

# Trauma Informed Care and Assertive Engagement

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# **Group discussion**

How do you translate what you saw in the film to your own work?

Given your understanding of the film how would you identify/define a trauma sensitive learning environment?



### Individual reflection

In the afternoon we'll talk more about Trauma Informed Care and Assertive Engagement, what questions are you left with about how to support the people you work with?

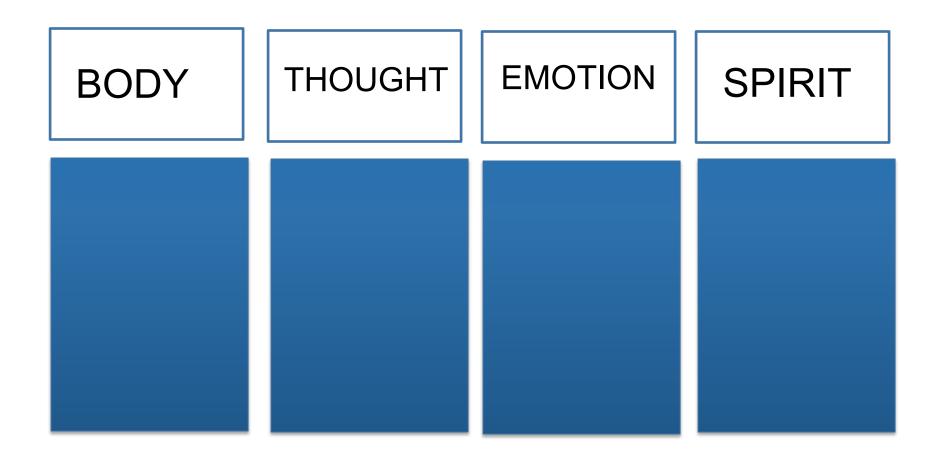


# Defending Childhood Initiative

This project was supported by Grant Number 2012-CV-BX-K055 awarded by the Office of Juvenile Justice and Delinquency Prevention, Office of Justice Programs, U.S. Department of Justice. Points of view or opinions in this document are those of the author and do not necessarily represent the official position of the U.S. Department of Justice.



#### Mindfulness this afternoon



### A trauma-sensitive school...

Realizes both the widespread impact of trauma and the role the school can play in promoting resiliency; recognizes the signs and impacts of trauma in students, families and staff; and responds by fully integrating knowledge about trauma into policies, procedures, and practices, and seeks to actively resist re-traumatization of students and staff.



<sup>\*</sup> Adapted from SAMHSA's Concept of Trauma and Guidance for a Trauma Informed Approach (2014) by the DCI trauma informed schools advisory group.

# What's missing from the Original ACE survey?





#### The Pair of ACEs

#### **Adverse Childhood Experiences**

Maternal

Depression

Physical &

**Emotional Neglect** 

Emotional & Sexual Abuse

Divorce

Mental Illness

Substance Abuse

Incarceration

**Domestic Violence** 

Homelessness

**Adverse Community Environments** 

**Poverty** 

Violence

**Building Community Resilience** 

Discrimination

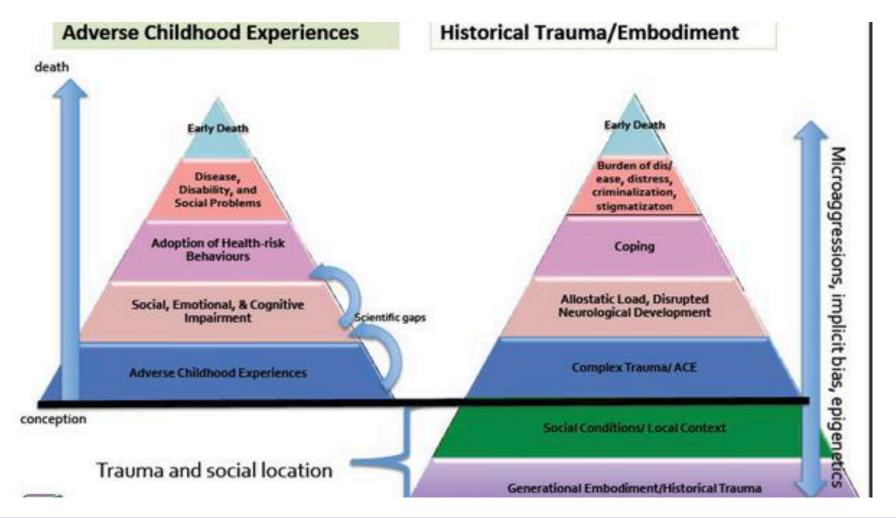
Community Disruption

Lack of Opportunity, Economic Mobility & Social Capital Poor Housing Quality & Affordability

