Every day staff working with traumatized and sexually aggressive youth face the possibility of potential risk. Direct care staff, clinical and case management staff have been sexually, physically, and verbally assaulted on an all too regular basis. In addition to that, they can be witness to youth and co-workers (friends) being injured both through assaults as well as during physical interventions meant to keep people safe. They read and hear about the horrific and traumatic events that happened to the youth they work with prior to meeting them. This trauma is not limited to direct care or front line staff. All staff working with these youth, from cafeteria workers to custodial staff, from line workers to administrators, have the potential for traumatic experiences while at work. Whether they realize it or not, all of these things impact both their professional and personal lives on a regular basis.

Another important factor to consider is what we know about Adverse Childhood Experiences (ACE) in general. Most people have experienced at least one ACE during their childhood, and considering what we know about the helping professions, ACEs are more likely to be commonplace.

The combination of ACEs and workplace trauma left unaddressed can lead to burnout, compassion fatigue, and staff turnover. Staff are trained to understand how trauma affects how a youth behaves and are expected to address aggressive and acting out behavior through a trauma lens, however, it is vital that we are cognizant of the impact of these behaviors and create an environment where staff feel comfortable expressing their feelings, concerns, and reactions.

In a trauma informed agency, we believe it is no longer a question of how can we afford to support staff, the more important question becomes how can we afford not to? Youth-Staff relationships are an integral part to the treatment process and healing for the youth in residential care. Staff turnover has a negative effect on these relationships. In addition traumatized staff are also at risk of burnout and compassion fatigue. They may begin to personalize youth behaviors and inadvertently recreate the traumatic environments from which the youth arrived. In a time where employment is scarce, staff may fear that discussing reactions to their experiences will leave them vulnerable when in fact discussing their reactions is exactly what they need to do. It is for this reason that trauma informed care needs to be taken to the next level. In order to be a truly trauma informed agency, we believe that supporting staff is a vital component of successful treatment.
The goal of this workshop is to find ways to help staff identify the trauma they have experienced and what can be done to mitigate the negative effects of trauma. As employers, we try to provide support and training to prepare staff up front for what they will see in their work, but there is no way to train for all situations, especially when we consider the trauma history of workers and their potential triggers. This workshop will focus on what we are trying to do as an agency to incorporate trauma informed care in all aspects of our agency, share what has worked, what hasn't, and ideas for moving forward.

Goals for the Workshop:
1. Participants gain an increased understanding of how first-hand and vicarious trauma affects staff and how the impacts this has on youth in care.
2. Participants will explore ways to identify tools that will integrate self-care and support into the workplace.
3. Participants will gain a concrete understanding of possible assessment screens for staff trauma and perceptions of support and will learn about successes and difficulties in obtaining this information at our agency.

References: