



Building a Trauma-Informed Organization

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October 20, 2015

The Struggle to Create Resilient Caregiving Organizations

- sub-title of *Holding Fast*, William Kahn (2005)

Or

Creating Organizational Quality
and Congruence
Amidst Pain and Complexity

Warren Helfrich made a presentation last year to the Federation of Community Social Services of BC

The Other 10%: How Focusing on Administration Can Result in Outsized Client Outcomes

“Up to half of the variance (difference) in client outcomes for human service programs can be explained by organizational variables.”

Or, as the late great Yogi Berra might have said: “It’s 90% half administration.”

Achieving Congruence in a Mission-driven, Results-oriented, Improvement-directed, Relationship-based, Child-centered, Family-focussed, Culturally-respectful, Ecologically-appropriate, **Trauma-informed**, TRC-responsive, Value-for-money, Virtue ethics and Evidence-based Participatory Child-Serving System

Reminds me of an old *G&M* cartoon of Prime Minister Chrétien and a Cabinet Minister

Box 1 - “We’re going to eliminate the deficit.” (“Right!”)

Box 2 - “We’re going to slash unemployment.” (“Right!”)

Box 3 - “We’re going to overcome poverty.” (“Right!”)

Box 4 - “Okay, you’re in charge of implementation.”
(Stunned silence)

**The link between policies,
implementation and resources -**

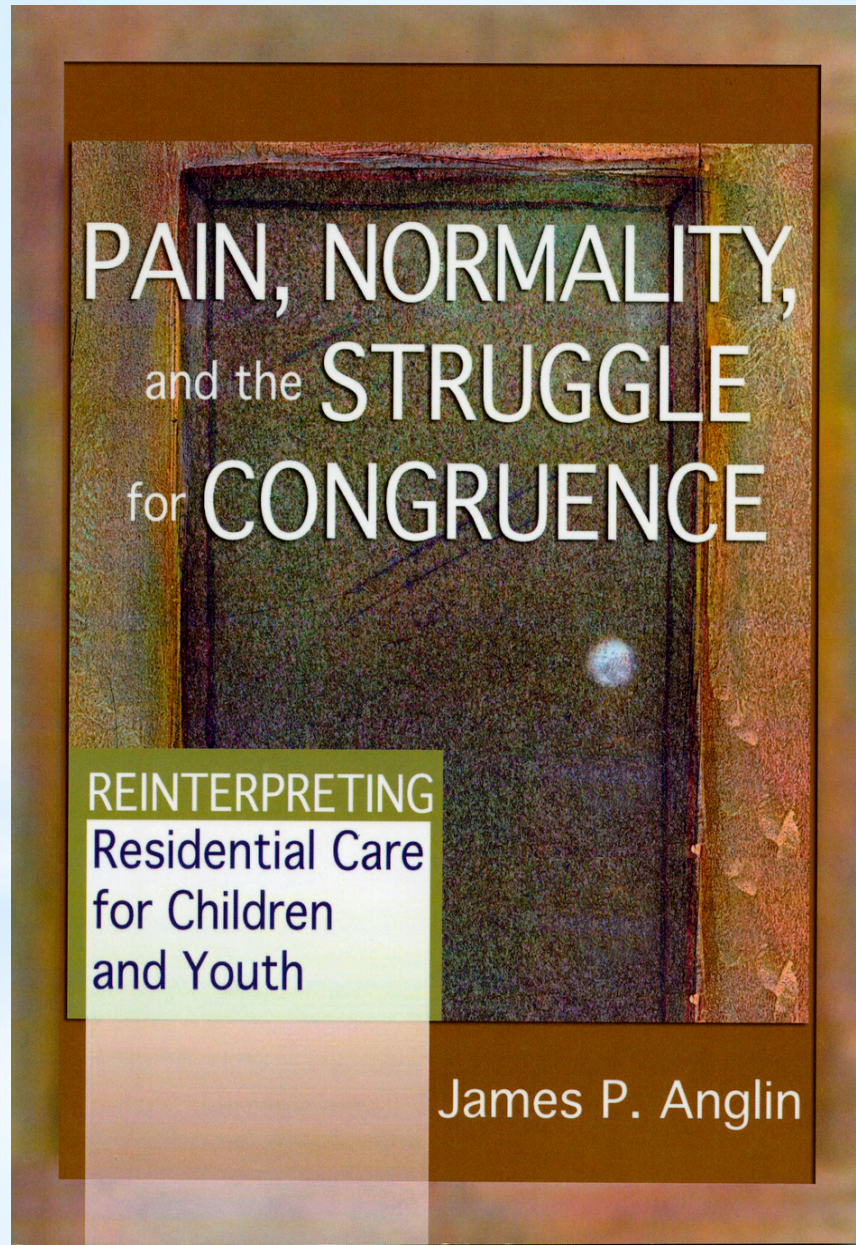
**No policies can be better than
their implementation, and no
implementation can be better
than resources permit.**

I will draw upon research findings from my own research:

- **a BC Study on residential care (published in 2002) supported by MCFD and the Federation**
- **an evaluation of the Cornell University CARE Program whole-organization model implementation (2008-ongoing)**

And also a number of other research sources.

A theory of effective residential care



- ***Congruence*** (in service of the child's best interests)
 - the need for core values and principles to be evident in action *within* each level and *across* all levels of an organization(extra-agency, management, supervision, line staff, clients)
- ***The flow of congruence***
 - from the top of the organization to the lower levels
- ***The struggle for congruence***
 - congruence is never fully achieved (perhaps 85%-90%+)

- *Pain, and pain-based behaviour*
- Children and youth in the child welfare system are suffering from multiple hurts and losses, often at a deep and profound level, and yet it is often kept quite hidden until it erupts.
- As I was re-discovering, or uncovering, psycho-emotional **pain** lies at the heart of residential care organizations and child welfare services (1997-2000),
- at about the same time, others (e.g. Sandra Bloom, Bruce Perry) were (re-)discovering childhood **trauma** (1994 -present)

Trauma refers to serious adverse experiences which tend to overwhelm individuals both cognitively (understanding) and affectively (emotionally), resulting in significant impairment of functioning, sometimes for a short period of time (in the case of a one-off event) and often for the longer term (as in the case of serious or repeated maltreatment).

Pain is what results from the traumatic experiences.

It has psycho-emotional as well as physical dimensions, such as anger and aggression (“acting-out”), depression and the impulse to self-harm.

In my own research, **every** child in residential care was suffering from deep and profound psycho-emotional pain.

If our clients are suffering such pain, then we as social service workers are experiencing what could be termed **a culture of pain**.

It is interesting to consider the evolution of our understandings in the child-related sector.

1950s saw the advent of “the battered child syndrome”, then the 1960s recognised “child abuse.”

1960/70s saw the advent of “incest” and “the seductive child”, then the 1980s recognized “sexual abuse of children”

1980s saw the advent of PTSD (in adults), then the 1990s recognized “childhood trauma.”

What is the emerging “syndrome” now?

Perhaps “screen addiction”, which may be leading to “virtual relationality”?

