

CITY OF MINNEAPOLIS

Becoming a Trauma Informed Local Public Health Department

Experiences from the Community Health Improvement Partnership (CHIP) of Hennepin County

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An informal poll...

- Trauma or becoming trauma informed
- ACES or (P)ACES
- Diversity-Equity-Inclusion
- Racial equity or
- Health equity

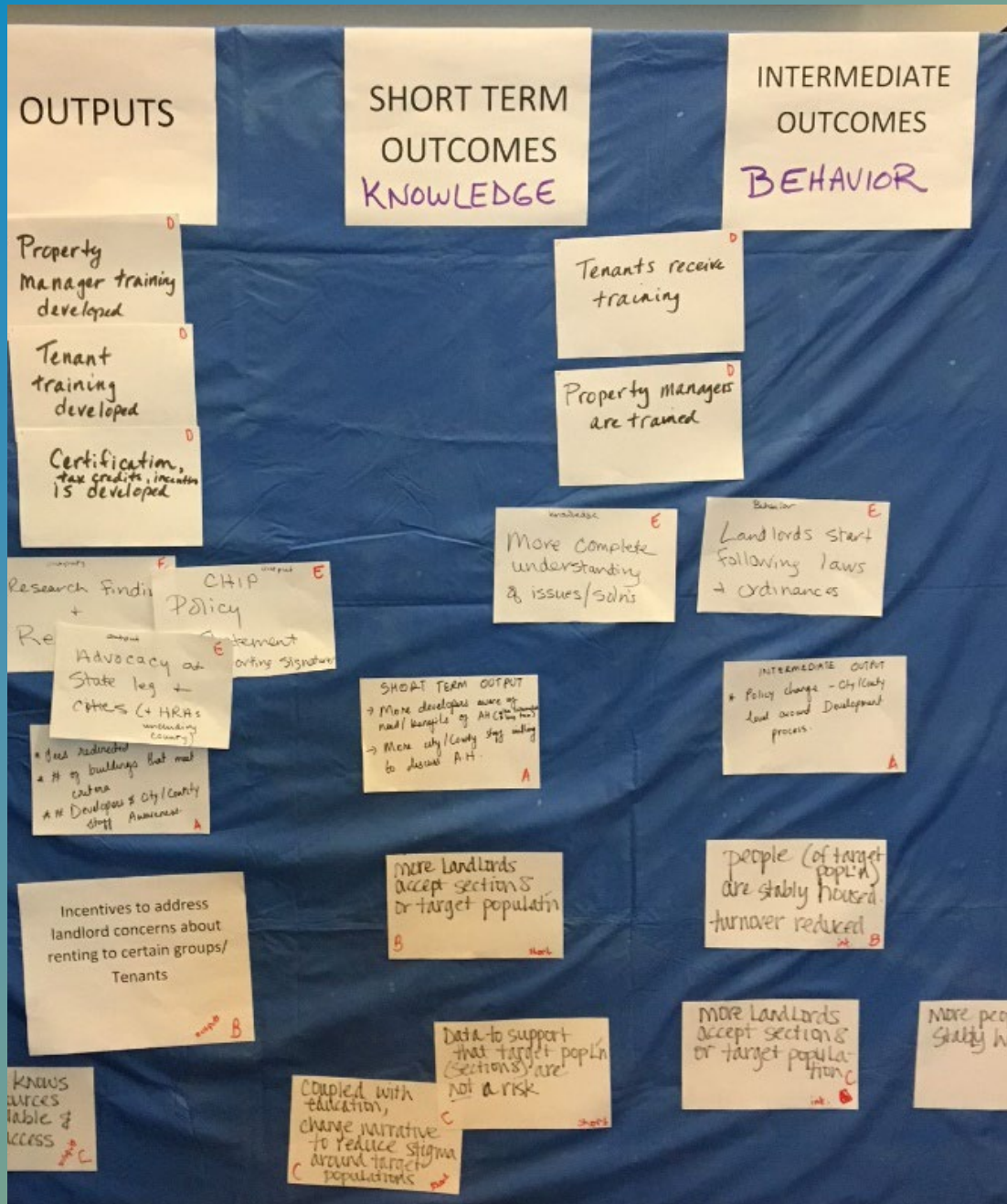


CHIP of Hennepin County

- Founded in 2012 – convened by public health departments in Hennepin County
- A coalition of partners recognized that solutions to complex health issues can be found when partners work as one
- Guided by data, we target community health issues together for greater impact
- Partners come from public, private, and nonprofit sectors
- CHIP currently focuses on two priorities
 - Community Mental Wellbeing
 - Housing Stability

