Children and Youth Planning Table of Waterloo Region

Children and Youth Planning Table
Continuous Professional Learning Committee CPLC Meeting Minutes
PART 2: A Discussion with Dr. Barbara Ward – Trauma Informed Practices

Location: Virtual
Date: Friday, August 27th 2021
Time: 10:30am – 12:00pm

Presenter: Dr. Barbara Ward
CPLC Members in Attendance: Anne Coupland, Debbie Jones, Mandy Martin, Silviu Kondan (SPA), Lesley Barraball (Co-Chair), Corie Schweertman (Co-Chair), Tracey Stroeder
Other Members in Attendance: Margie McLean (CYPT Backbone), Joana Lincho (CYPT Backbone), Alison Pearson (CYPT Backbone), Erin Schreiter, Wanda Kampijan

Agenda

AGENDA ITEM	Notes
Initial CPLC Meeting (10:30-11:00AM)	The CPLC team convened to discuss outstanding agenda items prior to the broader presentation with Dr. Barbara Ward and with the other external community members interested in trauma informed approaches to supporting children, youth and families. The group first began a discussion about their recent observations on the stress levels across the system with the school term beginning in September. Many noted that the autumn is a particularly taxing and challenging time for educators and for families – especially those that rely on readiness and preparedness protocol to ensure that their families are safe during the fourth wave. Members did, however, feel optimistic when hearing about the motivation and resiliency of those supporting community members most impacted by the pandemic. CPLC members also noted that there have been major management changes across the community – which they anticipate will have positive outcomes throughout the year. Silviu provided a brief summation on the feedback survey results from the anti-racism 102 trainings, which he shared via email with the team. The group was happy to hear about the positive direction of this work and are excited to promote the next steps. Silviu mentioned a couple highlights: • In gathering insights from the anti-racism 102 sessions led by Evelyn Amponsah, the CYPT is excited to share that the feedback survey indicated an overwhelmingly positive response amongst both leadership and front-line participants – 100 percent of whom noted that they would recommend the training to others.

	• Respondents to the feedback survey reflected on their new learnings regarding anti-racism tools and techniques that they could use in their everyday workplace. • Respondents were also very appreciative of the opportunity to come together in an accessible and open dialogue and to learn from the facilitators through practical case study examples. • Front-line participants, in particular, noted the importance of leadership and management staff in proactively centering anti-racism practices in organizational settings. • The CYPT and Immigration Partnership are continuing to discuss ways in which the two collaboratives can continue organizing anti-racism trainings for community members, keeping in mind the positive and informative responses from the anti-racism 102 feedback. **Action Item:** ➢ Silviu and the Co-Chairs will discuss in further detail on how the CPLC can be integrated in future iterations of the collaboratives' anti-racism work. Lesley thanked the team for their input on the criteria for endorsement work. Lesley noted that there are no major changes at this point – and that the next steps require a conversation with other CYPT groups to discuss how to make the criteria functional on a digital platform. **Action Item:** ➢ The Co-Chairs and Silviu will update the team on this work over the next couple of weeks. Corie informed the team that the Teams channel is functional and that she can be reached for support if anyone needs assistance using this platform.
Welcome & Introductions:	Lesley welcomed members of the CPLC and other members for the second iteration of our shared discussions around trauma informed learnings, resources and trainings with Dr. Barbara Ward as the presenter. Corie began the meeting by providing a territorial acknowledgement and thanking Dr. Ward for engaging conversation during the previous meeting.
Trauma Informed Work in Waterloo Region – A Presentation by Dr. Barbara Ward	Dr. Ward began her presentation by providing a synopsis on how trauma informed approaches can be integrated within organizations – of any size and at various levels of management. For example, Dr. Ward noted that trauma informed approaches should be embedded in policy, procedures, across human resource protocols and in the strategic direction of organizations. Moreover, Dr. Ward mentioned the importance of establishing universal screening and options for clients/beneficiaries to have specific services related to treating trauma. Dr. Ward expanded to explain that trauma is experienced by all of us and that learning about trauma is not only relevant when working with service users who explicitly seek services in this area. Trauma – based on challenging

	personal experiences and forms of discrimination – is embedded within structural barriers and inequities. Therefore, a trauma informed approach necessitates both the need to change societal perceptions of trauma and the need to create direct action that is reflective of the experiences of trauma. Based on this point, Dr. Ward provided a brief history of her own research and experience regarding this topic as well as points on what she believes are critical areas where collective effort can begin. For example, Dr. Ward spoke about the importance of shifting the story of trauma to encompass alternative voices and meanings focused on personal agency and efficacy rather than on failure, guilt, disconnection and shame. Through her research, Dr. Ward also developed a list of questions that can support those assessing where individuals are in their process of trauma healing. The intention of this scale is to define experiences of trauma as events rather than as defining parts of our identity. Dr. Ward continued to discuss the importance of discussing trauma informed work through the notion that we, as a local community, need to begin thinking about what are our shared local commitments to trauma informed integration. While funding has supported this work in the past, Dr. Ward expressed the importance of beginning this work sooner than later and the importance of having a catalyst(s) to lead this work without an overreliance on funding – or else motivation and efforts will transpire once funding runs out.

