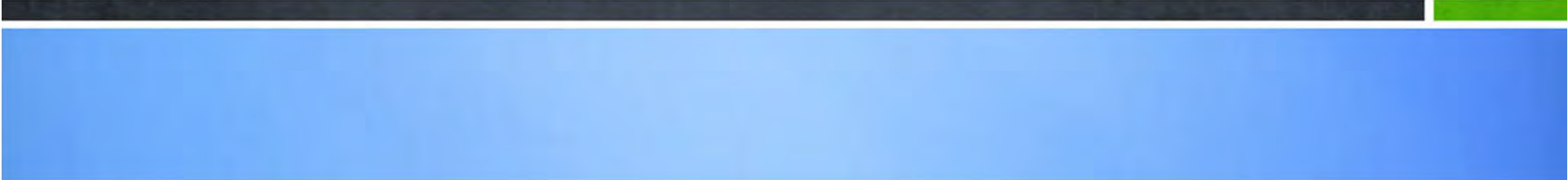




Working with Diverse Communities: Engaging Special Populations

Presenters:

Hector Sanchez-Flores
(NLFFI-JSI Partner), Alexia
Eslan (JSI) and Alexandra
Eisler (HTN)



What will we talk about in this session?

1

- Definition of Trauma

2

- Principles of Trauma Informed Care

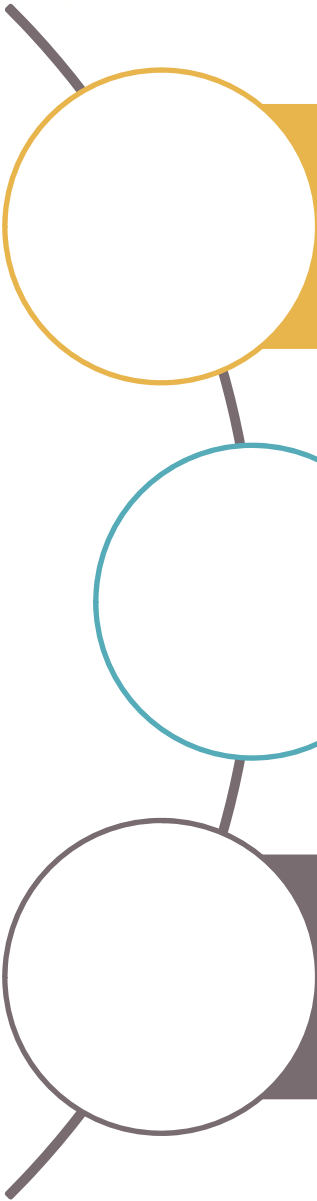
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- Intergenerational Trauma

4

- Human Services Paradigms

Session Objectives



Explore why marginalized youth, whom have faced repeated trauma, may not be able to internalize prevention messages

Engage key partners for accessing marginalized youth

Discuss at least three strategies for successfully engaging these specific populations

What is Trauma?

The personal experience of interpersonal violence including sexual abuse, physical abuse, severe neglect, loss, and/or the witnessing of violence, terrorism and/or disasters (NASMHPD 2004).



What is Trauma?



A “traumatic event” is when “a person experienced, witnessed or was confronted with an event(s) that involved actual or threatened death or serious injury or threat to the physical integrity of self or others”.

The person’s response involved intense fear, helplessness or horror.

- DSM-IV-TR (APA 2000)

Trauma can also be insidious and pervasive because:

Response

- Unseen and overlooked
- Seen and not addressed

Addressing
trauma
causes
discomfort

Multiple
traumatic
situations
minimizes
pain

Ten Principles of Trauma Informed Care

Source:

Source: Trauma Informed Care or Trauma Denied: Principles & Implementation of Trauma Informed Services for Women, Journal of Community Psychology, D. Elliott, et. al., July 2005

1. Recognize the Impact
2. Identify Recovery
3. Employ an Empowerment Model
4. Maximize a Woman's Choices and Control Over Her Recovery
5. Based in a Relational Collaboration
6. Respectful Atmosphere
7. Emphasize Women's Strengths, Highlighting Adaptations Over Symptoms and Resilience Over Pathology
8. Minimize the Possibilities of Retraumatization
9. Strive to Be Culturally Competent
10. Solicit Consumer Input and Involve Consumers in Designing and Evaluating Services

