

Welcome

Confessions of a (trauma Informed) system changer

Claire Ritchie
No One left Out


“At least you’ve got one.”



A little about me

Not a systems expert

Trainer and Consultant

Commissioner and practitioner

Mental Health Social Worker

Trauma-Informed Bristol, North Somerset & South Gloucestershire

Integrated Care Partnership Systems Change Manager
(BNSSG)
2022-23

Trauma Informed Practice Officer North Somerset
2024-26

Local action plan

Mapp existing strategy, policy, and practice

Impact evaluation plan

Training

‘A set of things working together as parts of a mechanism or an interconnecting network; a complex whole.’ Oxford English Dictionary

'Taking action to improve the way the system works for people who use it. Identifying blocks and addressing what isn’t working or understanding what is working well and doing more of it.' Golden Key and Second Step 2022



Definitions

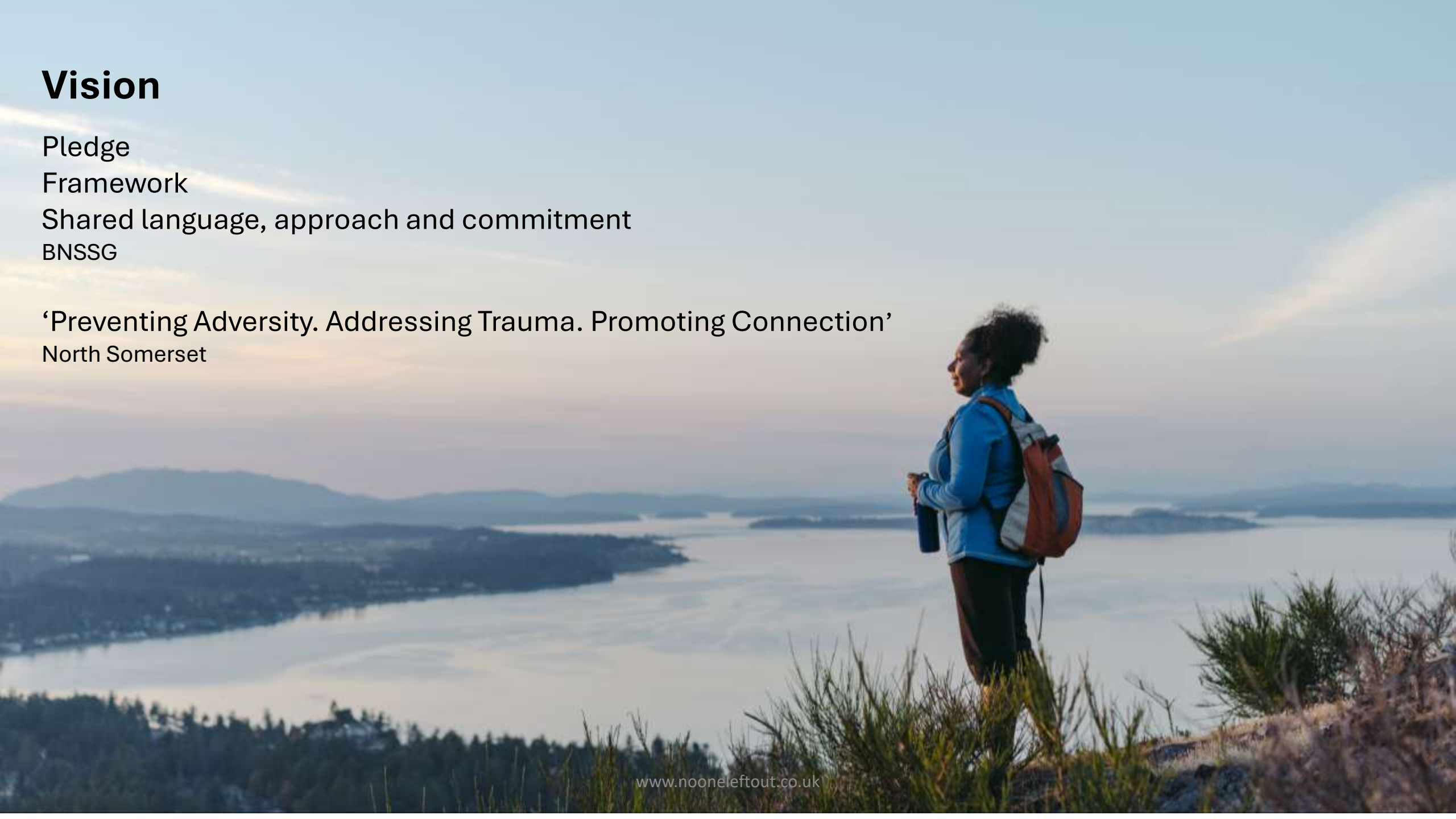
Lessons learned

1. Clarify which system you're trying to change

Vision

Pledge
Framework
Shared language, approach and commitment
BNSSG

‘Preventing Adversity. Addressing Trauma. Promoting Connection’
North Somerset



Our Vision

