Welcome! Please Check-In



Enter in the chat window:

- Your Name
- Your Agency
- What brings you joy?

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Building Resiliency Utilizing Trauma Informed Approaches:

Becoming a Healing Organization Series – Part I

May 19, 2021

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National Community Action Partnership

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Land Acknowledgement

Every community owes its existence and vitality to generations from around the world who contributed their hopes, dreams, and energy to making the history that led to this moment. Some were brought here against their will, some were drawn to leave their distant homes in hope of a better life, and some have lived on this land for more generations than can be counted.

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Land Acknowledgement

https://native-land.ca/

- **This Health Intersections Convening is being held on the traditional lands of the _____ People, and I pay my respect to elders both past and present, who have stewarded this land throughout the generations."**
  - Please take a moment to consider the many legacies of violence, displacement, migration, and settlement that bring us together here today.
- **Deliver** your statement in the chat including the land/people relevant to the land that you are occupying during this session. **Learn more** by taking time to learn about the Indigenous history of the land you live on. The Partnership team will share the link to the US Department of Arts and Culture in the chat now. Visit https://usdac.us/nativeland to get started.

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The Promise Of Community Action

Community Action changes people's lives, embodies the spirit of hope, improves communities, and makes America a better place to live. We care about the entire community, and we are dedicated to helping people help themselves and each other.

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Agenda

- Welcome and Land Acknowledgement
- Why Become A Trauma-Aware Organization? – Part I
- Break
- Breakout Discussion Activity
- Why Become A Trauma-Aware Organization? – Part II
- Closing

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Dr. Denese Shervington

CEO & Co-Founder

Institute of Women & Ethnic Studies

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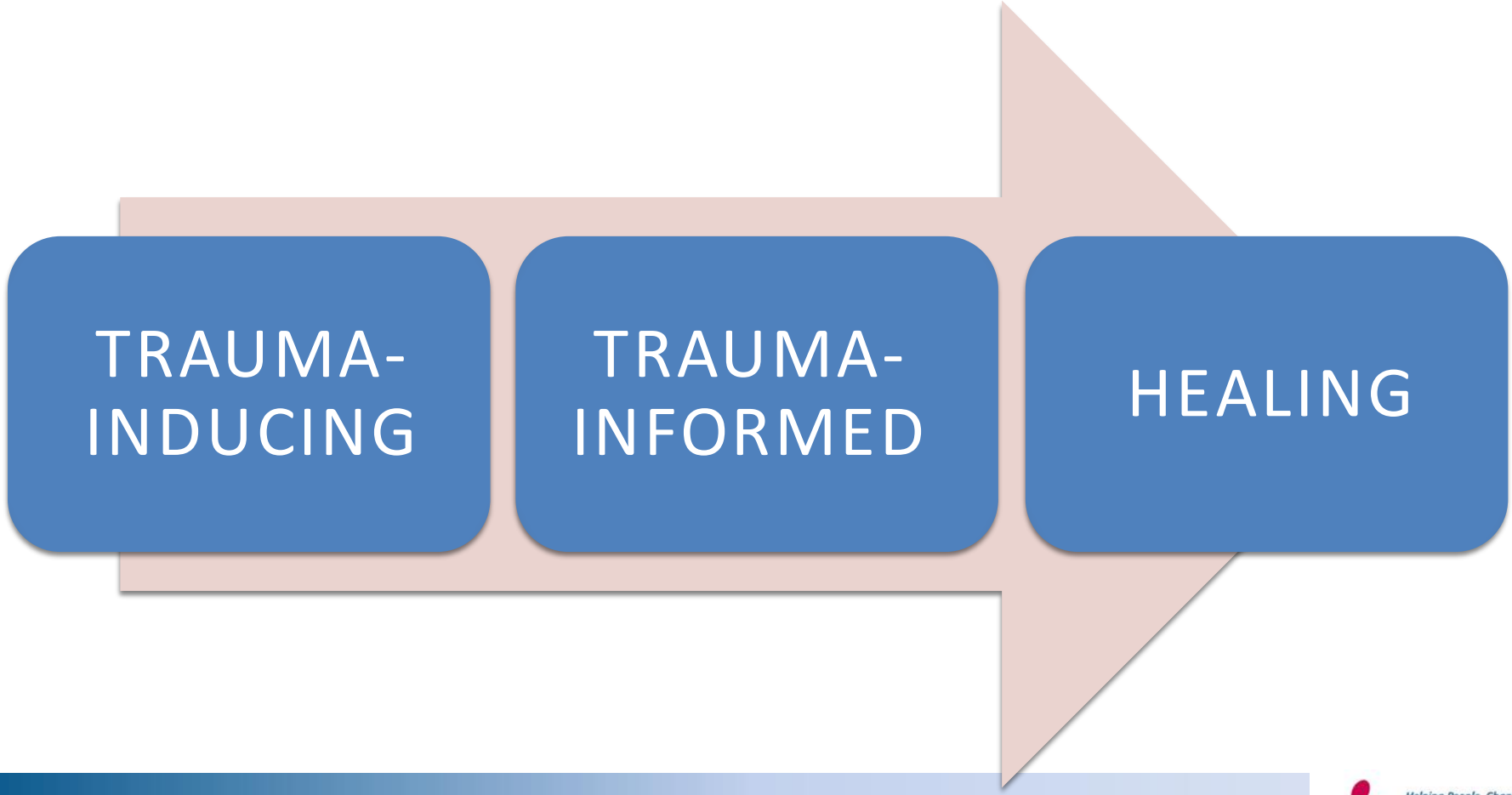
Part 1- Why become A trauma-aware ORGANIZATION?

DENESE SHERVINGTON MD, MPH

IWES

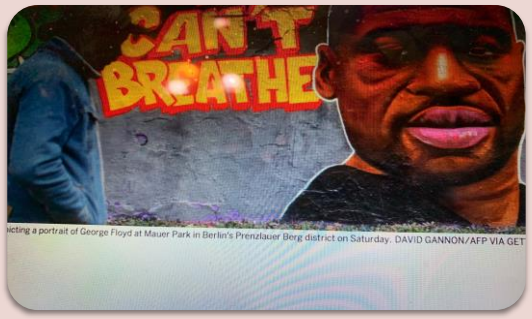
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THE JOURNEY



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The Journey







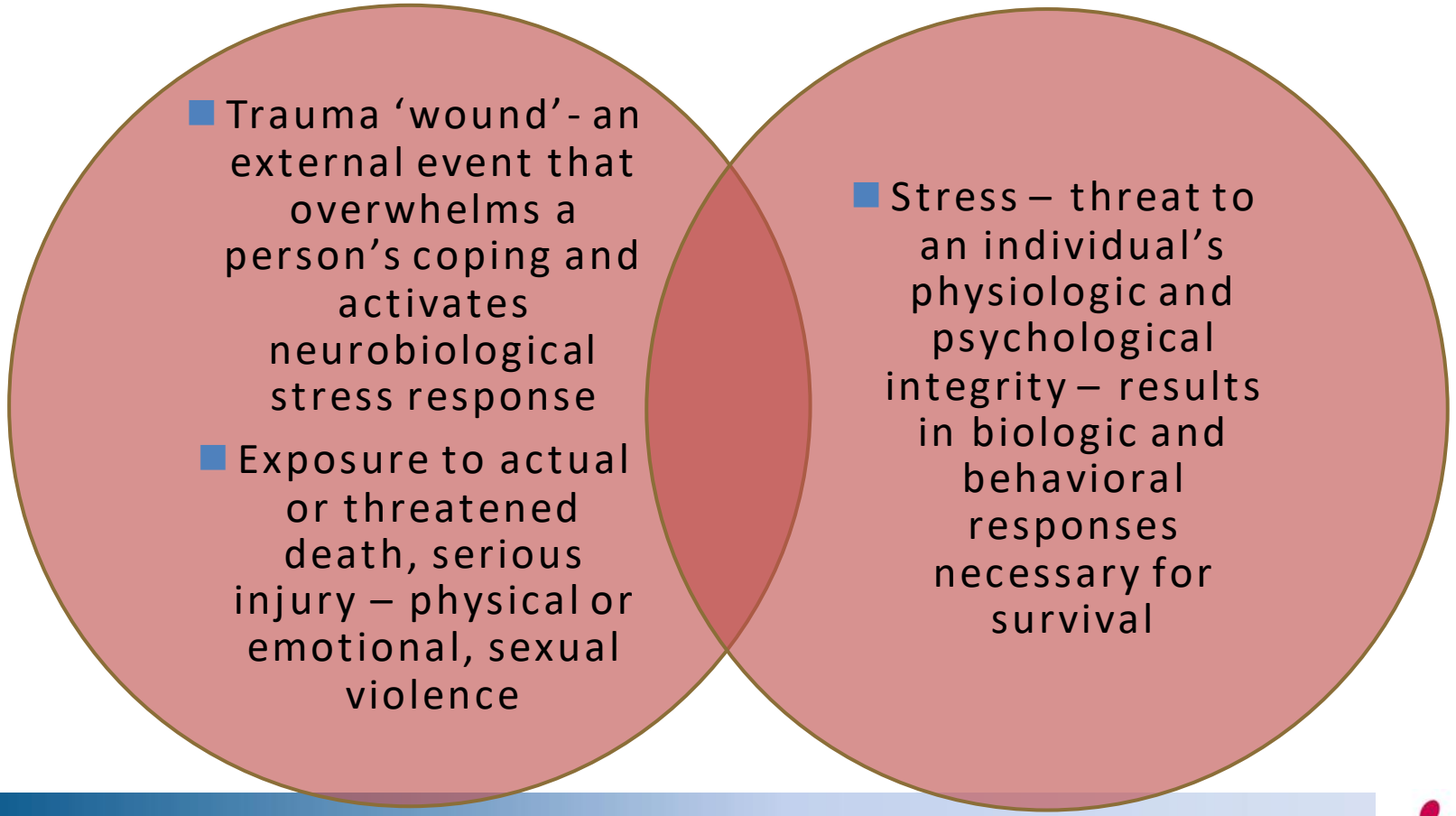
Avoidant Reliving Authoritarian Reactive Fragmented	Shared language Understanding of trauma and its impact	Collaborative culture of learning Relational leadership Reflective Growth and prevention oriented

Trauma-Informed Systems

- Realize the prevalence of trauma in the population
- Recognize the signs / symptoms of trauma
- Respond – Integrate knowledge into:
  - Practices and procedures re treatment
  - Advocacy to eliminate trauma conditions (social determinants)
  - Organizational policies and practices
- Avoid re-traumatization
  - of clients
  - and providers (avoid VR, STS)

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Trauma / Stress



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Sources of Trauma

- Single and/or discrete traumatic event (s):
  - Rape
  - Car accidents
  - Natural disasters
  - Pandemics

- Ongoing pattern of traumatic experiences:
  - Domestic violence
  - Homelessness
  - Severe chronic illness
  - Community violence
  - War / Terrorism
  - ACE – interpersonal / household

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Adverse Childhood Experiences (ACE) – Interpersonal Trauma

Abuse

- Physical
- Sexual
- Emotional

Neglect

- Emotional
- Physical

Household Dysfunction

- Drug abuse
- Mental illness
- Suicide attempt
- Intimate Partner Violence – Domestic violence
- Parental imprisonment / incarceration

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Expanded ACES - Philadelphia

- Expanded ACEs questions:
  - Witnessing violence
  - Experiencing racism / discrimination
  - Living in unsafe neighborhood
  - Experiencing bullying
  - Lived in foster care

ACEs disparities

- National sample 2016 - % children experiencing at least 1 ACE
  - 61% of black non-Latinx
  - 51% of Latinx
  - 40% of white non-Latinx
  - 23% of Asian non-Latinx
- Black children and children of mothers with a high school education or lower were the most likely to have been exposed to multiple ACEs
- White children were less likely to be exposed to high levels of adversity compared to Black and Hispanic children -however highly exposed White children were at particular risk for problem behaviors.
- Black children more likely to have an ADHD diagnosis compared to Latinx and White children after exposure to 2 or more ACEs

