

Helping RHY Transition from a "Culture of Survival" into a Culture of Thriving

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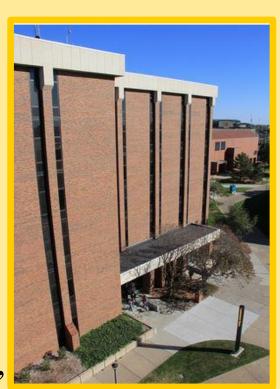
Risa Rehmert

- Director of Program Development, CCHT
 - Direct Services
 - T&TA Provider
- Over 23 years in the field serving RHY and survivors of RV, SA, HT, etc.
- 20 years of managing Street Outreach (Drop In-Center),
 Basic Center, Safe Place
- On call for 20 years ©



WSU CCHT:

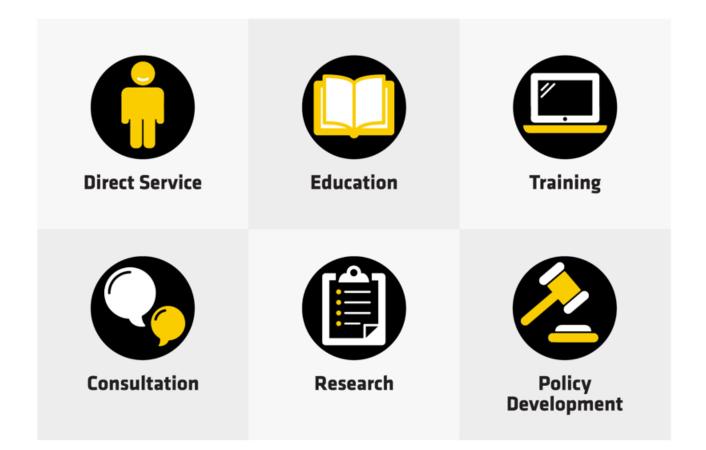
- Created due to personal, direct-practice, academic experiences.
- Survivor-Founded, Led, and Operated.
- As a not-for-profit,
 dedicated to shifting paradigms,
 fighting injustice, and
 promoting holistic prosperity.



WSU Building

Empowering OUR Nation's Capacity

Empowering OUR nation's capacity to provide effective prevention, intervention and prosperity promoting responses through the provision of **6 METHODS**:



The Lotus ModelTM creates culture

- Guiding Principles
- Foundational Principles
- Beliefs
- Values
- Practices

LotusTM Operating Principles

- Victim Centered; Survivor Led
 - Focused on Positive Development
 - Strengths Based
 - Trauma Informed
 - Developmentally Grounded
 - Gender Conscious and Responsive
 - Culturally Competent
 - Stages of Change
 - Motivational Interviewing
 - Self-Schemata Targeted with Narrative Practices
 - Harm Reduction
 - TF-CB; Exposure Practices

Objectives

- 1. Define a "Culture of Survival" and how it reveals itself holistically (Bio/Psycho/Social/Spiritual).
- 2. Explore the consequences of a sustained stress response on a youth's holistic health.
- 3. Discover 7 trauma informed practice principles that programs can implement to help youth transition to a "Culture of Thriving".
- 4. Use CCHT's trauma informed practice guide to integrate TI practices into RHY programming.

What is the "Culture of Survival"?

Issues Our Youth Face

- -Family conflict
- -Physical abuse
- -Sexual abuse
- -Verbal abuse
- -Emotional abuse
- -Family mental illness
- -Parental alcoholism
- -Parental drug addiction
- -School Issues
- -Kicked out of house

- -Domestic violence
- -Neglect
- -Crime by family member
- -Family member in prison
- -Persistent family stress/chaos
- -Death of a loved one
- -Abandon at least 24 hours
- -Poverty
- -Frequent moves (instability)
- -Family changes (divorce, etc)

- -Learn to handle stress by running
- -Exposure to D&A culture
- -Become involved in illegal activity
- -Form relationships with high risk
- people and perpetrators
- -Victimized and assaulted
- -Truancy and school failure
- -Desensitization to dangerous/risky
- -Lice, bed bugs, scabies
- -Living in chaos, survival mode
- -Lack of sleep, food, basic needs

- -Disconnection
- -Loneliness/isolation
- -Relationship violence
- -Sexual exploitation/HT
- -STI/STD's
- -D&A abuse/addiction
- -Pregnancy
- -Illness/health
- -Increased trauma by seeing/exper.
- -Suicidal ideation/exposure to peers
- -Continual loss of belongings

Issues Youth Face on the Street

What percentage of the people you serve have been affected by adverse experiences and trauma?

Biological

Triggered stress response (autonomic nervous system)

Increased adrenaline

Increased heart rate & blood pressure

Release of stress hormones triggering fight/flight/freeze response

Prolonged stress response can change brain architecture

Overly alert, jittery, excitable

Difficulty reading faces and social cues

Appetite change, digestive issues, and/or stomach aches

Sleep disturbances (insomnia, night terrors, etc.)

