

# Community Violence and Mental Health: Supporting Health Center Staff and Building Resilience

Monday, November 29, 2021 at 2:00 - 3:30pm ET



**NATIONAL  
NURSE-LED CARE  
CONSORTIUM**  
a PHMC affiliate

# National Nurse-Led Care Consortium

The **National Nurse-Led Care Consortium (NNCC)** is a membership organization that supports nurse-led care and nurses at the front lines of care.

NNCC provides expertise to support comprehensive, community-based primary care.

- Policy research and advocacy
- Technical assistance and support
- Direct, nurse-led healthcare services

# Community Violence and Mental Health Webinar Series

## **Webinar 1:** Supporting Patients and Building Resilience

Monday, October 25, 2021 at 2:00pm ET

## **Webinar 2:** Supporting Health Center Staff and Building Resilience

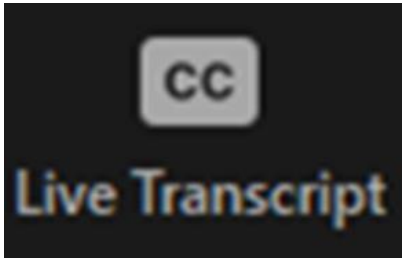
Monday, November 29, 2021 at 2:00pm ET

## **Webinar 3:** Health Center Strategies for Violence Prevention and Intervention

Wednesday, December 15, 2021 at 2:00pm ET

Registration [link here.](#)

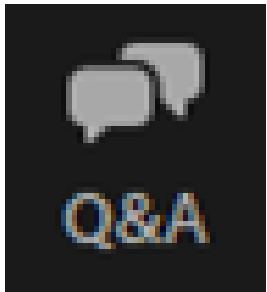
# Housekeeping



**Captions:** To adjust or remove captions, click the “Live Transcript” button at the bottom of your Zoom window and select “Hide Subtitle” or “Show Subtitle.”

## Please ask questions!

- Click Q&A and type your question into the open field.
- The Moderator will either send a typed response or answer your questions live at the end of the presentation.



**Evaluation:** Please take the Zoom evaluation at the end of this webinar to help us improve.



**Continuing Education Credits:** You must complete survey to receive CE credits.

**Technical Issues?** Please raise your hand to let us know.

# Today's Agenda

- Introduction/Grounding Exercise (10 minutes)
- Didactic Presentation (20 minutes)
- Audience Q&A to Didactic Speaker (5 minutes)
- Panel Discussion (25 minutes)
- Audience Q&A to Panel (25 minutes)
- Wrap-up (5 minutes)

# Check-in: Grounding Exercise

We invite you to grab a piece of paper, open notes on your phone, or open a Word document and:

1. Write down 1 thing you're celebrating or grateful for this week in your work or life.
2. Write down 1 intention for your time in this webinar.
3. How has community violence shown up (or not shown up) in your own life?
4. What would success in ending community violence look like for you?