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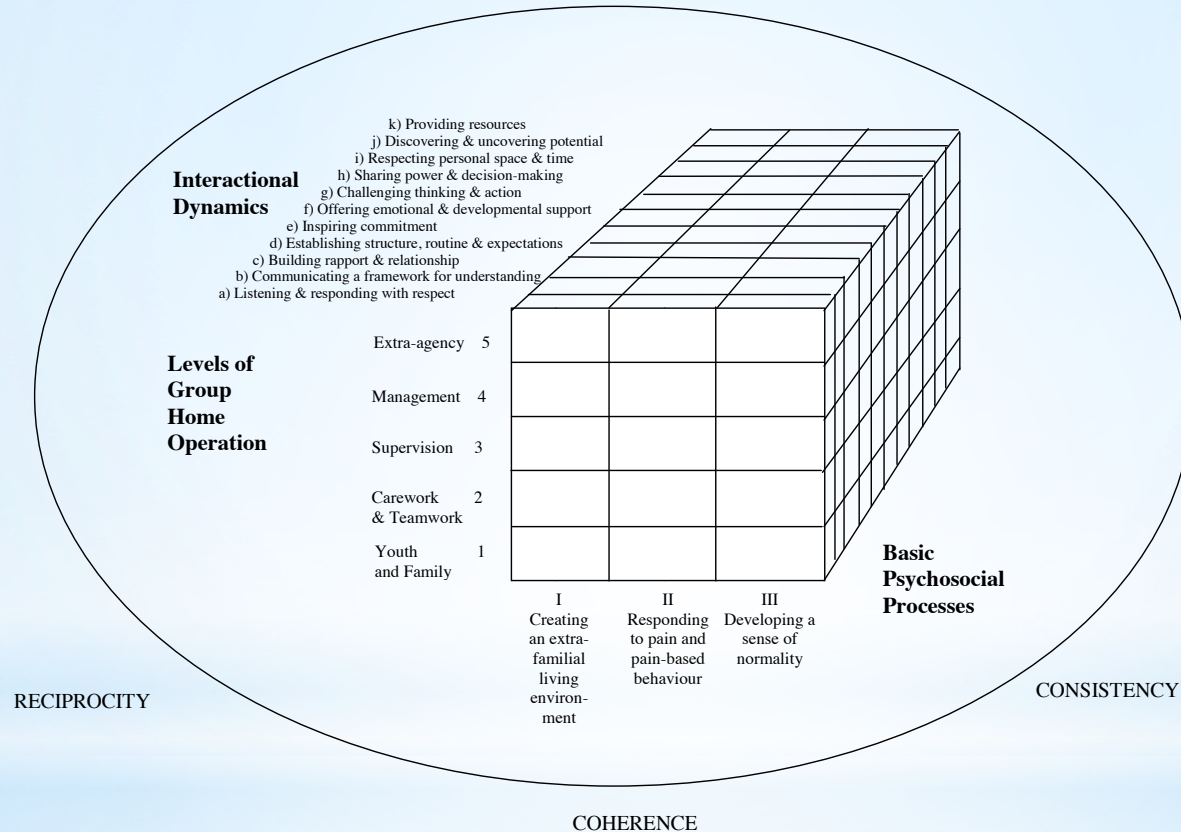
(approx. 43 quintillion)

But what is the maximum number of changes that need to be made to solve the Rubik's cube from any position?

20

Scotsman Breandan Vallance,
18, is the current world
Rubik's Cube champion with
an average solving time of an
astonishing **10.74 seconds**.

Framework Matrix for Understanding Group Home Life and Work



Core Theme: CONGRUENCE IN SERVICE OF THE CHILDREN'S BEST INTERESTS

"The Magical Number Seven, Plus or Minus Two: Some Limits on Our Capacity for Processing Information"

This is one of the most highly cited papers in psychology (according to the definitive source - Wikipedia.)

It was published in 1956 by the cognitive psychologist George A. Miller of Princeton University's Department of Psychology in *Psychological Review*.

It is often interpreted to argue that the number of objects an average human can hold in **working memory** is 7 ± 2 .

This is frequently referred to as **Miller's Law**.

Candidates for the “Big Seven”

Relationship-based

Developmentally-focused

Family-involved

Competence-centered

Trauma-informed

Ecologically-oriented

Culturally-responsive

In reviewing the findings of my BC study, and 80 years of CYC practice wisdom, the Cornell University team who developed the CARE program model came to the conclusion that in order to support agency workers,

- the true **complexity** of residential care and child welfare would need to be understood and addressed.

- Expecting the training of front-line practitioners alone to achieve organizational congruence is unrealistic, and given the evidence for the **flow of congruence** from the leadership team, this would not likely be an effective organizational development strategy nor would it be sustainable over time.
- A whole-organization approach is necessary, involving the training of every member of the organization, from CEO or President to cooks and clerks.

A paradox identified by Ainsworth and Hansen (2012) is the apparent inevitability of “**doing harm while doing good.**” As they note,

“Child protection authorities appear to be reluctant to acknowledge that removing a child from parental care causes trauma for the child and parents. While it may be in the long-term interests of the child to be removed, the fact is that at the point of removal the child is traumatized and this should not be ignored.” (p.149)

“Leadership’s role in any child welfare agency (as well as the leadership of any human service organization) is to ensure positive climate and culture qualities throughout the multiple levels of the organization that are congruent with the child’s best interests.”

M. Nunno, (2006) Child Abuse and Neglect, 30, p.851

And as Warren noted in his presentation to the Federation (FCSSBC), the evidence indicates that workers in well-functioning organizations need to work with a high degree of **independence and autonomy** in order to work effectively to create positive outcomes.

- so, how can inexperienced staff, sometimes with limited relevant training, be expected to work in this way amidst the sea of **pain and complexity** that is the daily reality of child welfare work?

The answer brings us back to “**culture eats strategy for breakfast**”. Culture, it seems, devours strategy and almost everything else as well.

Looking back at my own 2002 research and more recent research on implementation of organizational change (2012, 2014), it is evident that **expert and skilled leaders** (especially supervisors) can shape an inexperienced and largely untrained staff into an effective team of care-workers in about a year or so.

It is also evident that a highly skilled and experienced team, with a lack of proper support and understanding attention from management, **can disintegrate - in a matter of months.**

The culture that needs to be created in human services organizations has been termed a “**holding organization**”, the term being derived from the work of therapist Donald Winnicott in the UK who talked about the family in these terms, expanding on the notion of a child being held in the arms of its mother when anxious or fearful.

Characteristics of such a culture include:

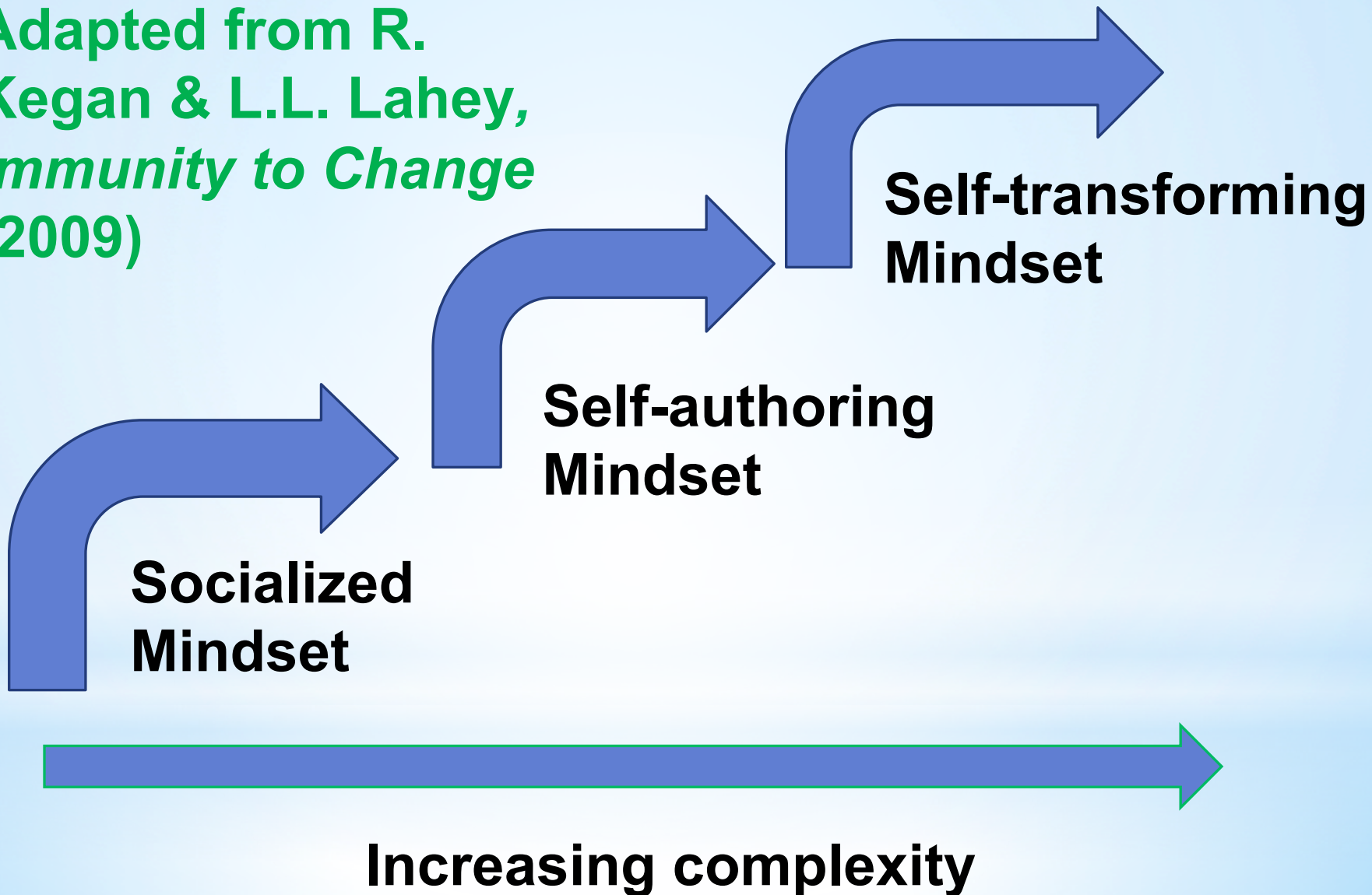
- low conflict, high support;
- cooperation and communication;
- role clarity with flexibility;
- emotional safety and learning from mistakes;
- personalization and a sense of being valued

(Holding Fast, William Kahn, 2005)

For a worker to move from a relatively rigid, rule-based and formulaic approach to a flexible, responsive and individualized orientation usually involves a process of **adult mindset development**.

The research of Harvard-based **Robert Kegan**, developed over a period of 35+ years, provides a useful theoretical basis for understanding this process, and one that explains the organizational dynamics in my studies of service agencies extremely well.

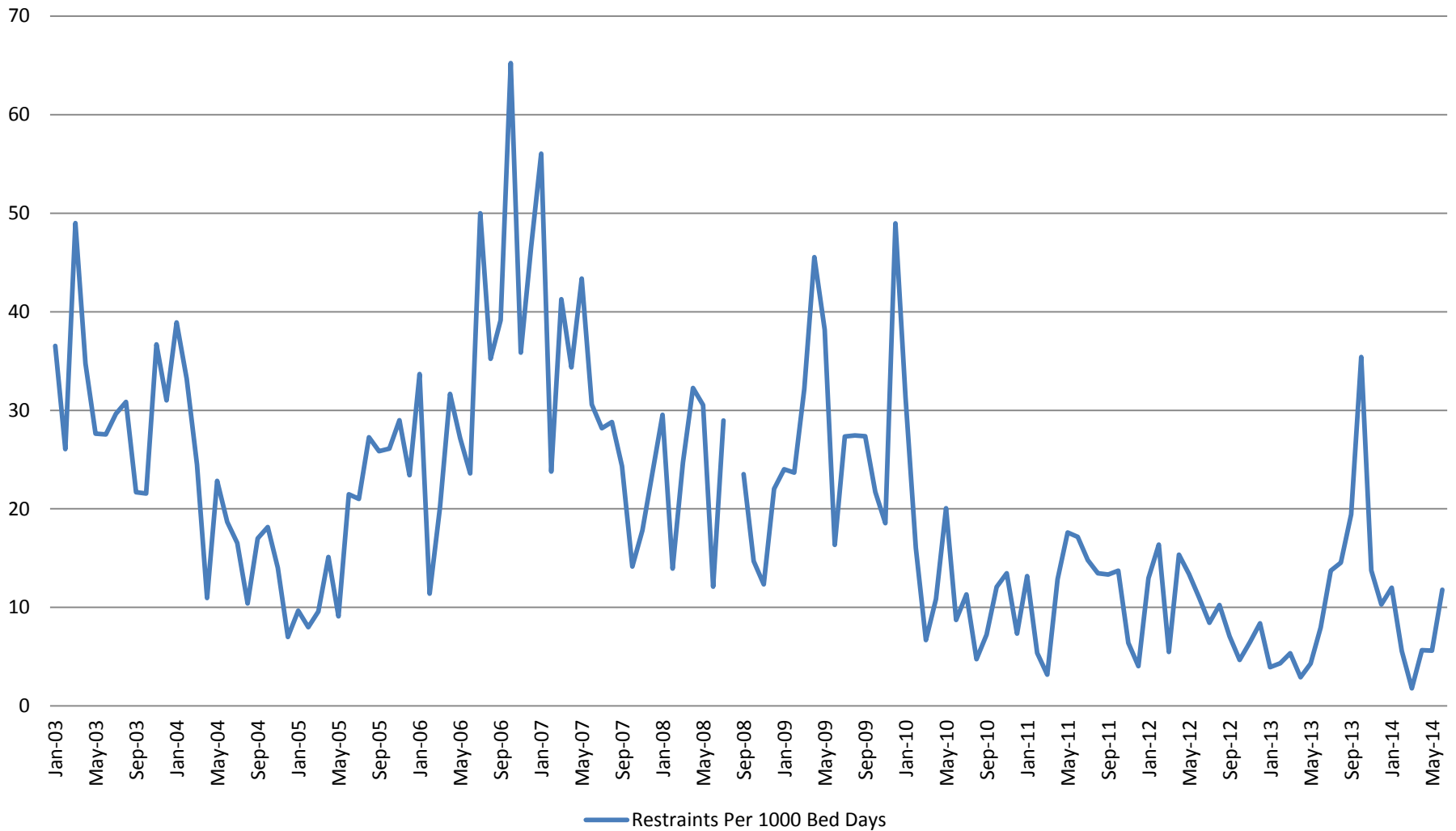
Adapted from R.
Kegan & L.L. Lahey,
Immunity to Change
(2009)



