

Episode 143 - Lesley Barraball and Carlos Neves: Corizon: One Agency's Experience Integrating Trauma-Informed Care

[00:00:08] Welcome to in social work the podcast series of the University of Buffalo School of Social Work at www.insocialwork.org. We're glad you could join us today. The purpose of in social work is to engage practitioners and researchers and lifelong learning and to promote research to practice and practice to research. We're so sure Hello this is Charles Syms and welcome to in social work. When thinking about trauma informed care the discussion often centers on how do I integrate this into my practice. Do I need to obtain special skills to treat trauma and the clients that I work with. How do I incorporate the five guiding principles trustworthiness collaboration safety choice and empowerment into my practice. If I practice in a trauma informed way how might that be different from how I practice now. These are the necessary questions for the social worker looking to adopt the trauma informed framework but it represents only part of the story. Using a trauma informed approach necessarily involves an agency wide change to support the shift in philosophy and service delivery of its entire staff. In this podcast our guests discuss the experience of how and why. One agency came to adopt and incorporate trauma informed care into its service delivery. In 2013 two agencies Kids Link a children's mental health provider and Mosaic counseling which offered services to children men and women merged to form Corizon Family and Community Services headquartered in Kitchener Ontario.

[00:02:01] Among its many services Corizon specializes in children's mental health youth engagement individual and family counseling parental support and education and community wellness is creation not only involved the joining of these two agencies but also the incorporation of trauma informed care as his practice philosophy. Lesley Barraball is a registered social worker is the director of Children's Mental Health Services at Corizon. Family and Community Services Ms Berry Ball has worked in the field of children's mental health for the last 19 years. She holds a masters degree from Wilfrid Laurier University and a specialized honors bachelor's of arts degree in psychology from the University of Guelph. Her experience includes children and family therapy clinical supervision of home and community based treatment programs program management program development partnership development and community collaboration an intake clinician for Corizon in the Waterloo region of Ontario. Carlos Neves is also a registered social worker. He holds a masters of social work degree from the University of Toronto as well as a master's degree in sociology from Queens University. In his current role Mr. Neves provides counseling and assessment services to children and their families as well as providing clinical supervision to social worker interns. In addition he regularly facilitates a trauma informed parenting workshop for parents and caregivers which he develop MS Berewa and Mr. Neves was interviewed in April of 2014 by Dr. Steve Halady a member of the social work staff. Hello I'm Steve Halady and I'm here as we bear about and Carlos Neves so Lesley and Carlos could you please tell us a little bit about kids plink and Corizon Tinslay and a long time ago as an orphanage in the village of scenic Ontario in 1858. And in 1966 it became a residential treatment center. And in 1987 it became a designated Children's Mental Health Center.

[00:04:24] With funding from the Ministry of Children and Youth Services so for many years Kiplinger has provided a wide range of children's health services in community settings home settings and school settings. And in addition to the treatment and residential treatment settings. Then in April 2013 one year ago Kipling's amalgamated with another longstanding community organization called Mosaic family counseling together Kidlington mosaic formed Corizon Family and Community Services which is a multi service agency that provides a broad range of support therapeutic and preventative programs to individuals and families. So our story today is going to focus primarily on the former kids and the journey that we took towards our trauma and for practice

in our children's mental health services. However it's important to know that there is a part too to this jury which is going to evolve through the journey amalgamation and coming together as a new organization from a trauma informed perspective. Great. And I understand that you have a very innovative program at Corizon called front door. Could you please share a little bit about that program. It is a partnership between two organizations in the community carides and Loserville and friends or functions as a centralized point of access reweave for children and families who have a question or concern worry about a child or youth mental emotional wellness. The front door operates as a centralized information service to the community. So parents family members community members and community professionals can call and speak to one of our intake clinicians. If they're just needing basic information about children's mental health it's also a place where people can call us their first starting point when they have a concern about their child and our intake clinicians will hear the story and point families in the right direction.