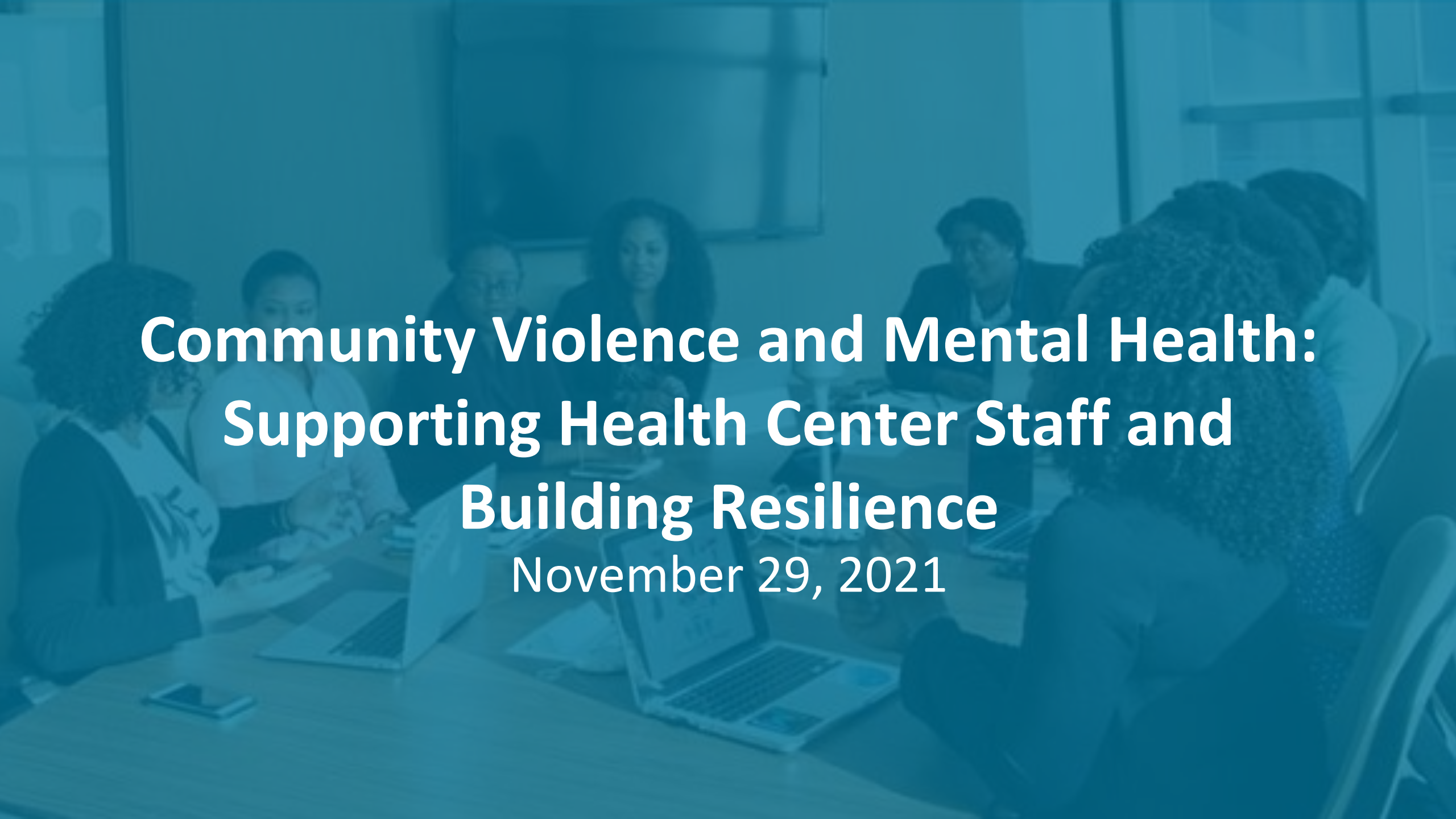


# Disclosing Personal Information

This webinar series will discuss sensitive and difficult topics, and may cause you or others stress or discomfort. Please feel free to give yourself permission to take breaks and to step away if you need to.

This webinar is a public space. When using the chat, be mindful of any personal information or stories you are sharing, and about sharing other people's stories that are not yours to share.

Please respect the privacy of our attendees and speakers who may share personal information. Personal information is confidential and should not be disclosed, recorded, or discussed with anyone outside of this webinar unless given consent

A group of people are seated around a conference table in a meeting room. The image is overlaid with a semi-transparent blue filter. The text is centered over the image.

**Community Violence and Mental Health:  
Supporting Health Center Staff and  
Building Resilience**  
November 29, 2021



# Didactic Presentation

Roberta Waite, EdD,  
PMHCNS, ANEF, FAAN



# Community Violence and Mental Health: Supporting Health Center Staff and Building Resilience

**Roberta Waite, EdD, RN, PMHCNS, ANEF, FAAN**

Professor, College of Nursing and Health Professions

Associate Dean for Community-Centered Health & Wellness  
and Academic Integration



# Objectives

Discuss implications of trauma affecting staff

Describe an approach to fostering trauma-informed practice in a nurse-led health center

Highlight the role of antiracism in trauma and healing

# Trauma

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Used in both physical and psychological domains comes from the Greek noun “traumat” which means “wound” or “injury.” (Balogh, 2021; Valle, 2021).

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Reactions and responses to events and circumstances that are perceived to threaten an individual or community (i.e., violence) (Valle, 2021).

