



SCI Presentation

Partnership Meeting in Poland

13-15th November 2019

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Presentation Contents

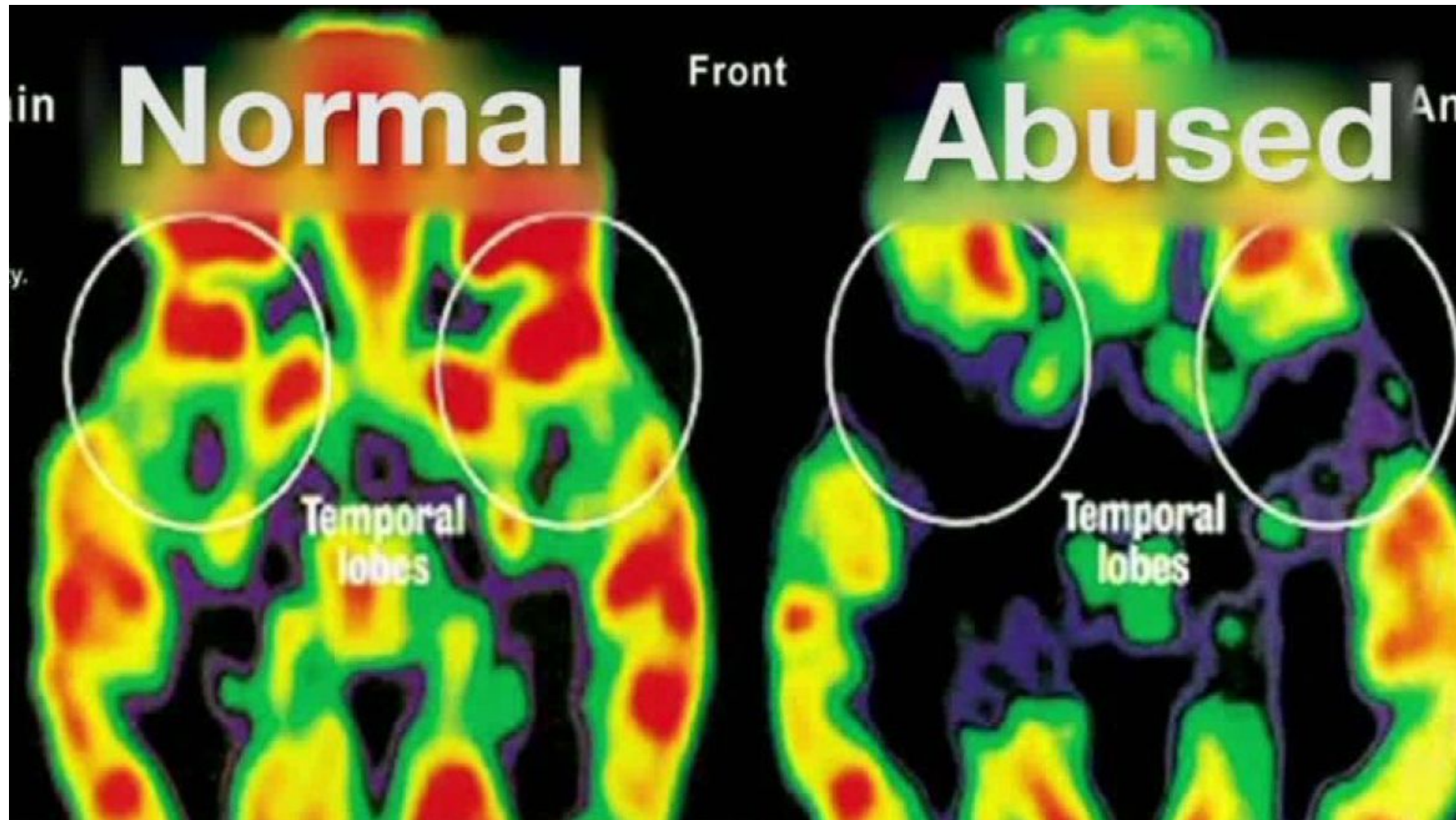
- Trauma & Why it Matters
- Adverse Childhood Experiences
- Impact of ACEs/Trauma on the Life Course
- Research in the Simon Communities
- Findings and Recommendations of the Research
- Resources & References



