

Creating Inclusive Trauma-Informed Environments, Services & Organizations

Applying a Trauma Lens to Our Work

The Environment We Create . . .

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Communicates our beliefs about the people
who participate in our programs

Attending to the Environments We Create

Physical, Sensory & Relational Environments

- Welcoming
- Inclusive
- Culturally-attuned
- Attentive to sensory impact
- Attentive to physical & emotional safety

Creating a Welcoming Environment

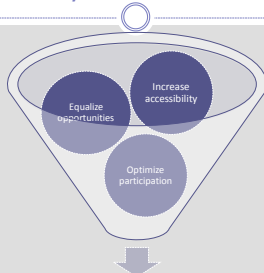


Inclusiveness

- Honoring people's diverse experiences, values & needs
- Gender-inclusive & responsive
- Screening "in" not "out"
- Counteracting stigma
- Person-first language
- Focus on healing & recovery
- Ensuring survivors are at the helm
- Universal access & inclusive design



What Do We Mean by Universal Access & Inclusive Design?



Maximum flexibility in our environments universally

Reframing: Thoughts & Language

- Use **person-first** language (e.g., “people with disabilities”, “women with psychiatric problems or substance use problems”, “women who have trauma histories”, etc.).
- Beware of phrases that **generalize** entire groups of people.
- The words, “**the**” or “**a**” **before** descriptions of people are red flags that the language is potentially discriminating and/or demeaning (*the chronically homeless, the mentally ill, the addicts*).
- Use **descriptive language** rather than characterizing terms.

Using Person-First Language

Examples of “Watch Words” that can demean people:

Say That Again:

- “Attention-seeking”
- “Manipulative”
- “Chronic”
- “Treatment resistant”
- “Acting out”
- “Crazy”

Donna appears to have a hard time getting what she needs. She often goes to extremes to get someone to talk with her, because she has been so neglected in the past.

A welcoming environment is culturally attuned

BE CURIOUS,
BE EMPATHETIC,
BE FLEXIBLE



Understanding Experiences & Accommodating Perspectives

Learning From Other's Cultural Ways of Knowing

- Ceremonies & Rituals
- Traditional Practices
- Mindfulness Approaches
- Breathing
- Movement



Attending to Sensory Impact: Creating Emotional Safety

Adaptations to Physical Environment

Recognize that our unfamiliar office or shelter environment can have an effect on survivors

Tell **every** person who enters your program:

- "If there are things here that make you feel unsafe or uncomfortable, let me/us know . . . we will try to make things comfortable and safe..."

Attending to Sensory Impact: Creating Emotional Safety

• Things that might be challenging:

- Noise, chaos, level of sensory stimulation
- Physical space, privacy needs

• Things that might be trauma reminders:

- Sights, sounds, colors, smells
- Lights out, locked doors, rules
- Hearing other people's stories -- certain activities or expressions

Attending to Sensory Impact: Creating Emotional Safety

• Things that might be helpful

- Calming, soothing colors and décor
- Brightness & soft lighting
- Quiet spaces to be with other people or alone
- Communal spaces where there is activity you can join
- Safe places to be outside
- Flexibility & choice

When trauma occurs in a relationship, the quality of the relationships program staff create with survivors is key.

Relational Environment

Restoring dignity & emotional safety can counter abuser control

- Respectful caring connections
- Empowering information
- Focus on strengths & resilience
- Clarity, consistency, transparency, trustworthiness*
- Survivor-defined choice, mutuality & shared control
- Organizational culture that supports these things

*Harris & Falout 2001

Relational Environment: Empowering Information

- Information to survivors about trauma, triggers & trauma responses.
- Information about procedures, processes, rules, plans & activities.
- Help survivors feel comforted & in control — to re-establish a steady state of ordinary calm.

