

BREAKING DOWN SILOS: STRATEGIES FOR ENGAGING SEEMINGLY DISENGAGED TRANSITION AGE YOUTH

DARLENE BELL & JILL BUCARO, DAYBREAK, INC.



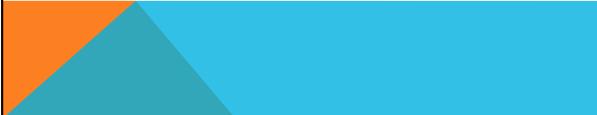
WHO WE ARE

Darlene Bell
Manager of Outreach Services at Daybreak, Inc. located in Dayton, Ohio.
Email: belldar@daybreakdayton.org
937-395-4600 ext. 157

Jill Bucaro, MSW, LSW
Street Outreach Case Manager at Daybreak, Inc. located in Dayton, Ohio
Email: bucaroj@daybreakdayton.org
937-395-4600 ext. 214



WHO ARE YOU?



WHAT WE WILL COVER TODAY:

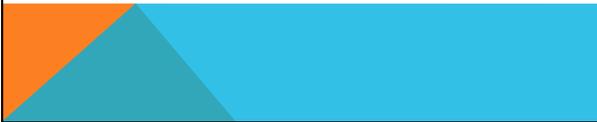
- A Trauma-Informed Care Approach
- Engagement and Rapport-Building
- Client-Driven Case Management
- Intensive Case Management Models
- Aftercare Services and Linkage to Community Providers
- Developing Agency and Program Specific Tools



TRAUMA INFORMED CARE

ADAPTED FROM A TRAINING BY MATTHEW WEST, LPC; DAYBREAK

- **Research suggest homeless youth experience multiple traumas before and after leaving home.**
 - Child physical, emotional, and sexual abuse or neglect
 - Witness violence in the home
 - Removal from home by CSB
 - Incapacitation of parents due to mental illness, substance abuse or incarceration
 - Transiency
 - Human Trafficking
- **Traumas build upon one another creating a cumulative impact shaping the child's world view, their response to their environment, their ability to regulate their emotions, and impairs their judgment and cognitive processes used in learning and decision making.**



TRAUMA SHIFTS WORLDVIEWS

- **Many traumatized children will blame themselves.** The trauma often happens during a period of development when they cannot distinguish between themselves and their surroundings. Therefore, they expect to be hurt, abused or taken advantage of.
- **Many traumatized children exist in a constant state of stress.** Their "fight or flight" response is easily activated, even in the absence of true traumatic events.
- **Many traumatized children struggle with critical thinking and problem-solving.** The above activity of "fight or flight" neural connections inhibit the development of the area of the brain that controls complex thinking and problem solving.



RESULTS OF TRAUMA: WHAT WE SEE

- Youth with a history of trauma tend to be much more easily triggered into crisis "fight or flight" mode by everyday events, hurdles, disappointments
- Youth are significantly less likely to be able to think their way to more rational solutions to the issues and problems that confront them

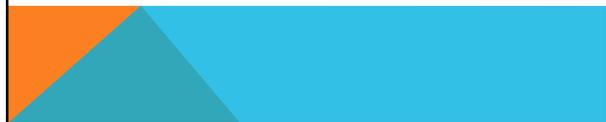
Common scenarios include

- Being given a limit
- not getting their way
- having to reschedule or change an appointment
- failing a test
- getting lost
- having too many obligations in one day
- fighting with a friend or significant other.



ONGOING RESULTS OF TRAUMA: WHAT WE SEE

- Difficulty eating or sleeping
- Inability to concentrate or complete everyday tasks
- Feelings of inadequacy and guilt
- Stomach aches, headaches, and other multiple health complaints
- Acting out or impulsive behaviors, illegal activities, substance abuse, sexual acting out
- Bullying
- Immature behavior
- Impulsive and aggressive behaviors
- Heightened moodiness and irritability
- Pushing away care givers



WHAT IS THE PROBLEM?

Youth who have experienced complex trauma have never learned how to do the following with their emotions:

- modulate (reduce, adapt, adjust or change)
- regulate (keep them under control)
- control (manage, have power over)

Attitudes and behaviors that look like non-compliance can be responses to trauma.

RESPONSES TO TRAUMA: BEHAVIOR CHALLENGES

To us, trauma looks like:

- Laziness
- Apathy
- Arrogance
- Excessive Anger

Really, these youth simply never learned many of the skills needed to function successfully in home, school, and community settings.

