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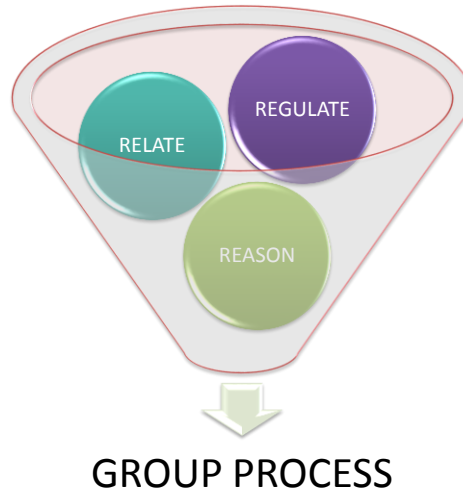
HOW MANY PEOPLE HERE HAVE EVER BEEN TO A BORING MEETING?



HOW DO YOU TURN A BUNCH OF INDIVIDUALS INTO A CREATIVE GROUP?

THE THREE R'S

[\(https://www.childtrauma.org/\)](https://www.childtrauma.org/)



PRESENCE MEETING

- Simple – anytime, anywhere
- Regulates us through transitions
- Experience of predictable safety
- Honors emotions
- Levels hierarchy – build team
- Keeps relationships at the forefront



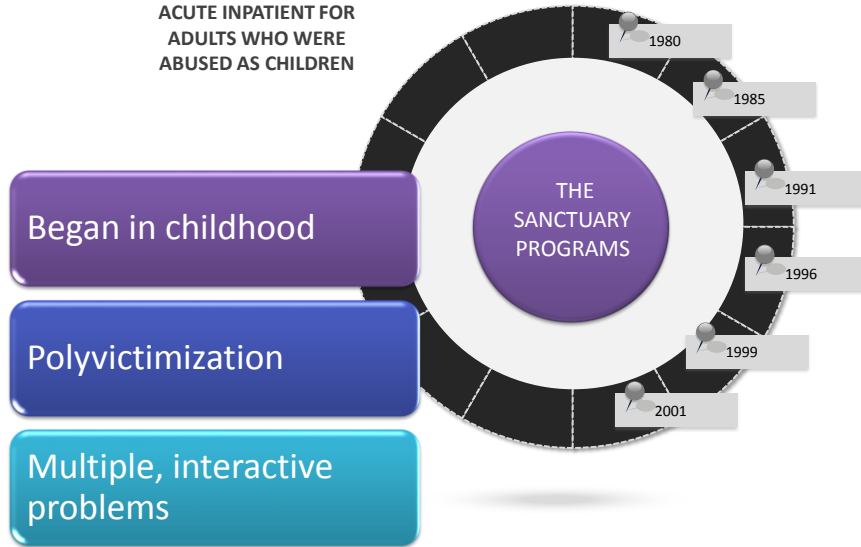
PRESENCE MEETING

- Who are you?
- What are you feeling right now? (just one)
- What would you like to accomplish today?
- What is something you are grateful for?
- Who (at the table) can you ask for help if you need it?



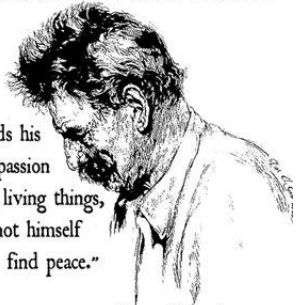
ANY QUESTIONS
ABOUT
COMMUNITY
MEETING?

CREATING AND DESTROYING SANCTUARY TIMELINE



REVERENCE FOR LIFE

"Until he extends his
circle of compassion
to include all living things,
man will not himself
find peace."



Albert Schweitzer

TRAUMA THEORY
IS
THE SCIENCE OF
SUFFERING



AND FOR VAST NUMBERS OF PEOPLE THAT SUFFERING
BEGINS IN CHILDHOOD AND PROFOUNDLY AFFECTS
DEVELOPMENT



And that
suffering can
last a
lifetime...

And can
extend
through time



TRAUMA-ORGANIZED INDIVIDUALS



When an individual, family, organization, system, or culture becomes fundamentally and unconsciously organized around the impact of chronic and toxic stress, even when this undermines their adaptive ability.

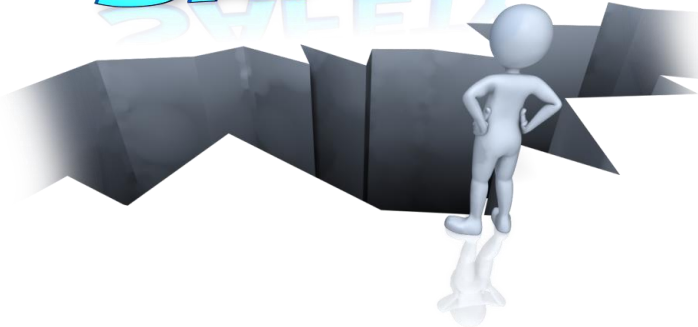
CENTRAL ORGANIZING PRINCIPLE



Exposure to systematic adversity and trauma as a central organizing principle of human thought, feeling, belief, and behavior that is largely overlooked in existing explanations of and responses to human behavior.




SAFETY



SAFETY

- They were in danger from themselves or others.
- They could not keep themselves safe.
- They did not know what safety was.
- They didn't trust others and were very sensitive to betrayal of trust.

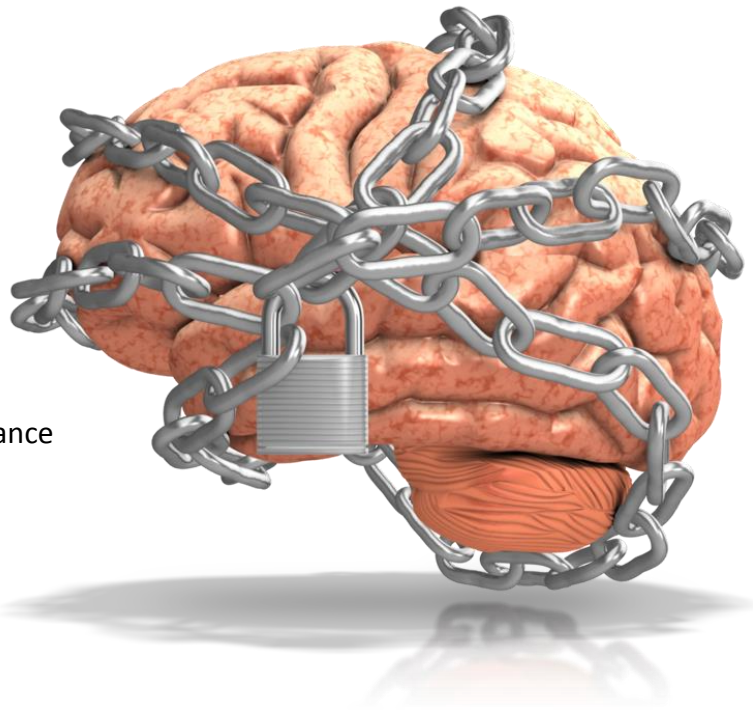


EMOTIONAL REGULATION

- They had difficulties managing emotional arousal (dysregulation)
- They wanted to stay emotionally numb rather than feel the pain of the previous experiences – often through using drugs and/or alcohol
- They were likely to lash out if something we did or said broke through that emotional numbness

LEARNING CHALLENGES

- The history of multiple disrupted attachments and the emotional dysregulation interfered with cognitive development.
- This impacted academic performance even in the context of normal or superior intelligence.



COMMUNICATION CHALLENGES

- They were unlikely to make the connection between their present problems and previous experiences (AMNESIA)
- They were unlikely to want to talk about their previous bad experiences (AVOIDANCE)
- They had no words for the worst parts of the experiences (ALEXITHYMIA)
- They could not communicate well inside themselves or with others (DISSOCIATION)



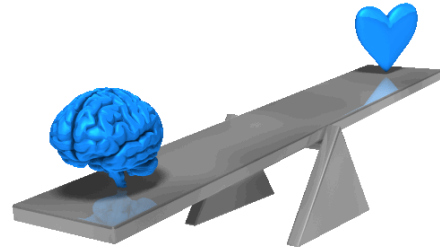
CHALLENGES AROUND AUTHORITY

- They had all been exposed to the abusive use of power at the hands of someone else
- They often engaged in bullying behavior or were bullied by others – or both.



JUDGMENT CHALLENGES

- Confused about right/wrong, fair play, social responsibility
- Balancing individual needs with the common good

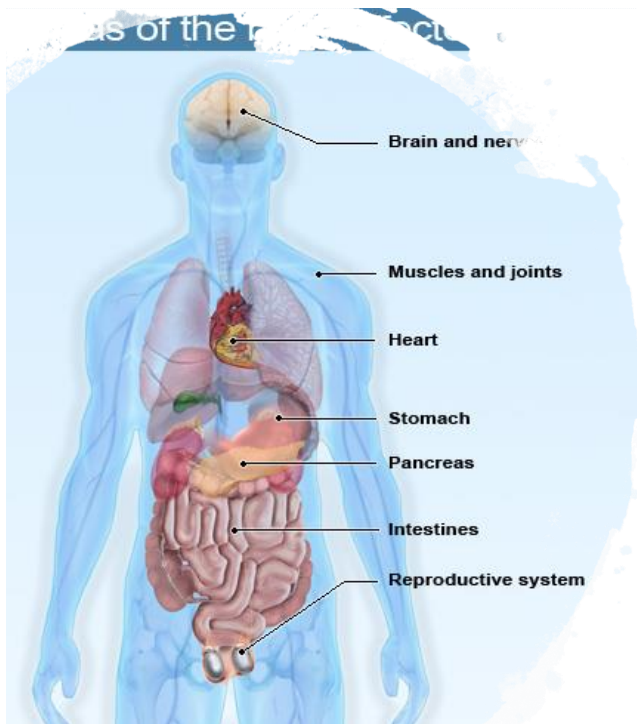


COMPLEX BEREAVEMENT

- Extraordinary amount of repetitive loss
- Inability to grieve
- Failure to envision any alternative or positive futures

COMPLEX ADAPTIVE CHALLENGES

- Their past experience of chronic hyperarousal had compelled the development of coping skills to protect the CNS
- The symptoms we saw were the remnants of original adaptive and necessary coping skills.
- These coping skills had over time become bad habits that the person no longer could see or control.
- As a result, the capacity to create and sustain interpersonal trust was severely compromised

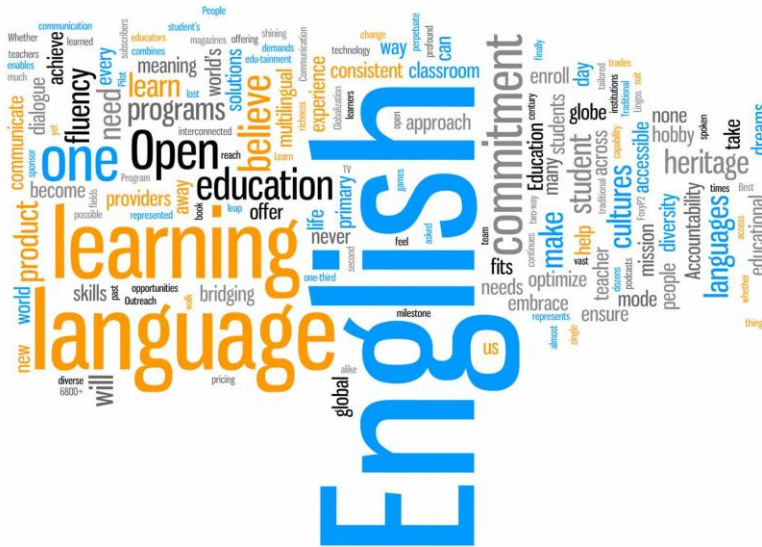


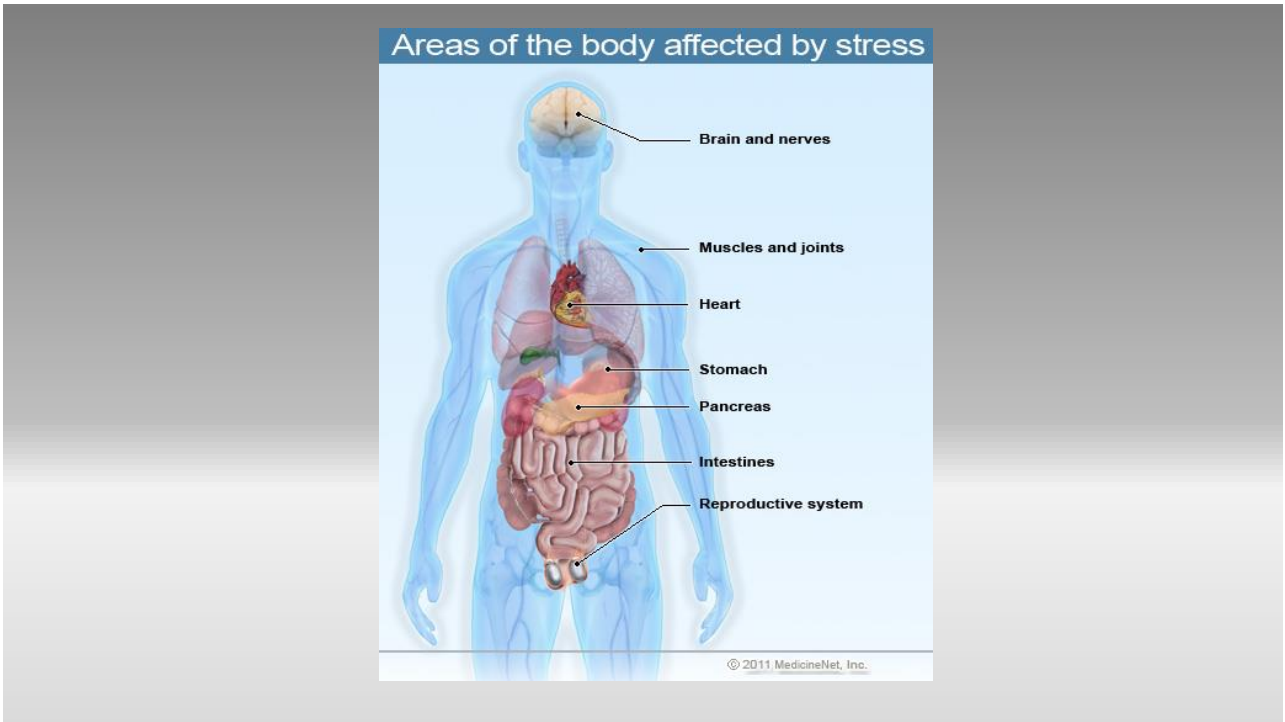
- Psychobiology of stress
- Impact of trauma
- Developmental neuroscience
- Social neuroscience
- Spiritual neuroscience

**WIDEN KNOWLEDGE,
DEEPEN UNDERSTANDING**

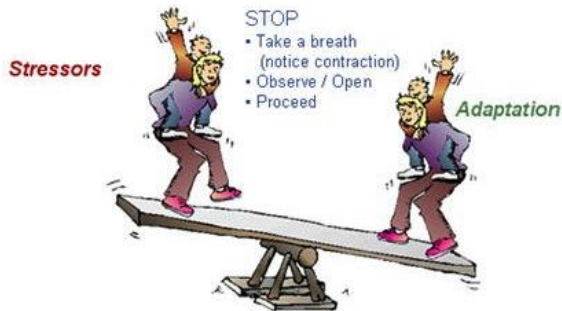


WE HAVE A PROBLEM WITH THE LANGUAGE





Stress Response:



Allostasis

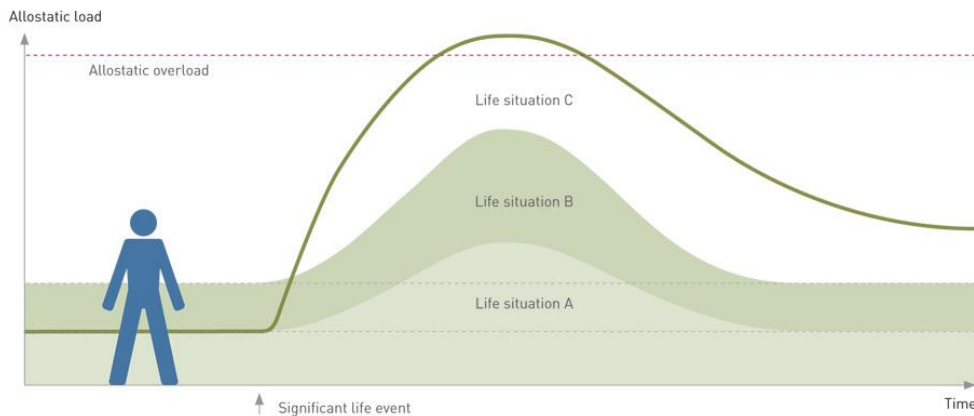
Some stress can be energizing and toning to the system. Body systems adjust well to stressors without over taxing resources.

