STRONG ENOUGH

PRINCECOALITIONEDWARDFOR WOMEN INISLANDGOVERNMENT

TRAUMA-INFORMED RESEARCH AND RECOMMENDATIONS FOR POLITICAL ORGANIZATIONS IN PRINCE EDWARD ISLAND 2020

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Photo Credit: Patricia Bourque photography from the Organize to Lead event in 2018.

Executive Summary

The PEI Coalition for Women in Government is a non-partisan, intersectional feminist organization dedicated to advancing women's leadership in the political, civic, and democratic life of PEI. This research is aimed at finding the root of the barriers women experience in partisan and non-partisan political organizations. The research highlights the issues that have resulted in women's alienation and departure from these organizations, with an eye for the role that trauma and re-traumatization plays in the experience of participants interviewed in this research.

The research began with a grounding in existing knowledge about good practices for trauma-informed organizations, which are highlighted in 10 key features of trauma-informed organizations. The 10 themes that emerged from the literature review are: safety; trustworthiness and transparency; collaboration and mutuality; empowerment; voice and choice; peer support and mutual self-help; resilience and strengths-based practice; inclusiveness and shared purpose; cultural, historical, and gender issues; and a change process that is open to learning.

The reality is that many women are survivors of trauma from sexualized, gender-based harassment and/or assault. Research interviews with women from political organizations identified a number of recurring barriers and inequities. The issues that are highlighted include: systemic barriers, attrition of women, poor conflict management, class inequity, tokenism, conflict, internal harassment, and external harassment. Many of these themes are consistent with national trends and are reflected in research by national organizations. PEI's political organizations have difficulty including and retaining involvement from marginalized women, who are underrepresented in these organizations, and among the interview participants.

There are clear and actionable opportunities to improve women's experiences and enable their full participation, using a trauma-informed lens. These opportunities begin with training for the entire team on a number of important issues as the first step to learning to manage endemic conflict and harassment through both proactive and reactive approaches. They also include: accompaniment to

meetings; a practice of publicly defending women receiving untenable online harassment and threats; inclusive event-planning protocols; and ensuring human resource policy avoids penalizing traumasurvivors for using sick days. A number of resources are provided to support individuals and organizations wishing to learn more.

Research Methodology

This project emerged from recognition that political organizations in PEI are failing trauma survivors – specifically, women trauma survivors. These failures tend to lead to experiences of re-traumatization in and ultimately departure from the organization or from the sphere of politics all together. The interviews were an inquiry into this phenomenon. The women chosen for interviews all identified as cisgender¹ and were selected by snowball sampling. Participants were selected on the basis of having already had the experience of leaving a political organization. This was to allow time for distance and reflection on their experiences and the role that trauma and re-traumatization had played for them. It also shed light on certain reasons women tend to leave or be forced out of political organizations.

Only one of the interview participants was a racialized woman, as few racialized women have yet to become heavily involved in PEI's political sphere. There are a variety of barriers for their full, meaningful involvement. Only some of these can be extrapolated from the findings of this report; structural and interpersonal racism and its role perpetuating intergenerational trauma in PEI political organizations requires further research, and is not adequately addressed here.

The interviews were conducted mostly in-person, often outdoors, sometimes at the participant's home or workplace. Importantly, the interview process was conducted in a trauma-informed way. In addition to the interviewer and participant, each interview included the presence of a trauma-informed practitioner. The practitioner's role was to offer support during the interview conversation, as well as resources and support following the interview. All efforts were made to follow COVID-19 restrictions. Interviewers were therefore unable to hold a focus group as hoped.

Participants involved in all four of PEI's political parties were interviewed, as well as some in nonpartisan political organizations. Participants ranged from women with experience serving as elected officials, candidates, party executives, staff, and volunteers of political organizations in PEI.

The analysis of the data has been conducted through an intersectional feminist lens – with an eye to the dynamics of power in our society that include and transcend gender identity – most especially race and class. PEI's political organizations have been dominated by cisgender, upper-middle class white people. The research findings reflect this reality and give a picture (albeit incomplete) of the structural barriers to full engagement from individuals outside this group.

¹ Cisgender refers to a person whose sense of personal identity and gender corresponds with the sex they were assigned at birth.

A Note on Gendered Language

By identifying with intersectional feminist values of this project and of the PEI Coalition for Women in Government understand that biology does not necessarily predict gender identity. Currently, decisionmakers in PEI political organizations are without significant racial, class, and gender diversity. All of the research participants were cisgender women. It cannot be said for certain that there have been no transgender folks involved in PEI's partisan political organizations, but none were known to the researchers at the time of this writing. While there are non-binary or a-gender individuals who volunteer with political parties, none are known to have participated heavily in parties' decision-making teams at the time of this research.

This report uses the terms "woman" and "man" without the "cis" qualifier for ease of reading, and because trans women, as women, materially experience systemic sexist barriers, while also contending with trans-misogynist violence. We have avoided the biological terms "male" and "female" except where directly quoting participants or documents.

It is hoped that political organizations may succeed in making structural changes and educating their membership. If barriers are eliminated and supports are created for women likely to be targeted with trans-misogynist and/or racist threats, political organizations may become capable of truly reflecting the diversity of Islanders.

Trauma-Informed Policy and Organizational Culture

Organizational policies provide structure and identify where formal power lies within the team. To have a trauma-informed organization, both the informal culture and the policies must be structured to center collaboration and flexibility of working styles. Importantly, trauma-informed practices must be ongoing and open to change. Organizational policy can provide structure, but the organizational culture shifts as there is turnover among the individuals within it. It is the people and the ways they approach each interaction, event, and project that create a trauma-informed environment. Hence, being traumainformed is a practice, not simply a mandate.

The language and concepts of trauma-informed practice have emerged largely from the fields of addictions and mental health. These approaches are increasingly informing organizations seeking to encourage and empower involvement from people across differences of identity and experience. The following characteristics emerged from the literature review.

10 Characteristics of Trauma-Informed Organizations:

- Safety: seeing to physical and psychological safety throughout the organization for staff and the people they serve; promoting and supporting gentleness and safety in the physical setting as well as interpersonal interactions.
- Trustworthiness and transparency: operating and decision-making with transparency; seeking to build and maintain trust among staff, clients, and family members of people being served by the organization.
- Collaboration and mutuality: true partnering and a leveling of power differences between staff and clients, and among organizational staff from frontline staff to administrators; recognizing that healing happens in relationships and in the meaningful sharing of power and decisionmaking.
- Empowerment: recognizing, validating, and developing the strength of all individuals, throughout the organization and among the clients served
- Voice and choice: supporting staff's, clients', and family members' experience of choice and to recognize that every person's experience is unique and requires an individualized approach.
- Peer support and mutual self-help: fostering awareness of one's limitations and an environment where asking for help is encouraged; a key vehicle for building trust, establishing safety, and empowerment.
- Resilience and strengths-based practice: a believing in individuals, organizations, and communities to heal and promote recovery from trauma; building on what clients, staff and communities have to offer rather than focusing on their perceived deficits.

