

Building and Supporting a Trauma-Informed Behavioral Health Organization

Presented by Michele Simone and Barry Johnson Transitions-Mental Health Association

Presenters



- Barry Johnson (he/him/his)
 - Deputy Director at Transitions-Mental Health Association
 - Chair of TMHA Trauma-Informed Steering Committee
 - Co-founder of Trauma-Informed SLO



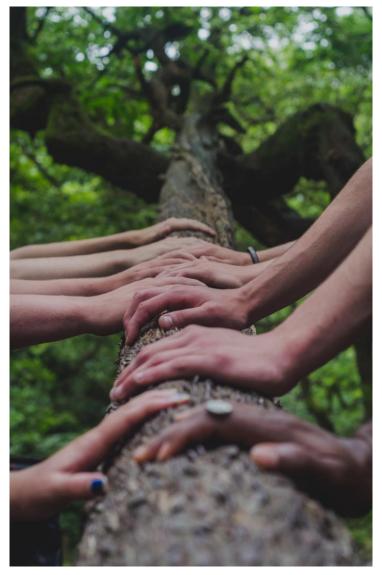
- Michele Simone, LMFT/LPCC (she/they)
 - Consultant at Transitions-Mental Health Association
 - Chair of TMHA Trauma-Informed Steering Committee
 - Co-founder of Trauma-Informed SLO



Learning Objectives

- Shared Agreements
- A baseline review of Trauma-Informed Care: TIC definition, ACEs, Window of Tolerance, and HOPE (Healthy Outcomes from Positive Experiences)
- An overview of TMHA's process in building a Trauma-Informed agency: agency champions, SAMHSA's TIP 57, Steering Committee development, leadership buy-in, annual implementation plan review, additional organizational models
- A scan of TIC activities and achievements from TMHA's TIC Steering Committee including integration with DEI efforts and future goals





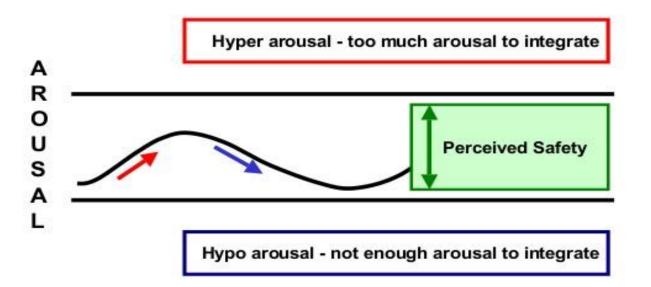
Shared Agreements

- We assume positive intent while acknowledging that intent is different than impact
- We acknowledge that we all come from diverse backgrounds
- We foster belonging
- We do not ask others to teach us about their identities
- We utilize TMHA's "Guidelines for Collaborative Conversations"
- We are aware of who is in the room
- We all share responsibility for this space
- We work to create a brave space
- We are aware of how much we are participating
- All forms of participation in this group are voluntary
- We address concerns and...engage in a repair process
- We rely on the use of a "parking lot"
- We honor confidentiality



Photo by Shane Rounce on Unsplash

Window of Tolerance



Adapted from Empowering the body in the treatment of trauma: The role of Sensorimotor Processing in trauma, by P. Ogden, 2006. Paper presented at the conference: The Embodied Mind: Integration of the Body, Brain, and Mind in Clinical Practice, Los Angeles, CA.

Slide by Sophia Deborah Erez@ 2008

520.302.5859



Trauma

- Trauma is what happens inside individuals, families, cultures, and systems when there is an unpredictable, and/or sustained and chronic experiences involving the absence of social, psychological and/or physical safety.
- Trauma can result from various experiences and events, such as abuse, violence, or discrimination, and can have long-lasting impacts.
- Trauma often involves a sense of threat to one's life, one's integrity, and one's sense of being real, being whole, being valued.

-Van der Kolk, B. A. (2014). The Body Keeps the Score: Brain, Mind, and Body in the Healing of Trauma. Viking -Levine, P. A. (2010). In an Unspoken Voice: How the Body Releases Trauma and Restores Goodness. North Atlantic Books

-Schwartz, A. (2020). The Post-Traumatic Growth Guidebook: Practical Mind-Body Tools to Heal Trauma, Foster Resilience, and Awaken your Potential.

