Trauma-Informed Systems

Supporting your community and essential city workers during and after COVID-19

February 17, 2021

This project is supported by Cooperative Agreement No. 6 NU38OT000305-02-03 from the Centers for Disease Control and Prevention (CDC). The views and information provided in this web conference do not necessarily represent the official views of the Department of Health and Human Services, the CDC, or Prevention Institute.
Polling Question: Who is in the audience today?

A. City/county government
B. CBO/nonprofit
C. K-12 education
D. College/university
E. Funder/foundation
F. Healthcare
G. State or federal government
H. Tribal organization
I. Faith-based organization
J. Other/not applicable
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Grounding and Acknowledgement

We acknowledge that we are located on the unceded ancestral homeland of the Ramaytush Ohlone who are the original inhabitants of the San Francisco Peninsula. As the indigenous stewards of this land and in accordance with their traditions, the Ramaytush Ohlone have never ceded, lost, nor forgotten their responsibilities as the caretakers of this place and for all peoples who reside in their traditional territory. As guests, we recognize that we benefit from living and working on traditional homeland of the Ramaytush. We wish to pay their respects by acknowledging the Ancestors, Elders, and Relatives of the Ramaytush Community and by affirming their sovereign rights as First Peoples.
Text Chat Question: In a few words, what have you done to build up your resilience during the pandemic?
Objectives

• Describe **key features of a trauma-informed system** and its importance for preventing trauma and suicide during the COVID-19 pandemic.

• Use the **Adverse Community Experiences and Resilience (ACE|R)** framework to think about community-level recovery and systems change that supports wellbeing in the long term.

• Explore how agencies and organizations are integrating **internal- and external-facing trauma-informed practices**.

• Discuss opportunities to overcome challenges and **apply this information** in your own community.
Guests

Dr. Howard Pinderhughes
Director of the Sociology Doctoral Program, UCSF

Dr. Ken Epstein
Principal, P.R.E.P for Change Consulting

Zeke Cohen
Baltimore City Councilmember, 1st District

Luis M. Aroche
Project Manager, HEAL SF

Robin Saenger
Founding Director, Peace4Tarpon
Adverse Childhood Experiences

- Physical abuse or neglect
- Sexual abuse
- Emotional abuse or neglect
- Parent or caregiver treated violently
- Substance misuse within household
- Household member who has mental illness
- Parental separation or divorce
- Incarceration of household member

Adverse Community Experiences

- Concentrated poverty and economic instability
- Housing displacement and homelessness
- Deteriorated community conditions caused by underinvestment and the flight of businesses out of communities
- Failing school systems
- Inequitable access to parks and green spaces
- Residential segregation/segregation from opportunity
- Racism and anti-immigrant bias
- Disproportionate exposures to toxics and pollution
- Poor transportation and food systems
Why Trauma-Informed Systems?

COVID-19

- Historical trauma
- Loss of jobs and income
- Social isolation

Worsening mental health, suicidal ideation and substance use among essential workers (CDC)

Increased exposure to interpersonal and structural violence

Healing is possible!
What is a Trauma-Informed System?

- Systems (education, housing, justice, etc.) have produced a great deal of harm and inequities in our communities.

- To address this, systems must recognize their tremendous impact – historical and present day – on the communities they serve.

- This includes a comprehensive approach across multiple systems and a citywide trauma-informed approach moves us forward.
Strategies to Prevent ACEs

- Strengthen economic supports to families
- Promote social norms that protect against violence and adversity
- Ensure a strong start for children
- Teach skills
- Connect youth to caring adults and activities
- Intervene to lessen immediate and long-term harms
Dr. Howard Pinderhughes

Director of the Sociology Doctoral Program
University of California, San Francisco
Triple Pandemic:
Racism
Economy
Covid-19
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.
What about Community Trauma?
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.
Toward a Resilience Framework to Address and Prevent Community-Level Trauma

Community trauma is not just the aggregate of individuals in a neighborhood who have experienced trauma from exposures to violence. There are manifestations, or symptoms, of community trauma.