CHIP's Guiding Principles

- We understand that racism is at the core of racial and economic disparities, and the systems that perpetuate these inequities must be dismantled.
- We recognize the harm our systems have caused, and we will shift our organizations' business decisions to prevent harm.
- We will listen as communities define their own goals, then partner with them to achieve shared success.
- We will act collectively upstream, harnessing the power and resources of this partnership to create equitable processes, policies, and collaborations.



Community Mental Wellbeing (CMWB)

Vision statement

Lead equitable policy and systems change that promote physical, social, mental, community wellbeing and honor community wisdom and healing.

Goals

- 1) Become trauma-informed, trauma transformed, healing organizations
- 2) Support spiritual-faith-cultural leaders to respond to trauma in their communities

What does it mean to “become trauma informed?”

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

- *Realizes* the widespread impact of trauma;
- *Recognizes* the signs and symptoms of trauma in people with whom we interact, including community members, families, patients, and employees
- *Responds* by fully integrating knowledge about trauma (and trauma responsiveness) into practices, policies, procedures; and
- *Seeks* to actively resist re-traumatization

Becoming Trauma-informed: Learning

- We had no idea how to get started and focused first on learning from others in our community who were engaging this work
- Began using 7 common steps in our journey to become trauma-informed
 - Build awareness and start the conversation
 - Provide education and training on trauma and its impact on all of us
 - Identify champions – who is invested in moving deeper into change?
 - Do an organizational self-assessment
 - Create a team/or teams to guide the work
 - Mentor-train-educate new employees
 - Measure steps taken & progress made, and change policies & practices
- A key takeaway here: **these steps are not sequential!** Start where you can, where there is energy and will. It doesn't matter where your organization begins ... **just begin** (*it's that critical*)



Becoming Trauma-informed: Actions

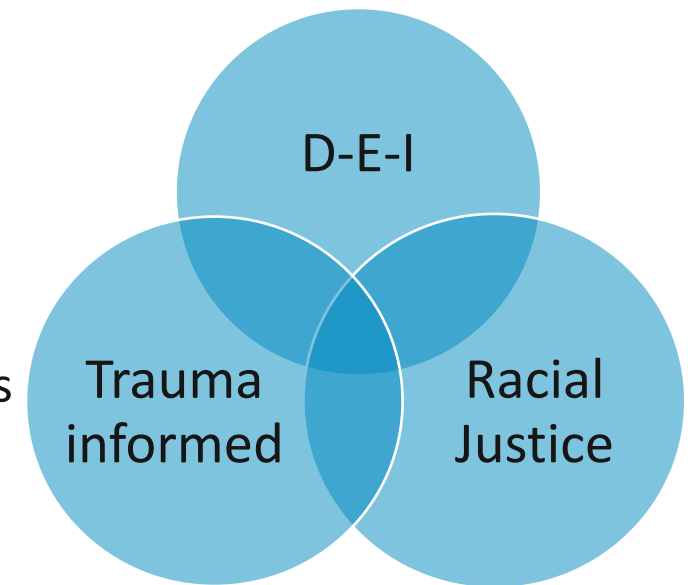
- Developed a trauma-informed survey – got a baseline across all CHIP organizations, now measuring change over time (3 years to date)
- Received a Cross-Sector Innovation grant from Robert Wood Johnson and the Public Health Accreditation Board
 - Funded community grants at a critical time (during lockdown / COVID)
 - Funded four community-based organizations for yearlong projects
- Created a pilot cohort to work together on the journey toward becoming trauma-informed/trauma transformed
 - Meet quarterly to discuss progress made, challenges, and to share resources
 - Pilot cohort shares its learnings with the action team and executive committee

