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INTEGRATING TRAUMA AND VIOLENCE INFORMED CARE INTO ORGANIZATIONAL PRACTICE

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APRIL 9, 2019
UNDERSTANDING STIGMA

There's a lot of judgment about what it means about a person's personality or worth as a person if they get an STI, especially if you're like around herpes, its super stigmatized. It's like a comment on everything that you may achieve in life if you get herpes (Client, 2016).

I really think that if you need needles you should be able to get them on the weekends, this whole building locks up on the weekend, and nobody can get clean needles (Client, 2016).

...because it's bad enough trying to convince yourself to go in let alone going in and having the people be brutal to you and take a long while and, like, they're really, really rude sometimes (Client, 2016).

Even the forms that you fill out, as in the intake forms, I never see my gender identity or sexual orientation reflected on those forms nor is there even a blank space where I could fill it in (Client, 2016).
INTERSECTIONS BETWEEN TRAUMA AND STIGMA

- Some populations disproportionately bear the burden of trauma and stigma due to deeply entrenched structural violence.
- Experiences of stigma within health and/or social service settings can be (re)traumatizing.
- Ongoing experiences of structural stigma (e.g., racism, cisnormativity, heteronormativity) can be traumatic.
- Experiences of trauma and ways of coping are often stigmatized.
TRAUMA-INFORMED SERVICES

• “Trauma-informed services take into account an understanding of trauma in all aspects of service delivery and place priority on the individual’s safety, choice, and control”\(^1\).

• “A key aspect of trauma-informed services is to create an environment where service users do not experience further traumatization or re-traumatization (events that reflect earlier experiences of powerlessness and loss of control) and where they can make decisions about their treatment needs at a pace that feels safe to them”\(^1\).

TRAUMA AND VIOLENCE-INFORMED APPROACHES

• “Trauma and violence-informed approaches are policies and practices that recognize the connections between violence, trauma, negative health outcomes and behaviours”\(^2\).

• Trauma and violence-informed approaches expand on the concept of trauma-informed approaches to account for the broader systemic inequities that influence and contribute to interpersonal experiences of trauma and violence\(^3\).


WHY TVIC?

TVIC recognizes the intersection between trauma and many health and social issues (including STBBIs) thereby removing some of the stigma attached to STBBIs, sexuality and substance use.

TVIC encourages the disruption of power imbalances within health and social service settings; this is important for groups that have historically been disempowered and marginalized due to (real/perceived) membership with a stigmatized group.

By adopting a TVIC approach, service settings can become more aware of potential drivers of stigma and strategies to reduce stigma.
PRINCIPLES OF TRAUMA (AND VIOLENCE) INFORMED CARE

1. Trauma awareness
2. Emphasis on safety and trustworthiness
3. Opportunities for choice, collaboration and connection
4. Strengths based and skill building

1. TRAUMA AWARENESS
2. EMPHASIS ON SAFETY AND TRUSTWORTHINESS
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TRAUMA AND VIOLENCE INFORMED CARE NECESSITATES AN ORGANIZATIONAL APPROACH

• Assessing Your Organization’s Approach to Trauma and Violence-Informed Care: The Organizational Assessment Tool (Canadian Public Health Association, 2019 [Draft])
  • Developed based on a review of existing TIC/TVIC assessment tools
  • More explicit focus on sexual health and harm reduction services
  • Reviewed by people with lived/living experiences and piloted with professionals from across the country
ORGANIZATIONAL ASSESSMENT TOOL

1. Supporting staff development
   • Staff members are trained in TVIC principles.
   • Staff are supported to manage their own experiences of trauma and interpersonal and/or structural violence.

2. Physical environment
   • The physical space (e.g., waiting room/reception areas, interview rooms, area around the building) is comfortable and inviting.
   • Clients are able to make suggestions about how to make the physical space feel safe and welcome.
3. **Interactions with clients**
   - The intake process feels safe and promotes trust.
   - Staff members respond to client disclosures of past or present trauma in an appropriate way and know where to refer clients for trauma-specific services.

4. **Policies**
   - There are clear policies about client privacy and confidentiality.
   - There are plans to handle crises and/or to minimize or de-escalate (re)traumatization.

5. **Monitoring and Evaluation**
   - There is a regular review and planning process to monitor and evaluate trauma- and violence-informed policies and practices.
TRAINING RELATED TO TVIC
THANK YOU!

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Adverse Community Experiences and Resilience
Addressing and Preventing Community Trauma

Public Health Ontario Grand Rounds
April 9, 2019

Ruben Cantu, Program Manager
What’s Trauma Got to Do with it?

