



Understanding Trauma-Informed Programming: A Primer for Responsible Fatherhood Programs

June 8, 2016



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How to Ask a Question

Chat (Zoom)

MRFC PowerPoint template trauma-informed June 2016.pptx

Understanding Trauma-Informed Programming:
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June 8,

Chat with Other Attendees.

Available Web Links

Downloadable Materials

Submit Questions to Presenters

Web Links

- Fatherhood.gov
- All Dads Matter
- The Darnon Project
- Derrick Curtis - Yale School of Medicine
- Fatherhood - Twitter
- Fatherhood - Facebook
- Fatherhood - Past Webinars

Downloadable Resources

Name	Size
Resources for trauma-informed programming, June 2016.pptx	428 KB
Presenter Slides!	476 KB

Ask a Question

Show All Questions



National Responsible Fatherhood Clearinghouse

- DHHS/ACF Office of Family Assistance funded national resource to support fathers and families.
- Resources are available for dads, fatherhood programs, researchers, and policy makers.
- Visit the NRFC: www.fatherhood.gov.
 - www.fatherhood.gov/toolkit for *Responsible Fatherhood Toolkit*.
 - www.fatherhood.gov/webinars for archives of all our webinars.
- Contact us: info@fatherhood.gov or Enzo.Ferroggiaro@icfi.com.
- Encourage fathers or practitioners to contact our national call center toll-free at **1-877-4DAD411 (877-432-3411)**.
- Engage with us via social media:
Facebook: [Fatherhoodgov](https://www.facebook.com/Fatherhoodgov) Twitter: [@Fatherhoodgov](https://twitter.com/Fatherhoodgov)



Our Goals Today

The experience of exposure to trauma can impact key executive functioning skills such as how we think, feel, behave, and relate to others.

Today's webinar will share information about:

- The widespread impact of trauma for many individuals and families.
- Signs and symptoms of trauma in clients, families, and staff members.
- Ways to integrate trauma-informed knowledge into program policies, procedures, and practices.
- SAMHSA's Trauma-Informed Guiding Principles.
- Resources to help agencies and individuals become more trauma informed.



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Today's Presenters

- **Derrick Gordon**, Yale University School of Medicine, New Haven, CT.
- **Lamar Henderson**, All Dads Matter, Merced, CA.
- **Kerri Pruitt**, The Dannon Project, Birmingham, AL.



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The Four Rs from the Substance Abuse and Mental Health Services Administration (SAMHSA)

According to SAMHSA, a program, organization, or system that is trauma-informed:

- *Realizes* the widespread impact of trauma and understands potential paths for recovery.
- *Recognizes* the signs and symptoms of trauma in clients, families, staff, and others involved with the system.
- *Responds* by fully integrating knowledge about trauma into policies, procedures, and practices.
- Seeks to actively resist *re-traumatization*.



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Trauma-Informed Approaches

SAMHSA's Six Key Principles

"A trauma-informed approach reflects adherence to key principles rather than a prescribed set of practices or procedures. These principles may be generalizable across multiple types of settings, although terminology and application may be setting- or sector-specific:

- Safety.
- Trustworthiness and Transparency.
- Peer support.
- Collaboration and mutuality.
- Empowerment, voice and choice.
- Cultural, Historical, and Gender Issues."



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Also according to SAMHSA

Trauma-specific intervention programs generally recognize that:

- Survivors need to be respected, informed, connected, and hopeful regarding their own recovery.
- There is an interrelation between trauma and symptoms of trauma such as substance abuse, eating disorders, depression, and anxiety.
- We need to work in a collaborative way with survivors, family and friends of the survivor, and other human services agencies in a manner that will empower survivors.



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Considering Trauma: Important Lessons for Fatherhood Programming

Derrick M. Gordon, Ph.D.

The Consultation Center

Yale University School of Medicine



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This presentation is.....