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Biology of Chronic Stress

- If threat is not perceived to diminish - dysregulation of Hypothalamic Pituitary Axis – inappropriate release of Cortisol:
  - Hippocampus: increase memory deficits and learning disorders
    - Over-representation – intrusive memories, flashbacks
    - Suppression – selective amnesia, inability to recall
  - Prefrontal Cortex: impaired emotional regulation and executive functioning (planning, flexibility, reasoning)
  - Amygdala: increase fear response 'hypervigilance'
    - Hasty actions – impulsivity - 'react before thinking'

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Biology of Chronic Stress

- Decrease in serotonin
  - Increased aggressive behaviors, depression and anxiety
- Decrease in oxytocin – impairments in:
  - Social memory
  - Empathy
  - Emotional recognition
  - Attachment

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ACEs Overall Impact on Adult Health

Trauma (general)	Smoke cigarettes Engage in risky sexual behaviors Use illicit drugs
4> ACES	2x ischemic heart disease 2x stroke 3x STD 5x depression 7x alcoholism 10x IV drug use 12x suicide attempt
6> ACES	**Die 20 years earlier than those with no ACES**

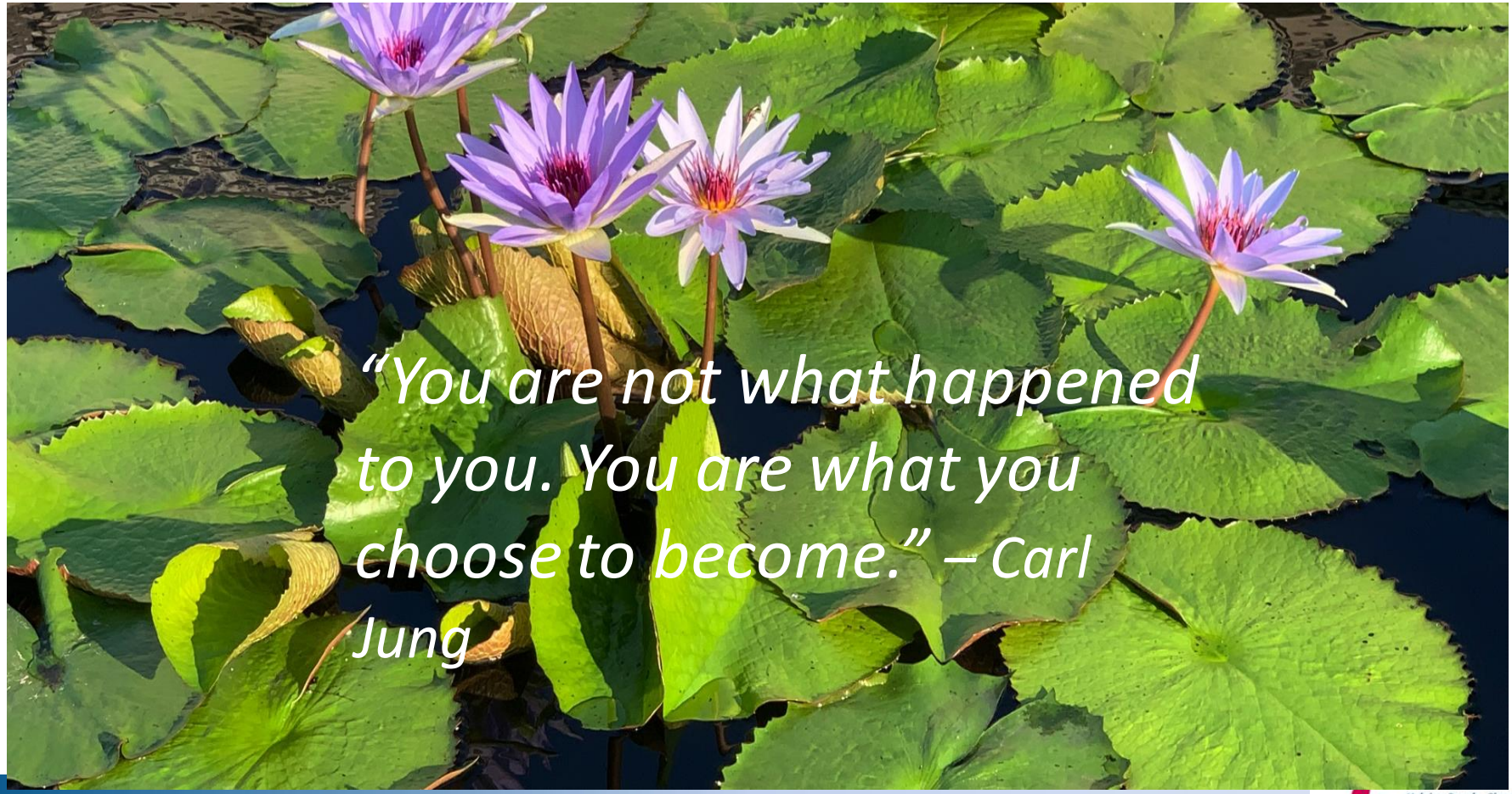
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ACEs Aware

Check each ACEs category you experienced before age 18 years ---------- Do you feel that these experiences have impacted your health: Not much Some A lot	
Did you feel that you didn't have enough to eat, had to wear dirty clothes, or had no one to protect or take care of you?	
Did you lose a parent through divorce, abandonment, death, or other reason?	
Did you live with anyone who was depressed, mentally ill, or attempted suicide?	
Did you live with anyone who had a problem with drinking or using drugs, including prescription drugs?	
Did your parents or adults in your home ever hit, punch, beat, or threaten to harm you?	
Did you live with anyone who went to jail or prison?	
Did a parent or adult in your home ever swear at you, insult you, or put you down?	
Did a parent or adult in your home ever hit, beat, kick, or physically hurt you in any way?	
Did you feel that no one in your family loved you or thought you were special?	
Did you experience unwanted sexual contact (such as fondling or oral/anal/vaginal intercourse / penetration?	

