

# Creating Cultures of Trauma-Informed Care

Author: Roger D. Fallot, Ph.D.  
Presenter: Lori L. Beyer, LICSW  
Community Connections  
Washington, DC

# A Culture Shift: Core Values of Trauma-Informed Care

**Safety:** Ensuring physical and emotional safety

**Trustworthiness:** Maximizing trustworthiness, making tasks clear, and maintaining appropriate boundaries

**Choice:** Prioritizing Client choice and control

**Collaboration:** Maximizing collaboration and sharing of power with Clients

**Empowerment:** Prioritizing Client empowerment and skill-building



# A Culture Shift: Changes in **Understanding** and **Practice**

- Thinking differently as a prelude to acting differently
- Thinking differently initiates and sustains changes in practice and setting
- Acting differently reinforces and clarifies changes in understanding



# Changes in **Understanding**: Trauma-Informed Services

## Trauma-informed vs. Trauma-specific

Trauma-informed services:

- Incorporate knowledge about trauma—prevalence, impact, and the diverse paths to recovery—in all aspects of service delivery and practice
- Are hospitable and engaging for survivors
- Minimize revictimization: “do no harm”
- Facilitate healing, recovery, empowerment
- Emphasize collaboration throughout the system



# Changes in **Understanding:** Why Trauma-Informed Services?

- Trauma is pervasive
- Trauma's impact is broad and diverse
- Trauma's impact is deep and life-shaping
- Trauma, especially interpersonal violence, is often self-perpetuating
- Trauma differentially affects the more vulnerable
- Trauma affects how people approach services
- The service system has often been retraumatizing
- Staff members are deeply affected by systemic stressors



# Is Trauma-Informed Care a Fad?

## History of TIC

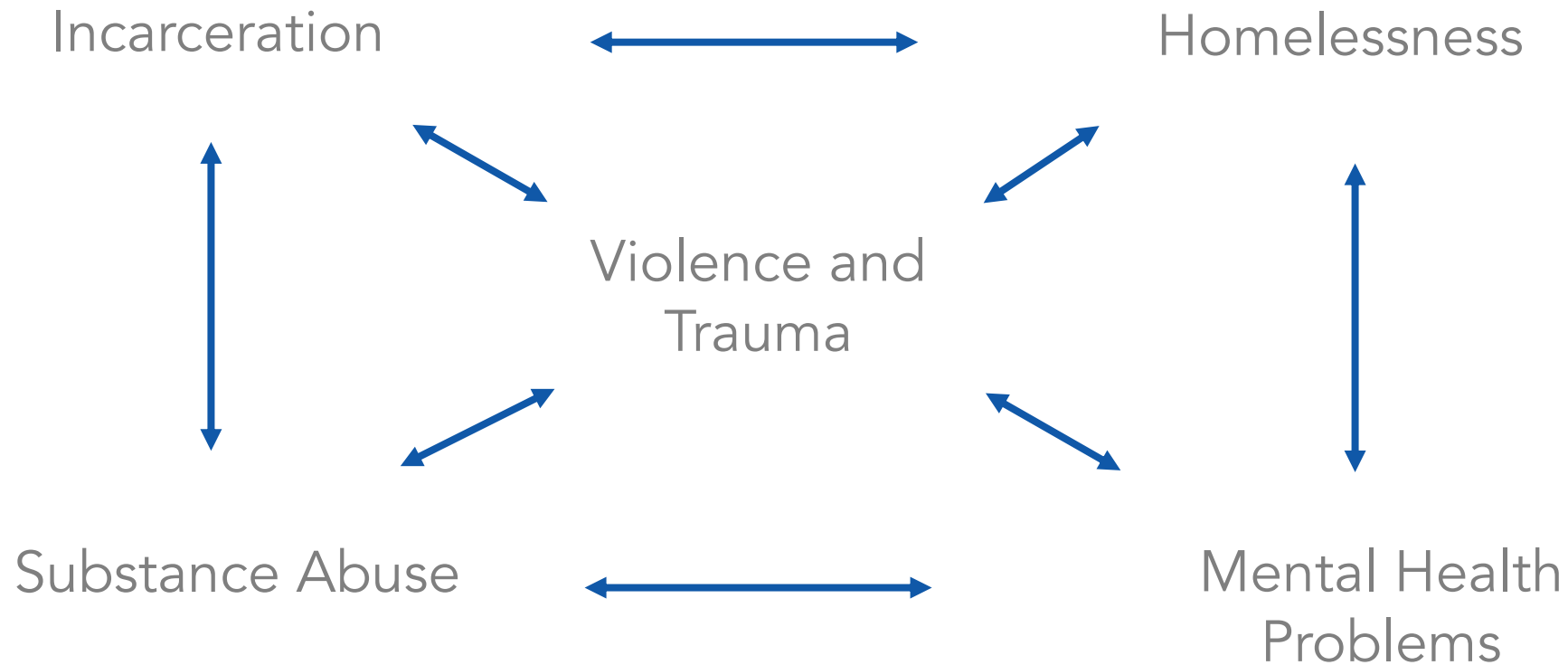
- SAMHSA Matrix: Trauma as Cross-Cutting Principle; Women, Co-Occurring Disorders, and Violence Study; National Center for Trauma-Informed Care; NCTSN
- Harris, M. & Falot, R.D. (Eds.) (2001). Using Trauma Theory to Design Service Systems. San Francisco: Jossey-Bass.
- NASMHPD Initiatives