Stress Reaction:



Allostatic Load

Body systems achieve a kind of balance, but everything is working too hard and we begin to slowly break down.



The wear-and-tear on the body and brain resulting from chronic over-activity of physiological systems that are normally involved in adaptation to environmental challenge

ALLOSTATIC LOAD = RELENTLESS STRESS



RELENTLESS STRESS

- Poverty or near poverty
- Hunger
- Racism, Sexism
- Incarceration
- Parenting alone
- Multigenerational caregiving
- Multiply challenged children
- Severe injury/illness in close family



INCREASED ALLOSTATIC LOAD = RELENTLESS STRESS

- Irritability
- Impatience
- Depression
- Shame
- Poor quality decisions
- Substance abuse
- Violence
- Impaired parenting
- Intergenerational transmission



RELENTLESS STRESS IN PARENTS

MAY LEAD TO TOXIC STRESS IN CHILD



TOXIC STRESS

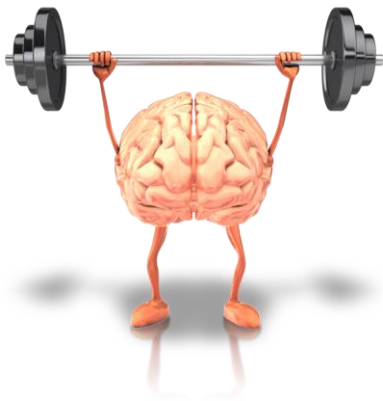
- Strong and prolonged activation of the body's stress management systems
- Particularly problematic during critical developmental periods because of effects on basic brain architecture



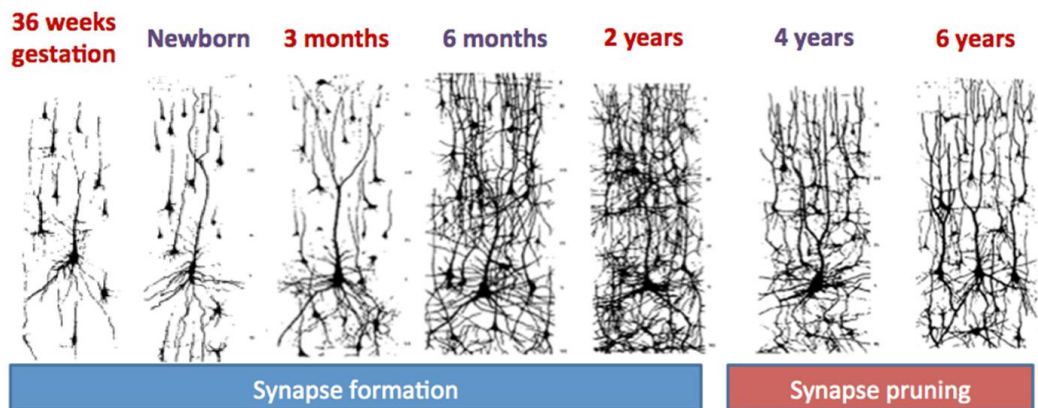
Scientists now know a major ingredient in this developmental process is the “serve and return” relationship between children and their parents and other caregivers.

**IT BEGINS WITH LIFE BEFORE SCHOOL
EXPERIENCES BUILD BRAIN ARCHITECTURE**

THE BRAIN DEVELOPS



- Brains are built over time, from the bottom up and keep developing until around age 25-30
- In infancy, a million new neural connections are formed every second.
- Born with twice as many neurons as we will ultimately have.
- Pruning follows rapid proliferation so that brain circuits become more efficient.



WHAT GETS CONNECTED AND WHAT GETS PRUNED AWAY DETERMINED LARGELY BY CHILD'S ENVIRONMENT

PRUNING

IT BEGINS WITH LIFE BEFORE SCHOOL

EXPERIENCES BUILD BRAIN ARCHITECTURE



The Relationship of Adverse Childhood Experiences to Adult Health Status

A collaborative effort of Kaiser Permanente and The Centers for Disease Control

**Vincent J. Felitti, M.D.
Robert F. Anda, M.D.**

The Relationship of Adverse Childhood Experiences to Adult Health Status



- In 1998, largest study of its kind at the time (almost 18,000 participants – San Diego)
- Examined the health and social effects of adverse childhood experiences over the lifespan
- Used the ACE score to assess total amount of stress in childhood
- Majority of participants were 50 or older (62%), were white (77%) and had attended college (72%)

ACE CATEGORIES WHEN YOU WERE 18 OR YOUNGER



MALTREATMENT

- PHYSICAL ABUSE
- SEXUAL ABUSE
- EMOTIONAL ABUSE
- PHYSICAL NEGLECT
- EMOTIONAL NEGLECT

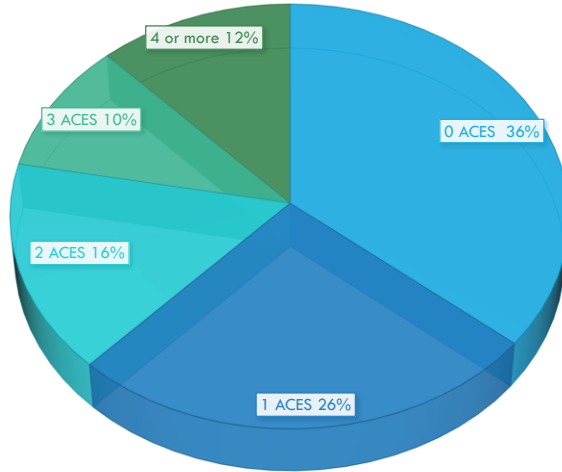


HOUSEHOLD

- MENTAL ILLNESS
- SUBSTANCE ABUSE
- DOMESTIC VIOLENCE
- PARENTAL SEPARATION/DIVORCE
- INCARCERATION

1 POINT /CATEGORY – ADD TO GET TOTAL ACE SCORE

ACES SCORES



ACES INCREASES RISK IN STRONG, GRADED FASHION



Depression
Anxiety disorders
Dissociative disorders
Suicide

Antisocial behavior
Psychosis

Impulse control problems
Aggression
Personality distortions

› Alcohol abuse
and Alcoholism

› Drug Abuse and
Addiction

› Smoking

**ACES INCREASES RISK IN A
STRONG AND GRADED
FASHION**



**ACES INCREASES RISK IN A
STRONG AND GRADED
FASHION**

- › Multiple sexual partners
- › Sexually transmitted disease
- › Unwanted pregnancy, teen pregnancy and fetal death
- › Compulsive sexual behavior





CHILDHOOD ADVERSITY AND CRIMINAL BEHAVIOR

Large study (65,000) of Florida juvenile offenders.

Two-thirds or more of the Florida juvenile offenders reported at least three ACEs.



ACES AND HOMELESSNESS

Adults who experience higher levels of adverse childhood experiences are also those adults more likely to experience homelessness.

**ACES INCREASES
RISK IN A STRONG
AND GRADED
FASHION**

- Heart disease
- Stroke
- Lung disease
- Autoimmune diseases
- Liver disease
- Cancer
- Obesity
- Diabetes



**CHRONIC
INFLAMMATION**

- Cardiovascular disease
- Cancer
- Pulmonary disease
- Alzheimer's
- Autoimmune disease
- Arthritis
- Neurological disorders
- Diabetes
- Digestive disorders





DISEASES OF STRESS

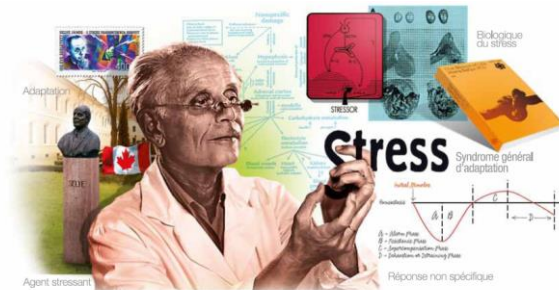
- Negative emotions generated by stress trigger immune responses
- Same cascade as body deploys against physical pathogens
- Wears out heart muscles, vascular system – heart disease, hypertension
- Autoimmune disease and other inflammatory processes

A UNIFIED THEORY OF DISEASE?

Hans Selye, 1984.
The Stress of Life.

“Every stress leaves an indelible scar,
and the organism pays for its survival
after a stressful situation by becoming
a little older.”

~ Hans Selye, MD, PhD



ACES AND RISK OF REVICTIMIZATION



ACE Score	Intimate Partner Violence	Rape
0	1.0	1.0
1	1.9	2.0
2	2.1	2.8
3	2.7	4.2
4	4.5	5.3
5 or more	5.1	8.9



ACES SCORE OF 4 OR MORE

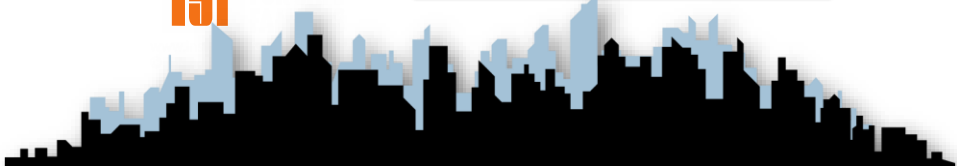
- Twice as likely to smoke
- Seven times more likely to be alcoholics
- Six times more likely to have had sex before the age of 15
- Twice as likely to have been diagnosed with cancer
- Twice as likely to have heart disease
- Four times as likely to suffer from emphysema or chronic bronchitis
- Twelve times as likely to have attempted suicide
- Ten times more likely to have injected street drugs

The Philadelphia ACE Study

A collaborative, originally led by the Institute for Safe Families (ISF) and now by Health Federation, to develop and implement research, practice, and policies in urban pediatric settings based on the Adverse Childhood Experiences (ACE) study.



The Children's Hospital of Philadelphia®
Hope lives here.



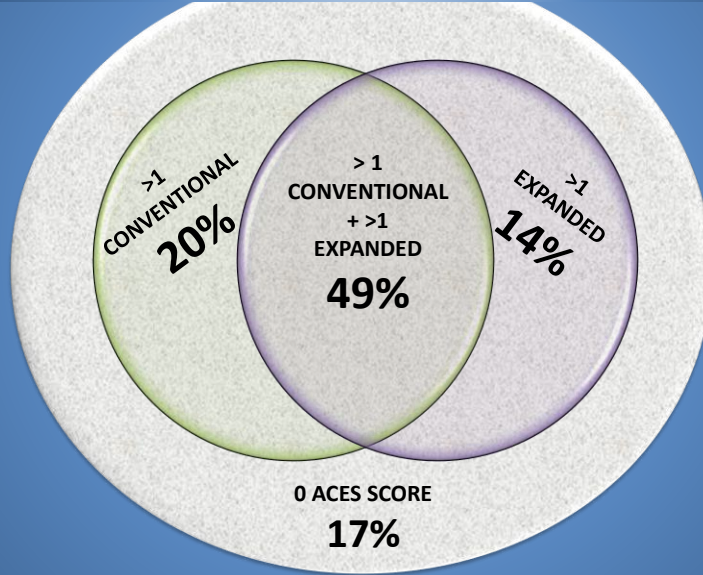
URBAN ACES STUDY (<http://www.philadelphiaaces.org/>)

Figure 1 TYPES OF ACEs



SOURCE:
The Adverse Childhood Experiences Study
and the Philadelphia Expanded ACE Study

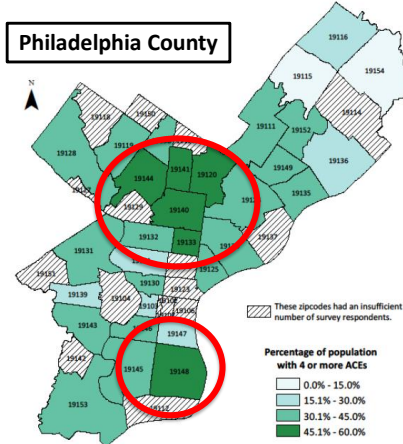
OVERLAP BETWEEN EXPOSURE TO CONVENTIONAL AND EXPANDED ACES