- Inclusiveness and shared purpose: recognizing that everyone has a role to play in a traumainformed approach; one does not have to be a therapist to be therapeutic.
- Cultural, historical, and gender issues: actively moving past cultural stereotypes and biases (e.g. based on race, ethnicity, sexual orientation, age, geography, etc.), offering gender-responsive services, leveraging the healing value of traditional cultural connections, and recognizing and addressing historical trauma.
- Change process: intentional and ongoing; striving to become a learning community, constantly responding to new knowledge and developments.

Barriers and Challenges Faced by Women in PEI's Political Organizations

"When #metoo started happening you start to realize how many women have been assaulted. It's almost every woman I know. It's not just one in ten. It's almost all of us. . . . we're out there wearing this." – Interview Participant

Trauma-informed policy and practice in organization is vital if organizations are to be truly democratic. Unfortunately experience of sexual harassment and assault, abuse, poverty, violence, and racism are common. Organizations would be advised to assume that trauma-survivors are the norm rather than the exception.

This research project was inspired broadly by PEI women's experience of harassment in political organizations. Reports of harassment of women in political organizations are common in both formal and informal research by the PEI Coalition for Women in Government. These organizations frequently fail to respond effectively or address the sources of the problem. This section outlines the barriers to inclusion that emerged from interviews with research participants.

Systemic Barriers

Participants identified that the systemic sexism and classism are built into organizations' power structures and cultures; the impact is that participants' were robbed of the chance to contribute fully. Harm and exclusion continue in large part due to organizational "blindspots" of how policies, practices, actions, and attitudes impact women. When they fail to recognize the barriers that women members experience, organizations dismiss and minimize the harm women and marginalized people report. Some participants felt that this is an unconscious bias for some decision makers. Others observed that women's presence in political leadership is tokenized and only valued to the extent that they avoid challenging the status quo.

"There is a [gender] imbalance. That creates a culture that's male dominated. And decisions were often made with that lens. Women who end up getting elected come with another set of skills that are not what you'd call typical. Women still struggle to be heard at the table, even though they're there equally, by the same means as a man. The easiest way to say it is: it really is an old boys club. You feel it when you walk in the room. . . I didn't realize: belonging to a party like that meant buying into a way of being – a culture." – Interview Participant

Candidate nomination process: In several parties, participants commented that the candidate nomination process is set up to cull potential leaders who are "outsiders," "troublemakers," or simply don't have the favour of the few voices with power. This process is rife with inequities. Several political parties have policies that allow those already in decision-making roles to exercise incredible power over the nomination process. The impact is that even when women run for a nomination, the "party insiders" are able to effectively exercise unfair influence over this supposedly

democratic process. This creates a self-perpetuating cycle that reinforces the party's status-quo. While policies vary by party, examples of this include party leaders having veto power over nominated candidates, or allowing the party executive to publically endorse a specific candidate for leadership.

A closed system: The nature of partisan politics itself creates dangerous conditions where abuse, harassment, and exclusion can thrive. A number of research participants identified organizational cultures in political organizations that echo the conditions of abusive households:

- Patriarchal culture and values –(i.e. "old boys club")
- Need to show a harmonious front: conflict held in secrecy or only aired as a power play.
- A few individuals hold enormous decision-making power and influence
- Those with organizational power exclude others from decision-making (i.e. "back-room politics")

Upholding the image and reputation of the party is important, and frequently partisan politics involves strategically exploiting the perceived weaknesses of other parties. When survivors of trauma participate in a political organization that demonstrates these dynamics it is especially re-traumatizing.

Attrition of Women:

"[Including parents in party events] had not been on their radar. It took a lot of effort and frustration and perseverance on my part to help them see the barriers. They just did not see them. Most of them had been in politics their whole lives. . . . I had way more to offer that team than the female perspective. My whole career! . . . But I was reduced to this person who talked about women's issues because there was no one else there to speak that. That definitely hurt me later on." – Interview Participant

The most troubling trend that emerged from the research is that women's experiences of harassment while in leadership positions frequently results in their alienation and departure. A variation on this phenomenon was reported by 80% of the interview participants. Added to this is that women's advocacy for gender-related issues *or* for an end to internal or external gender-based violence resulted in them being sidelined as only a one-issue candidate, and cost them their political career within that organization. This contributed to sidelining of their leadership which contributed strongly to their departure.

Many of the interview participants left their positions of leadership within political organizations for what would publically be termed "personal reasons." The iconic feminist wisdom that "the personal is political" is fitting here. In participants' experiences, political organizations fail to navigate the realities of harassment gracefully and continue to be sites of systematic re-traumatization of survivors of violence.

Class Inequity

"Unfortunately our political system is run by back room boys and everybody knows it. And there's more women in politics, it's good. But if there's women and men running, unless that woman has a lot for money or political prestige they're not going to get elected. Once in a while they do. But when they're in there it's hard for them to make much change." – Interview Participant

Gender is only one factor at play in political participation. Economic class was another significant theme throughout the interviews.² It is generally accepted as fact in PEI that most elected officials are among the provinces economic elite and hold significant influence in both the private and public sectors – including most of the successful women politicians. Conflict or falling out of favour with a powerful politician threatens to impact an individual and family's economic wellbeing. A well-publicized example of this phenomenon is the case of <u>Susan Holmes</u> and the other two women who were whistleblowers regarding misuse of the Provincial Nominee Program in the early 2010's. Several of the research participants also identified that falling out with political parties resulted in blocklisting,³ economic hardship, and sustained loss of employment. Most especially, conflicts that involve harassment by elected officials take a toll on mental and physical health. Participants identified fears of ongoing economic harassment and reprisals against themselves and their loved ones, and several of the participants identified suffering economic hardship as a result of their falling out of favour with a political organization. Frequently, women are more at risk of economic hardship than men due to gender-based economic inequality. (<u>Canadian Women's Foundation</u>)

Poor Conflict Management

"(the conflict and harassment) was seen as an inconvenience. It was 'we don't have time for this because we have bigger, public, outward-facing priorities. This is internal drama. We should be drama-free. You're causing drama. Stop causing drama."" – Interview Participant

Interview participants reported that political organizations struggle to navigate their own power structures to fairly resolve conflicts. While conflicts within organizations are inevitable, without a culture and policy to manage conflict fairly, the organization will operate on an informal power structure that undermines trust in the team. Frequently, the approaches participants talked about were aimed at minimizing conflict and control risk while managing the outward-facing message of political organizations. These do nothing to address the cause of the problem, and usually similar problems continue to arise. Consistent data from the research shows that conflicts and abuse of power –

² Racism is also a significant consideration for building trauma-informed culture. Unfortunately racialized people are underrepresented in PEI's political organizations and were therefore underrepresented among research participants. Research on acute, structural, and systemic racism in PEI's political parties deserves further research. ³ "Blocklist" is becoming a common alternative to the term "blacklist"

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combined with organizations' failure to address conflict appropriately – resulted in women leaving the organizations.

