-traumatizing for individuals when they feel unsafe or don't feel that they have control, power, choice, voice, or value.
3. Trauma informed care takes these challenges into account and creates services and settings that are safe, empowering, trustworthy, collaborative, and responsive to cultural, historical, and gender issues (based on TIC principles).

Roadmap to Trauma Informed Care

ROADMAP TO TRAUMA INFORMED CARE



Trauma Informed Care Screening Tool



We recommend the following citation: Trauma Informed Oregon (2018). *Trauma informed care screening tool*.

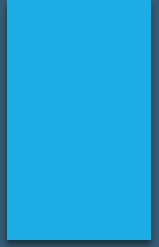
Phase language (e.g., trauma aware) is adopted from Missouri Department of Health and Partners (2014). *Missouri Model: A developmental framework for trauma-informed care*.



Phase 2: Trauma Sensitive

- ▶ Foundational Knowledge
 - ▶ Who needs to know what by when?
 - ▶ Level of knowledge to modify & implement
 - ▶ Socialization
- ▶ Agency Readiness
 - ▶ Are there resources?
 - ▶ Leadership capacity
- ▶ Process & Infrastructure
 - ▶ TIC workgroup for implementation & monitoring

Building readiness and buy-in



Challenges/Resistance:

- ▶ Concerned about more work
- ▶ Think its about trauma therapy – don't understand the difference
- ▶ Believe they can do it
- ▶ Acknowledge what they are doing already
- ▶ It will cost more

Lessons from the field:

- ▶ Having HR involved.
- ▶ Connecting it to other initiatives.
- ▶ Having management involved.
- ▶ Think big - start small.
- ▶ Do something – measure it and report out.
- ▶ Focus on how you are already doing this or strengths.
- ▶ Acknowledging the work.

Phase 3: Trauma Responsive

- ▶ Gather Information
 - ▶ Standards of Practice
 - ▶ What are you already doing & is it enough?
- ▶ Prioritize & Create Plan
 - ▶ Multiple year plan to address priorities.
 - ▶ Ideas are generated from staff and those receiving services.

A structured approach

- ▶ Agency wide assessment tools
 - ▶ Community Connections (Creating a Culture of Trauma Informed Care)
 - ▶ Center for Family Homelessness
- ▶ Standards of Practice for TIC
 - ▶ Framework and concrete benchmarks
 - ▶ Meets national guidelines and OHA policy
- ▶ Using the principles of TIC as framework
 - ▶ Safety (physical and emotional)
 - ▶ Power (collaboration, empowerment)
 - ▶ Self-worth (relationship, peer support, strengths perspective)

The Standards for TIC

Agency Commitment

Leadership invested in learning
Budget for TIC
Feedback sought and used
Workforce wellness a priority
Commitment to equity and diversity

Physical Environment and Safety

Environmental Scan
Staff and consumer
experience
Safe Space
TI crisis protocols in place

Workforce Development

Training
Hiring and Onboarding
Supervision
HR policies and practices
Workforce wellness

Service Delivery

Welcoming environment
Intake process
Staff skill set
Transparent program rules
TSS services available or referred
Peer support

Systems Change and Monitoring

Sustained process for TIC
Self-assessment
Communication
Evaluation, feedback loop

Phase 4: Trauma Informed

- ▶ Implement & Monitor
 - ▶ Quality measures for what has changed
- ▶ Adopt Policy & Practices
 - ▶ Infrastructure of ongoing decision making “TI Board”

Levels of Implementation

- ▶ **Micro level:** the individual experience, where trauma informed care is directly experienced.
 - ▶ Feedback from staff, partners, and individuals seeking or using services. What happened? How did it feel?
- ▶ **Mezzo level:** the structure, infrastructure, commitment and specific action steps at the provider or agency level.
 - ▶ The Standards of Practice for TIC or other tools that can be applied across programs and agencies.
- ▶ **Macro:** the commitment at the policy, funding, and community level.
 - ▶ State agency self-assessment, policy development or support, accountability, investment.