Milken Institute School of Public Health
THE GEORGE WASHINGTON UNIVERSITY

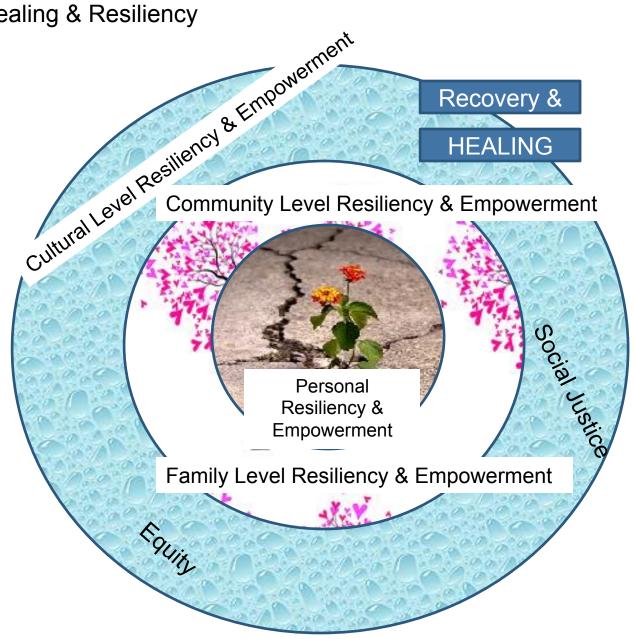
Ellis W., Dietz W. BCR Framework Academic Peds (2017)