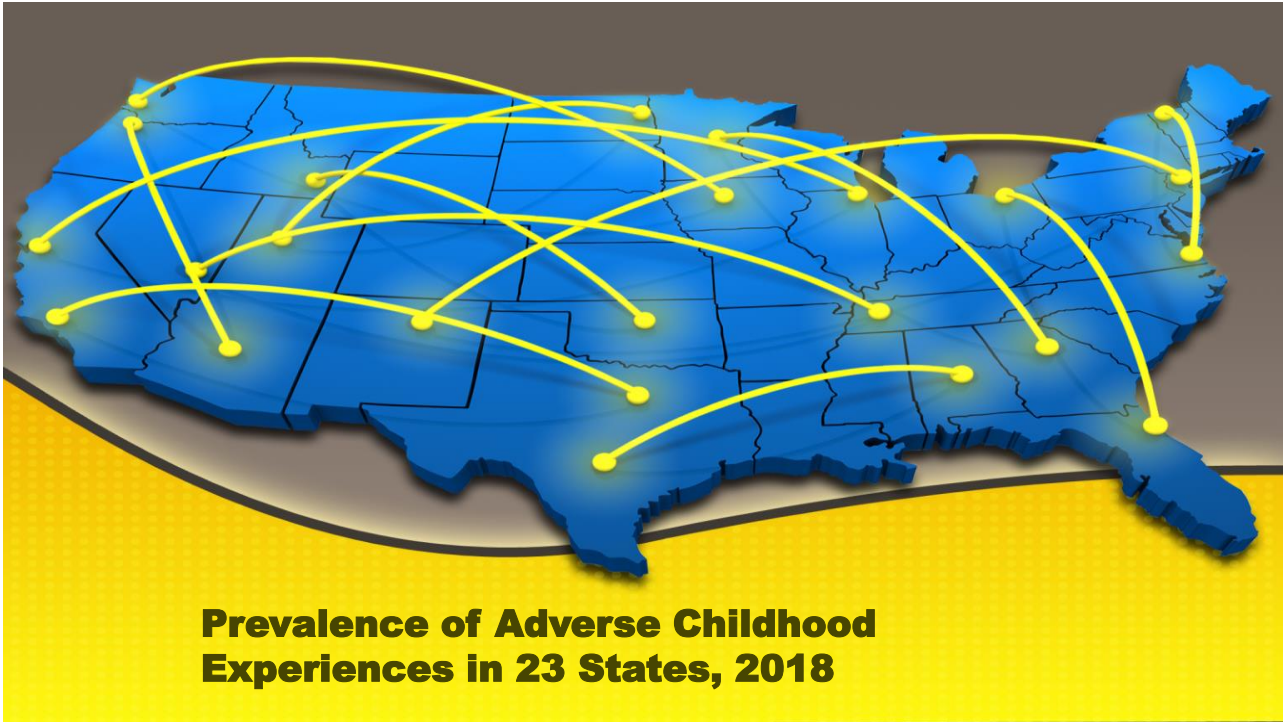


Total ACE Score ≥ 4 by Zip Code

Health Statistics from these 5 Zip Codes

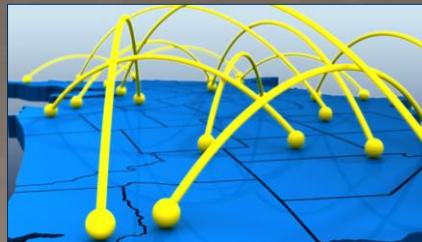
- 22% of adults unemployed
- 46% of residents live in poverty
- Life expectancy for males age 68
- 22% of children obese
- Homicide rate 30 to 40 deaths per 100,000



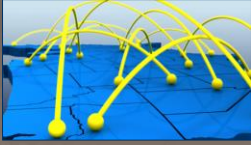


Prevalence of Adverse Childhood Experiences in 23 States

Of the 214,157 respondents included in the sample (52%female), 62% had at least 1 and 25% reported 3 or more ACEs.

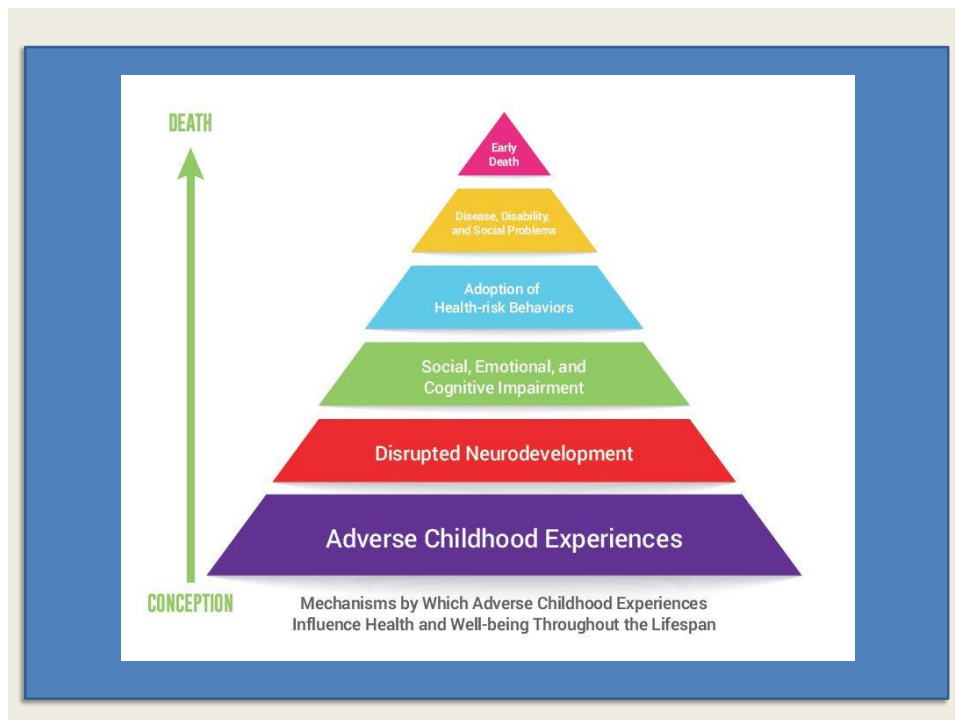


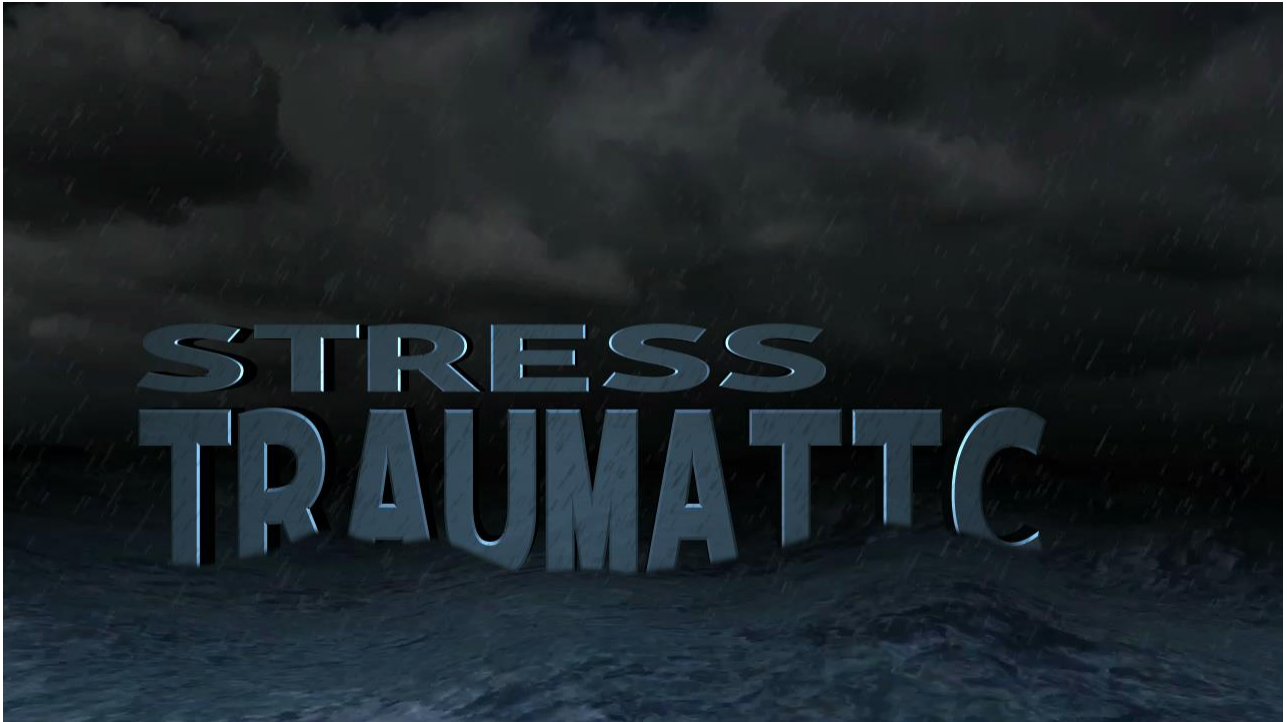
Prevalence of Adverse Childhood Experiences in 23 States



In this cross-sectional survey of 214,157 respondents, significantly higher exposure to adverse childhood experiences than comparison groups for:

- participants who identified as black, Hispanic, or multiracial,
- those with less than a high school education,
- those with annual income less than \$15 000,
- those who were unemployed
- those unable to work
- those identifying as gay/lesbian or bisexual

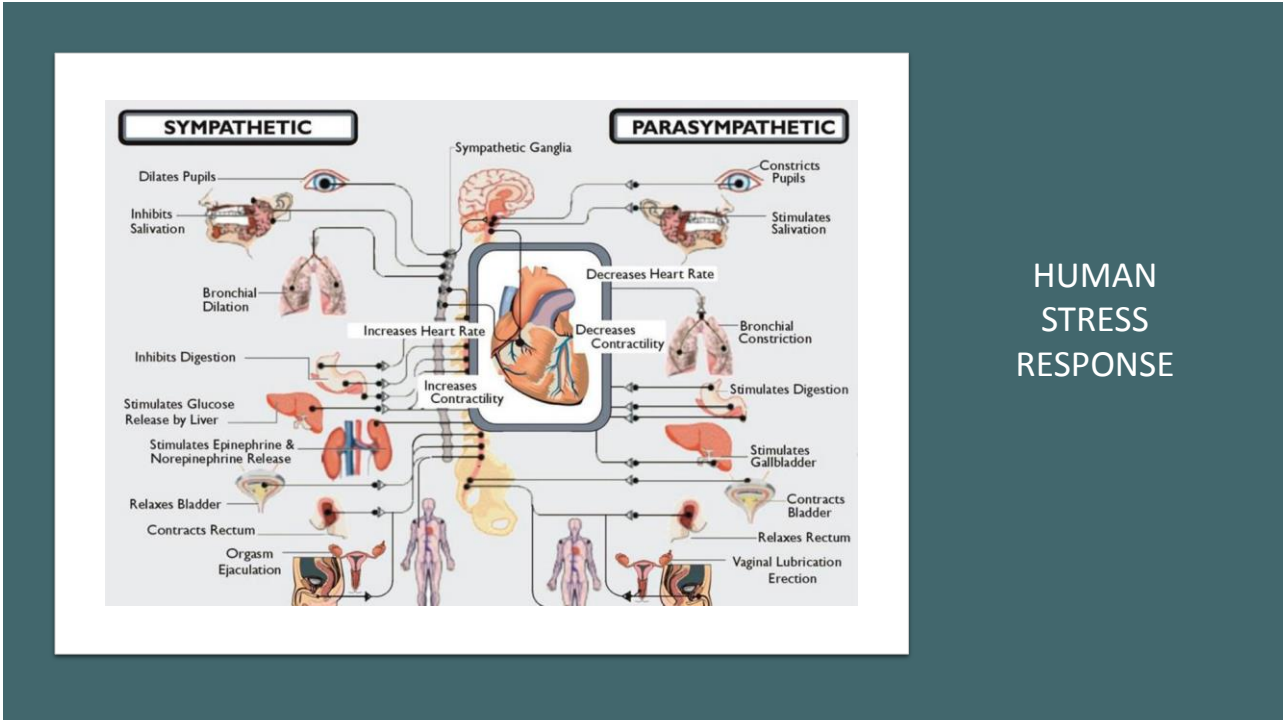
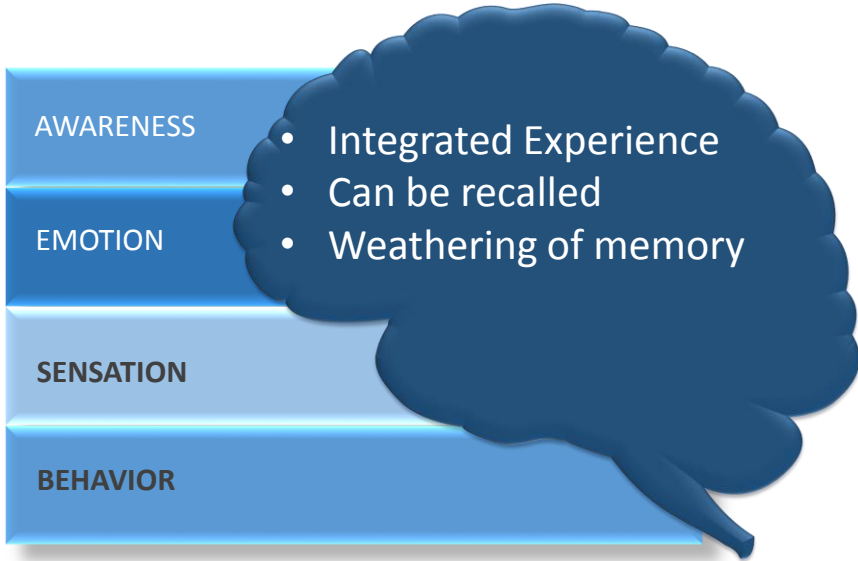


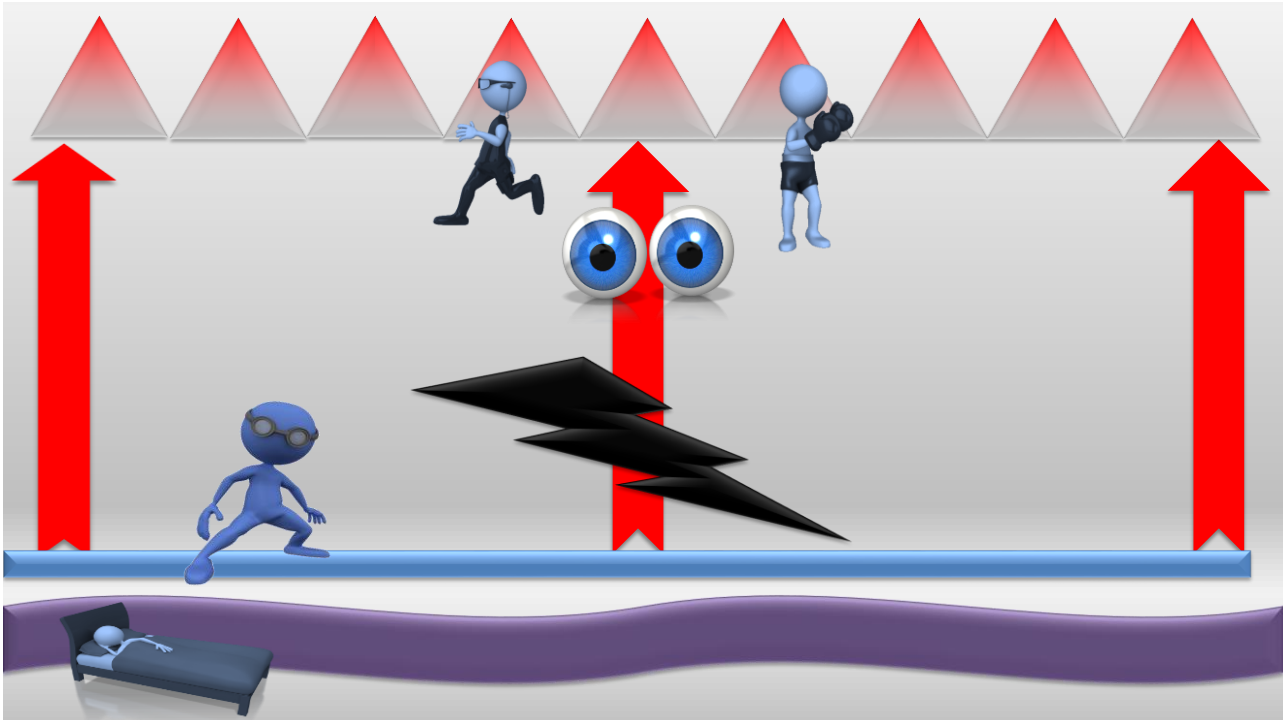


TRAUMATIC STRESS

- Trauma occurs when an external threat overwhelms a person's internal and external positive coping resources (Van der Kolk)
- Trauma is a normal reaction to an abnormal or extreme situation (Frankl)

