

Trauma-Informed Engagement Skills

TIP: *Open-ended questions* create the space for people to tell their story in their own words, thereby influencing the direction of the conversation and supporting engagement. Open-ended questions can sometimes feel too broad or overwhelming for some. One variation is to offer multiple choice answers so the individual has options.

Practice Examples:

- What concerns you most about your health, if anything?
- What do you need to get out of this group/program to make it worth your time?
- How can we support you to feel safe in this program?
- How have you managed to get through other difficult times in your life?

TIP: Genuine, specific and relevant *affirmations* build self-efficacy and offer a compassionate mirror for self-reflection. Affirmations acknowledge effort and strength; offer appreciation and understanding; recognize success –all important components of trauma-informed practice.

Practice Examples:

- You were engaged throughout our appointment today, in spite of all the chaos this morning
- You have been through so much in your life and are doing everything you can to make sure that things are different for the next generation.

TIP: *Reflective listening* is a skill for engaging and maintaining connection. Practitioners listen for the essence of what they believe they have heard the individual say and offer back a statement of understanding.

Practice Examples:

- Youth: You're the third person I've had to talk to since I got here... I am so sick of answering everyone's questions:
Practitioner: It is really frustrating to have to keep retelling your story. You're wondering if I can be helpful, or if I will just pass you on to the next person.
- Woman: I don't want to feel this way, but I just have no idea how to make the pain stop.
Practitioner: Nothing you have tried has worked so far... and at the same time you know somehow that things can be different.

TIP: *Summaries* can be helpful ways to link ideas, reflect mixed feelings about change, clarify understanding, focus and contain the conversation and facilitate transition to next steps.

Practice Example:

- Let me make sure I understand what you have told me so far ... it was a big step for you to speak with me today. You have been struggling for a while... and then this big change happened when you lost your job. That's thrown you into old familiar patterns and you are noticing that you feel on edge all the time. This is the first time that you've started to talk about this and you are seeking some support and you're just not sure what type of support you need... What did I miss, if anything?

Asking About Trauma and Responding to Disclosure

TIP: When introducing questions about past experiences of trauma, it is important that practitioners *normalize the process and provide a rationale* by linking past experiences to current functioning and health.

Practice Examples:

- Because the things we have experienced in our lives can often impact our health – even if they happened a long time ago – we ask the following questions of all people that come to our program.
- Some women want to talk with their practitioners about very personal or difficult topics. If you do, I am open to listening. I don't need to know all the details, only what you think would be helpful.

TIP: Individuals accessing services need to understand that they have a *choice* in answering the questions asked. They must be assured that their decision whether or not to answer will not impact their quality of care.

Practice Examples:

- You do not have to answer questions you don't want to.
- If there are any questions you are not comfortable answering, that's no problem. You can just tell me to pass and we'll move on.

TIP: *Informal questions* aim to inquire about past trauma in a non-threatening way, while remaining present focused.

Practice Examples:

- How do you connect your experience (as a child, in your home country, with the incident) with how you are feeling/coping now?
- Are there things in your past that still bother you in an ongoing way?
- What would you like me to know about you as a person to provide you with the best possible care?

TIP: *Strength-based conversations* purposefully draw out what is working, strengths, interests, goals, and skills in order to foster self-efficacy, support empowerment and highlight resiliency.

Practice Examples:

- How have you managed to get through tough times in your life?
- What/who are your supports?
- What would your friends say are your biggest strengths?
- What has kept you going, even when you weren't sure you could?

Skills & Strategies for Responding to Disclosure

Healing takes many forms. In an assessment phase of the conversation, the primary role of the trauma informed practitioner is to maintain safety, validate the experience, and respectfully contain the amount of information shared.

Guiding Consideration	Practice Example
Acknowledge the information and express empathy	I appreciate your honesty with me.
Revisit confidentiality	Any information we collect is recorded in a confidential health file.
Offer a larger context for the trauma	Many people who struggle with substance use concerns have had different experiences of trauma in their lives, for example violence, abuse, or car accidents.
Validate what has been shared	I can see that it took a lot of courage for you to share this with me today and you are exhausted. I will take your lead in terms of taking a break for now, perhaps finishing another day, or continuing with our conversation.
Offer hope	What you have shared with me today will help the both of us work together to determine the best way to support you. Although it may be hard to believe right now, over time and with support, people do recover.
Address time pressure	This is a very important conversation for us to have and I want to be able to give you my full attention. We only have 10 minutes left for today, so I wonder about setting up another visit to have more dedicated time.
Debrief the conversation and work together to create a self-care plan for the immediate future.	People respond differently to talking about upsetting memories. How are you feeling right now? ... (pause)... I encourage you to check in with yourself throughout the day and notice what is happening for you (tired, anxious, at ease, sad, etc). What is one thing you could do today to take care of yourself.
Respond to high risk concerns	<p><i>Offer referrals as appropriate.</i></p> <p>The WRHA Crisis Response Centre offers walk-in assessment and treatment for adults in mental health crisis at 817 Bannatyne Avenue (24-7). To reach the WRHA Mobile Crisis Service call 204-940-1781 (24-7). Clinic Crisis Line can be reached at 204-786-8686 (24-7). For immediate life threatening events call 911.</p>

Adapted from Substance Abuse and Mental Health Services Administration. *Trauma-Informed Care in Behavioral Health Services*. Treatment Improvement Protocol (TIP) Series 57. HHS Publication No. (SMA) 13-4801. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2014.

GROUP DISCUSSION

Population and Public Health works with individuals, families, communities and partners. Trauma informed practice relates to anti-racism, harm reduction, health equity promotion and other public health principles. The concepts can be applied to multiple settings and public health activities.

Please discuss these questions at your small table and consider the lessons shared from the presentations and panelists.

What are the elements of trauma-informed care, anti-racism, harm reduction, or health equity promotion in your current practice setting?

How do you see trauma-informed care working in population and public health? What opportunities and barriers do you foresee?