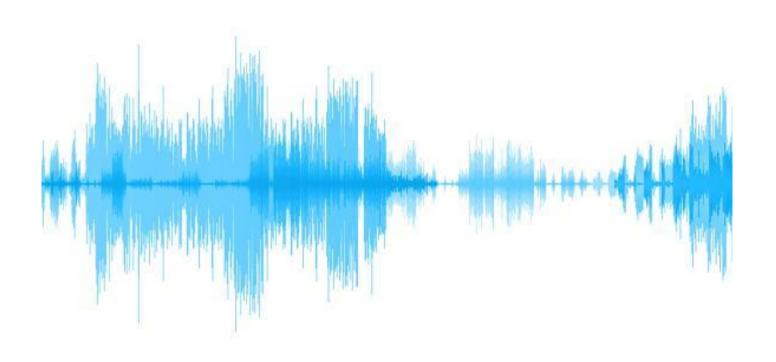


#### Context of Healing & Resiliency



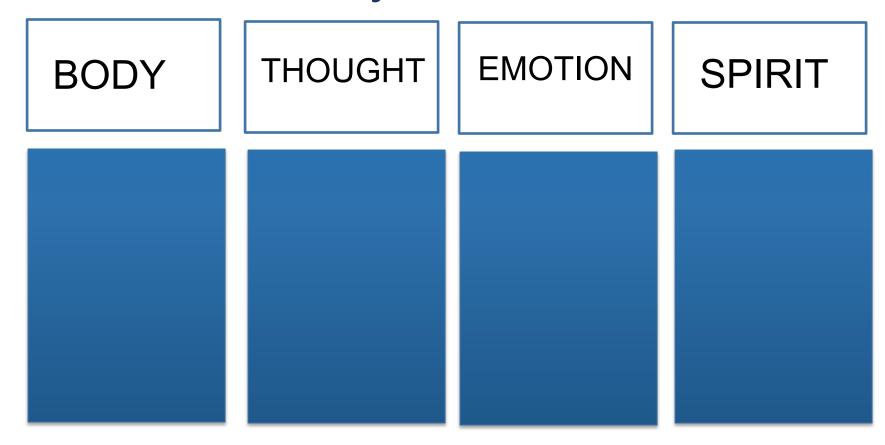
# Self Regulation

### Rhythm





# Tracking awareness during today's session



# Trauma sensitive meetings

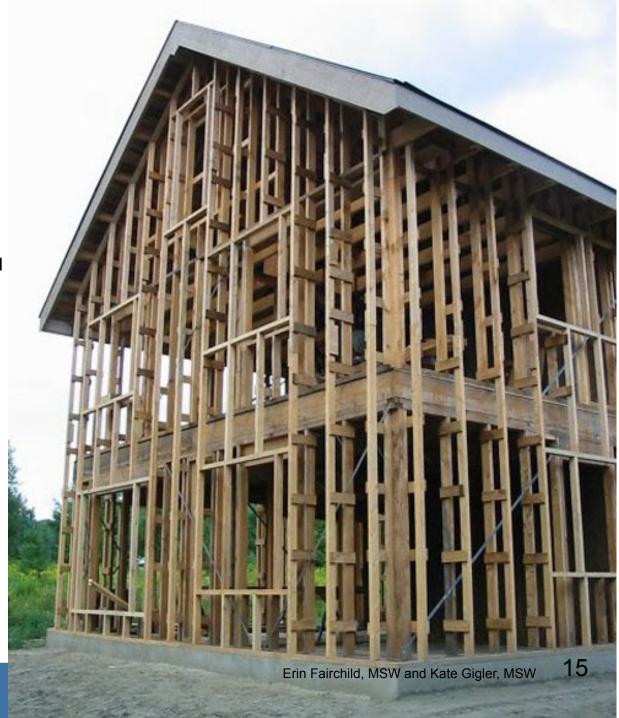
Breaks (rhythm and movement)

Acronyms

Physical space (room)

Clearly stated expectations and goals

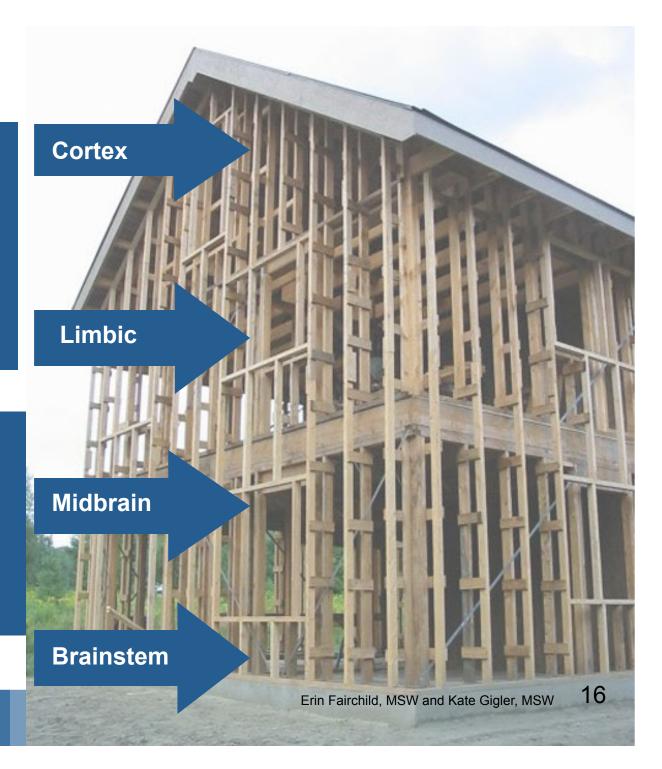
Brain development is like constructing a building. You can always remodel and add-on, but the foundation must be strong.





As the brain develops upward and outward, emotional regulation skills become more complex, IF we have learned basic emotion regulation.

Basic emotional regulation happens here, & is developed by our experience.