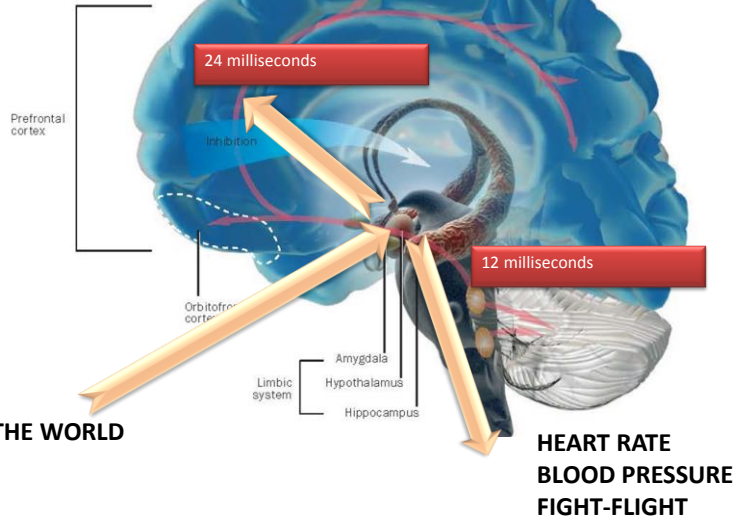
ITS ALL ABOUT THE BRAIN



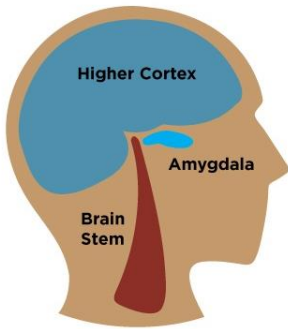


THE LOW ROAD AND THE HIGH ROAD

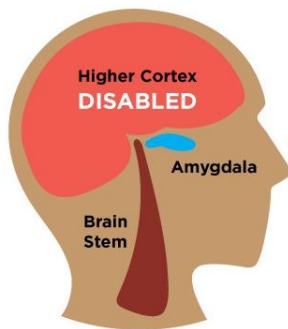
THOUGHT
REASON
JUDGMENT



EXPERIENCE IN THE WORLD



LOW Emotion
(Calm, Relaxed)

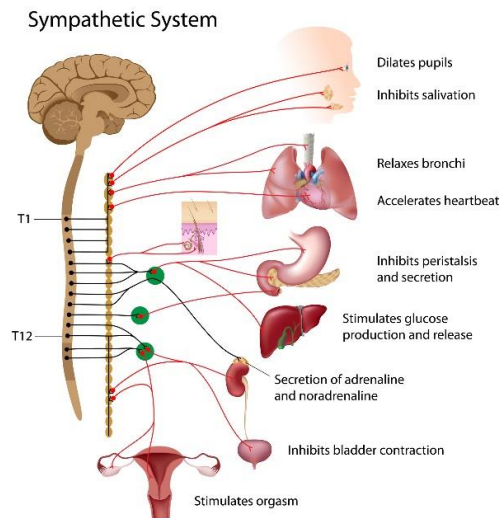


HIGH Emotion
(Anger, Fear, Excitement, Love,
Hate, Disgust, Frustration)

Emotional explosions are neural hijackings....that occur in an instant, triggering this reaction crucial moments before the neocortex, the thinking brain, has had a chance to glimpse fully what is happening to decide if it is a good idea.

- D. Goleman, *Emotional Intelligence*, P.14

EMOTIONAL HIJACKING



SYMPATHETIC NERVOUS SYSTEM

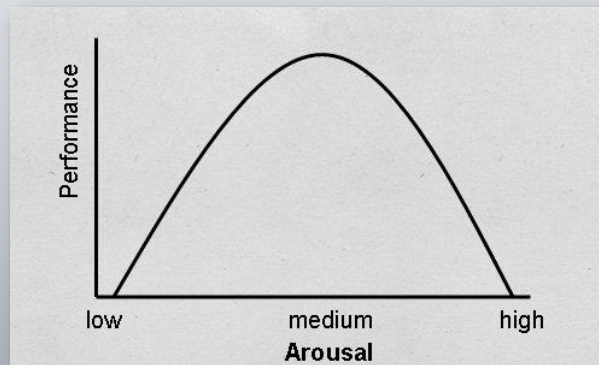
- Maintains the body under stress and responds to any threat.
- The catecholamine hormones adrenaline (EPINEPHRINE) and noradrenaline (NOREPINEPHRINE) are secreted by the adrenal gland

EPINEPHINE (ADRENALIN)

- Increases heart rate
- Increases blood pressure
- Prepares muscles for action
- Shunts blood away from GI tract



THE PROBLEM WITH EXTREME STRESS:



Progressively diminished cognitive and physical performance as heart rate increases



HEART RATE AND FEAR

60-80 bpm	Normal Resting heart rate.
80 -115 bpm	Fine motor skills start to deteriorate
115 – 145 bpm	Complex motor skills deteriorate. Increased cognitive function and reaction time.
145 – 175 bpm	Cognitive processing deteriorates, loss of peripheral vision, loss of depth perception, loss of near vision, auditory exclusion
175pm + bpm	Irrational fight, fight, or freeze, submissive behaviour, voiding of bowels.



CORTISOL

- Vital steroid
- Neurohormonal regulation
- Reduces inflammation



ENDORPHINS

- Natural opiates
- Reduce pain

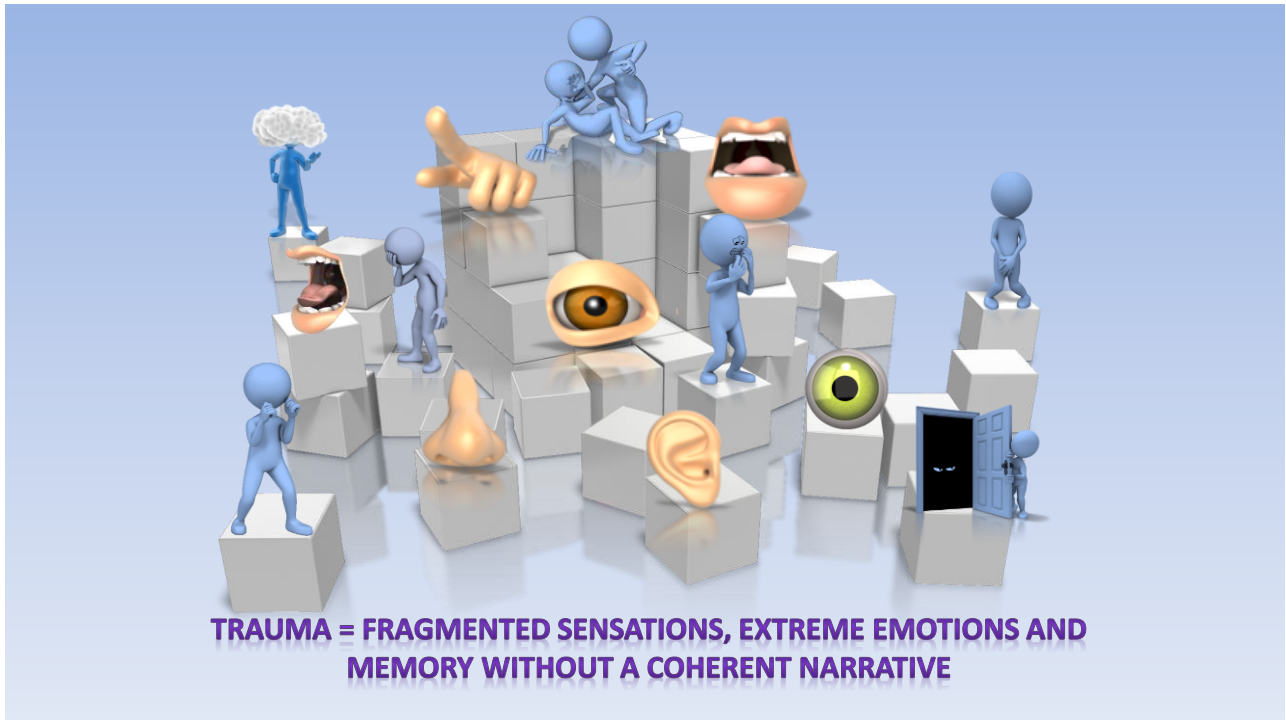




CONSCIOUS AND UNCONSCIOUS (Valent, 2001)

- Nature seems to have evolved a dual brain in order to provide two simultaneous types of information.
- Right puts things together as wholes – older form of awareness
- Dominant in children until 3-4
- Left divides, categorizes, puts into language – younger hemispheres, more vulnerable to loss of integration
- Right hemisphere now thought to be the “unconscious mind”
- Right hemisphere constantly communicating but doing so nonverbally AND through behavior





FLASHBACK MEMORY

- This is experienced by the person as a total or partial reliving of the traumatic experience.
- It can be a sensory fragment of the trauma or the entire traumatic sequence, running like a virtual reality movie.
- In such a state, the traumatized person has difficulties distinguishing reality from flashback.





FREEZE AND DISSOCIATION

Increases survival chances because predators detect moving prey more easily but have difficulty with noticing immobile objects



DISSOCIATION

- Dissociation = A disruption in the usually integrated functions of consciousness, memory, identity, or perception of the environment.
- Life-saving in the short run – buffers the CNS and prevents death but hugely problematic in the long run.
- We often don't "unfreeze" all the way

Fearless



Fearless





TRIGGERS

A trigger or “threat cue” can set off a trauma reaction, such as fear, panic, agitation, flashbacks or lashing out.



CHRONIC HYPERAROUSAL THE MIND BECOMES A TERRORIST

- Always on edge
- Triggered outside of conscious awareness by otherwise normal environmental situations
- Avoid people, places, things, relationships
- Experience danger everywhere – can look like paranoia



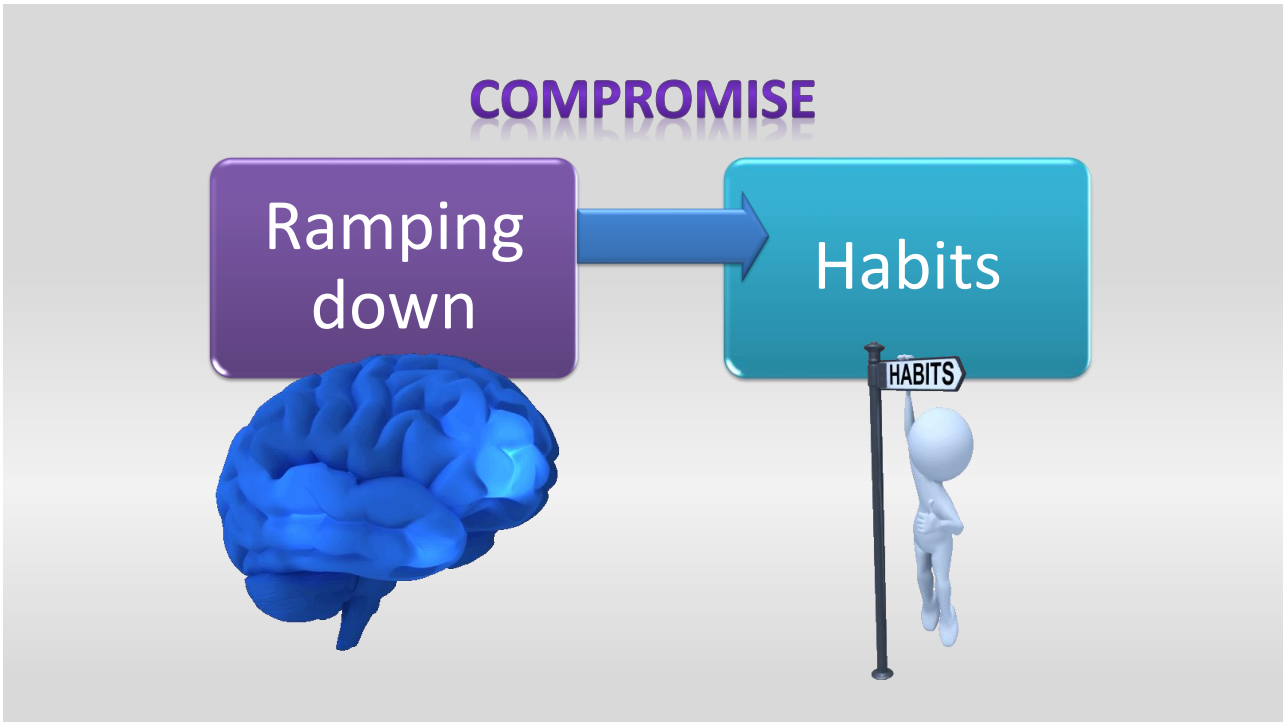
THE MIND BECOMES A TERRORIST

- Feelings, particularly positive feelings, disappear – numb, shut down, depressed
- Haunting images
- Disturbing physical sensations
- Chronic fear
- Exhaustion
- Helplessness
- Hopelessness

SHATTERED SENSE OF COHERENCE

- LIFE IS UNPREDICTABLE
- LIFE IS INCOMPREHENSIBLE
- LIFE IS NOT MANAGEABLE
- LIFE NO LONGER HAS MEANING





MALADAPTIVE COPING



TRAUMATIC REENACTMENT



- The memories of the traumatic experience are dissociated, nonverbal, and unintegrated, possibly lodged in the right brain.
- Traumatic reenactment occurs when people repeatedly find themselves in situations that recapitulate earlier trauma, lacking any awareness of how this occurred or how to prevent it from recurring.