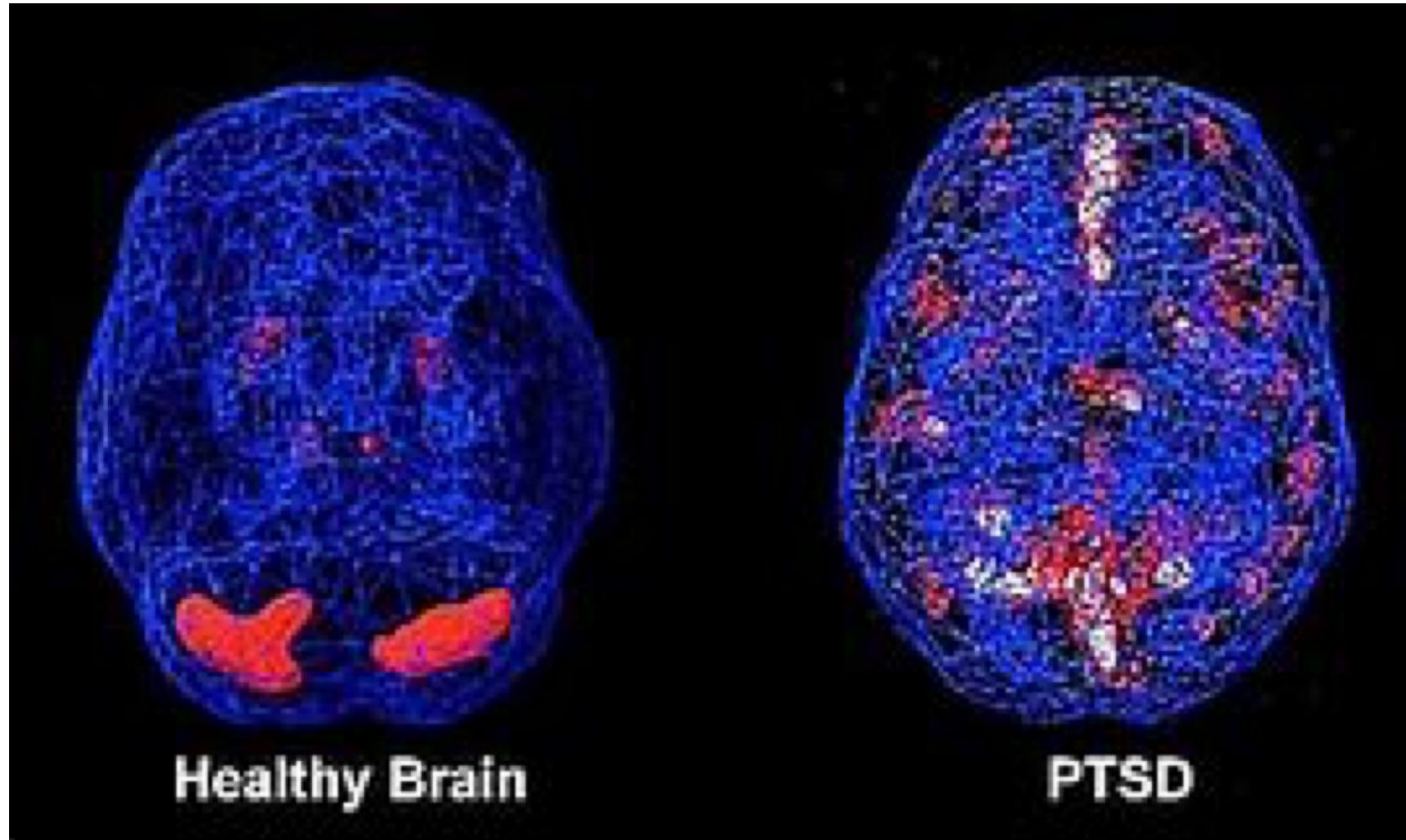
Trauma & Why it Matters

- Growing body of international evidence
 - Structural response not effective alone e.g. poverty
-

a) What does Trauma do to the brain?



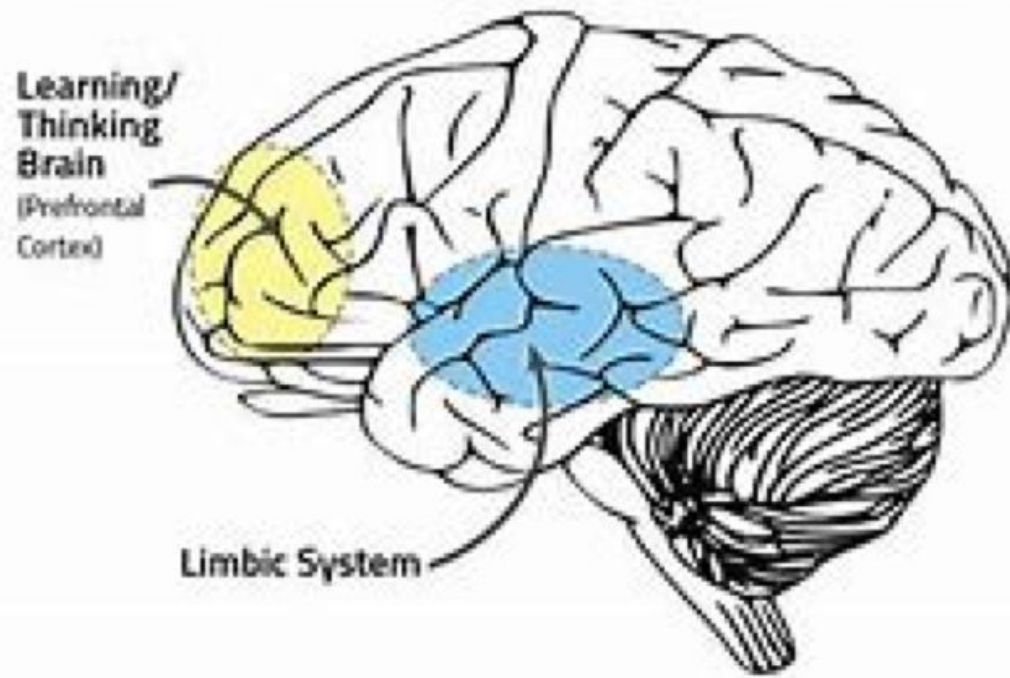
b) What does Trauma do to the brain?



c) What does Trauma do to the brain?

Survival Mode: Flight/Fight/Freeze

Frontal lobe (Prefrontal cortex) goes offline
Limbic system / mind and lower brain functions take over



What causes psychological trauma?

- Adverse Childhood Experiences (ACEs), experiences while growing that can deeply impact a young person and profoundly affect emotional and physical health later in life
- ACEs are common, however, a high number of ACEs (especially a score of 4 or more) have been found to increase risk to a person's health, well-being and ability to function in society

Adverse Childhood Experiences (ACEs)

- unique to the individual's experience

PERSONAL

- Verbal Abuse
- Physical Abuse
- Sexual Abuse
- Emotional Neglect
- Physical Neglect

OTHER FAMILY MEMBERS

- Mother treated violently
- Substance abuse in family
- Mental illness in the family
- Incarcerated family member
- Loss of a parent through divorce, death or abandonment

External Adverse Experiences - e.g. extreme poverty, homelessness, growing up in direct provision,