- Not:
 - Sufficient to make you an expert on Trauma.
 - Designed to give you skills to “treat” individuals who present with trauma histories.
- It is designed to:
 - Be a primer for ongoing staff and program development related to exposure to and impact of trauma.
 - Encourage agency self-assessment related to trauma care for individuals served.
 - Push for a more comprehensive approach that considers **all** of the experiences of our participants.



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Overview of Trauma

- There needs to be an “event.”
- One has to be exposed to it.
- The event needs to threaten:
 - Life.
 - Serious injury.
 - Sexual violence.
- Can include broader definitions:
 - Intergenerational trauma.
 - Historical trauma.
 - Oppression-based trauma.



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American Psychological Association. (2015). Guidelines on Trauma Competencies for Education and Training. Retrieved from: <http://www.apa.org/ed/resources/trauma-competencies-training.pdf>



Why Trauma?

- Men present to fatherhood programs with differing experiences that may impact the goals of “fatherhood programming.”
- Research has demonstrated that trauma negatively impacts one’s:
 - Health outcomes and health disparities.
 - Reactions.
 - Biases, assumptions, and reactions.
 - Extended network.
 - Trust.
 - Development and lifespan considerations.
 - Experiences that are time-variant.





Trauma-informed practitioners:

- Consider survivors':
 - Strength.
 - Resilience.
 - Potential for growth.
- Should incorporate:
 - Shared decision making.
- Should consider:
 - **Your** self-reflection skills.
 - Ability to assess skills in:
 - Affect and content management.
 - Ethical responsibility.
 - How **your own** history, values, and vulnerabilities impact your approach.





Why in Fatherhood work?

- Men who present for our services with trauma histories come from a number of vulnerable groups.
- Their social experiences can be exacerbated by their trauma histories:
 - Socio-economic status.
 - Race/ethnicity.
 - Education.
 - Age.
 - Disability status.
 - Military status.
 - Sexual orientation.



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Why in Fatherhood work?

- Experience of trauma can create characteristics that make some men “challenging” to work with.
- It can make it difficult for them to “engage” in the fatherhood intervention.
- They may:
 - Be marked by **trust** issues.
 - Have challenges with **emotion regulation**.
 - Present with other “physical” and “mental” health challenges related to being exposed to trauma.



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Men with Trauma histories may have

- Used violence.
- Poor physical health.
- Poor mental health.
- Poor social functioning.
- Poor occupational functioning.
- Decreased quality of life.
- Limited access to their children.
- Less empathy.



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There are treatments!

- Prolonged Exposure (Foa, Hembree, & Rothbaum, 2007)
- Cognitive Processing Therapy (Resick & Schnicke, 1993)
- Eye Movement Desensitization Reprocessing (Shapiro, 2001)
- and growing.....



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Understanding Trauma-Informed Programming: A Primer for Responsible Fatherhood Programs



Lamar Henderson

All Dads Matter

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All Dads Matter

- Boot Camp for New Dads
- Men Support Groups
- Leadership for Life
- Male Engagement Activities
- Celebration of Fatherhood
- Resource Center



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Men's Support Groups



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Men Support Group topics

- Defining a Fathers Role and Responsibility
- Time Management
- Effective Communication
- Family Finance
- Ages and Stages
- Critical Thinking
- Skill Building in “Communicating Emotions”
- Identifying characteristics of “Low Self Esteem”
- Recognizing Responsibility for Emotions
- Correlation between Addiction and Violence
- Managing Depression