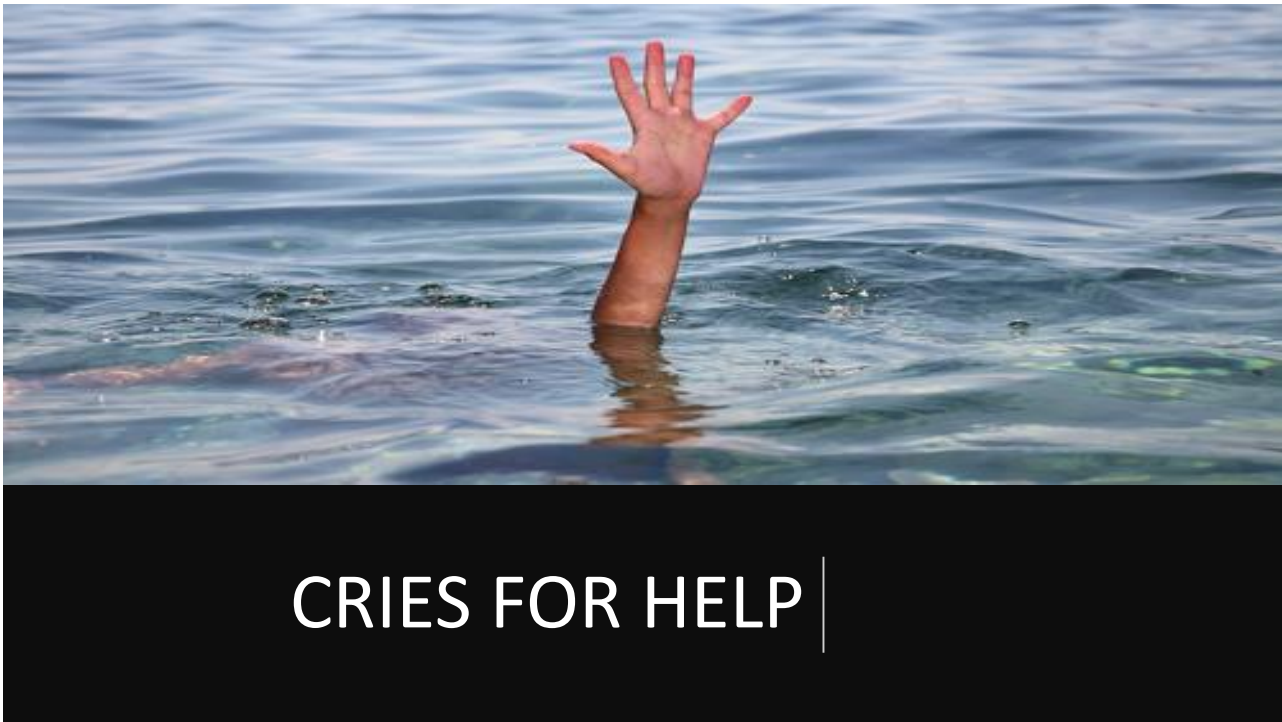
TRAUMATIC REENACTMENT



- The lack of conscious awareness may be secondary to the dissociative blockade between left and right hemisphere integration that places the behavior out of the context of the left hemisphere's verbal, linear and conscious control.
- Since words are not available to sufficiently explain the experience, rational mode thinking cannot occur.

Fearless







IT'S NOT WHAT'S WRONG WITH YOU????

RECOVERY WAS POSSIBLE BUT.....

- IT DIDN'T HAPPEN OVERNIGHT
- IT DIDN'T HAPPEN ALL AT ONCE
- IT DIDN'T HAPPEN WITHOUT MISTAKES
- MOVEMENT TYPICALLY ONE STEP BACKWARD, TWO AHEAD, THREE BACKWARD, ETC
- MORE LIKE RECOVERY FROM ADDICTION AND WORKING THROUGH MAJOR LOSS
- DIAGNOSTIC SYSTEM UNHELPFUL
- MEDICATIONS LARGELY UNHELPFUL, FREQUENTLY HARMFUL





RECOVERY WAS POSSIBLE BUT.....

Trauma and adversity left people stranded, stuck in time, trapped in habits, maladapted, confused, hopeless, helpless, blaming themselves, hating life, hating themselves, unsafe.




RECOVERY WAS POSSIBLE BUT.....

- OUR JOB WAS TO GET THEM MOVING IN ANY WAY WE COULD:
 - PHYSICALLY
 - COGNITIVELY
 - EMOTIONALLY
 - SOCIALLY
 - MORALLY



TIPS FOR HELPERS

- Train everyone
- Assess for trauma, adversity, toxic stress
- Think about the possibility of adversity as underlying problem – helps to diminish frustration – everyone had a childhood!
- Recognize issue of trust and betrayed trust will be major, on-going issue
- If you cannot understand why someone does or doesn't do something that seems to be common sense, be curious



TIPS FOR HELPERS

- Ask about the trauma history like you would any other part of the medical history - it doesn't mean you have to fix it
- Say: *"At some point in their lives, many people have experienced extremely distressing events such as combat, physical or sexual assault, or a bad accident. Have you ever had any experiences like that?"*
- You don't have to go into details but be matter of fact, direct, supportive, and encouraging.
- Make no assumptions about how the person has been affected – ask them

TIPS FOR HELPERS



- **Use Behavioral Language**
- Not “were you ever sexually abused?”, but “Did anyone ever force you to have sex with them, including unwanted touching, against your will?”
- Not “are you being physically abused?”, but “Is anyone now hitting you repeatedly or physically harming you?”
- “Has anyone ever hit you repeatedly or physically harmed you?”

TIPS FOR HELPERS



- Write down instructions – assume that under stress people are not taking in all the information they need
- Provide psychoeducational materials (i.e. National Center for PTSD website, many other websites)
- Encourage activities that are self-soothing – meditation, mindfulness, prayer, yoga, etc
- Encourage creative activities – WRITING, art, music, dance, theater
- Promote as much mastery, self-help as possible – involve people in their own care



TIPS FOR HELPERS

Educate about the impact of trauma – give them material to take home

Talk about triggers and explore ability to handle emotions

Use imagination to explore different outcomes – positive and negative

Develop a safety plan – have them write it down

Rehearse

Assess for losses and prepare for loss

WHO IS SUPPOSED TO CREATE AND SUPPLY THE COMPLEX STRATEGIES NECESSARY FOR RECOVERY?

Parents and families

Teachers

Other Caregivers

Mental health workers

Child welfare workers

Corrections officers, probation, parole, law enforcement

Healthcare providers

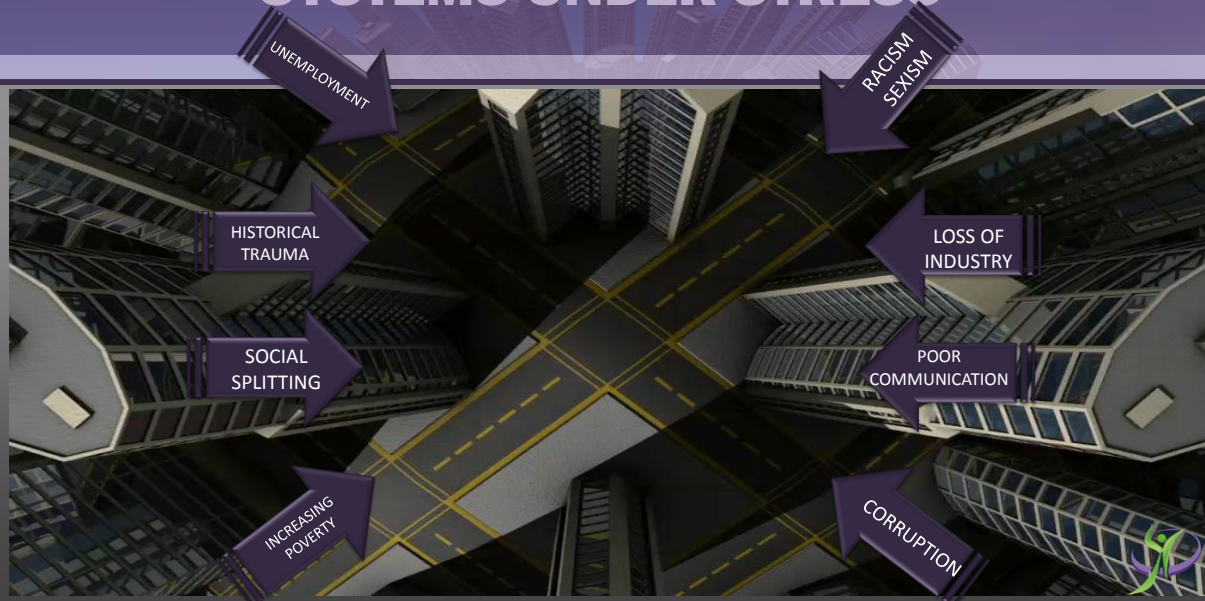


WHAT IS REQUIRED?

- Secure, reasonably healthy adults,
- With good emotional management skills,
- With intellectual and emotional intelligence,
- Able to actively teach and be a role model,
- Are consistently empathetic and patient,
- Able to endure intense emotional labor,
- Are self-disciplined, self-controlled and never abuse power

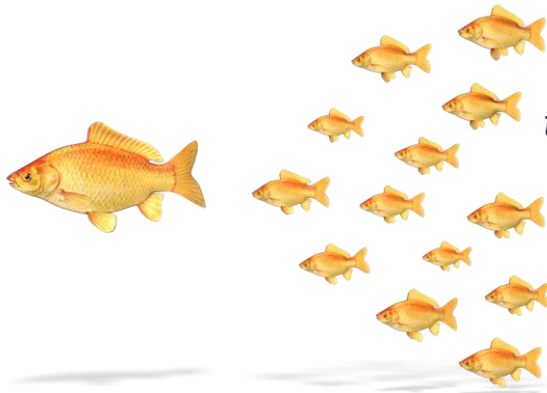


SYSTEMS UNDER STRESS



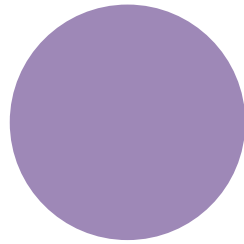


COMPLEX PROCESS



Complex interaction between traumatized clients, stressed staff, pressured organizations, and the current social, political and economic environment.





When two or more systems have significant relationships with one another, they tend to develop similar thoughts, feelings and behaviors.

K. K. Smith et al, 1989

PARALLEL PROCESS



"You can sum up this year's budget with one word."

STRESSED SYSTEMS

- Organizations, like individuals, are living, complex, adaptive systems and that being alive, they are vulnerable to stress, particularly chronic and repetitive stress.
- **Organizations, like individuals, can be traumatized and the result of traumatic experience can be as devastating for organizations as it is for individuals.**



ORGANIZATIONAL TRAUMA



ORGANIZATIONAL HYPERAROUSAL

WHEN EVERYTHING IS A CRISIS





LOSS OF BASIC SAFETY AND TRUST

TRUST WITHIN ORGANIZATIONS

It is almost impossible to successfully implement high performance or high commitment work practices in the absence of mutual trust and respect. But trust is missing in many employment relationships — and ... the atmosphere in the workplace is crucial.

All workplace practices and changes should be evaluated by a simple criterion: do they convey and create trust, or do they signify distrust, and destroy trust and respect among people?

J. Pfeffer, *The Human Equation*





LOSS OF EMOTIONAL MANAGEMENT



COMMUNICATION UNDER STRESS



- Perceptions narrow
- Context is lost
- One-way communication, top-down





- FEEDBACK LOOPS ERODE
- RISK INCREASES
- COMPLEX PROBLEM-SOLVING DECLINES



THE UNDISCUSSABLES



THE UNDISCUSSABLES

Questionable business practices

Financial inequities

Criminal behavior

Suicides

Homicides

Sexual abuse

Other assault

Sexual misconduct

Other shameful acts



I HEARD IT THROUGH THE GRAPEVINE

- 70% of all organizational communication comes through this system of informal communication
- Communicates information far more rapidly than formal systems of communication.
- Communicates information to employees before managers have even begun the process of activating the formal system of communication.
- Stress may “poison the grapevine” – rumors, gossip increase

(Crampton, Hodge & Mishra, 1998)





**INTERPERSONAL CONFLICT INCREASES
TASK CONFLICT DECREASES**



SILOS INCREASE

ORGANIZATIONAL DISSOCIATION





LOSS OF PARTICIPATION



DECISION MAKING UNDER STRESS



- As decision-making becomes increasingly non-participatory and problem solving more reactive an increasing number of short-sighted policy decisions are made that appear to compound existing problems.
- Attention narrows, focus on threat, cognitive rigidity
- Results in premature closure – failure to generate all possible alternatives and possible consequences.



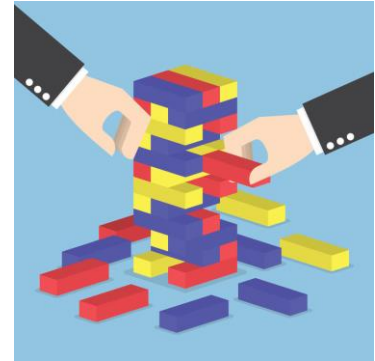
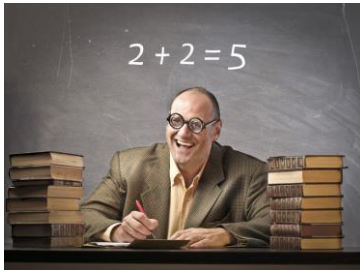
ORGANIZATIONAL - SYSTEMIC AMNESIA

LOSS OF ORGANIZATIONAL
MEMORY

FAILURE TO LEARN FROM THE
PAST

FAILURE TO UNLEARN FAILED
STRATEGIES



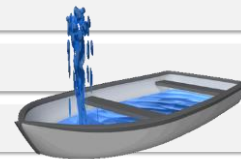


ORGANIZATIONAL LEARNING DISABILITIES



ORGANIZATIONAL LEARNING DISABILITIES

- ☹ Difficulties with learning under stress
- ⚠ Failure to integrate important information
- ✘ Tacit knowledge not replaced; explicit knowledge falsified
- 📖 Labeling that restricts new formulations
- 📖 Self-fulfilling prophecies
- ⏴ Filtering out trauma
- 🧠 Deterioration of memory
- 🔄 Reenactment of failed strategies





MINDLESS, UNSCIENTIFIC ORGANIZATIONAL REENACTMENT

REPETITION OF THE PAST





As the situation feels increasingly out of control, organizational leaders become more controlling, instituting ever more punitive measures in an attempt to forestall chaos



AUTHORITARIAN LEADERS

Expect team members to provide information, not to generate alternative solutions

Work "by the book", ensuring that their staff follow procedures exactly

Impose strict and systematic, sometimes punitive discipline

Expect unquestioning obedience

Have cognitive problems

Unable to deal with complex problems





Staff respond to the perceived punitive measures instituted by leaders by acting-out and passive-aggressive behaviors.