Community Trauma is:

- Cumulative and synergistic impact of regular incidents of interpersonal violence
- Historical and intergenerational violence
- Continual exposure to structural violence
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 refers to harm that individuals, families and communities experience from the economic and social structure, social institutions, relations of power, privilege and inequality and inequity that may harm people and communities by preventing them from meeting their basic needs.

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

- Structural violence also contributes to trauma.
Community Environment

Equitable Opportunity
Economic and Educational Environment

Place
Physical/built environment

People
Social-Cultural Environment
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
Text Chat Question:
How has your community taken a trauma informed approach during the pandemic?
Zeke Cohen

Baltimore City Councilmember, 1st District
Robin Saenger

Artist

Founding Director, Peace4Tarpon

Former Vice-Mayor, Tarpon Springs
Peace 4 Tarpon
A Trauma Informed Community Initiative

This Tarpon Springs initiative will provide resources to help prevent and heal the many forms of trauma.

It will engage and inspire us to offer what peace/piece we can to help heal the pain of trauma. We all bear witness to trauma issues during daily life, there is no "trauma-free-zone" in the world. We can ask "what happened to you?" not "what's wrong with you?"

Listen without judgement as listening is an act of love. Compassion is important and powerful.

You don't have to offer an ultimate "solution."

Build trust and have real conversations. Do not blame yourself, you are not alone.

www.facebook.com/Peace4Tarpon
Text Chat Question:
Who are some partners in your locale that you’re working with to promote a trauma-informed approach?
Dr. Ken Epstein
Principal
P.R.E.P for Change Consulting

Luis M. Aroche
Project Manager
Our Children Our Families Mental Health Initiative, HEAL SF
Supporting our Most Vulnerable Workforce:
Essential and Frontline Workers

Trauma-informed approaches during catastrophic events
February 17, 2021
CENTER FOR CARE INNOVATIONS

TRAUMA-ORGANIZED
• Reactive
• Reliving/Retelling
• Avoiding/Numbing
• Fragmented
• Us Vs. Them
• Inequity
• Authoritarian Leadership

TRAUMA-INFORMED
• Understanding of the Nature and Impact of Trauma and Recovery
• Shared Language
• Recognizing Socio-Cultural Trauma and Structural Oppression

HEALING ORGANIZATION
• Reflective
• Making Meaning Out of the Past
• Growth and Prevention-Oriented
• Collaborative
• Equity and Accountability
• Relational Leadership

TRAUMA INDUCING TO TRAUMA REDUCING
Trauma Informed Care from Theory to Practice

**Connection**
- Check in meetings
- Greet everyone you see at work with “how are you holding up”
- Put up a gratitude board or shout out board virtually or at the site
- Have structured brief check ins with colleagues especially after heavy moments
- Establish rituals: gratitude huddles, celebrations, checking in with a colleague after tough cases, etc.

**Coherence**
- Focus on physical safety
- Lean into difference and difficulty (speak the unspeakable)
- Repeat what someone has said to make sure you got it
- Self-disclose when relevant
- Address difference and facilitate healing

**Collaboration**
- Reflect on data together, invite staff member to reflect and share insights and experiences
- Theme days like: Mindful Mondays, Teaching Tuesdays, Wellness Wednesdays, Thankful Thursdays, Fun Fact Fridays
- Develop a Staff Support Outreach team
Training & Capacity Building

Pillars

A Healthy City: Healthy Families & Multi-Generational Family Supports

A Healing City: Resiliency-Focused and Trauma-Sensitive

A Pathway City: Promoting Postsecondary Opportunities

An Aligned City: Coordinated System of Care

A Welcoming City: Cultural Humility & Responsiveness
A Healing City:

Resiliency-Focused and Trauma-Sensitive

COVID-19 PANDEMIC: On April 8th, 2020, Mayor London N. Breed announced the activation of Heal San Francisco to support the city’s recovery from the impact of mass trauma.