They struggle to:

- Follow directions
- Ask for help
- Compromise/negotiate
- Control impulses
- Anticipate consequences
- Share
- Wait their turn

HOW DO WE ADDRESS THESE CHALLENGES?

What has worked for us:

- Early Engagement
- Clear and Simple Boundaries
- Intensive Case Management Model
- Aftercare and Collaboration with other service providers

ENGAGEMENT: THE FIRST STEPS

- The first couple of weeks are a critical time to work on rapport building and showing the youth you are going to be there for them.

What do we need to identify?

- What is their cognitive/mental health functioning?
- What are their strengths and deficits?
- What have they been exposed to?
- What does their support system look like?
- What are they willing/capable of doing to change their situation?
- What help can you provide?

ENGAGEMENT: EFFECTIVE STRATEGIES

<p>DO NOT</p> <ul style="list-style-type: none"> • Start talking about rules and expectations • Immediately jump into housing and programming options • Set appointments weeks in the future • Assign too many tasks 	<p>DO</p> <ul style="list-style-type: none"> • Ask open-ended questions about client's story, needs, and reason for seeking services • Offer validation and ensure safety • Offer immediate material aid • Provide immediate solutions (when appropriate). • Provide quick follow-up appointments and meetings
---	--



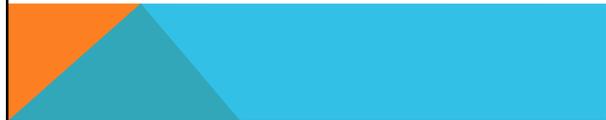
ENGAGEMENT: ELIMINATING THE POWER STRUGGLE

While it's important to set clear boundaries, traumatized youth can become easily overwhelmed and oppositional when faced with long lists of rules, expectations, and requirements.

Focus on major parameters and emphasize that you are a team.

Teammates do not:

- Threaten to harm each other or their surroundings
- Lie to each other
- Stop communicating with each other



ROLEPLAY ACTIVITY: ENGAGEMENT STRATEGIES



CLIENT-DRIVEN CASE MANAGEMENT: WHAT ARE THEY WILLING TO DO TO CHANGE?

- This youth has come to you seeking help. But what exactly does that mean? Remember, what you think is important for living a happy, healthy life can be very different from what your youth is envisioning.
- Being client driven encompasses all areas of the treatment plan. It's important that you evaluate the client's plans and goals at the beginning. You do not want confusion or different perspectives to damage the rapport you built with them.
- Your values may be completely opposite from your clients, and that's ok! If their life plan is not going to hurt anyone or involve breaking the law, then support them in their choices.



CLIENT-DRIVEN CASE MANAGEMENT: UNDERSTANDING STRENGTHS AND DEFICITS

- Getting a full Diagnostic Assessment is key to understanding your clients level of functioning and what barriers they have.
- It is also important to understand your client's experiences and triggers, allowing you to start your trauma-informed care approach at the very beginning
- This allows you to build rapport and start case management by "Meeting them where they are."

CLIENT-DRIVEN CASE MANAGEMENT: UNDERSTAND YOUR CLIENT'S FORMAL SUPPORT SYSTEM.

- Formal support systems include other service providers, supportive family members, teachers, pastors.
- Reach out to these supports in order to gather information about your client and to form partnerships and work together, ensuring all of your client's "team" is on the same page.

CLIENT-DRIVEN CASE MANAGEMENT: UNDERSTAND YOUR CLIENT'S INFORMAL SUPPORT SYSTEM

- Informal supports include the people your client couch-hops with, who they sell their food stamps to, who they do odd jobs for, who they stay with on the streets or in a "bando," their drug dealer, or their pimp
- It is important to ask questions and gather information about these supports, as they are important to the client.
- Never try to separate your client from these supports at the beginning, as this is the network they have developed to survive.

CLIENT-DRIVEN CASE MANAGEMENT: YOUR RESPOSIBILITY

- **What do you need to do as the service provider in a client-driven case management partnership?**
 - Use your first couple of appointments to gauge your client's level of functioning
 - Set an appointment schedule that meets the client's needs
 - Communicate on their level (texting, Facebook, popping in at meal sites)
 - Check in daily (if necessary) even if it is just to let them know you care about them and are invested in their life.
 - Be consistent and show good follow through on your end. Do what you say you are going to do!
 - Provide praise for positive growth and do not focus on the negative when your client experiences setbacks.
 - Be flexible! Remember your client is homeless, and making it to appointments on time and following through on simple tasks can be very hard for them.

