

# Provision of Victim-Centered and Trauma Informed Services

March 20, 2018  
2:00–3:30 p.m. (eastern time)

## Presenters:

**Amy Fleischauer**, Director of Survivor Support Services, International Institute of  
Buffalo

**Kim Harris**, MSW, LCSW, SME - Human Trafficking  
Lead Monitor, Mental Health Block Grant  
Substance Abuse and Mental Health Services Administration  
U.S. Department of Health and Human Services

**Ami Rowland**, Chief Operating Officer, Covenant House California

Moderated by: **Kristy Cho**, OVC Fellow, Human Trafficking Survivor-Informed  
Services, Office for Victims of Crime, U.S. Department of Justice

The material presented during today's webinar session will be available on the Human Trafficking  
Learning Grantees Community and the OVC TTAC Human Trafficking Webinars page.  
*The session will be recorded and will begin shortly.*

As with all technology, we may experience a momentary lapse in the webinar session. In the event  
of a problem, please be patient and remain on the line. If the problem persists, please contact  
[khough@ovcttac.org](mailto:khough@ovcttac.org) for technical assistance.



# Today's Presenters

Amy Fleischauer



Kim Harris



Ami Rowland



Kristy Cho



# Objectives

As a result of this webinar, participants will be equipped to:

- Understand the concept and role of person-centered approaches in supporting victim-centered and trauma informed practice and policy.
- Identify how outreach, identification, and service provision to victims of trafficking can be positively impacted by implementing strategies that utilize trauma-informed approaches.
- Learn to incorporate victim-centered services that are also trauma-informed into your programs and service provision.





# International Institute of Buffalo

*Making Western New York a better place for, and because of, refugees and immigrants.*

## Human Trafficking Support Services

- Specialized intensive case management services for foreign-born adults, USC adults, and minors
- Services provided to 308 individuals from 28 countries of origin in 2017
- Primary service provider within HTIC
- Housing first pilot program
- On-site presence at child protection
- Pilot program to address link between HT and SA
- Paid survivor input to all aspects of program



# International Institute of Buffalo

*Trauma-informed, harm-reductionist, client-centered*

## Bi-annual self-evaluation process

1. Educate department staff on TIC
2. **What do we KNOW WORKS?**
3. Where is there a disconnect between what we KNOW and what we DO? (possibility of re-traumatization)
4. **How can we fix it? (individual/program)**
5. What new policies need to be implemented? (organizational)



# Poll

Have you ever participated in a formal or informal programmatic or agency-wide evaluation of your services as related to victim-centeredness or trauma-informed care?

- A. Yes (formal evaluation)
- B. Yes (informal evaluation)
- C. Not yet
- D. Not interested



# International Institute of Buffalo

*Our only goal:*

*To create an atmosphere and experience in which survivors feel as though they will always be welcome & receive assistance as they define it.*

\* SAFETY \* CHOICE \* ENGAGEMENT \*

*(How can we behave as differently from the trafficker as possible?)*



# International Institute of Buffalo

Micro (case manager & client)

- Relationship is everything – create opportunities for this
- Meet client where they are/where they feel safe
- Warm/skype-based introductions and referrals
- Practice my pitch
- Always happy to hear from you



3/2/18 2:54 AM

32. [REDACTED] HIGHLY doubt you will be working today, but if you are, can we please talk? - I know I wasted a lot of your time yesterday with dumb shit, and for that, I am sorry! But what I need to talk about is super serious and idk why, (cause I barely trust ANYONE) but I trust you and I need your help! -if your off today can we talk Monday? On the phone not in person...