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The healing - “*There are many ways to heal throughout one’s life.*”



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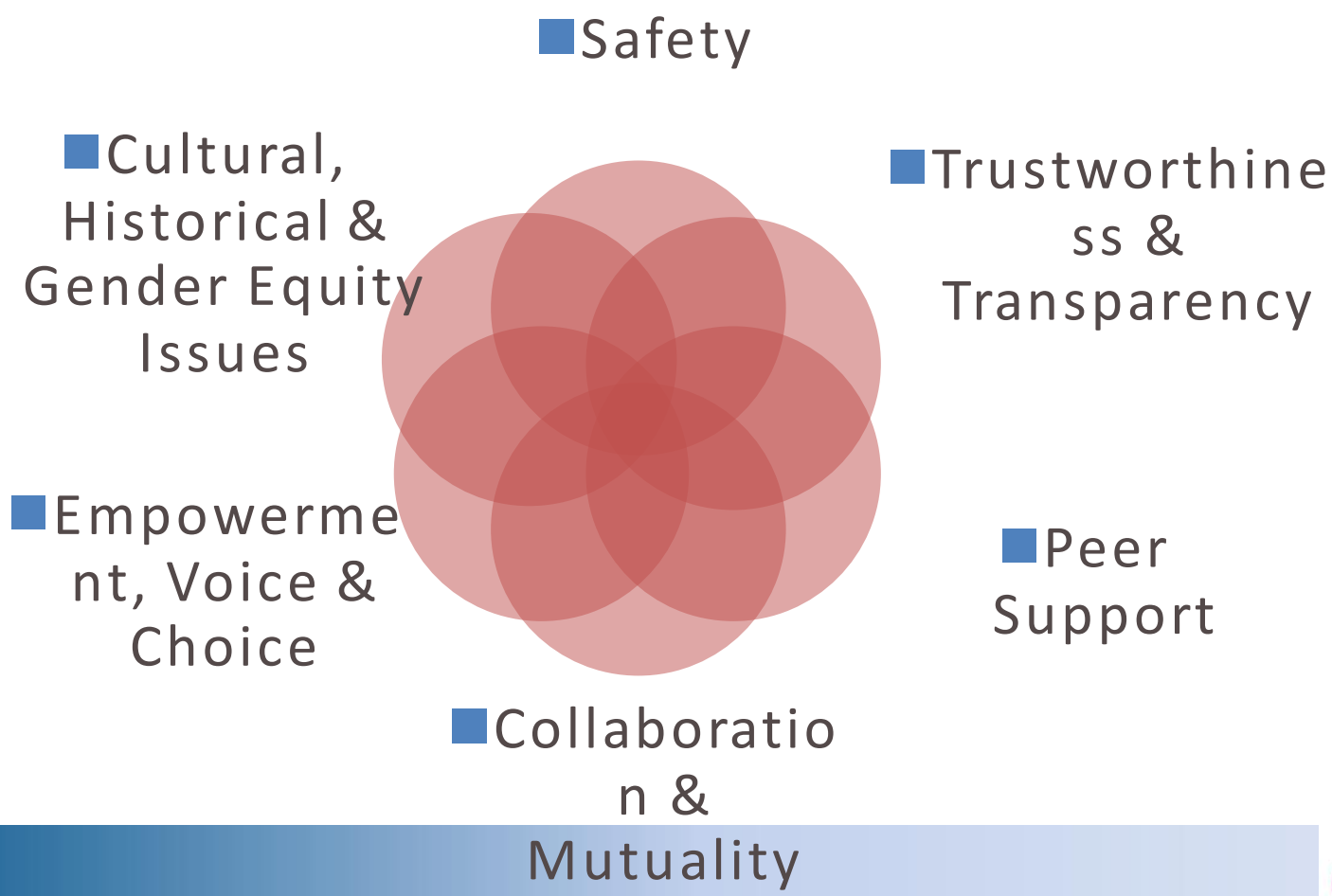
reflection

- Do you know your ACEs score? (Silent Introspection – For Break)

- Should care providers of mental health and/or social services be familiar with clients ACEs score? (For Breakout Discussion upon return from Break)

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6 Principles of Trauma Informed Approach*



HOW?

- Client / Peer Empowerment – Focus on individual strengths in the development of support / assistance plans
- Choice – Inform clients about options so that they can choose what they prefer
- Collaboration – Encourage and maximize collaboration among staff and clients
- Safety - Create setting and activities that ensure physical and emotional safety
- Trustworthiness – Create clear expectations with – who will provide services and how
- Apply a racial equity lens

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Implementation Domains for a Trauma-Informed Approach

- Governance and leadership
- Policy
- Physical environment
- Engagement and involvement
- Cross sector collaboration
- Screening, assessment and treatment services
- Training and workforce development
- Progress monitoring and quality assurance
- Financing
- Evaluation