Becoming trauma informed - key learnings

- Public Health emergency and COVID seriously impacted progress
- George Floyd's death and the civil unrest rightfully diverted energy and action to critical community needs
 - As a result of these stressors, white-bodied people experienced an inkling of the trauma that our black-brown people experience every day of their lives
- During this time and throughout COVID response, it was critical to attend to CHIP partners mental wellbeing
- Declarations of Racism as a Public Health Emergency / Crisis
- Organizations began in earnest working on anti-racism efforts, DEI, Racial Equity
 - Made us ask: *How do these intersect with becoming trauma informed?*

Venn Diagram – intersection of Becoming Trauma informed + DEI + Racial Justice

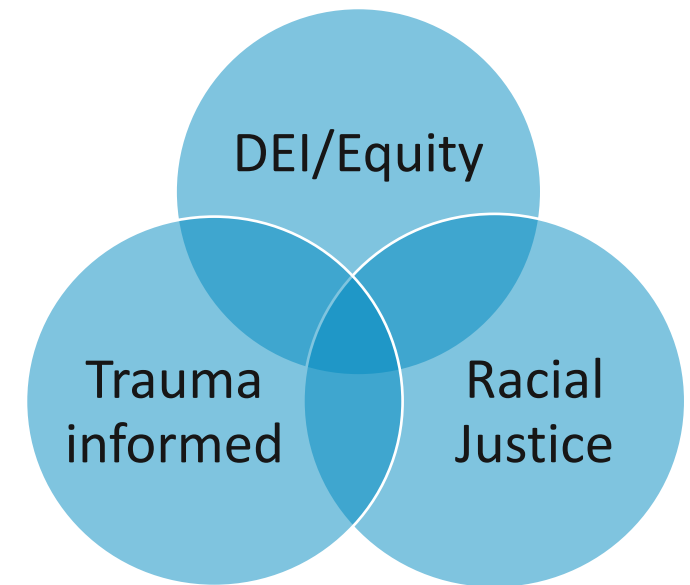
- **First and foremost, Racism IS trauma**
- **Move from an “either/or” mentality to one that recognizes interconnectedness of these models to:**
 - Improve the experience of those we serve
 - Influence organizational culture
 - Require organizational change
 - Help us understand our own trauma and support our coworkers
- **Community expects us to address all three *no matter what name we use to describe the work***
- **Improving environmental and social conditions will impact all three**



Venn Diagram – intersection of Becoming Trauma informed + DEI + Racial Justice

Khadijah Cooper, Annex Teen Clinic, CHIP grantee in 2021 said this:

- **Trauma informed (TI) care** is the base of the house. The TI approach is critical to feeling validated and believed.
- **Equity** – is about the barriers that we face and work with – or work around – and taking steps to break down those barriers.
- **Racial Equity** says communities of color/culture must sit at the table so that their voices are authentically represented.
- **DEI** is a step up and incorporates the community voice into working with the community. It is another way to have many voices engaged, supporting community in leading the change.



