

2024 Forum on Rural Population Health & Health Equity

Understanding and Implementing Trauma-Informed Care in Rural Communities

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2024 Forum on Rural Population Health & Health Equity

- Audio has been muted for all participants upon entry
- Moderators will assist with Q+A at the end of the presentation
- Presentation slides will be posted at ohsu.edu/orhforum
- Sessions will be recorded and available to attendees
- Please take the session surveys!

01 – TRAUMA IN RURAL COMMUNITIES

INCREASE UNDERSTANDING OF THE UNIQUE TRAUMAS COMMON IN RURAL COMMUNITIES AND THEIR IMPACT ON HEALTH OUTCOMES.

02 – TRAUMA INFORMED CARE IN RURAL HEALTH

INCREASE UNDERSTANDING OF TRAUMA-INFORMED CARE AND THE CHALLENGES OF IMPLEMENTING IT IN RURAL SETTINGS.

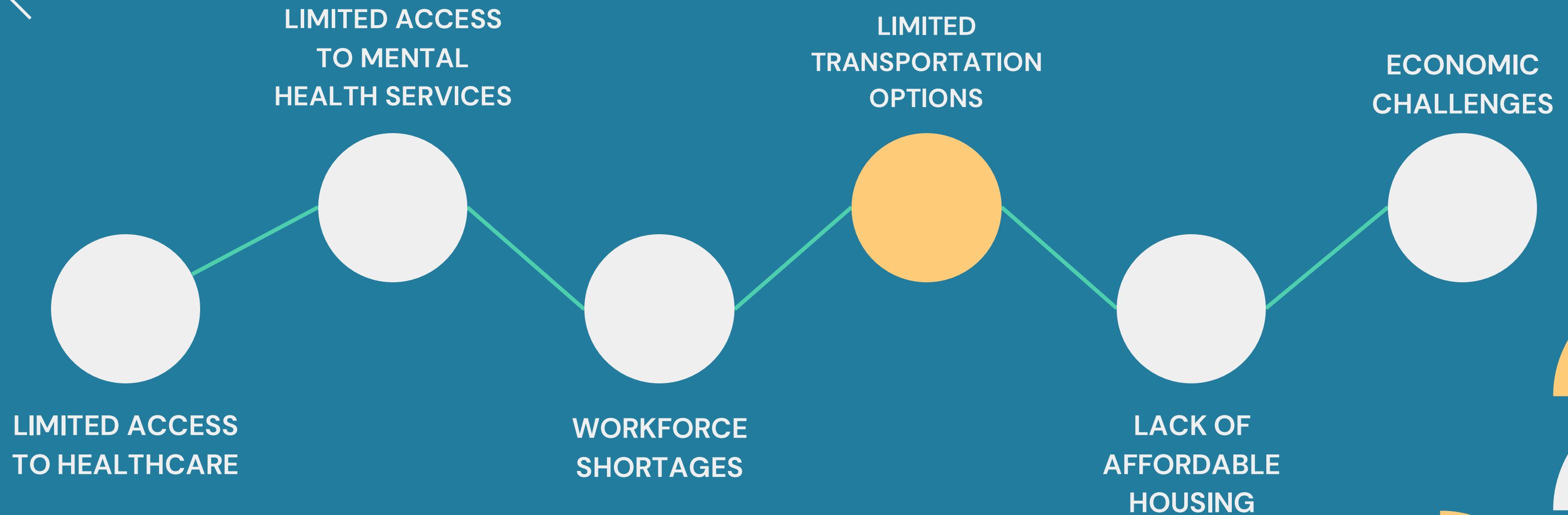
03 – STRATEGIES

LEARN STRATEGIES FOR IMPLEMENTING TRAUMA-INFORMED PRACTICES, INCLUDING BUILDING INDIVIDUAL AND COMMUNITY RESILIENCE.

The background is a solid light yellow color. In the top-left corner, there are several thin, parallel blue lines radiating from the center towards the top-left edge. In the bottom-right corner, there are several thin, parallel blue lines radiating from the center towards the bottom-right edge. The text "WHAT IS TRAUMA?" is centered in the middle of the page in a dark grey, sans-serif font.