External & Structural Factors



Bullying



Poverty



Peer rejection and having no friends



Experience of racism



Death, multiple and traumatic loss



Community violence



Food scarcity



Experience of the care system



Poor academic performance

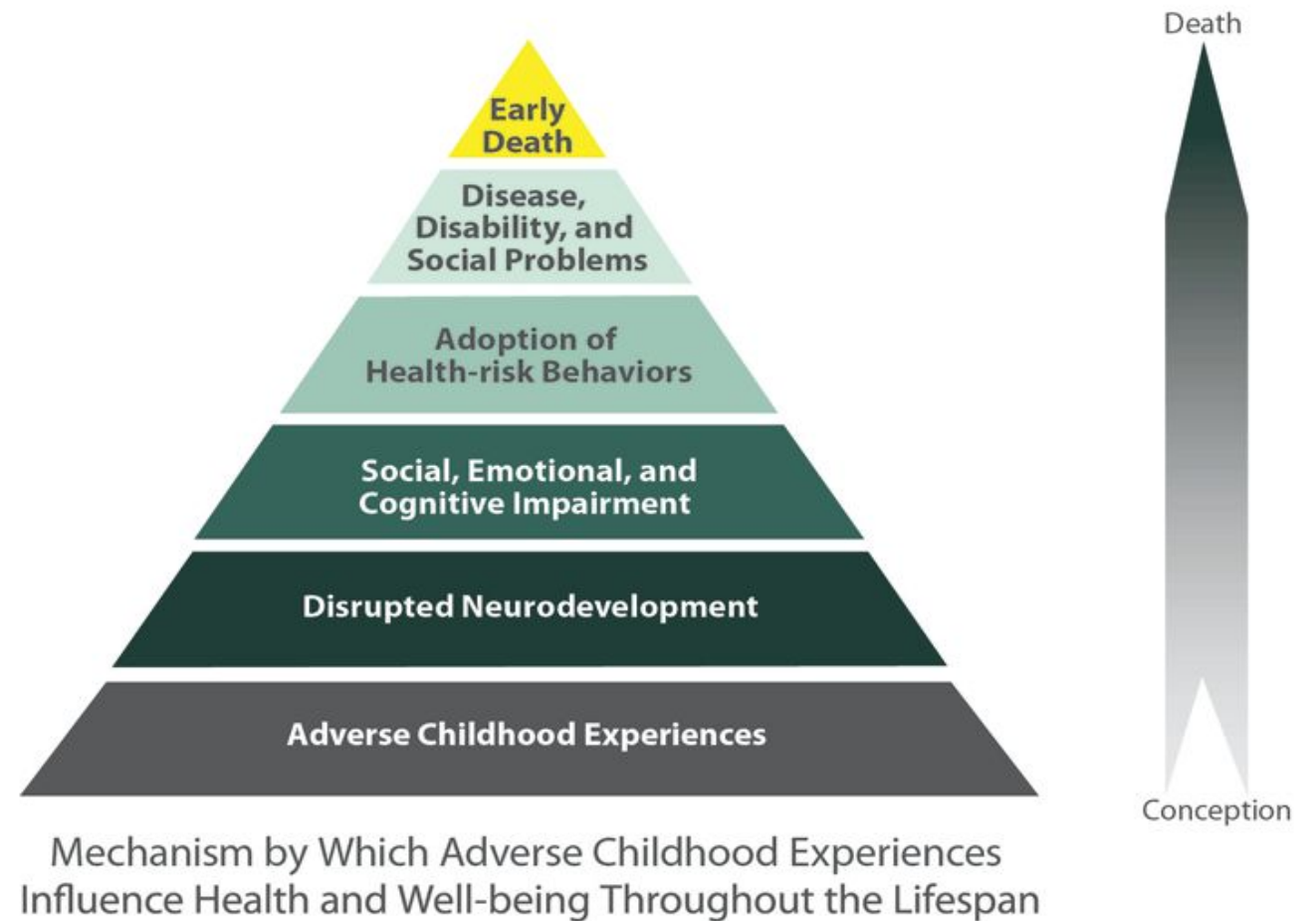
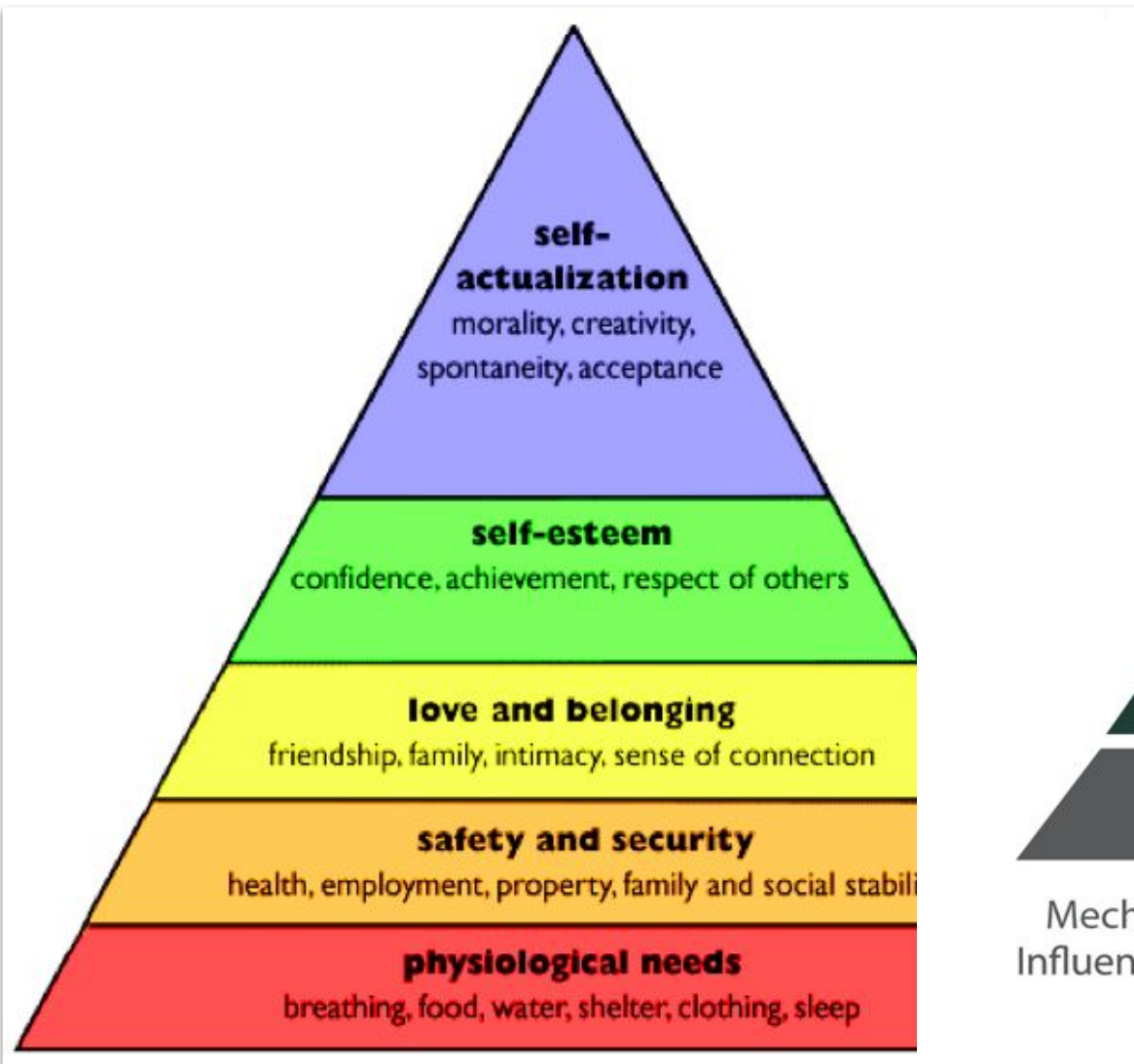