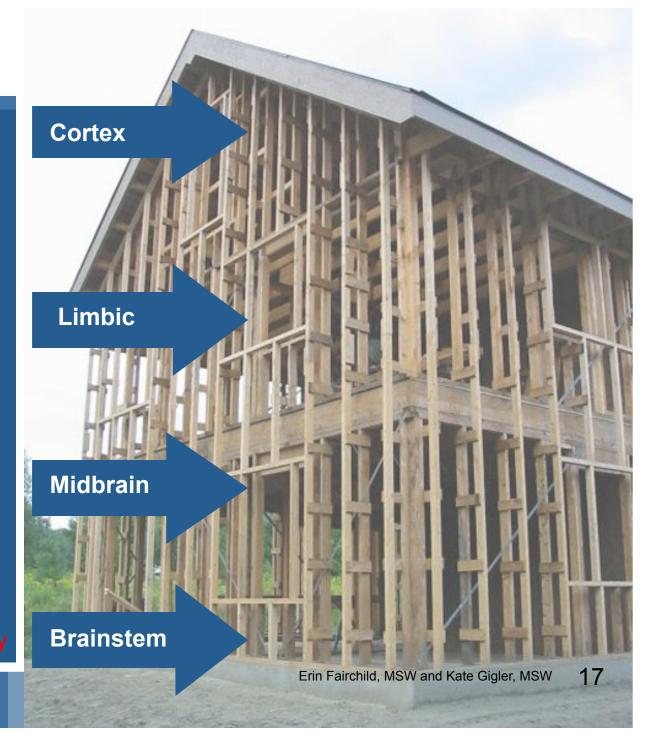
Abstract thought Concrete thought Affiliation

