

# Trauma Informed Care for Homeless Young People: An Integrated Systems Approach

**By Patrick Tomlinson, Director of Culture and Practice Development, International Practice Development and Luci Klendo, Learning and Development Co-ordinator, Lighthouse Institute**

It is common for young people to present at youth homelessness services with histories of complex trauma.

Complex trauma can be defined as:

*'repetitive, prolonged, or cumulative; most often interpersonal, involving direct harm, exploitation, and maltreatment including neglect/abandonment/antipathy by primary caregivers or other ostensibly responsible adults; often occurring at developmentally vulnerable times in the victim's life, especially in early childhood or adolescence...'*

(Courtois, 2009).

According to Guarino, Soares, Konnath, Clervil an Bassuk (2009), on-going exposure to traumatic stress can impact all areas of people's lives including biological, cognitive, and emotional functioning; social interactions/relationships; and identity formation. Young people who have experienced multiple traumas do not relate to the world in the same way as those who have not had these experiences. They require services and responses that are sensitive to their experiences and needs.

It can be argued that being homeless during a developmentally vulnerable stage such as adolescence is, in itself, a form of complex trauma. Youth homelessness services will inevitably need to provide care to survivors of complex trauma. It is essential therefore for the homelessness sector to develop integrated trauma-informed models of care that are able to support young people with trauma histories. Trauma Informed Care (TIC) is emerging as a best practice model that can provide organisations a systems approach that supports traumatised homeless young people to recovery.

Organisations need to be mindful about the impact that working with young people with complex trauma histories can have on the organisation. A trauma informed approach is one where the whole of the organisation is organised in such a way that takes full

account of the young people's trauma, and how the whole environment the young person is in is considered relevant to the recovery process. This means the way the organisation is managed, the kind of processes that go on at all levels of the organisation, in addition to the specific therapeutic interventions used in direct care with young people.

As Bloom (2005, p.63) stated, 'Traumatic events — and chronic stress — can produce a similar impact on organisations. Without intending to do so, without recognising that it has happened, entire systems can become 'trauma-organised'. A traumatised organisation, like a traumatised person, tends to repeat patterns of behaviour in a way that prevents learning, growing, and changing (Bentovim, 1992). Like individual trauma survivors, systems find it very difficult to see their own patterns.

For an organisation to be effective in its work of enabling traumatised homeless young people to recover, it needs to be especially aware of the way in which trauma tends to be re-enacted within an organisation. Traumatized young people will try to create re-enactments of their traumatic experiences for various reasons. One simple reason is that it is familiar to them, and therefore re-assuring in some way even though the consequences can be destructive.

These young people are especially fearful of change. Even if we are trying to provide a healthy environment for them, it is new and unfamiliar, and therefore potentially threatening. A traumatised young person may feel that a return to a chaotic and abusive environment is inevitable, so rather than wait for it to happen they take control and try to provoke it to make things feel more predictable.

