# **Transforming Cultures of Care** TRAUMA INFORMED CARE FOR CSEY

#### FUNDED BY THE OFFICE OF THE TEXAS GOVERNOR'S CHILD SEX TRAFFICKING TEAM

A Project of TCU's Karyn Purvis Institute of Child Development

# Where We've Been

VIDU

have been trained with TBRI to provide trauma-informed care to children and youth who have experienced trafficking and those who are at risk.

# ORGANIZATIONS

throughout the state have



PROGRAMS are currently committed to implementing trauma-informed care utilizing TBRI in their organizations to better serve youth.

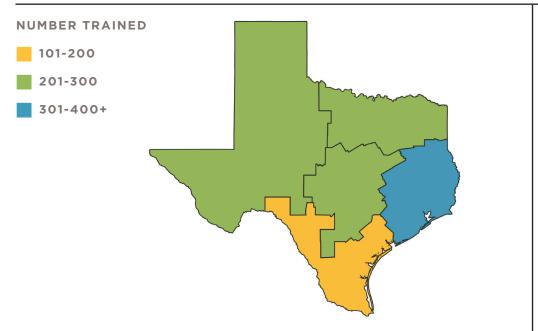


OUNTIES

in TBRI training.

throughout the state have participated

# **Project Impact in 5 Texas Regions**



To search for TBRI practitioners in your area, search this website: child.tcu.edu/tbri-practitioner-list



#### **Trust-Based Relational** Intervention<sup>®</sup>

Partnership in the KPICD CSEY Project occurs when an organization is committed to TBRI implementation. Benefits of partnership include training as well as ongoing coaching and support from KPICD staff.



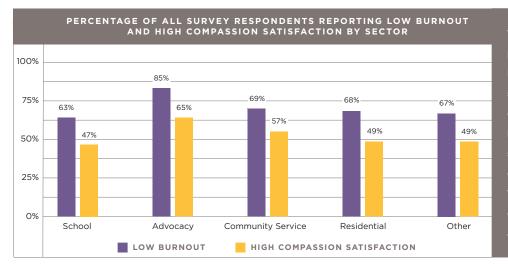
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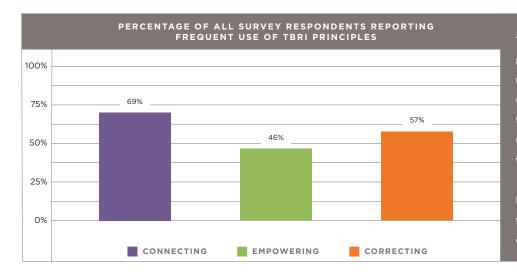
"[Ending] child sex trafficking and healing victims and survivors requires a multi-systemic approach that: addresses vulnerabilities that increase individual risk...[and] encompasses ongoing and widely available trauma-informed services and efforts to support the long-term well-being of victims and survivors". One of the key strategies identified in the 2019 report titled "Road Map for Texas Communities to Address Child Sex Trafficking" is to train community supports in TBRI, which has been the primary focus of the KPICD CSEY Project thus far. By equipping adults serving survivors of CSEY and those at-risk for CSEY with TBRI, these caregivers can "develop a compassionate understanding of the needs of children and youth who have experienced trauma and use their knowledge and skills to do what is necessary to meet these needs" (MMHPI, 2019, p.11).

### What We've Found

In early 2021, staff in partnering organizations were invited to participate in a survey. Respondents completed the Professional Quality of Life Scale (ProQOL), which measures burnout, secondary traumatic stress, and compassion satisfaction, and the TBRI Use measure which asks respondents to rate how frequently they use different TBRI strategies (never, sometimes, often, or almost always). **Preliminary analysis suggests that more frequent use of TBRI strategies (ranging from often to almost always) is associated with low burnout and high compassion satisfaction.** The graphs below summarize the responses to the ProQOL and the TBRI Use measure.



The chart on the left illustrates the percentage of respondents that reported low burnout and high compassion satisfaction in different sectors. The 'other' columns refer to sectors that did not have data from 3 or more organizations, so they are combined to maintain confidentiality of participating organizations. The sectors included in the 'other' category are child welfare, juvenile justice, and mental health services.



The chart on the left illustrates the percentage of all respondents that reported using the TBRI Principles frequently (often or almost always). Some takeaways from this chart are: (1) respondents reportedly use the TBRI Connecting Principles the most which is in line with TBRI training and practice, and (2) the Empowering Principles are reportedly used the least, which highlights an area that organizations could improve upon.