WHAT IS TRAUMA?

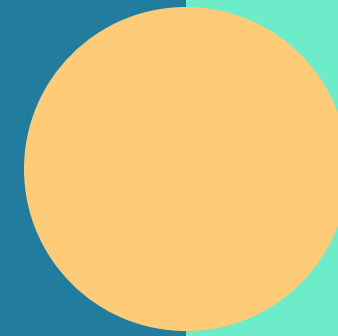
Contributing Factors



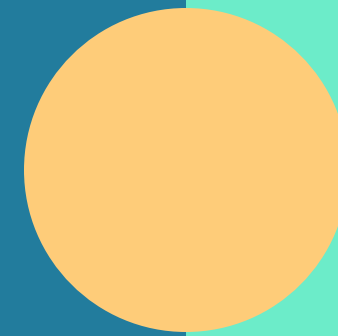


ALMOST 60%

Adult, rural residents report exposure to 1 or more ACE



AMOUNT OF EXPOSURE



IMPACT OF EXPOSURE

ACES MORE COMMON IN RURAL AREAS



Small Rural

SMALL OR ISOLATED RURAL AREAS INCLUDE SMALL TOWNS WITH POPULATIONS OF 2,500–9,999 AND THEIR SURROUNDING AREAS.



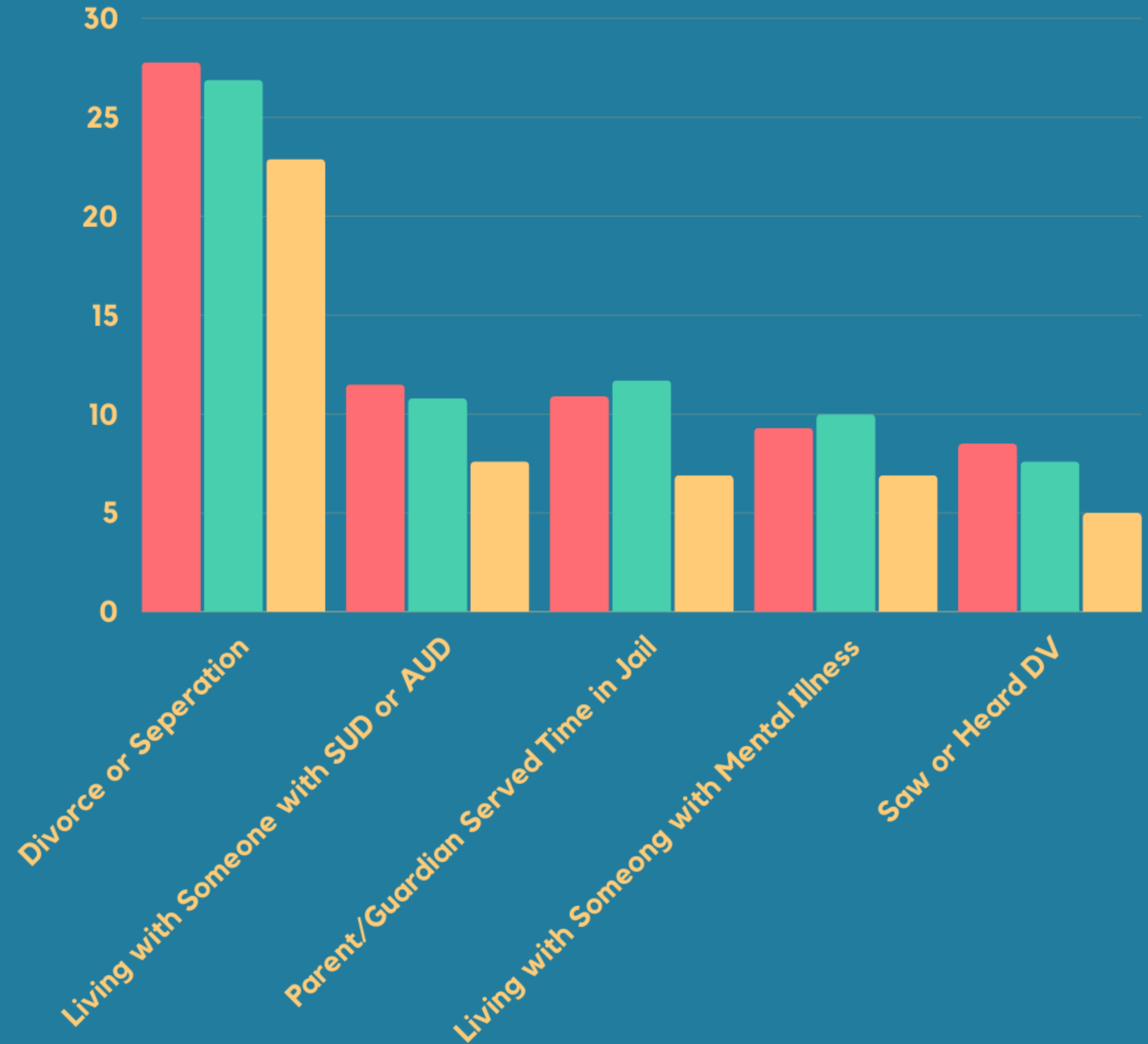
Large Rural

LARGE RURAL AREAS INCLUDE LARGE TOWNS (MICROPOLITAN AREAS) WITH POPULATIONS OF 10,000–49,999 AND THEIR SURROUNDING AREAS



Urban

URBAN-FOCUSED AREAS INCLUDE METROPOLITAN AND SURROUNDING AREAS FROM WHICH COMMUTERS FLOW TO AN URBAN CORE



Impact of Trauma

Toxic Stress

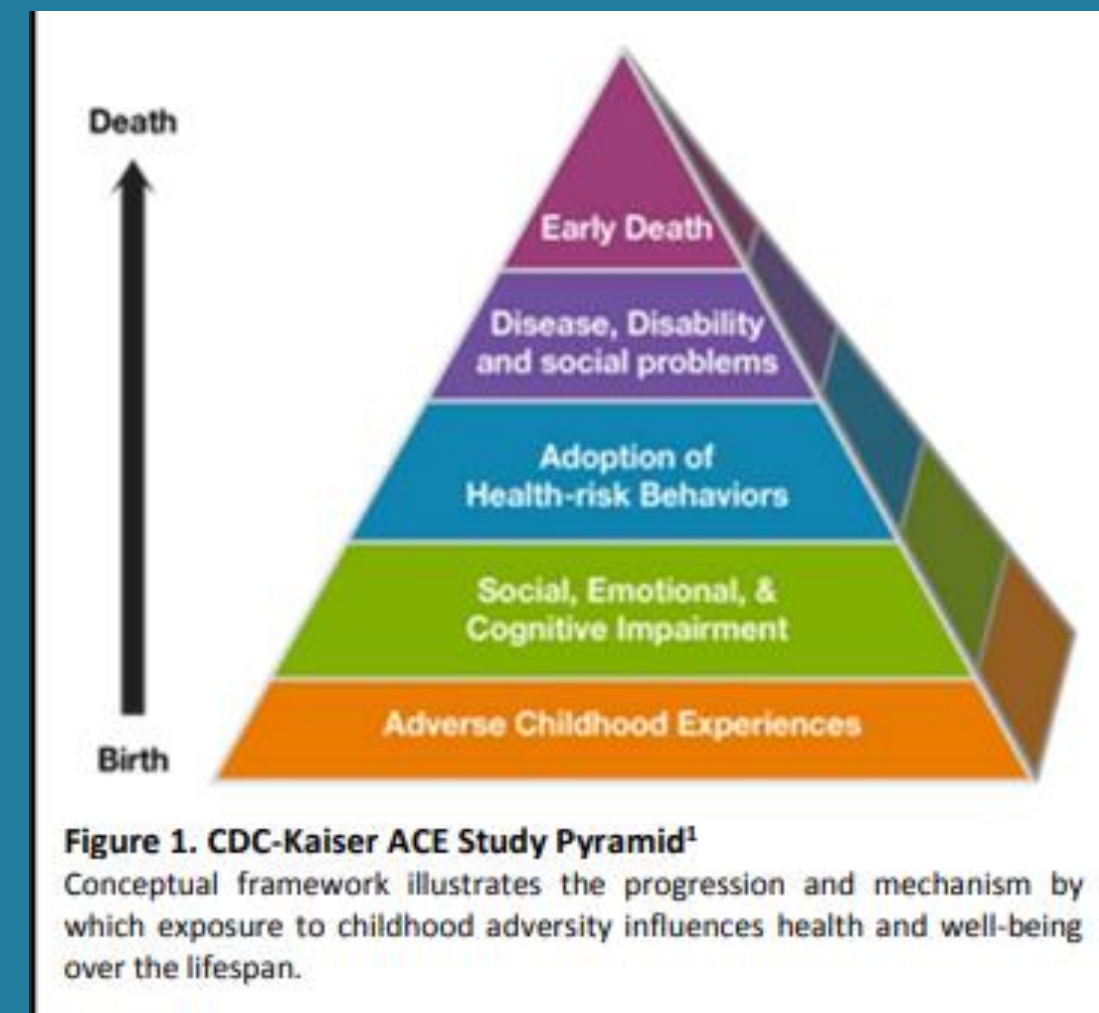
- BRAIN CHEMISTRY CHANGES
- FIGHT OR FLIGHT