[00:06:24] Not naming a referral to a community service or it may mean a referral to one of the children's mental health programs that are provided through Luther would work horizons and can you tell us a bit about your journey of becoming trauma informed. Sharable I can start but I know that Carlos will jump in as well because he's a big part of this story. So I guess the journey began really from an internal awareness that started to develop that a vast number of the children we were serving had experienced some form of trauma as well as the realization that we may unwittingly be traumatizing children. I work with Sam because we didn't have enough knowledge at the same time. We also started to develop an awareness of the impact that trauma has on our staff in the form of bacterias trauma chronic stress in the organization and what we later came to be aware of was called collective disturbance. So we started in a number of different places. One place that we started with we decided to start asking very deliberate questions of all of our clients that front door in the form of a trauma screening questionnaire and we suspect that what we learned through that process was one that a number of our clients had experienced trauma. We hope to learn more about their experiences and the impact that these experiences had on them. The developing of a trauma screen and implementation of it was a journey in and of itself. We really started quite tentatively asking very few very broad questions of our clients probably that were quite reflective of our own discomfort in asking the question.

[00:08:10] I'm not sure that at that point we really were certain we would know what to do with the information if it came our way. So we realized after experimenting for a while that we really needed to create an atmosphere where we were relaying to clients that it is really safe and it's really okay to talk about your story. Here to talk about the traumatic experiences you have. In addition to the experiences the victims say were serious things. So a lot of us really and a little bit more about that jury so as a jury consultant with programs version conversion the. So what do we need to lose over 1000 in yes. Sharma some of the impacts that the kids are living with and the related question is how do we have this conversation without traumatizing children and families in the process. Because one of the things that was I guess part of the anxiety that you're working with is a kind of widespread belief that we discovered this there and that trauma itself unless you're specially trained when you have a high level of expertise that they shouldn't be talking to people. Trauma can be traumatizing. And so I think that the back of everyone's mind is worse than it was when we found a way to have this conversation in a safe zone right away that we would be creating more anxiety and stress. So that was part of the thought at the beginning of this and the way we overcame that or learned to work with that productive where it was we began to develop the script how would we talk to kids and families versus you know what are the key messages.

[00:09:57] And one of the messages is that trauma widespread It says older everyone we know has been touched in some way about trauma directly or indirectly in trauma or what we're calling adversity as well is a part of life. Now of course there is the great scale in terms of the severity of trauma but it is part of the fabric of everyday life so that was one of the messages is to try to

introduce it as part of the extremes of living and also to educate and help some of the differences in shaping a child's behavior or a child's emotional well a child's social relationships and how that impacted families so the education bill. And finally the message of hope. Well the messages in the preamble to the screaming question no kids are really resilient. We know this from the from from research the bounce back from the verses and through here through support they can not only survive the trauma they can overcome in a productive fulfilling and meaningful life. So taking the time to leave people with all kinds of messages and of course giving them permission to share only what felt safe to putting it all out on the table. That was really important part for us to create safety for the kids and for the families and also to preserve the safety for ourselves so that we just feel like we're having these conversations as a responsible and ethical manner. I think the other thing that the trauma screening questionnaire really accomplished was well first of all we know we learned that if you don't ask don't tell.

[00:11:36] So it really did from that client first experience with one of our services gave the message that we want to hear your story. We want to hear your pain. We can handle that and we can help. I think the other really interesting thing that happened was a lot of parents through hamstrung can respond to these questions had never realized that their child had experienced trauma and it was quite a rehydration for them. Often parents also started connecting the dots from their own childhood from their own life experiences really realizing that they too had been impacted by trauma. So we realized very quickly that not only was the trauma screen information important to us that front door and the subsequent program staff been working with families to really be able to respond to them in helpful ways that we needed to be very responsive quickly following that conversation with families to provide parents with more information. So that is all trying to inform parents and caregivers of workshops talk to that. So what we did is again we came together with the social learning they worked together to develop the same troubling from parenting workshops. The aims of the workshop were to provide some education around what trauma and what the impacts of trauma are level of the brain at the level of experience level of the mind body or the level of family relationships impure relationships. We really want to map out to what the ripple effects of trauma are. Context Elfreda's is crucial. The other aspects of education was to try to understand what kinds of responses to trauma. The report is helpful to encourage that journey of recovery resilience in the lives of kids experiencing trauma.

