

The Road to Becoming a Trauma-Informed & Resiliency-Focused Local Health Department

BERRIEN COUNTY HEALTH DEPARTMENT
MICHIGAN'S PREMIER PUBLIC HEALTH CONFERENCE
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PRESENTERS:

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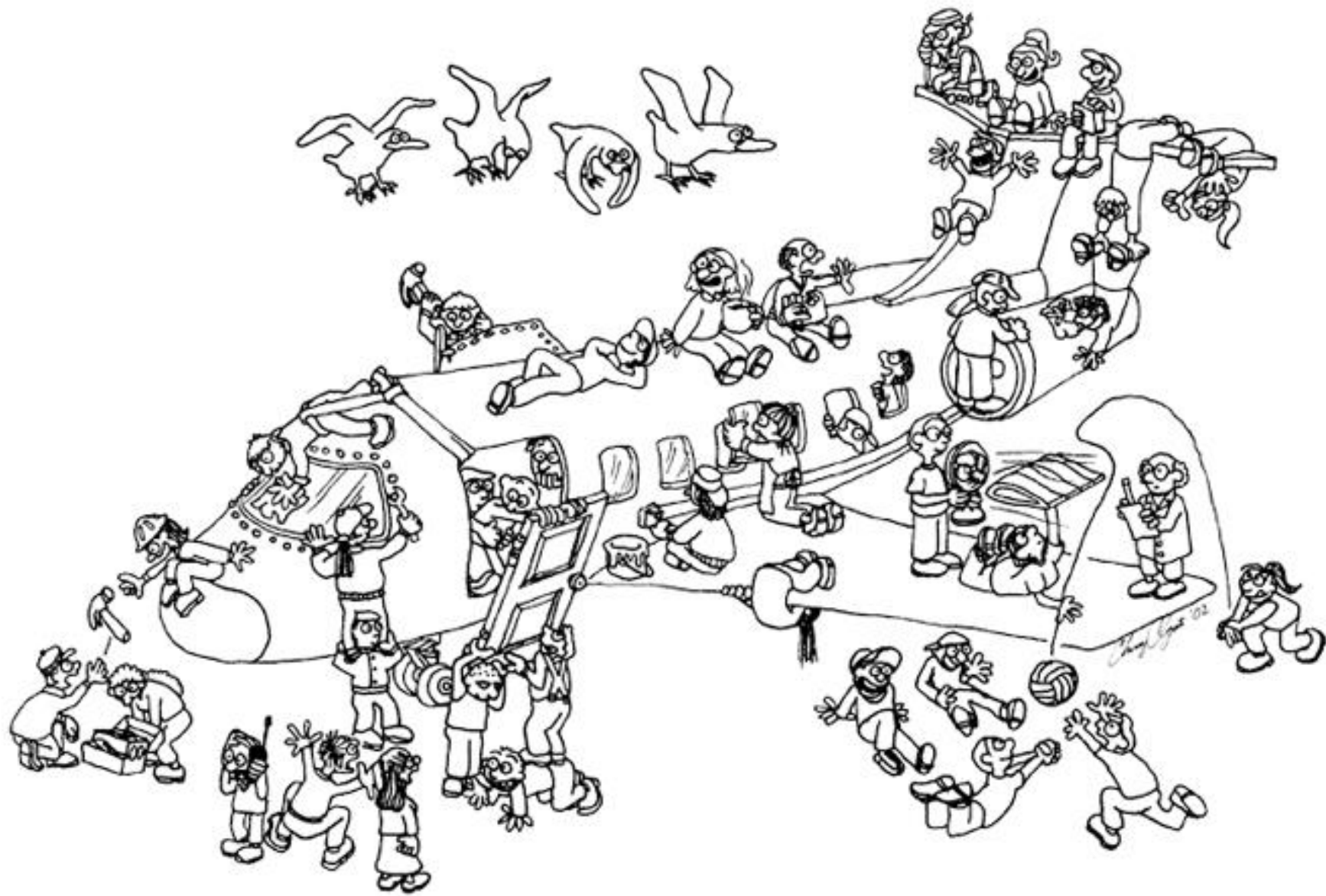
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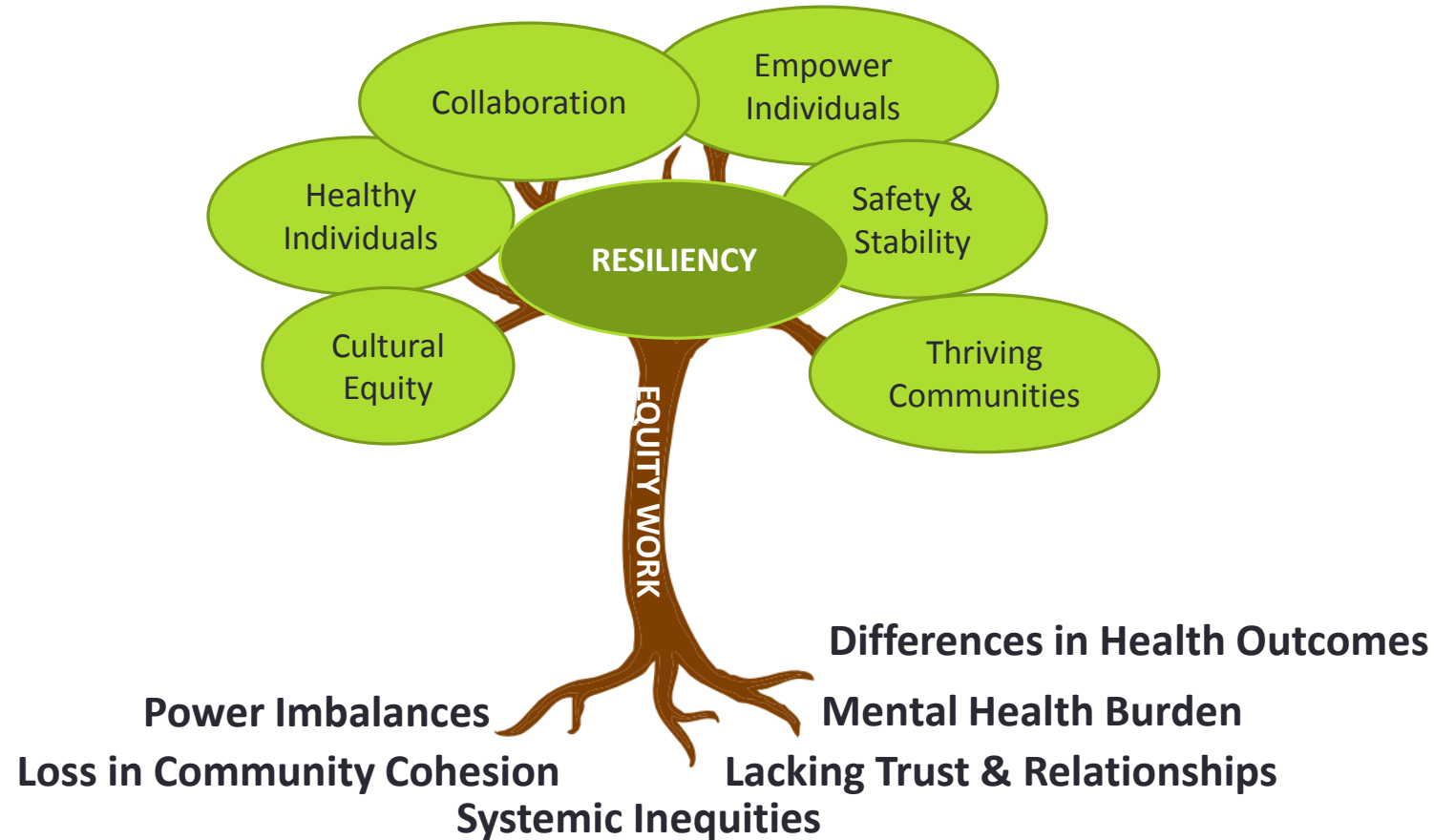
Knowing Your Why...