How the Environment Affects Wellbeing
It is unreasonable to expect that people will change their behavior easily when so many forces in the social, cultural, and physical environment conspire against such change.

- Institute of Medicine
Moving Upstream

We are still standing on the bank of the river, rescuing people who are drowning. We have not gone to the head of the river to keep them from falling in.

That is the 21st century task.”

Gloria Steinem
What can be done to prevent the problem from occurring in the first place?
What is Community Trauma?
There is growing understanding about trauma, particularly its prevalence and impact.

Trauma is pervasive, and has a significant impact on development, health and well-being.

Trauma-informed care is becoming a standard in a growing number of places.

The predominant approach to dealing with trauma is screening and treatment, consistent with an individual medical model.
Trauma: What We’re Learning

• Trauma also manifests at the community level, and is not just the aggregate of individuals in a neighborhood who have experienced trauma.

• Community trauma is the impact of chronic adversity (e.g., violence and structural violence) across a community.

• There is an understanding that trauma serves as a barrier to effective solutions to promote health, safety and well-being.

• There are manifestations, or symptoms, of community trauma in the social-cultural, physical/built and economic environments.
 Violence and Trauma

• Violence is the **intentional use** of physical force or power, threatened or actual, against oneself, another person, or a group or community that either results in or has a high likelihood of **resulting in injury, death, psychological or emotional harm, maldevelopment, or deprivation**

• Violence contributes to trauma
Structural Drivers and Structural Violence

• Structural drivers are the **inequitable distribution** of power, money, and resources, and create the conditions that harm communities.

• Structural violence is **what inflicts harm** on communities and is driven by structural drivers.

• Structural violence also contributes to trauma.
Sample Symptoms of Community Trauma

- Intergenerational poverty
- Long-term unemployment
- Relocation of businesses and jobs
- Limited Employment
- Disinvestment

- Deteriorated environments and unhealthy, often dangerous public spaces with a crumbling built environment
- Unhealthy products

- Disconnected/damaged social relations and social networks
- The elevation of destructive, dislocating social norms
- A low sense of collective political and social efficacy
ACEs and Adverse Community Experiences

- Community trauma increases risk factors that make ACEs more likely to occur

  - Adverse community experiences contribute to trauma across the community, impacting people across the lifespan
  - Community trauma is a risk factor for community violence, which can increase exposure to ACEs
ACEs and Adverse Community Experiences

• Community trauma reduces protective factors for ACEs, exacerbating their impact

  ▪ Communities with high rates of trauma are compromised in their capacity to be part of effective community improvement strategies
  ▪ Community trauma compromises social networks and support, a protective factor against toxic stress
Community Resilience

• Community resilience is the ability/capacity of a community to adapt, recover and thrive, even in the face of adversity

• It’s rooted in community factors, such as social networks and trust; willingness to act for the community good; living wages/local assets and wealth; healthy, equitable community design and infrastructure; and healthy products and services
Note: The systems listed are examples of the types of systems across which we need to work to address community trauma.
Healing: A Starting Point for Community Agency

- Healing circles
- Vigils
- Restorative justice practices
- Acknowledgement/reconciliation
- Arts and engagement in the arts

- Community dialogues
- Practices that are culturally and community rooted and acknowledge harm and promote resilience
Creating Space for Being/Doing/Connecting

United Women of East Africa
San Diego, CA
Strategies Among People

- Increase civic engagement and participation
- Supporting multigenerational relationships
- Coming together to build community efficacy
- Advancing positive norms
Strategies Among People

- Uplifting positive narratives of hope and resilience from within the community
- Enhanced community engagement and advocacy
- Trauma informed community building
- Reconnecting with cultural identity
Safety Through Connection
Strategies within the Community (Place)

- Reclaiming land, spaces and public places
- Arts and cultural reflection/expression in the community
- Focus on ensuring stable housing with dignity
- Creating safe and supportive places for regular gathering/coming together
Establishing informal gathering places for networking, resource connection and support that also strengthen life skills and community/civic opportunities.
Strategies within the Community (Equitable Opportunity)

• Workforce and economic development
• Restorative justice in schools
• Resident ownership of businesses
Building Capacity to Help Self and Others
Strategies Across Systems

• Trauma informed systems transformation

• Public health solutions to police-community violence

• Power-sharing (e.g., participatory budgeting, shared leadership and decision-making)
City paints over Brooklyn 'jail' playground with space-age replacement

BY JAKE PEARSON, ELIZABETH HAYS / DAILY NEWS WRITERS / Thursday, April 15, 2010, 4:14 PM