[00:13:41] So that will be another component explicitly which kinds of strategies would be helpful for parents and caregivers to respond to kids who may be expressing their needs doing certain behaviors. Devotion regulations types of challenges that once we put in the context of what happened to me as opposed to defining in terms what they're doing wrong you began to see it as a response to their environment. The only way that they knew how the Soviet states could have really helped shape the perspective away from kids as Obando a problematic behavior is seeing that as part of the context part of a family part of the community responding in their own creative way to the harm that they've experienced and was not receptive then we could understand better what their needs they were expressing his worthy. So for example your child could be in a classroom setting then the opinion might be having trouble attending to the information do not pay attention or distracted disruptive Sacha and without any prior knowledge of what the child may experience. We don't get a full understanding of what because that. So in the trial and we can talk about things like intrusive thoughts like attracted to raise the child not could have that happened for example through the classroom setting. And it allowed a teacher get their attention and they are told happens to be loud the kids need to get your attention. Loud noise from the classroom.

[00:15:19] That child experienced abuse in the past verbal physical abuse by the dog upon them they may think that the trigger they call that moment when live or travel that they extend the path we could bring back a flood intrusive memories and turn them into a state of hyper arousal if they feel unsafe in that context they could react in a variety of ways if we are acting aggressive ways to

react in a way that withdraws from the situation or they may not be able to attend to the information and therefore be labeled as not listening to one of the important tenets refrain was experience of someone has explained why the light and how they would be perceived differently. Another thing that we do now I think a lot of parents and caregivers are evil now through attending workshops. Following a meeting with US and in conversation between cancer ultra release for trauma through our a packet of information for parents and caregivers and teachers that remain our companion to the workshop to provide the same kind of information that are there to reinforce all of those ideas families are found at home and in the community as part of our journey. The adoption of the sanctuary model. OK so maybe I can speak to some of us. Four years ago a conversation started an organization which was held in the church and here in order to get this practice going off the ground and the sanctuary model of calling for care came to our attention and in particular the orthodox documentaries. And as a consequence of learning about that program we actually went to the states a number of us went into some training centers in gallopers. We came back with a revitalized sense of how to transform our organization. We came back with a plan for how to incorporate charm and four principles central organization not just work with children and families but just as importantly and to work with one another.

[00:17:37] So part of what I'm trying to teach is that the workplace culture has a big impact on how kids experience service and in particular how the traumatic experiences of children could be reenacted and be triggered if they're in settings where staff are unaware of their trauma and what the responses are and don't feel supported themselves and don't feel like they have safety in their work environments with one another. So we spend a lot of time asking ourselves Do we feel safe not just physically emotionally and socially safe. The world community from one another in order to be in a trauma informed way with one of us. Part of what we did is we search the Orient to the sudden commitment in this century. So these are basic ideas and values about emotional intelligence social learning open communication. These are the values that to deal with loss orienting to the future. These sorts of values we want to embody and put them into practice. So over the course of several months you came up to the point of just how to do that. We met different groups and different committees and sort of natural organizations and in a real sort of like Hands-On way developed a workplace culture that reflected the values that we can see what we were doing and how we were living this reality. There was a real family with the kind of care we were offering the kids came into contact with us again back to the one of the first messages. Certainly certainly was no different trolling they come to us.

[00:19:24] The first step is to recognize that we too are touched by trauma and that even in our work there is often a parallel process at work so understand that it's that there's not this great gap or divide between our clients and ourselves that we are part of the same world and understanding trauma has impacted us in our own workplace is a good place to start the game with a sense of feeling connected with the kids and families that we work with so those are some of the thoughts that come to mind. I know we did some activities for each serve program our team would take a month and reflect on one of the commitments for example the open communication and they would come together to develop relativities to share with the rest of the organization in a fun playful way. Really MBARI will open communication with live and even work for example to visit our actions with ourselves with children and families that we work with the intention of that was to bring otherwise and so you practice your actions that our values and principles can deliver. And that's how you transform culture. One other point I want to say that this is this is also a wonderful experience that we were able to discover in the preceding for the first time. How much of what we were doing with actually trauma informed. It just wasn't in our consciousness of becoming more conscious. Others who allowed us to directly do more into the hands even more reminders sort of intuition focused approach to looking for exceptions of trying to find a different language to name experiences that we have to understand that a different layer of that may have been there that we just didn't have the language to actually articulate.