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Wounds come in many shapes and sizes resulting from a variety of causes.

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Failure to receive the proper treatment (interventions) after a wounding can complicate the healing process.

# Risks of Trauma: Vicarious Trauma (VT)

Trauma is both ubiquitous and associated with many chronic illnesses and high-risk behaviors thus, all healthcare providers will care for patients with histories of trauma.

VT also called 'provider fatigue,' 'compassion fatigue,' or 'secondary trauma,' is the "experience of having exhausted hearts, minds, bodies, and souls from helping survivors through their painful experiences (U.S. Department of Justice, 2014).

VT is common amongst healthcare professionals who are habitually exposed to the pain and suffering of others as part of their working environment (Kimberg & Wheeler, 2019)

## Staff and Community Violence

- Experiences may be unique and different but trauma in the community impacts neighbors and staff.
- Hostile, threatening and violent incidents occur within the space of community-based health centers having a direct impact on staff.
- Response to these circumstances is important and must be managed delicately as each case is unique.
- Having a sense of safety and employing self-care measures are paramount.

# Effects of Unaddressed Trauma for Staff

- Serious damage to the mental and emotional wellbeing of providers and others who work to support survivors.
- Severe stress, depression, anxiety, anger, insomnia, and self-medicating (alcohol, drugs, and other substances), all of which can limit effectiveness and ability to perform one's job well (U.S. Department of Justice, 2014).
- Without support, clinicians are at risk for ongoing emotional trauma that affects not only themselves, their families, patients and relations with colleagues
- Clinicians that recover best in work settings occur when leaders prioritize wellness, community, and conversation (Paturel, 2019).