Living in an unsafe environment

Compound Trauma

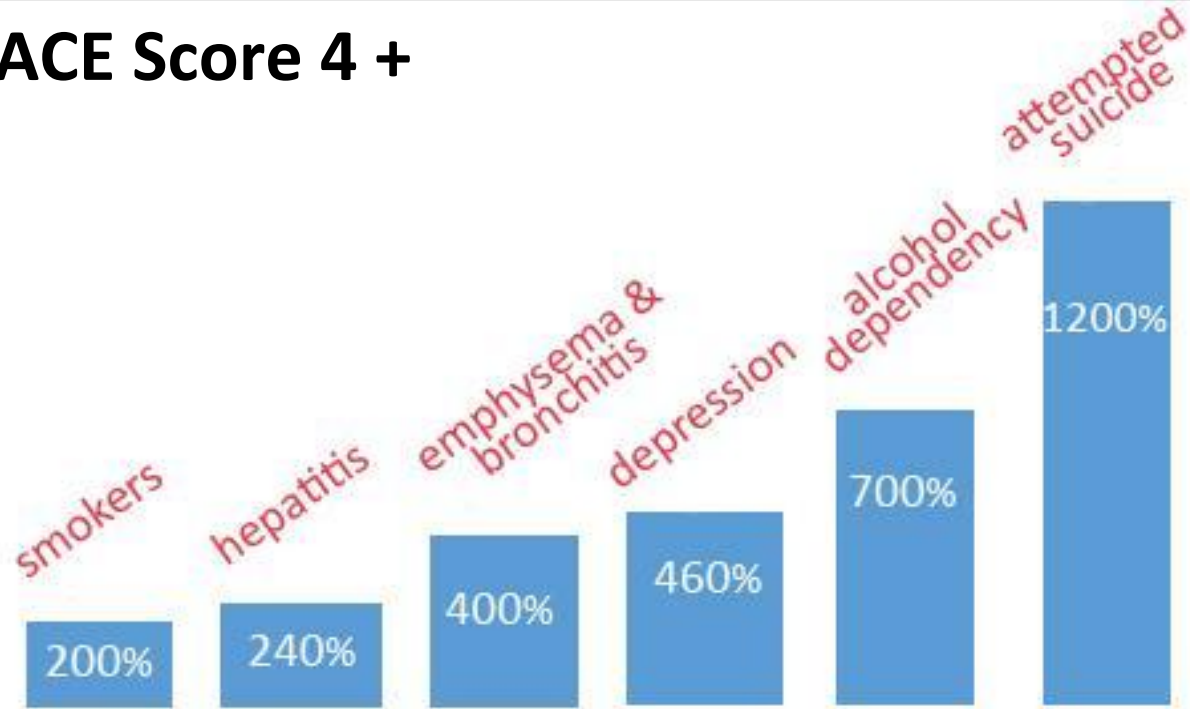
- Efforts to address trauma and secondary trauma are made more difficult in a context where numbers of people homeless continues to rise (30% in Cork / 150% in the West of Ireland in the last 4 years) and the complexity of need and number of incidents staff address (37%) continues to increase.
- Increasing the number of exits from homeless services especially for long term homeless persons with complex needs is vital and must be central to the plans of all organisations seeking to address the crisis

Impact of ACEs on the life course

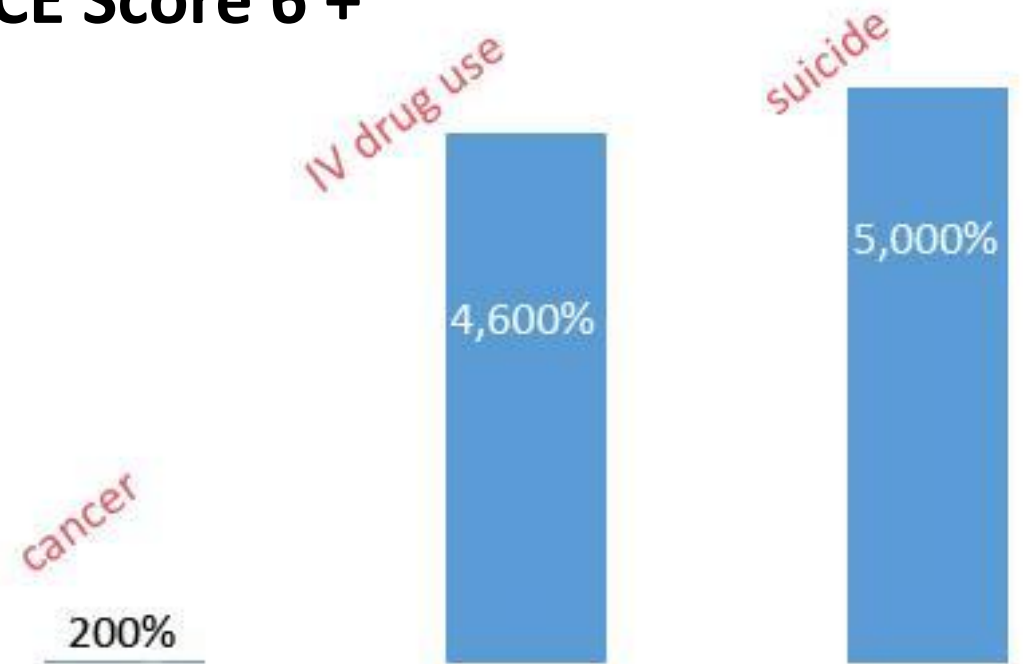


ACE Dose Responses (Felitti et al, 1998)