PRE-COVID-19: To expand and adapt the DPH’s TIS model across the City’s workforce.

HEAL SF Logistics Team: Coordinated effort to actualize the TIS principles relative to our multitude of trauma, pandemics, fires, and ongoing experience of and fight against racial injustice and racism.
Collective Grief:

- 450k+ COVID19 related deaths in the United States.

- Working remotely or being deployed hasn’t been easy.

- Stress and financial anxiety are high. Workers are not taking enough time off to recharge, fearing they could be the next layoff if they don’t work hard enough.

- Multiple losses/grievances in a short period poses unique challenges.
Sample Employee Comments

We’re being forced into the world’s largest work-from-home experiment and, so far, it hasn’t been easy for a lot of us.

When my daughter naps, I either have 48 minutes or 3 hours to work on my projects.

I haven't seen my mother in months and it hurts.

I’m afraid of returning back to work!

I don't know what I am? Am I essential, frontline? Does anybody care?
Heal San Francisco

HEAL SF COVID-19 RESPONSE

LAYERS OF RESPONSE AND HEALING

- STAFF WELLNESS PUBLIC EDUCATION
- TRAUMA-INFORMED SYSTEMS LEADERSHIP
- STREAMLINED RESOURCES WEBSITE (DIGITAL CARE CENTER)
- DISASTER RESPONSE MUTUAL FRONTLINE RESPONSE NETWORK

PREVENTION

SYSTEMS TRANSFORMATION

BROAD MITIGATION

INTERVENTION INDIVIDUAL
Thank you!
For more information, please visit:
WWW.HEALSANFRANCISCO.ORG
Has your locale engaged in efforts to support city workers or essential workers during the pandemic?
Navigate to your group’s Jamboard page (group number corresponds with breakout room number)

To post a sticky note:
1) Click on the sticky note on the left panel
2) Write
3) Press save
Coming Together

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Text Chat Question: What would be most helpful to you in terms of next steps?
Resources
CDC Technical Packages

Preventing Suicide: A Technical Package of Policy, Programs, and Practices

Preventing Adverse Childhood Experiences (ACEs): Leveraging the Best Available Evidence

https://www.cdc.gov/violenceprevention/communicationresources/pub/technical-packages.html
Wellbeing Trust Guide for Health Systems

Adverse Community Experiences and Resilience: A Framework for Addressing and Preventing Community Trauma

Elijah Cummings Healing Cities Act in Baltimore

Trauma Transformed

MISSION

Communities working together to change the way our systems understand, respond to and heal trauma.

VISION

Our systems of care are trustworthy, compassionate, coordinated, and responsive to the needs and priorities of our communities.

ABOUT

Trauma Transformed advances trauma-informed and healing-centered system change through community- and cross-system collaboration that mitigates stress, trauma and oppression impacting our communities.

http://traumatransformed.org/
Return to Worksite Checklist for Leaders

Phase 1: Preparation
Focus on Safety & Communication

- Gauge current staff well-being.
- Develop return to worksite protocols for safety in the workplace.
- Inform staff of new policies and supports related to returning to worksites.
- Empower staff to provide input and feedback on return to worksite policies and supports.

Phase 2
Focus on Presence & Community Building

- Welcome staff and provide ample opportunities to connect socially.
- Orient everyone to new rules for the workspace.
- Be open, available, and present for your staff in a proactive manner.

Phase 3
Focus on Relational Leadership

- Be human. Express and hold emotion and vulnerability.
- Be in tune with your staff's feelings and evolving needs. Provide related supports.
- Provide specific, genuine, and frequent appreciation to staff.

Phase 4
Focus on Reflection and Planning

- Begin establishing new routines and workflows.
- Create an environment that is reflective, not reactive.
- Continue to practice model and support self-care for staff.

Need Help? Know Someone Who Does?

Online Lifeline Crisis Chat: https://suicidepreventionlifeline.org/chat/