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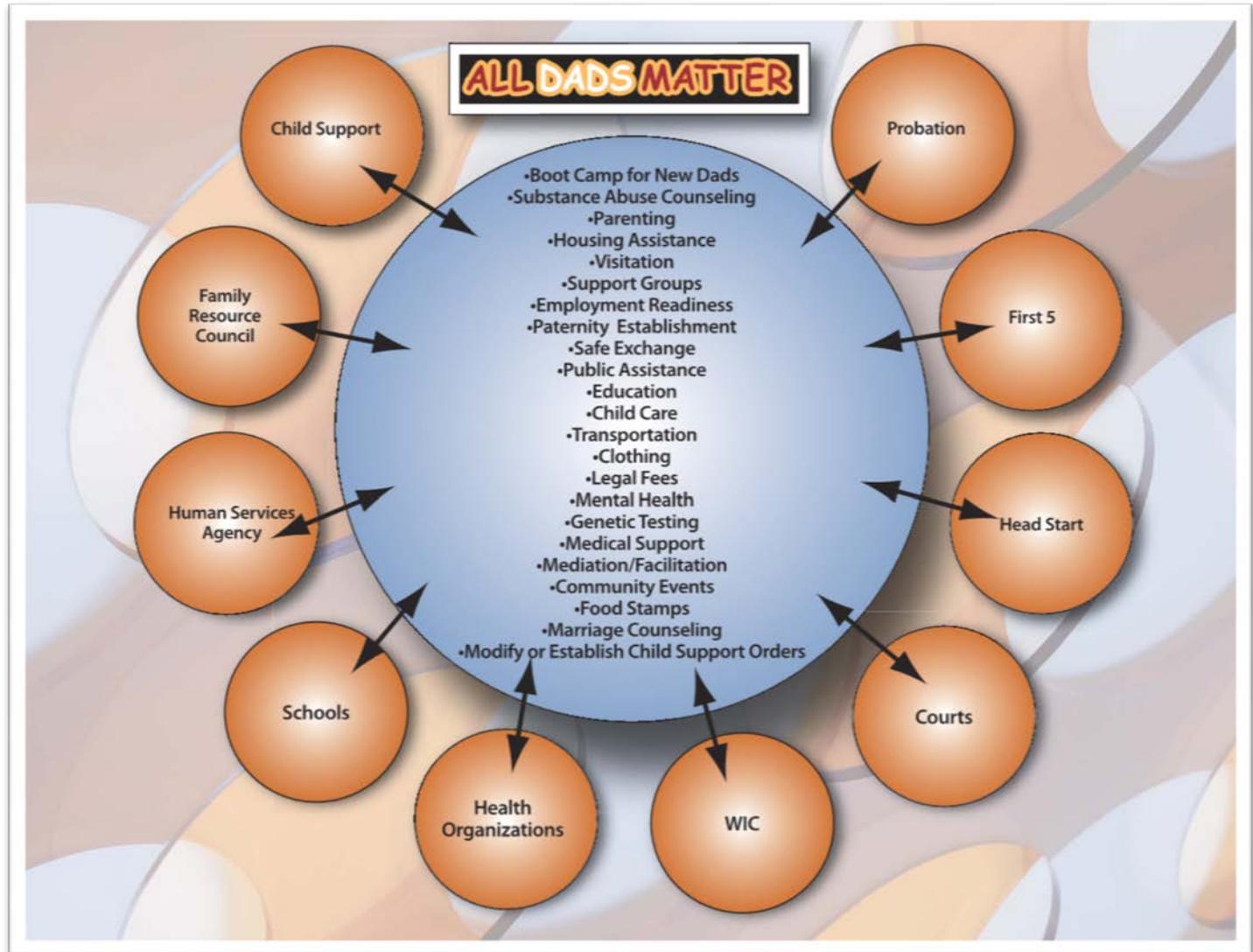
How we became trauma-informed

- How we first heard about the concept of trauma-informed programming.
- How we began to learn more.
- How we received staff training and what that covered.
- What we were already doing and how we have incorporated trauma-informed approaches to do more.
- Role of retired LCSW as co-facilitator of many of our groups.
- How we work with mental health counselors and services in the community.





Community Partners





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Kerri Pruitt
Executive Director
The Dannon Project
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Agency Overview - The Dannon Project

- The Dannon Project (TDP) was created in 1999, following the untimely death of Kerri Pruitt's teenage brother-in-law, Dannon, who was killed by a newly released, non-violent prisoner who had faced barriers to successful reintegration back into his community.
- Ms. Pruitt felt compelled to create a reentry program for non-violent returning citizens reintegrating into their communities from prison. TDP also offers programs and services for crime prevention efforts and to benefit the families of returning citizens.
- TDP is a non-profit organization providing case management, reentry, wraparound supportive services, education, occupational training and certifications, restorative justice training, mentoring, job readiness/placement, and coordination of social services.
- We serve over 500 non-violent returning citizens, 200 at-risk youth, and no fewer than 200 other high-risk community populations annually.