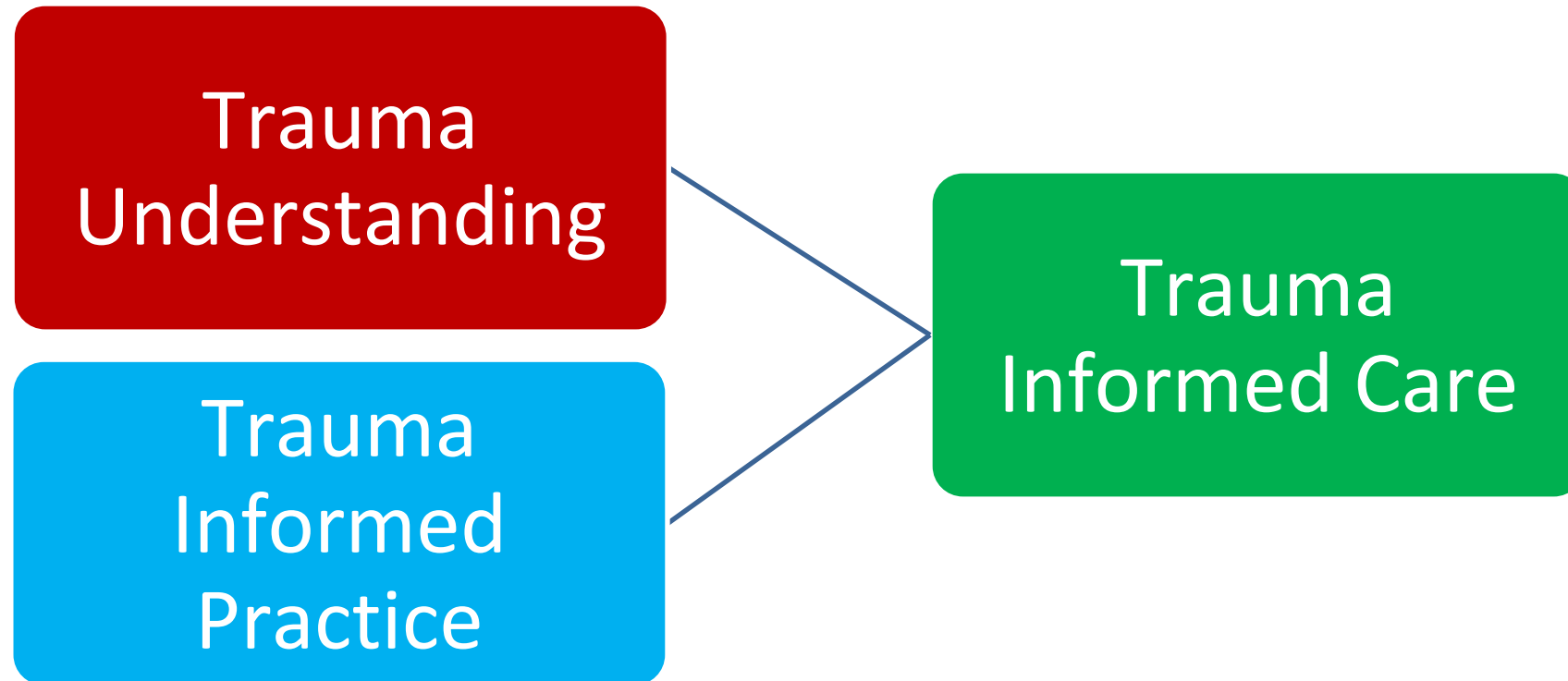
ACE Score 4 +



ACE Score 6 +



Trauma Informed Care (T.I.C)





ACEs/Trauma Research

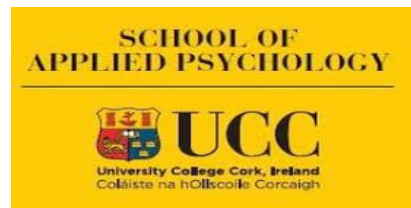
Partnership with University College Cork & Cork Simon Community

Dr Sharon Lambert, Senior Lecturer, University College Cork

Mr Graham Gill-Emerson, Addiction Counsellor, Cork Simon Community

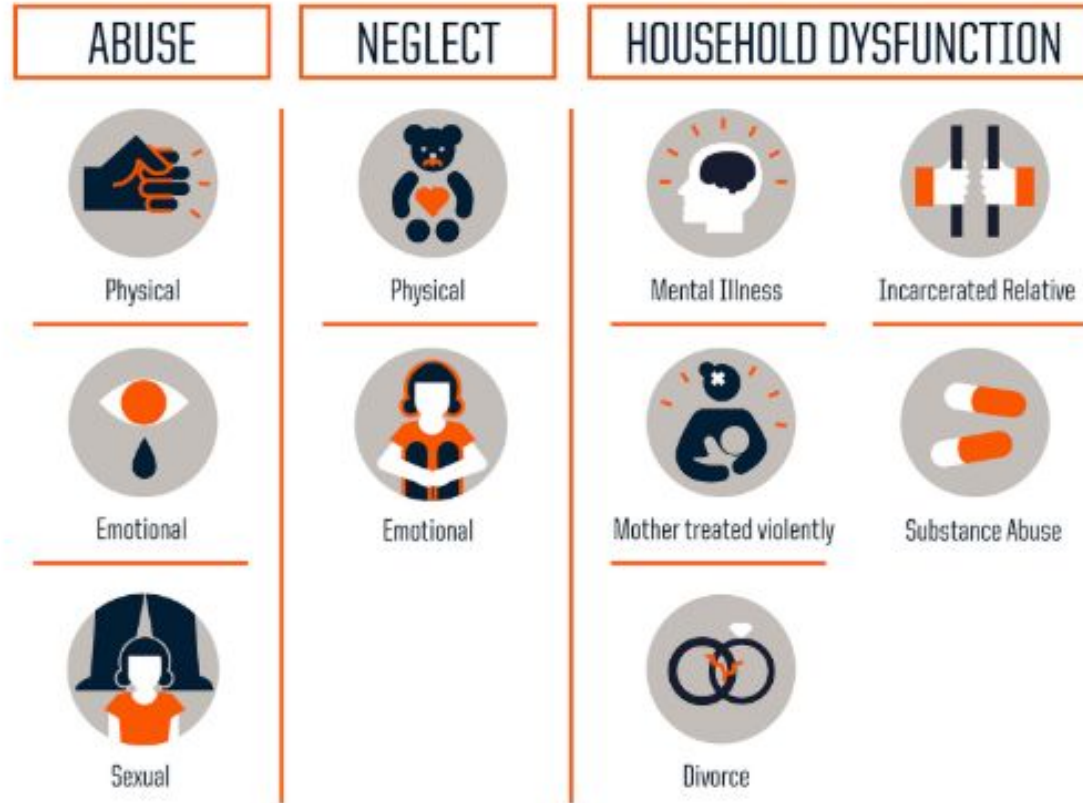
Health Service Executive - Dr. Aidan Horan (Methadone GP) & Dr. Anna Marie Naughton (GP)