-Photo by Hans-Peter Gauster on Unsplash



Trauma Informed Care (TIC)

- An approach, organizational structure, and treatment framework that recognizes the prevalence and impact of trauma on individuals, families, groups, systems, and communities.
- TIC seeks to respond to the prevalence of trauma by creating a safe and supportive environment that promotes hope, healing, and resilience. It works to avoid re-traumatization—and foster a sense of empowerment.
- Emphasizes physical, psychological and emotional safety for everyone: staff, peers, administrators and for all sectors of a community.

-Substance Abuse and Mental Health Services Administration. (2014). Trauma-Informed Care in Behavioral Health Services (Treatment Improvement Protocol [TIP] Series 57). U.S. Department of Health and Human Services

-Trauma Informed Care Project. (n.d.). Retrieved from <u>https://traumainformedcareproject.org</u> Photo by <u>Jonny Gios</u> on <u>Unsplash</u>



Adverse Childhood Experiences (ACE) Study

The largest study* of its kind ever to examine over the lifespan the medical, social, and economic consequences <u>in adults</u> of adverse childhood experiences.

*(>17,000 participants)

<u>Center for Disesase Control: https://www.cdc.gov/violenceprevention/acestudy/)</u>

 Burke Harris, N. (2018). The Deepest Well: Healing the Long-Term Effects of Childhood Adversity. Houghton Mifflin Harcourt.





"If 100 children are drinking out of a well, and 98 of them get diarrhea, we can give them dose after dose of antibiotics..."





"...or we can walk over and say 'what the heck is in this well'?!"

Nadine Burke Harris, TED Talk;
former Surgeon General of
California

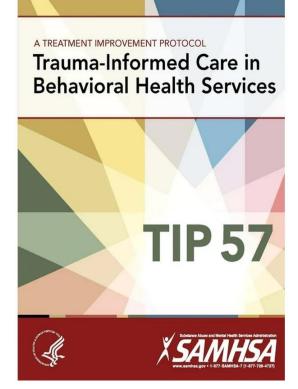




TRAUMA AWARE PRINCIPLES

- Safety
- Trustworthiness and Transparency
- Peer Support and Mutual Self-Help
- Collaboration and Mutuality
- Empowerment, Voice, and Choice
- Cultural, Historical, and Gender Issues

Substance Abuse and Mental Health Services Administration. (2014). Trauma-Informed Care in Behavioral Health Services (Treatment Improvement Protocol [TIP] Series 57). U.S. Department of Health and Human Services.





Shift in Lens



From:

What's wrong with you?

То:

What happened to you?

Photo by Martin Sanchez on Unsplash



ACE Study launches a Trauma-Informed Lens

PUBLIC HEALTH PARADOX

What are conventionally viewed as Public Health *problems* are often personal <u>solutions</u> to longconcealed adverse childhood experiences.



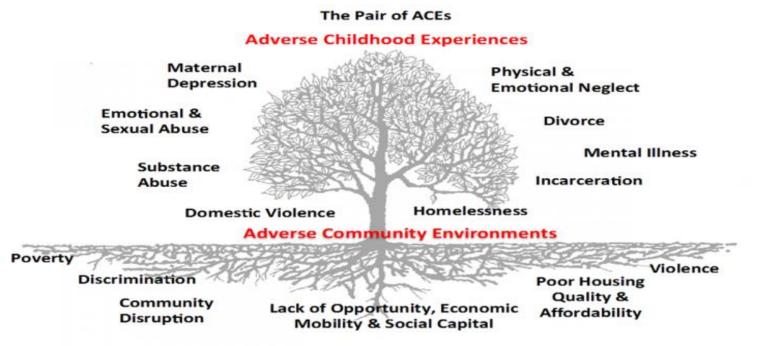
Problems or symptoms are viewed as adaptive solutions to maladaptive circumstances



Example: Excessive substance use viewed as a survival strategy driven by survival physiology



