Wednesday, May 17, 2023 12PM/11CT

Clearinghouse on Supervised Visitation Phone Conference/Webinar Agenda





Discussion

- 1. Welcome and Announcements Everyone is invited!
- 2. Check the listings on the website to ensure your program information is up to date and correct for the quarterly report. If you need to add or change anything, email Lyndi Bradley at lbradley2@fsu.edu
- 3. June Phone Conference: June 21, 2023
- 4. Questions from Directors
- 5. Update on SB 2186
- 6. Research Corner: Recent research on issues around substance use disorders and parenting.
- 7. Free CTIPP Toolkit More Trauma-Informed Workplaces: https://www.ctipp.org/post/toolkit-trauma-informedworkplaces
- 8. Survey on Practices & Policies— Review current responses: https://fsu.qualtrics.com/jfe/form/SV_8AksIZDQ95vIluy
- 9. Trauma-Aware Communication Posters

Research Corner: 2022-2023

1. Voss, M. W., Barrett, T. S., Campbell, A. J., & Van Komen, A. (2023). Parenting and the opioid epidemic: A systematic scoping review. *Journal of Child and Family Studies*. <u>https://doi.org/10.1007/s10826-023-02576-2</u>

This study examines how opioid misuse impacts the parent-child relationship. It was found that a parent's alcohol misuse is predictive of adolescent alcohol use. Substance misuse directly impacts impairments in the child's physical safety, financial security, and exposure to neglect or abuse. Children who live in a home with someone who uses opioids were found to have lower attachment later in life, increased emotional and behavioral issues, and poorer social skills. Additionally, they were more likely to experience impairment in their social and mental health as children and throughout their lives.

 Rankin, L., Mendoza, N. S., & Grisham, L. (2023). Unpacking perinatal experiences with opioid use disorder: Relapse risk implications. *Clinical Social Work Journal*, 51(1), 34–45. <u>https://doi.org/10.1007/s10615-022-00847-x</u>

This study examined the perinatal experiences of mothers with substance use through 6 months postpartum. Mothers reported their experience across seven themes: maternal childhood bond, pregnant and postpartum attachment, birth experience support, child welfare involvement, breastfeeding, mental health, and recovery plan. All mothers reported wanting to create a bond with their babies and were shocked by their pregnancy since it was unexpected. Mothers with no urges and mothers with no initial urges to use reported having no difficulty developing an attachment with their baby during pregnancy. Mothers who had urges to use reported not having a strong attachment with their babies during pregnancy. Additionally, mothers with no urges to use reported having a support system while pregnant; mothers with urges to use reported that they would have liked to have a support figure present. Mothers who did not have urges to use report not having any child welfare involvement after the initial interview, while mothers with no initial urges and with urges were involved with the child welfare system after the child was born, and some had even their child in out-of-home placements. Mothers who did not have urges and those without initial urges did not frequently report having mental health challenges, while mothers who had the desire to use frequently reported having mental health challenges. All mothers, regardless of their urges, reported that their baby was a motivator for working towards recovery.

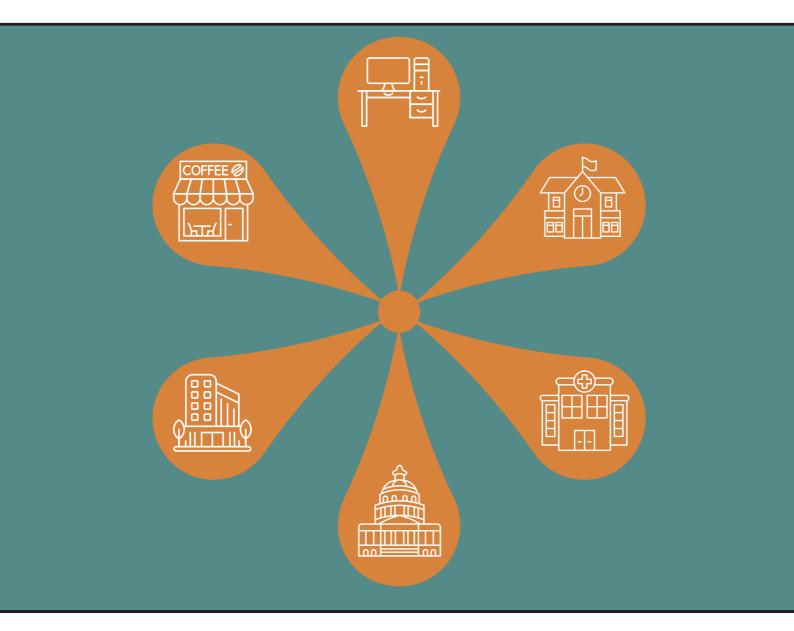
 Dare, J., Wilkinson, C., Karthigesu, S. P., Coall, D. A., & Marquis, R. (2023). Keeping the family: A socio-ecological perspective on the challenges of child removal and reunification for mothers who have experienced substancerelated harms. *Children and Youth Services Review*, 145, 106772. <u>https://doi.org/10.1016/j.childyouth.2022.106772</u> This study explores the experiences of parents whose children have been removed due to parental substance use. Parents who participated in the study all have a history of complex barriers and trauma and a deep commitment to their children. Some barriers experienced towards reunification by the parents included limited social support, insecure housing, and challenges meeting the conflicting requirements of the child welfare and justice system. Some support services that parents believe would be beneficial include opportunities to connect with community groups and other parents in their community while receiving the services they need.

 McWey, L. M., Cui, M., & Stevenson Wojciak, A. (2023). Current caregiver involvement and contact with biological parents are associated with lower externalizing symptoms of youth in out-of-home child welfare placements. *Journal of Social Work Practice*, 37(1), 63–78. https://doi.org/10.1080/02650533.2022.2034767

This study investigated how the involvement of current caregivers and the amount of contact a child had with their biological parents affected their externalizing symptoms. It was found that there is a significant interaction between current caregiver involvement and the amount of biological parent contact on youths' externalizing symptoms. More so, it was found that it is beneficial for a child's mental health to have caregivers involved in their life and biological parents who regularly keep in contact with them.



TRAUMA-INFORMED WORKPLACES Concepts, Strategies, and Tactics to Build Workplaces that Support Well-Being



Written by Whitney Marris, Director of Trauma-Informed Practice & System Transformation Edited and designed by Laura Braden Quigley, Director of Communications & Outreach

CTIPP.org

#TransformTrauma | #HOPEisNEAR



CONTEXT & ACKNOWLEDGEMENTS

"Trauma-informed workplaces offer a sanctuary of safety and support, a place where people can bring their whole selves and be valued for who they are."

Sandra L. Bloom, M.D., CTIPP Board Chair

This toolkit provides educational concepts and practical strategies to support team members (I.E., defined in this toolkit as employees, staff, workers, interns, fellows, C-suite leadership, human resources and administrative professionals, volunteers, committee and board members, etc.) in advocating for more trauma-informed workplaces.

It is essential to recognize that trauma-informed change requires commitment from team members across all roles, industries, sectors, and generations – no one requires an advanced education or special degree to make an impact as a changemaker. The highlighted content is meant to serve as a starting point that can be contextualized based on the needs and priorities of individual settings and systems.

Creating trauma-informed spaces is not about checking action items off a definitive list or taking a series of prescribed steps that can be universalized across all settings. There is also no finite endpoint to this journey. Instead, implementing trauma-informed change involves a commitment to an ongoing reflection, evaluation, discovery, and reform process.