Data Collection: Mary Tobin, Ailicja Wislocka and Eimer McGarry

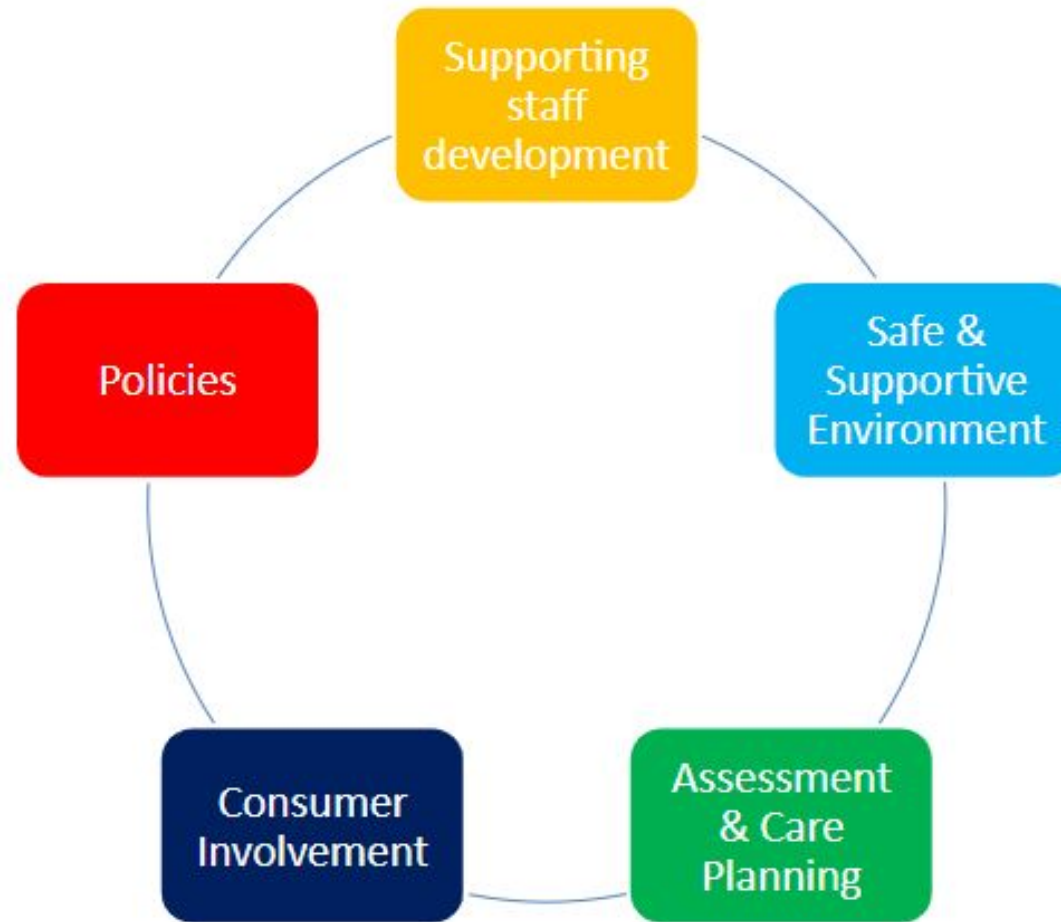


Aim 1: Establish the Presence of Trauma

ACE Study

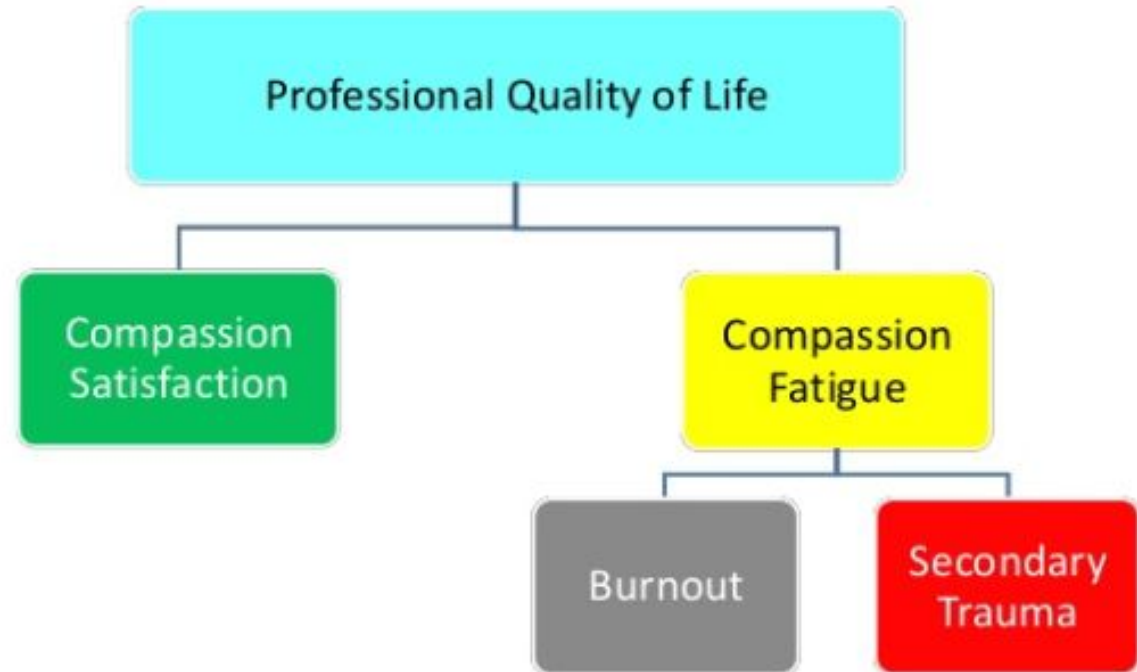


Aim 2: Assess the Capacity for Trauma Informed Care



Staff
Compassion
Levels

CS-CF Model



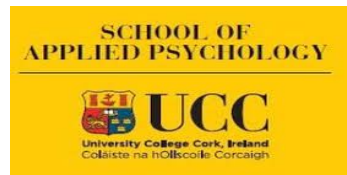
Aim 4: Explore Trauma Training

Trauma
Training

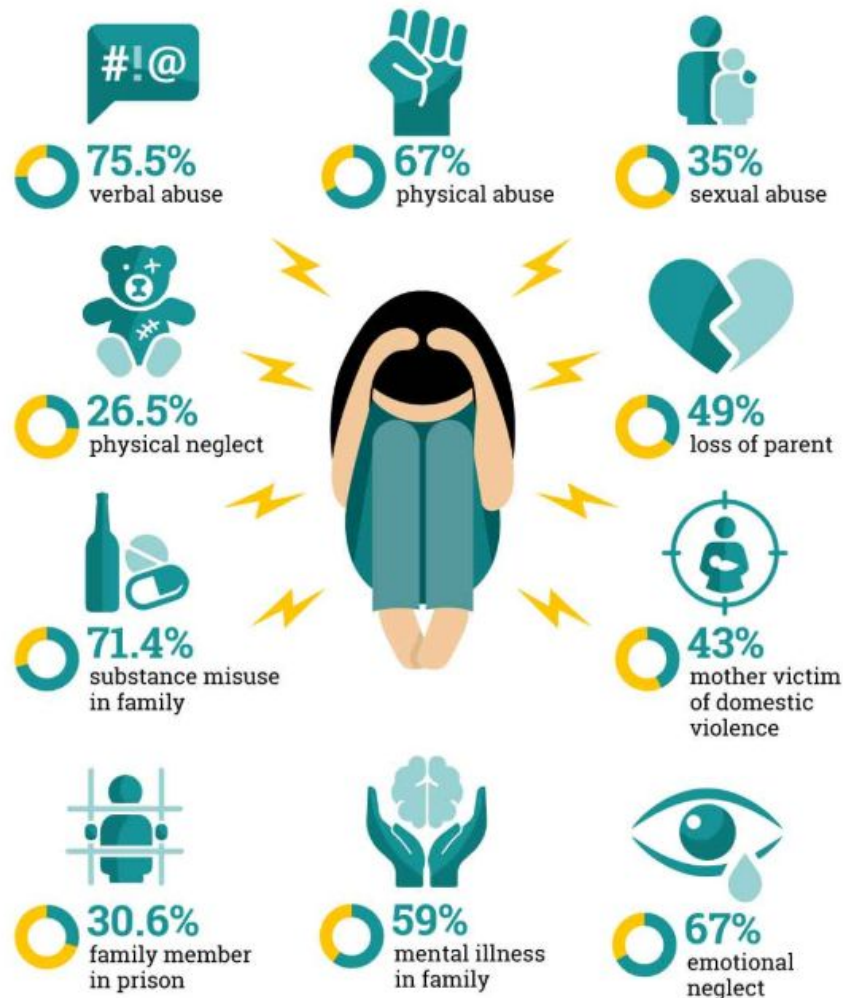




Research & Assessment Findings



ACEs among Cork Simon Clients



100%