CITY OF MINNEAPOLIS

On Becoming a Trauma-informed (TI) Organization

Minneapolis Health Department

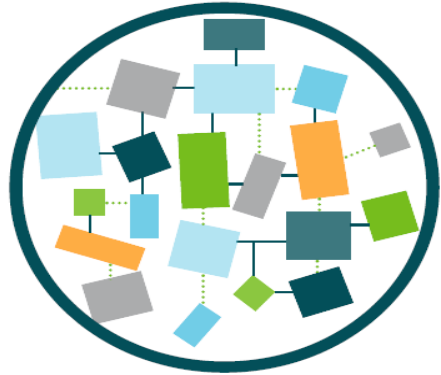
Patty Bowler

Margaret Schuster

The Journey Begins

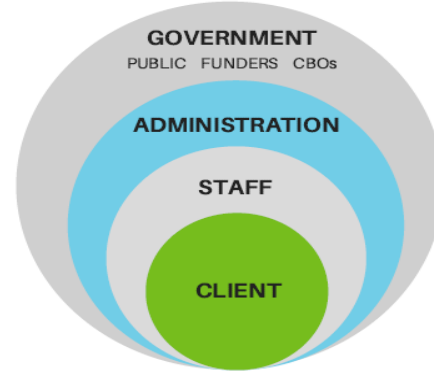
- Many communities face historical and racialized trauma, and trauma related to violence, poverty and other social conditions of health
- To promote resiliency and healing, an organization needs to be trauma informed
- Working on equity and becoming trauma informed go hand in glove
- Both involve Internal and External work
 - Employee secondary trauma
 - Organizational policies, practices, procedures can inadvertently hurt those we are trying to help and engage with





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



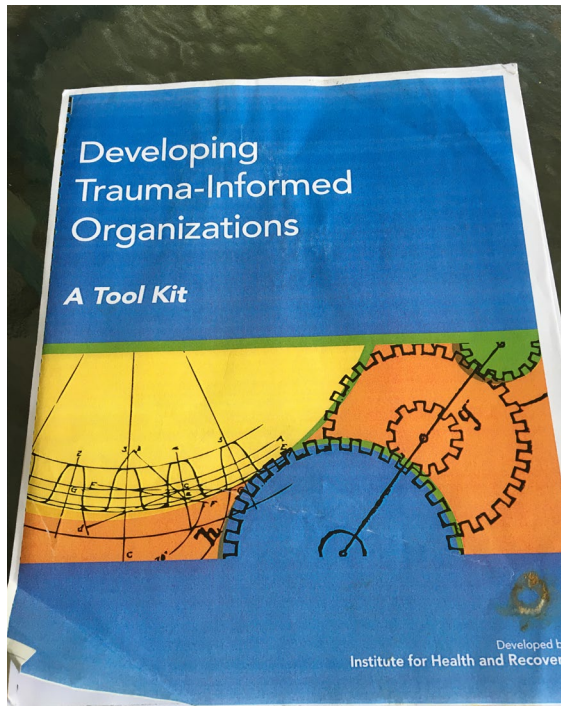
HEALING ORGANIZATION

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

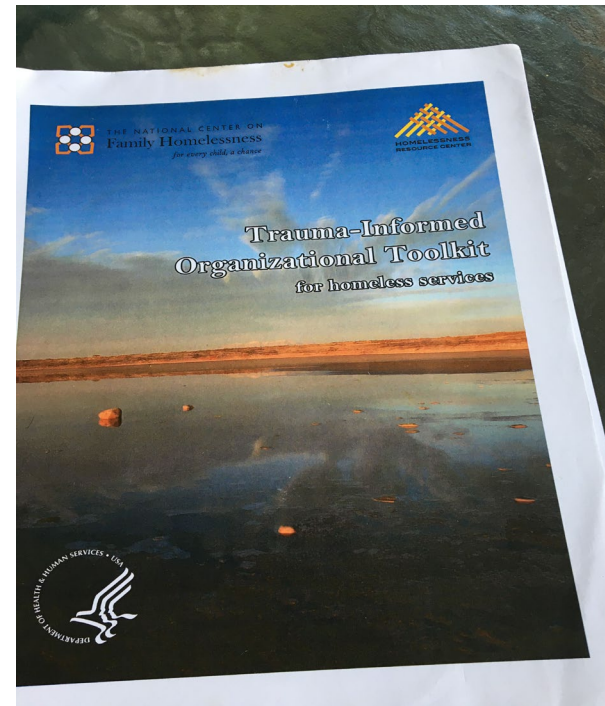


Trauma informed toolkits and assessments

Developing Trauma-informed Organizations; a Tool Kit



Trauma-Informed Organizational Toolkit for Homeless Services



March 2020: COVID Response

- Much of the TI work ground to a halt
- Accomplishments:
 - Using the two toolkit assessments, a customized assessment was developed for MHD
 - Met with Chicago, Seattle-King County and NYC to learn about their TI journey
 - Continued to participate in the CHIP action teams and on the Executive Committee
 - Continued to build on conversations happening in the Health Department



2022 Progress

1. Offered three trauma 101 trainings in February
 - Focused on MHD staff, invited CHIP partners
 - Goal to provide foundational information to all staff – some already knowledgeable; some new to this information
2. Conducted post training survey; reviewed survey findings at an all-staff meeting
3. Hired a Health Equity Manager (CDC grant)
4. Tested the trauma assessment and sent trauma assessment to staff
5. Results of assessment analyzed and discussed
6. Funded 4 TI projects through SHIP
7. 3-4 staff participating in U of MN Trauma Effective Leadership class

On the Horizon...