Viewing workplaces as living and learning systems, or biocracies, is crucial because it recognizes that organizations are not static entities but dynamic systems that can grow, change, and develop over time. The term biocracy was first coined by physiologist Walter B. Cannon in the 1930s to describe a hypothetical society modeled after the human body. Differentiated cells are organized into functional organs that cooperate in a dynamic democracy.



In a biocracy, the organization is seen as a living system that can become ill and recover. This perspective emphasizes the importance of nurturing the health and vitality of an organization rather than simply focusing on its productivity or financial performance. Biocracy also acknowledges the importance of learning within an organization, recognizing that ongoing learning and development are necessary for an organization to thrive.

By viewing workplaces as biocracies, organizations can create a culture of collaboration, innovation, and continuous improvement. This approach also fosters a sense of shared responsibility among team members, encouraging them to work together towards a common goal.

We acknowledge that real-world considerations, such as meaningful leadership engagement and support for change, will significantly influence implementation and sustainability.

While tremendous change can occur with and emanate from a person's actions, the primary onus and responsibility for creating trauma-informed work environments must remain at the leadership/organizational level.

We also recognize that each workplace has strengths, culture, and context and honor our advocates' expertise in their settings. This toolkit is intended to provide foundational information to support making an impact in the here and now and navigating future challenges to sustaining trauma-informed transformation.

We hope that each person reading this toolkit emerges with ideas on how they will implement the methods, models, principles, and ideas introduced that fit them.

We stand on the shoulders of giants. From academics to advocates, we want to honor the work, innovation, and foresight of the pioneers of the trauma-informed movement. And we are grateful to our co-authors for their time and passion in producing this valuable resource:

- <u>Whitney Marris</u>, Director of Trauma-Informed Practice & System Transformation
- Laura Braden Quigley, Director of Communications & Outreach

Do you have feedback, resource suggestions, or ideas to strengthen this toolkit? Share today: <u>ctipp.org/connect</u>.



WHY TRAUMA-INFORMED WORKPLACES?

Why should organizations make their workplace more trauma-informed?

Simply put: we know from a robust and growing body of research that experiencing and being impacted by trauma is common.

Many credible <u>trauma definitions</u> exist, and we appreciate how <u>Resmaa Menakem</u> deftly explains the concept as "a thing or things that happened either too much, too soon, too fast, or for too long without something being attended to by something reparative or healing."

Traumatic experiences could include

- Physical, emotional, and/or sexual abuse
- Physical or emotional neglect
- Experiencing and/or witnessing violence
- Exposure to substance use and/or mental health challenges in the home
- Community violence
- Loss of a loved one to death, family separation, and/or abandonment, including child protection cases, divorce, incarceration, migration experiences, etc.
- Serious illness, pain, injury, medical procedures, and/or other frightening or upsetting healthrelated experiences experienced by oneself or cared-for ones
- Bullying, discrimination, and/or unjust treatment
- Poverty, hunger, and/or housing instability
- Natural disasters, unjust exposure to toxins/pollution, and/or environmental degradation
- Collective and/or historical identity-based experiences (e.g., racism, genocide, ethnocide, oppression, disenfranchisement, etc.)
- Refugee/asylee experiences, exposure to torture, terrorism, and/or war experiences

"Today, more and more workers are worried about making ends meet, dealing with chronic stress, and struggling to balance the demands of work and personal lives. The toll on their mental health is growing."

> Vivek H. Murthy, M.D., MBA, and 19th Surgeon General of the United States



Trauma-Informed Workplaces

Seventy percent of U.S. adults have <u>experienced</u> at least one traumatic event, and 76% percent of full-time U.S.-based employees <u>reported</u> at least one symptom of a mental health condition in 2021, an increase of 17 percentage points in just two years.

Since the onset of the global pandemic, the American workforce has experienced compounding societal pressures – individually and collectively. Fifty-two percent of those surveyed <u>reported</u> feeling burned out before COVID-19, and 67% believed that feeling worsened throughout the pandemic.

Another 2021 survey <u>found</u> that 80% of workers reported that workplace stress affects their relationships with friends, family, and coworkers. Only 38% of those who knew about their organization's mental health services would feel comfortable using them – signaling an urgent need for change in how organizations and systems support workforce well-being.

Risks to mental health at work can include

- Under-use of skills or being under-skilled for work
- Excessive workloads or work pace, understaffing
- Long, unsocial, or inflexible hours
- Lack of control over job design or workload
- Unsafe or poor physical working conditions
- Limited support from colleagues or authoritarian supervision/leadership
- Violence, harassment, or bullying
- Discrimination and exclusion
- Unclear job role
- Under- or over-promotion
- Job insecurity, inadequate pay, or poor investment in career development

- Conflicting home/work demands
- Perceived or actual resource insufficiencies
- Uncertainty and/or lack of transparency
- Poor/inconsistent communication
- Perceived or actual powerlessness/lack of control in one's work role/activities
- Having to make professional decisions out of alignment with one's personal values
- Limited opportunities/support for growth
- Lack of access to resources and benefits that support work-life balance and holistic well-being
- Administrative burden



And beyond the toll on health and well-being, U.S. workforce-related chronic diseases and injuries <u>cost</u> employers more than half a trillion dollars in lost productivity each year.

Other costs include

- Mental health conditions are <u>estimated</u> to cost employers in the United States up to \$193.2 billion annually in lost earnings due to absenteeism and presenteeism.
- Anxiety and depression <u>cost</u> the global economy over \$1 trillion in lost productivity yearly.
- Workplace stress <u>costs</u> U.S. employers \$500 billion annually in lost productivity.

Trauma-informed approaches are gaining momentum across society – in <u>healthcare</u>, <u>education</u>, the <u>legal system</u>, <u>journalism</u>, and more – because they utilize the best scientific evidence, known as <u>NEAR (Neuroscience, Epigenetics, Adverse Childhood Experiences (ACEs), and Resilience</u> <u>research) science</u>, to help prevent avoidable harm, build resilience, and promote healing, engagement, and empowerment.

Trauma-informed policies and practices are comprehensive and focused on preventing, mitigating, and addressing stressful and adverse events. Trauma-informed workplaces can also increase safety, health, well-being, productivity, and commitment to the organization's mission.

The global pandemic has accelerated the adoption of this paradigm shift in communities across the nation and by many of our federal leaders, including U.S. Surgeon General Vivek Murthy, M.D., M.B.A., who opined in their 2022 landmark report, <u>Framework for Workplace Mental</u> <u>Health and Well-Being</u>:

"The pandemic has presented us with an opportunity to rethink how we work. We have the power to make workplaces engines for mental health and well-being. Doing so will require organizations to rethink how they protect workers from harm, foster a sense of connection among workers, show them that they matter, make space for their lives outside work, and support their long-term professional growth. This may not be easy. But it will be worth it because the benefits will accrue to workers and organizations. A healthy workforce is a foundation for thriving organizations and a healthy community."

Indeed, recent surveys also demonstrate a significant disparity between the support leaders think they are providing versus the support team members are experiencing.

- Seventy-one percent of surveyed employers <u>believed</u> they supported employee mental health well or very well, and only 27% of team members agreed.
- Ninety-seven percent of surveyed CEOs <u>said</u> all levels of their organization were empathetic to employees' mental health, and only 69% of team members agreed.



Trauma-Informed Workplaces

This disparity signals a need for change. It is well-established that workplaces that bridge the gap with genuine trauma-informed reforms can create an environment where trust and transparency are maximized. Hence, leaders can more authentically attune themselves to team members' experiences and take impactful action to implement changes to improve everyone's individual and collective experiences.