Persistent fatigue or weariness

Increased muscle tension

Psychological

Decreased ability to think, learn, concentrate Shift in ability to regulate emotions, affect, impulses Hypervigilant/on the lookout for potential dangers (jumpiness, nervousness) Shift in self-perception, self-image Self-harm, self-hate Dissociation (freezing) when feeling unsafe Emotional numbing, detachment Anxiety, fearfulness Depression, despair Anger, irritability, resentment and/or rage Unsettling memories, flashbacks

Social

Avoiding activities/places they may be triggered Social isolation, withdrawal, decreased activity Difficulty connecting with others and/or maintaining relationships

Low social supports

Tolerating abusive behavior in exchange for a semblance of protection

Dating/domestic violence, coercive relationships

Use of drugs and alcohol (including smoking)

Early initiation of sexual activity

Risky sexual behavior/multiple sexual partners

Life domain difficulties (family, financial, vocational)

Spiritual

Loss of identity, security, trust, sense of peace Long held faith/beliefs are challenged or lost Questioning value system Questioning the presence of God/higher power Questioning or has lost their "sense of purpose" Feeling life has no meaning Hopelessness Feeling the world is unsafe, unpredictable, out of control (Feelings of powerlessness and vulnerability) Increased cynicism, disillusionment Feeling "dead" or "dark" inside Negative, self-disdaining narrative/self-talk

The Body's Stress Response and the consequences of a sustained stress response

Definitions

Adverse Experiences- the term used to describe all types of abuse, neglect, and other potentially traumatic experiences

Stress Response - The body's response to stress/threat that overwhelms our resources; an emergency mechanism the body mobilizes to deal with dangerous situations:

- Increased adrenaline
- Increased heart rate and blood pressure
- Release of stress hormones triggering fight/flight/freeze response

Definitions 2

Trauma- event(s) experienced that are physically or emotionally harmful or life threatening and has lasting adverse effects on bio/psych/soc/spiritual health.

Trauma Informed-

- Realizes the prevalence of trauma
- Recognizes how trauma affects programs, organizations, or systems, including its own workforce
- Responds by putting knowledge into practice
- Resists re-traumatization

Impact on Mind and Body: Threat Continuum

Sense of Time	Extended Future	Days Hours	Hours Minutes	Minutes Seconds	Loss of Sense of Time
Primary Brain Areas	Neocortex Subcortex	Subcortex Limbic	Limbic Cerebellum	Cerebellum Brainstem	Brainstem Autonomic
Thought Process	Abstract	Concrete	Emotional	Reactive	Responsive
Mental State	CALM	ALERT	ALARM	FEAR	TERROR
IQ	100-110 Average	90-100 Average	80-90 Low Average	70-80 Borderline Intellectual Disability	60-70 Mild Intellectual Disability

Benefit of Universal Precautions

- 1. Adverse Experiences
- 2. Stress Response
- 3. Trauma

How should this impact how we respond to young people and provide services?

Lotus Anti-Trafficking ModelTM Operating Practice Principles:

Trauma Informed Responses

On a scale from 1-10

How prepared do you feel you are to respond to those who are experiencing the consequences of trauma?

What do you do in your work to address/respond to trauma?

7 Trauma Informed Response Practice Principles

Trauma-Informed Approach:

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

	You can't help someone who doesn't have contact with you
Engagement	Communicates "value" to the person you are serving Invites one to accept services

Safety, Calm and Predictability Helps calm a triggered stress response
Predictability sets the stage for safety
Safety is needed for bio/psycho/
social/spiritual healing to occur
When those we serve feel safe, it
transfers to helpers
Safety and predictability prevent
burnout and turnover

Transformation al Relationship/ Trust Hurting happens in relationships AND healing happens in healthy relationships

Connection is a powerful protective factor

Survivors often come from a place of mistrust

It increases a survivor's capacity to trust and build connections

Survivor Leadership

(Survivor Centered, Informed, & Led) Helpers are facilitators, not healers

Helps regain control over their life (empowerment)

Helps to create new scripts for navigating life

Allows person to define self outside of past traumas

Strengths & Resilience Focus

Reminds individuals they are more than a trauma victim/survivor

Trauma responses without a strengths & resilience focus are deficit-based

Resilience is needed to bounce back from adversity and resulting trauma

Decreases suspicion and hostility in those we serve

Gender, Cultural & Historical Humility

Individual experience, culture and circumstances influence how a person experiences trauma

The experiencing of "isms" may compound traumatic events (e.g. racism, sexism, classism, etc.)

Choice/ Autonomy

Choice has often been taken away from those who have experienced complex trauma

Choice fosters and restores respect, efficacy, agency, dignity

Trauma Informed Worksheet

Work Assignment

1. Personal Development

2. Program Development