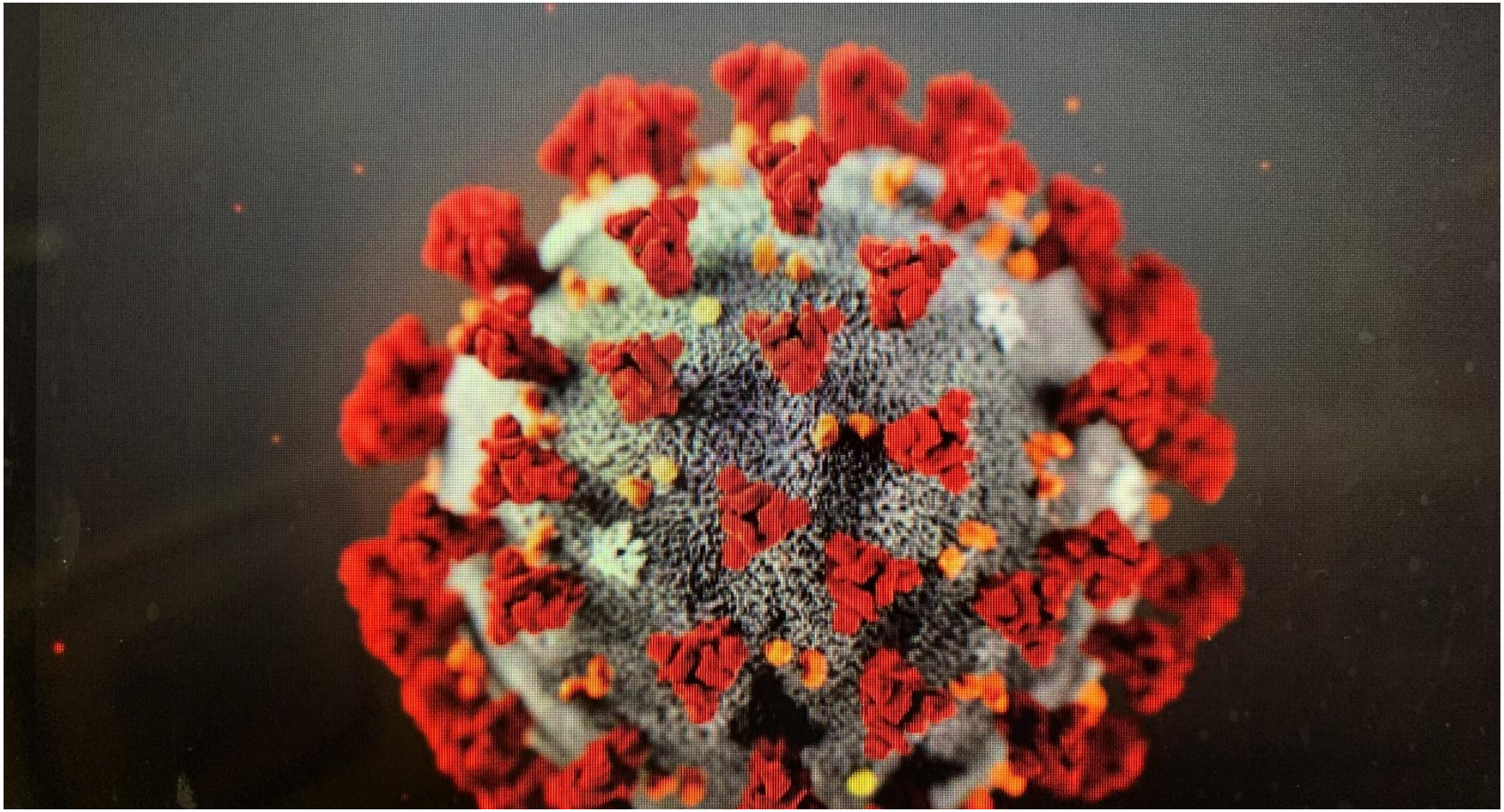
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Preventing Sts - organization

- Provide trainings about STS
- Offer opportunities / support for staff to explore their own trauma histories
- Support reflective supervision – service provider and supervisor meet regularly to address feelings regarding patient interactions
- Ongoing training
- Encourage and incentivize physical activity, yoga, meditation, healthy nutrition
- Allow ‘mental health days’ for staff
- Encourage self-care

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The ongoing Novel Invisible Threat: COVID-19



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Essential Workers Request of Organizations during covid-19

- Hear Me
  - Listen and address my concerns
  - Include me in decision-making
- Protect Me
  - Reduce the risk of inquiring the infection and becoming portals of transmission to family
- Prepare Me
  - Provide training that allows provision of education in the digital world
- Support Me
  - Acknowledge human limitations in a time of uncertainty and potential exposure to an unseen virus while on the front line with children, their families and co-workers
- Care For Me
  - Provide holistic support for me and my family in case of quarantine

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What Can Individuals Do? Strengthen Psychological Resilience

1. Adopt safe public health practices – wash, mask, distance, vaccinate
2. Normalize and manage heightened emotions
   - Observe heightened emotional responses – fear, anger, denial
   - Accept that these are normal responses to an abnormal situation
     - Normal biological response to threats to survival –activation of the hypothalamic-pituitary axis – increase circulating levels of stress hormones – Epinephrine, Norepinephrine and Cortisol – "fight or fight response"
     - Practice mind-body calming exercises – breath, mindfulness meditation
3. Enhance self- and collective efficacy–*'I/we can get through this'*
4. Strengthen social connectivity (safely)
5. Practice hope-in-action
6. Deepen self-care
7. Become aware of burnout, edge states and mental distress

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Healing
Achieving Equanimity: Self-Care

- Being accountable to self for one's existence
  - Care for the Mind
    - Uncovering
    - Mindful Witnessing
    - Accepting Existential Givens
    - Cultivating Mental Hygiene, e.g.
      - » Centering in nature / Play / Fun
      - » Creativity / Imagination / Rest /Sleep
- Care for the Physical Body
  - Purposive Movement – mind / body harmonizing
  - Intentional Relaxation / Sleep
  - Healthy nutrition – increased plant-based intake
- Care for the Spirit / Essence / Soul / Qi
- Balance Other-care / Knowing Edge States

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Balancing Care for Others
By being at home in ourselves we can
best be at home with another