Organizations where team members <u>reported</u> trusting their management enjoyed

- 74% less stress
- 106% more energy at work
- 50% higher productivity
- 13% fewer sick days
- 76% more engagement
- 29% more life satisfaction
- 40% less burnout

A trauma-informed workplace can serve as a protective factor in someone's life and support a sense of meaning and connection to one's values. Beyond providing a livelihood, a healthy workplace can also <u>build</u> competence and help team members remain anchored in a shared purpose while providing lifelong connections, collaboration, and community opportunities.

Bottom line? Improving those environments with trauma-informed policies and practices can enhance safety, health, wellness, trust, and productivity, ultimately unleashing a positive ripple impact on their families and communities.

EXPLORE FURTHER:

- <u>Transforming Trauma Podcast: Creating Trauma-Informed Systems</u> (Sandra L. Bloom, M.D., and CTIPP Board Chair)
- <u>Workplace and Mental Health Well-being</u> (U.S. Surgeon General)
- <u>We Need Trauma-Informed Workplaces</u> (Harvard Business Review)
- Trauma-Informed Approach to Workforce (National Fund for Workforce Solutions)
- <u>Creating a Trauma-Informed Workplace: A Toolkit to Support Planning and Implementation</u> (Origins Training & Consulting)
- <u>Trauma-informed leadership through all stages of crisis: Reflections following the Camp Fire</u> (Leadership Magazine)
- <u>The ROI in workplace mental health programs: Good for people, good for business</u> (Deloitte)
- <u>2022 Mind the Workplace: Employer Responsibility to Employee Mental Health (Mental</u> Health America)



TRAUMA IN THE WORKPLACE

Most of your colleagues have likely experienced a traumatic event, yet, each of their experiences is wholly unique. Trauma, stress, and adversity affect everyone differently, and not everyone is aware or able to articulate how they have been adversely impacted.

Trauma can <u>diminish</u> healthy development, memory, perception, and judgment. Without proper support, healing, and repair, trauma can lead to changes in the brain that impact the body and mind throughout the lifespan and influence behavior and relationships.

Personal illness, loss of a loved one, childhood adversity, social isolation, economic loss/instability, wars, changes in access to human rights, social discord, humanitarian emergencies, and ongoing discrimination, racism, and oppression all compound to take an even greater toll on our well-being and ability to perform our jobs well. With each press of those buttons, our capacity to cope is diminished since we have not yet had the chance to recover from the last blow.

The workplace is no stranger to productivity, career growth, and professionalism expectations. It has been ingrained in us since pre-school when we were asked: "What do you want to be when you grow up?"

As we got older, our success was measured by our academic performance, achievement, and dedication to hard work. In addition to providing access to services, employers should incorporate mental health into workplace policies and practices.

This includes offering flexible working hours and paid sick leave, helping employees find resources for mental health issues outside the workplace, and setting up a safe space to discuss these topics.

Vernisha Crawford, CEO of the Trauma Informed Institute and Founder of the BYE Foundation



Individually, commons signs can include

- Feeling on edge or overwhelmed
- Chronic trouble focusing, concentrating, or paying attention
- Snappy, reactive, or irritable reactions high sensitivity to sensory stimuli (E.G., becoming irritable or stressed at the sound of someone chewing gum or tapping a pen on the table)
- Chronic illness or fatigue
- Mental health and substance use challenges. In Canada (with similar rates likely in the U.S.), "mental illness" is the fastest-<u>growing</u> disability claim type. In 2021, 40% of working-age adults in the U.S. <u>reported</u> mental health or substance use challenges.
- Increased apathy, cynicism, pessimism, resentment, and other barriers to feeling connected to the work
- Decreased compassion and/or empathy
- Limited self-efficacy (E.G., reduced confidence in capability, feeling like nothing you can do will help/make a difference, feeling like a failure, or doubting your ability to do your job well)
- Challenges with setting/maintaining healthy boundaries
- Altered views of oneself, others, or the broader world
- Sleep dysfunction
- Loss of ability to trust others/the organization/systems, in general
- Lack of sense of fulfillment/meaning
- Diminished creativity
- Increased defensiveness/feeling targeted when receiving feedback/challenges with taking accountability for actions
- Avoidance and/or procrastination
- Social withdrawal

Workplaces can help avoid misunderstandings and promote teamwork by shifting the frame and approach to one that acknowledges trauma and responds in ways that support a healthy workforce.

Imagine a team member with a history of high performance and engagement starting to withdraw and avoid their work responsibilities.

Trauma-informed organizations would see the notable shift in behavior as a signal for more proactive support versus labeling the team member as "lazy" or "disinterested" and, thus, withdrawing support, placing them on an employee improvement plan, or terminating employment.



Collectively, trauma can manifest in the workplace through

- Higher staff turnover. More than 40% of employees <u>surveyed</u> in 2021 say they intend to find a new job with a different company in the next year, up from roughly 33% in 2019. Those who typically feel tense or stressed during the workday are more than three times as likely to say they plan to quit in the next year.
- Higher absenteeism (E.G., sick or mental health days). Depression is <u>estimated</u> to cause 200 million lost workdays each year. Those with anxiety or depression <u>reported</u> missing, on average, roughly six times more workdays per year than individuals without a mental health condition, and depression management can <u>reduce</u> missed workdays by 30%. Furthermore, a recent U.K. study <u>found</u> that effective stress management can reduce up to 20% of costs related to absenteeism.
- Higher presenteeism describes when people work longer hours, demonstrate lower outputs, and make little impact. Mental-health-related presenteeism can <u>cost</u> employers up to three times that of absenteeism.
- Lower productivity. Eighty percent of people diagnosed with depression <u>reported</u> some level of functional impairment related to their depression, with 27% reporting serious difficulties showing up in their work life.
- Increased errors, impaired executive function, and lower quality work. Ninety-one percent of those surveyed on burnout <u>indicated</u> that stress negatively impacted their work quality.
- Increased counterproductive workplace practices, such as bullying and harassment.
- Deterioration of team culture.

The cost of doing nothing far exceeds the investment needed to turn the tide. Trauma-informed policies and practices reflect the importance of protective, reparative, and healing factors to prevent trauma, reduce re-traumatization and decrease the escalation of troubling workplace trends.

"Creating a culture of trauma-informed care requires us to look at our organizational culture, at the way we treat each other, and at the way we treat those we serve. It requires us to be intentional about creating a culture that is safe and respectful for everyone." Sandra L. Bloom, M.D., and CTIPP Board Chair



If you plant flowers and then provide depleted soil and no water or shade, could the plant be "blamed" for not thriving? Humans are much the same. No one exists in a vacuum; most workplaces are inherently designed to encourage some form of collaboration, community, and connection. Comprehensive trauma-informed solutions build on these capacities and strengths to help ensure that work ecosystems are healthy, rewarding, respectful, and fulfilling.

Put another way, instead of deploying siloed solutions that address symptoms of unproductivity, low team member morale or retention rates, burnout, and professional unfulfillment (E.G., occasional free team lunches, complimentary coffee and snacks, and video games in the breakroom), trauma-informed policies and practices focus on preventing, mitigating, and addressing the root of these challenges: trauma.

EXPLORE FURTHER:

- <u>Step-by-Step Guide to Wellness Planning</u> (Sandra L. Bloom, M.D., and CTIPP Board Chair)
- The American workforce faces compounding pressure (American Psychological Association)
- Employee Burnout Report: COVID-19's Impact and 3 Strategies to Curb It (Indeed/LEAD)
- <u>Mental Health at Work</u> (World Health Organization)
- The 9 Dimensions of Wellness at Work (Vantage Fit)
- 2021 Mental Health at Work Report (Mind Share)

INTEGRATING TRAUMA-INFORMED POLICIES & PRACTICES

How do we integrate trauma-informed policies and practices into the workplace?

