Trauma-Informed Libraries

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Mountain Valley Library System Youth Services Regional Meeting

March 16, 2018

Folsom Public Library

Disclaimer

What are we talking about?

- Pair of ACEs: <u>ACEs (Adverse Childhood</u>
 <u>Experiences)</u> & <u>(Adverse Community</u>
 <u>Environments)</u> (<u>5 Minute ACEs Primer</u>)
- Trauma (Trauma-Informed Approaches)
- Resilience (and the many interpretations)

SAMHSA's Trauma-Informed Approach

A program, organization, or system that is trauma-informed:

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

A trauma-informed approach can be implemented in any type of service setting or organization and is distinct from trauma-specific interventions or treatments that are designed specifically to address the consequences of trauma and to facilitate healing.

SAMHSA's 6 Key Principles of a Trauma-Informed Approach

A trauma-informed approach reflects adherence to six 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:

- 1. Safety
- 2. Trustworthiness and Transparency
- 3. Peer support
- 4. Collaboration and mutuality
- 5. Empowerment, voice and choice
- 6. Cultural, Historical, and Gender Issues

According to **SAHMSA**, "A trauma-informed approach can be implemented in any type of service setting or organization and is distinct from trauma-specific interventions or treatments that are designed specifically to address the consequences of trauma and to facilitate healing."



TRAUMA-ORGANIZED

- Reactive
- Reliving/Retelling
- Avoiding/Numbing
- Fragmented
- Us Vs. Them
- Inequity
- Authoritarian Leadership



TRAUMA-INFORMED

- Understanding of the Nature and Impact of Trauma and Recovery
- Shared Language
- Recognizing Socio-Cultural Trauma and Structural Oppression



HEALING ORGANIZATION

- Reflective
- Making Meaning Out of the Past
- Growth and Prevention-Oriented
- Collaborative
- Equity and Accountability
- Relational Leadership

Graphic courtesy of <u>Trauma</u> Transformed

TRAUMA INDUCING

TO

TRAUMA REDUCING



From the self > to the staff > to the staff

Vicarious Trauma

Vicarious trauma (VT) is the process of change that happens because you care about other people who have been hurt, and feel committed or responsible to help them. Over time this process can lead to changes in your psychological, physical, and spiritual well-being. It will also impact your family, your organization, and the people you are working to help.

Vicarious Trauma

Vicarious trauma happens because you feel committed or responsible to help and at times, you are unable to fulfill that commitment. It can lead to very high (and sometimes unrealistic) expectations of yourself and others, and for the results you want to see from your work.

Your sense of commitment and responsibility can eventually contribute to you feeling burdened, overwhelmed, and hopeless in the face of great need and suffering. It can also lead you to extend yourself beyond what is reasonable for your own well-being or the best long-term interests of beneficiaries.

Personal Strategies to deal with Vicarious Trauma

- Improved self-care
- Balance between stressful and nourishing activities
- Exercise
- Non-work interests
- Personal debriefing
- Recognition of symptoms
- Helpers must recognize that theirs is highly specialized work and that their home lives must reflect this.

Personal Strategies to deal with Vicarious Trauma

Good coping strategies are things that help you take care of yourself —especially things that help you escape, rest, and play. Among other things, these might include:

- Escape: Getting away from it all, physically or mentally (books or films, taking a day or a week off, playing video games, talking to friends about things other than work)
- Rest: Having no goal or time-line, or doing things you find relaxing (lying on the grass watching the clouds, sipping a cup of tea, taking a nap, getting a massage);
 and
- Play: Engaging in activities that make you laugh or lighten your spirits (sharing funny stories with a friend, playing with a child, being creative, being physically active).

 Information courtesy of Maggie Litgen, MSW

Compassion Fatigue Toolkit

- What are my warning signs on a scale of 1 to 10, what is a 4 for me, what is a 9?
- Schedule a regular check in, every week how am I doing?
- What things do I have control over?
- What things do I not have control over?
- What stress relief strategies do I enjoy? (taking a bath, sleeping well or going for a massage)
- What stress reduction strategies work for me? Stress reduction means cutting back on things in our lives that are stressful (switching to part time work, changing jobs, reworking your caseload, etc.)
- What stress resiliency strategies can I use? Stress resiliency are relaxation methods that we develop and practice regularly, such as meditation, yoga or breathing exercises.

 Information courtesy of Maggie Litgen, MSW



Photo Credit

From the self > to the staff > to the community

Who is leading the change?

Why does this matter?

Organizational Strategies for Dealing with Vicarious Trauma

- Openly discussing and recognizing VT in the workplace to normalize experience
- Proper debriefing
- Regular breaks
- Mental health days
- Peer support
- Assessing and changing workloads
- Professional development
- Regular check-ins

Grassroots action ideas

- Integrate ACEs or Trauma-Informed discussions into staff training on the DL
- Creating safe, restful physical spaces in the branch
- Tagging out: Creating safety for people to exit an interaction if it triggers their own trauma
- Mindful moments to center meetings or yourself during the day (4x4 exercise!)
- Create safety so that folx can be vulnerable. Be vulnerable.
- Cultural Competence vs Cultural Humility
- <u>Building Beloved Community</u>

From the self > to the staff > to the staff

How YOU can help to build resilience

The most common factor for children who develop resilience is at least one stable & committed relationship with an adult.

