

INTRODUCTION


Over the last few years, an exponential awakening of interest in the impact of violence and abuse on women and girls has swept the country. The depth and breadth of trauma's impact on the health and well-being of individuals, communities, and our nation is staggering. Trauma is rarely an individual experience or an isolated event. Traumatic events create ripple effects beyond the individuals involved, often sweeping from person to family to community and even across generations. Trauma is a reality to people from all walks of life and in all settings. It is a major concern in communities devastated by natural and man-made disasters; in failing schools; in cities and suburbs plagued by violence, drugs, and human trafficking; and in families struggling with poverty or divorce or separated from loved ones by war or immigration.

Biological and epidemiological research and first-person reports provide a compelling picture of the impact of trauma across a wide variety of settings, and identify effective strategies for addressing its consequences. The Adverse Childhood Experience study, in particular, has formed the basic framework for the Committee's work. Key research findings and sources for additional information are summarized in the 2011 Report of the Federal Partners Committee on Women and Trauma: <http://nicic.gov/Library/025082>.

I was shocked by the sobering statistics. Thirty-seven percent of women with disabilities have experienced violence and abuse in their lifetime compared with 20 percent of women without disabilities . . . Part of the reason why this is such a big problem is because we are not considered credible witnesses, so if we go to the police, if we tell our parents, if we tell people in authority that something has happened, we are often discounted because of our disabilities.

Kathy Martinez, Assistant Secretary, U.S. Department of Labor
Office of Disability Employment Policy, at Roundtable II

In the past decade, it has become increasingly clear that addressing trauma requires a multi-agency, multi-pronged approach. Public education, prevention, early identification, and effective trauma assessment and treatment are all necessary to break the cycle of trauma and violence. Significant progress has been made in creating organizational cultures based on knowledge of trauma and its impact ("trauma-informed approaches"), strategies to prevent or reduce rates of violence and trauma, and effective treatment interventions ("trauma-specific treatments"). Trauma-informed approaches are particularly suited to collaborative strategies because they transcend traditional organizational boundaries and professional roles, providing a common



framework for working together. This document reflects how the Federal Partners Committee on Women and Trauma's efforts to promote, adopt, and implement trauma-informed approaches have enhanced the effectiveness of a wide range of government services and supports. It also demonstrates the impact of the Committee's coordinated cross-agency efforts.

The Federal Partners Committee: A Model for Cross-Agency Collaboration

The Federal Partners Committee on Women and Trauma is a unique intergovernmental effort to address the causes and consequences of trauma, with a particular focus on women and girls. Since its inception in 2009, the Committee has brought together representatives from a wide array of federal agencies to highlight the scope of the problem and to develop collective strategies for action. With more than three dozen federal agencies and sub-agencies involved, the Committee brings a vast array of perspectives and resources to the table. The Committee is open to all federal entities with an interest in women and girls and trauma. The agency updates in the next section demonstrate the breadth and depth of changes inspired by the Committee's work.


The Federal Partners Committee, which meets monthly, is an example of intergovernmental collaboration based on a shared concern about trauma. In the past two years, agencies have provided no-cost training to other agencies, assisted each other in data collection, provided input on the development of RFPs and policy guidance, and worked together on training curricula and public events. The Committee has hosted two national Roundtables and will launch a collaborative webinar series in the fall of 2013.

All of us have to be out there convincing folks that this is the right work to be done, and this is the right time to do it.

Bryan Samuels,
Commissioner of the DHHS Administration on Children, Youth and Families

The Importance of Survivor Voice and Participation

In both Roundtables, testimony from women trauma survivors emerged as one of the most powerful ways to educate the public and to bring the issues to the attention of policymakers. Personal testimony conveys the reality of violence and trauma in a way that can't be denied. It provides hope to other women and girls, demonstrating empowerment, voice, self-determination, and self-healing. It provides concrete examples of integrating survivor perspective into agency operations. Most importantly, it offers a role model of strength, resilience, and healing to the world.



The Federal Partners Committee recognizes the importance of survivor voice and peer involvement and holds these as the highest value in developing trauma-informed approaches. Peer involvement rests on the belief that healing and recovery are possible for everyone, that peer-to-peer relationships are a tool for healing, and that each of us has something to learn from the other. It requires time to build trust and to engage in difficult conversations, and it rests on a commitment to identifying and supporting natural leaders. The Federal Partners Committee affirms its leadership and commitment to the integration of female-survivor voices in all of its work.

The collective stories of survivors are powerful lessons for the human capacity to heal and move forward despite the challenges. Women who have overcome violence are purveyors of that which is possible, and as such, are poised to serve as a source of light and learning to those who struggle and to those who seek to assist the struggling.


Mary Blake, Co-Chair, Federal Partners Committee, SAMHSA/CMHS

We must have the courage to hear the painful stories that abuse survivors have to tell us. They are suffering in their silence, and we are diminished as a society when we cannot, or will not, hear what they have to say . . . When we don't ask, we risk causing harm. We may misinterpret an abuse survivor's coping mechanisms as symptoms of a mental illness. Or worse, we may unintentionally recreate the abuse by the use of forced medication, seclusion, or restraints.

Kathryn Power, Regional Administrator, SAMHSA Region One

A Common Framework for Implementing a Trauma-Informed Approach

The Federal Partners Committee has provided a significant impetus for the application of trauma-informed approaches in a wide variety of programs and services (e.g., institutions, hospitals and clinics, schools, courtrooms, social service agencies, the criminal justice system, homeless shelters, and others). To advance this work, SAMHSA embarked on a process in 2012 to develop a conceptual framework for trauma, a set of operating principles, and guidance for a trauma-informed approach that can be applied across multiple service sectors. The purpose was to advance a shared understanding of these concepts that would be acceptable and appropriate across an array of service systems and stakeholder groups. As part of this



process, SAMHSA convened a group of national experts in May 2012, including trauma survivors, practitioners from multiple fields, researchers, and policy makers. The framework that emerged from this consensus group describes trauma in the following way: *Individual trauma results from an event, series of events, or set of circumstances that are experienced by an individual as physically and/or emotionally harmful or life-threatening, and that has lasting adverse effects on the individual's functioning and mental, physical, social, emotional, and/or spiritual well-being.* Information about the development of SAMHSA's principles for a trauma-informed approach and guidance for implementation can be obtained at <http://www.samhsa.gov/traumajustice/traumadefinition/>.

A program, organization or system that is trauma-informed realizes the widespread impact of trauma and understands potential paths for recovery; recognizes the signs and symptoms of trauma in clients, families, staff, and others involved with the system; responds by fully integrating knowledge about trauma into policies, procedures, and practices; and seeks to actively resist re-traumatization.

SAMHSA Draft Framework for Trauma-Informed Approaches