To reiterate: creating trauma-informed spaces is not about checking action items off a definitive list or taking a series of prescribed steps that can be universalized across all settings.

Implementing trauma-informed change involves a commitment to an ongoing process of reflection, evaluation, discovery, and reform. Many real-world cultural and contextual factors will influence what is needed and what steps are necessary to make that change possible.

The below considerations are intended to spark ideas that, combined with each person's expertise of the setting they seek to transform, provide a pathway toward implementing and sustaining trauma-informed policies and practices.

Additionally, we want to re-emphasize that while each individual can be a changemaker and contribute mightily toward shifting the culture toward one that supports team members' full humanity and promotes meaningful experiences among team members, it is critical to ensure that organizations and broader systems are invested in supporting this change.



Individuals adapting to cope with organization- and systems-level harms to stay well enough to survive only perpetuates the cycles that create the broader workforce challenges we are seeing worsen over time; truly enlivening the values of a trauma-informed approach involves organizations and systems working together to lift this burden off of individuals and sustain environments that allow people – and the organization as a whole – to thrive.

Finally, it is vital to recognize that patience is key. Creating sustainable culture change in everyday operations and interactions often takes years of commitment and intentional work.

Deloitte <u>found</u> that it took over three years to see a return on investments in mental health and holistic wellness supports. We invite you to notice, celebrate, and build upon small wins, tangible changes, and gradual shifts to keep commitment and momentum strong.

Considering the above, the enclosed considerations target broader risk factors, not the individual, and focus on pragmatism and the ability for ongoing implementation across generations, industries, systems, and sectors.

ORGANIZATIONAL STRATEGIES

LEAD WITH EMPATHY. It is time to challenge the archetype of stoic leadership. Over two-thirds of CEOs <u>fear</u> showing empathy will reduce respect, yet 80% of employees would <u>leave</u> their job if they found a more empathetic employer (57% said they would take a pay cut to do so!). Furthermore, studies show that leadership empathy is the skill most associated with positive outcomes.

Leading with empathy helps organizations better <u>understand</u> inefficiencies and helps team members to feel more included and engaged at work. We acknowledge shared humanity – versus trying to "fix" each other – when we recognize unique strengths/challenges, listen actively, and commit to learning from each other.

- <u>The Empathetic Workplace: 5 Steps to a Compassionate, Calm, and Confident Response to</u> <u>Trauma On the Job</u> (Katherine Manning)
- <u>CEO Letter to Team Members: Lightening the load and preparing for the future</u> (Wikimedia Foundation)
- 2021 State of Workplace Empathy (BusinessSolver)





SUPPORT HOLISTIC WELL-BEING & MENTAL HEALTH. Eighty-seven percent of surveyed team members <u>believed</u> their employers could provide better mental health support, and 60% of Gen Z employees <u>reported</u> that mental health resources guide their employment decisions. It is becoming increasingly clear that basic programs are not enough.

Workplaces ought to consider providing resources that have been demonstrated to be proactive and preventative when it comes to challenges like burnout, oriented to the here and now, and provide restorative experiences to resolve outstanding issues and repair any individual or collective harm done. Support is crucial for those supporting others (E.G., supervisors, managers, and team leaders), which can also strengthen and reinforce culture, collaboration, and connection across the organization.

- Framework for Workplace Mental Health and Well-Being (U.S. Surgeon General)
- Mental Health in the Workplace: Tools and Resources (CDC)
- Mental Health: A Path to a Resilient Workforce and Business Recovery (MetLife)
- Better mental health in the workplace: Getting Started Pack (Heads Up)

ANCHOR CULTURE IN SHARED VALUES. A healthy work culture's deterioration (or nonexistence) can increase turnover, absenteeism, and presenteeism. It is also a key consideration when people decide how to engage with their work roles or seek new employment. An organization's culture should reflect a clear sense of shared mission, vision, and values, the embodiment of which can help create a sense of connection, meaning, and purpose for team members.

- Anchoring Organizational Culture: Why It's More Important Than Ever (Forbes)
- <u>5 Ways to Ingrain Organizational Change into the Culture</u> (Inc)
- <u>7 Tips to Create Cultural Change at Work through a Trauma-Informed Lens</u> (Chefalo Consulting)

CONSIDER DEDICATED SUPPORT. Because trauma-informed efforts are ongoing, designating a clear and consistent point of support can maximize your investment, maintain momentum, and support sustainability by ensuring mechanisms are in place to manage ongoing reforms.

Roles to consider include a Chief Wellness Officer (CWO), wellness committee, or champion team – with the mission to facilitate team member access to treatment and support, oversee organizational programming, monitor progress, suggest tweaks, and deploy new ideas and initiatives.

- <u>Wellbeing Lab Podcast: Is Your Workplace Psychologically Safe?</u> (Sandra L. Bloom, M.D., and CTIPP Board Chair)
- The Ultimate Guide to Employee Wellness Program (Springsworks)
- Blueprint for workplace mental health programs (Deloitte)
- <u>A Managers Guide to Mental Health in the Workplace</u> (When I Work)

Trauma-Informed Workplaces



CREATE CONNECTION POINTS. Peer-to-peer mutual support can be one of the most powerful tools for improving culture, promoting overall wellness, and aligning workplace environments with the core values of a trauma-informed approach.

Facilitating trauma-informed activities like mentoring programs and support/interest groups can also lead to new strategies that benefit the whole organization. We suggest making this strategy optional with a clear, private way to opt out to honor the trauma-informed value of choice.

- Peers: Their Roles And The Research (Mental Health America)
- How to Form a Mental Health Employee Resource Group (Harvard Business Review)
- Creating a Workplace Mentoring Program: Key Steps and Tips (Indeed)

LEVERAGE OPPORTUNITIES TO DO MORE OF WHAT IS WORKING. What we notice and focus on grows bigger. Trauma-informed workplaces intentionally notice strengths, build upon what is already working, and leverage positive developments that can buffer and repair the adverse impacts that occur in the workplace.

For example, Beehive PR <u>combines</u> professional and personal growth opportunities through strengths-based goal setting, one-on-one coaching, development sessions, and biannual retreats.

- How To Leverage Your Strengths in the Workplace (Indeed)
- How to Build on Your Organization's Strengths (Society for Human Resource Management)
- <u>Developing Employees' Strengths Boosts Sales, Profit, and Engagement</u> (Harvard Business Review)
- Leveraging Employee Strengths to Build a Healthy Workplace (PRSA)

PROVIDE MORE CHOICE, FLEXIBILITY & AUTONOMY. Organizations benefit from seeking natural places to embed physical and psychological safety, trust and transparency, voice, choice, and flexibility into existing mechanisms, supports, and systems. For example, more personal time off (PTO) can help <u>reduce</u> burnout by up to 36 percent. Where possible, organizations should provide team members with enough structure to create clear expectations and flexibility to empower individualized approaches based on what fits best for each person.

Regularly acknowledging team members' contributions can also promote a healthy work environment. Organizations can also create safety and stability by adapting reasonable accommodations for team members struggling with trauma, mental health, and well-being challenges.

