Family Focused Substance Use Disorder Treatment and Recovery

Trauma | Culture | Gender Considerations in Care

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Why this topic?

- **QUALITY** | Family Centered Care is critical to successful outcomes in SUD Tx and Recovery because the individuals we serve carry family-trauma-culture-gender specific experiences with them throughout their life course.

- **PURPOSE & EFFICACY** | People do not become ill in isolation (or outside of their historical context) nor do they find wellness in isolation (or outside of their historical context)

- **DESIGN** | To understand how this is achieved and why it must be
1. If SUD affects the entire family, it requires a comprehensive response.

2. Trauma, Culture and Gender priorities can be integrated within a family centered framework.

3. How providers might offer integrated strategies to address these dynamics with excellence and respect.

4. Practical steps provider organizations and clinicians can take to become more family friendly, competent, and aware.

5. How providers can build bridges between child welfare, health care, other community resources.

6. Remember to reflect and embed the wisdom you learn on family focused client strategies into the staff environment.
A key factor to remember: regardless of the amount of education, credentials, and/or capacity your organization has to contribute toward client care...you will struggle with success if you do not also create a safe, healthy, thriving, and empowering service environment for your team members.

The parallel process that occurs between our staff environment and client environment is our first opportunity to teach others that we understand these principles and are prepared to do the hard work of investing in the entire picture.
Unpacking the dynamics of human connection

- How we are designed
- What connections mean to us
- The biology of connection

https://developingchild.harvard.edu/guide/a-guide-to-toxic-stress/
The emergent adaptive dynamic of human connection | Implications for engagement
Why do we focus on the environment?
Pathways to healing...

- Providers of SUD treatment and recovery services co-create successful pathways to thriving when they reflect client centered (not client considered) care back to the client *in the moment when the client receives a service or support experience*.

- If the provider cannot teach the client that they understand what responsive care looks like in practice and in the environment, then the client will be taught not to trust the experience.

- If the client does not trust the experience, they will pursue what they do trust. If key connections, issues, and strengths are neglected, they should seek other options.
How do we create an atmosphere where biases, beliefs, and behaviors do not interfere with the treatment and supports individuals receive when they are in our care?
How does the provider begin to understand whole family care while redesigning the treatment environment?

What strategies might we explore in order to address this correctly and with respect? Let’s begin by exploring considerations re: trauma, culture, and gender.
Where do we begin?
Cultural Responsiveness
...many parts
Historical Structure around Human Development

- Are some parts of Human Development linear?
- Are some concurrent?
- Why does this matter?

Systems, Culture, Bias example...Maslow
Levels of Need

- **Self-actualization**
  - achieving one's full potential
- **Esteem**
  - respect, self confidence, status
- **Love and belonging**
  - family, friendship, community
- **Safety needs**
  - personal security, health, employment
- **Physiological needs**
  - air, food, water, shelter, sleep
Human Development is not only linear.

We are adaptive, complex, organic, concurrent, and emergent beings.

If we focus only on the linear processes, we structurally protect and restrict the top of the pyramid for a few.
EXPLORE (Dx challenge)
ASSESS (where you are)
PLAN (what can happen)
TEST – TRY (Do it!)
ASSESS (How did that go?)
ADJUST (Make adjustments)
Start Over…
EXPLORER

- What is currently happening that is aligned with this information? Keep it!
- What is currently happening that could be improved? Improve it!
- What is currently happening that could easily be eliminated? Stop it!
- What needs to be developed that would bring everything together? Develop it!
We know what people need

We have collaborative technical assistance hubs nationwide and worldwide

We have systems in place where revenue can flow

We have an engaged compassionate response by multiple service systems and professionals

Do we have the capacity to overcome some of our barriers?

What strengthens our MOTIVATION to change? Invest here!
**Family-Centered Care**

- Evaluate your provider environment
- Evaluate your staff competencies

**Fatherhood | Build Programs for Fathers with Fathers**

- Implement Family-Centered Programming in other networks (FQHCs, Child Welfare, Juvenile Justice)

**Family-Centered Partnerships (Child Welfare, Co-location, Family activities, Offer TA to other systems)**

**Parenting in recovery (What are the systems in place to wrap around the family? The Mother? The parenting figure?)**

**PLAN**

Look for existing systems, partners
PLAN: Understand what your environment teaches the people you serve (client)

- The Art of Language (Lose the word “housing” and replace with “home”)
- Are we welcoming? Faux Admissions Faux Walk-Throughs
- When do we ask for client feedback? Solicit feedback from the client multiple times throughout the care experience (not just at exit or transition)
- Culturally responsive policies for the staff and service environment
- Pursue and ensure integrated care partners in existing networks/systems – FQHCs, school based care professionals, peer recovery agencies, etc.
**PLAN:** Understand what your environment teaches the staff you serve (staff)

<table>
<thead>
<tr>
<th>Staff Engagement</th>
<th>Faux Staff Work-Flow Assessments</th>
<th>What is going well? Who is involved? Who has access to whom?</th>
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- **When do we ask for staff feedback?**
  - Multiple times throughout the daily care experience (not just at exit or transition)

- **Culturally responsive policies for the staff and service environment**
Client Feedback and Observations

Ensure you have client feedback processes in place in order to institutionalize equity into the fabric of the organization.

