

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.



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: <u>SAMHSA's Concept of Trauma</u> 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 traumainformed 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.







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 recoveryoriented 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 traumainformed 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.