Tokenism

"Is it lying? I don't know. I think there was some dissonance there for me. Having to take a story and make it about us, or our team, and spin it back out. Sometimes in campaigns, it's like 'we love the story, this is a great story, but we need the picture to have a person of colour, an indigenous child, you know, to hit the target bracket, so when you put the image on the internet you're amplifying your brand." – Interview Participant

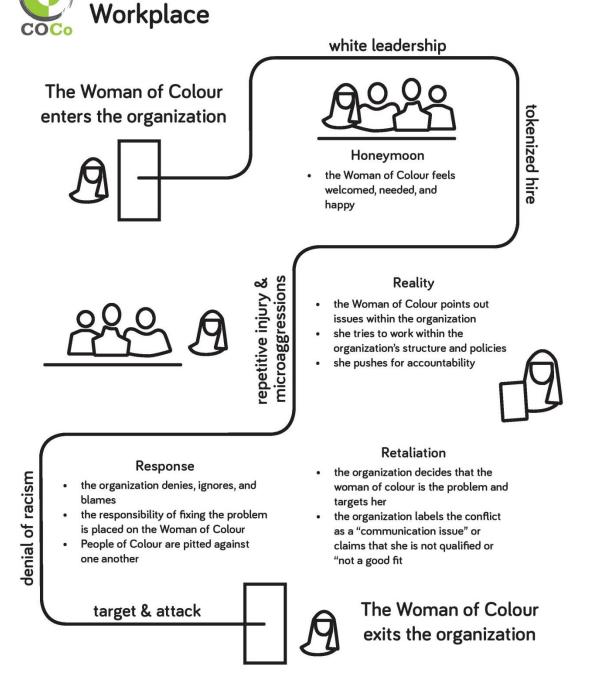
The term "tokenism" means to use a member of an underrepresented group to give the illusion of equity and diversity in an organization. Racialized people are frequently tokenized and used for photos in order to create an image of "diversity" while having little power or involvement in the group. In Canadian politics it is well documented that:

"women are often recruited for and nominated in ridings in which they are less likely to win based on their party's past election results in the riding. Parties may present many female candidates but based on the ridings in which they run, these women have little chance of being elected." – "<u>Elect Her</u>" Report of the Standing Committee on the Status of Women

Tokenism has harmful impacts. Political parties in PEI have not yet achieved gender parity. In political parties that have mostly men leaders, having a small number of women at the table can improve the optics significantly. This research shows that a woman politician's attention to issues related to gender, freedom from harassment, or parenting result in a shorter political career.

The phenomenon of tokenism and women ultimately leaving organizations for identifying gender-based barriers is echoed in a somewhat well-known phenomenon faced by racialized women. The infographic below is from COCo (Centre des Organisms Communautaires) and illustrates this process clearly. Systemic barriers faced by women are compounded by racialization. This is a phenomenon that should be taken seriously in PEI's largely white political organizations.

The "Problem" Woman of Colour in the



Adapted from "The Chronicle of the Problem Woman of Color in a Non-Profit" by the Safehouse Progressive Alliance for Nonviolence www.coco-net.org

As in the above info-graphic, the phenomenon of people who share underrepresented identities being pitted against each other is an important one. Tokenism means that there are a limited number of spaces available for women/racialized people. Solidarity among the tokenized group can be undermined in these situations. While some women expressed that they received support from with other women, sometimes even across party lines, this was often not the case. Some women expressed that they took on a different communication style in order to navigate the gender inequity of the political sphere.

Harassment: Internal

"They went into panic mode because they didn't know what to do, and 'holy fuck. She's telling'... It was only brought up in caucus twice – what I was going through. I remember exactly who those people were who gave me the right eye contact – the men. All the women of course were mortified. Couldn't believe I did that. I had the support of one woman in that crowd. The rest of them – 'you're done.' I had people send me private messages saying 'you're done.' ... All the organization in my district, they were all against – they were all 'how dare her? She's just a big mouth.' All the typical like, challenging me inappropriately. It was just awful." – Interview Participant

Harassment is likely to occur in organizations where there is a culture that normalizes problematic (sexist, racist, classist, etc) behavior and language. These organizations also frequently fail to manage harassment allegations effectively which often leads to the departure of the targeted individual from the organization, while the perpetrator continues to participate. Conflict and harassment policies that do not protect the complainant are designed to protect the current *status quo* of the organization, not its long-term interest. Organizations that protect perpetrators of harassment, assault, or abuse will continue to traumatize their members and have high rates of turnover.

Harassment: External

"My campaign chair had worked in politics his whole life, and had never worked with a female candidate before. It just blew him away what we were experiencing that he had never seen before." – Interview Participant

Women⁴ running for politics in PEI receive unacceptable level of sexualized harassment and threats. They also reported a lack of support within the party for the harassment and how it impacted them. Many women candidates reported that they legitimately feared for their physical safety. As expressed in the above quotation, it can be concluded that the level of sexualized threats, harassment, damage to vehicles, and even assault surpass what most men candidates experience. Gender-based harassment is frequently identified as a deterrent for women entering the political sphere and as a reason why women are more likely to leave politics (<u>Gender Sensitive Legislatures Report</u>).

Political organizations seldom openly condemn harassment except to further partisan ends. Experience of harassment, threats, and damage to vehicles and homes were frequently dismissed or not considered cause for comment. Trauma responses vary widely, but ultimately rob both the targets and their organization of their member's full capacity to be present, productive, and responsive. When political

⁴As no racialized candidates were part of the research, race-based harassment was not part of their experience. In order for more racialized people to step into PEI's political sphere, political organizations need to take racist harassment seriously and support those targeted. One <u>example</u> of this was publicized during the 2015 provincial election. This individual died in 2015, hence she could not be interviewed for this study.

organizations do not support women targeted by sexualized harassment on the campaign trail, they lose candidates and dissuade potential candidates from stepping forward.

Health Impacts of Harassment: The impact of harassment includes chronic pain and other health issues along with severe impacts to an individual's mental and emotional health. Participants often spoke of the extended period of time it took for a normal sense of self to re-emerge after leaving the organization. These impacts, coupled with the financially crippling impacts of punitive economic harassment (see above), can mean long term hardship for an individual and her family.

Self-Censorship:

"Online harassment can force women to self-censor and withdraw from public space, which 'represents a direct barrier to women's free speech, undermining democracy in all its key elements."" – "<u>Elect Her</u>" Report of the Standing Committee on the Status of Women

Women and their organizations are robbed of the full capacity and intelligence of their members when women fear online backlash for commenting. A non-partisan interview participant identified self-censorship as a survival strategy in political organizations:

"In the last couple years, I don't say anything unless I know we have a policy or stance on it . . . if something is happening online, I look – do we have a position on this, do we have research on this, and if we don't, then I think: 'can I speak on this at all?'"

This case is one example of censorship of intelligent and informed commentary on issues relevant to the organization in order to avoid provoking further online harassment. This quotation also implies an expectation of support where an organizational precedent exists. Another participant described how she was expected to self-censor, despite being consistent with the party's platform.

