Creating a Trauma-Informed Organization
To create change is not by confronting something head on but by telling stories, meeting with people, listening to them and then trying to find a way to reach the heart. If we think locally, get together with other like minded people, take action, we realize there IS something we can do."

Jane Goodall – How we can Create Change!
Let’s get to know each other!

Ané Watts - MBA, PCC, owner of ANEW Life & Work

• 30 + years senior management level experience with non-profit and educational organizations

• Executive and Team Leadership Coach specializing in program development, management skills, cross-section collaboration, change management, team development and implementing trauma informed systems of care

• Non-profit experience includes creating, developing and managing residential supported housing for dual diagnosed youth, families and chronically homeless
Workshop Goals

• Gain an understanding of trauma, traumatic stress and impact

• Awareness of ACEs, Trauma Informed Care Key Principles and Assumptions

• Recognize the importance of a Trauma Informed, educated, aware and responsive organization

• Review organizational shift strategies to move toward becoming trauma-informed

• Become familiar with TIC best practices and recognize the importance of self-care and supporting staff wellness
What is Trauma?

Event(s) – actual event or circumstances, single or repeated

Experience of the event(s) – individual’s determination whether it is traumatic; how meaning is assigned

Effect – adverse, immediate or delayed onset, short or long term duration

Trauma experiences often overwhelm the persons coping resources. This often leads the person to find a way of coping that may work in the short run but may cause serious harm in the long run.

TRAUMAS ARE REMEMBERED!
What Makes an Experience Traumatic?

• Overwhelming, very painful, very scary
• Fight or Flight incapacitated
• Threat to physical or psychological safety
• Loss of control
• Unable to regulate emotions

*Trauma is the response to the event, not the event itself*
Acknowledging the high prevalence of Trauma

Adverse Childhood Experiences – ACE’s (Adverse Childhood Experiences)

Robert F. Anda, Vincent J. Felitti, MD, Carol A. Redding, MA

17,000 Kaiser patients, San Diego

Abuse, Neglect & Exposure to other Traumatic Stressors are COMMON

Almost two-thirds of participants reported at least one ACE incident, and more than one in five reported three or more ACE.

2016 National Survey of Children’s Health revealed that over 46 percent of children in the United States have experienced at least one ACE
Trauma causes brain to adapt in ways that contributed to their survival (i.e. constant fight/flight/freeze).

These adaptations can look like behavior problems in “normal” contexts, such as school.

When triggered, “feeling” brain dominates the “thinking” brain.

The normal developmental process is interrupted, and child/adolescent/adult may exhibit internalizing or externalizing behaviors.
More than half of adolescents have had at least one of these adverse childhood experiences, and nearly one in ten have experienced four or more.
Three Types of ACEs

<table>
<thead>
<tr>
<th>ABUSE</th>
<th>NEGLECT</th>
<th>HOUSEHOLD DYSFUNCTION</th>
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<tbody>
<tr>
<td>Physical</td>
<td>Physical</td>
<td>Mental Illness</td>
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<td>Emotional</td>
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<td>Incarcerated Relative</td>
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<td>Sexual</td>
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<td>Mother treated violently</td>
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<td>Substance Abuse</td>
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By the Numbers

• 1 in 6 men experienced trauma
• 1 in 5 Americans sexually molested
• 1 in 4 beaten by a parent
• 1 in 3 couples engages in physical violence
• 25% grow up with alcoholic relatives
• 1 in 8 witnessed their mother being beaten or hit
Impact of Trauma Over the Lifespan

Neurological, biological, psychological and social in nature
They include: changes in brain neurobiology; Social, emotional & cognitive impairment
Adoption of health risk behaviors as coping mechanisms: eating disorders, smoking, substance abuse, self harm, sexual promiscuity, violence
Severe and persistent behavioral health, health and social problems, early death
(Felitti et al, 1998)

One of the most important results of the ACE Study:
	Trauma does NOT equal only violence. It does not equal only neglect. Violence is just one type of trauma. Neglect is one type.
Key Concept Underlying the ACE Study
ACEs Increases Health Risks
Additional Causes Of Trauma