3/2/18 9:53 AM

32. Hey [REDACTED] absolutely we can talk. I'm not off today, so let me know a few times and I'll make it work

3/2/18 11:38 AM

32. No snow day 4 u :/ 😂

Verizon 3G 2:07 PM

Messages

Contact

iMessage  
Today 2:04 PM

"Don't call this number back you ain't shit Rikki I hate you

Delivered



iMessage

Send



ovc

OVCTAC  
OFFICE FOR VICTIMS OF CRIME Training and Technical Assistance Center

# International Institute of Buffalo

Mezzo (programmatic - client)

- Have helpful and comforting stuff available
- Solid confidentiality & consent practices (not just policies)
- Who are our “best” partners?
- Celebrate survivor success (Amazon wishlist, cards, potlucks)



# International Institute of Buffalo

Mezzo (programmatic – staff)

- Safety planning review
- Each staff member take part in community coalition/network
- Safe space to ask for help
- Celebrate together
- Time off = no contact



# International Institute of Buffalo

## Macro (organizational)

- Welcoming Space – lobby and meeting space
- All front-line staff trained on trauma and TIC
- Off-site time for notes
- Department retreat time
- Specific training for in-person interpreters



# Facilitated and Audience Q&A

Join the conversation:

Ask in the chat box below.

Send an email to

[humantrafficking@ovcttac.org](mailto:humantrafficking@ovcttac.org)





# Covenant House California

Ami Rowland

We believe that no young person deserves to be homeless, that every young person in CA deserves food, shelter, clothing, education...and most importantly, to be loved. To provide unconditional love and absolute respect to all youth.



Immediately after being thrust into a dangerous world of homelessness. Youth are far more likely to be victimized.



# Why we needed to respond 'differently'...

- Our community partners, specific to human trafficking, were frustrated with us.
- Identified victims would only stay within our walls 12-30 hours at a time, on average.
- These youth were blowing out and exhibiting behaviors that were 'difficult to manage' according to our staff.
- We were not identifying trafficking victims well at intake.
- When law enforcement brought victims to our door, we didn't have any protocols, forms, assessment, etc. to bring them into the shelter appropriately, and we were without any information that would help us serve them best.
- There were no emergency trafficking beds specific to youth in our community.





# We strapped on our boots and...

- Offered trainings - 40 hour intensive and Human Trafficking specific trainings every other month.
- Started a work group - originally only had like-minded staff on the work group, expanded to include the safety officer, the cooks, the loudest manager, development, outreach. This group met 2x a month for over a year.
- Initiated book clubs.
- Hired one Case Manager specifically to work with human trafficking victims. This person has a higher level of training, and experience working with victims and/or lived experience. This case manager also has a smaller case load.
- Trained staff on victim identification, and share tracking data monthly in a dashboard.
- Hired a human trafficking 'expert' on our team to oversee street outreach and intake.
- Collaborate on street outreach- we partner with 5 different agencies in LA.
- Ensure really clear communication and focus from our leadership around our values of grace, love, 2<sup>nd</sup> and 3<sup>rd</sup> and 4<sup>th</sup> chances in this work...



