

Approaches to Trauma-Informed Transformation in Mental Health Services: Model Programs

The following is a list of some successful programs that can be used as models for state trauma-informed transformation planning. Programs were selected to represent a variety of settings, from urban to rural, and a variety of organizational venues, including community mental health centers, multi-service agencies, rape crisis centers, medical centers, and the criminal justice system. For further information about individual programs, contact information is provided. For other information and assistance with trauma-informed transformation, contact the *Center on Women, Violence and Trauma* at:
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Community Connections (District of Columbia)

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Community Connections is a large, urban, not-for-profit agency providing a full range of mental health and other supportive services for individuals in the District of Columbia and Montgomery County, Maryland. In the early 1990s, Community Connections recognized the pervasiveness and impact of trauma in the lives of consumers and began the process of modifying its service system to be more responsive to trauma and related concerns. Clinicians led by Dr. Maxine Harris developed a fully manualized trauma-specific group intervention for women, the Trauma Recovery and Empowerment Model (TREM). Based on evidence of its potential benefits and its adoption in a wide variety of human services settings, TREM is now recognized as a “best practice” approach. Versions of TREM for men and for adolescent girls have also been developed and implemented.

In addition to these trauma-specific interventions, Community Connections developed a model for trauma-informed systems transformation, outlined in the book *Using Trauma Theory to Design Service Systems*. This approach addresses both administrative level processes (administrative commitment to change, human resources practices, staff training) and service level modifications (screening and assessment, formal service policies, informal service procedures). Community Connections has implemented this approach and consulted widely with a large number of human service programs, ranging from state wide systems to small agencies. Community Connections was also one of the nine sites in the SAMHSA-funded Women, Co-Occurring Disorders, and Violence

project that provided evidence for the effectiveness of integrated, trauma-informed services involving consumers in key roles.

Tri-County Mental Health Services (Maine)

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Tri-County Mental Health Services, a large agency with multiple program sites, has developed a project that adopts a trauma-informed approach to services. Tri-County planned, implemented, and evaluated a broad-ranging set of service modifications, consulting with Community Connections in Washington, DC. This project has engaged not only the staff and consumers at the Rumford Unit (located in a small town in rural Maine) but administrative staff from its parent agency and staff from other human service programs in the area. Administrators, clinicians, and consumers have voiced strong support for the process, that involves trauma training for both clinical and support staff, enhanced consumer leadership, universal trauma screening, trauma-informed care of the clinician, and strengthened services integration.

After two years, the project evaluation has found high levels of satisfaction throughout the agency with the trauma-informed system changes. Administrators reported enhanced collaboration both within and outside the agency; enhanced staff morale; fewer negative events; and more effective services. Clinicians noted greater collaboration with consumers; enhanced clinical skills and sense of efficacy; and more support from the agency. Consumers emphasized greater safety, trust, and engagement in services; more collaboration with providers; and increased emphasis on empowerment, recovery, and healing. As a result of this evaluation, Tri-County adopted a trauma-informed transformation model throughout its service system. Other large, decentralized agencies in Maine have begun to participate in similar change processes.

New Partnerships for Women (Wisconsin)

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New Partnerships for Women (NPW) is a non-profit organization consisting of women who are trauma survivors, treatment providers, advocates, and University of Wisconsin

staff. It is an outgrowth of the SAMHSA Women with Co-Occurring Disorders and Violence study. The mission of the organization is "to continue to build the capacity of the community to promote healing and recovery for women who have histories of trauma, mental health, or substance abuse problems, including women who are TANF eligible." The scope of the project includes: training, consumer involvement and empowerment, dissemination of the information from the needs assessment study of Dane County women who have used mental health and/or substance abuse services, and advocacy. The organization has also developed and delivered a series of training programs for service providers, including cross-training that involved mental health, substance abuse, TANF, child welfare, sexual assault, and domestic violence.

NPW has developed a Consumer Training Curriculum, a manualized four-session program focusing on the effects of trauma on women's lives; symptom management, meeting women's basic needs, and self-advocacy. This training has been delivered in multiple sites in Wisconsin, with a priority for consumer operated programs. The NPW Consumer Curriculum Handbook is used for the training and can be purchased separately. The Wisconsin Coalition for Advocacy has developed an Advocacy Toolkit which is used for the 4th session on self-advocacy.

Center for Traumatic Stress and Sexual Assault (Washington)

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The mission of the program is to prevent and counter the harmful effects of traumatic experiences in victims, families, and in the community. These traumatic experiences include sexual and physical abuse and neglect of children, rape, sexual harassment, violent crime, accidents and disasters. Services reflect the values, beliefs, and traditions of the community, and are available for people of all ages. This program, founded in 1976, is part of the Harborview Medical Center affiliated with the University of Washington in Seattle, Washington.

Services include: targeted outreach; crisis intervention; trauma and mental health and substance abuse counseling for individuals, families, and groups; medical assessment and treatment; legal services; community follow-up; and child foster care assessments and placement. In addition to direct services, the Center also provides education and consultation for health, mental health, and legal professionals, conducts research and evaluation, and promotes prevention. The Center is a member of the Child Traumatic Stress National Network, funded through CMHS.