Beyond the ACE Study

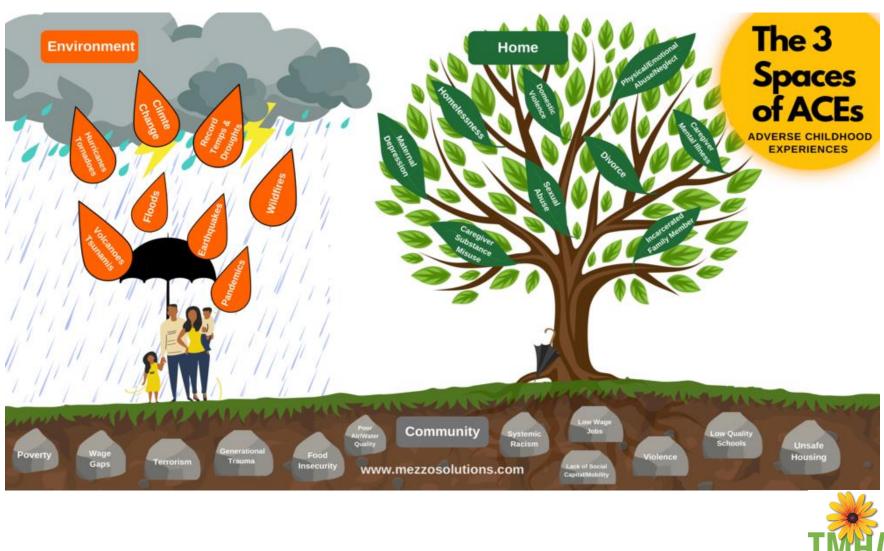


Ellis, W., Dietz, W. (2017) A New Framework for Addressing Adverse Childhood and Community Experiences: The Building Community Resilience (BCR) Model. Academic Pediatrics. 17 (2017) pp. S86-S93. DOI information: 10.1016/j.acap.2016.12.011



This work is licensed under the CC-8Y-NC-SA 4.0 License. To view a copy of the license, visit <u>https://creativecommons.org/licenses/by-nc-sg/4.0/</u>. Noncommercial use of this material is allowed, including modification, with attribution to the license holder: Building Community Resilience, Redstone Global Center for Prevention and Wellness, Milken Institute School of Public Health, George Washington Universi Visit <u>oc.gwn.edu/RCS</u> for the original work.





Transitions-Mental Health Association

EXPANDING OUR LENS

Transphobia Domestic Violence Homophobia Islamophobia
Homophobia Islamophobia
Homophobia Islamophobia
Islamonhobia
Interpersonal Sexual Harassment
Ableism Trauma
Ageism Micro-aggressions
Bullying Human Trafficking
Sexism Individual Immigration Policies
Xenophobia Trauma Anti-Semitism
Unconscious Bias Domestic Terrorism
Sexual Violence Abuse of Power and Control
Adverse Childhood Experiences - ACES Social and Behavioral Determinants of Health

© Lewis-O'Connor, A. 2015 © Rittenberg, E. 2015 © Grossman, S. 2015. Updated 2018.



Not "What's wrong with you" ... Rather "What's strong with you!"





Wisconsin Behavioral Risk Factor Survey (BRFS) 2015-2019

Positive Childhood Experiences Scale:

As a child, how often did you...

- Talk with family about feelings?
- Have the sense that family is supportive during difficult times?
- Participate in community traditions?
- Feel a sense of belonging in high school?
- Feel supported by friends?
- Have at least two non-parent adults who genuinely cared?
- Feel safe and protected by an adult in the home?