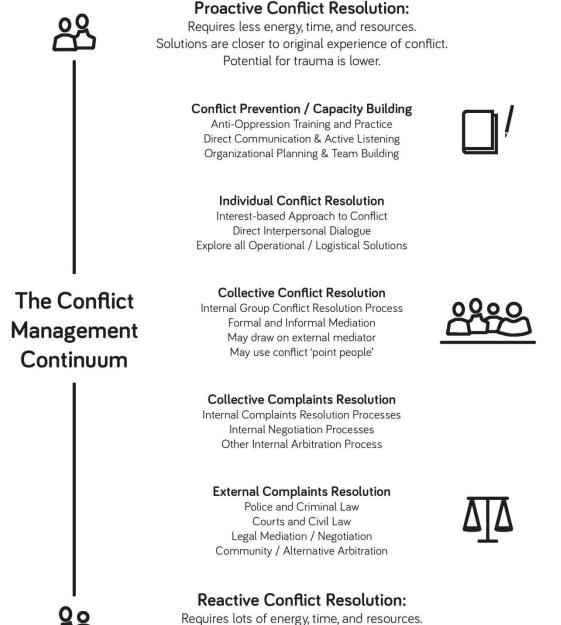
"I got a lot of harassment. It was happening constantly and it was happening online. I was bringing it up every time we got together about the campaign when I was running. . . The answer would be 'well, you shouldn't be so vocal online.' How? I'm a candidate and it's in our platform . . . not only by the general public but by other political players too. Every time I bring it to the table, it's 'it's not a big deal, everybody gets harassed'" – Interview Participant

Recommendations for Trauma-Informed Approaches

As outlined above, women in political organizations face a number of significant issues: systemic barriers, attrition of women, poor conflict management, class inequity, tokenism, conflict, and harassment. There are clear and actionable opportunities to improve women's experiences and enable their full participation. Building trauma-informed approaches into the policy and culture of organization can grow women's participation, make healthier environments for everyone. Creating a culture of learning within the organization can enable organizations to respond to new knowledge and better include gender, class, race, and other forms of diversity.

Conflict Management

The info-graphic below is by <u>COCo</u>. It lays out the differing approaches to conflict on a continuum from proactive (i.e. preventative) to reactive (i.e. complaint-based). Importantly, reactive conflict resolution is more involved and involves greater risk of trauma.



Solutions are distant from original experience of conflict. Potential for trauma is higher.

Proactive Approaches to Conflict

The most effective, actionable, and trauma-informed approach is to put in place policies and practices that prevent significant conflict, abuse, and harm. When conflict or harm occurs, responding appropriately at the time can make the difference between a re-traumatizing experience and an experience of affirmation, healing, and change for both the organization and its membership.

Training

One of the strongest needs that emerged from the research is training for the entire organization to prevent and respond to issues. It is common for businesses to have mandatory health and safety trainings to prevent physical injury, but training is seldom done to prevent major conflicts, bullying, or harassment. Political organizations need to prioritize comprehensive and mandatory training for staff, candidates, and volunteers. The need for the training to be mandatory was emphasized by interview participants, as frequently perpetrators of harmful behaviours will absent themselves from trainings that relate strongly to their own behaviours and biases. Anti-oppression training can help identify where implicit biases and blind spots come into play.

Areas where training is needed:

- Conflict resolution, mediation, restorative justice
- Effective communication across difference
- Anti-oppression
- Trauma awareness, coping mechanisms, and mutual support

Each of these trainings should be mandatory and model trauma-informed approaches to adult education. Training events should be undertaken with an expectation that learning strengthens the organization and improve the organizational culture.

Preventing and Managing Internal Conflict

<u>Vu Le</u>, a respected voice in the non-profit sector, recommends training in conflict resolution for the whole team as a preventative measure. Conflict prevention training could include:

- Understanding individual conflict styles and how they interact with each other
- Understanding the possible sources of conflict in the organization and how to 'dig deeper'
- Practicing giving each other feedback and developing a stronger feedback culture
- Looking through existing conflict resolution policies and procedures or developing them together

Some amount of conflict in organizations is inevitable; creating culture and policy able to manage conflict is fundamental to organizational stability. Le goes on to identify that trauma responses are frequently at play in organizational conflict. He offers the following suggestions to prevent what he calls the "<u>Wheel of Disillusionment</u>:"

- Create a culture of learning, feedback, and direct communication
- Stop "triangulation" (i.e.- give feedback directly)

- Make time to discuss values and priorities
- Build relationships of trust among the team
- humanize and de-idealize organizational leaders

Other excellent resources for preventing and managing organizational conflict can be found in the resources section.

Reactive Responses to Conflict

"There was a desire not to rock the boat in that moment.... The policy wasn't strong enough to feel like the person leading the (mediation) had enough power to do something without being blamed or shamed. Especially when the person being complained about is large and in charge." – Interview Participant

While prevention is the ideal trauma-informed approach to conflict and harassment, research participants repeatedly named that informal processes caused significant harm when formal arbitration was needed. When a need for a formal conflict resolution process arises, the organizational culture has already failed to informally manage the conflict. Well-designed, formal complaint-based systems of arbitration are necessary to prevent the issue from escalating further and to prevent and the loss of the complainant from the organization.

Recommendations for reactive/complaint-based approaches to conflict

- Have a policy in place and use it. A number of participants reported that informal processes at this stage resulted in additional harm.
- Conflict resolution policy must have the power to mitigate the organizational power structure by ensuring a fair outcome in cases when perpetrators have more institutional power than their victims, for example.
- Conflict resolution must be formally defined, including the roles of the mediator, arbitrator, and appeal bodies – and identify who is to take on these roles if those identified in these positions are not available or are themselves involved in the conflict.
- Individuals in roles who are tasked with dealing with conflict must have appropriate training, budget, and authority to be effective.
- Policies must include the option to contract a professional external mediator. All parties in a conflict should agree upon the mediator.

Reactive Approaches to Harassment

As of July 2020, all PEI workplaces are required to have a strategy for dealing with workplace harassment, and defining the terms. The Occupational Health and Safety Act (OHSA) defines <u>workplace</u> <u>harassment regulations</u>. These new regulations are significant in that they make employers legally responsible for ensuring a workplace be free from harassment and for appropriately responding to complaints of harassment. While not all political organizations and teams are bound by OHSA, these new regulations offer minimum requirements for human rights, and should thus be adopted. The <u>provincial regulations</u> define harassment in the following way: "harassment" means any inappropriate conduct, comment, display, action or gesture or any bullying that the person responsible for the conduct, comment, display, action or gesture or the bullying knows, or ought reasonably to know, could have a harmful effect on a worker's psychological or physical health or safety, and includes

- (i) conduct that is based on any personal characteristic such as, but not limited to, race, creed, religion, colour, sex, sexual orientation, marital status, family status, disability, physical size or weight, age, nationality, ancestry or place of origin, gender identity or pregnancy, and
- (ii) inappropriate sexual conduct that is known, or ought reasonably to be known, to the person responsible for the conduct to be unwelcome, including, but not limited to, sexual solicitations or advances, sexually suggestive remarks, jokes or gestures, circulating or sharing inappropriate images, or unwanted physical contact.

Source: Occupational Health and Safety Act Workplace Harassment Regulations

Importantly, not all harassment is sexual or gender-based. Fundamental to a trauma-informed approach is an organizational culture of believing survivors. Sometimes hard proof and evidence of bullying and harassment are not always possible to provide. All allegations of harassment or bullying should be taken seriously. Trauma-informed approaches to approaching allegations of harassment are well articulated in the <u>Workplace Sexual Harassment Project</u> by the PEI Human Rights Commission. This excellent resource identifies that harassment policies must include procedures for reporting, investigating, and reporting. In addition they recommend the following trauma-informed approaches:

- **Re-telling** Sharing an account of sexual harassment can be emotional and re-traumatizing. The employer's procedures should clearly state the person responsible for receiving sexual harassment reports. Complainants should only have to tell their story once; an investigation may require some repetition, but this should be minimized.
- **Voice** Complainants should have a voice in the procedures. Ask them immediately what they want and need, and incorporate requests that are reasonable and fair. This may include changes in working with the Respondent.
- **Support** Complainants should be allowed to be accompanied by a trusted support person throughout the procedures. This could be a friend, family member, other co-worker, etc. This person is to be present as a support, is not intended to speak to the situation, and should not be a potential witness.
- **Choice** Complainants should be able to choose between formal and informal procedures. Policies should clearly state what complainants can expect from each procedure.
- **Resolutions** When an investigation produces a positive finding of sexual harassment, resolutions should incorporate what the target needs to heal, rather than imposing a potentially unhelpful resolution on them. Targets should also be made aware of the corrective action that will be imposed on the harasser.