Intergenerational Trauma

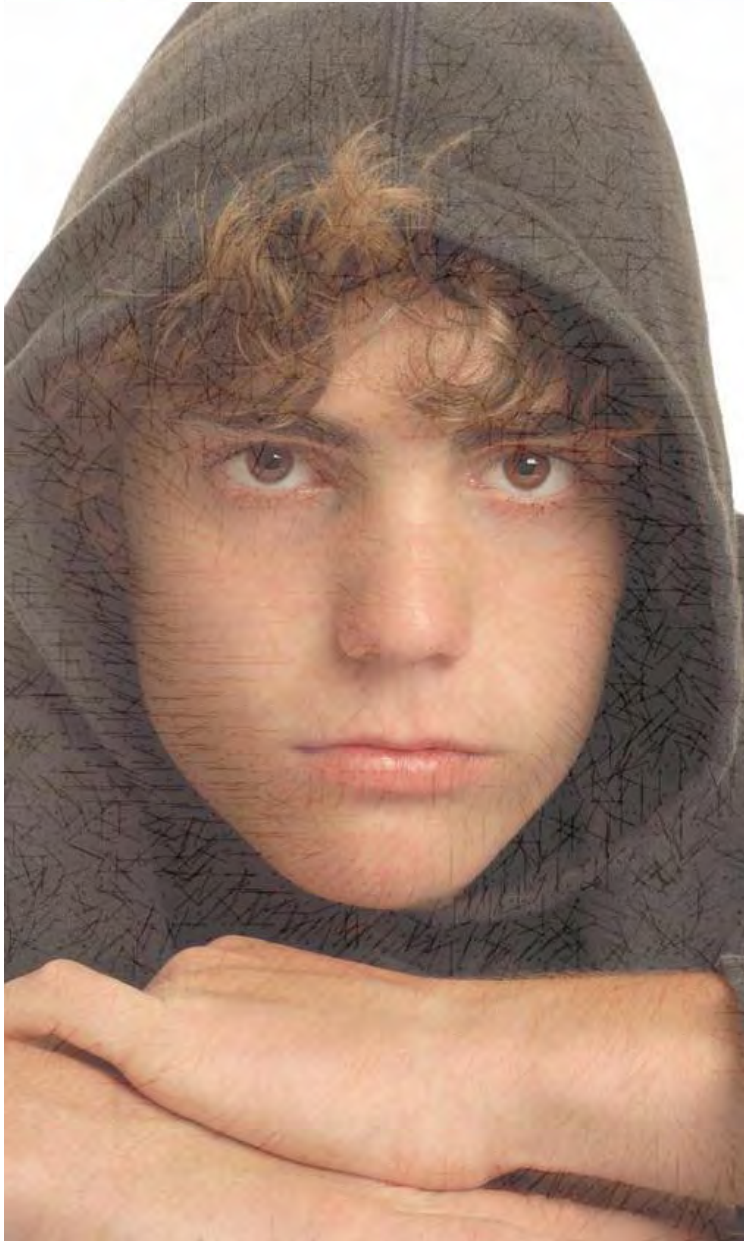


- Many families and children with origins in impoverished and war-torn or violent homelands, also experience a continuum of intergenerational trauma.
- The trauma experienced by the parents and children prior to arriving in the U.S. is compounded by the all-encompassing life transition of migration and its corresponding acculturation to a new broader dominating culture.
- This is further exacerbated by the static disparities of poverty and the completely new stresses of cultural adjustment they face as families.

Source:

Moving Beyond Trauma Through A Healing-Informed Model to Engage Latino Men & Boys
National Latino Fatherhood & Family Institute

How Do Young Men Fit In This Model



- Victimizations - experienced by a boy
- Young men: “complacent in their behaviors”
- Manifestations: drug and alcohol use, sex and violence
- No mechanisms to address underlying trauma
- Where do men turn?

**Example of
Moving from
Trauma to
Healing
La Cultura
Cura—Culture
Heals**



Human Services Paradigm



Understanding of the **Consumer/Survivor**

- Whole person view
- “Symptoms”: Attempt to cope and survive
- Contextual view
- Responsibility allocation

Source:

Adapted from James A. Peck, Psy.D., Trauma-Informed Treatment: Best Practices, Los Angeles County Annual Drug Court Conference May 2009

Human Services Paradigm

Understanding of Services

- Empowerment and Recovery
- Recognize strengths
- Prevention driven
- Assess time limits
- Risk to consumer -> risk to system/provider