# The Genesis Room

## Before



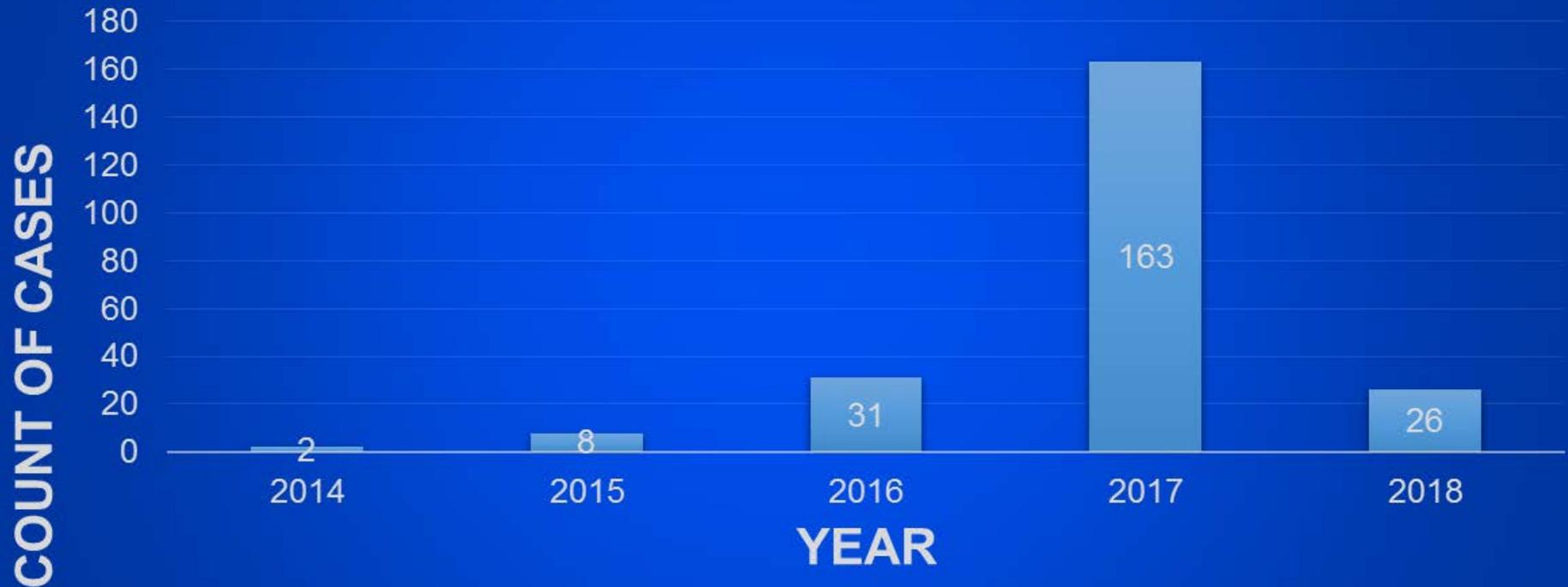
## After





. . . and our numbers continue to grow

## Hollywood/Los Angeles





# Culture Shifts...

- Create a culture of learning.
- Adjust program 'expectations' and policies.
- Intentional strategies around how to ensure that our space, the language we use and our individualized approaches are open, affirming, inclusive and trauma-informed.
- Share stories internally about successes, setbacks and mistakes made.
- Our in-house expert is constantly challenging us!
- Grace and love— stay mission focused at all times, ensuring organizational leadership that models this practice.





“As a person who has come from a challenging upbringing, I know that your challenges, your suffering, your difficulties, every single one of them was not wasted. This will be the place that lifted you up and gave you wings to fly out and do unimaginable things, because it does not matter from where you come, what matters is where you are going.”

OPRAH WINFREY

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# "Person-Centered Approach: Human Trafficking"

Kim Harris, MSW, LCSW  
SME, Human Trafficking  
Lead Monitor, Mental Health Block Grant  
Substance Abuse and Mental Health Services  
Administration  
U.S. Department of Health and Human Services

Webinar



**SAMHSA**  
Substance Abuse and Mental Health  
Services Administration



# Person-Centered Organization

- Policies that are person-centered, hire and train all staff in person-centered approaches (support, direct service, clinical and management).
- Partnership versus Power and Control Structures (Culture Change).
- Monitoring and continuous quality improvement in the areas that measure improved quality of life and satisfaction with services.

# Potential Challenges Implementing Person-Centered Approaches

- All levels of an organization may not agree with the person-centered approach.
- Leadership may have concerns that funding source allocations cannot respond to people's identified goals (unallowable costs).
- Stakeholders and Providers may see the person's goals and aspirations as unrealistic.
- Staff may have ethical dilemmas or conflicts if they disagree with the person's choices and decisions.
- Parts of the organization may resist working in a more flexible way.

# Principles of Person-Centered Care for Human Trafficking

## Self-Determination

- Child Reunification
- Harm Reduction Models
- Reproductive and Primary Care Health (Gender (Gender Responsive, Trauma Informed)
- Mental Health and Substance Use (Integrated Behavioral Behavioral Health Agencies)
- Spirit Based (all faiths/practices or none accepted) accepted)
- Judicial and Law Enforcement (Promote trauma informed trauma informed and person-centered practices that practices that support and engage victim choice and choice and agency).