- The Best Strategies for Creating a Healthy Work-Life Balance for Employees (Babbel)
- How to Give Your Employees More Autonomy at Work (Leaders)
- <u>Trauma-Informed Toolkit: Principle 3: Choice and Principle 5: Empowerment</u> (Government of Scotland)



INCORPORATE MEANINGFUL COLLABORATION. Forty-eight percent of surveyed team members said lack of involvement in decisions <u>contributed</u> to stress in the workplace. Building a trauma-informed workplace must include meaningful involvement from team members – particularly those with lived trauma experiences – at all process stages.

Giving people a voice and vehicle to participate in the organization's future can greatly support retention rates, improve culture, and add to overall wellness. It can also help ensure a higher chance of success, integration, and team member satisfaction. Safety in this process is key because team members must know they can be open and authentic while offering their best ideas and feedback without retribution.

- <u>Crucial Conversations Tools for Talking When Stakes Are High</u> (Kerry Patterson, Joseph Grenny, Ron McMillan, Al Switzler)
- <u>Trauma-Informed Toolkit: Principle 4: Collaboration</u> (Government of Scotland)

"Basecamp CEO Jason Fried recently announced that employees with any type of caretaking responsibilities could set their schedules, even if that meant working fewer hours. Being accommodating doesn't necessarily mean lowering your standards. Flexibility can help your team thrive amid continued uncertainty."

Harvard Business Review



PROMOTE ACCESSIBILITY, BELONGING, DIVERSITY, EQUITY, INCLUSION & JUSTICE (ABDEIJ)

Those who have <u>experienced</u> or witnessed discrimination in their current workplace are twice as likely (68% compared to 33%) to seek new employment. Women, people of color, and LGBTQIA+ team members are not only more likely to work at organizations that have those individuals in senior leadership positions but also tend to <u>agree</u> that their workplace is psychologically healthy.

Trauma-informed workplaces intentionally embrace and celebrate diverse perspectives, identities, and experiences, seeking to instill a sense of belonging for all. A workplace's policies, leadership, and team members demonstrate understanding – and work to address – how the pain and trauma of underlying inequities can contribute to the accumulation of stress and adversity.

Discrimination must never be tolerated; a culture of humility and openness to learn and receive feedback is essential. "Accessibility" refers to how communities, organizations, systems, and institutions make space for the richness and multidimensionality of each person's thinking, being, and doing. It is important to conceptualize accessibility as more than "just" environmental modifications to comply with legal requirements and instead is thought of both as an outcome and the process of actions necessary to produce a truly diverse, equitable, inclusive, and just society along the continuum of human ability and experience.

- Integrating Accessibility and Belonging into Trauma-Informed Policy and Practice (CTIPP)
- <u>To be anti-racist is to be trauma-informed</u> (CTIPP)
- <u>How Diversity Makes Us Smarter</u> (Greater Good Magazine)
- White Supremacy Culture: Coming Home to Who We Really Are (SURJ)
- The Four Agreements of Courageous Conversations (Experiences Unlimited)
- Guidelines for Authentic Conversations About Race (Annie E. Casey Foundation)
- <u>Diversity Toolkit: A Guide to Discussing Identity, Power and Privilege</u> (University of Southern California)

IMPROVE PHYSICAL & PSYCHOLOGICAL SAFETY. When team members know they are safe, tension and conflicts are minimized while collaboration, work performance, productivity, and goal attainment <u>improve</u>.

Safe and welcoming work environments demonstrate that team members are valued and enable long-term, positive change. Trauma-informed organizations should have strong accountability, clear avenues, and explicit protocols to prevent and address challenges.

- <u>Step-by-Step Guide to Safety Planning</u> (Sandra L. Bloom, M.D., and CTIPP Board Chair)
- Resources: Historical, Cultural, Racial, and Collective Trauma (CTIPP)
- The Importance Of Trauma-Informed Design (Forbes)
- <u>Trauma-Informed Toolkit: Principle 1: Safety</u> (Government of Scotland)





BUILD MORE TRUST & TRANSPARENCY. Organizations where team members trust leadership and management <u>experience</u> 74% less stress, 50% higher productivity, and 40% less burnout. Relational trust bolsters collective performance and connection to the work, so it's vital to let team members know what to expect and to do what you say you will do (and explain where/when that does not happen) whenever possible.

- <u>Disconnect between employees and employers around mental health needs</u> (McKinsey & Company)
- The Neuroscience of Trust (Harvard Business Review)
- Trauma-Informed Toolkit: Principle 2: Trustworthiness (Government of Scotland)

DIVERSIFY COMMUNICATIONS CHANNELS. How frequently are you communicating with your team members? Through what channels and platforms? Reforms and progress will not last when people do not know about them, so a strong internal communications strategy – that encourages the utilization of support and resources – ensures consistency and longevity, reduces stigma, and builds more trust and transparency. For example, TiER1 Performance Solutions provides resources to assess risk, find information, and get help or support using multiple formats to increase visibility and engagement. One approach includes providing information such as infographics, e-mails, weekly table tents with reflections and challenges, and videos (educational and storytelling). From an accessible and easy-to-navigate employee Intranet to a regular emailed newsletter, workplaces benefit from communicating a commitment to supporting team members in various ways to maximize reach and adoption.

- How to understand your employees' communication styles (Axios HQ)
- 7 Creative Ways to Communicate Information to Employees (ScreenCloud)

MONITOR, MEASURE, EVALUATE & PIVOT (ONGOING). Prudential Financial conducts ongoing, anonymous surveys to learn about attitudes toward managers, senior executives, and the company as a whole. That's because leadership and team members are often on different pages about what is happening and what is needed. This strategy helps an organization keep pace with its team members' ever-changing needs and attitudes. It also offers meaningful opportunities to shape decisions around strategies and resources that directly impact them.

Creating a baseline measurement is the critical first step to establishing an honest understanding of the workplace's current reality, tracking progress as changes are implemented, and understanding what is working and what needs further reforms. Trackable progress markers could include, for example, fewer missed work days, increased productivity, increased return to work (following absence), wellness program participation rates, and satisfaction surveys. To receive authentic feedback, team members must trust that they will not face adverse consequences for being forthcoming. It is essential to be transparent about how evaluation results will be used and how you will protect private and sensitive information in the process.

- The Ultimate Guide to Employee Wellness Program (Springsworks)
- Mental Health in the Workplace (CDC)



TRAIN & EDUCATE TO REDUCE STIGMA. Stigma can isolate people and discourage them from seeking support and resources. All workplaces must support a universal precaution for trauma, which means that the organization and all of the team members within it leverage awareness of trauma and related concepts to commit to engaging in ways that reduce the likelihood that they will contribute to re-traumatization.

Organizations benefit from opportunities for leadership and all team members to learn more about trauma, mental health, brain/NEAR science, and wellness through ongoing education, <u>anti-stigma campaigns</u>, and training. For example, Certified Angus Beef <u>holds</u> lunchtime learning sessions to reduce the stigma about mental health and the services available to team members. The sooner someone can identify and understand what is happening to them, the more likely they will choose to take early and proactive action to disrupt the possible adverse impacts.

- <u>49% of workers fear repercussions for being open about their mental health at work</u> (Modern Health and Forrester Consulting)
- <u>Creating a stigma-free workplace is key to tackling the mental health crisis</u> (Kaiser Permanente Business)
- Mental health stigma in the workplace (Government of Australia)
- Pledge to be a StigmaFree Company (NAMI)
- <u>Challenge stigma in your workplace with ready-to-use resources and activities</u> (Time to Change UK)
- Mental health language and stigma (Every Mind)

MODEL THE MODEL. A recent study <u>found</u> that only one in three team members believe their managers lead by example regarding mental health. To create sustainable and ongoing reforms, leadership must "model the model" by demonstrating self-awareness and accountability for enlivening the values of a trauma-informed approach.