AUTHORITARIANISM TOO OFTEN LEADS TO BULLYING BEHAVIOR





TOXIC LEADERS & PETTY TYRANTS

- Authoritarians may replace participatory leaders
- Participatory leaders may become more authoritarian
- Bullying
- Petty tyranny (Nurse Ratchett)
- Predatory opportunities



LOSS OF COMPLEX THINKING SKILLS





HOSTILE WORKPLACE

- Silencing of dissent
- Increased authoritarianism
- Increased aggression
- Bullying as the norm



SILENCING DISSENT

A group is likely to do poorly if internal dissent is discouraged.

Sunstein, C. R. (2003). [Why Societies Need Dissent](#). Cambridge, MA, Harvard University Press.



THE SILENCING OF DISSENT LEADS TO THE BLIND LEADING THE BLIND



ORGANIZATIONAL GRIEF

- Deaths by suicide or homicide
- Staff or client injuries
- Sudden firings or other departures of key personnel
- The sudden death of a leader or otherwise influential employee
- The effects of downsizing, mergers, hostile takeovers
- Cuts in program funding
- Changes in roles
- Increased and burdensome demands of insurance companies
- Loss of reputation, status



ORGANIZATIONAL GRIEF (CARR, 2001)

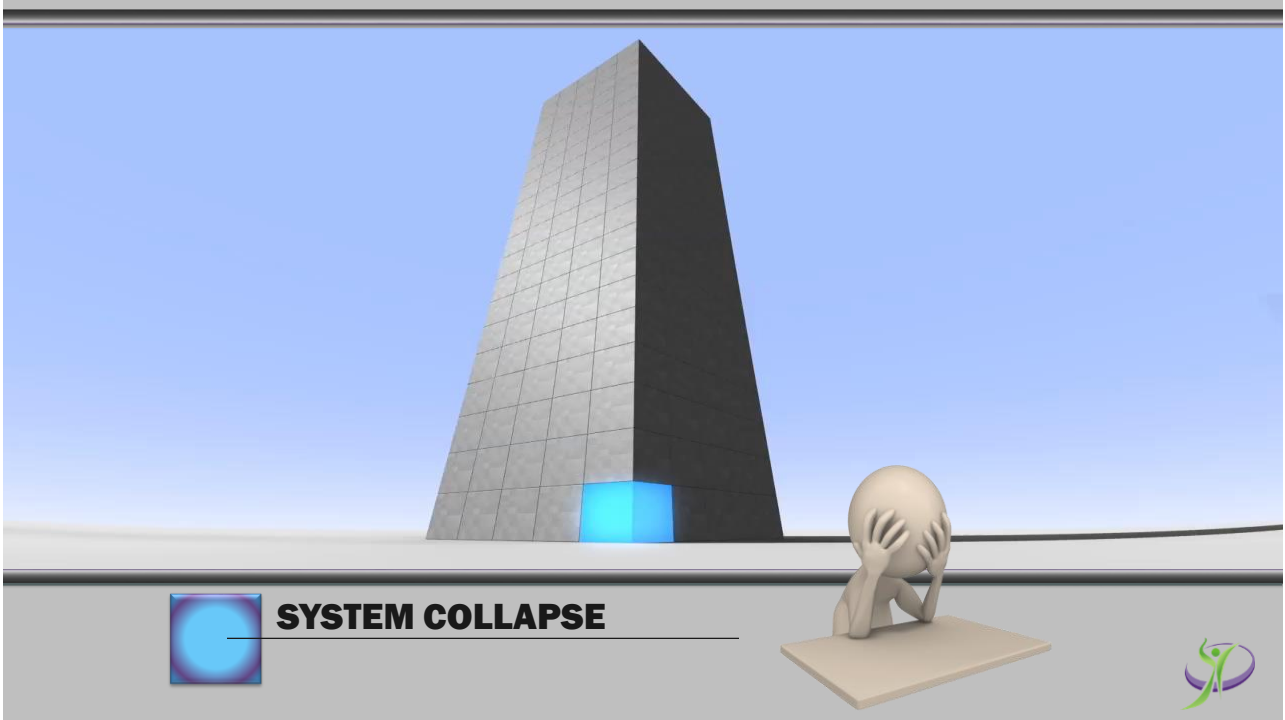
Losses to the organization are likely to be experienced individually as well as collectively.





DEMORALIZATION

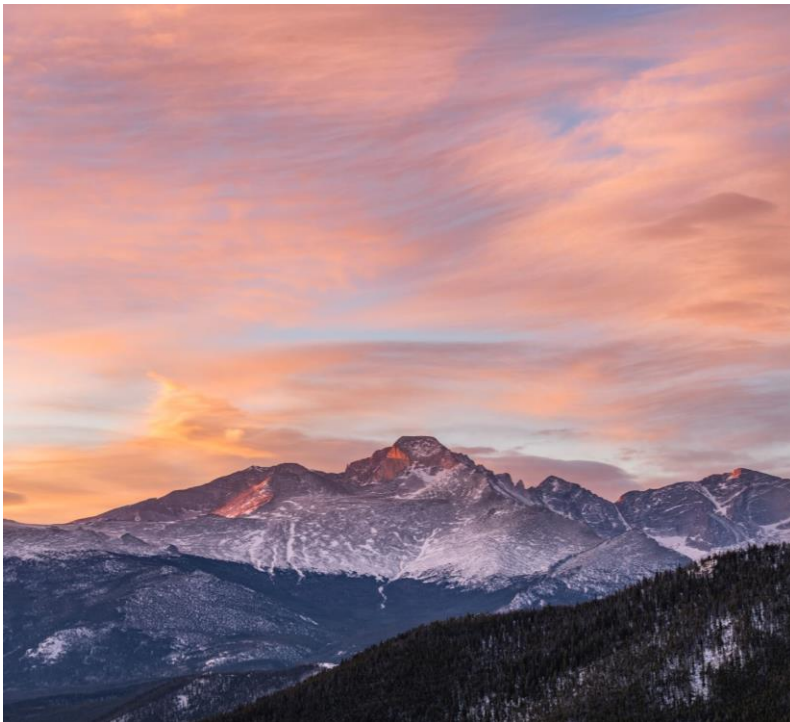




HOW CAN WE EXPECT PEOPLE TO HEAL IF THE HEALERS ARE DYSFUNCTIONAL?



- THESE SITUATIONS CAN LEAD TO HARM TO EVERYONE INCLUDING THE CLIENTS
- FAILURE TO PROTECT
- EMPATHIC FAILURE
- OVERT VIOLENCE OF SOME KIND



Creating
Organizational
Wellbeing



Walter B.
Cannon, M.D.

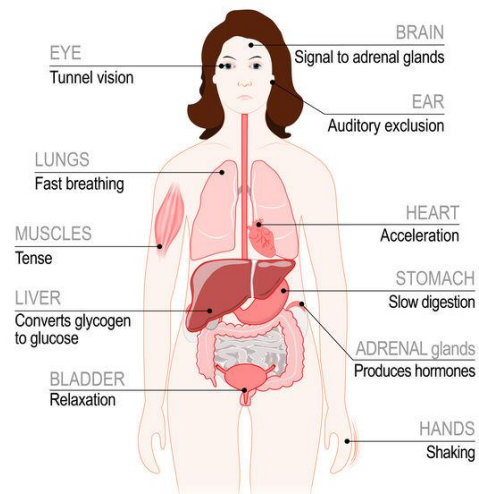
1871-1945



The social organism, like the bodily organism, cannot be vigorous and efficient unless its elements are assured the essential minimal conditions for healthful life and activity (p.322).

The Wisdom of the Body
Walter B. Cannon, 1932

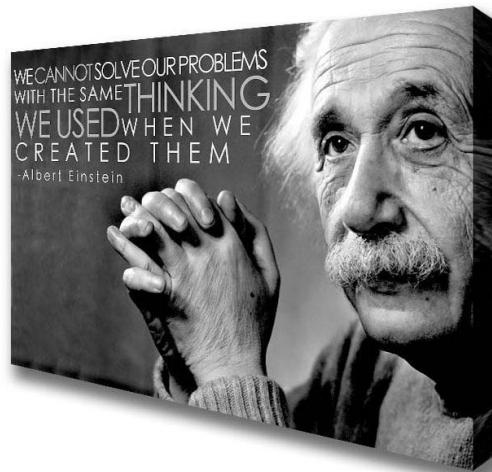
Fight-or-flight response





The most efficient and stable human society would be a body politic modeled after the organization of the human body... A biocracy in which the myriad of differentiated cells would be organized into functional organs all cooperating in a dynamic democracy in which any form of dictatorship would lead to degeneration and death”.

Dr. Walter B. Cannon, Presidential Address, American Association for the Advancement of Science, December 28, 1940



HOW IS A COMPLEX, ADAPTIVE, LIVING COMPANY DIFFERENT FROM A MACHINE?



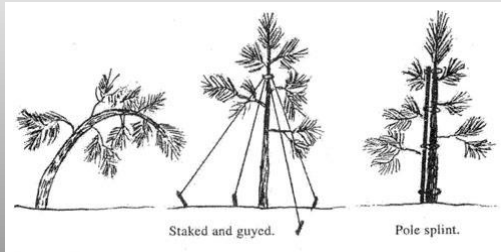
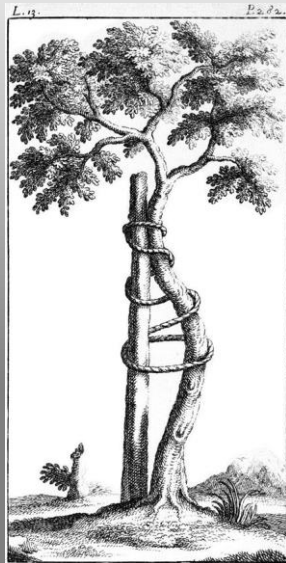
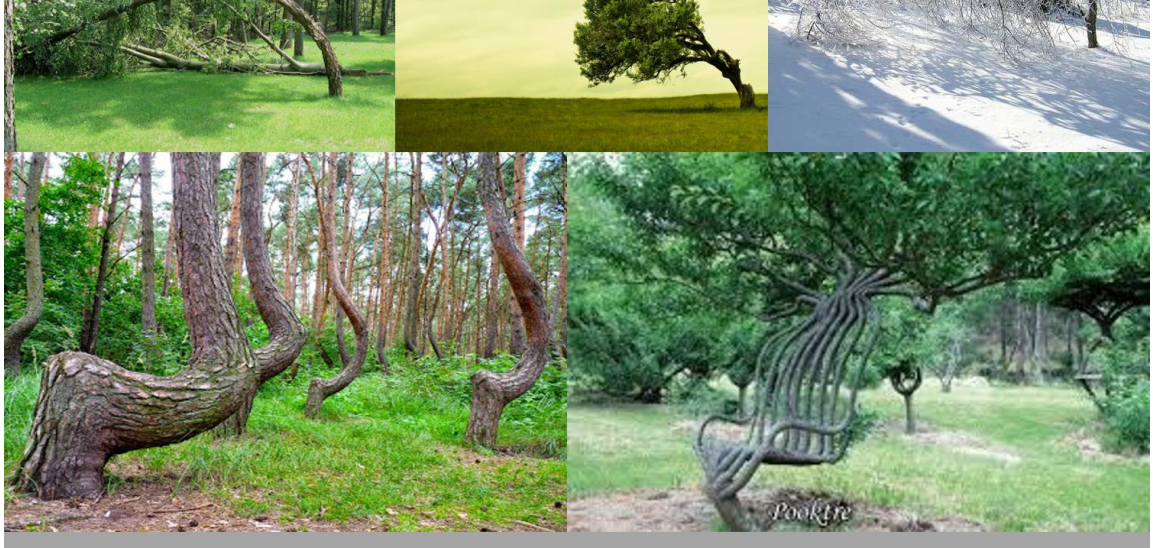
- So what might be the countervailing forces to help us if we recognize our organizations as living beings?
- What differentiates a complex adaptive living system from a machine?



CHARACTERISTICS OF COMPLEX ADAPTIVE LIVING SYSTEMS

- Choice
- Unpredictability means always risk
- Interaction and interdependence
- Global consistency even with change in their parts
- Adaptability
- Openness
- Learning, memory, sensations and emotions
- Sensitive dependence on early conditions (childhood)
- Self-organization – don't need to tell it what to do
- Self-protection – social immunity
- Injury repair
- Emergence and evolution – whole greater than the sum of parts



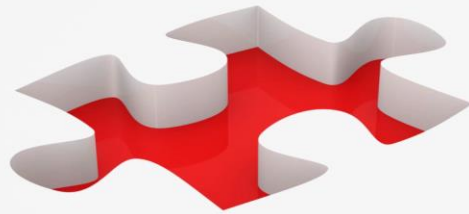


HEALING WAS LIKE STRAIGHTENING A TREE TO GROW TOWARD THE SUN: A LITTLE AT A TIME



SELF-ORGANIZATION

Process by which a structure or pattern emerges in an open system without specification from the outside environment.



EMERGENCE

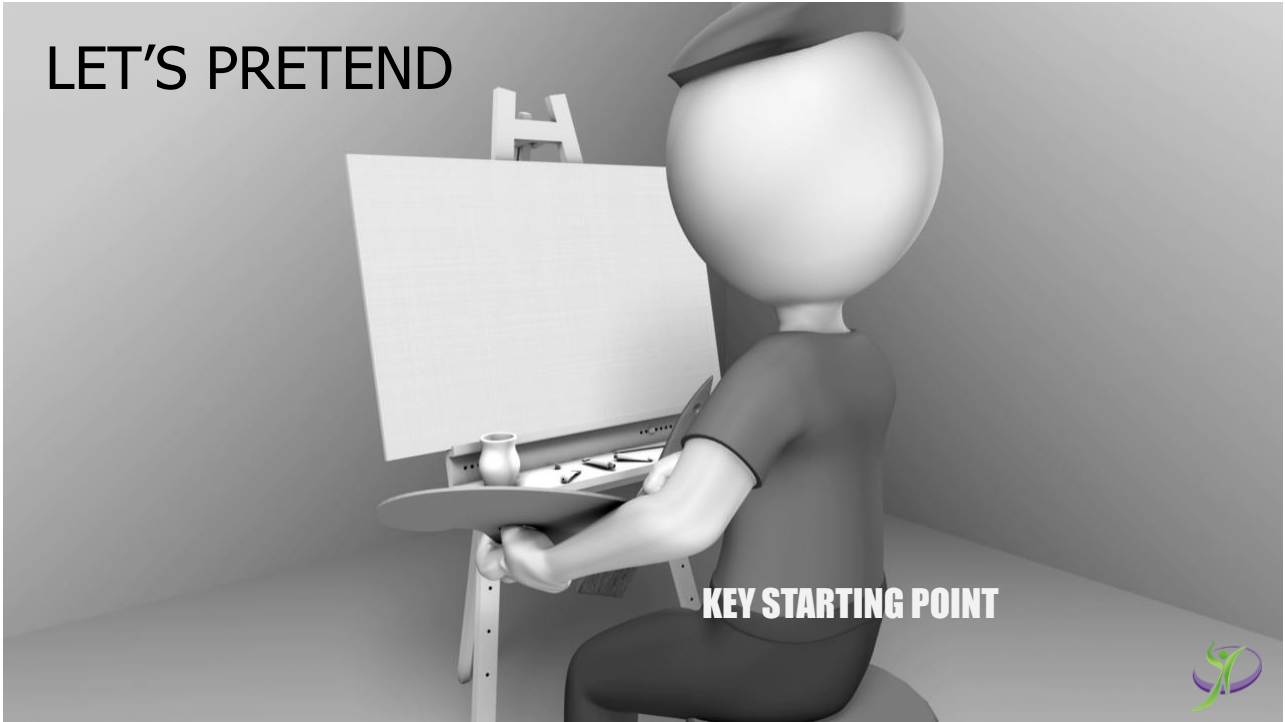


When complex patterns arise out of simple interactions.