CLIENT-DRIVEN CASE MANAGEMENT: INTERVENTIONS

Each program has their own challenges such as agency policies, budgets, community providers, or just plain man-power. We do not have control over these barriers. However, we do control our choices and creativity.

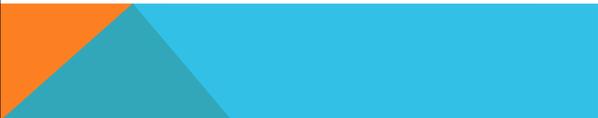
Here are some simple interventions that work for us:

- Daily check-ins and calls
- Modeling basic tasks, like scheduling appointments or grocery shopping
- Designating drop-in hours or open office times
- Meeting every client with a smile and taking time to ACTIVELY listen to them, even if it is only for five minutes
- Celebrating the small things. We give high-fives, pats on the back, and cheer and dancing around the room to celebrate successes.
- Providing small tokens of material aid, so a client never leaves our center empty handed.



CLIENT-DRIVEN CASE MANAGEMENT: TRAUMA- INFORMED CARE APPROACH

<p>LESS FOCUS ON</p> <ul style="list-style-type: none"> • Consequences for behavior • Negative consequences in general • Large, escalating consequences 	<p>MORE FOCUS ON</p> <ul style="list-style-type: none"> • Clear expectations (from the beginning and reiterated throughout) • Prompts and redirection • Reminders and updates • Support and encouragement • Consistent feedback • Modeling
---	---



GROUP ACTIVITY: CLIENT-DRIVEN CASE PLANNING



INTENSIVE CASE MANAGEMENT & AFTERCARE

- In our roles as service providers, we play a unique role in that we provide short-term, but intensive services.
- Our goal is not only to house clients, but to ensure that they will STAY housed for the foreseeable future.
- How do we do this?
 - Advocate for appropriate housing for our clients. No quick fixes!
 - Provide linkage to long-term providers
 - Provide referral to a positive support system and positive leisure activities
 - Create relationships with landlords and property management companies
 - Provide intensive and gradual transitions
 - Provide material aid and tools to assist client in maintaining stability



INTENSIVE CASE MANAGEMENT & AFTERCARE

Advocate for appropriate housing

- Take the knowledge you gathered during the assessment and your case management partnership to develop a housing plan that meets the client's needs.
- Sometimes the quickest option is not the best option, but sometimes it is.
- You know your client. Use that knowledge to be an ethical advocate.

Provide linkage to long-term providers

- Link your clients to the providers that they will need to maintain stability.
- Link to community mental health, probation/parole supports, case management services, and employment supports.
- Create a team that will provide the same level of care that you did.

INTENSIVE CASE MANAGEMENT & AFTERCARE

Provide referral to positive informal supports and leisure activities

- It is just as important for our clients to have informal support networks like church groups, community centers, clubs, libraries, and support groups
- Facilitate access and visit these places with clients.
- Provide information about parks and volunteering opportunities nearby.

Create relationships with landlords and property management companies

- Develop positive and ongoing relationships with landlords in the community to ensure a good fit for your client.
- Help the landlords understand your client's unique needs.
- Model and facilitate a helping relationship between the client and landlord.

INTENSIVE CASE MANAGEMENT & AFTERCARE

Provide intensive and gradual transitions

- Provide referral and linkage to long-term providers as soon as it is appropriate.
- Make sure providers understand your client's patterns, triggers, and behaviors.
- Conduct several transfer meetings and wraparound sessions to ensure that your client receives ongoing and continual care.

Provide material aid and tools to assist client in maintaining stability

- Help your client access resources for furniture, food, hygiene items, and cleaning supplies. Create these partnerships if you need to.
- Provide information and referral to area food pantries and programs for low-income people that are housed.
- Help your client develop an organization strategy to help them maintain important records, pay bills, and budget.

GROUP ACTIVITY: AFTERCARE PLANNING

THANK YOU!

Questions?
Feedback?

Feel free to contact us:

Belldar@daybreakdayton.org & Bucarol@daybreakdayton.org