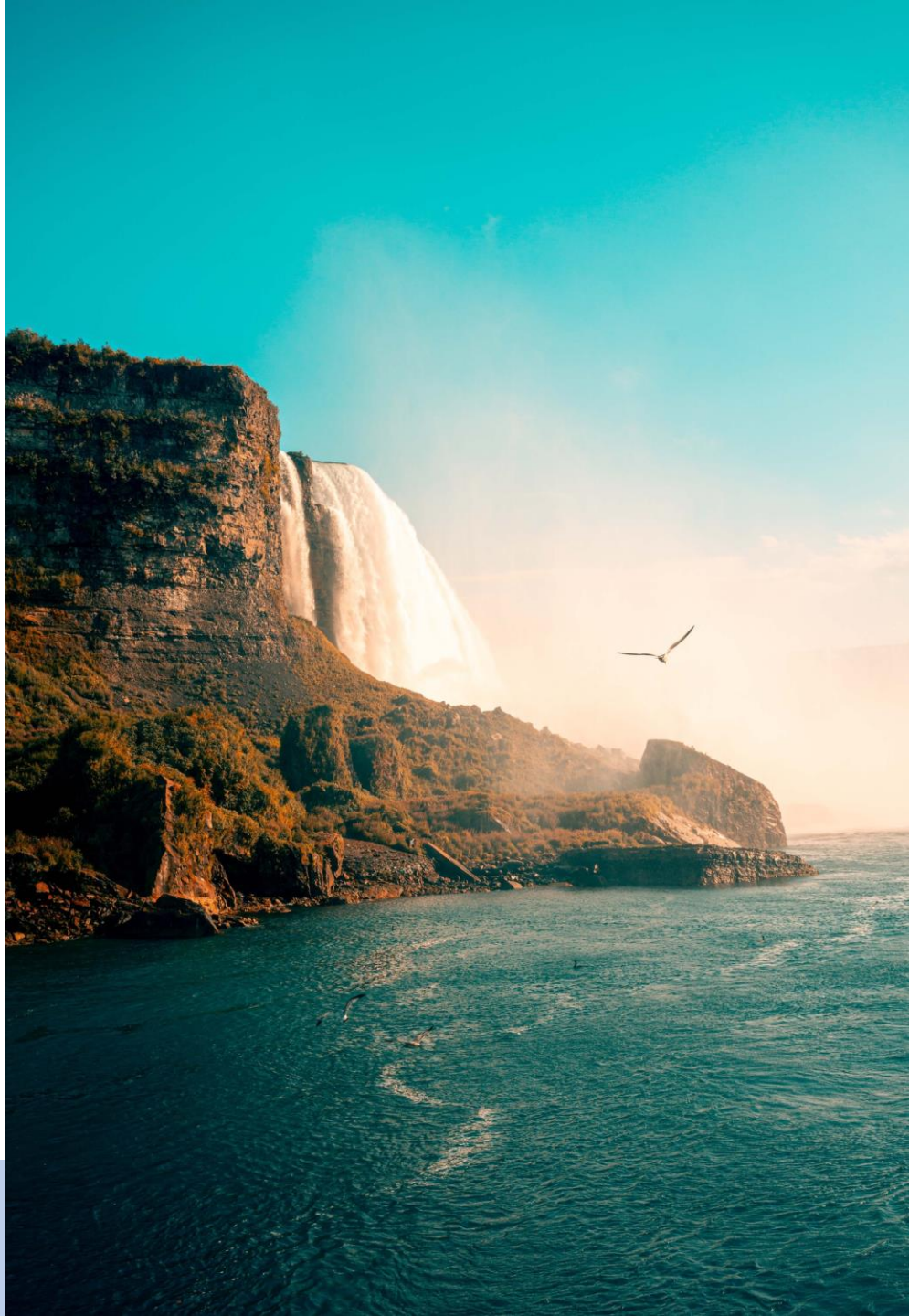
Compassion Fatigue / Empathic Distress

- Compassion ('with suffering') – Notice, Feel, Act – Empathy in action
- Being on the edge of slipping from health into pathology – on the edge where opposites meet [Roshi Joan Halifax]
  - Edge states brought on when the high edges of caring, connection, virtue, strength slip into suffering – toxic and chaotic
    - Empathy slides into empathic distress – taking on too much of someone's suffering and becoming damaged or paralyzed – "wearing shoes versus trying shoes on"
    - Altruism becomes pathologic and harmful
    - Engagement in work becomes overwork
      - Burnout – exhaustion, disconnection, compassion fatigue
      - Secondary Traumatic Stress – having symptoms of stress disorder
      - Vicarious trauma – having negative feelings

REFLECTION

What is your edge state?

How do you avoid burn-out?



Off the Edge - Secondary Traumatic Stress

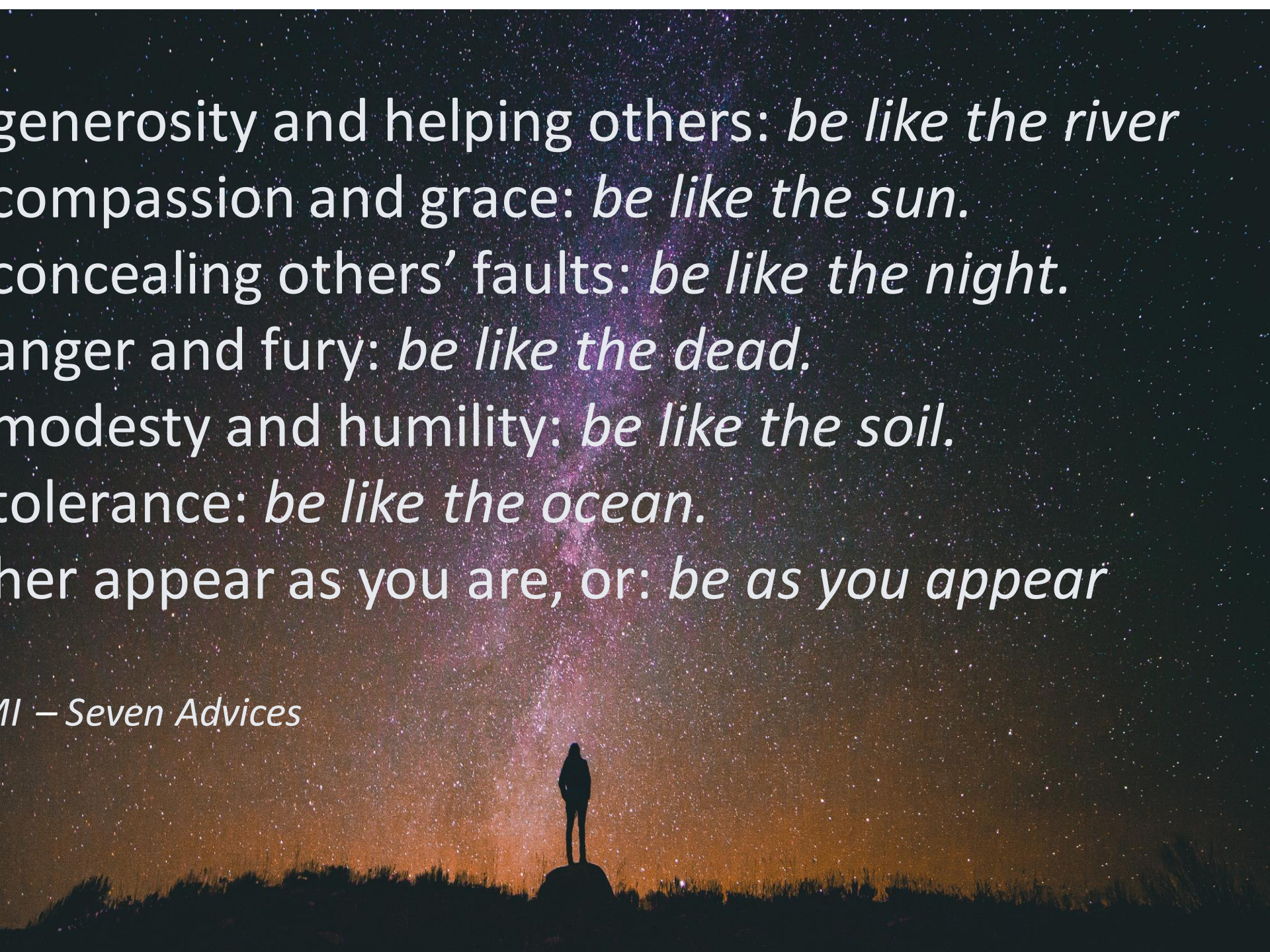
- The cost of caring – work focused on the relief of another's suffering - being exposed to trauma / suffering of others
- Pathologic stress resulting from helping someone else with their stress and slipping into their suffering
- Helper / servant develops trauma-based conditions
  - PTSD
  - Depression
  - Anxiety Disorder
  - Substance Use Disorder