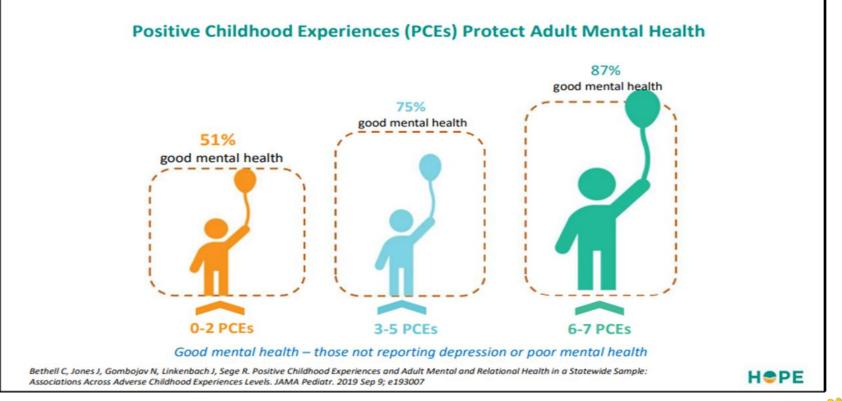
Photo by Robert Collins on Unsplash



-https://www.dhs.wisconsin.gov/stats/brfs.htm

-https://JAMA network. com/journals/JAMA pediatrics/articleabstract/2749336-

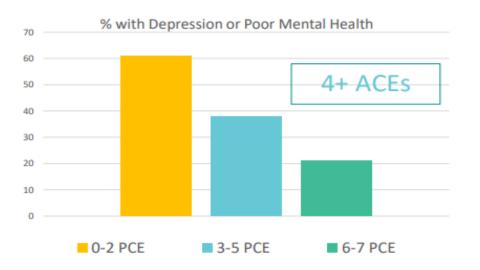
Positive Childhood Experiences





How PCEs impact ACEs

Positive Childhood Experiences Mitigate ACEs Effects



Bethell C, Jones J, Gombojav N, Linkenbach J, Sege R. Positive Childhood Experiences and Adult Mental and Relational Health in a Statewide Sample: Associations Across Adverse Childhood Experiences Levels. JAMA Pediatr. 2019 Sep 9; e193007



HOPE: **Healthy Outcomes from Positive Experiences**

BUILDING BLOCKS OF HOPE

- Relationships
- Environment
- Engagement
- Emotional growth

A new way to advance health and wellbeing for children, families and communities

The HOPE National Resource Center (NRC) sees a world that honors and fosters positive experiences as being fundamental to everyone's health and well-being. The HOPE NRC aims to inspire a HOPE-informed movement that fundamentally transforms how individuals and organizations advance health and wellbeing for children, families, and communities,

The HOPE Framework

The importance of positive childhood experiences (PCEs)

Research shows that positive childhood experiences (PCEs) drive healthy development and lessen the effects of adverse childhood experiences (ACEs). PCEs allow children to form strong relationships and meaningful connections. cultivate positive self-image and self-worth. experience a sense of belonging, and build skills to cope with stress in healthy ways.

The Four Building Blocks of HOPE

The Four Building Blocks promotes PCEs that help children grow into healthy, resilient adults. PCEs in these four areas can protect against long term health outcomes associated with ACEs, and the HOPE National Resource Center wants to help increase access to these opportunities for all children and families.

Connecting the Building Blocks

Children's brains develop in response to experiences, both positive and harmful. The HOPE framework describes PCEs in supportive environments. These experiences and the relationshipe around promote child and adult engagement leading to social, emotional, and cognitive grov

playing, learning at home and in school Engagement

Social and civic engagement to develop a sense of belonging and connectedness

and with other children and

adults through interpersonal

Relationships Relationships within the family

activities

Environment

Safe, equitable, stable

environments for living,



self-regulation



Healthy Outcomes from Positive Experiences: positiveexperiences.org

Neuroplasticity & Post-traumatic Growth

- Brain changes with and is shaped by every experience
- Growth occurs throughout the lifespan
- Positive neuroplastic change requires replacing old responses with intentional repetition of new, more adaptive responses
- · Implications for value and ethic of self-care



Photo by Ashim D'Silva on Unsplash

-Healthy Outcomes from Positive Experiences: positive experiences.org -Schwartz, A. (2020). The Post-Traumatic Growth Guidebook: Practical Mind-Body Tools to Heal Trauma, Foster Resilience, and Awaken your Potential.



To be

Trauma-Informed

is also to be

Hope-Informed





Home > About Us > Trauma Informed Care

TMHA AS A TRAUMA INFORMED AGENCY

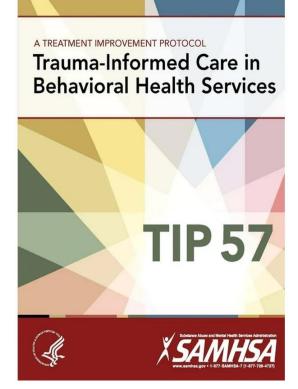
We acknowledge and address the pervasive impact of trauma on our clients, family members, and staff, which means that we promote environments that support recovery and healing in all that we do.