Source: Developing a Workplace Sexual Harassment Policy & Procedures by the PEI Human Rights Commission

Proactive Responses to External Harassment

"It's critical, if we're sending women door to door, there needs to be training, there needs to be coping mechanisms, and there needs to be support from the team which requires a recognition of what the woman is experiencing. Because it's a lot. It was a lot to handle. There was the daily sexism, there was nude pictures, there was – at one event a man took my head in his hands and pulled me towards him and kissed me on the lips. And there's no one in the party to process that with you. So for all candidates there needs to be training on implicit biases and coping strategies for both male and female candidates." – Interview Participant

It is well established above that harassment from the public and powerful decision makers is a problem endemic to political organizations (this issue across Canada is also identified in the <u>Elect Her</u> report). Interview participants wanted organizations to do better to create a culture of support for women experiencing harassment. A vital and missing first step is acknowledging the reality of the harassment and being able to support coping mechanisms to mitigate the impact of being the target of harassment. Participants repeatedly identified political organizations' failures in responding to the epidemic of harassment against women in their ranks. Political organizations that value women's ongoing participation are advised to take the impact of harassment seriously, in order to include women, racialized people, and class diversity as more than tokenism. Training for the entire team is vital to achieving this goal.

Interview participants identified external harassment through intense online vitriol, doxxing, personal threats, violence, home invasion, damage to vehicles, and other threatening behaviour against women in politics in the province. This issue is not limited to PEI, and is has its roots in historical and current misogynist belief systems. The Inter-American Commission of Women (CIM) published their <u>Model</u> <u>Protocol for Political Parties</u> in 2019. This organization takes seriously that violence, harassment, and threats are designed to dissuade women from exercising their political rights. Their model offers policy recommendations to eliminate violence against women in political life. The document speaks strongly to the function of violence, intimidation, and harassment as tools of nullifying women's political rights and aspirations. The CIM recommends that political parties make a public and binding statement committing to the elimination of violence against women in political life. Such a statement would include:

- Rejecting all forms of violence and threats against women, including changing policy to ensure perpetrators are held accountable.
- Ensuring there are appropriate penalties for perpetrators of violence against women.
- Counseling, defending, and protecting women when acts of violence are reported.
- Creating measures to prevent reprisals against people filing complaints and against all those participating in the resolution of such cases.
- Making reparation for the harm done to women victims of verified acts of political violence.

- Participating in and funding a program of activities to eradicate violence against women in politics.
- Prevention through concrete actions to promote human rights for women.

The full report offers well-considered policy recommendations for political organization, and is recommended reading for political groups who wish to take seriously the threat of violence against women in political life. 5

Miscellaneous Recommendations

Some additional recommendations that emerged from the interviews are as follows:

- When meeting with powerful individuals especially elected officials individuals should always be accompanied by a colleague. Oppressive and traumatizing behaviour by powerful individuals is not uncommon in private meetings.
- Political organizations taking responsibility by publicly speaking in defense of their team members experiencing high levels of harassment, especially (but not limited to) where the target is articulating the organizational platform or position.
- Approach event planning with a trauma-informed lens: where and when are events held? Are they accessible physically, economically, and socially? Are they child-friendly? Does the venue center alcohol consumption? Are they related to religions or sports with legacies of social exclusion?
- Where human resources policies entitle an employee to sick days, they should be trusted to take them as needed without penalty. Sick days to manage trauma or mental health are in the best interest of the long-term wellbeing of the organization and the employee. Avoid practices like requiring a doctor's note, questioning, or penalizing workers for taking sick days that they are entitled to.

⁵ This document has been translated to English from Spanish, and uses the word "punish" in a context that may feel extreme for English speakers. However, the penalties recommended for perpetrators of violence and harassment recommended report can be considered consistent with a restorative justice approach.

Useful Resources

"<u>Coco Toolbox</u>"

"<u>Conflict Management Continuum</u>" by COCo

"The 'Problem' Woman of Colour in the Workplace" by COCo

"Developing a Workplace Sexual Harassment Policy & Procedures" by the PEI Human Rights Commission

"<u>Elect Her: A Roadmap for Improving the Representation of Women in Canadian Politics</u>" by the Standing Committee on the Status of Women

"Gender Sensitive Legislature Report" by Equal Voice Canada

"<u>Model Protocol for Political Parties: Preventing, Addressing, Punishing and Eradicating Violence against</u> <u>Women in Political Life</u>" by the Inter-American Commission of Women

"<u>Occupational Health and Safety Act Workplace Harassment Regulations</u>" by the Legislative Council Office of the Province of Prince Edward Island

"Trauma and violence-informed approaches to policy and practice" by the Government of Canada

"<u>Trauma Informed Practice Guide</u>" developed on behalf of the BC Provincial Mental Health and Substance Use Planning Council

"<u>The Wheel of Disillusionment: What it is and how it destroys relationships and creates toxic cultures</u>" by Vu Le

"<u>The Women's Media Center's Media Guide to Gender Neutral Coverage of Women Candidates +</u> <u>Politicians</u>" by The Women's Media Centre

Appendix – Trauma-Informed Organizations: A Review of the Literature⁶

Trauma-informed care is still a new concept. Its inception is said to be traceable to the 1998 study by Felitti, Anda, et al. called "Relationship of Child Abuse and Household Dysfunction to Many of the Leading Causes of Death in Adults: The Adverse Childhood Experiences Study." The study yielded an idea vital to trauma-informed care, that of Adverse Childhood Experiences (ACEs). The results from this study can also be found on the CDC website.

Since that time many organizations dealing with family violence and other trauma-related women's issues have sought to become better informed on the causes and effects of trauma in order to provide better care to clients and patients. In particular, adoption of SAMHSA's "Trauma and Guidance for a Trauma-Informed Approach" seems vital to both Canadian and American organizations. Many websites, scholarly articles, and official policies cite this resource as a foundational tool.

However, trauma-informed care deals only with the patient-client relationship. Few organizations have acknowledged outwardly that engaging with those who have experienced trauma can be traumatic, and even re-traumatising. Vicarious trauma, an expression coined by Vikki Reynolds, is only now beginning to come into the trauma-informed picture. Reynolds's work re-centers worker care from a focus on idea of burnout to the idea of under-resourced organizations. This re-centering is also noted in Andrea Blanch, et al.'s "Engaging Women in Trauma-informed Peer Support," and Kathryn Becker-Blease's scholarly article "As the World Becomes Trauma-Informed, Work to do."