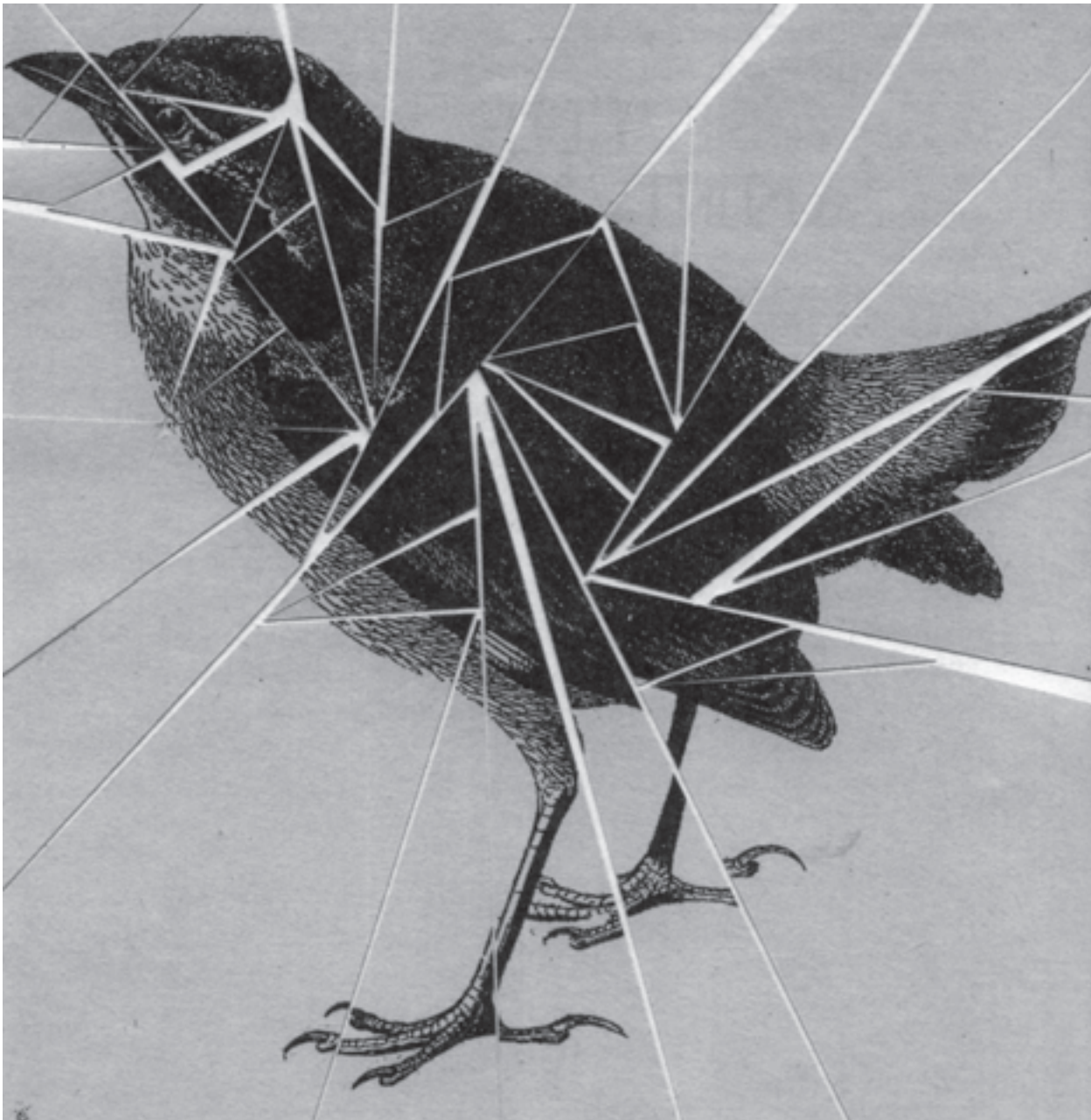
On the other hand, if the young person is able to identify the new environment as potentially positive and hopeful, this will then raise anxieties about being let down and rejected. The young person will challenge, test and at times attack the new environment to see how reliable and trustworthy it is. Another, more benign reason the young person will create re-enactments is in an attempt to resolve their specific traumatic experiences. A young person who has been traumatised may feel compelled to continuously act out the trauma with those around them, as an attempt to find a better outcome (Barton, Gonzalez and Tomlinson, 2012).

To date, theoretical frameworks and approaches to working with traumatised young people have been emphasised in the following descending order: first, the impact of trauma on the individual; second, the impact of vicarious trauma on those who work with the individual; and last, the impact on the organisation providing the service.

The implication of this is that there is a major focus on the impact that trauma has on an individual, but little focus on the impact that trauma can have on every level of the organisational system. The difficulties facing the organisation as a whole can often be underestimated. As a result, the organisation may fail to adopt the measures and processes described above, which are necessary to support and sustain the work (Farragher and Yanosy, 2005).

A 'trauma-informed' approach is one that influences every aspect of the work with young people: the work with the individual young person; the work in groups; the way we organise the physical environment and daily routines; the way we run our organisation; and the relationship with the wider community (Barton et al., 2012). A recovery oriented approach to supporting traumatised homeless young people requires an integrated trauma informed system of care that encompasses all aspects of the organisation. We need to have the following elements integrated into the organisational system:

- appropriate and consistent theoretical framework
- understanding trauma and its impact
- organisational culture of non-violence
- promoting safety
- ensuring cultural competence
- supporting consumer control, choice and autonomy
- sharing power and governance
- culture of thoughtfulness and communication
- consistent language
- integrated relationships between different professionals, such as care workers and therapists
- clear task and boundaries between the different professionals that work with the young people, as well as the different departments and roles within the organisation



- an understanding that healing occurs through relationships
- those who care need to be cared for
- a belief that recovery is possible
- positive experience of community
- outcomes based approach
- management, the processes and structure of the organisation ensure the therapeutic culture runs consistently throughout the organisation.

Most importantly, a trauma-informed approach requires all systems within the organisation and its culture to be fully integrated. Achieving integration means working together in a complimentary way, where each part of the whole understands its own role and that of others in relation to the therapeutic task.

Integration is also a term used in child development (Winnicott, 1962), meaning the child has developed a coherent sense of self as a separate person. An infant is an

unintegrated state emotionally held together by the care giver, and moves towards emotional integration normally by the age of three.

Traumatised children have often experienced their environments and selves to be in a state of disintegration, where things fall apart and become fragmented. The recreation of this state is what the young people we work with may fear and at the same time try to recreate within the organisation. Therefore maintaining an integrated system that is trauma-informed and sensitive to the young people's needs, while remaining resilient, is essential to the therapeutic task. It could be said that it is actually the central aspect of the therapeutic task. ■

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