100% OF CORK SIMON SERVICE USERS HAVE EXPERIENCED **ONE** OR MORE ACEs

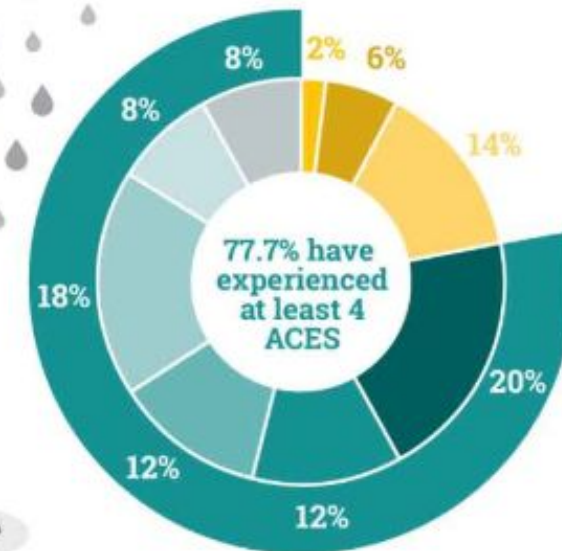


77.7%

77.7% OF CORK SIMON SERVICE USERS HAVE EXPERIENCED **FOUR** OR MORE ACEs

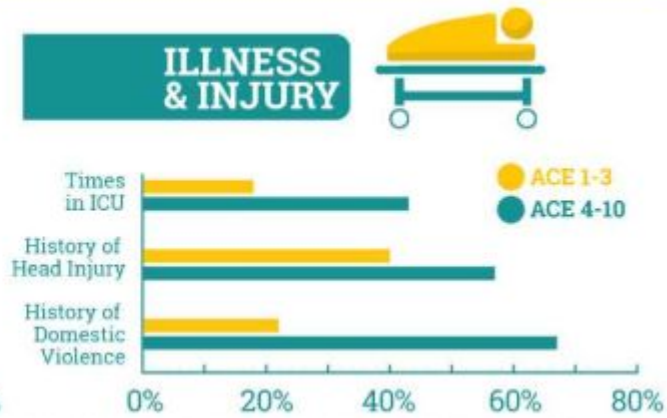
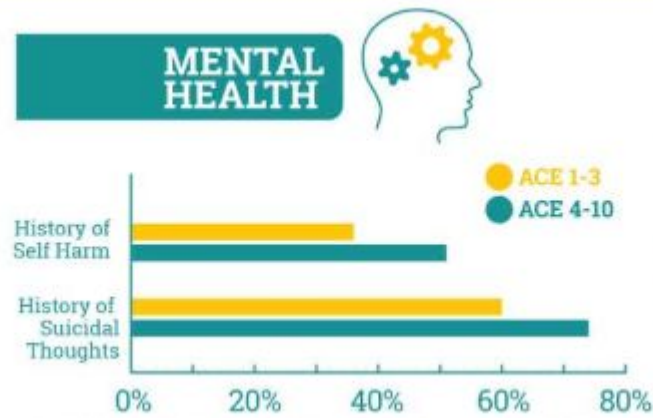
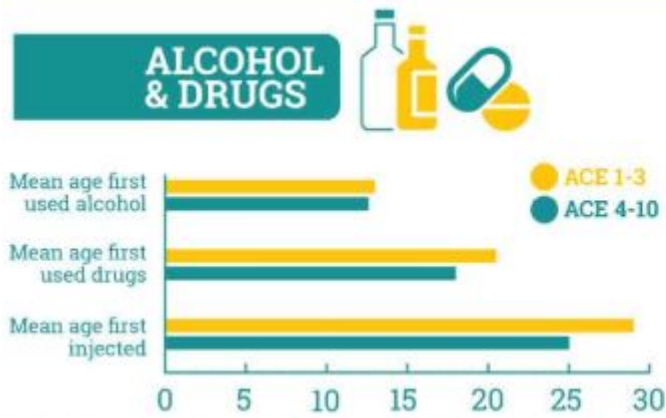
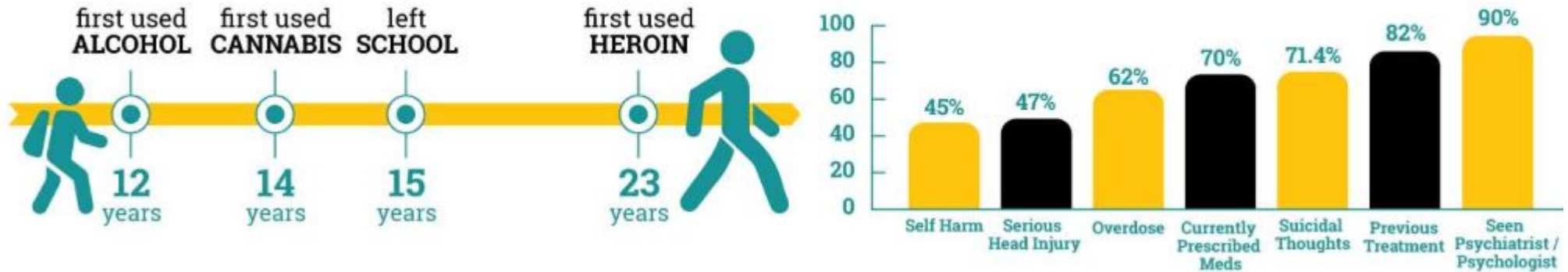


compared to 12.5% of the original ACE study. A score of 4 or more ACEs is known to put an individual at a significantly increased risk of poor health and well-being.