In line with this idea is Laura VanderNoot Lipsky's book *Trauma Stewardship*. VanderNoot Lipsky maps "trauma exposure response" among workers exposed to human and ecological trauma, and offers tools and approaches for integrating the reality of trauma in our lives and organizations. This and Reynolds's are germinal works for improving the quality of care one is able to provide oneself and one's clients/patients. In particular, they both point to a need to move beyond personal responsibility (i.e. self-care) and expand to include collective care. Ultimately, what we see when we look at available literature is the emergence of ten key concepts. Whether in schools, judicial systems, therapeutic care, social services, or substance use care, these concepts remain consistent. It stands to reason, therefore, that collective care in the workplace would also involve these key themes (see below).

In organizational systems these concepts have been put into practice through policies. For example, the Oregon Health Authority; the Michigan Department of Health and Human Services; the Nova Scotia Health Authority; and Sexual Violence New Brunswick all use and expand upon these policies. Each advocates for ongoing training and evaluation of the efficacy of the policy.

⁶ Thanks is due to Bridgit O'Brien and Sonja Aagesen for their support with the literature review.

Important factors in establishing the policy are leveling the managerial playing field (i.e. *collective* care), and leadership valuation and engagement.

Example procedure for policy development:

Source: Schmidt, R. et al. (2018), New Terrain

A. Tool for Trauma-Informed Practice STEP GATHER EVIDENCE . Do you have evidence available on how trauma and violence is related to this issue to inform your decisions? Are the knowledge and experiences of the population(s) affected by the policy/ program (including Indigenous knowledge) a part of this evidence? · Who has previously developed policy or programming on this issue that takes a trauma-informed approach, and what might you learn from this? What data are missing? Who might be consulted to add to an understanding of trauma-informed considerations in developing and evaluating the program or policy? STEP **IDENTIFY POPULATION(S) TO BE REACHED** · Is the issue being addressed by the new policy and/or program clearly defined in terms of the differences (e.g. health effects, social context, prevalence, consequences etc.) for those who have experienced trauma and violence? What groups may experience the impacts of trauma differently related to this issue? For example, have socioeconomic status, race, sexual orientation, culture, age, ability, gender been taken into consideration when considering the impact of trauma on the issue? Does this policy/program address (or reinforce) historical inequities and trauma experienced by Indigenous people? · How do structural conditions such as poverty, homelessness, discrimination, incarceration impact this issue? STEP **APPLY A TRAUMA LENS: OUTCOMES** · How have trauma-informed practice principles been considered in setting the goals and outcomes of this policy/programming? Awareness – Are there ongoing opportunities for the program providers to build on their understanding of the causes of trauma and possible effects? · Safety - What provisions are built in for ensuring safety of those affected by the program/policy? Trustworthiness – How is consent handled? Choice/collaboration/ control - Have options been incorporated for meaningful choice by participants/those affected? · Strengths and skill building - Are opportunities for critical thinking and learning/ applying emotional regulation built in? · What might be the outcomes and consequences of adopting trauma-informed options? What might be the outcomes and consequences of not adopting trauma-informed options?

Annotated Bibliography

Andino, Vittoria. (2014) *Trauma-Informed Care: Is Cultural Competence a Viable Solution for Efficient Policy Strategies*. Clinical Neuropsychiatry Vol. 11, No. 1

http://citeseerx.ist.psu.edu/viewdoc/download?doi=10.1.1.670.9829&rep=rep1&type=pdf

Within public spheres Trauma-Informed Care and Policies need a systematic approach to sustain, in the long term, a Trauma-Informed environment. Andino, puts forward forward a series of criteria, based on 10 principles and associated strategies, needed to promote practice and cultural competence.

BC Provincial Mental Health and Substance Planning Council. (2013) *Trauma-Informed Practice Guide. BC Centre of Excellence for Women's Health*. <u>http://bccewh.bc.ca/wp-content/uploads/2012/05/2013_TIP-Guide.pdf</u>

This is an expansive, exemplary guide to identifying and implementing trauma-informed practice. It is primarily focused on service delivery, but could be adapted to foster trauma-informed policies in more professional environments (e.g. activist circles, and political offices). It addresses the challenges of implementing policy with different populations and in different settings.

Becker-Blease, Kathryn A. (2017.) *As the World Becomes Trauma-Informed, Work to do.* Journal of Trauma & Dissociation, 18:2, 131-138

https://www.tandfonline.com/doi/full/10.1080/15299732.2017.1253401

Becker-Blease points to a need for trauma-informed care to connect the personal care that is common to therapeutic methods with a broader understanding of the social structures (family, school, religion, etc.) and their oppressive faces (racism, poverty, homophobia, etc.) that cause trauma. In the context of work policy, this article can be used to call attention to and to underline the need for regular review of the efficacy of policy.

Blanch, Andrea; Cave, Cathy; Filson, Beth; and Penney, Darby. (2012) *Engaging Women in Trauma-informed Peer Support: A Guidebook*. Center for Mental Health Services: SAMHSA. http://www.theannainstitute.org/Andrea%20Blanch%20TIWA/EngagingWomeninTIPeerSupportGuideb_ook.pdf

This is an extensive guide to establishing notions of trauma within the individual and the community. It speaks to the many causes of trauma, and the consequences thereof. It then guides women in the creation and maintenance of safe practices on interpersonal and community levels, pointing out the pitfalls of using harmful language to describe experience (e.g. psychiatric language, or criminalising language.)

Bolton, Mary Jo. Buck, Shannon; Connors, Edward; Kiernan, Kate; Matthews, Cheryl; McKellar, Melody; Wall, Tim; Willette, Chris; MacPhee, Mel; Steward, Pamela. (2013.) *Trauma-informed: The Trauma Toolkit: A resource for service organizations and providers to deliver services that are trauma-informed.* Klinic Community Health Centre

"Trauma is so prevalent that service providers should naturally assume that many of the people to whom they provide services have, in some way or another, been affected by trauma." This document provides a sense of urgency and immediacy to its extensive analyses and guidance. It addresses the issue of post-traumatic stress disorder in a way that seeks to derail the stigma associated with psychiatric language by placing it on a trauma continuum. It is intersectional and deals with traumas as diverse as war and childhood neglect.

Bowen, Elizabeth, and Murshid, Nadine. (2016.) *Trauma-Informed Social Policy: A Conceptual Framework for Policy Analysis and Advocacy*. Perspectives from Social Sciences: Vol 106, No. 2.

This peer-reviewed article is not behind a pay-wall. It systematically discusses effective attitudes and policies to be adopted by organizations seeking to reduce harm and trauma-related behaviours. The authors underscore, among others, the principles of intersectionality, trustworthiness, and safety.

Burrows, Leigh. (2016.) *Safeguarding Mindfulness Meditation for Vulnerable College Students.* Mindfulness. 7:284-285

https://www.researchgate.net/publication/280798727_Safeguarding_Mindfulness_for_vulnerable_colle ge_students

Ms. Burrows cites a small pilot study that shows that without taking into account difficulties such as anxiety, depression, and PTSD mindfulness meditation can re-traumatise certain individuals. This article can be used to advise against mandatory self-care programs at work such as mindfulness meditation and yoga, both of which have a focus one's body in a way that is seen as undesirable or even dangerous in coordination with the above difficulties.