## Current Initiatives

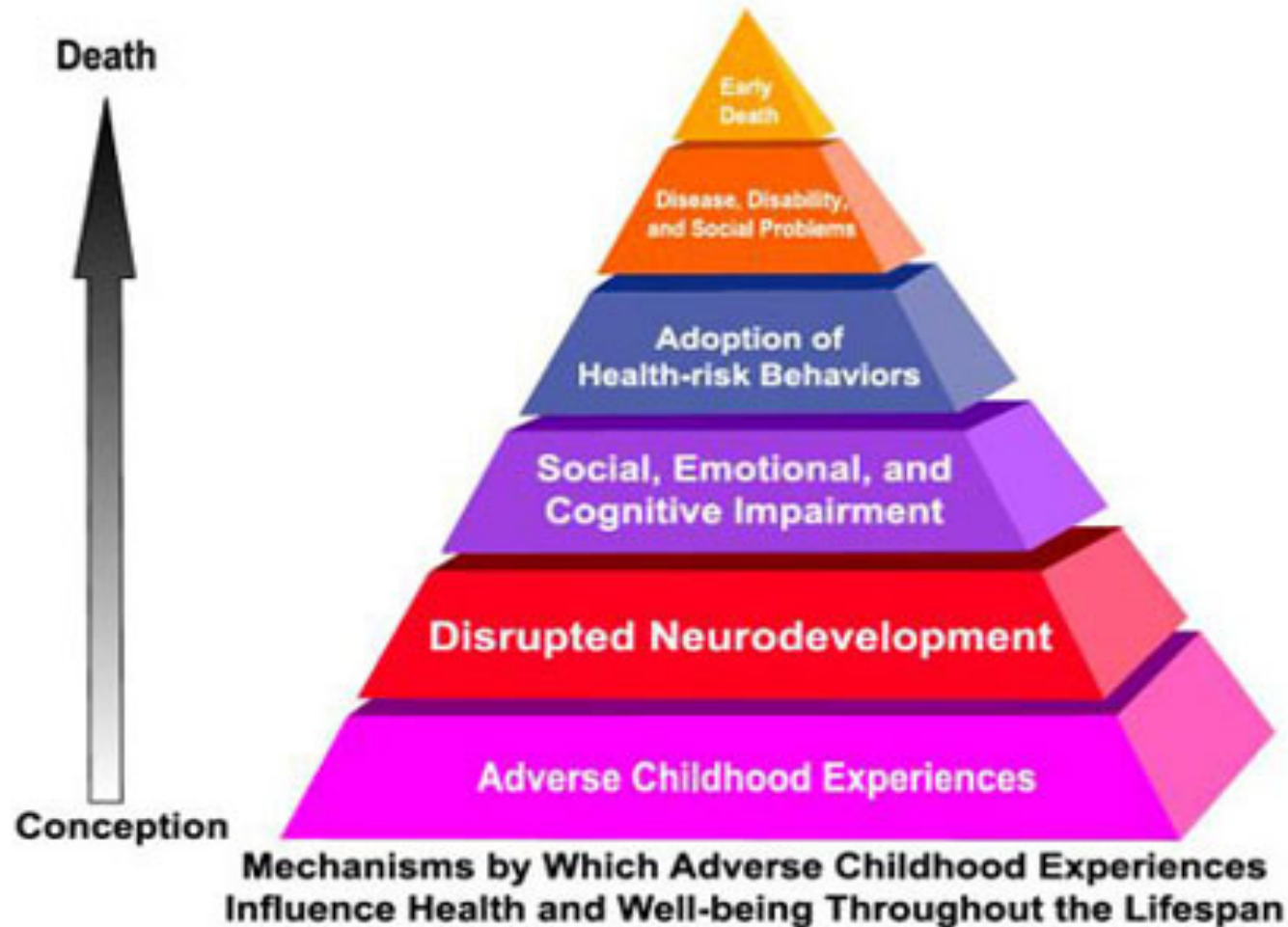
- Federal: inclusion in RFAs
- States: State Public Systems Coalition on Trauma



# Changes in **Understanding**: The Centrality of Trauma



# Adverse Childhood Experiences ([www.ACEstudy.org](http://www.ACEstudy.org))





# A Culture Shift: Core Values of Trauma-Informed Care

**Safety:** Ensuring physical and emotional safety

**Trustworthiness:** Maximizing trustworthiness, making tasks clear, and maintaining appropriate boundaries

**Choice:** Prioritizing Client choice and control

**Collaboration:** Maximizing collaboration and sharing of power with Clients

**Empowerment:** Prioritizing Client empowerment and skill-building



# Safety: Physical and Emotional Safety

- To what extent do service delivery practices and settings ensure the physical and emotional safety of clients?
- How can services and settings be modified to ensure this safety more effectively and consistently?