A compassionate Plymouth is a trauma sensitive city.

Realise

It realises the potentially damaging consequences of traumatic experience and the opportunities that exist for healing to occur through safe relationships.



Recognise

It recognises the signs and expressions of trauma, but courageously seeks to address the underlying causes.



Respond

It responds with empathy, integrating the knowledge of trauma into its policies and professional practice.



Resist

It resists retraumatising people and seeks at all times to de-escalate the deep anxiety that adversity can cause.



Resilience

It develops resilience within people and communities, enabling people to build upon their strengths and continue to challenge the causes of adversity.

Co-production

Relationships and connection first and centre

Creative and flexible ways for people to be involved

Post and pre-event meetings

Clarity on what can and can't be changed

Renumeration

Power dynamics

Safe spaces and model TIC principles

Evidence you've listened

Persevere



Lessons learned

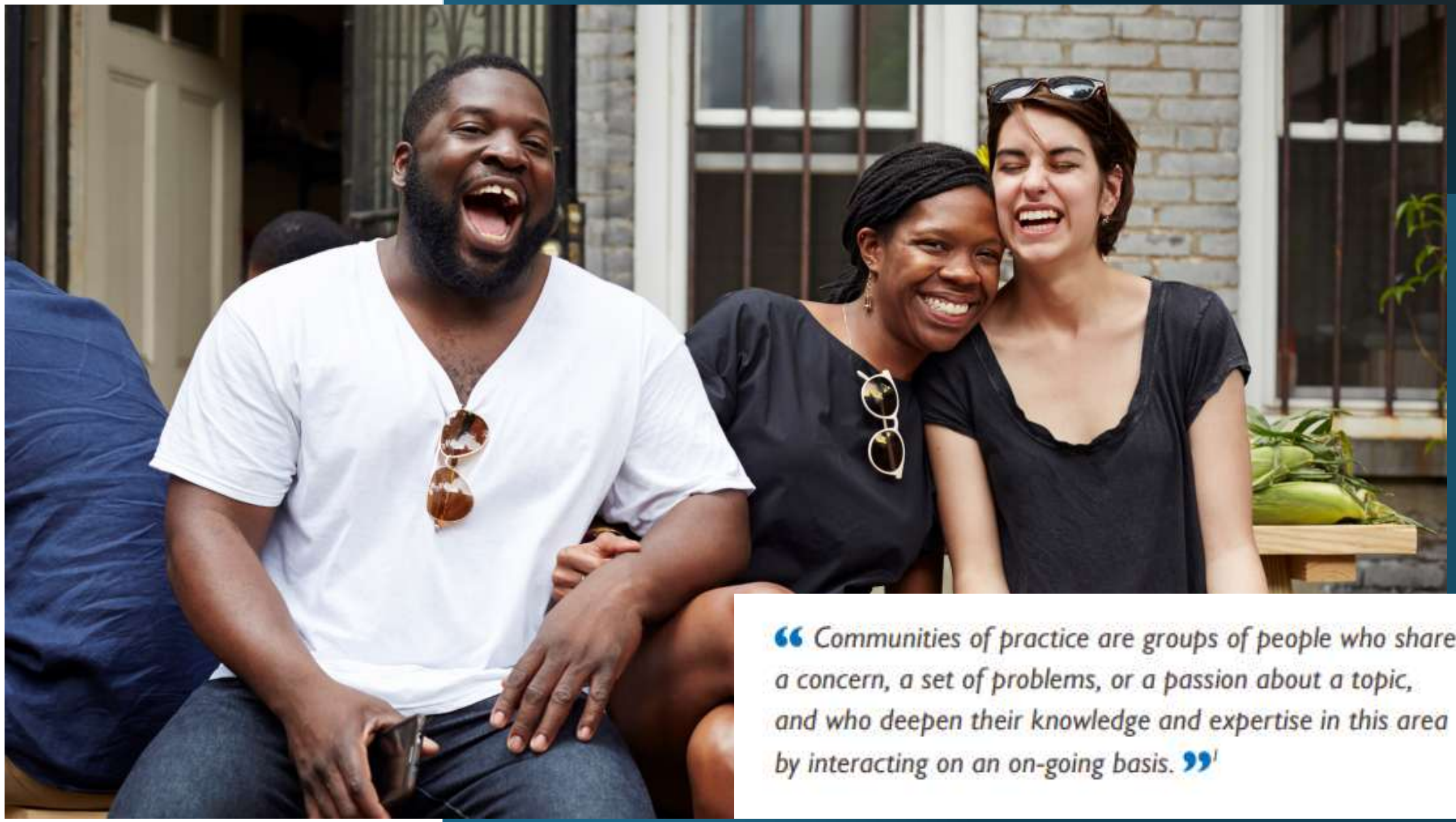
1. Clarify which system you're trying to change
2. Create your vision
3. Co-production at heart of systems change