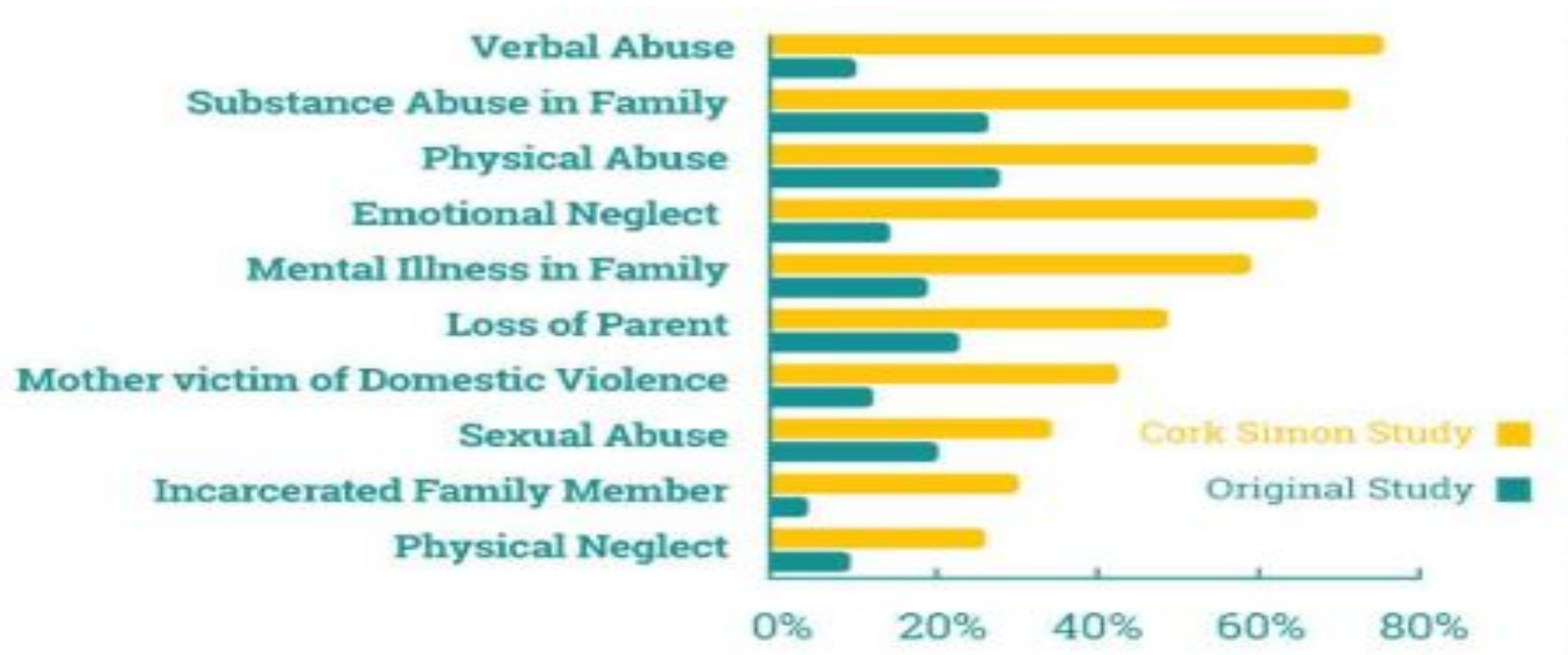


Findings: Impact of High ACEs Scores

Health & Wellbeing among Cork Simon service users

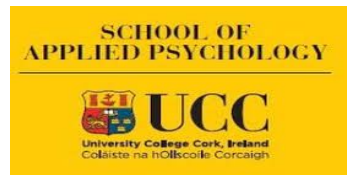


Findings: ACES as compared to the General Population





Impact of Trauma Exposure on Staff



The Professional Quality of Life survey, ProQOL (Stamm, 2010)

A self-report measure to assess the compassion satisfaction, burn-out and compassion fatigue was administered with a sample of staff/volunteers:

- 53 people completed the survey
- At least 11 / 53 had high scores re secondary traumatic stress
- 9 /53 had low scores re compassion satisfaction...worries re effectiveness in role
- At least 6 / 50 with worrying scores re Burnout



Impact of Exposure to Workplace Traumas



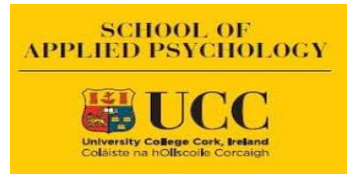
T.I.C Staff Training & Feedback

- Dr Sharon Lambert provided training in trauma awareness for all staff at Cork Simon during the course of 2017
- Overall more than 120 persons participated over 6 Training Days
- This included all frontline staff, ancillary staff (catering, cleaning, maintenance etc.) management, administration and fundraising staff including senior management

- *The training provided me with insight to appropriately work with clients who have experienced trauma*
- *I will be more aware of language and space when working with people*
- *The trainer explained the theory of trauma very well; it was easy to understand*
- *The training gave me an understanding of the significance of the impact of early childhood trauma*
- *This has been an excellent training and has allowed me to re-evaluate my practice*
- *Showed me many areas we're excelling and has also motivated me and given me ideas for improvement*



Research & Assessment Recommendations



Research Recommendations: Key Areas for Change in Services

- **Memorials for people who have died** in our services (where they do not occur)
- Explore what to call the people we serve e.g. service user, resident, client,
- **Staff, Supervision and Self Care** (see next slide)
- **Review current paperwork** for Service Users such as rules, rights and agreements to reference new National Quality Standard Framework for Homeless Services in Ireland.
- **Reduce paperwork** and make it more universal between centres with an emphasis on positives and strengths (acknowledging paperwork is required by funding bodies and not directly in our control)
- **Continue move towards automated systems that simplify documentation** and reporting across the organisation
- Strengths based recommendations are to the fore in new materials being produced
- **Ongoing development with Care and Case Management working group to improve interagency and collaborative work.**

Recommendations related to Staff & Self Care

- Address staff self-care
- **Training sessions on self care and wellbeing** arranged for all staff
- Staff room for particular Shelter Service
- Discussions re staff support and wellbeing given primacy in supervision structure. **External Supervision** for Outreach Workers.
- Pilot **Reflective Practice Groups**
- Wellbeing page and resources on Intranet
- Staffing gaps addressed
- **Flexible work arrangements** / shorter working year etc

Long-term Focused Recommendations

- **Advocate for additional resources to enhance service environment** e.g. address building issues such as: signage, removing beds from offices
- Secure a larger sites for the Day Service (services that have outgrown their current space).
- **Assess and source resources required to provide single room occupancy and/or communal housing first sites** for those who can utilise them.
- **Develop and include recommendations in new Strategic Plans**
- **SCI to advocate with government and policy makers nationally to address current national policies that have a negative impact on homeless people** e.g. 'centre of interest' policy.



SCI's moving forward...

- **Reflective practice groups & External Supervision**
- **Creation of trauma enhanced environments** e.g. removing /hiding bed in offices and consulting rooms
- **Moving toward policy for individualised spaces** e.g. MSC policies, no shared bedrooms.
- **Developing psychologically informed rooms and spaces in services**
- Communication both written and verbal using a trauma informed approach e.g using compassion, problem solving and no blame
- **Enhancing the living/service environment** e.g. notable decrease in relapse times for women in recovery project using new individualised apartments.
- **The use of assertive engagement, motivational interviewing, focus on ontological security, family support principles.**



Thank You / Dziękuję

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