Most Important

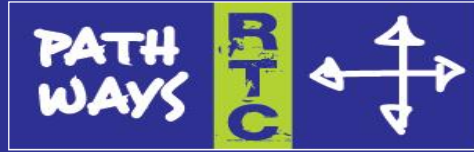
- ▶ Standards don't substitute for hearing directly from staff and those seeking or using services.
 - ▶ **Safety** (emotional and physical)
 - ▶ **Power** (collaboration, choice, empowerment)
 - ▶ **Self-Worth** (relationship, strengths-focus, respect)
- ▶ Feedback sought and used.
- ▶ Supervision, coaching, reflection.

Some Resources.....

- ▶ **Making Your Voice Heard: Suggestions for youth by youth for use in emergency rooms** This tip sheet for youth by youth gives tips and resources for collaborating and engaging with providers so that youth and young adults can better get their needs met. The resource was developed by TIO's Oregon Trauma Advocates Coalition (OTAC). OTAC is comprised of youth from around Oregon who are participating on a monthly youth council to develop trauma informed resources and tools, and give input to improve systems for youth at the local and state level. They used their lived experience to create this resource. <https://traumainformedoregon.org/resource/making-voice-heard-suggestions-youth-youth-use-emergency-rooms/>
- ▶ **Youth Engagement in the Emergency Room** This tip sheet developed by TIO's OTAC aims to equip medical workers with various techniques to engage youth, build self-worth, restore power, and help create feelings of safety in what may be an intimidating and confusing situation. <https://traumainformedoregon.org/wp-content/uploads/2017/07/Youth-Engagement-in-the-Emergency-Room-Tip-sheet.pdf>
- ▶ **For Youth by Youth: Foundations of Trauma Informed Care.** This training revamps the Foundations of TIC training by making it more youth friendly, strengths based, and interactive. This is done by providing opportunities for young adults to engage in discussions on trauma and resilience with scenarios that relate to youth. The training also provides skills and tools to use when feeling activated. <https://traumainformedoregon.org/wp-content/uploads/2018/10/For-Youth-by-Youth-Foundations-of-Trauma-Informed-Care.pdf>
- ▶ **TIC Logic Model** This visual graphic lays out what's needed to implement trauma informed care, what organizations need to do, and what some of the outcomes might be. <https://traumainformedoregon.org/wp-content/uploads/2018/12/Trauma-Informed-Care-Logic-Model.pdf>
- ▶ **Screening Tool and Guidelines** This tool has been created to assist organizations implementing TIC. You can begin by circling the steps that have either been started or completed in the organization. From there, we encourage you to use it in whatever ways make the most sense for your organization. <https://traumainformedoregon.org/wp-content/uploads/2018/12/Screening-Tool-and-Guidelines-FINAL-12.12.18.pdf>
- ▶ **Standards of Practice for Trauma Informed Care** The Standards of Practice for Trauma Informed Care were developed to help organizations, systems, and agencies implement trauma informed care. They were originally created in 2015 and have been updated in 2018 to further assist organizations as they assess already-in-place trauma informed care practices and identify areas for improvement. We encourage you to use these Standards as you plan for and implement trauma informed care. <https://traumainformedoregon.org/standards-practice-trauma-informed-care/>
- ▶ **Trauma Informed Care Initiative History and Accomplishments** In the fall of 2015 Trauma Informed Oregon invited Clackamas Behavioral Health Centers (CBHC) to serve as a demonstration project for the implementation of trauma informed care. <https://traumainformedoregon.org/wp-content/uploads/2016/01/Clackamas-County-Behavioral-Health-Clinics-Timeline-of-the-Trauma-Informed-Care-Initiative.pdf>
- ▶ **How to Host a Meeting** Bulleted list developed by TIO of things to do to take to prepare for and run a meeting that is trauma informed. <http://traumainformedoregon.org/wp-content/uploads/2014/10/Hosting-a-Meeting-Using-Principles-of-Trauma-Informed-Care.pdf>

Questions?





Acknowledgments/Funders



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