Dierkhising, Carly and Branson, Christopher E. (2016) *Looking Forward: A Research and Policy Agenda for Creating Trauma-Informed Juvenile Justice Systems*. OJJDP Journal of Juvenile Justice. Vol 5, No. 1 <u>https://www.ncjrs.gov/pdffiles/249840.pdf#page=19</u>

In relation to the juvenile justice system, this paper suggests using shared goals across all stakeholders, along with strategy evaluation during the policy development process. The process begins with removing traumatizing elements from practices and the need for all staff/personal to be knowledgeable about traumatic stressors and their impact, especially in those that have decision making authority. Additionally, development of procedures/practices to help 'shield' front line workers from negative effects, which have been shown to be common amongst social workers. The need for practical policy to include coping mechanisms, that include training, peer-support and critical incident debriefing. In addressing system reform key points are safety, cross-system collaboration and reduction in barriers to change.

Felitti, Vincent; Anda, Rob, et al. (1998.) *Relationship of Child Abuse and Household Dysfunction to Many of the Leading Causes of Death in Adults: The Adverse Childhood Experiences Study*. American Journal of Preventive Medicine: Vol. 14, Is. 4. <u>https://www.ajpmonline.org/article/S0749-3797(98)00017-8/fulltext</u> DOI:<u>https://doi.org/10.1016/S0749-3797(98)00017-8</u>

The foundational work for most if not all trauma-informed policy, this study was commissioned by the CDC in 1998. Any bibliography discussing adoption and implementation of trauma-informed policy would be incomplete without this citation. Any adoption of said policy would also be incomplete, as would grant proposals. It is vital because it is more than twenty years old, and has not been disproven. The results from this study can also be found on the CDC website.

Government of Canada. (2018-02-02). *Trauma and violence-informed approaches to policy and practice. Government of Canada Public Health Services*. <u>https://www.canada.ca/en/public-health/services/publications/health-risks-safety/trauma-violence-informed-approaches-policy-practice.html</u>

Here is a summary document dealing with intersectional approaches to trauma-informed care. It includes examples of organizations with active trauma-informed policies.

Hecht, Amelie; Biehl, Erin; Buzogany, Sarah; and Neff, Roni (2018) *Using a trauma-informed policy approach to create resilient urban food system.* Public Health Nutrition Vol 21, No. 10. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6088531/

In relation to the Baltimore Food System Resilience Advisory Report, this study examines how the report applied trauma-informed principles in policy development. This paper also discusses benefits and challenges when using trauma-informed approach, concluding with challenges in developing traumainformed policy.

Manitoba Trauma Information and Education Centre (2020) Organizational Self-Assessment. <u>http://trauma-informed.ca/trauma-informed-organizationssystems/organizational-self-assessment/</u>

This page provides a check-list to assist organizations in becoming trauma-informed. The page includes multiple call-out sections on: policy and program mandates; hiring practices; policies and procedures; monitoring and evaluations. Much of this list has been developed from BC Centre of Excellence for Women's Health.

Menschner, Christopher and Maul, Alexander (2016) *Key Ingredients for Successful Trauma-Informed Care Implementation*. Center for Health Care Strategies <u>http://www.chcs.org/media/Brief-Key-Ingredients-for-TIC-Implementation-1.pdf</u>

A succinct report on best practices of Trauma-Informed Care with both organizational and client-facing approaches/strategies, based on numerous interviews from multiple stakeholders including: primary care personnel, trauma-informed trainers, program administrators, federal policy makers. The report discusses implementing a trauma-informed approach with organizational practices. These include senior administrator buy-in, training, safe-environment, and prevention of secondary traumatic stress. The report concludes with the need for foundational awareness through continued training in trauma-informed approaches.

Michigan Department of Health and Human Services (n.d.) *Trauma Policy* <u>https://www.improvingmipractices.org/online/pluginfile.php/40/coursecat/description/C6%209%209%</u> 201%20CMHSP%20Trauma%20Policy%20REV1.pdf

A detailed policy which begins by stating its purpose: "to promote the understanding of trauma and its impact, ensure the development of a trauma informed system and the availability of trauma

specific services for all populations serves." The policy has two main sections, the policy itself and standards. The policy lays out eight essential elements to provide, the primary of which is adoption of trauma-informed culture. The standards section addresses each of the previous eight policies and their requirements for implementation. The appendix has one item which deals with secondary traumatic stress and related conditions.

Michigan Department of Health and Human Services. (n.d.) *Trauma Policy Framework Guide*. Michigandot-gov.

https://www.michigan.gov/documents/mdhhs/Trauma Policy Framework Guide 576279 7.pdf

This is exactly what its title suggests: a template for the implementation and review of traumainformed policy in any organization. It uses SAMHSA's research and guidelines to inform it, and it shows that work of this type is being done internationally.

National Partnership to End Interpersonal Violence (NOEIV) (2018) *Policy Statement on Trauma-Informed Care*. <u>https://www.npeiv.org/post/policy-statement-on-trauma-informed-care</u>

A concise article advocating for the adoption of Trauma-Informed Care. The article includes methods and principles, then concludes with some outcomes from a Trauma-Informed Care approach.

Nguyen Jacquelline; Hughes, Kelli N.; Donnay, Sandra; Giray, Cagla; and Scott, Taylor (2020) *Trauma-Informed Responses to Immigration Policies and Practice*.

https://www.communitypsychology.com/trauma-informed-responses/

A brief article discussing how and why immigration policy and practices should be traumainformed. The authors highlight specific experiences and considerations for immigrant/migrant families, where trauma-informed responses are greatly needed, especially in cultural awareness. The article concludes with methods, trauma prevention and building community resilience.

Nova Scotia Health Authority. (2015) *Trauma-informed approaches: And Introduction and Discussion Guide for Health and Social Service Providers*. Government of Nova Scotia. <u>https://novascotia.ca/dhw/addictions/documents/TIP_Discussion_Guide_1.pdf</u>

"Mindfulness and other skills are seen as important not only for service users but also for service providers." A short document noting the prominence of trauma in the community at large, citing statistics for Nova Scotia, including trauma identified inmates. This article provides a selection for further reading, which are featured in this bibliography.

Oregon Health Authority (2015) *Trauma-Informed Services Policy*. <u>https://www.oregon.gov/oha/HSD/AMH/Trauma%20Policy/Trauma%20Policy.pdf</u>

The policy that is used by the Addictions and Mental Health Division of the Oregon Health Authority. This policy provides a description of itself, its purpose, rational and applicability. While the policy itself is short – consisting of only five parts – a definitions section helps with precise policy meanings.

Peer2Peer Education. (2018) *Trauma-Informed Practice Policy*. https://peer2peereducation.com/2018/06/01/trauma-informed-practice-policy/

This is a brief policy statement addressing this organizations use of trauma-informed principles and their approaches in implementing trauma-informed practice. The remainder of the policy statement defines trauma, trauma-informed practice and why it is needed within e-learning and education.

Randall, M.; Haskell, L. (2013). *Trauma-informed approaches to law: Why restorative justice must understand trauma and psychological coping*. Dalhousie Law Journal, 36(2), 501-534

Randall and Haskell focus on trauma's effect on the belief in a just world and the ability to trust. They address classic and mainstream psychological focuses on the individual without connecting to the larger systems at work. According to them, trauma-informed law prefers restorative justice as opposed to the "retributive" justice that is so common. This article presents not only a clear justification for the need for trauma-informed workplaces, but presents a potential framework from which to create a grievance policy, something that accepts that the modern workplace is far from an ideal space for survivors of trauma.