Chronic Illness and Disease

- DIABETES
- STROKE
- HEART DISEASE
- OBESITY
- CANCER
- COPD
- DEPRESSION

Negative Health Behaviors

- HIGH RISK BEHAVIORS:
 - SUBSTANCE USE
 - EARLY/UNSAFE SEXUAL ACTIVITY
 - TOBACCO USE





WHAT IS TRAUMA INFORMED CARE?

PRINCIPLES OF TRAUMA INFORMED CARE

Safety

Trustworthiness
and Transparency

Empowerment,
Voice, Choice

Peer Support

Collaboration and
Mutuality


Cultural, Historical,
and Gender Issues





SAFETY

CREATING ENVIRONMENTS WHERE INDIVIDUALS FEEL
PHYSICALLY AND PSYCHOLOGICALLY SAFE



TRUSTWORTHINESS AND TRANSPARENCY

BUILDING AND MAINTAINING TRUST THROUGH
TRANSPARENCY AND CLEAR COMMUNICATION.



The top-left corner features a series of parallel black lines radiating from the center, with a light blue curved line above them. The top-right corner contains several overlapping semi-circles in dark grey, teal, and pink.

PEER SUPPORT

UTILIZING SHARED EXPERIENCES TO PROMOTE HEALING AND
SUPPORT.

The bottom-left corner features several overlapping semi-circles in dark grey, teal, and pink. The bottom-right corner features a light blue curved line above a series of parallel black lines radiating from the center.