Natural or Human-caused
Individual, group, community and mass trauma
Trauma affecting communities and cultures
Mass trauma
Interpersonal trauma
Political terror and war
Refugees
System Oriented Trauma: Re-traumatization
• Traumatic stressors such as early trauma can lead to posttraumatic stress
• Affects about 8% of Americans at some time in their lives
• Depression, substance abuse, dissociation, personality disorders, and health problems
• PTS can be a lifelong problem.
Fight, Flight & Freeze

**FIGHT**
Hyperactivity, verbal aggression, oppositional behavior, limit testing, physical aggression, “bouncing off the walls”

**FLIGHT**
Withdrawal, escaping, running away, self-isolation, avoidance

**FREEZE**
Stilling, watchfulness, looking dazed, daydreaming, forgetfulness, shutting down emotionally
TRIGGERS

Seeing, feeling, hearing, smelling something that reminds us of past trauma

Activates the alarm system...

The response is as if there is current danger.

Thinking brain automatically shuts off in the face of triggers.

Past and present danger become confused.

Survival is the Key at this point!
Planning
Organizing
Regulating Attention
Decision Making
Moderating behavior
Personality expression
Motivation
Mood

Regulation of all this goes “off-line” during stress.
Taking a Trauma Informed Approach

1. Realize the widespread impact of trauma
2. Recognize the signs and symptoms of trauma in clients, families, staff and others
3. Integrate knowledge about trauma into polices, procedures and practices
4. Seek to actively resist re-traumatization

http://www.samhsa.gov/nctic/trauma-interventions
Definition of a Trauma Informed Organization

The 4 Key Assumptions

Realize – basic understanding of how affects individuals, families, children and communities

Recognize – through screening and assessment, workforce development and supervision

Respond – by integrating an understanding that trauma impacts all involved and establishes protocols, budget allowances and leadership and that the culture promotes an informed environment

Resist re-traumatization – organization seeks to be aware of practices not supporting well being of staff and those they serve
Trauma Informed approach...

...changes the culture of an organization

...changes how to think about and respond to those who have experienced trauma

...seeks to resist re-traumatization of clients as well as staff

...supports Consumer control, choice and autonomy
Organizational Trauma

- Ripple effect
- Parallel process
- Effect of vicarious trauma heightened
- Organizational culture can cause repeated exposure to trauma
- Re-exposure to trauma fragments and destroys relationships within the workforce
• Transmitted between interaction with clients, families and communities and staff, to their supervisors, support staff, administration across the organization and across service delivery systems.

• Systems in working relationship with traumatized clients concurrently develop similar affects, cognitions, and behaviors and transmit symptoms back and forth.

• Vicarious trauma is heightened by personal life experiences of staff at all levels which can create more organizational stress and fragmentation which impedes service delivery as well as organizational effectiveness at all levels.
What is a Trauma Informed Organization?

• One that understands, thinks about and responds to the role of trauma and a trauma informed approach to promote a calm, secure and supportive environment for the benefit of clients and staff

• Integrates knowledge about trauma into policies, procedures, management practices and settings
Six Key Principles
Trauma Informed Care Approach

1. Safety
2. Trustworthiness and Transparency
3. Peer Support
4. Collaboration and Mutuality
5. Empowerment, Voice and Choice
6. Cultural, Historical and Gender Issues
Ten Implementation Domains
(Not a checklist)

1. Governance and Leadership
2. Policy
3. Physical Environment
4. Engagement and Involvement
5. Cross Sector Collaboration
6. Screening, Assessment, Treatment Services
7. Training and Workforce Development
8. Progress Monitoring and Quality Assurance
9. Financing
10. Evaluation
Developing a Trauma Informed Culture

• **Nonviolence** - Helping to build safety skills and a commitment to higher goals

• **Culture of emotional intelligence** - Helping to teach effective management skills

• **Culture of inquiry & social learning** - Helping build cognitive skills

• **Culture of shared governance** - Helping to create civic skills of self-control, self-discipline, and administration of healthy authority

• **Culture of open communication** - Helping to overcoming barriers to healthy communication, reduce acting-out, enhance self-protective and self-correcting skills, teach healthy boundaries

• **Culture of social responsibility** - Helping to rebuild social connection, skills, establish healthy attachment relationships

• **Culture of growth and change** - Helping to restore hope and meaning
Why is this important?