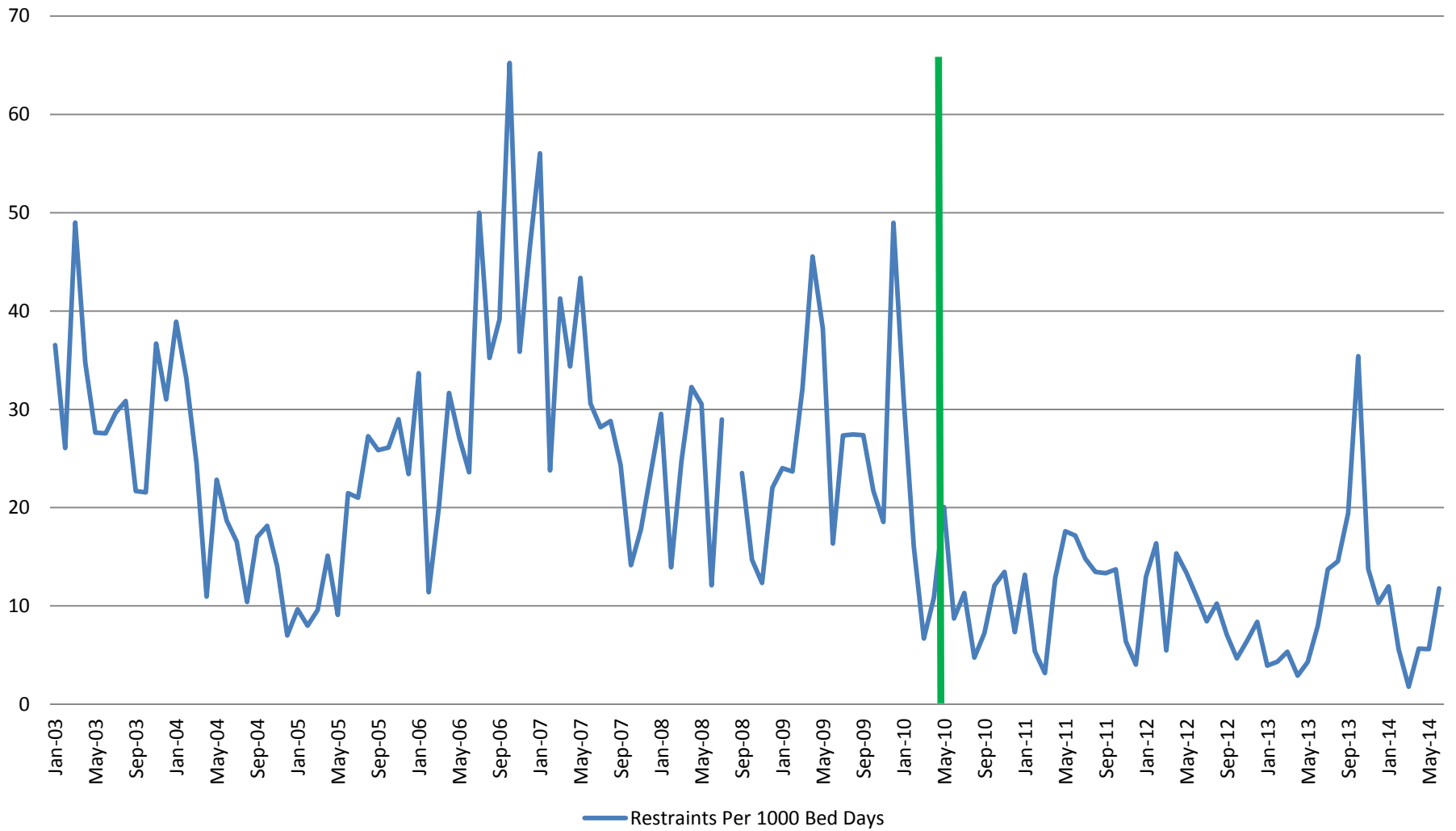
But does all this culture-building work and mindset development actually produce better outcomes for clients?

One source of evidence is the Therapeutic Residential Care (TRC) evaluation literature, from Ireland, Australia and the USA. While it is still early days, and most of the evaluations to date lack the rigour of randomized control trials, the initial results are **positive and promising**.