Where is the “here” in this quote?

“If people don’t feel safe here,  
nothing else is going to happen.”

<http://www.youtube.com/embed/Pwghabw4N80?rel=0>



# Denial Stops Here!

---



Optimism Lives Here!  
We Believe in Kids!

---



“You are Entering a Safe  
and Special Place.”

---



From wherever you are,  
enter and be welcome.

---



# Safety

## Ideas

- Privacy when discussing personal items
- Can discuss anything and will not be judged
- Not causing them to wait for you in an unsafe environment
- Photos of staff on a bulletin board
- Send staff to Ally Training (LGBTQ awareness)





# Trustworthiness: Clarity, Consistency, and Boundaries

- To what extent do current service delivery practices make the tasks involved in service delivery clear? Ensure consistency in practice? Maintain boundaries, especially interpersonal ones, appropriate for the program?
- How can services be modified to ensure that tasks and boundaries are established and maintained clearly, consistently, and appropriately?



# Trustworthiness

## Ideas

- Trust is earned not given
- Do what you say you are going to do
  - If you say 1:00, meet at 1:00
  - If you say you will make a referral, make it
- Collaborative goal setting
- Practice appropriate boundaries
- Treat every client consistently



# Learning from the Remodelers

**in·tune**  
customer service™  
FROM KITCHEN TUNE-UP

It's customer service that's in tune with you. It's the fresh new look you want without the remodeling hassles you may have experienced in the past. **It's eight trustpoints that set us apart from ordinary remodeling service companies.**

TRUSTPOINT NO.1  
*We guarantee our estimates.*

TRUSTPOINT NO.2  
*We guarantee our work.*

TRUSTPOINT NO.3  
*We arrive on time.*

TRUSTPOINT NO.4  
*We clean the work area daily.*

TRUSTPOINT NO.5  
*We return messages within 24 hours.*

TRUSTPOINT NO.6  
*We strive for harmony with our daily routine.*

TRUSTPOINT NO.7  
*We tell you what we're going to do before we do it.*

TRUSTPOINT NO.8  
*We listen carefully, tell it straight and keep our promises.*

# Choice: Client Choice and Control

- To what extent do current service delivery practices prioritize Client experiences of choice and control?
- How can services be modified to ensure that Client experiences of choice and control are maximized?



# Choice

## Ideas

- Small choices
  - Walk in front of me or behind
  - Door open or closed
  - Lighting
  - Meet here or in their home
- Give clients choice in who they work with
- Make client choices understandable
- Eliminate negative consequences for exercising particular choices
- Client's goals are given the greatest weight in goal setting



# “An Ounce of Choice is Worth a Pound of Cure”

- Client preferences in routine matters
- Client preferences in crisis
- Small choices can have big consequences



# Collaboration

## Collaborating and Sharing Power

- To what extent do current service delivery practices maximize collaboration and the sharing of power between providers and Clients?
- How can services be modified to ensure that collaboration and power-sharing are maximized?



# Collaboration

## Ideas

- Form a Client Advisory Board (CAB)
- Hold Focus Groups
- Administer Client Satisfaction Surveys
- Develop a crisis plan for clients and consistently take into account these preferences when responding to a crisis





# “All Abuse is the Abuse of Power”

- > Doing **to**
- > Doing **for**
- > Doing **with**



# Empowerment

## Recognizing Strengths and Building Skills

- To what extent do current service delivery practices prioritize client empowerment, recognizing strengths and building skills?
- How can services be modified to ensure that experiences of empowerment and the development or enhancement of client skills are maximized?



# Empowerment

## Ideas

- Routinely recognize client strengths and skills in planning, implementing, and evaluation of services
- Develop a training on skill building for staff
- Expand the role of peer support specialists
- Expand voice of peer support specialists



# A Starbucks Customer Satisfaction Survey Story

- Was your drink prepared properly?
- Did anyone greet you by name?
- Was your visit to Starbucks \_\_\_\_\_?  
(fill in the blank)



# Conclusion

- What we know about trauma, its impact, and the process of recovery calls for trauma-informed service approaches
- A trauma-informed approach involves fundamental shifts in thinking and practice at all programmatic levels
- Trauma-informed services offer the possibility of enhanced collaboration for all participants in the human service system



# Community Connections ([www.ccdc1.org](http://www.ccdc1.org))

## Materials for “Creating Cultures of Trauma-Informed Care”

- Harris, M. and Fallot, R.D. (Eds.) (2001). Using Trauma Theory to Design Service Systems. San Francisco: Jossey-Bass.
- “CCTIC Program Self-Assessment and Planning Protocol”
- “CCTIC Program Self-Assessment Scale”
- “CCTIC Program Services Implementation Form”