For example, if the team decides to set a boundary around expectations for communication during off-work hours, it is important that leaders also abide by it. Leaders also can demonstrate that it is not only accepted but an expected part of workplace culture to attend to oneself by taking breaks, limiting time spent working outside of standard hours, taking vacation time, and openly discussing what is helping them to keep moving forward despite their stressors and challenges they face in their roles.

- Debunking The Myth That We Must Be Superhuman For Career Success (Forbes)
- <u>Trauma-Informed Leadership: The art and science of safety and connection in the workplace</u> (Psychology Today)
- What Does Trauma-Informed Leadership Look Like in Practice? (PACES Connection)



More action steps employers can take include

- Make mental health screenings administered by qualified professionals and self-assessment tools available to all team members, along with information on how to follow up on/ access supports to address these findings.
- Offer health insurance with no or low out-of-pocket costs for mental health counseling and medication for those who wish to utilize such support.
- Provide free or subsidized lifestyle coaching, counseling, or self-management programs.
- Distribute materials, such as brochures, flyers, and videos, to all team members about the signs and symptoms of mental health challenges and opportunities for treatment.
- Host seminars or workshops that address trauma and trauma-informed stress management techniques, like mindfulness, breathing exercises, and meditation, to help team members notice and reduce anxiety and stress and improve focus and motivation.
- Create and maintain dedicated, quiet spaces for relaxation activities.
- Ensure team members can choose how they utilize breaks and other downtimes.

Not sure where to start? Explore these assessments

- <u>Trauma-Informed Climate Scale-10</u> (TICS-10)
- Vicarious Trauma Organizational Assessment Tool (VT-ORG)
- <u>Creating Cultures of Trauma-Informed Care</u>
- INPUTS Health and Safety Climate Survey (user manual)
- <u>Areas of Work-Life Survey</u>
- <u>Trauma Responsive Understanding Self-Assessment Tool</u> (TRUST)
- <u>TICOMETER</u>
- Attitudes Related to Trauma-Informed Care (ARTIC)



INDIVIDUAL STRATEGIES

ADVOCATE FOR A TRAUMA-INFORMED WORKPLACE. Everyone has a stake in culture change and can be a changemaker in their work to improve safety, health, and well-being. Trauma-informed policies and practices are multi-faceted and multi-dimensional, so everyone's involvement is critical to make lasting and ongoing reforms. Indeed, research shows that having the organization's leadership engaged in the process is among the most important factors to sustained success. You can organize momentum amongst your colleagues to educate and advocate to integrate trauma-informed policies and practices.

Steps include

- Develop an action plan that could include a vision statement, <u>SMARTIE goals</u>, objectives and steps to get there, and key activities (I.E., Who will do what, where, by when? How are we measuring success?)
- Understand where leadership is focused, identify common ground and shared values, and provide constructive feedback to amplify what is working well and moving in the right direction.
- Keep your goals as specific as possible. What do you want to change? What are your best hopes? What is already happening aligned with these goals that can be built on? What can small, concrete, actionable steps be taken to achieve this vision?
- Consider the impacts of trauma, toxic stress, adversity, and other occupational hazards/threats to workplace well-being at the individual, department, organizational, systemic, and/or community levels.
- Consider your current colleagues' unique strengths and skills how can you leverage them to catalyze and sustain change?

PRACTICE SELF-AWARENESS. Check-in with yourself regularly to notice the shifts in your brain and body that inform you when you need a break or reset. For example, awareness that you are re-reading the same content may signal that it is time to take a walk or break from the activity.

Self-reflection is essential because we cannot act until we know what is happening to us. Personal honesty also helps you avoid reaching for quick relief and health-harming behaviors and increase your intentionality in practicing active coping and wellness strategies to enhance your well-being.

- Self-Awareness in the Workplace: What it is and How to Develop it (Talogy)
- <u>Assessment: Self-Consciousness Scale</u> (Positive Psychology)



PRACTICE SELF-REGULATION & ONGOING SELF-CARE. Practices like mindfulness,

meditation, breathing, journaling, and exercise promote healthy processing of emotions and can increase your ability to navigate stress, challenge, and change. Practice is the key word! You can also create space for restoration with regular breaks to stretch, drink a glass of water, check in with supportive colleagues or loved ones, take a walk, and get fresh air.

Practicing fulfilling hobbies outside work can further increase well-being and create a buffer against workplace stress, trauma, burnout, and compassion fatigue. You can not pour from an empty cup and paying attention to the <u>nine wellness dimensions</u> can be a helpful framework to ensure you are getting your fill.

- <u>Step-by-Step Guide to Wellness Planning</u> and <u>Step-by-Step Guide to Safety Planning</u> (Sandra L. Bloom, M.D., and CTIPP Board Chair)
- <u>Developing Your Self-Care Plan</u> (University of Buffalo)
- <u>Creating a Culture of Self-Care in the Workplace</u> (Calm Business)
- How to Create an Individualized Self-Care Plan (Sun Program)
- Four ways leaders can regulate their emotions at work (Forbes)
- <u>What Is Self-Regulation?</u> (VeryWell Health)

CREATE SPACE FOR COMMUNICATION & CONNECTIVITY. As humans, we are hard-wired for connection. It makes sense that being intentional about staying connected to social support outside the workplace can substantially improve personal wellness.

In addition to maintaining healthy relationships with your cared-for ones, engaging actively with your community or participating in something "bigger than yourself" (E.G., regularly volunteering at a local food bank) can also help us appreciate our shared humanity, which increases our <u>compassion and resilience</u> while remaining connected to ourselves, others, and the world around us.

- The Different Types of Social Support (VeryWell Health)
- The Importance of Connection (PsychCentral)
- How to Help Your Community with Mutual Aid (EdX Public Health)

SET HEALTHY & CONSISTENT BOUNDARIES. Balance can be challenging when you are overor under-involved with your work-related tasks and responsibilities. Take stock of your "zone of helpfulness" – when are you and your team at their strongest? What context and conditions support you and your team in getting there? Prioritize those factors and set boundaries on anything that does not support an environment where you and your team can thrive.

- <u>Compassionate boundary-setting</u> (Compassion Resilience)
- How to set clear work boundaries and stick to them (Jayne Hardy/TED)
- <u>10 Phrases to Help You Set Boundaries at Work</u> (Maryam Taheri)



PERSONAL ASSESSMENTS: Exploring personal experience can help identify trends to inform organizational efforts:

- Post-Traumatic Growth Inventory (PTGI)
- <u>Change In Outlook Questionnaire</u> (CiOQ), a 26-item self-report measure designed to assess positive and negative changes in the aftermath of adversity
- <u>Quality of Work Life Questionnaire</u> measures the relationship between job/organizational characteristics and worker health and safety and identifies health and safety preventive interventions targets
- <u>Professional Quality of Life</u> (ProQOL) Scale for anyone seeking to better understand the positive and negative aspects of helping those who experience trauma and suffering, which can improve your ability to help them and maintain your balance
- <u>Vicarious Resilience Scale</u> measures the unique, positive effects that transform therapists in response to witnessing trauma survivors' resilience and recovery process
- Maslach Burnout Inventory

CASE STUDIES

- <u>Coordinated Children's Service Initiative</u>, Westchester County, New York
- <u>Resilience Coalition</u>, Westchester County, New York
- Department of Social Services, Allegany County, New York
- <u>Mid-Hudson Regional Youth Justice Team ARTIC Survey</u>, Westchester County, New York

EXPERTS AVAILABLE FOR MEDIA & BRIEFINGS

- Sandra L. Bloom, M.D., CTIPP Board Chair
- <u>Whitney Marris</u>, CTIPP Director of Trauma-Informed Practice & System Transformation
- Jesse Kohler, CTIPP Executive Director



APPENDIX A: Natural reactions to occupational hazards and trauma

The enclosed chart highlights natural phenomena that can show up when someone feels in "survival mode" within harmful and unsupportive work environments, as well as the positive experiences that can emerge when team members are supported through trauma-informed policies, practices, environments, relationships, and supports.