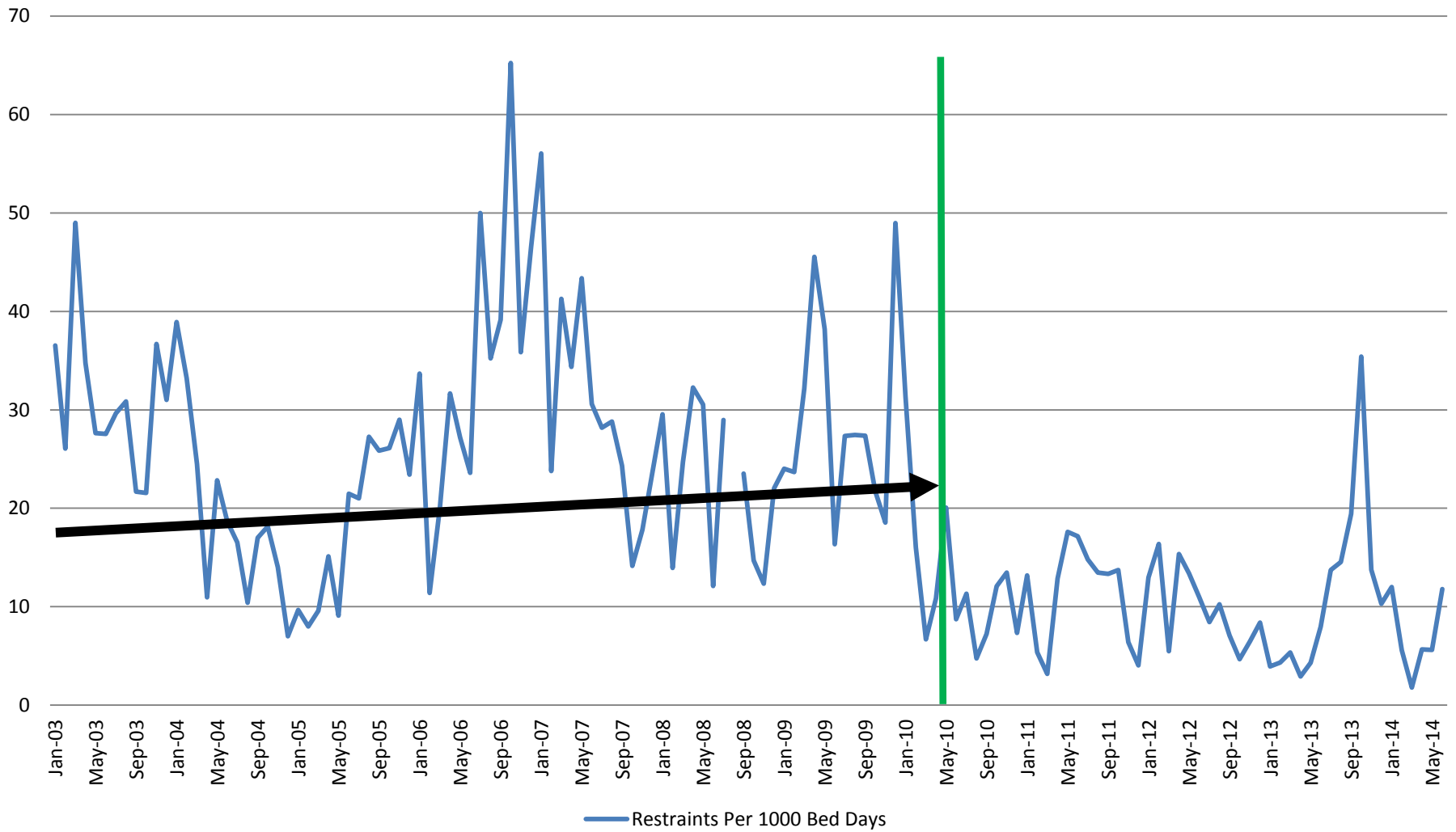
Residential Restraints Over 11 Years



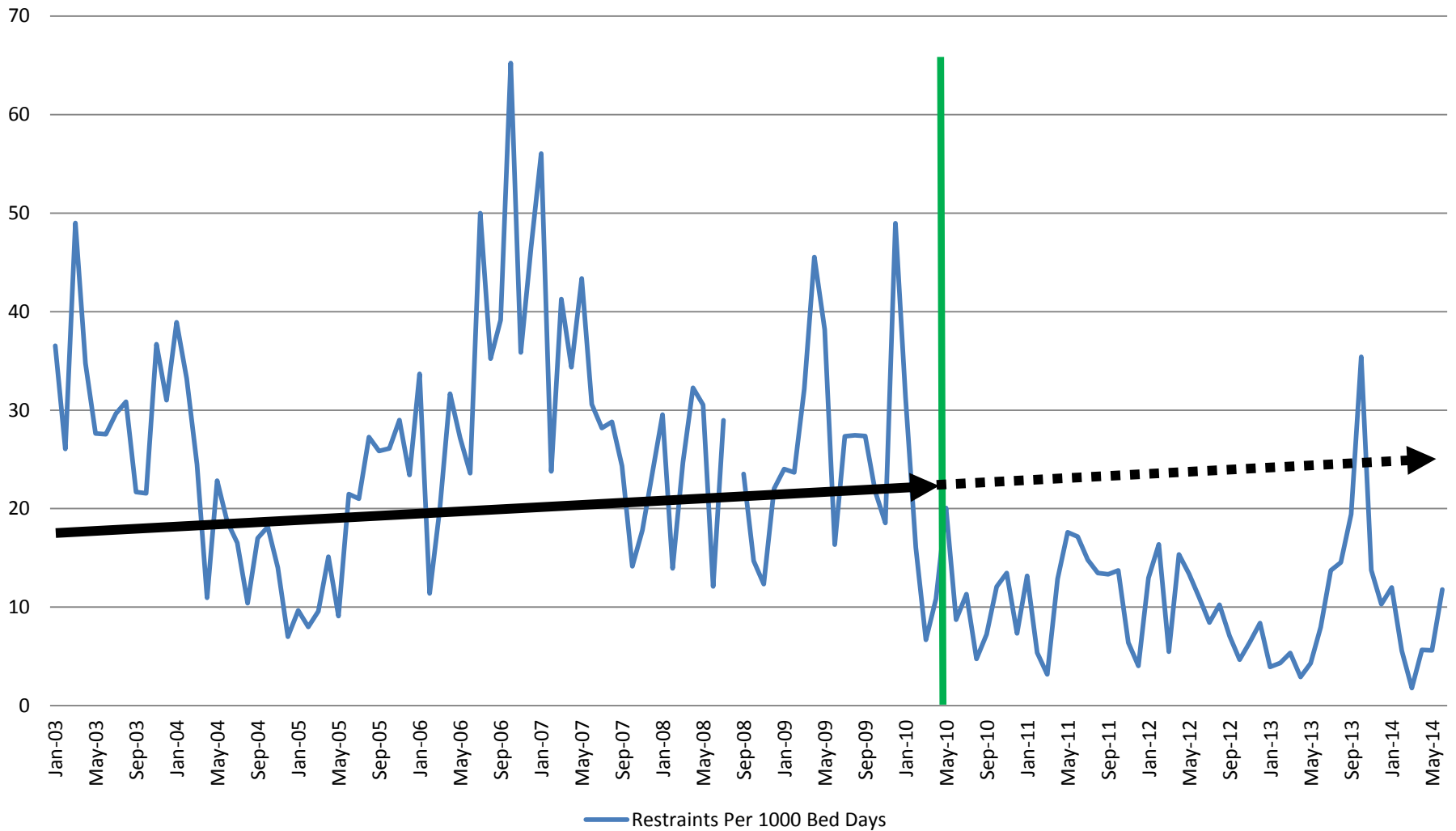
Residential Restraints Over 11 Years



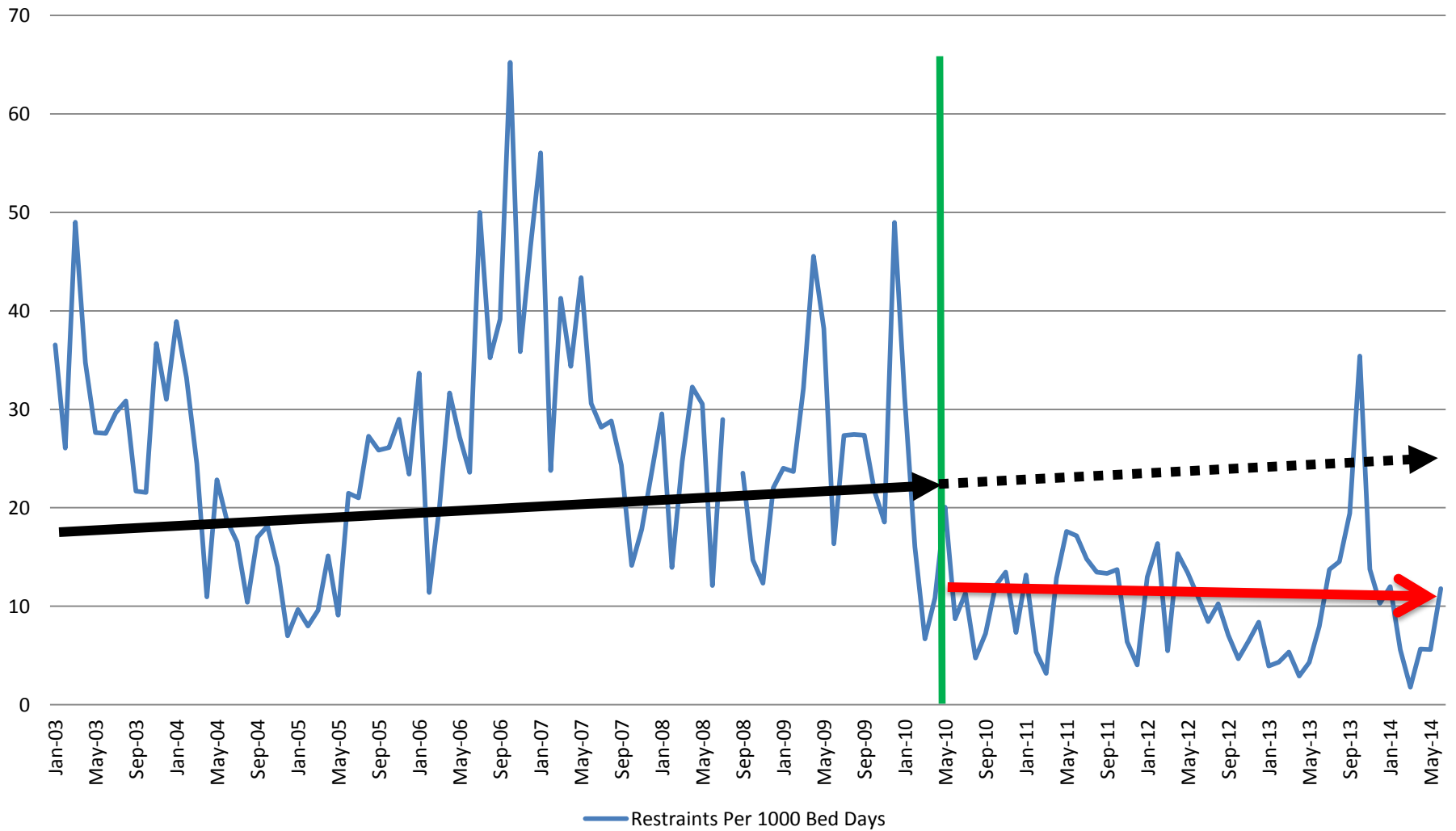
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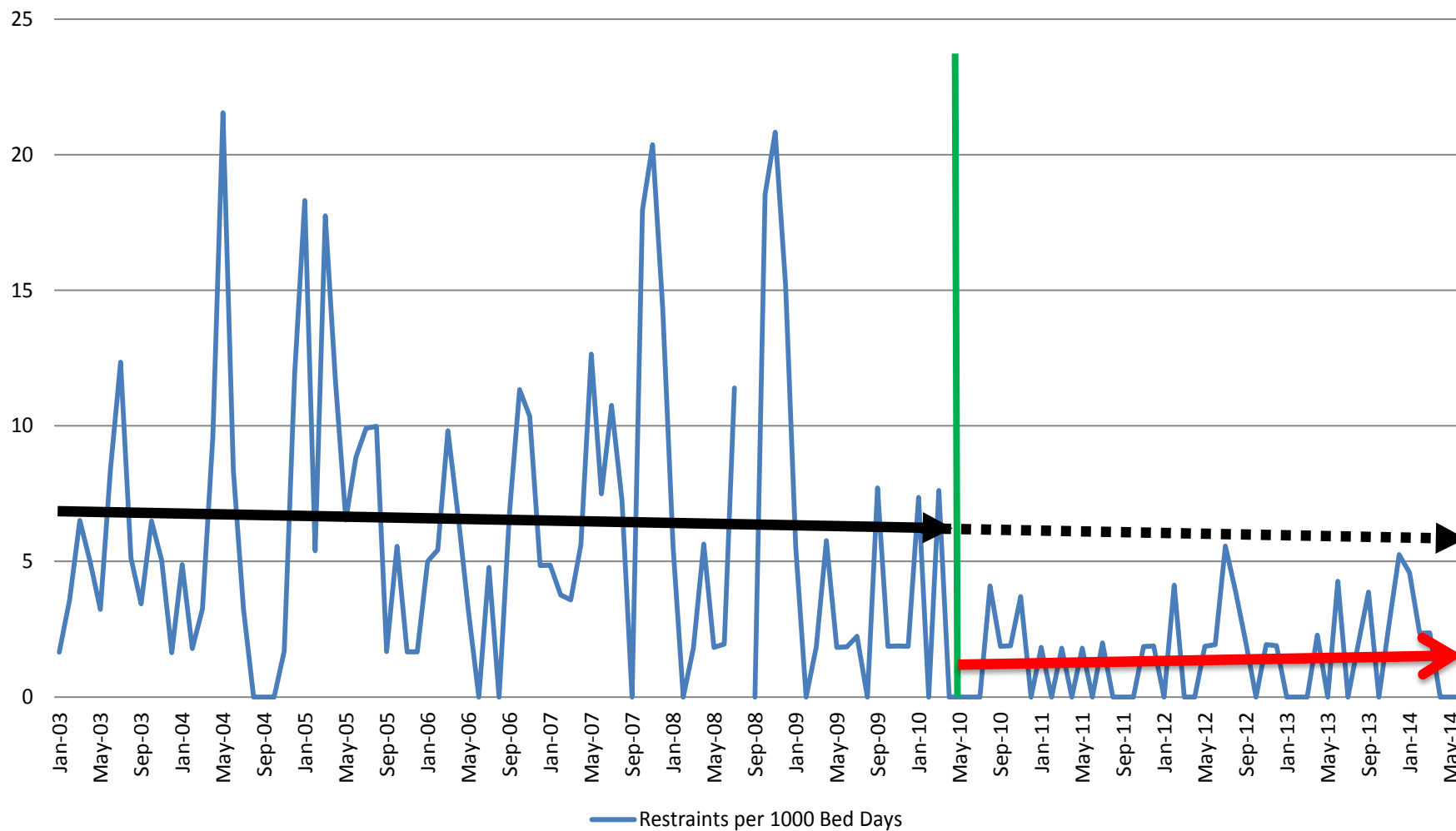