• Organizations may unintentionally cause harm by rigid practices, policies and assessments that are not sensitive and responsive to client’s needs

• Understanding that a trauma informed organizational approach recognizes that staff’s personal traumas or work related stressors may impact their emotional and physical well being, success and job satisfaction
And how does this affect the organization?

• Chronic emotional stress...
  Secondary traumatic stress, compassion fatigue, vicarious traumatization
  Symptoms of emotional stress
  Guilt, social withdrawal, anger, cynicism, chronic exhaustion, physical illness, inability to listen and loss of creativity

• Can Lead to...
  Negative organizational outcomes... limited emotional resources to provide high quality interactions and case management which could contribute to resident re-traumatization

• Resulting in...
  Job dissatisfaction, high turnover, time-consuming and costly replacement process
Human service work challenges your own personal resources

Working with people who are struggling with serious life difficulties may contribute to:

• Emotional exhaustion
• Disappointment or frustration with a lack of accomplishment (lacking job success and satisfaction)
• Becoming impatient and finding our compassion and empathy declining (compassion fatigue)
Why is trauma-informed care important in the work you do

• To provide effective services you need to understand the life situations that may be contributing to the client’s current problems

• Many problems faced by the people you serve may be related to traumatic life experiences

• People who have experienced traumatic life events are often very sensitive to situations that remind them of the people, places or things involved in their traumatic event.

• These reminders, also known as *triggers*, may cause a person to relive the trauma and view your organization as a source of distress and not as a healing and welcoming environment
How can the entire organization be involved in implementing a Trauma Informed Approach?
LISTEN! Be in the Moment! Be Attentive! LISTEN!

• You don’t know what kinds of experiences your clients have had when they present for services, so approach them in a universally sensitive manner
• If you assume that their presenting issues are not related to trauma, then you miss a great opportunity to help
• If you assume trauma may be playing a role, then you begin to pay attention to signs of trauma and ask the right questions
Trauma may play a role in the person’s current life difficulties...

- Engage the person in exploring his/her life history related to trauma in a way that is respectful and sensitive

- Insure that your policies, procedures, activities, environment and ways that you relate and talk to each other creates a safe and trusting environment
How you may unintentionally cause your clients to relive their trauma: The importance of relationships

WHAT HURTS

• Interactions that are humiliating, harsh, impersonal, disrespectful, critical, demanding, judgmental

WHAT HELPS

• Interactions that express kindness, patience, reassurance, calm and acceptance and active listening

Frequent use of words like PLEASE and THANK YOU
How you may unintentionally cause your clients to relive their trauma: The importance of the physical environment

What hurts

• Congested areas that are noisy
• Poor signage that is confusing
• Uncomfortable furniture
• Cold non-inviting colors and paintings/posters on the wall

What helps

• Treatment and waiting rooms that are comfortable, calming and offers privacy
• Furniture is clean and comfortable
• No wrong door philosophy: we are all here to help
• Wall coverings, posters/pictures are pleasant and conveys a hopeful positive message
How you may unintentionally cause your clients to relive their trauma: The importance of your policies and procedures

What hurts

• Rules that always seem to be broken (time to take a second look at these rules)
• Policies and Procedures that focus on organizational needs rather than on client needs
• Documentation with minimal involvement of clients
• Many hoops to go through before a client’s needs are met
• Language barriers

What helps

• Sensible and fair rules that are clearly explained (focus more on what you CAN DO rather than what you CAN’T DO)
• Transparency in documentation and service planning
• Materials and communication in the person’s language
• Continually seeking feedback from clients about their experience in the program
How you may unintentionally cause your clients to relive their trauma: The importance of your attitudes and beliefs

What hurts

• Asking questions that convey the idea that “there is something wrong with the person”
• Regarding a person’s difficulties only as symptoms of a mental health, substance use or medical problem

What helps

• Asking questions for the purpose of understanding what harmful events may contribute to current problems: What happened to you?
• Recognizing that mental health, substance use and physical health symptoms may be a person’s way of coping with trauma
Everyone Makes the Difference!