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Trauma Informed Principles Awareness



1. Agency staff began documenting trends of depression and “abnormal” behaviors displayed by all clients between 14 and 16 days post-release from prison.
2. Provided trend analysis to Alabama Department of Public Health (ADPH), seeking assistance on what to do with limited to no funds for mental health and counseling options.
3. ADPH recommended attending Women’s Bureau (DOL) seminar addressing Trauma Informed Care (TIC).





What? How? Why? *Into Day to Day Operations*

Completed an organizational assessment on Trauma Informed Care (TIC) - for every part of the organization (management, service delivery team, support staff).

Developed a training guide on what we learned about TIC and how to move forward with client services.

Determined a paradigm shift was necessary to implement TIC.

Revised forms, policies and procedures for service delivery.

Developed new relationships for staff training and service delivery (i.e., counselors).



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Integrating TIC Ideas in Our Work

Traditional Paradigm	Trauma Informed Paradigm
<ul style="list-style-type: none"> ➤ Clients are sick, ill or bad 	<ul style="list-style-type: none"> ➤ Clients are hurt and suffering
<ul style="list-style-type: none"> ➤ Client behaviors are immoral and need to be punished 	<ul style="list-style-type: none"> ➤ Client behaviors are survival skills developed to live through the trauma but are maladaptive in normal society
<ul style="list-style-type: none"> ➤ Clients can change and stop immoral destructive behavior if they only had the motivation 	<ul style="list-style-type: none"> ➤ Clients need support, trust and safety to decrease maladaptive behaviors
<ul style="list-style-type: none"> ➤ Manage or eliminate client behaviors 	<ul style="list-style-type: none"> ➤ Provide opportunities for clients to heal from their trauma
<ul style="list-style-type: none"> ➤ Staff should come to work every day at their best and perform to leadership's expectations 	<ul style="list-style-type: none"> ➤ Leaders need to create strong organizational culture to combat trauma and stress associated with work with traumatized clients
<ul style="list-style-type: none"> ➤ System of care should be created to minimize short term costs and contain immoral behaviors 	<ul style="list-style-type: none"> ➤ System of care invests in healing trauma, saving money over the long term

1. Defined 4 types of Trauma - "cheat sheet."
2. Determined trauma type characteristics in clients (exercises).
3. Documented possible approaches/scenarios for each type of participant affected by trauma.





Examples of Participant Trauma

Heterosexual Father
raped while
incarcerated....

Father
incarcerated
for 20+ plus
years...desiring a
positive
relationship with
children

Someone was
killed by mistake
during
participant crime
spree.



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Community Partnership Expansion and Development



- Alabama Department of Public Health
- JBS Mental Health Authority
- Licensed Social Workers of Alabama Association



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Suggestions/TIPS for Agencies working with Fathers experiencing Trauma





Resources

- www.Trauma-informed.ca (toolkit)
- www.coldspringcenter.org
- www.traumainformedcareproject.org/resources.php



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Lessons Learned: *Advocating for Clients and Staff!*

Beware of Staff Burn-Out/Compassion Fatigue

**Develop a Resource Guide
for both staff and client**

**Make Client and Staff
Safety a PRIORITY!**

Promote an environment of
empowering staff and clients
with choice and flexibility





Open Discussion



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Contact:

NRFC:

- info@fatherhood.gov or nigel.vann@icfi.com
- Please send your comments/questions, suggestions for future webinar topics, and any information or resources that you recommend we share with others.

Today's presenters:

- Derrick Gordon: derrick.gordon@yale.edu
- Lamar Henderson: lhenderson@hsa.co.merced.ca.us
- Kerri Pruitt: kerri@dannonproject.org



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