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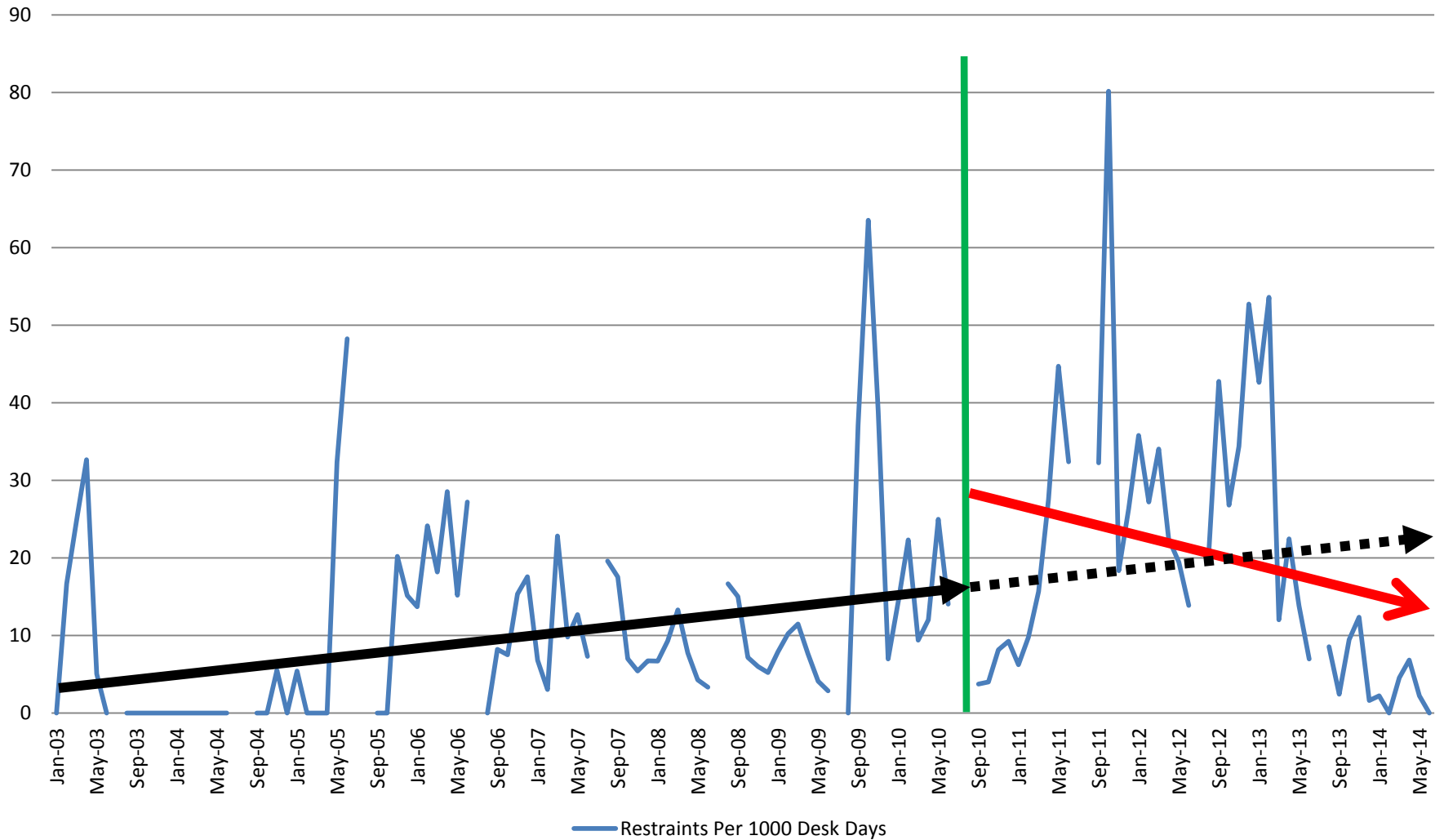
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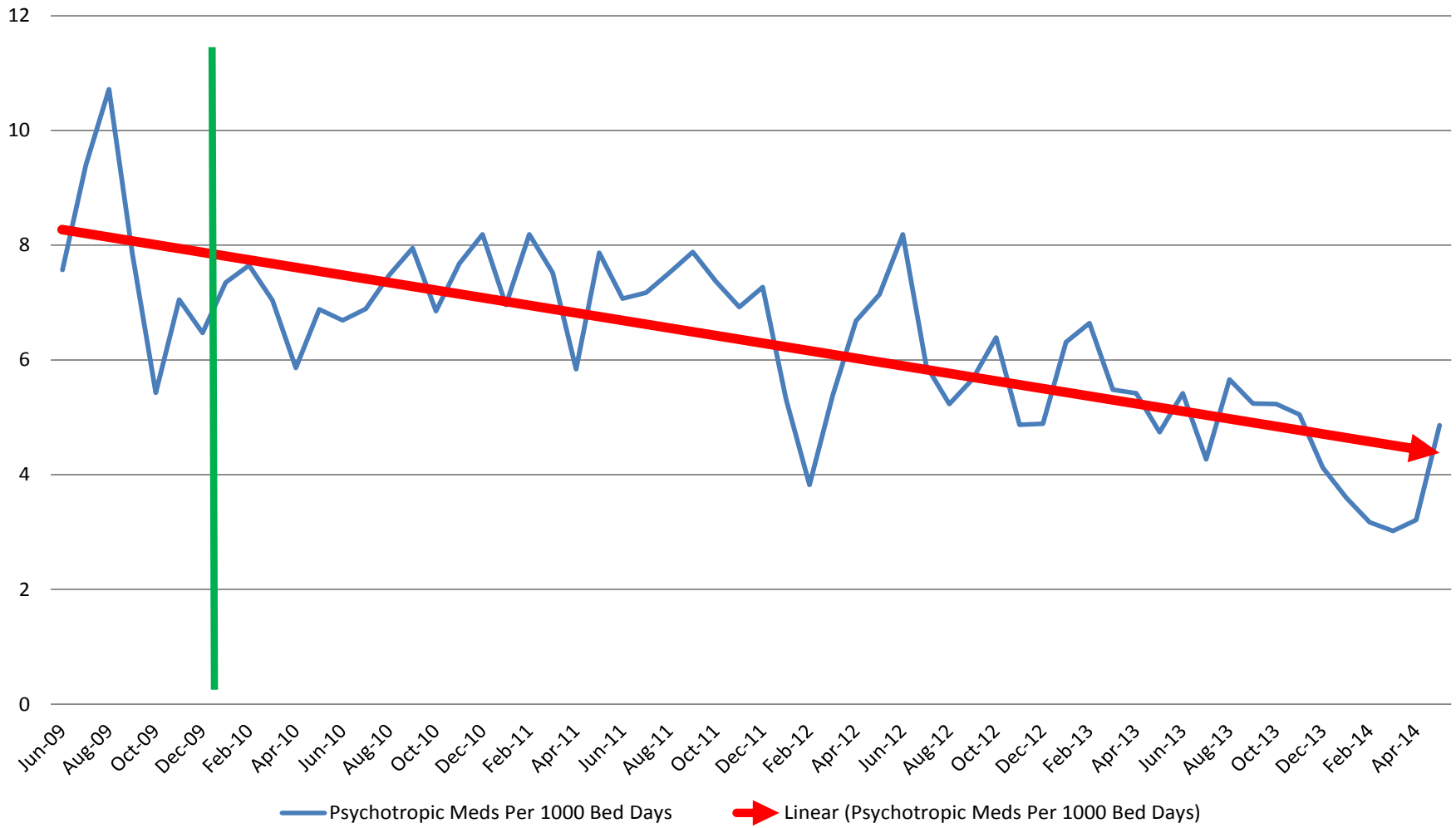
Shelter Restraints Over 11 Years