Phenomena	Description	How it might show up
Vicarious Trauma (VT)	Development of negative changes in the world view as a result of the cumulative impact of witnessing trauma/adversity over time.	 Loss of meaning and hope Decreased capacity for decision-making Difficulty regulating/managing emotions Difficulty accepting or feeling okay about yourself Excessive worry about potential dangers in the world Challenges managing boundaries between self and others Somatic complaints (i.e., headache, stomachache, fatigue, etc.)
Vicarious Resilience (VR)	Positive meaning-making and shift of an individual's experience as a result of witnessing the resilience of others	 Experiencing others as models and important sources of information for the worker's own learning about coping with trauma and hardships Increased capacity for remaining present while listening to others' trauma narratives Increased consciousness about power relative to social location Understanding and valuing spiritual dimensions of healing Reaffirming the value of the work Increased capacity for resourcefulness Greater empathy and compassion for others Changes in personal goals and perspectives Increased self-awareness and self-care practices Appreciation for others' strength and tenacity Regaining hope and optimism



Trauma-Informed Workplaces

Secondary Traumatic Stress (STS)	Work related, secondary exposure to extremely or traumatically stressful events; trauma-related symptoms are usually quick in onset and associated with a particular event	 Nightmares Feeling angry or cynical Misplaced feelings of guilt Intrusive thoughts of the event Increased psychological arousal Isolation from family and friends Feeling detached, numb, apathetic
Burnout	Feelings of hopelessness, fatigue, and being overwhelmed from excessive workloads and unsupportive work environments; develops gradually over time.	 Apathy Cynicism Irritability Blaming others Easily frustrated Feeling overwhelmed Disconnecting from others Decrease of professional efficacy Decreased empathy/compassion Desire to use substances to cope Increased mental distance from work Feeling like nothing you can do will help Feeling like a failure/you aren't doing your job well
Compassion Fatigue	Experiencing the combination of STS, VT, and/or burnout	 Increased isolation Conflict in relationships Limited tolerance for stress Feeling angry, irritable, or tense Reduced empathy towards others Reduced sense of accomplishment Difficulty concentrating on job duties Self-blame, including for situations that are out of one's control
Compassion Satisfaction	Pleasure that helping professionals derive from being able to perform their work effectively. Includes positive feelings about helping others and contributing to the greater good of society	 Empathic attunement with others Capacity to notice others' strengths More readily able to positively reframe events and experiences Sense of meaning/value of one's contributions



Trauma-Informed Workplaces

Resilience	The ability of an individual, family, group, organization or community to cope with and/or adapt to change, challenges, adversity, and/or trauma	 High adaptivity sometimes described as "bouncing back" in the face of stress, challenge, or change Strong sense of self Tenacity Realistic sense of hope Active coping skills Can be both a process and an outcome
Vicarious Resilience (VR)	Entails the positive meaning-making, growth, and transformations in one's experience resulting from exposure to others' resilience in the course of the work; characterized by a positive effect that transforms team members in response to others' resiliency exhibited in the face of trauma/adversity	 Reaffirming the value of the work Regaining hope and optimism Increased reflection on human beings' capacity to heal and grow Reassessing the dimensions of one's own challenges Understanding and valuing the many dimensions of and pathways to healing and growth Experiencing others as models and important sources of information for the team member's own learning about coping with trauma and hardships Discovering (or re-discovering) the power of community and connection Increased capacity for resourcefulness and creativity Greater empathy and compassion for others Increased self-awareness and engagement with self-care practices
Post-Traumatic Growth (PTG)	Positive psychological changes experienced as a result of enduring challenging life circumstances synonymous with trauma/adversity	 Improved personal relationships and increased pleasure derived from being around people we love Seeing and embracing new possibilities in life Increased emotional strength and resilience Greater spiritual connection A heightened sense of appreciation and gratitude toward life altogether finding meaning, benefits, and significance in the event could be described as happening when someone "bounces forward" to a place of greater strength, meaning, self-efficacy, and





		empowerment than where they were at when the trauma transpired
Vicarious Post-Traumatic Growth (VPTG)	Development of positive changes and growth in an individual's world view as a result of witnessing others' growth after being impacted by a traumatic/adverse event(s)	 Improved personal relationships and increased pleasure derived from being around people we love Seeing and embracing new possibilities – personal and professional Increased emotional strength and resilience Greater spiritual connection A heightened sense of appreciation and gratitude toward life altogether finding meaning, benefits, and significance in the event Greater sense of competence in the workplace Increased recognition of the value of one's contributions Optimism Positive affect

(Sources: <u>HHS</u>; <u>WHO</u>; <u>CDC</u>; <u>University of Texas</u>; <u>Tedeschi & Calhoun</u>; <u>Whit-Woosley et al.</u>; <u>Zhang et al.</u>; <u>Manning-Jones et al.</u>)

Current Responses from the Trauma-Informed Policies and Practices Survey

Q1 - Directors told us that physical safety in supervised visitation can look like: Locked doors Separate parking Staggered entrance & exit times Panic buttons Search bags Hold on to parents' IDs and their keys Have parents sign a safety screening sheet Keep monitor in sight at all time Let children know that if they are uncomfortable they can get the monitor What are some other examples of physical safety that you use in your program?

Directors told us that physical safety in supervised visitation can look like:

Locked doors Separate parking Staggered entrance & exit times Panic buttons Search bags Hold on to parents' IDs and their keys Have parents sign a safety screening sheet Keep monitor in sight at all time Let children know that if they are uncomfortable they can get the monitor

What are some other examples of physical safety that you use in your program?

Make sure that no items, plugs, etc. are seen on the floor which can cause any parent/child to fall.

We have cameras to observe the visit rooms.

staggered arrival and departures; requirement that custodial parties leave the premises (and parking lot) before start of the visitation; arrange for special hand signals if child is uncomfortabl

Conduct a Security Audit; Security Equipment (camara monitored burglar and fire alarm systems)

sitting by the entrance in case one needs to exit quickly. Having the contact information on the cell phone in case things escalate a text could be sent for someone to come.

Q2 - Directors told us that psychological safety in supervised visitation can look like: Locked doors Use of trauma-informed communication Speak to clients in a respectful manner Be mindful of body language Have comforting decorations in the room Knowing and using deescalation techniques Avoid using sexualized/racialized jokes or references Utilize safety words/secret code Eye contact to communicate listening (culturally variable) What are some other examples of psychological safety that you use in your program?

Directors told us that psychological safety in supervised visitation can look like:

Locked doors Use of trauma-informed communication Speak to clients in a respectful manner Be mindful of body language Have comforting decorations in the room Knowing and using de-escalation techniques Avoid using sexualized/racialized jokes or references Utilize safety words/secret code Eye contact to communicate listening (culturally variable)

What are some other examples of psychological safety that you use in your program?

Be open to feedback.