Council Members
CEO’s
Directorates
Leadership Team
Service Managers
Staff
Leadership

Lessons learned

1. Clarify which system you're trying to change
2. Create your vision
3. Co-production at heart of systems change
4. Importance of leadership support


Training



> *Communities of practice are groups of people who share a concern, a set of problems, or a passion about a topic, and who deepen their knowledge and expertise in this area by interacting on an on-going basis.*[1]

Lessons learned

1. Clarify which system you're trying to change
2. Create your vision
3. Co-production at heart of systems change
4. Importance of leadership support
5. Workforce development and learning
6. Community of practice



- Public understanding and support
- Start with staff wellbeing
- Commissioning
- Cost benefit/avoidance
- Induction training
- Don’t reinvent the wheel

We are all system changers!

‘Systems change can happen within one or across multiple organisations and communities’
Golden Key and Second Step 2022




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Mental Health: "Combined with homelessness, it's a nightmare."

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Dr Pete Keohane, University of Plymouth

UNIVERSITY OF PLYMOUTH

Livewell Southwest

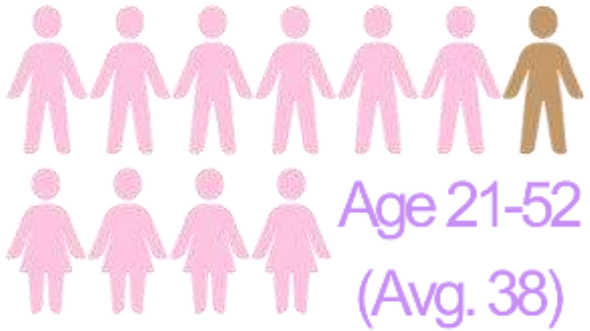
Aims

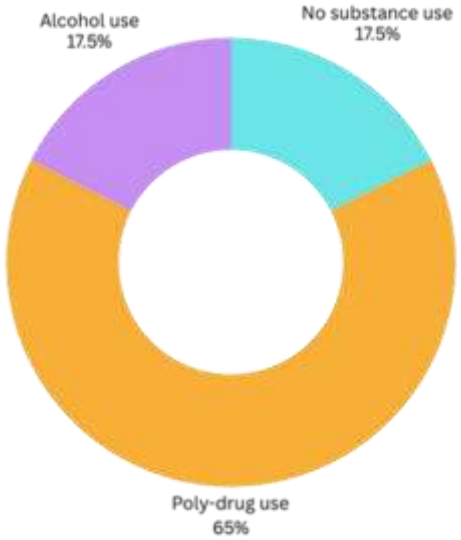
People experiencing homelessness have relatively poor mental health. Although trauma and psychologically informed services are becoming more commonplace and demonstrate positive outcomes, little is known about how people experiencing homelessness understand their own mental health.

- To explore perceptions of mental health and mental health services.
- To explore the perceived barriers and facilitators to accessing mental health services.