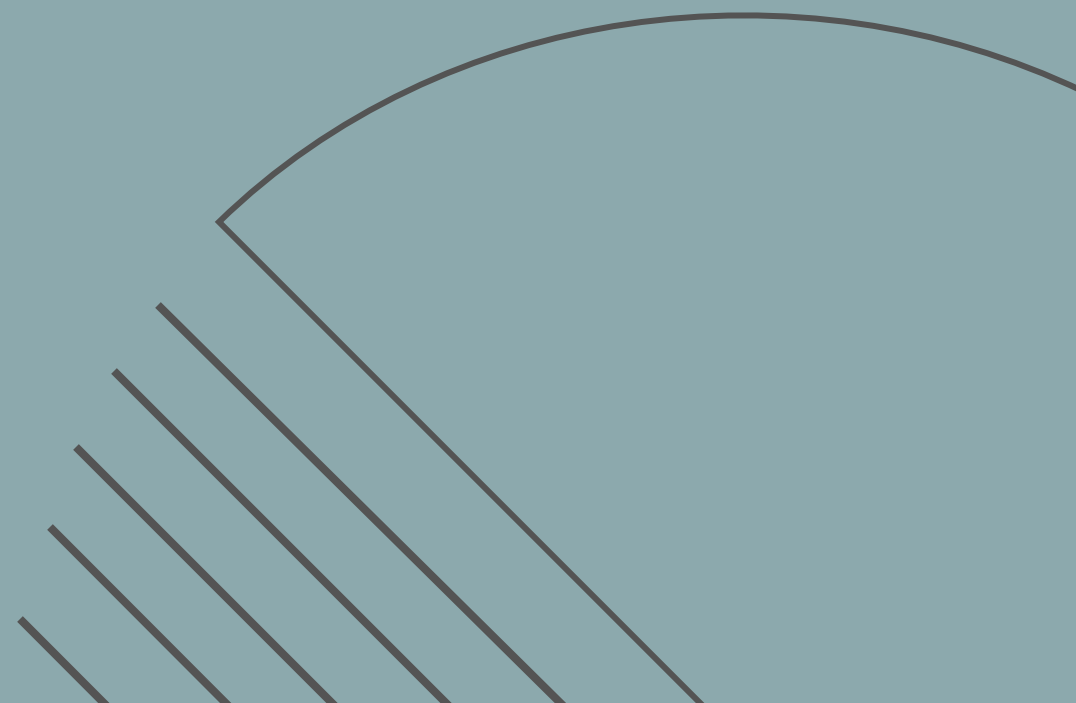
COLLABORATION AND MUTUALITY

PRIORITIZING PARTNERSHIP AND THE SHARING OF POWER



EMPOWERMENT, VOICE, AND CHOICE

EMPHASIZING THE STRENGTHS OF INDIVIDUALS AND PROVIDING THEM WITH THE ABILITY TO MAKE DECISIONS.





CULTURAL, HISTORICAL, AND GENDER ISSUES

ACTIVELY OFFERING INCLUSION, MOVING AWAY FROM
STEREOTYPES AND BIASES



TRAUMA INFORMED
CARE
IMPLEMENTATION IN
RURAL HEALTH

IMPLEMENTATION NEEDS AND BARRIERS

EDUCATION AND TRAINING FOR HEALTHCARE PROVIDERS

Workforce Shortages and Training Needs

- RECRUITMENT AND RETENTION OF QUALIFIED PROFESSIONALS
 - HOUSING
 - CHILDCARE
 - SPECIALTY SERVICES
 - PAY
 - GROWTH OPPORTUNITIES
- ACCESS TO TRAINING OPPORTUNITIES FOR WORKFORCE

INTEGRATION OF TRAUMA SCREENING AND ASSESSMENT TOOLS

Limited Resources and Funding

- TIME CONSTRAINTS
- LACK OF ACCESS TO EVIDENCE BASED SCREENINGS AND PRACTICES
- INABILITY TO PROPERLY INVEST IN TIC ON A LONG TERM BASIS

