

# Trauma- and violence-informed care: from individual to organizational approaches

# Knowledge Hub Handout for group work

#### The Context

You are a team of consultants (each bringing exactly what you bring) hired to revamp a community center in a city of 74,003 people that serves as a regional hub for diverse rural and remote communities, including diverse First Nations. The hospital serves as a regional referral center, and many provincial services (e.g. employment, fisheries, forestry, etc.) have head offices in the city. The primary industries are resource extraction industries, with some tourism. The unemployment rate is higher than the provincial and national averages. The city has a growing population of homeless people. There is a significant market in criminalized drugs, and the overdose rate is 3 x the provincial rate. The city has a reputation for racism being directed to Indigenous, Black and people of colour.

#### The Problem

The community center nearly lost its funding last fiscal year. On one hand more privileged people in the city have complained that people attending the community center are problems – police have been called frequently because of complaints of violence.

On the other hand, people who use the center and people working in social services, Indigenous and antipoverty groups have complained that the services and activities offered do not meet the needs of people who need to access low cost leisure, recreation and community education.

The Center has received 2 years of funding from a donor who has specified that the Center has 2 years to show that it can be trauma- and violence-informed and meet the needs of the community.

### Your job

- ✓ Appoint a reporter for the large group report
- ✓ Use one of the 4 principles of TVIC (assigned at your table)
- ✓ Review the 10 strategies for equity-oriented care (handout at your table)
- ✓ Develop a plan for the community center with:
  - ✓ At least 5 steps to take
  - ✓ At least 3 key recommendations

# 10 Strategies to Guide Organizations in Enhancing Capacity For Equity-Oriented Services

- Explicitly commit to equity
- Develop supportive organizational structures, policies, and processes
- · Re-vision the use of time
- · Attend to power differentials
- Tailor care, programs and services to local contexts
- Actively counter racism and discrimination
- Actively seek input from community partners and people with living and lived experience
- Tailor care to address inter-related forms of violence
- Enhance access to the social determinants of health
- · Optimize use of place and space

## **TVIC Principle 1**

Understand trauma, violence (including structural violence) and its impacts on people's lives and behavior

#### Organization

Develop policies & processes to build culture based on understanding of trauma and violence (e.g., hiring practices)

Staff training on effects of violence/trauma, including vicarious trauma

All services start with violence & trauma awareness as a foundation for a culture of TVIC

#### Provider

Be mindful of potential histories and effects ("red flags") and what these may look like in care interactions

Disclosures handled appropriately:

- · Believe the experience
- · Affirm and validate
- · Recognize strengths
- · Express concern for safety and well-being

## **TVIC Principle 2**

Create emotionally, culturally & physically safe environments for all clients and providers

#### Organization

Welcoming space, intake procedures, confidentiality, privacy

Seek client input about safe and inclusive strategies

Support staff at-risk of vicarious trauma (e.g., EAPs, debriefing, reflective supervision)

Safety protocols

#### Provider

Awareness of impacts of boundary/power violations

Non-judgemental approach (people feel accepted and deserving)

Clear information and predictable expectations about programming

Consider safety in relationships

# **TVIC Principle 3**

# Foster opportunities for choice, collaboration and connection

#### Organization

Policies and processes that allow for flexibility and encourage shared decision-making and participation

Involve staff and clients in how to implement and evaluate services and programs

#### Provider

Non-judgemental responses

Provide real options, and choices, for care & referrals

Consider choices collaboratively

Actively Listen .....and privilege the client's voice

# **TVIC Principle 4**

# Use a strengths-based and capacitybuilding approach to support clients

# Organization Allow sufficient time for meaningful engagement Program options that can be tailored to people's needs, strengths and contexts Staff are provided with ongoing opportunities for development of knowledge and skills Provider Help clients identify strengths, and validate these Acknowledge the effects of historical and structural conditions Teach skills for recognizing triggers, calming, centering (developmentally appropriate)