Lafayette House (Missouri)

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Lafayette House provides comprehensive services for women and their dependent children who are experiencing problems related to adult domestic violence, addiction, co-occurring disorders and trauma resulting from interpersonal violence including sexual assault. Lafayette House utilizes a holistic service philosophy that is individualized according to presenting problems, phase of treatment and level of functioning. Services are gender-specific and are provided in a manner consistent with clients' age, cultural background, race and sexual orientation. Activities empower clients by validating their experiences; exploring options; advocating for safety; building on strengths; avoiding victim blaming and respecting the right to self-determination.

The staff of Lafayette House believe that women who have experienced violence, mental illness and substance abuse can contribute significantly to knowledge development for this agency. Therefore, women with personal experiences in these areas are involved in program planning, implementation and evaluation.

Pittsburgh Action Against Rape (Pennsylvania)

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Pittsburgh Action Against Rape (PAAR) is one of the oldest rape crisis centers in the nation, serving Allegheny County, PA since 1972. PAAR provides compassionate care in crisis intervention, medical and legal advocacy and counseling at no cost to victims. In addition, staff routinely conducts professional trainings for other social service agencies, physicians, nurses, teachers, guidance counselors and police officers, while PAAR school education programs reach children at all grade levels.

The hallmark of PAAR is the staff's commitment to empower survivors. They work with hospitals to emphasize the importance of standardized procedures and prompt

examinations. Long ago they recognized the growing need for counseling services for children, as well as for adults who had been abused as children and had carried their secrets into adulthood. PAAR has challenged the legal system and fought for the privacy rights of all rape victims. The staff of PAAR have shared their expertise with centers around the globe, from India to Russia and Germany to Japan.

TAMAR Program (Maryland)

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TAMAR, which stands for Trauma, Addictions, Mental health, And Recovery, provides trauma specific services to women and men who have histories of childhood physical and/or sexual abuse, co-occurring disorders, and are involved in the criminal justice system. The TAMAR Program was developed in 1998 by the Maryland Mental Hygiene Administration (MHA) as part of the SAMHSA “Women and Violence” Demonstration project. Maryland was one of fifteen sites across the nation and the only site to focus on women in the criminal justice system.

The TAMAR Program provides individual and group level interventions, and program participation is voluntary. Each TAMAR Program site is run by a trauma specialist (a Master’s level, licensed clinician) who provides individual and group sessions. The TAMAR group is guided by the TAMAR Treatment Manual, consisting of fifteen modules. Groups meet twice a week for ninety minutes each session and incorporate psycho-educational materials with expressive art therapies. Staff working at TAMAR sites are trained in understanding the prevalence and consequences of trauma, which allows the provision of trauma-informed services to all. The TAMAR Program has trained over 1,000 correctional officers and hospital staff.

Tamar’s Children (Maryland)

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This project is a multi-agency collaboration designed to serve pregnant and post-partum women who are incarcerated in the Baltimore City Detention Center and the Maryland Correctional Institute for Women. This program works to foster secure mother-infant

attachments by allowing women to keep their babies and integrates the delivery of multiple services with a clinical intervention called the Circle of Security. This program is funded jointly by SAMHSA's Targeted Capacity Expansion grant, the Open Society Institute, the Abell Foundation and the Governor's Office of Crime Control and Prevention's RSAT funds, as well as State and local in-kind services. Shelter Plus Care funds have also been secured so that women from the program who are in need of safe housing may access it.

Franklin County Women's Research Project (Massachusetts)

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The Franklin County Women and Research Project (FCWRP) is an innovative community-based intervention for women with histories of trauma and co-occurring substance abuse and mental health histories living in a rural community. The FCWRP was one of two rural sites funded by SAMHSA's "Women with Co-Occurring Disorders and Violence" research project and the only site developed, staffed, and evaluated by consumer/survivor/recovering women (c/s/r). Through partnerships with local mental health, substance abuse, domestic violence shelter, children's services, homeless shelters, housing, and poverty agencies, FCWVP facilitated changes in traditional service delivery in Franklin County and initiated new services using a c/s/r, or peer-driven, model.

The program has three main components – a trauma liaison based at the local county hospital working with behavioral health units (MH and SA) as well as the emergency room; the development of two peer-driven women's resource centers providing a safe place for women to gather, learn, and thrive; and a group intervention – the Addiction, Trauma Recovery Integrated Model (ATRIUM) developed by Dusty Miller, EdD - facilitated by women with the lived experiences of trauma, substance abuse and violence. Values reflected in all aspects of the program include:

- 1) Valued social roles: Opportunities for women to develop skills and transform difficult experiences to strengths
- 2) Community as the container for healing: Working with women in the context of their lives as mothers, neighbors, and citizens, and in the communities in which they live and work.
- 3) Healing is relational: Women heal through and in relationships to other women with shared experiences, to community members, and to self.