Pre and post-visits to plan and review the visit with parents so expectations can be shared.

ask clients after sessions if they have any questions or feedback; redirect when there is a silence between the parties (child and non custodial parent); reframe when inappropriate messaging or statments

Establish Credibility Understand Perception vs Intent Have Moral Courage Facilitate Everyone Speaking Up Safely Create Space for New Ideas Make an Intentional Effort to Promote Open Dialogue Establish Norms for How Failure is Handled

I use de-escalation techniques learned if parent start showing signs of agitation.

Q3 - Directors told us that trustworthiness in supervised visitation can look like: Avoid making promises you can't keep Be transparent Share copies of the parents' reports with them The parent trusts that you're not aligned with the other parent The parent trusts that you provide services that serve both parents Keep your word (if you say you're going to call the parent or the case manager) Being open about goals Offering lowstake feedback Involving clients in planning Attend trainings Offer culturally responsive services Standardization of policies so that people are treated equitably Tone of voice and facial expression help parents trust us Being supportive of parents' efforts Listen to the parents and let them know you've heard them Connect parents to additional resources Make sure that we are responsive with custodial parents too! What are some other examples of trustworthiness that you use in your program?

Directors told us that trustworthiness in supervised visitation can look like:

Avoid making promises you can't keep Be transparent Share copies of the parents' reports with them The parent trusts that you're not aligned with the other parent The parent trusts that you provide services that serve both parents Keep your word (if you say you're going to call the parent or the case manager) Being open about goals Offering low-stake feedback Involving clients in planning Attend trainings Offer culturally responsive services Standardization of policies so that people are treated equitably Tone of voice and facial expression help parents trust us Being supportive of parents' efforts Listen to the parents and let them know you've heard them Connect parents to additional resources Make sure that we are responsive with custodial parents too!

What are some other examples of trustworthiness that you use in your program?

Specialist's being able to call gray areas related to a family visit.

Shared information with parents and foster parents.

be attentive to all parties; acknowledge and listen before responding; don't be bossy when giving direction and feedback

Don't Lie Repeatedly. ... Follow Through On Commitments. ... Show Fairness. ... Demonstrate Transparency. ... Be Constructive and Objective In Performance Reviews.

Share some personal stories to create a sense of trust.

Q5 - Directors told us that providing choices in supervised visitation can look like: Allow parents to choose activities for visitation Give the parent the ability to make small choices (e.g., having more than one place to sit or two different rooms they can choose from, etc.) Ask the parent what they would like to start with during visitation Allow parents to choose items and tools Connecting clients to services Educating yourself as to services in the community Caregivers/custodians (and others like grandparents) want to take control (sometimes they make rigid rules that will bind the visiting parent), so find ways to soften those efforts and allow visitors to maintain some control (e.g., custodian says: no soda, but the visitor brings soda. Have to keep some balance) What are some other examples of providing choices that you use in your program?

Directors told us that providing choices in supervised visitation can look like:

Allow parents to choose activities for visitation Give the parent the ability to make small choices (e.g., having more than one place to sit or two different

rooms they can choose from, etc.) Ask the parent what they would like to start with during visitation Allow parents to choose items and tools Connecting clients to services Educating yourself as to services in the community Caregivers/custodians (and others like grandparents) want to take control (sometimes they make

rigid rules that will bind the visiting parent), so find ways to soften those efforts and allow visitors to

maintain some control (e.g., custodian says: no soda, but the visitor brings soda. Have to keep some balance)

What are some other examples of providing choices that you use in your program?

Allowing the parent & child to make the decisions what they would like to do throughout the entire visit.

Children are also given the chance to verbalize their preference for activities during visits.

strive to be mindful of where and what the source of anger and fear is among each party

Choose partner Choose which topic to discuss

When offering suggestions make sure to tell them that those are just ideas that they can bring any activity that they chose.

Q6 - Directors told us that collaboration in supervised visitation can look like: Promote the idea that this is a partnership between the program and the parent Work with the parent when they need to reschedule Help the parent with essential needs and providing resources Provide Uber passes for better transportation and accessibility Moving around appointments because of client's family emergencies Be sure that the visiting parent knows about child's allergies so that the visitor has more information about their child Children's tastes in food change - program can make a game from having the children describe the kinds of food they like Offering virtual visits when transportation becomes a problem Have the foster parent share updates about the children's therapy so that the program can pass along this information Weekly suggestions about things that the children need (e.g., during the visit the monitor can tell the visitor about parenting skills or parenting "hacks") Suggest activities or games to bring depending on the child's developmental stage What are some other examples of collaboration that you use in your program?

Directors told us that collaboration in supervised visitation can look like:

Promote the idea that this is a partnership between the program and the parent

Work with the parent when they need to reschedule

Help the parent with essential needs and providing resources

Provide Uber passes for better transportation and accessibility

Moving around appointments because of client's family emergencies

Be sure that the visiting parent knows about child's allergies so that the visitor has more information about their child

Children's tastes in food change - program can make a game from having the children describe the kinds of food they like

Offering virtual visits when transportation becomes a problem

Have the foster parent share updates about the children's therapy so that the program can pass along this information

Weekly suggestions about things that the children need (e.g., during the visit the monitor can tell the visitor about parenting skills or parenting "hacks")

Suggest activities or games to bring depending on the child's developmental stage

What are some other examples of collaboration that you use in your program?

When a parent genuinely forget an item needed for Visitation, allow the parent to use an item to cause the family visit to be at its best.makTION

Encourage a supportive relationship between the caregiver and the parent.

invite parents to make suggestions, especially when they voice concerns

Brainstorming Discussing ideas

Remind the parents that our role is to help and that we also learn from them.

Q7 - Directors told us that empowerment in supervised visitation can look like: Educate parents on child development Provide information, resources, and handouts on child development and parenting skills Allow parents to do things on their own Have accessible signs in various languages that describe where things are located (e.g., bathroom) Emphasizing parents' strengths Emphasizing child's strengths Providing high quality resources to parents What are some other examples of empowerment that you use in your program?

Directors told us that empowerment in supervised visitation can look like:

Educate parents on child development Provide information, resources, and handouts on child development and parenting skills Allow parents to do things on their own Have accessible signs in various languages that describe where things are located (e.g., bathroom) Emphasizing parents' strengths Emphasizing child's strengths Providing high quality resources to parents

What are some other examples of empowerment that you use in your program?

Welcoming the parent(s) related to their first family visit and letting the parent know that you are glad to have one at the facility.0i

Educate and encourage parents to find a positive way to look at a difficult situation.

permit the parents to comfort their child; ask how you as provider can be more helpful

Focus On The Family Boundaries and expectations Continuing education

End each visit with a praise to the parents for an observed positive observation.

Q9 - If you would like us to know that you participated in this survey, please provide us with your name and the name of your program:

If you would like us to know that you participated in this survey, please provide us with your name and the name of your program:

Trezia Horne / Twin Oaks Community Services

A. Kim Melvin/ Kids Central Inc. Visitation Program

Mark Roseman, The Toby Center for Family Transitions

Integrity Behavioral Health LIC

Basic Trauma-Aware Communication Strategies

- Introduce yourself and explain your role.
- Explain what to expect, who will be involved, and how long it will take.
- Do not stand over clients; refrain from touching them.
- Give clients time to answer any questions
- Do not be aggressive or use a loud voice.
- Listen attentively and nonjudgmentally.
- Allow ample physical space between you and the client.
- Address any safety needs the client raises.





Benefits of TRAUMA -AWARE COMMUNICATION

Create a safe environment that supports new ideas and problem solving

> Resolve conflicts in a non traumatizing way

Build respect and trust in the relationship

Advance the client's goals in a productive way

Better understand other people's perspective and situations



Contact the Clearinghouse at

850-644-1715