1. Share results of baseline assessment with all staff
2. Help partners through SHIP
3. Recruit a smaller leadership team to shepherd process
4. Identify a consultant(s) to work with team to analyze results of assessment and develop workplan
5. Implement plan
 - More training
 - Change policies and procedures
 - Evaluate along the way



What is going well? Lessons Learned

- Sustained passion for the work; internal champions
- Kept working on it, talking about it, even with intensity of COVID response
- Measure progress



Lessons Learned

- This work hasn't been in any one person's job description – people have pitched in on top of their regular job duties—need dedicated person
- Need a diverse team for planning including staff with lived experience – and a method for reaching multi-cultural/lingual staff for feedback
- Participation in training and assessment has been required
- Talking about becoming a trauma-informed organization is, in itself, traumatizing or retraumatizing to some colleagues
 - Amir Locke was killed right before our first training
- It's ok to make mistakes ... and government (especially) has to be okay that this is not a perfect learning-healing process

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Hennepin County

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Local Public Health Association conference

November 14, 2022



Background and rationale for becoming a TI organization

- CHIP was awarded a grant in 2020 that included creating a trauma informed pilot cohort
- Some county clinical and family health programs were already using trauma informed methods
- COVID response caused a lot of trauma among staff across the department
- Director wanted entire department to become trauma informed



Our Trauma-Informed Team

Who we are:

A team of staff, supervisors and leaders from across the department.

Our Charge & Goal:

To help make Hennepin County Public Health (HCPH) an emotionally safe place to work, to partner and contract with, and to receive services.

How we work:

Use work groups to get work done and monthly meetings for reporting out to those who can attend.

Why this is important:

Because decisions, budgets, and actions impact our colleagues, clients, and communities.

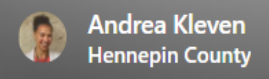
Key steps and activities to date

- Created a team charter and ground rules in early 2021
- Invited other committees to share their work with TI team to help embed TI strategies into department-wide work
 - Example: Workforce development
- Provided workshops to staff and partners in 2021 & 2022
- Completed a Trauma Informed Logic Model and launched SharePoint site in spring 2022
- Hosted interdepartmental coordination meeting in May 2022
- Successfully applied for MDH infrastructure funds for TI work in 2022
- Just hired new full time Trauma Informed Org Change Project Manager

Send to

TRAUMA: THE GREEK WORD FOR "WOUND"

Trauma Informed



Who we are

The Trauma Informed Team began work in December of 2020. We are one of four pilot organizations in the Community Health Improvement Partnership (CHIP) working to become trauma-informed. Our goal is to help make Hennepin County Public Health (HCPH) an emotionally safe place to work, to partner and contract with, and to receive services. We believe that becoming a trauma-informed organization will improve physical health and mental well-being outcomes among county staff, clients, and residents. [Click to learn more about our committee and the work that we do.](#)

What is trauma?

Trauma is a person's emotional response to a distressing experience. The single or prolonged stress-filled event(s) shatter(s) an individual's sense of security making the individual feel helpless in a dangerous world. Psychological trauma can leave you struggling with upsetting emotions, memories, and anxiety that won't go away.

The concept of trauma is best understood as an event so overwhelming that it results in an emotional wound of separation from and violation of the self (van der Kolk, 2014).