# Principles of Person-Centered Care for Human Trafficking

## Empowerment

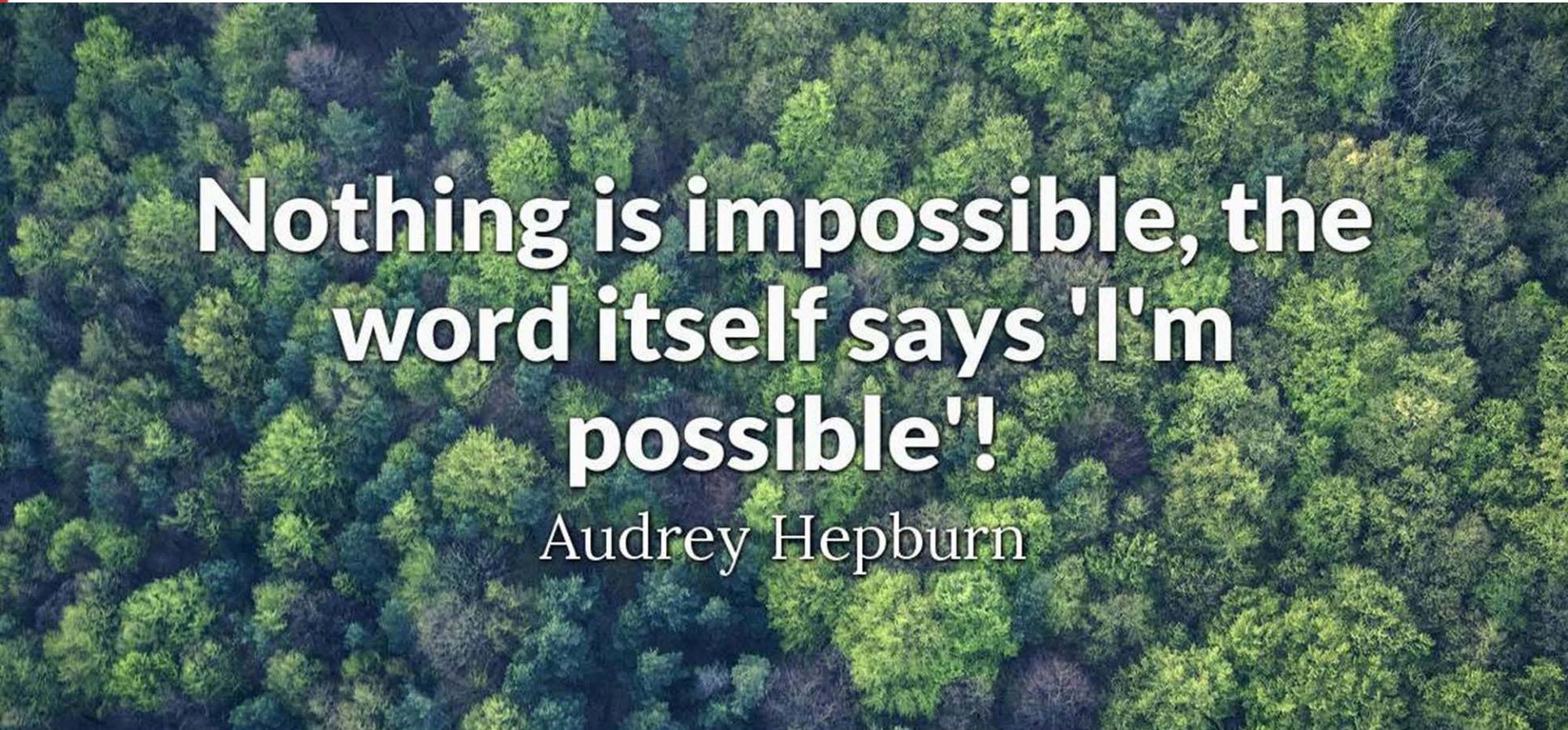
- Power and control (Poverty, Homelessness, IPV, Criminal IPV, Criminal Record, Childhood Trauma)
- Choice and their identification of success.