CREATING TRAUMA-INFORMED ENVIRONMENTS

Cultural Considerations and Stigma

- INDIVIDUAL VS SYSTEM

BUILDING COMMUNITY PARTNERSHIPS AND SUPPORT NETWORKS

Accessibility Barriers

- GEOGRAPHIC ISOLATION
- TRANSPORTATION
- TELEHEALTH
- TIMEFRAME

COMMUNITY RESILIENCE

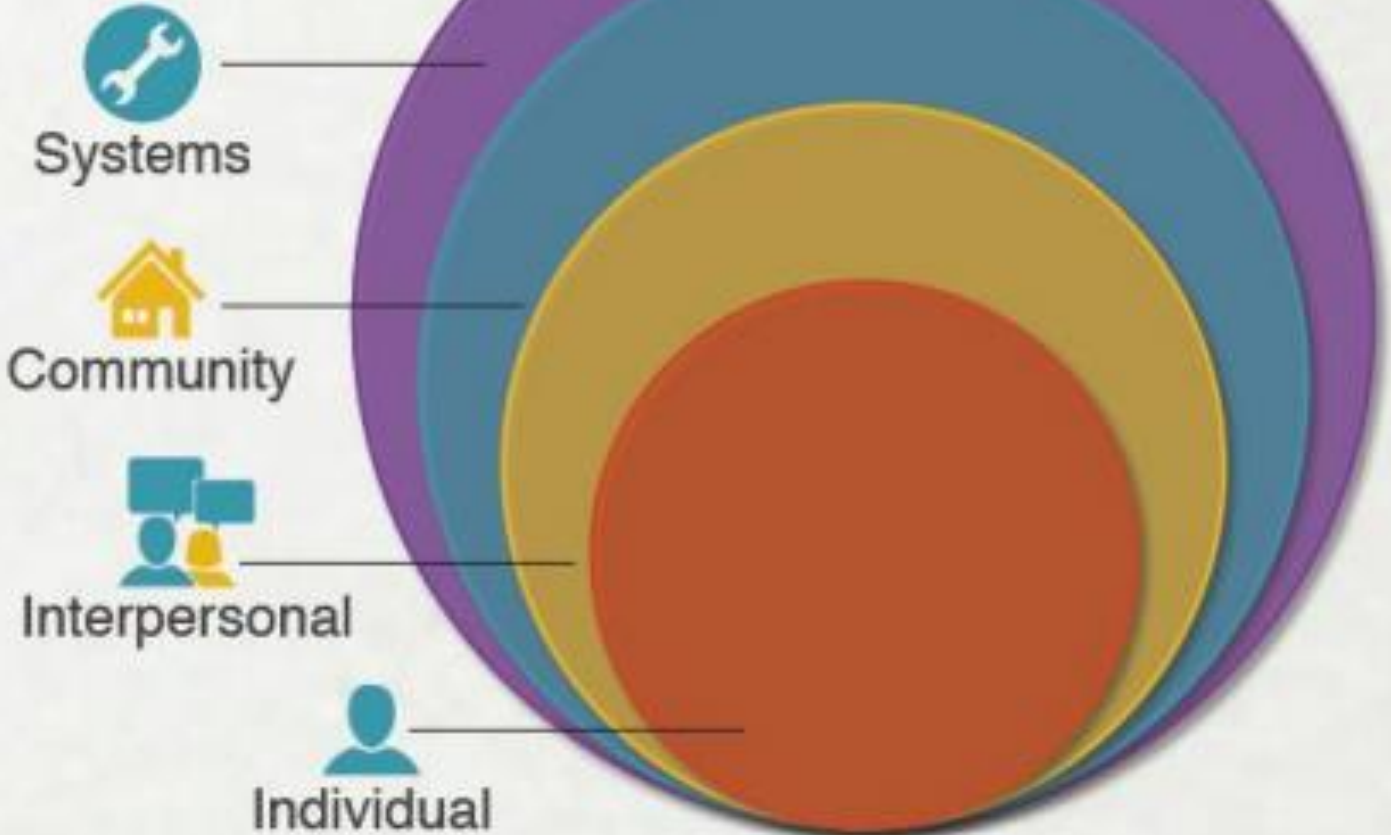


TRAUMA INFORMED COMMUNITY BUILDING

A Model for Strengthening Community in Trauma Affected Neighborhoods

PRINCIPLES

- Do No Harm
- Acceptance
- Community Empowerment
- Reflective Process



TRAUMA INFORMED COMMUNITY BUILDING

TICB

- De-escalates chaos and stress
- Fosters resiliency
- Strengthens social connections
- Recognizes trauma

Increased readiness

OUTCOMES

- Foundation and support for effective delivery of programs and services
- Creates conditions for long-term community and individual change

NEXT STEPS

HOW DO WE BUILD TRAUMA INFORMED COMMUNITIES AND ORGANIZATIONS IN RURAL AREAS?

1

ADDRESS POLICY
GAPS AND
ADVOCATE FOR
RESOURCES

2

STRENGTHEN
PARTNERSHIPS WITH
GOVERNMENT
AGENCIES AND
COMMUNITY
ORGANIZATIONS

3

PROMOTE
TRAUMA-
INFORMED
PRACTICES AT
THE POLICY LEVEL

4

COLLABORATE TO
PROVIDE HIGH
LEVEL, ONGOING
TRAINING
THROUGHOUT THE
COMMUNITY

5

IDENTIFY AND
SUPPORT
CHAMPIONS



QUESTIONS?

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Thank you to our partners!

