Best Practices to Promote Health

Trauma Informed Community Building

Description of service: A Model for Strengthening Community in Trauma Affected Neighborhoods (San Francisco)

Adults, children, and families are often overwhelmed with trauma as a result of their living conditions. This pervasive-current and historical-trauma requires community building and revitalization that takes into account residents’ emotional needs as well as practices to mitigate the possibility of re-traumatizing triggers. The TICB model addresses five challenges that trauma impacted communities face during transformation efforts:

1. Lack of trust and social cohesion
2. Lack of stability, reliability, and consistency
3. Disempowerment and lack of a sense of community ownership
4. Inability to vision the future
5. Breadth and depth of community needs

Team reactions:

- Trauma Informed Community Building is a way of buying in to the new community.
- Some of these components are already in place.
- We would then have to operationalize these principles, but it could provide shared values.
- This is realistic if you start it at the front end and get the buy in.

Possible Next steps:

- The Community Builders will adopt these principles if they are developed
- The Office of Community Wealth Building will begin discussion with the Informed Neighbors Corps to begin the development of principles
- Office of Community Wealth Building will release a request for proposals to develop city-wide redevelopment principles
- The development of city-wide principles should build off of the principles developed by the Informed Neighbors Corps

Supportive Housing

Pathways to Housing: A Housing First Model of Ending Homelessness

Description of service: A Housing First model of ending homelessness, which is an approach that centers on providing people experiencing homelessness with housing as quickly as possible—and then providing services as needed specifically in the areas of mental and physical health, substance abuse, education, and employment in order to facilitate recovery and integration into the community.

Team reactions:

- The cost saving in this model may be appealing to stakeholders
- It requires a lead organization with staff to both manage housing and offer intensive supportive services. This is a model that does have a strong wrap-around framework.
- It may be difficult to get funding
- The invisible population is an ongoing problem in public housing that is not being adequately addressed
- Temporary and permanent housing agencies exist in Richmond, but it can be difficult to access these services.
- The presence of a neutral housing advocate in the community should theoretically encourage residents to come forward and disclose the fact that they are housing invisible tenants.
Possible Next steps:

- Work with the housing advocate to:
  - Create a comprehensive list of housing-related service providers
  - Host a resource fair to introduce providers to each other, and residents to available services
  - Have service providers share information directly with residents
- Work with RRHA to get temporary amnesty for residents housing invisible tenants
- If RRHA will grant amnesty, work to measure the number of invisible residents in Creighton Court (in partnership with the Informed Neighbors?)
- Identify existing community meetings where city officials and the developers can provide regular updates

Mental Health and Substance Abuse:
For people who struggle with co-occurring mental health and substance abuse disorders, impairment of life skills and health risks are great. The chances for successful treatment are less; that is, if treatment is even available. All of these factors contribute to stigma and further complicate service seeking for the population. During discussions about redevelopment, increasing attention has been paid to the intersection of trauma, substance use, and mental illness. Unfortunately, many gaps in services have been identified. In turn, evidence based practices were reviewed and potential actionable steps to address existing challenges were identified.

Evidence-based practices reviewed:

- Clinical Mental Health Counseling
- Substance Abuse Treatment
- Hot spotters
- Celebrating Families!
- San Antonio Model
- Mental Health First Aid (MHFA)

Team reactions:

- There is a lack of mental health and substance abuse services especially for adults and the uninsured
- If a young person needs quick care and has no insurance, it is about impossible to acquire services
- It would be beneficial to established relationships with other agencies to create more of a team orientation
- Service providers are often not aware of existing programs to recommend, or residents might qualify
- People struggling with mental health issues have trouble navigating the existing services
- Address stigma by teaching service providers to emphasize addiction as a medical issue and not a character flaw
- Trauma-informed care should be adopted by area service providers
- Trauma, mental health, and substance abuse must be addressed together

Possible Next steps:

- The Resource Centers and the Housing Advocates should be aware of the and refer for services:
  - Virginia Health Center
  - Daily Planet
  - Crisis stabilization center at Chippenham Hospital
- Existing programs could possibly be expanded to incorporate elements of the Celebrating Families! Model.
  - Strengthening Families Program
  - Greater Richmond Stop Child Abuse Now (SCAN) Family Support Network
- Hold substance abuse meetings in the community (“inspiration meetings”).
  - Challenge Discovery agreed to help facilitate meetings.
  - A representative from Informed Neighbors would like host the meeting
  - Invite a speaker from the Healing Place to speak about addiction
- The Trauma Informed Community Network is available to increase the use of trauma-informed care
- Targeted training of MHFA for youth for parents, service providers, and community leaders in Creighton Court
- Consider developing common screening tools for mental health problems to be used across agencies
- (Some group) should educate (some other groups) to increase the utilization of drug courts
- (Some group) should provide training to service providers in motivational interviewing