Methodology

- Consultation sought to reduce barriers to accessing research opportunities
- 11 interviews completed at a day center for people experiencing homelessness in Plymouth, UK.
- IPA analysis





100% Self-report MH difficulties

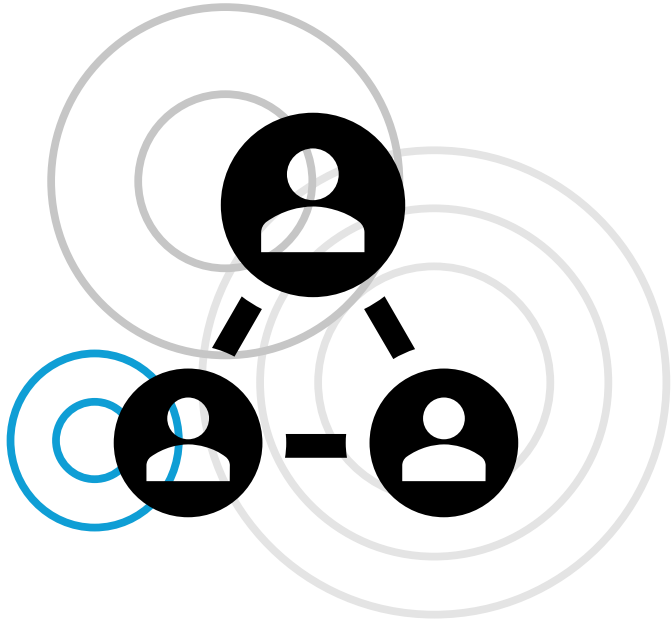
Understanding Mental Health

I didn't have either parent and I've just been left to my own devices. So I've done what I know how to survive

I've got a lifetime of...hurt and abuse, I guess, stress and bullshit and...some of the stories I could tell you and that.

My whole family's got it, my mum's got it, and her mum had it, it obviously goes round in the genes, like I hope I haven't caught something [...] we all suffered from a lot of trauma from men and unhealthiness and shit.

9 times out of 10, right, if a man is beating a woman and the kid sees it, what's the kid gunna do when they're older?



Impact of Homelessness

Homelessness causes mental health because you don't know where you're gonna sleep, where you're gonna eat...I'm constantly on edge, having glass bottles thrown at my tent and that.

Even though I'm a grown-arse man, I'm still scared.

I know four that have died in the last month, all cause they've been trying to use things as blockers and there's bad batches going around. It's... heartbreaking.

No one should feel like that, better off on the street, you know what I mean? I've been on the street for 2 1/2 years. It's just normal to me now.

"We Want Help"

"People sometimes don't have the self-worth or courage to get up and go to them and say that I need help."

"I didn't understand it, I didn't know what depression was. So I yeah, I would get angry, I would smash doors and walls and things, and it was depression."

"You shouldn't have to go and crime just to get help."

Barriers

Medication

- “…just medicate and medicate and medicate. And a year later and nothing’s changed and it's not actually got to the root cause at all”

Repetition

- “I've been let down, I've trusted somebody to help and they’ve passed me from pillar to post, post to pillar.”

Dual diagnosis

- “It's still ‘well you're taking mind altering substances’. Well, hang on here. I'm taking that for a fucking reason. Get real. It's common sense.”

Waits

- “Oh yeah we’ll refer you on, you'll be put on a waiting list, hah, 12 months down the line when you've lost all motivation to work.”

Stigma Cycles

A man's looked at as a man isn’t he, he’s meant to be strong, tough, whatever. But... Men find it more difficult than they let on. They won't open up, they won't talk about how they feel, but it doesn't mean that they're not feeling it.

I did lose faith in the police. And then when you lose faith in the police, you know nothing will protect you like...they were both sexist and racist.

I'm not a head case, there is a stigma about having a psychologist [...] You know, it's like, oh, well, he's under a psychologist he must be mental.

People walk past you on the street and look down on you. It's fucked up. If you see a stray dog, people are phoning the RSPCA, the dog’s given medical treatment, shelter, three meals a day.

Rebuilding Trust

“I wouldn't even access it, cause they’re crap, they’re absolutely crap. They don’t help you with what you need help with.”

… just go around these places to generally talk to people really because you'll find all that out just by doing that, just by sitting down and having a cup of tea

I think they should go out and search more for people rather than wait for them to come to them

[Ask] ‘Why'd you act the way you do?’ Get down to the core of it, instead of um giving me coping strategies

Recommendations

- Proactive outreach; increase accessibility and build trust
- Move away from just medical understandings towards formulaic framework (e.g. PTMF)
- Build attachment-based understandings with key support networks
- Continue to develop Housing First initiatives
- Advocate for wider systemic change

Thank You

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