Attachment Sexual behavior Emotional reactivity Motor regulation

Arousal Appetite Sleep

Blood pressure Heart rate Body temperature

-Dr. Bruce Perry



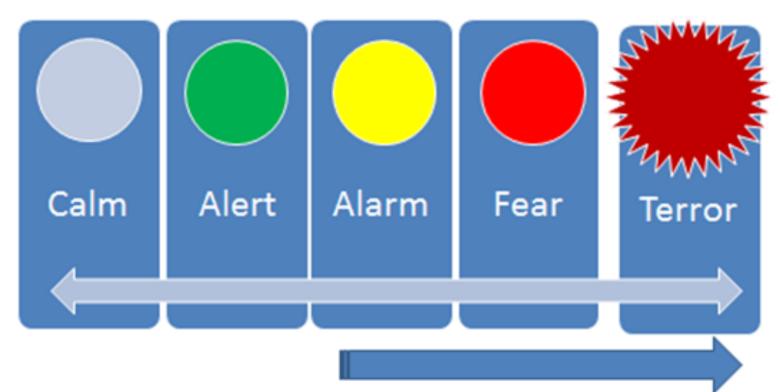


# Self Regulation

#### Movement



# **Brain States**



Dr. Bruce Perry M.D. 2010

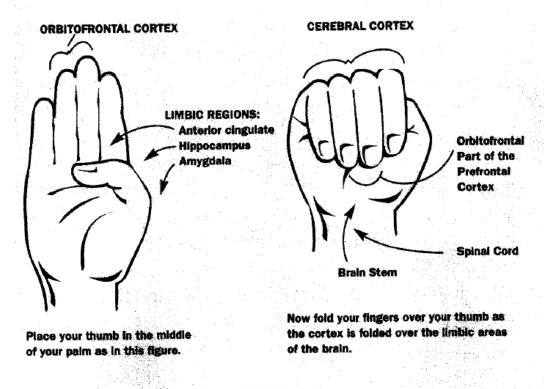
Fight or Flight Mode Enacted

Cortex is Difficult to Access

Image by Dr. Bruce Perry, M.D. Used with permission

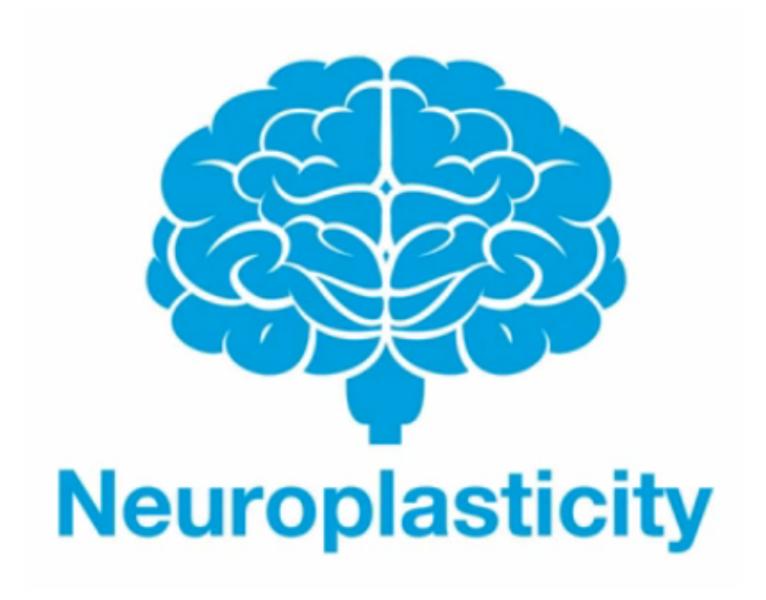


#### "FLIPPING YOUR LID"



#### FIGURE 5

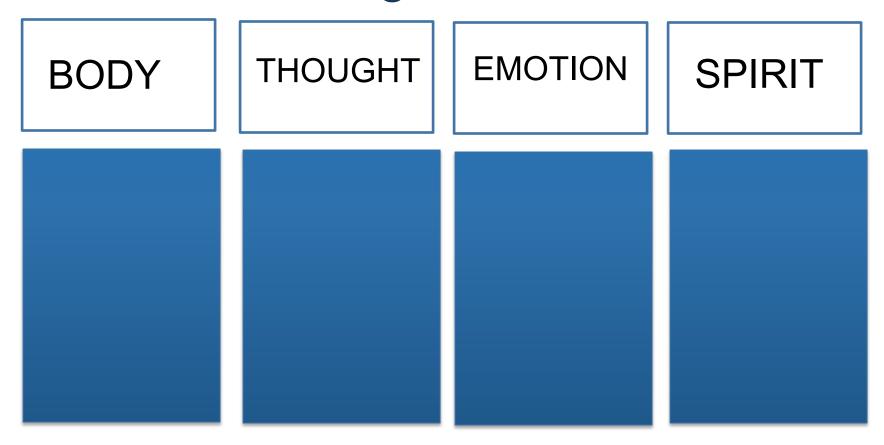
Dan Siegel's Brain Hand Puppet from Siegel & Hartzell (2003), Parenting from the inside out. P.173



# Changing Minds: Unique



# Tracking awareness during this morning's sessions





# Why "How" we do what we do is much more important than what we do





## Assertive What is AE?

"Working with individuals meeting them where they are at currently and honoring them as experts in their own lives."

"It is a strength-based approach where you connect with others at a deeper level."

"I have heard that it is very effective technique to work with community. It is the way to non intrusively get clients to talk about the problems, concerns and solution."

"It's based on the assumption that people can make changes for themselves given the right context."





Assertive Engagement weaves three evidence based practices together with the processes and outcomes associated with your program to make a cohesive model

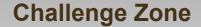


- Strengths Based Practice
- Motivational Interviewing
- Assertive Outreach (ACT)
- The processes and outcomes of your program





# Challenge Circles





Danger Zone!!!!