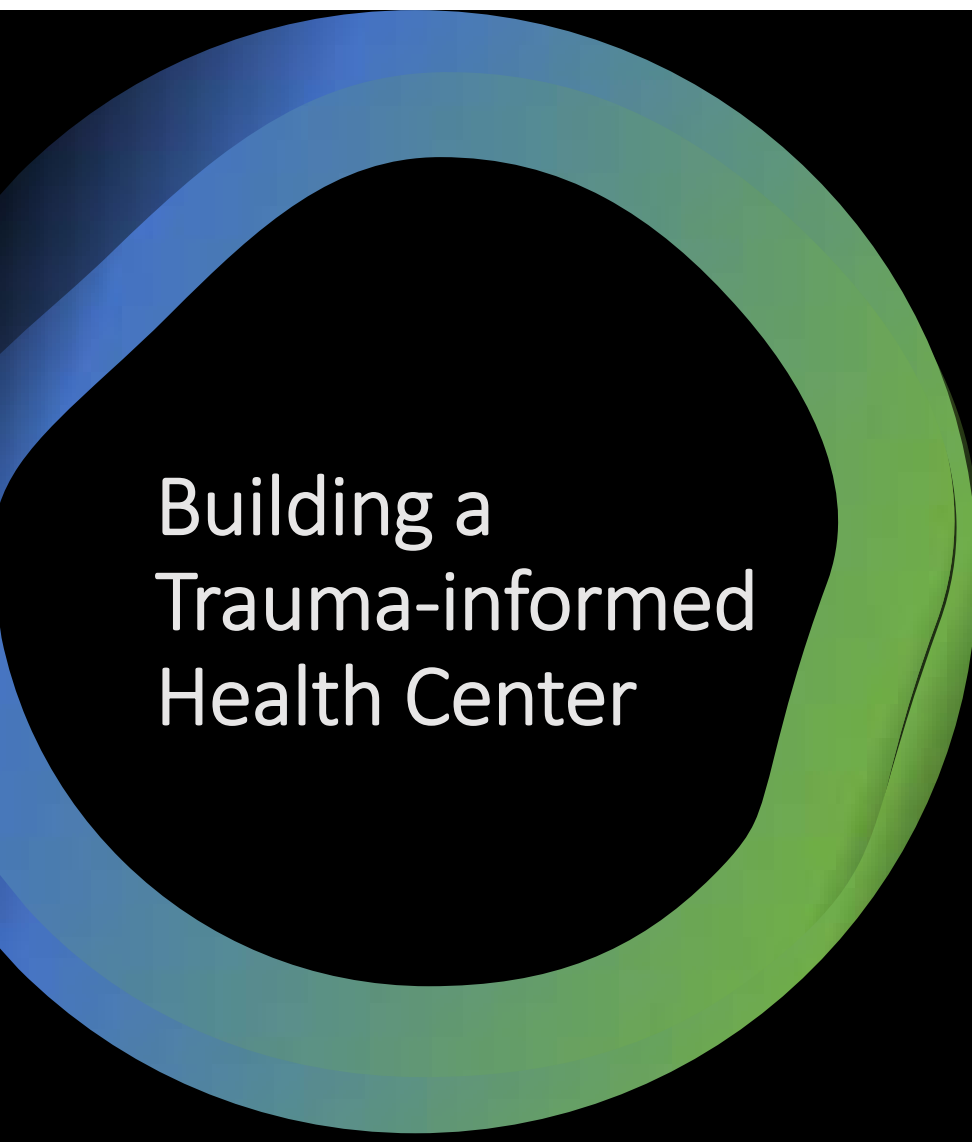
## Psychological Resilience for Staff

Repairing psychological injury cannot be reduced to personal resilience. It is linked to dynamic interactions between the health professional and the structural and social circumstance within which they live and work along with the level and type of support they receive.

Long-term psychological well-being of health professionals is seldom thought about when planning for health systems resilience.

Health professionals well-being is ultimately determined by structural factors and change that requires political will (Dean et al., 2020).





## Building a Trauma-informed Health Center

- Trauma-informed systems of care must attend to community, organizational and individual processes by focusing proactively and compassionately to the trauma of healthcare providers, staff, patients/community members.
- Specifically for staff, increase opportunities for:
  - self-care through flexible work schedules
  - reasonable workloads and work hours
  - time and support for individual and group reflection
  - accessible therapeutic support (Kimberg & Wheeler, 2019)

# A Trauma-Informed Organization



Has staff that has received training in trauma and that knows how to identify signs of trauma.



Staff understand that people have stories and deserve to be treated with compassion and respect.



Creates structures so that staff can practice meaningful self-care.



Opens space for members of the organization, institution or business to speak about stress.