Programmatic Environment

Examine policies & procedures

- Flexibility
- Adaptation
- Accommodation
- Emotional safety planning
- Barriers to survivor choice & control

Programmatic Adaptations to Support Emotional Safety

For example, talk with each person at intake about:

- How shelter living can be challenging for everyone
- The kinds of issues that often arise
- What you can do to create a more comfortable supportive environment

Discuss the kinds of things people:

- Might find upsetting
- What it's like for them when they feel stressed
- What they find helpful or soothing

Trauma-Informed Approach to Intake: Flexibility & Compassion

- **Timing:** Is this the right time to do intake? Can we collect this information later? Give survivor some control over when the intake is scheduled.
- **Information:** Explain the process, confidentiality & privacy rights, limits to confidentiality, she can decline to answer ?'s.
- **Use compassionate and conversational approach:** Alter questions to be less intrusive or abrupt. Use good listening skills & body language.
- **Shorten the process:** Intake process & information we collect should be as short as possible.

End the intake by checking-in with survivor about how she feels.

Facilitating Healing, Resilience & Well-Being

- Work with survivors on strengthening or developing new skills for dealing with painful or disruptive feelings such as:
 - Relaxation training or exercises
 - Grounding techniques
 - Mindfulness or body-based strategies
 - Developing an emotional safety plan
- Incorporate experiences of mental health & substance abuse coercion into safety planning
- Work with survivors to anticipate & prepare for trauma reminders
- Encourage peer support between survivors

Considering Our Environments Worksheet

ACTIVITY

Organizational Commitment & Staff Supports

Impact of Stress on Programs

Parallel Process

- Complex interaction between traumatized clients, stressed staff, pressured organizations & challenging social, political and economic environments.
- Our systems can inadvertently recreate re-traumatizing experiences or environments for survivors &/or for staff

Bloom, S. 2010; www.sanctuaryweb.com

Attending to the Impact of Trauma at the Organizational Level:

Parallel Process

Impact of stress and trauma on programs



Impact on staff who work there



Impact on people accessing services

Bloom, S. SAGE for Organizations, NCDVTMH, 2009

Organizational Commitment & Infrastructure

Some of the ways that your organization might show its commitment to trauma-informed work in its:

- Mission statement & written policies
- Human resources policies & practices
- Governance, leadership & financing
- Training & supervisory policies & practices
- Evaluation of services provided

Causes of Burnout

- | | |
|--|--|
| <ul style="list-style-type: none"> • Workload <ul style="list-style-type: none"> ○ Too much work, limited resources • Control <ul style="list-style-type: none"> ○ Micromanagement, decision-making power • Rewards <ul style="list-style-type: none"> ○ Pay, acknowledgement, benefits • Community <ul style="list-style-type: none"> ○ Isolation, conflict, disrespect | <ul style="list-style-type: none"> • Fairness <ul style="list-style-type: none"> ○ Discrimination, favoritism • Values <ul style="list-style-type: none"> ○ Ethical conflicts, meaningless tasks, alignment with agency mission • Supervision <ul style="list-style-type: none"> ○ Support, training • Role in organization <ul style="list-style-type: none"> ○ Ambiguity |
|--|--|

Maslach & Leiter Quick Burnout Assessment



Burnout Prevention Strategies

- Identify the “mismatch” and consider a solution that will work best for you
 - Work load
 - Role in the agency
 - Ideas and inspirations
- Reach out to co-workers
- Ask for reflective supervision
- Attend trainings regularly

Supporting Staff Through Use of Reflective Supervision



Types of Maintenance in Home Environment

- Service Maintenance
 - Repair of malfunctioning equipment
- Installation
 - Reconstruction or replacement of buildings or equipment
- Preventive Care
 - Scheduled interventions and repairs to preserve proper functioning of equipment and prevent malfunctions

Types of Maintenance in Work Environment

- Service Maintenance
 - Sick leave, employee discipline
- Installation
 - Replacing worn out staff with new people
- Preventive Care
 - **What are your thoughts about this?**

Addressing staff well-being is not coddling or fluff.

Individual well-being is a critical program resource



We find reflective learning opportunities in:

- Struggles
- Dilemmas
- Uncertainty
- Breakthroughs

What do we mean by reflective?