# REALIS BETTER THAN PERFECT

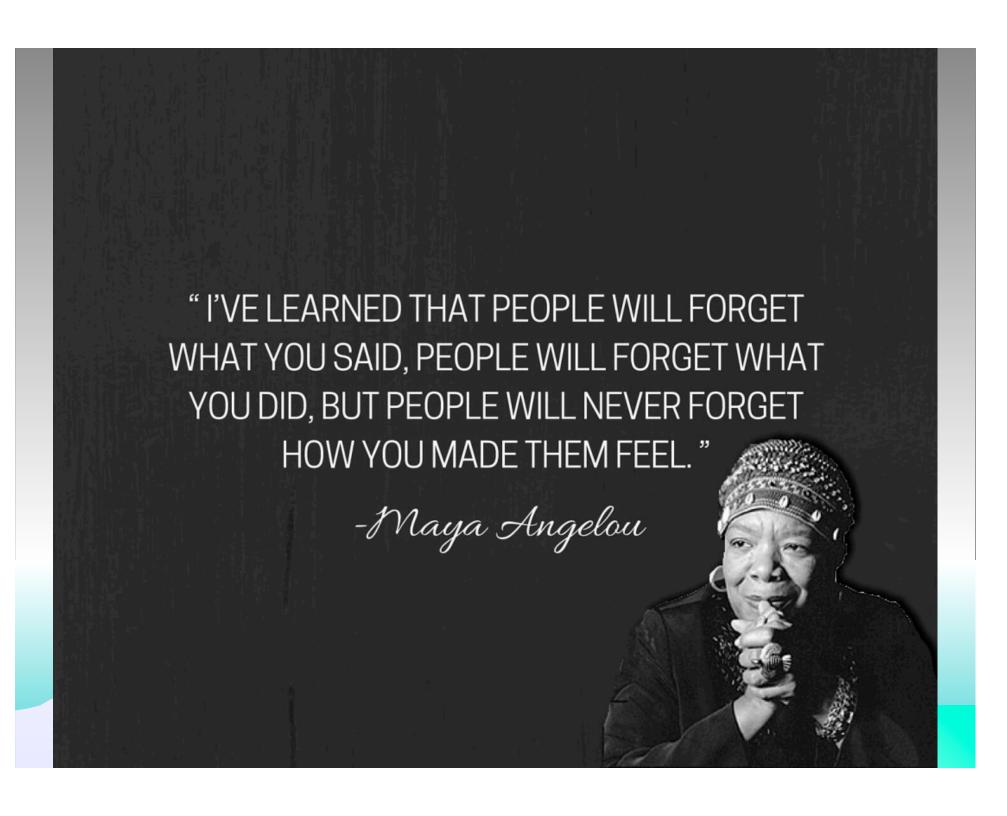
**Comfort Zone** 





# **Listening Activity**

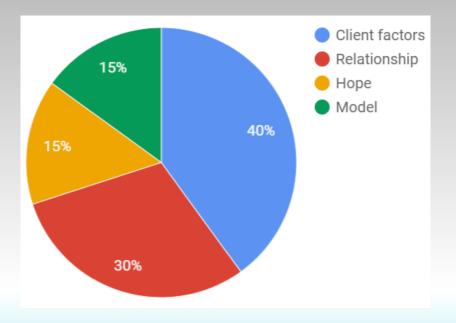






### **What Works?**

- Common Factors Theory suggests that only 15% of client success is attributable to the model used.
- 85% of factors identified for successful treatment come from client factors, hope, and the relationship between the provider and client







## How to give information

ASK - OFFER - ASK

- Ask what they already know
- 2. Ask permission to provide new information
- 3. Offer the information
- 4. Ask what they think





### Three "Sets" of AE



Mind Set = How we think about the people we work with

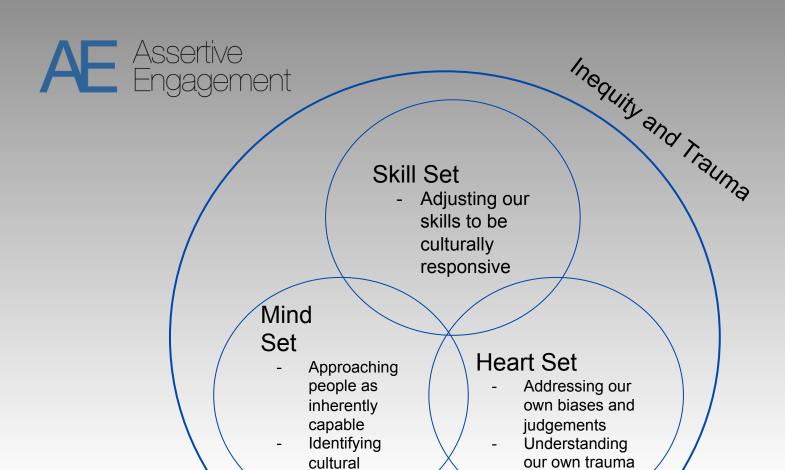


Skill Set = How we do our work



Heart Set = How we feel about and how we treat the people we work with





strengths





## What is empathy?







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  - •Brené Brown on Empathy RSA Short video: https://www.youtube.com/watch?v=1Evwgu369Jw
  - •The Effective/Ineffective Physician videos were produced by University of Florida Department of Psychiatry. Funded by Flight Attendant Medical Research Institute Grant #63504
  - •Eleanor Longden "The Voices in My Head" TED talk: https://www.youtube.com/watch? v=syjEN3peCJw
  - •AE training for Multnomah County was originally led by Seth Lyon, LCSW with Kenan Ginsberg, LSSW.