[00:21:10] So that was a real gift to us saying that we made use of the century model we just had to teach not comments that as he said it was and I know much of what we were doing fine but we were able to do it in a much than ever way. Still the question is how are you feeling today to any different meaning because that question is being asked because we really like. Now how can I help you. Yes. Taconic different meaning people develop their own safety plans and host demands in their offices letting people know that someone out of balance or struggling might be able to offer a suggestion because they would know what was in that person's so you mentioned some of the ways that you become more self-conscious in how you deliver services and interact with your colleagues on a day to day basis. Can you share some more details about sort of the specific ways that trauma informed care shapes your specific programs and services. We emphasize specific things much more in our programs now so the Carloss mentioned safety again and again and it is absolutely a cornerstone of our work across all of our programs of really understanding what the children and families are working with and need to have in order to feel safe and secure. What do children need from our staff. What do they need from their parents and caregivers. To parents and caregivers need from the we really pay attention to that collaboration. How do we meaningfully engage children and families in the development of their own treatment goals and their own treatment plans and all of the activities that they participate in.

[00:22:58] Two words meaning of course choice is another huge part of our work with everyone offering children and families choice in terms of where they need how long they need. What activities they engage and what type of therapy is a good fit for now. You know it's like therapy is music therapy session with a child benefit from a sensory ground. And how would they like to use that set three rooms to meet their needs and feel safe and manage themselves. So really giving people as much control over the elements of their programs is really critical. Similar to that is empowerment so providing information and education educating children about trauma. Helping them to understand the impact that those experiences may be having on them and how they're experiencing health in their relationships and in their VII's. Providing parents with the same information so that they can better understand their children teaching them strategies to deal with overwhelming situation and overwhelming emotions and overwhelming feelings in their bodies. Things like meditation and relaxation teaching love loudness about the you know what feels good to put in your body versus what makes your body feel sluggish and anxious and intense. Giving people lots of opportunity to talk about their traumatic experiences aren't stressful in a way that's comfortable be that through art therapy through play therapy that sort of thing. Finding ways that are safe for people to express those memories trustworthiness and another huge focus. You know having consistent reliable staff as much as we possibly can to you know demonstrate honesty who uphold their commitment to follow through on their commitments. Where we can have consistency all the time how we work as a team and show families and children that we're working together to get to that.

[00:24:57] I think in a way that's really missing out. We do everything we do. What I mean is the message of hope is the education part of creating a body where kids and families can share through things with expectation. The pain of pain and anguish but that's the definition of kids for us is that we do hope that we find a way to orient them to present to the future. No one on your own that his recovery. But the message of hope that the deforming the loss of his house and pointing towards the future depends on the same package well educated people about trauma and try to be part of the healing process. Essentially anything that comes to mind is any of where within the framework of neuroscience those practices are within the health of Petronius kids themselves are becoming more educated road work. On top of that is probably phobia Firefly phrase that was sponsoring child slavery was happening in the brain and then from there lot of people that the blame game what it needs to do to try to keep yourself safe. Sometimes it's just stuff alone and there are ways to illustrate that and this is a very weak answer to hold onto its meaning. It was wonderful about what

we know all of the blame is a process that the brain gets the reward usually through showing us that it doesn't have to be Perlow conditions Cruz supporters love sports are listening for two full days in school buildings. Well this in the brain. You are so over the shoulder. This is the first conventional view of you know kids we're talking about this communion faithful.