Reflection

- Offers a safe & reliable space to explore interactions & individual responses to them as they occur in the work.
- Based upon the supervisor's & advocate's ability to explore strengths & the interactions, experiences & feelings an advocate has that may be impacting relationships & effectiveness with survivors.
- The supervisor offers opportunity to consider this from alternative perspectives.

Parallel Process

- Advocates benefit from nurturing conversation & exploration of relationships with survivors.
- This supports capacities to continue to be nurturing in those relationships.
- The goal of reflective practice is to improve service quality & enhance advocates' skills.

Supervision

Identifying & solving specific problems for staff?

OR

Working jointly with advocates on a path toward growth?

The Reflective Process (Whitehead, 1994)

- **Gather the Information**

- Describe, explain the context, clarify

- **Reflect**

- What was I trying to achieve? What were the consequences?
What do I feel about this? What other things could I have done?

- **Learn**

- What about now? What have I learned? How will it influence future practice?

Early Steps: Reflective Questions in Supervision

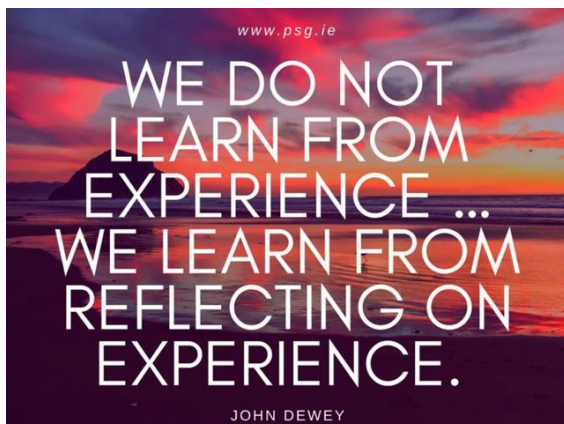
- What is on **your mind** about your work this week?
- Is there anything **you'd like help** with?
- What has gone **well in your work** this week?

Early Steps: Before You Offer Suggestions or Direction

- "What are **your thoughts** about the situation?"
- "What have **you** tried?"
- "What has **worked in the past** in a similar situation?"

Building Blocks of Reflective Supervision

- Reflection
- Collaboration
- Regularity



Early Steps Toward Trauma-Informed Practice

Ask ourselves:

- In what ways do trauma-informed services have relevance for our work?
- What do we already know about trauma and trauma-informed practice?
- What do we know about change in our program?

Content adapted from National Center on Domestic Violence, Trauma & Mental Health

When Implementing Change . . .

- **Study where you are now.**
- **Start with small changes.**
- **Use the culture around you.**

Content adapted from National Center on Domestic Violence, Trauma & Mental Health; Nevis, DiBella, Gould, 1994

Is Your Agency Ready to Begin a Self-Reflective Process?

Questions to Ask

- | | |
|---|--|
| <ul style="list-style-type: none"> • What will it take? • What are the benefits? • Who “owns” this process? • What is the vision we share? • Are we including survivors? • What would we need to do to make it work well? | <ul style="list-style-type: none"> • What challenges might come up? • What are the alternatives? • What other help, preparation, information do we need? • When ready, who else can we engage? |
|---|--|

What is the speed of human change?



Organizational Reflection Tool

1. Organizational Commitment
2. Physical Environment
3. Intake & Assessment
4. Program & Services
5. Staff Support
6. External Relationships
7. Evaluation & Feedback

There are two ways of spreading light ...

To be the candle, or the mirror that reflects it.

~ Edith Wharton ~



Resources

- National Center on Domestic Violence, Trauma and Mental Health
www.nationalcenterdvtraumamh.org
- National Center for Trauma-Informed Care, Substance Abuse and Mental Health Services Administration
www.samhsa.gov/nctic
- Ohio Domestic Violence Network
www.odvn.org
- National Center on Family Homelessness www.familyhomelessness.org

Georgia Coalition Against Domestic Violence www.gcadv.org

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