# Essentials for Person-Centered Care Practice

- Hope (people want to thrive not just survive)
- Strength-Based
- Culturally and Trauma Responsive and Informed
- Holistic and Comprehensive
- Shared Decision-Making
- Respecting the person's values, preferences and expressed needs
- Coordinating and integrating care and services
- Ensuring people are safe and physically comfortable
- Continuity between and within services
- Access to appropriate care and services when needed

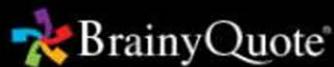
# SAMHSA's 10 Components of Recovery in Behavioral Health





**Nothing is impossible, the  
word itself says 'I'm  
possible'!**

Audrey Hepburn



# Resource

Don't reinvent the wheel, there are a number of agencies that have developed resource tools and worksheets to assist with person-centered care.

**Generic Person Centered Care Planning Questionnaire — For Provider**

Please indicate the degree to which you agree or disagree with the following statements about your experience of treatment planning. The scale ranges from 1 for strongly disagree to 5 for strongly agree, with the following options in between. It also is possible to check DK if you feel you do not know how to rate a specific item.

	1	2	3	4	5	DK
	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree	I don't know
1. I invited each person that she or he can bring family members or friends to treatment planning meetings.						
2. I offer each person a copy of his or her plan to keep.						
3. I write treatment goals in each person's own words.						
4. Treatment plans are written so that each person and his or her family members can understand them. When professional language is necessary, I explain it.						
5. I ask each person to include leading questions in his or her plan that are based on his or her cultural background.						
6. I encourage each person to include other providers, the community or meeting appropriate, in their meetings.						
7. I include each person's strengths, interests, and beliefs in his or her plan.						
8. I link each person's strengths to objectives in his or her plan.						
9. I make sure that plans include the most few concrete steps that each person has agreed to work on.						
10. I include those areas of each person's life that he or she wants to work on (like health, social relationships, getting a job, housing, and spirituality) in his or her plan.						
11. I try hard to understand how each person accounts for what has happened to them and how they see their experiences based on their cultural background.						
12. I include in treatment plans the goals that each person sets that are important to them.						
13. I develop care plans in a collaborative way with each person I serve.						

Generic Person Centered Care Planning Questionnaire — For Provider

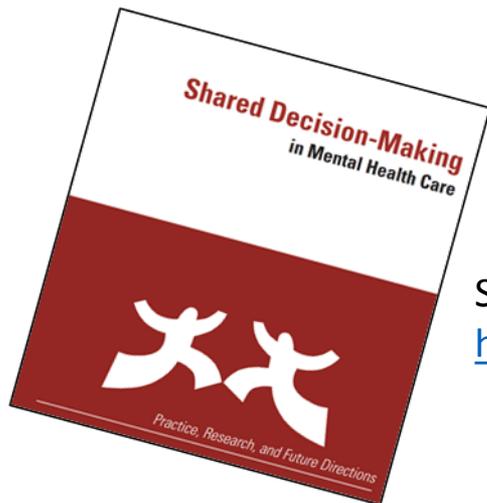
[http://www.ct.gov/dmhas/lib/dmhas/publications/PCCQp\\_provider.pdf](http://www.ct.gov/dmhas/lib/dmhas/publications/PCCQp_provider.pdf)

**Person-Centered Planning Tool**

What do others need to do to support you?

What are the characteristics of the people who support you best?

Person-Centered Planning Tool  
[http://www.nj.gov/humanservices/dd/documents/person\\_centered\\_planning\\_tool.doc](http://www.nj.gov/humanservices/dd/documents/person_centered_planning_tool.doc)



Shared Decision-Making

<https://store.samhsa.gov/shin/content/SMA09-4371/SMA09-4371.pdf>

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# Facilitated and Audience Q&A

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# Poll

Which learning objective would you like to learn more about?

- A. Understand the concept and role of person-centered approaches in supporting victim-centered and trauma informed practice and policy.
- B. Identify how outreach, identification, and service provision to victims of trafficking can be positively impacted by implementing strategies that utilize trauma-informed approaches.
- C. Learn to incorporate victim-centered services that are also trauma-informed into your programs and service provision.



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Thank you!

Please take a moment to fill out an evaluation for this webinar.



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