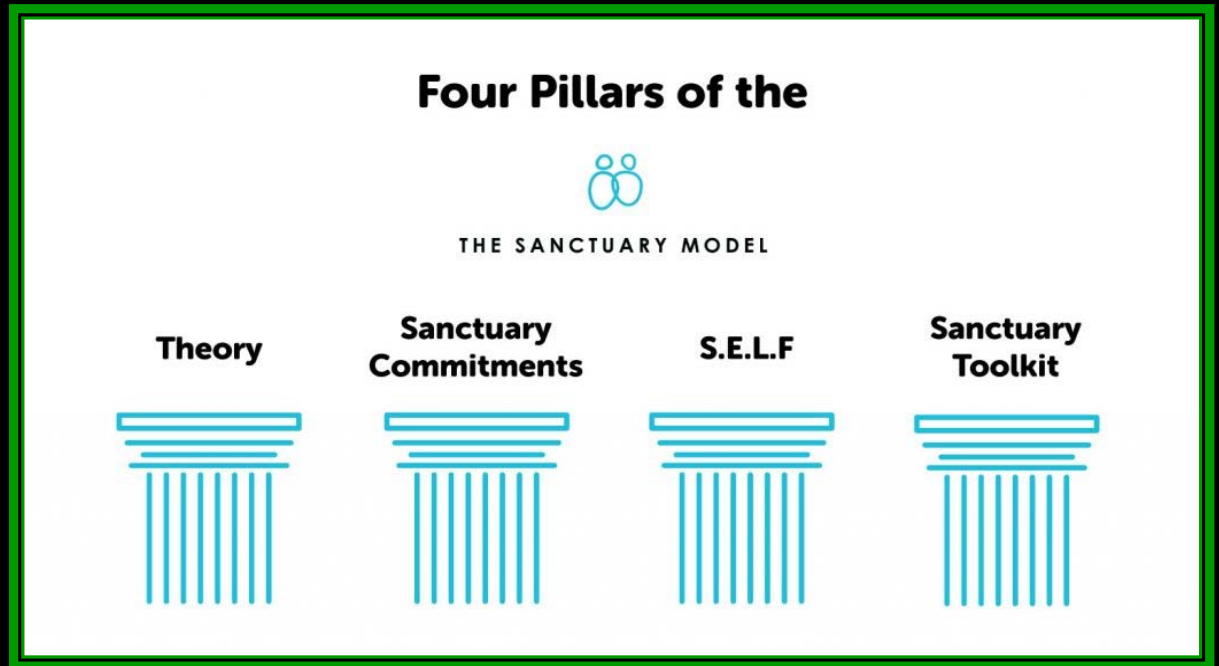


Fosters a sincerely relational environment where everyone's dignity is respected.



Provides resources for getting help for those that need it (Valle, 2021).

Sanctuary  
Trauma-  
informed  
Model



2014-2018, Initial certification  
2021 Recertification

Undoing Racism

Community Training  
&  
Psychosocial  
educational sessions



## Racism is the Socially Transmitted Disease

*It's taught, it's passed down, but the impacts on children and families and communities are significant from a health perspective* (Erasmus, 2020).

# Where is staff now with trauma-informed care?

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Integrated into Sanctuary training, racism as trauma and antiracism practices for staff

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Advancing the Action of Trauma-Informed Care through Antiracist Practices and Collective Healing

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Initiated racial affinity groups, an Antiracism Advisory Committee and employing reflective supervision using an antiracist lens.

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This process positions us to best benefit staff and the community

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In adding to the building block of trauma-informed care, fostering capacity to address racism will enable 11<sup>th</sup> St to help ensure positive steps towards realizing health equity for populations served.



## Healing for Staff

- Addressing vicarious traumatization and effects of community trauma (from violence) requires a multi-pronged approach (e.g., offering all staff training in mindfulness-based stress reduction techniques).
- Reactions and responses to trauma will invariably be different from person to person and from time to time.
- Each individual working with victims of trauma, as does each patient, brings their own set of vulnerabilities and strengths to their work.

# Healing for Staff Experiencing Trauma

- Factors that enhance provider vulnerability
  - Level of exposure to community violence, frequency and intensity of exposure to trauma;
  - Prior traumatic experiences; substance use or mental illness;
  - Degree of social isolation; difficulty expressing feelings; lack of experience, preparation, orientation, training, and supervision at work;
  - Extent of effective and supportive processes for discussing the traumatic exposure (Kimberg & Wheeler, 2019).

# Healing Process for Staff

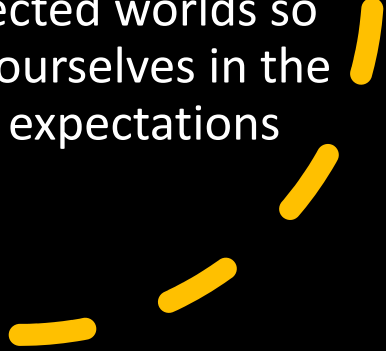
- Speak to stigma and shame; establish safety, empowerment and connect supporting positive relationships not isolation

- Radical self-care

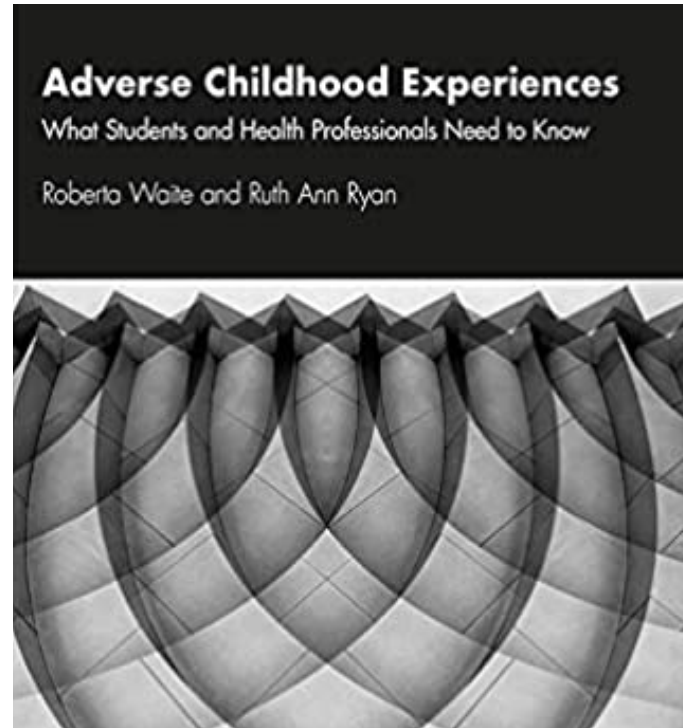
*“Caring for myself is not self-indulgence, it is self-preservation, and that is an act of political warfare.”*