TRAUMA AWARE PRINCIPLES

- Safety
- Trustworthiness and Transparency
- Peer Support and Mutual Self-Help
- Collaboration and Mutuality
- Empowerment, Voice, and Choice
- Cultural, Historical, and Gender Issues

Substance Abuse and Mental Health Services Administration. (2014). Trauma-Informed Care in Behavioral Health Services (Treatment Improvement Protocol [TIP] Series 57). U.S. Department of Health and Human Services.





SAMHSA Tip 57 – Organizational Strategies

Strategy #1: Show Organizational and Administrative Commitment to TIC

Strategy #2: Use Trauma-Informed Principles in Strategic Planning

Strategy #3: Review and Update Vision, Mission, and Value Statements

Strategy #4: Assign a Key Staff Member To Facilitate Change

Strategy #5: Create a Trauma-Informed Oversight Committee

Strategy #6: Conduct an Organizational Self-Assessment of Trauma-Informed Services A TREATMENT IMPROVEMENT PROTOCOL Trauma-Informed Care in Behavioral Health Services





Strategy #7: Develop an Implementation Plan

Strategy #8: Develop Policies and Procedures To Ensure Trauma Informed Practices and To Prevent Retraumatization

Strategy #9: Develop a Disaster Plan

Strategy #10: Incorporate Universal Routine Screenings

Strategy #11: Apply Culturally Responsive Principles

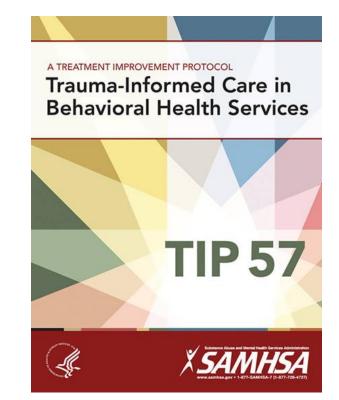
Strategy #12: Use Science-Based Knowledge

Strategy #13: Create a Peer-Support Environment

Strategy #14: Obtain Ongoing Feedback and Evaluations

Strategy #15: Change the Environment To Increase Safety

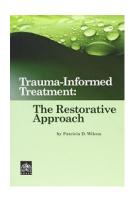
Strategy #16: Develop Trauma-Informed Collaborations





Additional TIC Models

- Trauma-Informed Treatment: The Restorative Approach, Patricia D. Wilcox, LCSW
- HOPE
- National Council for Mental Wellbeing: Trauma-informed, Resilienceoriented, Equity-focused Systems (TIROES)
- Missouri Model
 - Trauma Aware
 - Trauma Sensitive
 - Trauma Responsive
 - Trauma Informed





HEALTHY MINDS . STRONG COMMUNITIES





Transitions – Mental Health Association's Trauma-Informed Steering Committee Mission Statement

To advise on the formulation and implementation of policies and procedures to ensure that TMHA utilizes a trauma-aware and hope-informed lens when addressing the needs of all within the organization.



<u>Guidelines for Collaborative</u> <u>Conversation</u>





Organizational Engagement

- Committee members represent a cross section of organization, including: peer and family employees, direct service staff, management, administration, and HR
- Bi-annual survey
- New Employee Orientation
- Monthly training, lunch and learns
- TIC mandatory training
- Board Presentation
- Administrative Team





Implementation Planning

Annual Strategic Planning Session

• SAMHSA's TIP 57

- Workforce development strategies for recruiting, hiring, retaining, training, supervising, and promoting wellness of staff members to support TIC
- Specific evidence-based or best practice adoptions to support TIC
- Strategies to amend facility design or environment operations to reinforce safety
- Strategic Planning, including fiscal, organizational, programmatic planning to ensure sustainability of the steps initiated in the organization
- Present plan to Agency and Board
- Road map for TIC Steering Committee meetings



- Workforce development strategies for recruiting, hiring, retaining, training, supervising, and promoting wellness of staff members to support TIC:
 - "Guidelines for Collaborative Conversations"
 - TIC training
 - DEI training (macroaggressions / implicit bias)
 - Employee evaluations
 - Hiring practices: interview questions, hiring preparation, self-care for applicants
 - Job descriptions