- This can be a teacher, coach or other school personnel or LIBRARIAN!
- Nurturing and positive relationship with an adult who sees their strengths
- A relationship as brief as one school year can make a dramatic lasting impact

Who is doing what? Where?

- <u>Trauma Informed Services in the Library: Understanding and Serving our</u>
 <u>Community</u> (Infopeople Webinar archived), <u>Trauma and Library Services</u>
 (Infopeople Weblog)
- Whole Person Librarianship: Fostering Empathy in Challenging Times
 (Webjunction Webinar archived)
- The Community Resiliency Model: Becoming Trauma-Informed and Resiliency-Focused and Informed (Infopeople Webinar archived)
- <u>Understanding and Serving People Experiencing Homelessness: A</u>
 <u>Trauma-Informed Approach to Library Service</u> (PLA Webinar archived)

Who is doing what? Where?

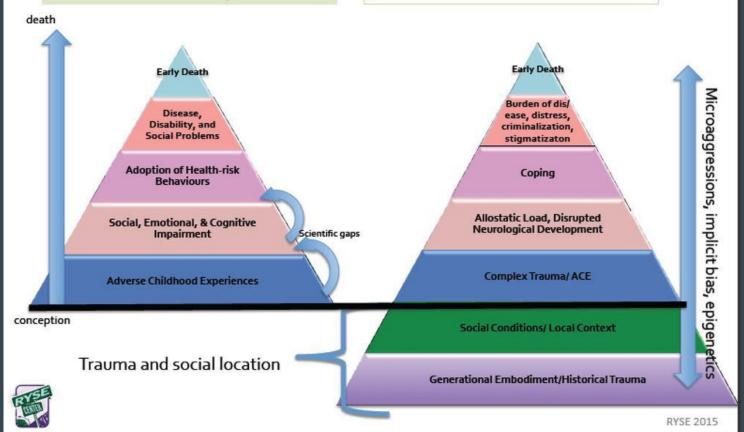
RYSE Center: Richmond, CA (video)



Trauma and Social Location

Adverse Childhood Experiences

Historical Trauma/Embodiment



Interacting Layers of Trauma and Healing

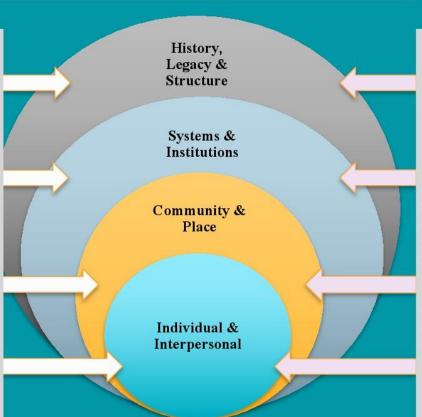
Dehumanization and Distress

Nation Building by Enslavement, Genocide, Colonization & Imperialism, Economic Exploitation, Displacement, Cultural Hegemony, White Supremacy

Systemic Subjugation of POC by Interacting Policies & Systems: War on Drugs, Mass Incarceration, Segregation (de jure and de facto), Anti-Immigrant Policies, Climate Violence, Media Assaults, Displacement & Redlining

Atmospheric Distress that includes Interpersonal, Family, Community Violence & Exposure; Sexual Exploitation, Lack of Safe Passage & Safe Spaces, Underinvestment, Oversurveillance

Embodiment and Expression of Distress through Personal Traumatic Experiences; Bullying, Family Systems Stressors, ACEs, Shame and Blame, Generational Transmission



Liberation and Healing

Collective Liberation by Truth & Reconciliation, Reparations, Redistribution, Open Borders/No Borders, Multi-racial Solidarity, (Re)imagined Social Compact

Lead with Love and Justice by Healing-Centered & Restorative Practices, Listening Campaigns, Collective Care, Adaptive, Responsive, and Proximate, Power-sharing (Nothing about us without us)

Build Beloved Community by Radical Inquiry, Popular Education and Culture Building, Celebration and Affirmation; Healing Spaces, Arts & Expression, Base & Power-Building

Honor Resilience and Fortitude by Listening & Validating, Processing/Integrating Personal Traumatic Experiences, Family Healing, Tailored Supports & Opportunities, Loving Connections & Structure

Finding a place to start...

White Privilege / Recognizing Sociocultural Trauma and Structural Oppression

- RYSE Center's Racing ACEs Memo, Trauma and Healing Series
- World Trust: Transforming White Privilege (TWP) curriculum
- <u>Dr. Ken Hardy: How to Effectively Talk About Race</u> (Courtesy of Trauma Transformed)
- Showing Up for Racial Justice (SURJ)
- Libraries 4 Black Lives

Ways to keep in touch

- Trauma-Informed Libraries Facebook Page
- Mindfulness for Librarians Facebook Page
- On ACEs Connection: <u>Trauma-Informed Libraries Community</u>, <u>Practicing</u>
 <u>Resilience for Self-Care & Healing Community</u>
- Cross-sector Collaboratives: <u>Resilient Sacramento</u>, <u>Placer County ACEs</u>
 <u>Connection</u>
- Email me! <u>adoktor@acesconnection.com</u>

Remember:

We Are the Medicine!