DISCUSSION	Lesley thanked Dr. Ward for her very informative presentation and her call to action in this area of work. Lesley then prompted the group to discuss the following questions:
	• What excites you/energizes you/resonates with you about the ideas you are hearing?
	• What other ideas come to mind?
	• Is this a project area the CPLC should mobilize around/move forward?
	• Is this the time to move trauma informed work forward across our community? If yes, why now?
	  ○ If yes, what are the first concrete steps we can take to make move trauma informed approaches forward across our community?
	  ○ And if yes, what is the next step for this committee?
	
	The group noted how consistent these conversations have been across our community organizations who serve children, youth and families. The group spoke about the importance of having aligned messaging – as reflective of Dr. Ward's points about shifting the narrative and incorporating trauma informed lessons and learnings for all who participate, engage and support the work of organizations (e.g. participants, font-line staff, management, etc). One area of interest was thinking about how we look to engage with organizations that do not necessarily rely on or specialize in clinical services. In agreement, the group noted that across the system, a trauma informed introduction 101 training is just as important as are more in-depth resources for clinicians and those working directly in clinical services.

	Both Dr. Ward and Lesley expressed that a common concern is that individuals do not want to "make the situation worse or cause harm" to those with whom they work with. By being more intentional about how we approach our relationships through trauma informed learnings we do, however, begin to realize that us as community members have a substantial impact on the lives and well-being of children, youth and families – and therefore, we should be cognizant in appreciating the complex experiences that shape the lives of those who we support. For those who have begun this work, one beneficial aspect has been the more nuanced observations of how staff and participants enter services or programs (i.e. thinking about all of the individual experiences that shape the person's social positionality). The group also spoke about the importance of ensuring that belonging, equity and anti-racism are all considered as complementary areas of our growing work. In agreement, the group noted that supportive relationships and enhancing feelings of belonging are at the centre of healing through trauma. Moreover, the group suggested that this was an especially important time to begin collaborating in this area as the COVID-19 pandemic has exacerbated challenges and experiences of trauma that were existing in our community. In regards to the third question on if/how the CPLC can mobilize this work, the group noted that members of CPLC are motivated and excited to incorporate this area within their action planning. In particular, the CPLC is well suited as a 'catalyst' of members championing this area through professional training opportunities and through the potential development of accessible community resources. Trauma informed learning is also closely tied to the SFPs and this area in particular is noted as an emergent area that is relevant across the CYPT membership. An important consideration is to ensure that the CPLC works in collaboration with other groups who also champion this work (i.e. the Brain Story Mobilization Group). The group agreed that there will be continued conversation to work in synergy in this area. In regards to next steps that should be taken, the group noted that it will be important to do a scan of the community and to gather insights on what resources are being mobilized, which organizations are centering this work and where the gaps are. As an early needs assessment phase, members suggested that it will be important to collaborate with Lead Agency (Lutherwood) who has been working on a community scan as part of a broader development of a targeted prevention strategy. One core area that can first be addressed is shared language. The group agreed that it would be beneficial to share the WRDSB's 5 Principles graphic (more detail in minutes from July 29th 2021) through the CYPT's social channels. This would be a small step towards developing a more comprehensive action plan in supporting trauma informed approaches through the CPLC. The group mentioned that the resource can be formatted and shared with the language for educators that Dr. Ward and the WRDSB's first developed – to credit their great work in the development of this resource.

	The group ended on a positive note of optimism in continuing to centre this work and in working together to develop useful resources and opportunities for the membership. **Action:** ➢ The Co-Chairs and Silviu will plan an additional CPLC meeting with Dr. Ward and members interested in continuing to support this area of work. ➢ The CPLC will consider how to survey/scan the community to identify resources, trainings, strengths and gaps across the system ➢ The CPLC team will plan to support more immediate needs through shorter-term actions (i.e. sharing the 5 Principles resource through CYPT's channel). ➢ The CPLC team will consider the development of a tool to assess if organizations can be more trauma informed.