Applying the Parallel Values of Trauma-Informed Practices

Building a trauma-informed organization takes commitment to the framework’s best practices at every level of your program. Embracing parallel values throughout your organization helps ensure that the day-to-day services and trauma-informed approaches offered by your staff consistently mirror the trauma-informed policies and culture of care established by your organization’s leadership, and vice versa.

Strengthen your internal and outreach trauma-informed efforts by striving for organization-wide adherence to the values of trauma-informed practices described below.

Safety

For Organizational Leadership

→ Leaders encourage staff to create wellness plans that protect against vicarious trauma and empathy fatigue.
→ Leaders work to make the physical space a sanctuary for everyone who enters the space.
→ Leaders continually assess their leadership style.
→ Leaders tell staff what they plan to do before they do it.
→ Leaders provide clear trauma-sensitive communication.

For Staff

→ Staff encourage and assist those working on recovery to create wellness plans that protect against crisis and recovery setbacks.
→ Staff create a welcoming and inviting space for those engaged in services to relax and be comfortable.
→ Staff continually monitor their treatment style.
→ Staff provide clear trauma-sensitive communication.

Sources

Roger D. Fallot, Ph.D. and Maxine Harris, Ph.D.: Creating Cultures of Trauma-Informed Care (CCTIC): A Self-Assessment and Planning Protocol

Substance Abuse and Mental Health Services Administration: SAMHSA’s Concept of Trauma and Guidance for a Trauma-Informed Approach

Wisconsin Peer Specialists: Certified Peer Specialists (CPS) in the Workplace
**Trustworthiness and Transparency**

**For Organizational Leadership**
- Leaders commit to the well-being and success of their employees.
- Leaders are respectful, clear, and consistent with expectations and interactions with staff.
- Leaders speak about staff with respect and acceptance.
- Leaders listen without judgment.
- Leaders provide noncritical feedback.

**For Staff**
- Staff are committed to the well-being and success of the people they serve.
- Staff are respectful, clear, and consistent with expectations and interactions with those seeking or engaged in services.
- Staff speak about those involved in services with respect and acceptance.
- Staff listen without judgment.
- Staff provide noncritical feedback.

**Collaboration and Mutuality**

**For Organizational Leadership**
- Leaders provide systematic ways for staff to offer feedback on trauma-informed values.
- A leader’s knowledge is not valued more highly than a staff members’ knowledge.
- Leaders acknowledge staff expertise.
- Leaders allow staff to play an active role in their own development.

**For Staff**
- Staff provide systematic ways for people engaged in services to offer feedback on trauma-informed values.
- Staff acknowledge that people working on their own recovery have specific expertise regarding their life.
- Staff allow those involved in services to play an active role in their treatment.
Peer Support

For Organizational Leadership

→ Leaders understand the importance of peer support for people in recovery and supervise peer support staff effectively.

→ Leaders know the Wisconsin Certified Peer Specialist Core Competencies, Wisconsin Certified Peer Specialist Code of Ethics, and the Wisconsin Certified Peer Specialist Scope of Practice.

→ Leaders support culture change that improves service delivery across the entire organization by embedding peer support services into the treatment setting.

→ Leaders recognize that the inclusion of peer support shifts the focus and nature of treatment services themselves, agency-wide, and across systems. As a result, the administrative contexts in which staff deliver those services (e.g., organizational policies, budgets, and evaluation practices) must align to support recovery-oriented services.

→ Leaders articulate a clear vision of where the agency is headed, address the inevitable barriers to achieving that vision, and institutionalize culture changes so that they endure.

For Staff

Non-Peer Support Staff:

→ Respect and understand the scope and role of peer support providers.

→ Communicate openly any questions or concerns regarding peer support providers.

Peer Support Staff:

→ Cultivate empowering and supportive relationships.

→ Use self-disclosure and their own lived experience as a valuable tool with those engaged in services.

→ Provide information about community and recovery-oriented resources upon request.

→ Assist in supporting their peers, even in crisis.

→ Value self-determination as a guiding ethical principle.

→ Facilitate person-centered goal setting.

→ Communicate effectively with their peers, other team members, and clinicians.

→ Create an environment of respect for their peers and those with lived experience.

→ Seek to understand the roles culture, community, and identity play in their peers' lives.

→ Practice trauma-informed approaches in their peer relationships and work places.

→ Affect positive change in systems.

→ Inspire hope for recovery and wellness.
Empowerment, Voice and Choice

For Organizational Leadership
→ Leaders involve all staff in planning and evaluation.
→ Leaders work with staff to develop career goals and promote opportunities for job development.
→ Leaders ensure staff have access to the resources and training necessary to implement trauma-informed care.
→ Leaders thoughtfully look at staff workloads.
→ Leaders support the time commitment necessary for staff to change long-held habits.
→ Leaders recognize when staff do good work.

For Staff
→ Staff provide referrals, resources, and opportunities for skill-building to promote recovery.
→ Staff work with those seeking recovery to create individualized treatment goals.
→ Staff allow those engaged in services enough time to establish rapport and feel safe so that they can work on their recovery at their own pace.
→ Staff supports the time commitment necessary for those engaged in services to change long-held habits and coping strategies.

Cultural, Historical, and Gender Issues

For Organizational Leadership
→ Leaders model and support behaviors that move past cultural stereotypes and biases based on race, ethnicity, sexual orientation, age, religion, gender identity, geography, and more.
→ Leaders are aware of their own implicit biases and privilege.
→ Leaders ensure access to gender responsive services and leverage the healing value of traditional cultural connections.
→ Leaders incorporate policies, protocols, and processes that are responsive to the racial, ethnic, and cultural needs of individuals served.
→ Leaders recognize and address historical trauma among staff.

For Staff
→ Staff model and support behaviors that move past cultural stereotypes and biases based on race, ethnicity, sexual orientation, age, religion, gender identity, geography, and more.
→ Staff are aware of their own implicit biases and privilege.
→ Staff provide access to gender responsive services and leverage the healing value of traditional cultural connections.
→ Staff provide services that are responsive to the racial, ethnic, and cultural needs of individuals served.
→ Staff recognize and address historical trauma.