Reynolds, Vikki. (2018). *Resisting Trauma with Justice-Doing*. The Affiliation of Multicultural Societies and Service Agencies. <u>https://www.youtube.com/watch?v=RHNoFBS5a0g</u>

"The measure for me is not how mentally well the workers are doing, it's how we're treating people." Vikki Reynolds is an activist/therapist who works to bridge the worlds of social justice activism with community work & therapy. Her experience includes supervision and therapy with refugees and survivors of torture, sexualized violence counsellors, mental health and substance misuse counsellors, housing and shelter workers, activists and working alongside gender and sexually diverse communities. This talk addresses interpersonal relationships within a care-worker team, which can be extrapolated for other workplaces. Keywords: vicarious trauma,

burnout, collective care. Very important for managerial training.

Reynolds, Vikki. (2019.) The Zone of Fabulousness: Resisting Vicarious Trauma with connection, collective care, and justice-doing in ways that centre the people we work alongside.

In this article, Ms. Reynolds positions the idea of collective care in contrast to self-care. She suggests that self-care contains an element of harm simply in that it isolates the individual from the team. The path to sustainability, she says, is a combination of the two. Integral to this collective care notion is the acknowledgement of the emotional and spiritual harms faced in significantly under-resourced environments. Then, she describes some signs of vicarious trauma, and what can be done about them working within a collective care policy.

https://vikkireynoldsdotca.files.wordpress.com/2019/09/2019-context-uk-zone-of-fabulousnessreynolds.pdf

SAMHSA's Trauma and Justice Strategic Initiative. (2014.) *SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach*. U.S. Department of Health and Human Services.

This guide to the implementation of trauma-informed policy is the result of thorough research into the problem of trauma. It gives a history of trauma work; a working definition of trauma that encompasses nuances in individual experience; a set of key principles in trauma-informed approaches; and guidance for implementation. The format includes bullet points, elaboration in clear prose, and a set of sample questions organizations might ask themselves regarding proper and successful implementation.

Scattergood Foundation. (n.d.) *Trauma-informed Public Policy: Why do we need it and how can it be created?* (Draft). ACEs Connection.

https://www.acesconnection.com/fileSendAction/fcType/0/fcOid/407328751913481276/filePointer/40 7328751913481423/fodoid/407328751913481420/Trauma%20Informed%20Public%20Policy%20Guide. pdf

ACEs Connection is a networking website that seeks to reduce the number of Adverse Childhood Experiences (i.e. traumatic events in childhood that carry over into adulthood) by connecting folks already involved in ACEs science and policy-building. The Scattergood Foundation is a woman-focused consulting firm and lobbying group based in Pennsylvania. This article is a germinal work, an aggregate summary of prominent works on the need for and implementation of trauma-informed policy.

Schmidt, R.; Poole, N.; Greaves, L.; and Hemsing, N. (2018). *New Terrain: Tools to Integrate Trauma and Gender Informed Responses into Substance Use Practice and Policy*. Vancouver, BC: Centre of Excellence for Women's Health.

http://bccewh.bc.ca/wp-content/uploads/2018/06/NewTerrain_FinalOnlinePDF.pdf

A substantive resource resource and guide, New Terrain provides a number of tools for traumainformed policy. The first part, 'Getting Started', defines and explains trauma as it intersects with gender and sex. The section includes a list of integration benefits, as information sheets, and how to connect trauma-informed approaches to practice. Part Two on trauma, gender and sex informed approaches, provides numerous examples of tauma-informed approaches through out Canada. In part 3, this manual lays out sets of tools for program and policy development with steps. The final part discusses how to promote gender equity in policy, with examples. Overall this guide covers multiple trauma-informed practices and principles emphasizing trauma awareness, safety and trustworthiness, collaboration and connection, and skills for resiliency

Sexual Violence New Brunswick. (n.d.) Maintain: A Blueprint for Collective Care

This is a mission statement from Sexual Violence New Brunswick that outlines the need for trauma-informed worker care in gender-based violence work. The document cites key activities in the creation of a policy and work environment, such as: Conduct and internal agency audit; develop a collective care model; and ongoing research into collective care practices. This document can be obtained by reaching out to SVNB here: info@svnb.com

Trauma-Informed Care Implementation Resource Center (2019) *Policy Considerations*. Center for Health Care Strategies. <u>https://www.traumainformedcare.chcs.org/policy-considerations/</u>

This article discusses a few key considerations when thinking about organizational policy building. These are: identifying opportunities for collaboration; the impact of adopting trauma-informed

care in regards to return on investment; encouraging integration of care, prevention and early intervention in creating financial incentives; engagement with lived trauma experiences in support of policy design; and investment in early prevention of trauma through community connection of services to infants, children and families at risk.

Vandernoot Lipsky, Laura. *Beyond the Cliff.* (2015). TEDx Talks, Washington Corrections Center for Women. <u>https://www.youtube.com/watch?v=uOzDGrcvmus</u>

An uplifting and insightful talk about the way we treat ourselves in activist circles, and how damaging that environment can be to us personally. VanderNoot Lipsky brings levity to very serious issues in trauma practice, at the same time conveying the need for transformation within those spaces.

VanderNoot Lipsky, Laura. (2009.) *Trauma Stewardship: An Everyday Guide to Caring for Self While Caring for Others.* San Francisco: Berrett-Koehler Publishers, Inc.

Another foundational work for trauma-informed policy. This book goes beyond minor self-care practices and addresses the fact that exposure to the trauma of others is often traumatising. It seeks to position primary care givers to be in a headspace that is protective and preventive. It would be important to adapt the findings and philosophy of this book to any work environment seeking to establish a trauma-informed work policy.

Wilson, Charles; Pence, Donna; and Conradi, Lisa. (2013) *Trauma Informed Care*. Encyclopedia of Social Work. <u>https://oxfordre.com/socialwork/view/10.1093/acrefore/9780199975839.001.0001/acrefore-9780199975839-e-1063</u>

A primer on the concepts of trauma and trauma-informed care that includes design for traumainformed policy. The paper begins with a definition of trauma, its effects and responses. This is followed by a definition of trauma-informed care along with 10 core principles – that have been reiterated in many other papers – then goes on to list service related procedures. This paper also includes a policy framework outline, from the National Center for Children in Poverty.

Wolf-Prusan, Leora. (n.d.) *Creating Trauma-Informed Policies: A Practice Guide for School and Mental Health Leadership*. Center for Applied Research Solutions: Research to Practice. <u>http://cars-rp.org/_MHTTC/docs/Trauma-Informed-Policies.pdf</u>

This pamphlet seems to address primarily secondary-school students with its graphics, colours, and educational buzzwords like "choice points." The value of this SAMHSA-informed document is that it engages students and faculty in the idea of adopting trauma-informed school policies, which will then, it is to be hoped, inform employment. The document addresses policy alteration, specifically giving options such as "Add," or "Amend". It is a valuable primer on policy formation for the purposes of trauma-informed work environments.