- Workforce development strategies for recruiting, hiring, retaining, training, supervising, and promoting wellness of staff members to support TIC:
 - Employee Resource Groups (ERGs)
 - "Rumble" training, Brene Brown
 - "Shared Agreements"
 - Employee Handbook
 - TMHA Website
 - DEI Committee



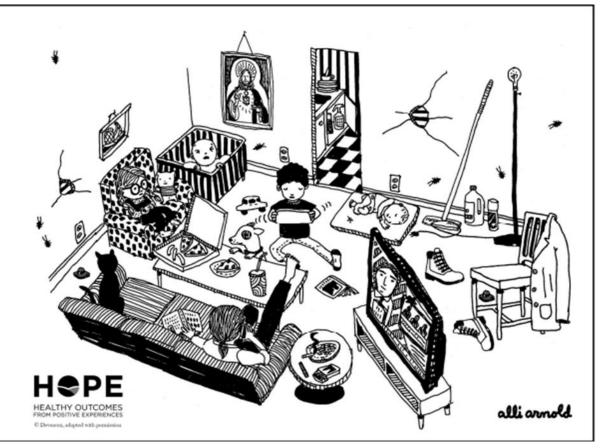


- Specific evidence-based or best practice adoptions to support TIC:
 - Acknowledged agency efforts in supporting WRAP, Empathy Effect, Peer Specialist Training, Triple P, Reaching Teens, and Mental Health First Aid
 - Steering Committee members attended Trauma-Informed Organizations training and follow up learning sessions in May 2022
 - Steering Committee members attended Bridges to Resilience conference and HOPE trainings



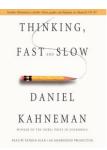


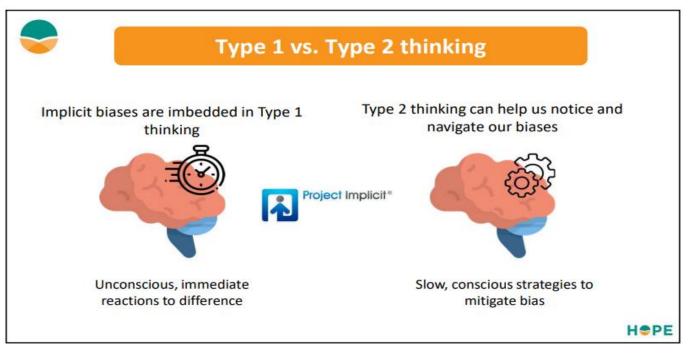
What stands out to you in this picture. What do you see?





Two Types of Thinking







- Strategies to amend facility design or environment operations to reinforce safety:
 - Safety review of office configuration and physical environment
 - Active shooter training
 - Monthly TIC training on Relias
 - TMHA Crisis Support Protocol
 - TMHA inclusionary statement



Non-binary, all gender, handicap placards on all TMHA restrooms



does not tolerate racism, discrimination, harassment, or hate. We believe everyone has the right to be well, to live free from all forms of harassment, and to be treated with respect and appreciation.

At Transitions-Mental Health Association, we ask that everyone within our community embodies and upholds our value of inclusion.

We stand for humanity, diversity and empathy - without exception.





- Strategic Planning, including fiscal, organizational, programmatic planning to ensure sustainability of the steps initiated in the organization:
 - TIC inclusion in agency Strategic Planning, 2018, 2024
 - TIC leadership formalized in Director job description
 - TIC Steering Committee implemented and linked with Executive Team, Clinical Committee, and Strategic Planning
 - Present TIC Steering Committee activities to TMHA Board



TMHA TIC into the future ...

- On-going development of TIC webpage and TMHA website content
- Empathy Training for agency: focus on in-house training with a possible Empathy/NVC/Self-compassion approach; collaborate with Training Committee on next steps
- Increase safety in teams through enhanced team communication; develop and provide related training to all managers and teams, in collaboration with DEI committee
- Share the agency progress regarding safety and collaboration with community partners, funders and contractors
- Look at how our agency and steering committee can support Trauma-Informed SLO and other community efforts
- Continue ongoing conversation with tribal representatives towards increased education, understanding and connection





Thank you!

Michele Simone: <u>msimone@t-mha.org</u> Barry Johnson: <u>bjohnson@t-mha.org</u>