

TRAUMA INFORMED PRACTICE IN SOCIAL HOUSING - HOW DO WE GET THERE?

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An Ghníomhaireacht
Tithíochta
The Housing Agency

Why do we need Trauma Informed Anything?

100%

Staff Burnout

100%

Customer Fears / Expectations

100%

Service Improvement

TRAUMA INFORMED PRACTICE IN SOCIAL HOUSING

Social Housing Supports



Roads – Pothole Trauma Anyone?



TRAUMA INFORMED PRACTICE IN SOCIAL HOUSING

What Does Not Work and Never HAS but we all gave it a go!

- **Argue** that Customer has “problem” and “must change”
- Offer **advice** and prescribe solution without permission; fail to encourage client to make own choices
- Use **authoritarian** / **expert** stance, leave Customer in passive role
- Do **most** of the talking, act as a one way information delivery system and Impose label(s)
- Behave in a **punitive**/ **coercive** fashion



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Trauma Informed Care/ Practice (TIC/ TIP/ TICP)

Safety: Prioritisation of staff/ service user safety (physical, psycho/ emotion.) Environment, how is it designed?

Trustworthiness: Transparency (policies and procedures) to build trust (staff, Customers/Service Users, community)

Choice: Support shared decision-making, and choice in Housing Assessments / Support Plan goal setting (ensure staff have a voice in decision-making; be mindful trauma can cause difficulties in developing trusting relationships)

Collaboration: Value staff input and other agency experience, improve system by using formal/ informal peer support/ mutual self-help; ask Customer and staff what they need; actively involve Customer in service delivery

Empowerment: Give Customer and staff strong decision-making voice at individual and organisational level. Tenant Groups / Elected Members

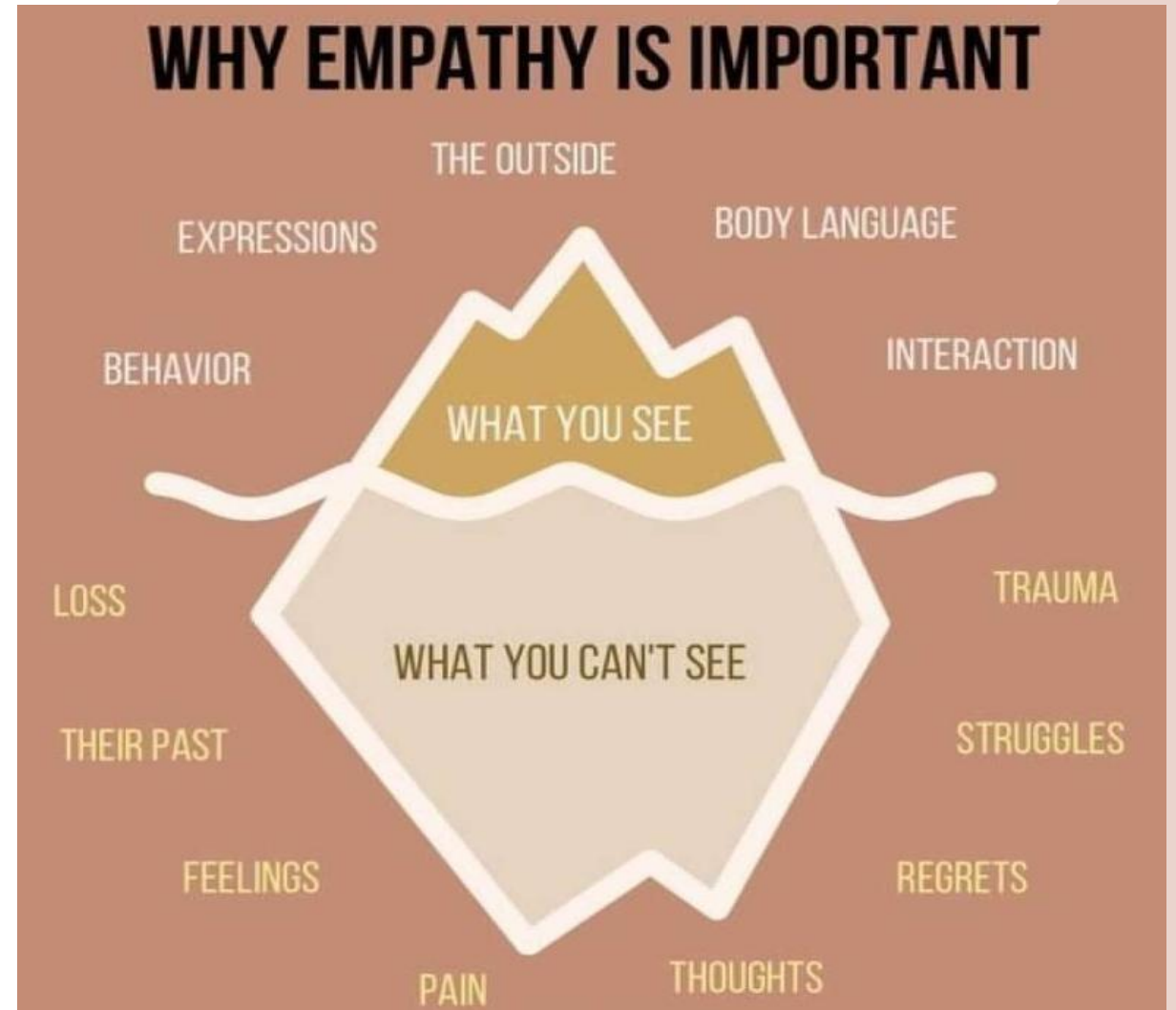
Cultural consideration: Move past stereotypes and biases; offer access to gender responsive services; leveraging value of traditional cultural connections.



TRAUMA INFORMED PRACTICE IN SOCIAL HOUSING

Trauma Informed Care/ Practice = collection of approaches that translate a neurological and cognitive understanding of how trauma is processed into informed clinical practice/service provision that addresses symptoms of trauma.

Not designed for treatment of trauma experience per se (e.g., processing the trauma narrative) but for assistance in managing symptoms and reducing patient re-traumatisation in the care experience



How do we get there.....

Panel Insights

Audience Insights

What Training Format Works