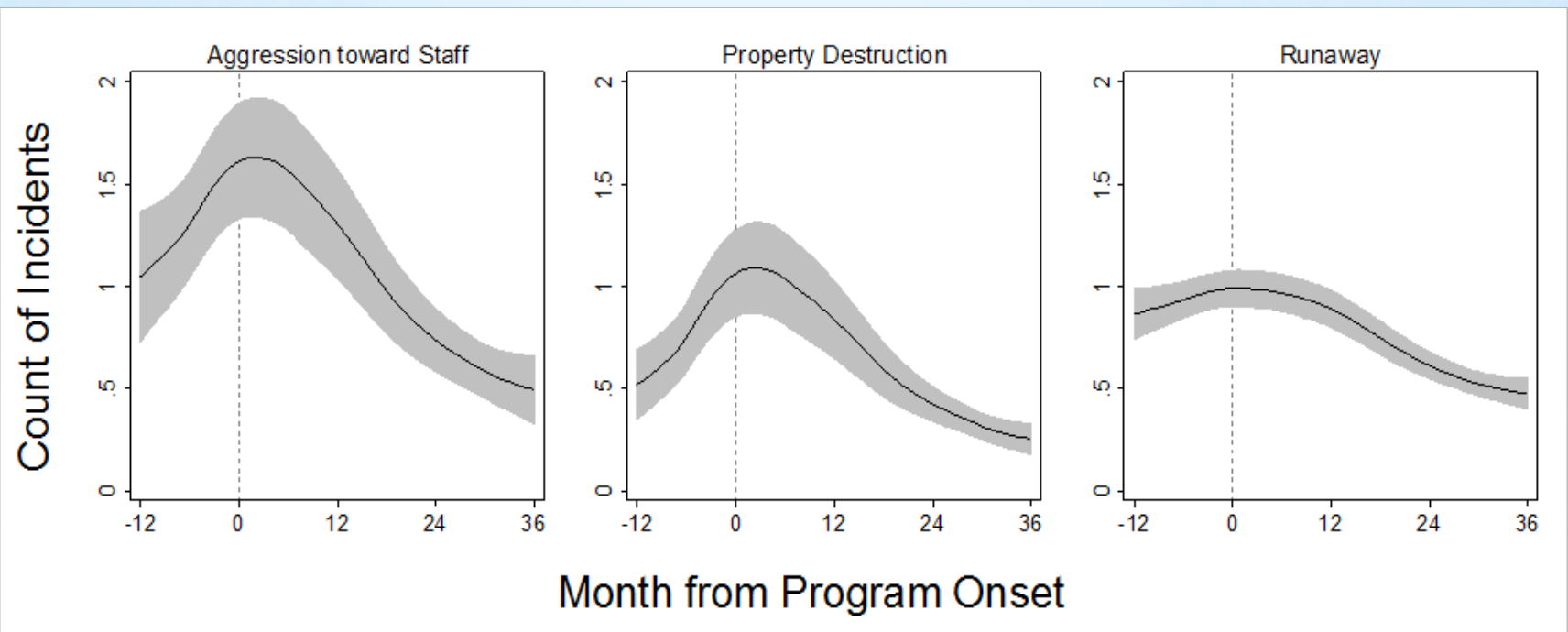


Day Student Restraints Over 11 Years



Residential Psychotropic Medication Rate





Behavioral incidents declined during CARE

In summary...

this evidence suggests that to provide quality services, we need to:

- create the conditions for all agency staff, at all levels, to respond effectively to **pain and complexity** (i.e. to use their expert judgement, to develop their mindsets), and
- ensure agency and system **cultures** (policies, practices and procedures at all levels) are **congruent with the clients' best interests** and sensitively applied in practice.