Core beliefs regarding self, others, and the world are impacted, leaving the person to navigate a world that is now insufficient for a new lived

[Highlighted trauma-related term](#)

PTSD - Post-Traumatic Stress Disorder

is the psychological reaction to emotional trauma in response to experiencing short-term, long-term, and single-event trauma

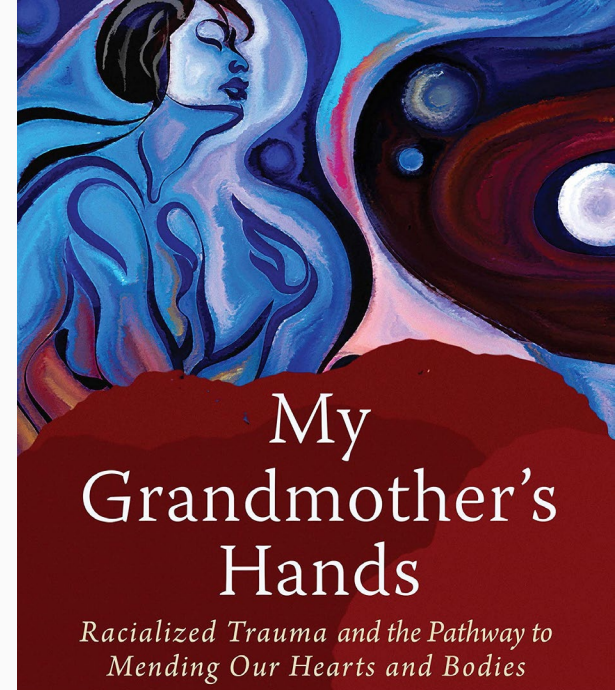
TI Event Calendar See all

+ Add event

| | |
|-----------|---|
| NOV 17 | MN Peacebuilding Leadership S.T.A.R. training Thu, Nov 17, 8:00 AM |
|-----------|---|

What's gone well

- People are passionate about this & we have a large team (21 ppl)
- Great people jump in to do the work that's needed to keep moving forward
- There is more discussion about trauma across the department
- There is recognition that staff deal with trauma in day-to-day work
- Senior leadership is supportive and participate on TI team



Challenges

- Team members struggle to find time for this work on top of regular duties
- Had no funding until late April 2022 we received the MDH grant
- Department is roughly 450 people and different people are at different places in terms of understanding and importance of becoming trauma informed
- Approval to hire and post for our TI project manager had to weave through many channels, interviews and other pieces all took longer than expected

Measuring progress

Outputs

- # of people who participate on smaller teams
- # of people who attend training and Trauma Talks

Process outcomes

- Post training/workshop surveys

Long term outcomes desired

- Increased adoption of trauma-informed thinking in development of new/revision of policies and practices
- Increased use of trauma-informed practices across HCPH programs, services and initiatives

MDH infrastructure grant

Time period is April 2022 through March 2024

Where work is focused:

1. Internal organizational change within public health
2. Collaboration with other county departments also becoming TI
3. Collaboration with CHIP partners and other external agencies, organizations and communities

Why? Shared understanding and language catalyzes change

MDH scope

- Training – reflective supervision, TI “suite” of trainings
- Policy, Systems and Environmental (PSE) Change – programs and plans, shared learning across departments and organizations
- Accountability – transparency of what we’re doing and why, pre and post training surveys, champions, New Employee Orientation
- Communication – SharePoint site interactivity, TI materials, community project materials
- Community Collaboration – collaborate w/ CHIP, CCH, MLPHA; RFP to community orgs-learn and integrate, check ins at TI team, community gathering

Next steps

- STAR training for county staff and external organizations Nov 2022-Jan 2023
- TI team retreat in December 2022 to do team building (we've never met in person), develop vision and principles, affirm or revise current workplan
- Reflective Supervision training and cohorts in 2023 for all 77 managers and supervisors
- Overarching implementation to be guided by organizations such as Trauma Transformed in 2023-2024

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Now Let's hear from you!

Find someone that you don't know to "share pair"

Using the Seven Common Steps handout, please:

- Identify which step, if any, you are at
 - or is your organization focusing on any of the following: anti-racism, ACES, becoming trauma informed, DEI (diversity, equity and inclusion), race or health equity?
- What step did you, or would you, start with?
- If you're working on becoming TI, what is one success or change (if any)?
- What commonalities do you see with your partner's or the presenters' journeys?