A Culture Shift: Core Principles of a Trauma-Informed System

Safety

Collaboration

Trustworthiness

Choice

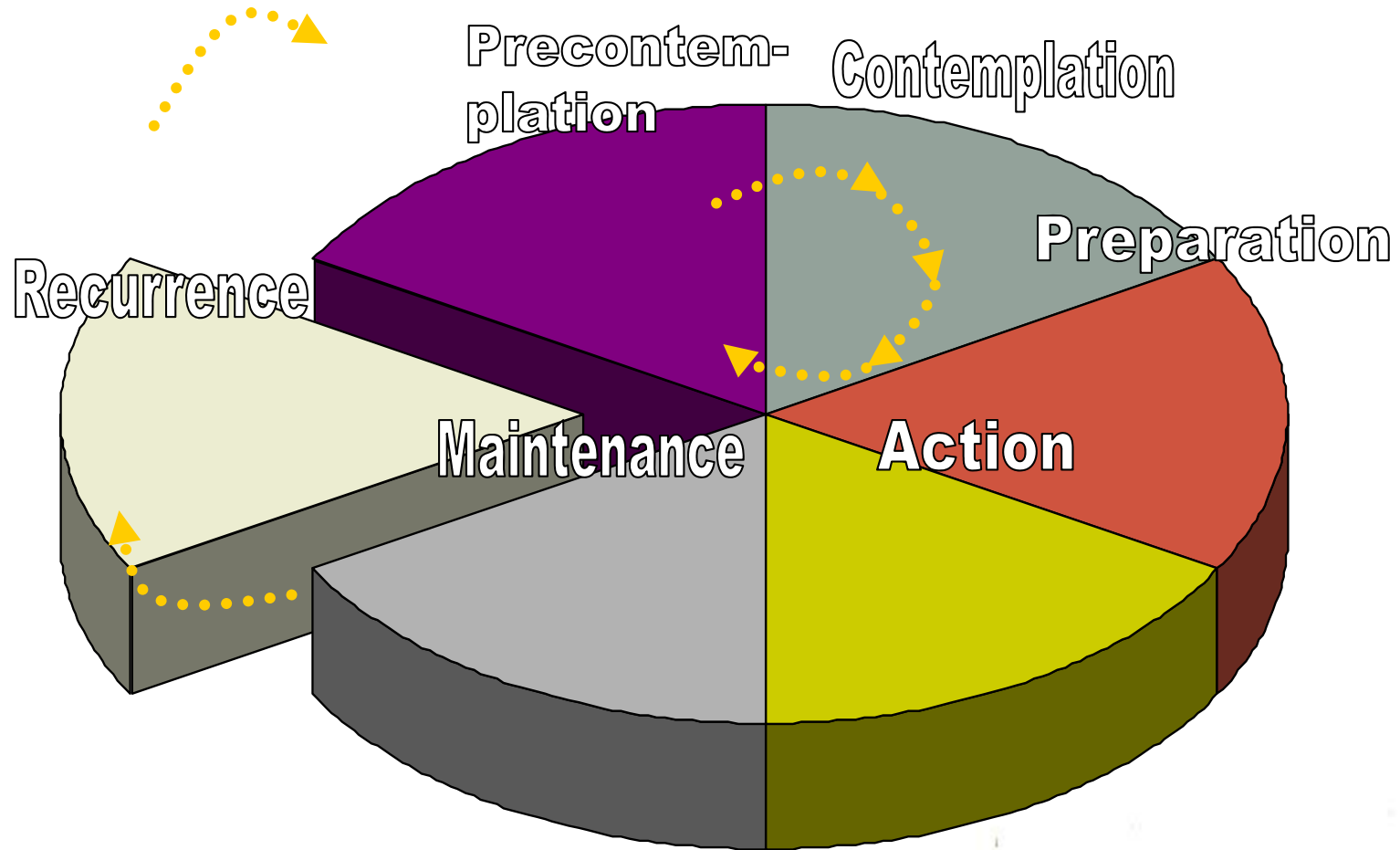
Empowerment

Trauma-Specific Interventions

- Services designed specifically to address violence, trauma, and related symptoms and reactions.
- **Intent of the activities:** increase skills and strategies that allow survivors to manage their symptoms and reactions with minimal disruption to their daily obligations and to their quality of life. **Eventual hope:** to reduce or eliminate debilitating symptoms and to prevent further traumatization and violence.

– Adapted from James A. Peck, Psy.D., Trauma-Informed Treatment: Best Practices, Los Angeles County Annual Drug Court Conference May 2009

Stages of Change



Source: Prochaska & DiClemente, 1982

Questions: Are there populations...

- in the community you serve whose experience is not spoken about or recognized?
- that the community chooses not to serve with prevention and health services? If so, why?
- who make others feel unsafe and/or uncomfortable when they are in our midst?
- whose needs are not met through an asset based approach?
- whose world view is different from ours and serving them effectively would make us change the way we do our work?

Small Group Work



Small Group Work

Review the “scenarios” staff could consider when planning TPP programming...

EBIs and Inclusionity

Proactive Protocols and CQI Planning:

Effective Screening

Creating a Network of Support

Accessing Those Who Need The Most Support



Small Group Work

1. Select scenarios that seem most pressing for your organization and local partners.

2. Brainstorm what it would look like to address this issue. Which special populations are affected by this issue? How can their needs be met?

3. What additional resources would you need to address their needs better?

4. Who (be specific) within your organization or local partners' organizations would be best suited to address these needs?

5. What final product would best support your staff in meeting these populations' needs? (e.g., sample language to health educators; protocols that support educators in maintaining fidelity programming when issues arise; screening tools; etc.)