~Audre Lorde

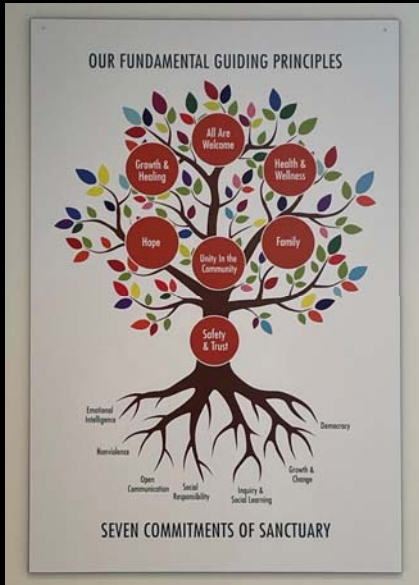
-involves owning and directing our lives and choosing with whom, how, and how often we engage in our nested, interconnected worlds so that we can be unapologetically ourselves in the face of unrelenting pressure and expectations to be otherwise (Pannell, 2021).







Released 2019



**How is Racism a Trauma?**

Trauma is overwhelming stress that occurs as a result of witnessing or experiencing conditions or events. Racial Trauma refers to acts of racism and discrimination creating an environment in which Black and Brown individuals feel unsafe and vulnerable.

**Where Does Racial Trauma Occur? These Traumatic Experiences Can Occur:**

- INTERPERSONAL** (with/in yourself)
- INTRAPERSONAL** (within yourself and yourself)
- SYSTEMIC** (structural/discriminatory)

**How is Racism Connected to Health?**

Racism is a major social influence on health and is a driver of racial/ethnic health inequities. Health inequities that are preventable by making health care systems more equitable in Black and Brown communities.

**Effects of Racial Trauma:**

- Anxiety
- Depression
- Chronic Stress
- Sleep Disturbance
- High Blood Pressure
- Diabetes
- Asthma
- Post-Traumatic Stress Disorder
- Heart Disease
- High Blood Pressure
- Depression
- Chronic Pain
- Substance Use
- Suicide

**Next Steps Towards an Anti-Racist Society**

**Work for Inequities to be Fixed:**

- Use your position to address inequities and conditions
- Advocate issues that may be marginalized before speaking the truth
- Practice compassion, shared social justice and equity. Don't shy away or feel that it is a sin.

**Advocate for Inclusion:**

- Support anti-racist organizations
- Encourage anti-racist education and training
- Encourage anti-racist curriculum
- Practice allyship in the legal or administrative system
- Create and defend policies for Black and Brown individuals
- Engage in social justice work and support





### Art Therapy

- Individual and Group Art Therapy sessions for all ages
- A form of psychotherapy in which art mediums are used as expression and to improve mental, emotional and social health.

Stephen and Sandra Shelton Family Health Services

Diagnosed Assessment Therapy Yoga

- Individual and Group Sessions
- Group Sessions for All Ages
- Group Sessions for All Ages
- Group Sessions for All Ages



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# Thank you for your time

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# Questions & Discussion



# Q&A

Please type your questions into the Q&A pod!





# Panel Discussion

# Q&A

Please type your questions into the Q&A pod!

# Thank you to our Presenters & Panelists!



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Trauma Medical Director, University,  
Hospital- Newark, Rutgers, The State  
University of New Jersey

# Thank you!

- Please fill out the [Evaluation survey](#) should take <2 minutes.
- **Webinar 3: Health Center Strategies for Violence Prevention and Intervention**
  - Wednesday, December 15, 2021 at 2:00pm ET
  - Register [here](#).
- CME/CNE link [here](#).
- Access [additional resources](#) for this webinar series.