The whole is greater than the sum of the parts.



LET'S PRETEND



A HEALTHY SYSTEM

Has a clear and obtainable mission that is driven by a shared, well-articulated vision



IMAGINING A HEALTHY ORGANIZATION: VISION AND PURPOSE

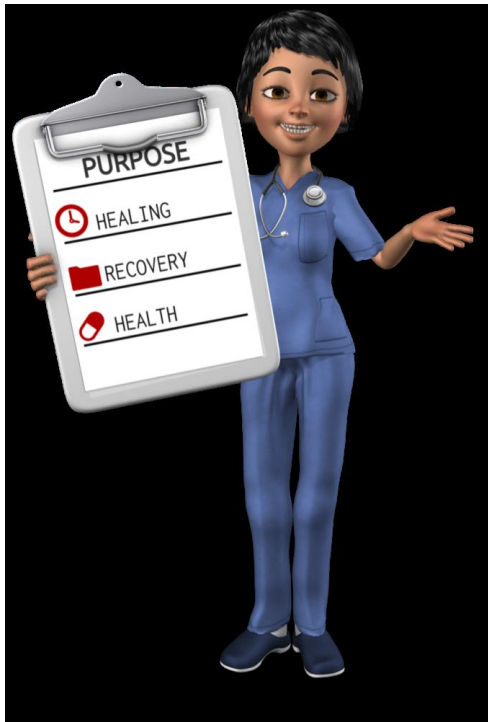
- You will need a clear sense of purpose from the very start of the design process that clearly defines what you want your organization to accomplish.
- From this point on everything you do, every person you bring on-board, every policy you create should serve organizational purpose.



IMAGINING A HEALTHY ORGANIZATION: VISION AND PURPOSE

- If you wanted a vital organization to emerge from your efforts, then you would need to know enough about complex adaptive living systems to provide your organization with the conditions it would need to come alive and stay alive.





IMAGINING A HEALTHY ORGANIZATION: VISION AND PURPOSE

- If your organization is to have more than one purpose, then you will need to begin a more complex process of determining how the purposes will be integrated and not in conflict.
- Many caregiving environments falter or fail because only one purpose is addressed consciously while the other purpose manifests unconsciously, often sabotaging the overall organizational mission without anyone being aware of what is happening.



An organization that counteracts the short-term and long-term effects of stress, adversity and trauma on its managers, staff, and the people it serves while staying true to its mission, expanding social justice and improving the health and well-being of all organizational stakeholders .

**MISSION DRIVEN,
TRAUMA-RESPONSIVE
ORGANIZATION**



IMAGINING A HEALTHY ORGANIZATION:
VISION AND PURPOSE

- What do living systems require?
 - Food
 - Love (broadly defined as “care”)
 - Protection to allow for but not restrict, growth and emergence.



IMAGINING A HEALTHY ORGANIZATION:
VISION AND PURPOSE

- So, you would start with the basics – funding, place, staffing, leadership, security.
- Food, care and protection four depend on the first because funding in an organization is analogous to food and water and shelter for a person – without that there is no source for the energy required to bring this organization to life and maintain its structure and function.
- Many care-giving environments falter on the shoals of inadequate funding, thus they are in a state of *chronic starvation* with all of the attendant dysfunctions that go along with insufficient nutrition.



A HEALTHY SYSTEM GETS A HEALTHY START



ASSESS YOUR OWN ORGANIZATIONAL BODY

-
- Think of your organization as you think of your own body.
 - What does it look like – what do you notice?
 - What is it's temperature?
 - What is it's level of fitness?
 - Does it get good food?
 - Does it exercise?



A HEALTHY SYSTEM

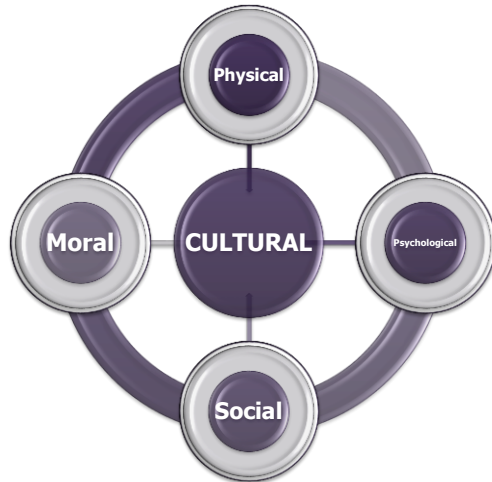
- Is driven by a coherent, practiced, shared value system.
- The values are modeled by leadership.
- The values can be seen in routine daily behavior.
- The values are embedded in the public presentation of the organization.



A HEALTHY SYSTEM HAS PERIODIC CHECKUPS



SAFETY CULTURE



- A safety culture encompasses all four domains of safety
- Team assessment of where the “social immune system” needs repair
- Team begins to define what changes may need to occur to create and maintain a safety culture.
- Respectful boundaries support safety.



WHAT IS A SAFETY CULTURE?

Safety cultures strive to balance individual accountability with system accountability and value open communication, feedback, and continuous learning and improvement

(Chassin & Loeb, 2012).



MORAL ALIGNMENT

It is critical to create processes in organizations within which morally disengaging conversations and practices can be surfaced, described, discussed, and changed so that the management and staff within the organization can become better aligned with organizational values, principles, goals, and behaviors.

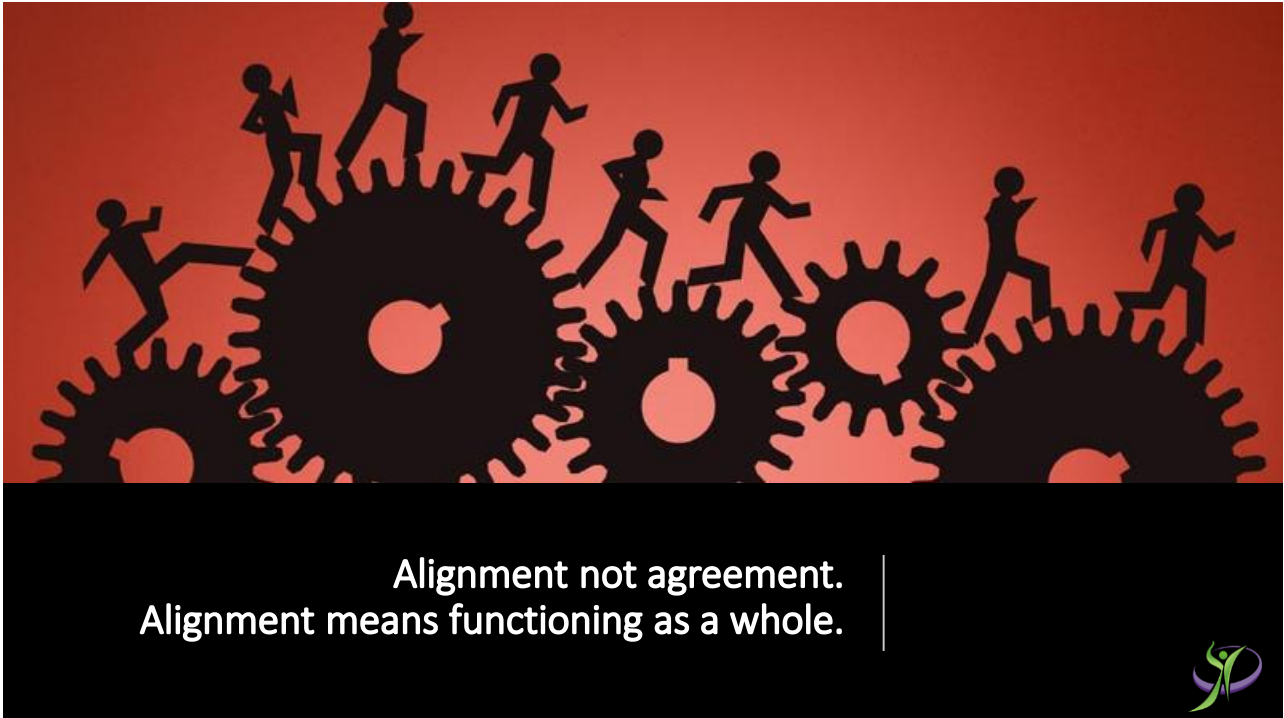


MORAL ALIGNMENT

When a leader is explicit about what he or she believes and values, creates a vision, strategy and goals aligned with those values, and then behaves in alignment with all of that – followers respond with deep trust of their leader.

Lennick & Kiel, 2005. *Moral Intelligence*





Alignment not agreement.
Alignment means functioning as a whole.



**A HEALTHY SYSTEM HAS
DISTRIBUTED POWER**

- The fundamental attribute of how power is distributed is key to successful organizational function.
- The quickest way to destroy a safety culture is by setting up a situation in which power can be abused.
- Set up an organization that functions through democratic, participatory structures.





A HEALTHY SYSTEM HAS DISTRIBUTED POWER

- These are the best -and in many cases the only - protection against abuse of power.
- Structures, policies and procedures are democratic; everyone is expected to participate and lend their voice.
- The organization supports diversity of race, age, gender, education and experience.



A HEALTHY SYSTEM IS A LEARNING ORGANIZATION

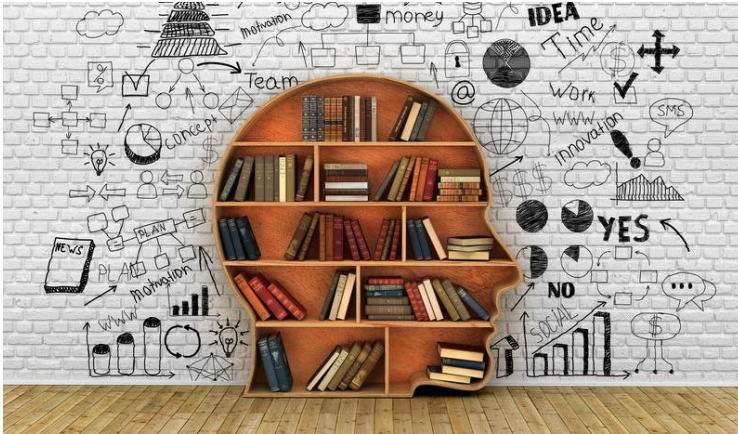


In a learning organization, leaders are designers, stewards, and teachers. They are responsible for building organizations where people continually expand their capabilities to understand complexity, clarify vision, and improve shared mental models – that is, they are responsible for learning.

— Peter Senge —

AZ QUOTES





A LEARNING ORGANIZATION SHARES A KNOWLEDGE BASE

- ATTACHMENT
- DEVELOPMENT
- RELENTLESS STRESS
- TOXIC STRESS
- TRAUMATIC STRESS
- GROUP DYNAMICS
- PARALLEL PROCESS
- COLLECTIVE DISTURBANCE
- ORGANIZATIONAL STRESS
- REENACTMENT
- HEALING AND RECOVERY
- VICARIOUS TRAUMA AND SELF-CARE



A LEARNING ORGANIZATION

- Memory resides within the organization and within individual members
- Memory is captured and stored and passed on to new members
- Painful memories are not dissociated and therefore become available for new learning.



TRAUMA-RESPONSIVE ORGANIZATION




RECOVERING MEMORY

Organizational history is reviewed including:

- Founding vision
- History of trauma
- History of loss
- Failures
- Adaptations
- Successes




A HEALTHY ORGANIZATION HAS A HEALTHY DIGESTIVE SYSTEM

- The key roles for digestion in your body include turning food into energy, growth, and cell repair as well as elimination of waste.
- The food required by your organizational body is money and the organization must turn funding into the energy required for the organization to function, to grow, and to repair itself when damage occurs while minimizing waste.
- In starting an organization and after funding is established there are still many “nutritional demands” that must be met.





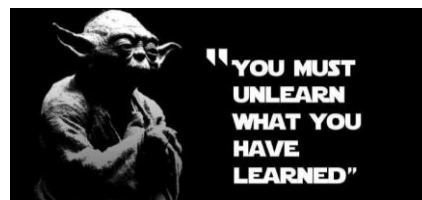
A HEALTHY ORGANIZATION HAS A HEALTHY DIGESTIVE SYSTEM

- The key question when new people or new knowledge comes into the organizational sphere is “What do we need to learn that is new?”
- Since energy is needed for growth and repair and must be conserved, another key organizational question is “What do we already know that we should hold onto?”



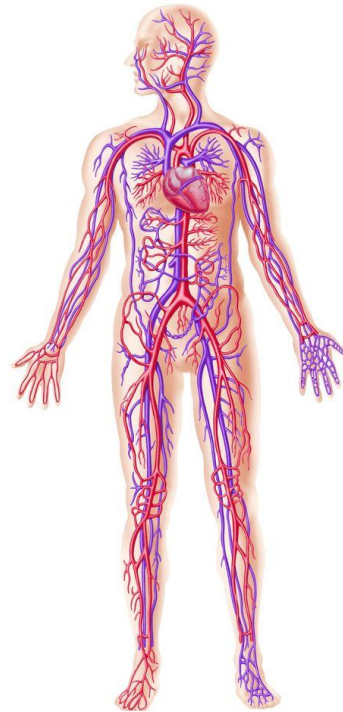
A HEALTHY ORGANIZATION HAS A HEALTHY DIGESTIVE SYSTEM

- Be prepared for the necessary and often unpleasant process of elimination: “What do we need to get rid of?” and “What do we need to unlearn?”
- In order to adapt to a constantly changing environment, being a learning organization means that much unlearning will need to occur again and again.
- Organizational unlearning refers to the discarding of old routines to make way for new ones.