[00:27:16] So when you have said that it was common form practice looks like an organization. It reminded me of a story I heard a few weeks ago about a child in one of our residential treatment programs. And this child has experienced a tremendous amount of trauma and frequently feel very overwhelmed face. And you know in a residential treatment setting like that when children when you're not able to you will not know their point and they're not yet at a point where they can manage those overwhelming emotions in a way that keeps safe and allow others to be safe sometimes staff need to provide physical restraints. But of course that's not the preference. So all of the staff in the residential treatment programs meet monthly for something called a restraint review and that involves all of the direct service staff as well. You know the administrative staff and the housekeeping staff and the maintenance staff so that everyone has a good understanding of each of the children in the program. And what's really happening. So there is one child in particular who was struggling a great deal and had experienced a very high number of restream and the team got together and really understand the child's experience and realize that in a group setting throughout the day this child is often very overwhelmed with the noise and that he and the constant interaction and the belief was that this child would benefit from regular breaks throughout the day having one to one time with someone with a very grounding and really help him feel safe. But there just kind of weren't enough director of staff to go around the quantitate tell you've worked off the floor every hour to accomplish that.

[00:29:11] This particular child has a real interest in cooking. So the plan that was established and this has worked so beautifully was for this child to go to the kitchen on a regular basis and work with our cook and his child produces wonderful three in the kitchen. He then gets to share with other children and others that the results are really understanding the child's needs and structuring his day around not only his needs but with a focus on resilience and a focus on helping him to develop new skills. At the same time with a nurturing faith that has resulted in a dramatic decrease in the need for that external restraints to help them cope. So it sounds like having a trauma informed lens has really affected the services and the care that you give at every level and really helped you to find creative solutions when working with your families and the children. Now one thing that I'm wondering about is as staff members at Kidlington Corizon who've been present an active part of this transition to trauma informed care what is the experience of this transition been like for you. Well it's been a bit of a ride. When we got started two years ago there was a lot of energy a lot of excitement a lot of uncertainty and a lot of conservatives fear the things we were looking at ourselves very closely you know practices of perspective are we doing what purport to do is to say are changing. That's that we showed the Times of resilience skills because like I think the answer is yes we were doing what we were doing with slogans not as close as we need them.

[00:31:05] And we were doing for trolling for perspective against him. We needed to go first. So it also meant that we had a lot of internal abuse in the workplace culture that having lots and lots of conversations in different contexts breaking down the silos between programs and really learning from each other in the wealth of experience knowledge that we all could bridge betrayal. That was really a very productive phase of this journey. It's one that I think a lot of people between people great people with experience and personally and people they work for instead. They will use programs experience every day to day basis. And as a consequence just a willingness to be more available to help and support in whatever way they need. That was a key moment for me to notice that we had permission. This is an organization and opened up for us to articulate what we need in order to feel safe in order to feel that difference in the lives of the children who are serving over there and serving a lot of a lot of information that occurred when we started to spread the message

so that people into to become aware that issue and when they are working with us we will bring that to the situation as well. That was obvious that they will be released to the devaluation were still on a journey. It's just more uncertain as to what that would look like. And so that's the first phase is creating that culture has shifted a bit on a different place. We're living in our own self conscious with this at this moment.

[00:33:11] Also there are some challenges a lot of people that were involved in this journey would have moved on to other opportunities. Well there are some of the historical memory that has to be preserved. When these folks come along and try to share some of the stories for we got to discuss those changes comes into that's also one of them wasn't part of what it means to be resilient and bounce back from adversity is to be able to grieve your losses and to do so in a way that makes us feel a good spirit to move forward in a productive way. That's exactly what we're trying to do with your nation. Right. You mentioned some of the challenges that you've experienced. What are some of the other successes that have come out of this transition. Well there are a lot of things that have come out of this. I think one of the biggest ones that it's such a simple thing but a very powerful thing and that is a common language conversation about trauma and what is happened to a child as opposed to what's wrong. Much more discussion about resilience as opposed to disorder. Those things have permeated our culture and have become much more just a way of being. I see much more of it over the town for everyone across here seem to engage in more open conversation more open syndication understanding challenging perspectives to provide support and safety to each other to support one another to implement their own safety plans and she'd be well to practice romance Wellness and Resilience are two pieces that really I think complement the trauma informed perspective as well as the child's right perspective zones or things have really become the cornerstones of our work.