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In Sum

"A trauma-informed approach is more than a list of tasks— it is a paradigm shift deliberately infused into everything, every day. Being trauma-informed is an on-going process rather than a destination."

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generosity and helping others: *be like the river*
compassion and grace: *be like the sun.*
concealing others' faults: *be like the night.*
anger and fury: *be like the dead.*
modesty and humility: *be like the soil.*
tolerance: *be like the ocean.*
her appear as you are, or: *be as you appear*
MI – Seven Advices

Part B – becoming a healing organization

June 2nd 2021

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Practice Transformation Resources Video

https://youtu.be/tMlwXay8Sig

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Network Leaders Share Their Reasons for Getting Vaccinated Video

https://www.youtube.com/watch?v=KGltgKsMFVw

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We Want to Hear From You!

Please fill out our evaluation survey:

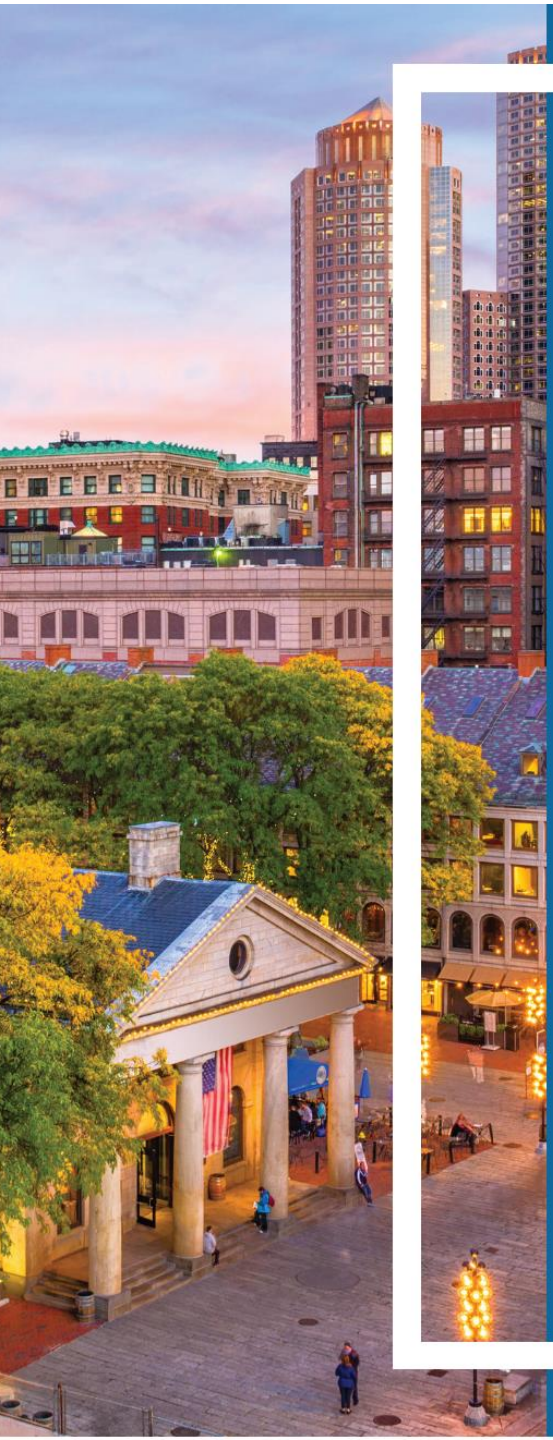
https://bit.ly/HealingOrg2021

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Report Out & Discussion



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Join the Learning Communities Resource Center for the following webinars and the Partnership's Annual Convention:

Webinar: Becoming a Healing Organization
May 19, 2021 – 2:00pm ET/1:00pm CT/12:00pm MT/11:00am PT/10:00am AKT

Webinar: Creating Trauma-Informed and Resiliency-Promoting Organizations
June 2, 2021 – 4:00pm ET/3:00pm CT/2:00pm MT/1:00pm PT/12:00pm AKT

Homelessness Prevention Webinar Series: Emergency Rental Assistance Program—Part 1
June 21, 2021 – 2:00pm ET/1:00pm CT/12:00pm MT/11:00am PT/10:00am AKT

Webinar: The Importance of Health Equity & the Impacts of Social Determinants of Health
June 30, 2021 – 2:00pm ET/1:00pm CT/12:00pm MT/11:00am PT/10:00am AKT

Homelessness Prevention Webinar Series: Emergency Rental Assistance Program—Part 2
July 21, 2021 – 2:00pm ET/1:00pm CT/12:00pm MT/11:00am PT/10:00am AKT

National Community Action Partnership Annual Convention
September 1-3, 2021 – 2:00pm ET/1:00pm CT/12:00pm MT/11:00am PT/10:00am AKT