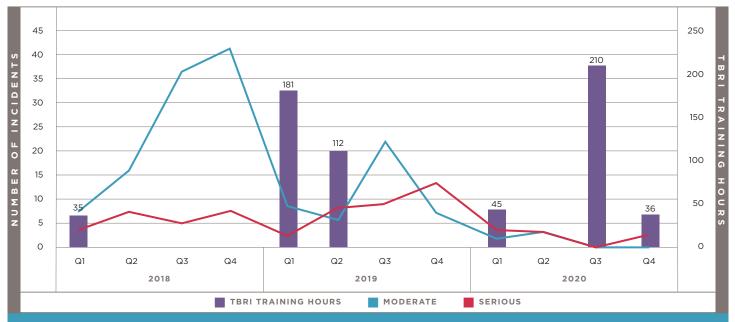
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### **El Paso Center for Children**

INCIDENTS REPORTED FOR YOUTH SHELTER PROGRAM AND KPICD TRAINING HOURS FOR ALL PROGRAMS



El Paso Center for Children serves children and families through a variety of programs such as: foster care, counseling and support, and youth outreach and housing. This organization began participating in the KPICD CSEY Project in October of 2017, and now has 3 TBRI Practitioners on staff. TBRI training is available to all staff in all programs, but TBRI training is required for staff in their emergency youth shelter that serves children ages 11-17.

SINCE IMPLEMENTING TBRI IN THE SHELTER, STAFF REPORT FEELING BETTER EQUIPPED TO HANDLE BEHAVIORS AND FEELING THAT THEY ARE PART OF A TEAM. FROM 2018 TO 2020, MODERATE INCIDENTS DECREASED BY 95%, AND SERIOUS INCIDENTS DECREASED BY 61%.

# **CASA Child Advocates of Montgomery County**

"[In] 2020, the CASA Child Advocates' team of 6 TBRI Practitioner staff members continued to coach parents, foster parents and kinship placements virtually. The TBRI Team also offered trainings for our volunteers, focusing specifically on how to build connection with children virtually" (CASA Child Advocates of Montgomery County, 2020, p. 11).

The great thing about TBRI and about CASA is that we are unique to our communities so we have the ability to pivot based on community needs. What's been so interesting in our TBRI coaching is that our biological parents (and sometimes grandparents), they really don't understand their family's trauma history. The more experience we have in doing TBRI coaching, the more empathetic we become, and also the more passionate we become in equipping biological families with some different skills. TBRI is just different. It resonates with people and it's practical. It's really to fun to just watch these relationships change.

ANN MARIE RONSMAN, EXECUTIVE DIRECTOR



Office of the Texas Governor Child Sex Trafficking Team



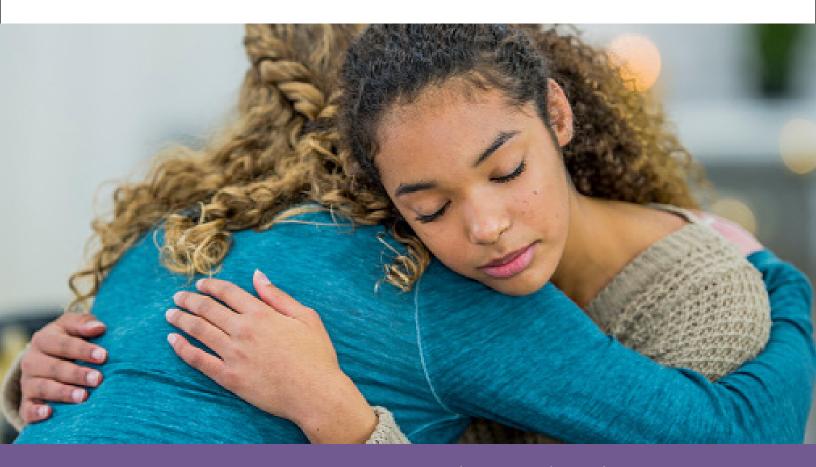
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# Where We're Going

Part of the TBRI Mantra is to see the need and meet the need. We at the KPICD are constantly evaluating our efforts to ensure we are meeting needs of the organizations and communities we serve. Are we making the greatest impact with the resources we have? How are we adjusting to meet the needs of our project partners, while simultaneously balancing the ever-growing demand for TBRI across the state? How can we leverage the knowledge, skills and effort not just of the KPICD, but of the organizations and people we work alongside?

Through input from project partners, we have identified a need for sector-specific resources that will better equip organizations and communities to implement TBRI. In addition to continued training and support, in the coming year we will partner with organizations that have committed to transforming their culture of care. The KPICD will analyze and document how TBRI principles are uniquely operationalized in these organizations to inform the development of sector-specific resources. By equipping other, similar programs with tools and examples, they can learn how to successfully transform their culture of care into one that heals trauma and potentially prevents victimization.







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