Every contact with a client and with each other will affect us in one of two ways:

1. Contribute to a safe, trusting and healing environment
   OR
2. Detract from a safe and trusting environment

**Everyone working in your organization is important**

- You all play a role in assisting participants to heal and make progress in their lives
- You all matter when it comes to creating a safe, trusting and healing environment for staff and residents
Let’s talk about Leadership’s Role!

- Leadership in a trauma informed organization involves setting a clear vision, building steady and dependable trust, providing a safe and validating environment and empowering the team to reach their individual and collective goals.
- Supporting and encouraging mutual trust and solidarity and modeling healthy relationships, and compassionate and safe interactions with residents and staff.
Best Practices to start this change Process

• Leadership must champion this transformation by allocating staff, time, and funds
• Empower others, staff and clients to take responsibility for implementation and for maintaining momentum
• Be responsive to change and create a sense of urgency
• Create quick wins by implementing some changes now
• Make the changes toward the new Trauma-Informed culture
• Incorporate on-going Evaluation
Each level of the organization has responsibilities in this process

- Supportive and invested Leadership
- Organizational shift to include policy changes
- Creating a safe and collaborative physical environment
- All agency programs and community involvement
- Resident driven engagement and meaningful participation
- Trauma Informed educated, aware and responsive staff
- Implementation of best practices/ongoing evaluation
How understanding trauma and a trauma-informed organization improves services

- Increases safety, sensitivity and awareness for all
- Improves the social environment in a way that improves relationships for all
- Cares for the caregivers
- Increases the quality and depth of services
- Reduces negative encounters and events
- Creates a community of *hope and health* and a sense of well-being
- Increases success and satisfaction and improves productivity and creativity
Creating a Safe Environment

Physical Environment
- Keeping parking lots, common areas, bathrooms, entrances, and exits well lit;
- Ensuring that people are not allowed to smoke, loiter, or congregate outside entrances and exits;
- Monitoring who is coming in and out of the building;
- Positioning security personnel inside and outside of the building;
- Keeping noise levels low;
- Using welcoming language on all signage; and have clear access to the door and can easily exit if desired
Social-Emotional Environment

• Welcoming residents and ensuring that they feel respected and supported;
• Ensuring staff maintain healthy interpersonal boundaries and can manage conflict appropriately;
• Keeping consistent schedules and procedures;
• Offering sufficient notice and preparation when changes are necessary;
• Maintaining communication that is consistent, open, respectful, and compassionate; and
• Being aware of how an individual’s culture affects how they perceive trauma, safety, and privacy.
Strategies for Promoting and Encouraging Staff Wellness

• Encourage self-care activities like mindfulness practice, yoga, exercise and healthy eating to build resilience
• Provide trainings that create awareness of chronic emotional stress and the importance of self-care
• Foster a culture that encourages staff to seek support, keep caseloads manageable and provide sufficient mental health and paid time off benefits
• Implement reflective supervision, during which time staff and their supervisors meet to address feelings about resident interactions
What can you do to implement Trauma-Informed Care practices?

What strategies can be implemented now to start to shift the organizational culture to becoming Trauma-Informed?

“You must be the change you wish to see in the world.”

~ Mahatma Gandhi~
Consider a vision statement that includes one or more of the following principles and values

- Safety, calm and secure environment
- Every single person is important
- Cultural Competence
- Consumer voice, choice and self-advocacy
- Recovery, consumer driven and trauma-specific services
- Healing, hopeful, honest and trusting relationships
Everyone in the organization can make a difference!
“We do not believe in ourselves until someone reveals that something deep inside us is valuable, worth listening to, worthy of our trust, sacred to our touch.

Once we believe in ourselves we can risk curiosity, wonder, spontaneous delight or any experience that reveals the human spirit.”

E.E. Cummings
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