But I expect you already know most of this from your own experience, without having to review all the research.

The challenge is to **translate** these values and principles into daily organizational practice in a manner that is accountable, professionally responsible, and in the best interests of those served.



**Child welfare
is not rocket
science;**

**It's *far* more
complex than
that!**

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Appendices

J. Anglin presentation, October 20, 2015
MCFD-FCSSBC Conference, Richmond, BC

11 interactional dynamics involved in all positive changes (from Anglin, 2002)

- listening and responding with respect;
- communicating a framework for understanding;
- building rapport and relationship;
- establishing structure, routine and expectations;
- inspiring commitment;
- offering emotional and developmental support;
- challenging thinking and action;
- sharing power and decision-making;
- respecting personal space and time;
- discovering and uncovering potential; and
- providing resources

(“A theory should be as simple as possible, but no simpler.” Albert Einstein)

Research to date (e.g. Anglin, 2002; Holden, 2009; Holden et al., 2014) suggests that child- and family-centred child care work:

- Needs to be **values- and principles-based**, not merely rule-based or formulaic (e.g. the child's best interests may trump a particular policy, on occasion);
- The focus needs to be on **creating developmental and therapeutic experiences** rather than managing behaviours;
- **Everyone** in the organization (from cooks and clerks to CEOs) must be involved in the organizational change process;

- The **leadership team** needs to be 100% committed and on-board;
- The **unit of change** is the organization (not the care-workers, or any of the staff members);
- The **locus of change** is the organization;
- The process involves a significant change in organizational **culture and climate**;
- Generally, external and expert consultants need to be involved, and as **co-creators** of the change process with all the staff.

A qualitative assessment of the process of change revealed several other dimensions (Anglin, 2012; Holden et al., 2014)

- The major learning process at the staff level involves **mindset change** (“thinking outside the box”, a “new paradigm”)
- The process of organizational change takes about **3-5 years to implement**, and is ongoing;
- However, the children and youth notice and respond to the initial changes **right away**.

The slides that follow are based on the work of **Robert Kegan** and **Lisa Lahey** outlined in their text *Immunity to Change* (2009).

Their research **identifies the struggle** that people in many walks of life have in adapting to the increasing complexity of the world in which they work.



Socialized Mindset

- **Prefers dealing with concrete realities rather than abstract concepts**
- **Focuses on technical solutions (“if x, then y”)**
- **More at ease following rules than being self-directed**
- **Holds beliefs, values and assumptions and is not self-aware or self-critical about them**
- **Comfortable following external authority**



Self-authoring Mindset

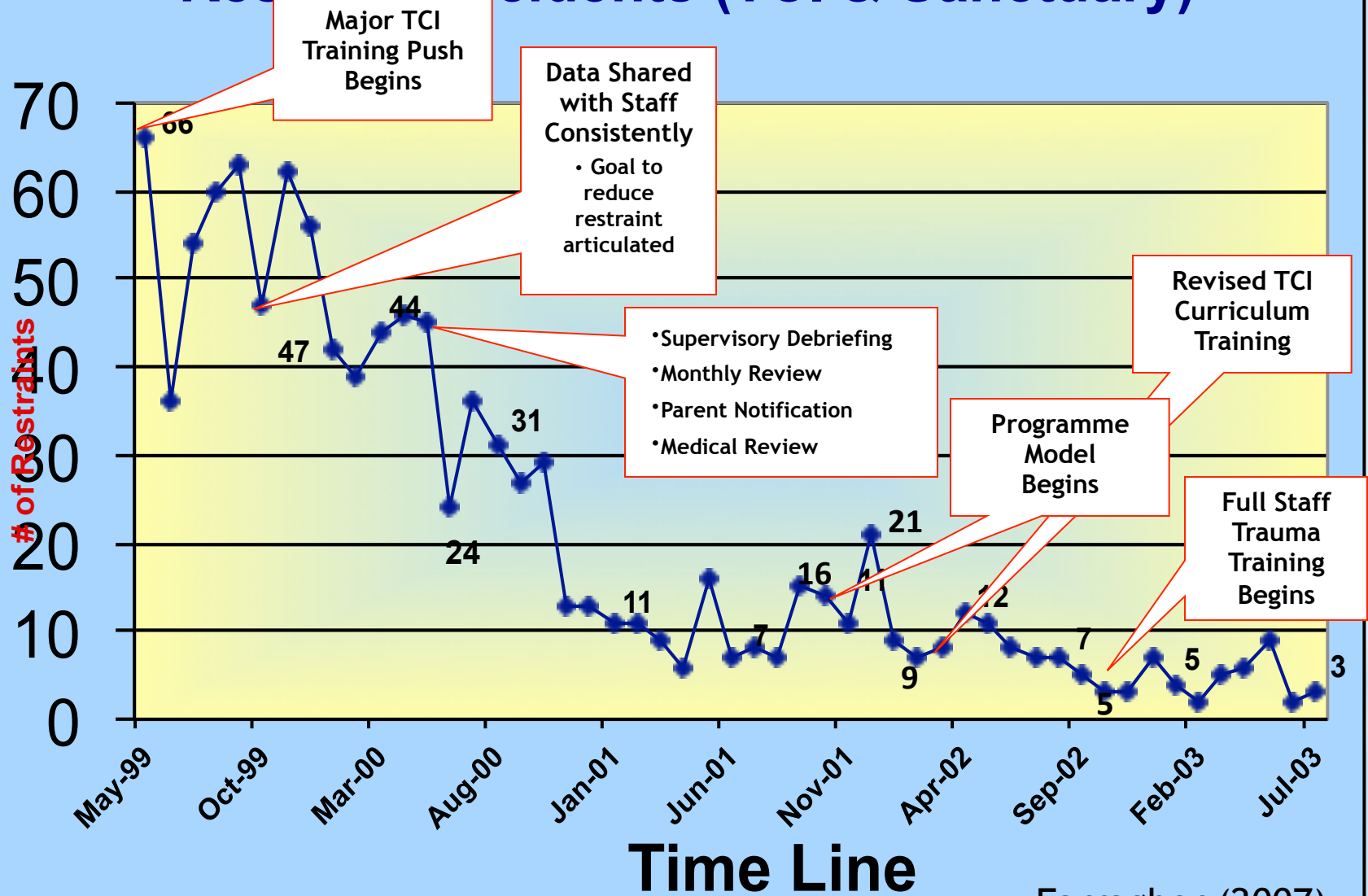
- **Works from a framework of understanding**
- **Is comfortable working with basic concepts**
- **Seeks to create adaptive responses to new and complex situations**
- **Is generally self-directed and comfortable taking responsibility for own actions**
- **Is reflective and self-critical about own beliefs, values and assumptions**
- **Is able to question external authority and draw on inner resources (thoughts, feelings, understandings)**



Self-transforming Mindset

- **Understands relations between concepts and can create new concepts as required**
- **Thinks systemically and is comfortable with changing systems and creating new systems**
- **Is self-authoring and self-transformative (i.e. can change own beliefs, values and assumptions)**
- **Is highly self-aware and able to self-criticize**
- **Is comfortable with ambiguity & uncertainty**
- **Is comfortable leading others with sensitivity to their needs and realities**

Restraint Incidents (TCI & Sanctuary)



Farragher (2007)