Ask each client to give you one way you might improve your outreach and engagement skills.

Learn who refers to your organization. Have you assessed this? Who is missing? Why do some referents not choose you as provider of choice?

Make a commitment to trauma responsive care throughout the organization – what does this look like? Who informs this? Who is accountable?

Determine whether or not it is advantageous to partner with the criminal justice department, child protection, Indian Child Welfare, Dept of Education?
Strategies that address Culture, Trauma, and Gender with a Family and Community Focus

Culture | Systems | Language

- Understanding socio-cultural aspects of substance use in non-white communities and/or tribal affiliated groups
- Many populations have been subjected to violence as a primary oppressor, which robs the community of the resources needed to solve drug problems.

UNDERSTAND the WORDS WE USE: Violence does not only present in the form of crime or domestic disputes but also in the context of racial discrimination, lack of access to food and clothing, homelessness, overcrowded living conditions, lack of health insurance, sexual harassment, gender discrimination, a lack of system protection from DV, and restricted social welfare policy (historical trauma). Violence is also viewed as a coping mechanism. Use caution when you use the term “Violence”
Strategies that address Culture, Trauma, and Gender with a Family and Community Focus

Gender
Consider health and wellness patterns specific to women... Menstrual cycles, reproductive health, lactation issues, cellular trauma responses, interrupted emotional-physical-spiritual development, and/or physical responses to violence?


Consider providing in home services? Are we flexible about when we visit?

Offer legal requirement education (car seat safety, child health, immunization requirements, safe sleep, child supervision, school enrollment, etc., in a context of societal necessity, not good or bad)

Now men? Gender shifting?
Cultural Awareness | Organizationally & Clinically

Organizational cultural competence is a dynamic, ongoing process that begins with awareness and commitment and evolves into culturally responsive organizational policies and procedures. This is a concurrent priority with building Counselor competencies.

A resolute commitment to relevant cultural awareness must include resources to help support ongoing fidelity to updated policies, procedures, and staff development strategies in order for them to be sustainable over time.

Strategies that address Culture, Trauma, and Gender with a Family and Community Focus
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**Culture of Safety, Connection, Family, & Community**
- Sharing circles | Talking pieces
- Weaving, tapestry making, quilting
- Song writing, poetry, expressive arts
- Mindfulness practices and meditation
- Self-Care strategies & ceremony
- Connections to the earth's creatures – animals, birds, fish
- Rites of passage understanding
- Naming ceremonies & parenting culture
- Trauma culture and art of language
- Yoga, drumming, prayer, smudging, sweat lodges
- Nature walks, nature retreats
- Gardening, cultivating, pottery making
- 4 seasons, 4 aspects of self, 4 directions, 4 medicines
Secure funding so that the client might identify a cultural reminder for herself to keep close in the treatment experience.

In a residential setting take clients out to ethnic experiences that might be a source of comfort and/or be a learning experience.

It is important to note that just because someone has the ethnicity of African American, Quran, Hmong, or American Indian does not mean they have had a traditional experience being immersed in this culture. They may want to explore some of this while in the safety of the treatment experience.

Provide opportunities for clients to engage in cultural specific groups, for example, where they might create something with their hands followed by telling stories about what was created.
Trauma Responsive Strategies

The culture of trauma – Trauma has a culture of its own. The individual has experienced an adaptive process in brain development and engagement is different than it might have been.

This interruption may have caused more skills to be built for defense than interaction and learning. As a result, many of the cultural traditions the client has experienced may be colored in some way by the trauma.

Avoid making assumptions about the cultural environment the client might prefer before talking with the client and gauging her response.

Always co-create the Service Plan (Treatment Plan) with the client sitting next to you… working side by side, not across a desk. This co-creation is not only trauma informed but will assist the client in stating those approaches where they are most safe and most at ease.
As stated before...take your time...just keep the pressure “on”
If in doubt, prioritize respect and humility every time you encounter someone else’s worldview, culture, ethnicity, and bias.
Reach out. Many organizations are in this with you.
Our goal is saving and enhancing lives. We cannot afford to let our lack of understanding or our bias stand in the way of someone else’s opportunity to live their life.
ADJUST: How providers prepare for a redesign from individual focus to family focus?

- Take your time...just keep the compression
- This is not a linear process.
- Avoid shaming your current state
- Embrace continuous learning and response
- Make this a priority in every action plan
- Staff appropriately
  - Embed theory & leadership vs. one staff being the cultural liaison
  - Staff training – embed in your culture
  - Board of Directors’ training multiple times per year
  - Partnerships
  - Personnel and operational policy reviews per year

- Not only seek peace...but be a steward of excellence
Thank you!

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