[00:35:04] So really looking for opportunities to sell children's resilience and families resilience build their capacity establish stronger connections down in the community you know become a much bigger and much bigger focus on staff as well as the wellness of our families and really providing each other and educating each other I guess about wellness and how to take care of ourselves and how to have much more control over our own state of mind and how our bodies feel physically. Those have been some really positive additions to the organization and we will work with people just to remind one of the things you have trouble for workshops that will lead to creating safety for self and self care for the caregiver is absolutely critical and part of the journey of a child's recovery from problem. So we use the knowledge that we are famous for a drop in cabin pressure came down the day with instructions instructions for adults was first. The last bit homesick for themselves the lovely teachers the kids because you have some people have a chance to do that in this whole field. Self care is something we talk about a lot with our clients who we were also struggling a lot with the demise of newspapers towboats reasons for that was obvious to me. So grateful for the health services that agencies like ours are swamped with me so there's always the pressure. Indeed the these are things that we do that are responsible for some of the stress that occurs in people who are working within the. Also something the belief that we this work because we will make a difference. There is a real guys at the center.

[00:37:12] They we have to be careful not to become a sacrificial person in this there. And that is to say cannot really this operation to say here's my word for this very well then it's to say well you know we've hit the terrorist cells first. And I think that emphasis has occurred to then the people have been to fruition. This video was to take care of itself today with pictures. So I think that comes directly to the trauma informed perspective. That is why we were told with the world. So you described the journey that you've taken to get to this point and where you are now. So the next question is Where are you headed next and what is the vision for trauma informed care for Kidslink Corizon going forward. Well the vision is that we will have a reason to think going forward really you know in the year ahead we're going to be coming together as a new organization to develop the

trauma informed framework for Corizon and also to continue to grow our trauma treatment services. So really the year ahead for us has to come together and bring all of our programs and services together and really take a look at how we all understand trauma and what trauma informed means to cry in the hall. Now at the same time there's something very exciting happening in our community the community in which we work.

[00:38:45] Corizon has been very actively involved in something in the development of a community trauma initiative and this community trauma initiative since last year and event completing a needs assessment across that community and talking to stakeholders talking to community partners and talking to community members about trauma services in the community. And what are the needs and want of a gaffe and this has led to the development of very significant projects that's going to be moving forward here with their baby three community working group one that will be working specifically on trauma education across our community. Another group will be working on developing a consistent trauma informed approach across our community organization. And then another group will be working on enhancing our crime and civic services that are available across our community. Socarides and it's going to be very involved in all three of these initiatives that we feel like we have a lot to offer the community in terms of extending our trauma informed knowledge and really developing a trauma informed community practice here. Well it sounds like you have a lot of really great things coming up and that you're moving forward in some really really wonderful directions. Do you have any closing thoughts to give my clothing about our challenge will former President is part of everyday life. So you can't imagine yourself decorated for this with someone close to us and they've experienced trauma. It's really important for us to find the face of that ourselves. You opens to pay to have the message that we can survive and therefore we get into trouble with the most important first step. The second step is to take collective responsibility for trauma and a person who is what I mean by that and to share the responsibility with or if you will and to commit yourself to providing the opportunities for growth and resilience and futures that children you have to for them. That's why we're all in this together.

[00:41:11] And we all need to have your neighbors so that there is something that you can do to help kids recover from trauma. Very good point. Very strong finish. If it is Albertini. Yes. So it's my pleasure. Thank you you have been listening to a discussion of one agency's experience in adopting a trauma informed perspective. We hope that you found it instructive. Additionally we have in social work would like to acknowledge the assistance of the government of Canada and the University at Buffalo. Canadian Studies committee in the production of this podcast. I'm your host Charles Syms. Please join us again at in social work Hi I'm Nancy Smyth professor and dean of the University at Buffalo School of Social Work. Thanks for listening to our podcast. We look forward to your continued support of the series. For more information about who we are as a school our history our programs and what we do we invite you to visit our Web site at www.socialwork.buffalo.edu.