The Community Action COVID-19 Resource Series

- *Applying the Equity Lens to COVID-19 Response and Recovery*
- *A Trauma Informed Agency Response to COVID-19*
- *Applying Lessons Learned from Past Crisis Responses*
- *Leveraging Partnerships in COVID-19 Response and Recovery*
- *Technology Innovations in Response to COVID-19 Service Delivery and Recovery*

https://communityactionpartnership.com/covid-19-resource-series/











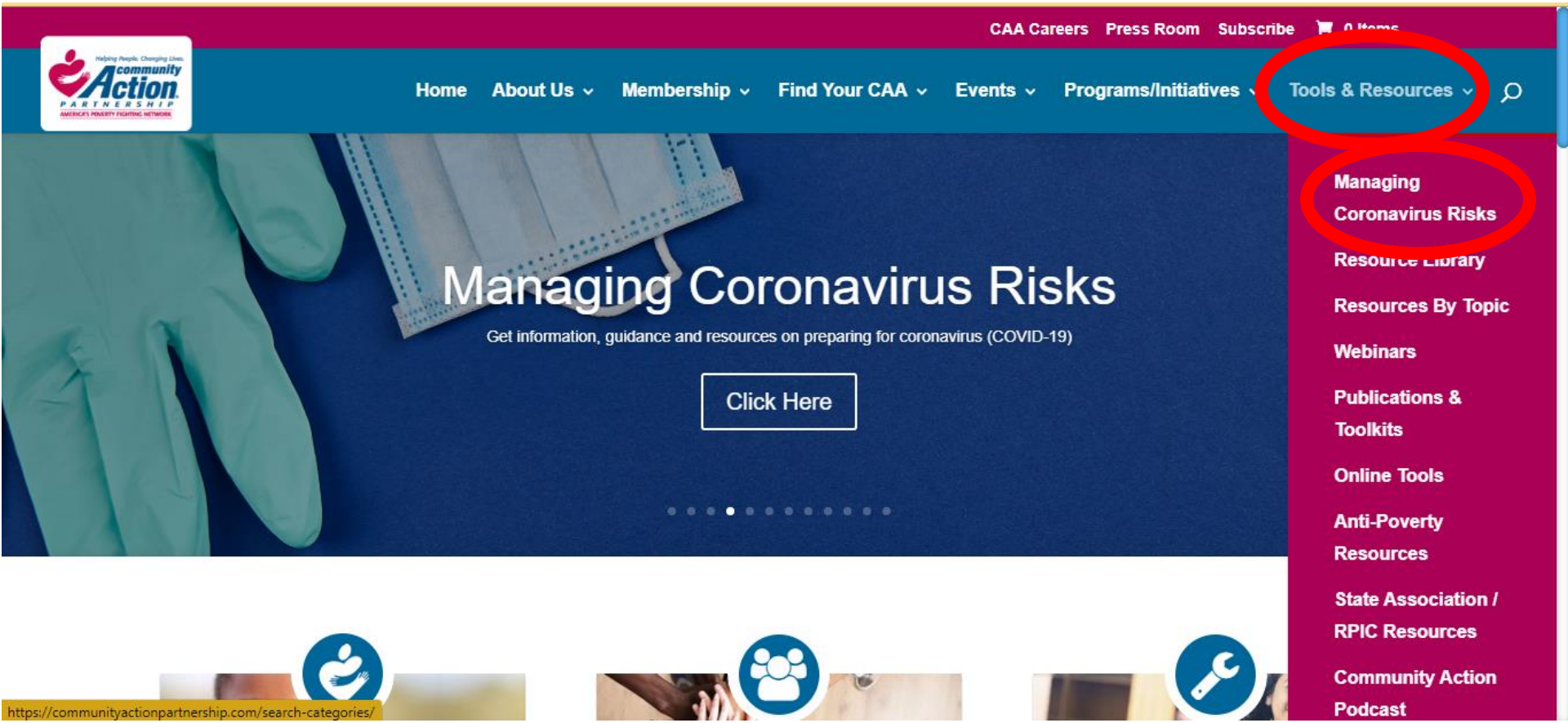
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COVID-19 Response

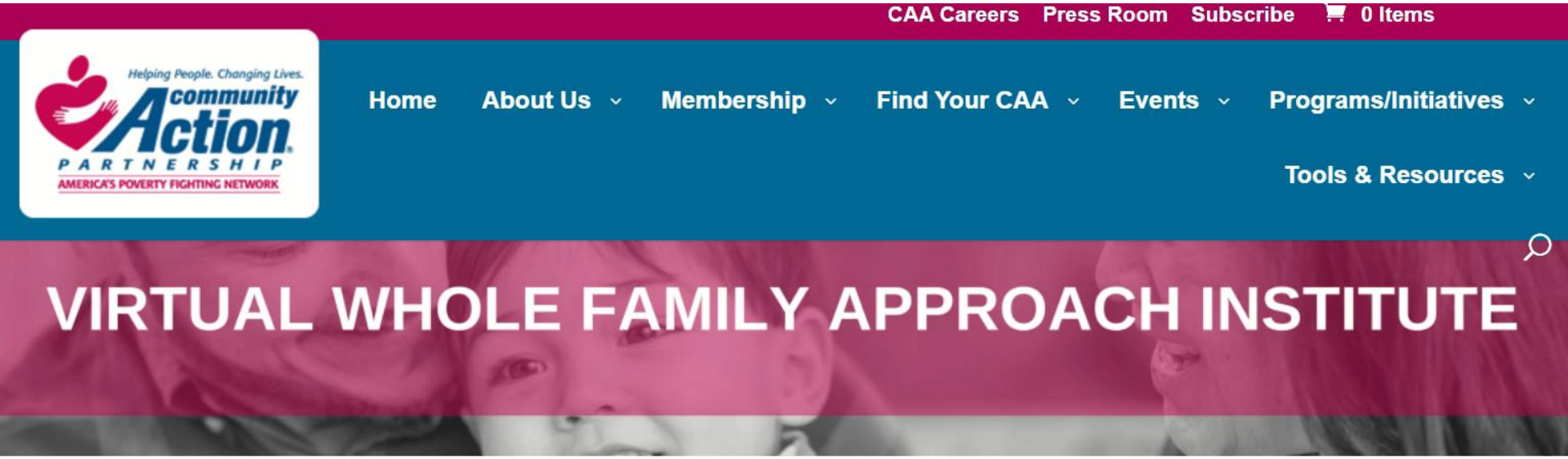


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COVID-19 Page



Whole Family Approach Institute Website



Overview | Participant Packet | Videos | Presentations | Presenter Bios | Graphics

DOWNLOAD AGENDA

communityactionpartnership.com\whole-family-convening



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