A HEALTHY ORGANIZATION HAS HEALTHY CIRCULATION

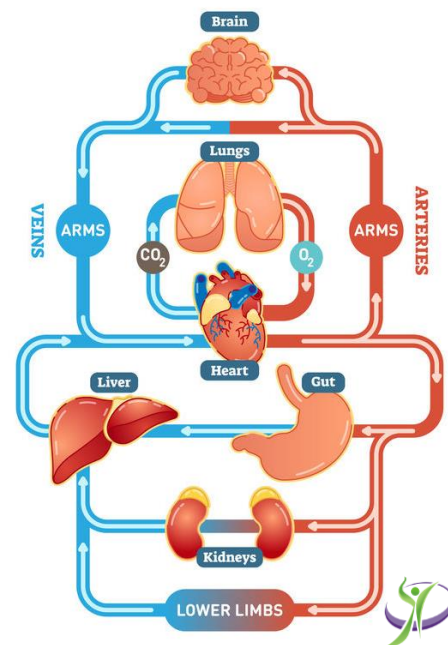
- Circulation is how the body communicates within itself, it is how it brings energy to distant parts and removes toxins.
- The communication network in an organization is the circulatory system.
- It's all based on feedback loops.
- There are many barriers to human communication: psychological, social, and systemic barriers that can interfere with transparent and effective communication.



A HEALTHY ORGANIZATION HAS HEALTHY CIRCULATION

- Any difference among us can make effective communication a problem, so whenever a problem or conflict arises it pays to examine the patterns of communication instead of focusing exclusively on a faulty individual.
- Always look for a system problem, particularly blockages, secrets, dishonesty, double messages, and behaviors that are sabotaging organizational purpose and that are blocking communication channels and isolating component parts.

Human Circulatory System





A HEALTHY SYSTEM HAS A HEALTHY SOCIAL IMMUNE SYSTEM

The social body's ability to recognize and respond to threats to its well-being.



A HEALTHY SOCIAL IMMUNE SYSTEM PROTECTS THE PERIMETER



- Community has a clear, practical value system in constant use
- New members are carefully oriented and adequately trained
- Group identifies values, norms and rules to be established
- Creates mechanism to familiarize all members with the norms



A HEALTHY SOCIAL IMMUNE SYSTEM PROTECTS THE PERIMETER

- Culture must be explicit - Consciously and deliberately planned to promote group objectives (S.E.L.F. Service Planning)
- Must be continually monitored both directly, using instruments, and indirectly by charting behaviors.
- Evidence of any weakening of the culture provokes an immediate, coordinated response by entire group (PRESENCE TOOLKIT)

A HEALTHY IMMUNE SYSTEM

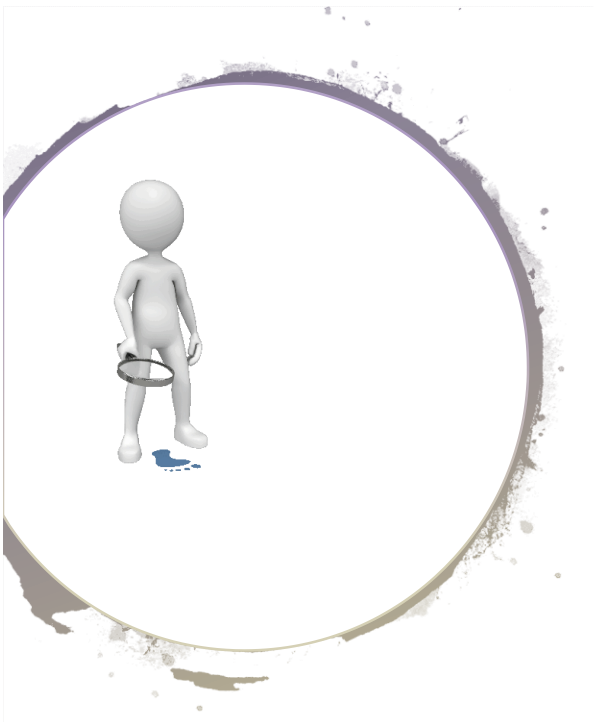
- Gathers information over time
- Stores information over time and is able to access that information later when needed
- Learns from experience and adapts to change
- Has specialists to deal with different kinds of problems
- Returns to normal alert status when acute danger has passed
- Includes the entire body





A HEALTHY SOCIAL IMMUNE SYSTEM
ACCURATELY AND PROMPTLY
RECOGNIZES DANGER

- Rapid response to any violation of:
 - Physical space
 - Psychological space
 - Social space
 - Moral space
 - Cultural space
- Response should be proportionate to degree of danger
 - Goldilocks rule: Not too big, not too small, just right



A HEALTHY SOCIAL IMMUNE SYSTEM
ACCURATELY AND PROMPTLY
RECOGNIZES DANGER

- Conflict is the alarm bell of the social immune system
- Wide definitions of what constitutes violence are universally understood and addressed
- The establishment of safety is the starting point for all learning and healing.
- Best protection against violence is a shared commitment to nonviolence.
- Shared language aids proper assessment (S.E.L.F.)





A HEALTHY IMMUNE SYSTEM MOBILIZES AN INFLAMMATORY RESPONSE



LEADERSHIP: THE BRAIN OF THE ORGANIZATION

- Leaders are the **BRAIN** of your organization.
- The job of the organizational brain, like that of your own brain, is to **COORDINATE, CENTRALLY REGULATE, AND INTEGRATE** the myriad functions that it takes to keep an organization alive.

**Life is like an airplane.
You have to put
your own
oxygen mask
on first.**



LEADERSHIP: THE BRAIN OF THE ORGANIZATION



Understanding the living nature of our systems helps us to think more creatively about:

- the issues of staff morale,
- secondary trauma, and
- burnout

because when these problems are becoming dominant in an organization, our whole organization is falling ill and what the brain has to figure out is whether the diagnosis is a cold, the flu, or something more serious and initiate a response that aims toward health.



LEADING A BIOCRACY

- Leaders need to be purposeful, authoritative, clear and directive especially around mission, values and purpose.
- That means empowering others to develop and learn, to utilize their own creativity and innovation to support group goals, and to take responsibility for changes that they need to make.
- People support what they help to create.





A HEALTHY ORGANIZATION RECOVERS AFTER INJURY

- The process of organizational change must begin with an assessment, generally by someone outside of the organization who is not acutely injured and not in a painful dilemma, but also someone who does not want the organization to continue to suffer.
- If the initial injuries occurred long ago, then the organization has adapted to what may in fact be a crippling situation.



A HEALTHY ORGANIZATION RECOVERS AFTER INJURY

- The signs of dysfunction may be evident to the external observer but to everyone within the organization, this is just “the way life is around here.”
- The organization is surviving but not thriving.
- Too much life energy is going into suppressing the pain and not enough to promoting growth.





A HEALTHY ORGANIZATION RECOVERS AFTER INJURY

- All of the stakeholders in the organization must engage in a visioning process for what they want the organization to be once this recovery process has unfolded.
- In the complex adaptive living system that is a program, everyone is interdependent and interactive so the problems that exist must be approached as problems *of* everyone that can only be solved *with* everyone.






CREATING PRESENCE[®]
is a new online
organizational and
clinical approach for
creating trauma-
informed, trauma-
responsive and
trauma-resilient
organizations.



CREATING PRESENCE builds on and expands our current understanding of what it means for entire organizations to immerse themselves in understanding and responding to the scientifically grounded and extensive knowledge about stress, trauma and adversity.



A new approach for creating trauma-responsive and trauma-resilient organizations that focuses on developing the *ethical climate* necessary to help people who have suffered *moral injuries* to heal, recover, and participate in a vital community.

PRESENCE

(Senge, et al. 2004)

P.R.E.S.E.N.C.E. is an acronym for linked guiding values that consistently undergird and inform good practice.



P.R.E.S.E.N.C.E.:

A 21st Century Model for Organizational Health

P = Partnership and Power

R = Reverence and Restoration

E = Emotional Wisdom and Empathy

S = Safety and Social Responsibility

E = Embodiment and Enactment

N = Nature and Nurture

C = Culture and Complexity

E = Emergence and Evolution

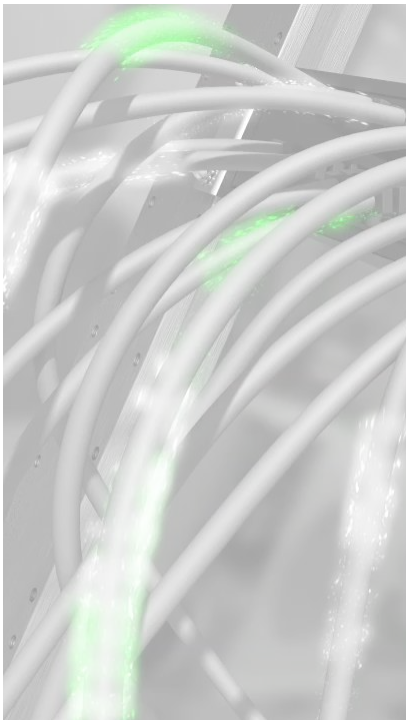


*IT'S NOT WHAT'S WRONG WITH YOU, IT'S WHAT HAPPENED TO YOU!**

Getting everyone in the environment in alignment around Core Values and competencies that are culturally relevant and trauma-informed in a way that is economically feasible and logistically possible.



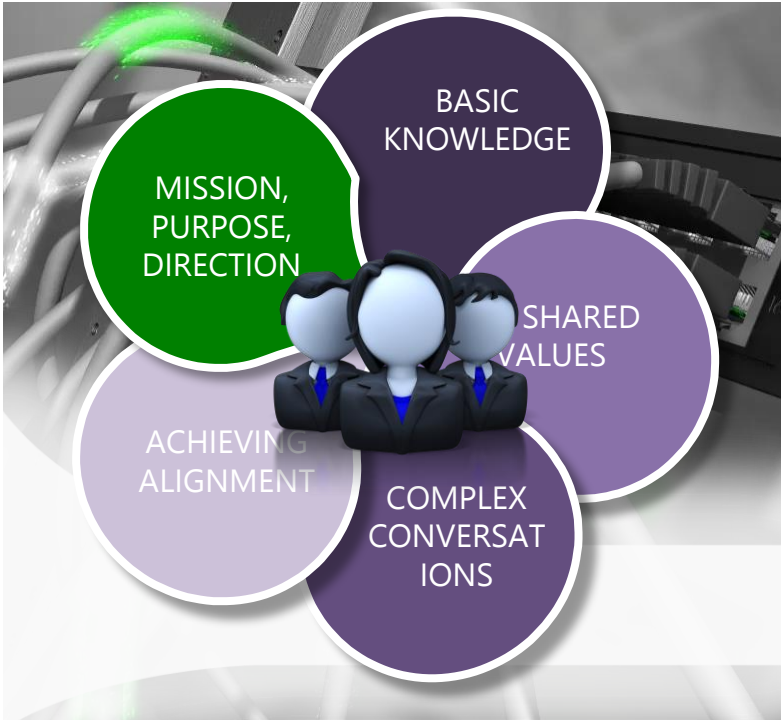
*J. Foderaro, 1991; Bloom, 1994



CREATING PRESENCE AN ONLINE ORGANIZATIONAL APPROACH TO TRAUMA-RESPONSIVE SERVICES

- Cost-effective
- Control by the organizational itself
- Self-help with coaching
- Success determined by extent of organizational commitment and alignment


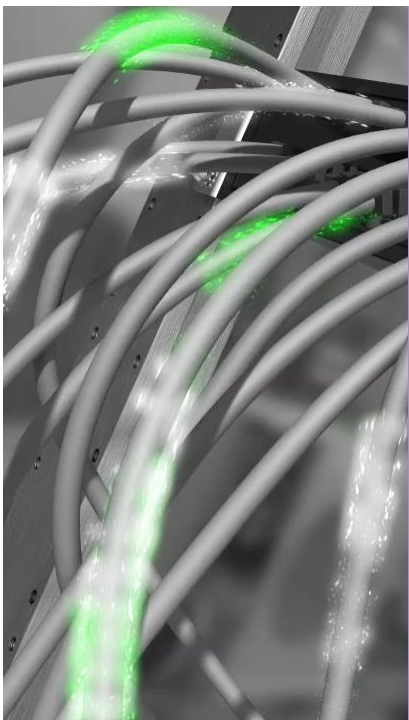




CREATING PRESENCE

OBJECTIVES


- To provide everyone in an organization with some basic knowledge about trauma, adversity and stress.
- Emergence of trauma-informed values, knowledge, practice and skills.
- Deeper, richer, more productive conversations within the organization from diverse points of view.
- A whole organization that is in alignment
- Clarity around mission, purpose, and direction for all of the staff.

TRACK SYSTEM

- Begins with 10-minute video segments
- Self-check questions
- Discussion Boards
- Variable methods of adult learning:
 - Supplementary videos
 - Supplementary handouts
 - Supplementary activities

**ALL STAKEHOLDERS IN THE ORGANIZATION
WILL PARTICIPATE**



WHAT IS *CREATING PRESENCE*?

- **INTRODUCTORY TRACK (27 segments)**
 - Explaining the process
 - Trauma and individuals
 - Trauma and organizations
 - Three brain regulation skills
- After that, coursework is specialized for the four main groups of staff members using the values of P.R.E.S.E.N.C.E. as the framework for:
 - LEADERSHIP (42 segments)
 - CLINICIANS (42 segments)
 - DIRECT SERVICE (42 segments)
 - INDIRECT SERVICE (34 segments)



CONCEPTUAL INTEGRATION

- **DRAWING FROM PRACTICES EMBEDDED IN**
 - Mindfulness
 - Motivational interviewing
 - CBT and DBT
 - Solution-focused therapy
 - Trauma processing approaches
 - Therapeutic community practices
 - Organizational development theories, especially Peter Senge, Otto Scharmer and colleagues
 - And many others



INSTITUTE FOR HEALTHCARE
IMPROVEMENT

The Plan-Do-Study- Act (PDSA) cycle


A useful tool for
documenting a
test of change.



ORGANIZATIONAL CULTURE


*Culture matters because it is a powerful, latent,
and often unconscious set of forces that
determine both our individual and collective
behavior, ways of perceiving, thought patterns,
and values.*

Edgar Schein,
The Corporate Culture Survival Guide




OUR VALUES MATTER

MORAL INJURY



Underlying most traumatic contexts is the theme of injustice and the existential and relational impact of suffering at the hands of others' moral failings.



(Litz and Kerig, 2019)

TOWARD A TRAUMA-INFORMED PHILADELPHIA

<http://www.drexel.edu/dornsife/practice/center-for-public-health-practice/toward-a-trauma-informed-city/>

Philadelphia ACEs Task Force

www.PhiladelphiaACEs.org

CAMPAIGN FOR TRAUMA-INFORMED POLICY AND PRACTICE (CTIPP)

www.CTIPP.org

CREATING PRESENCE

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