<https://www.youtube.com/watch?v=LZe5y2D60YU>

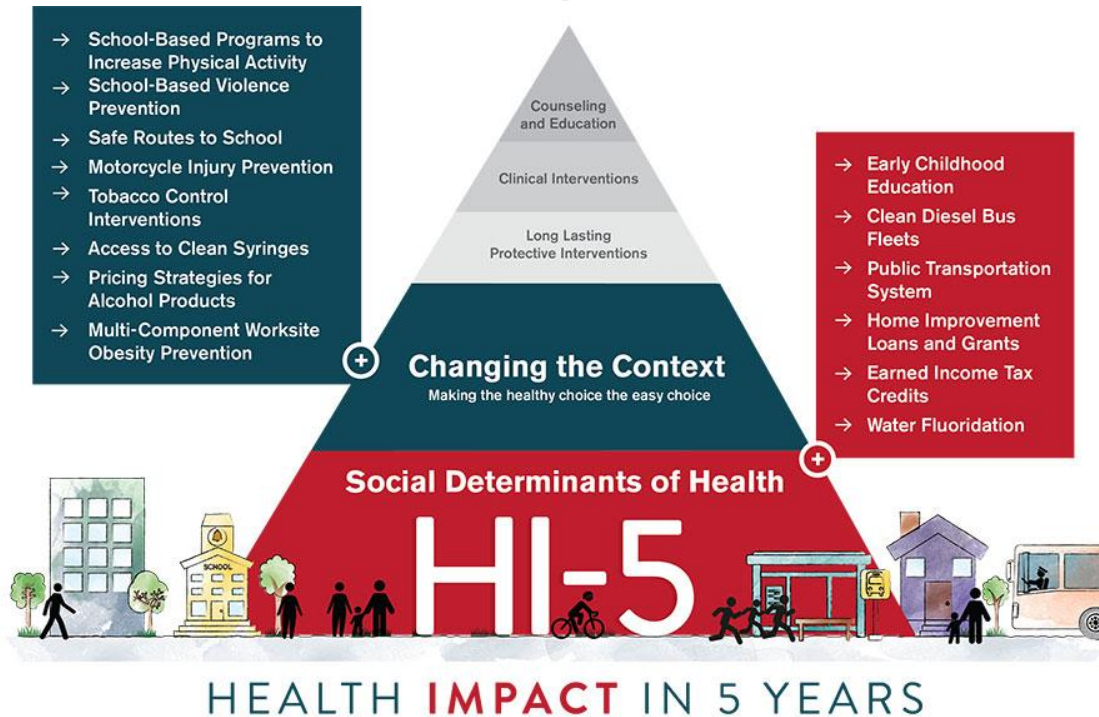




Why trauma, resilience, and equity

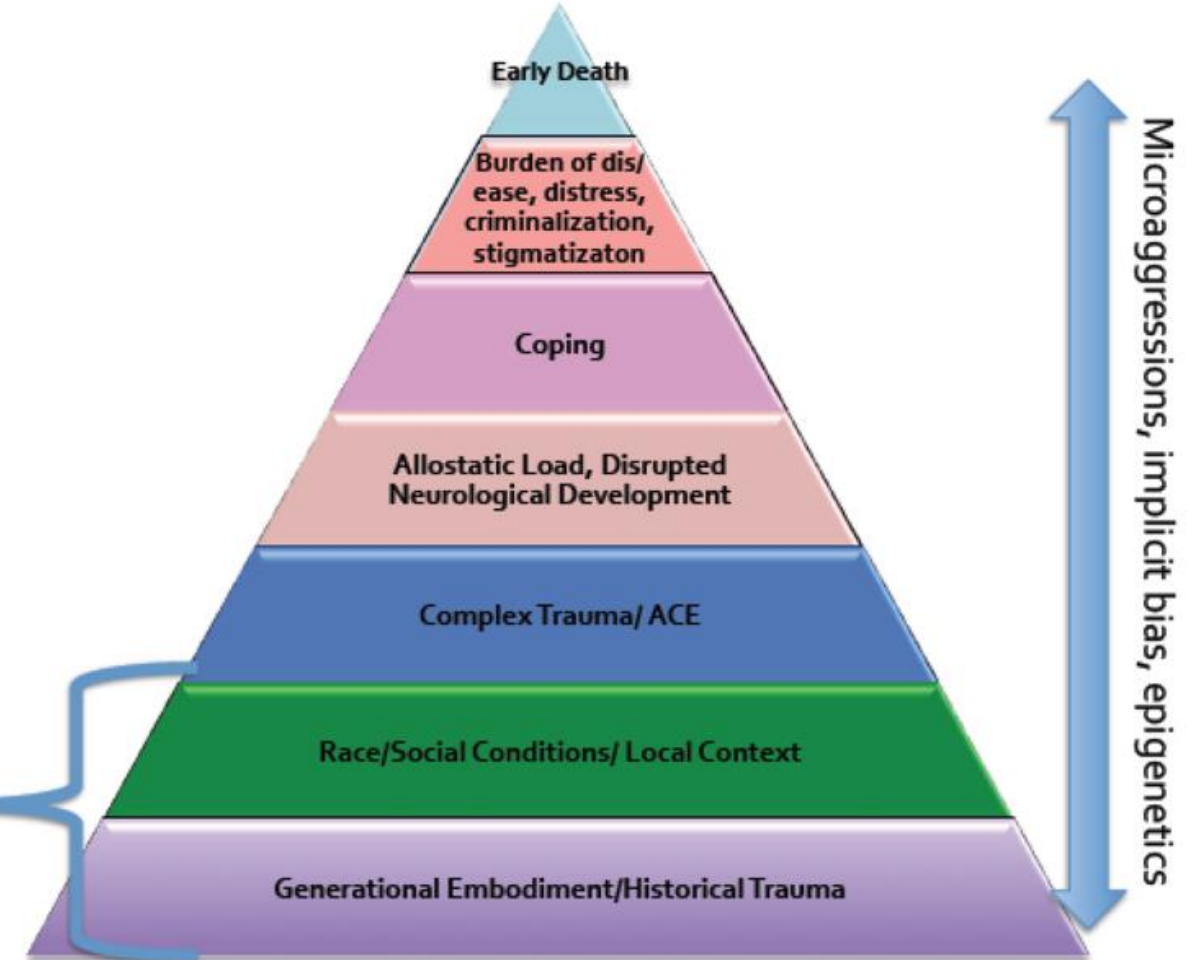


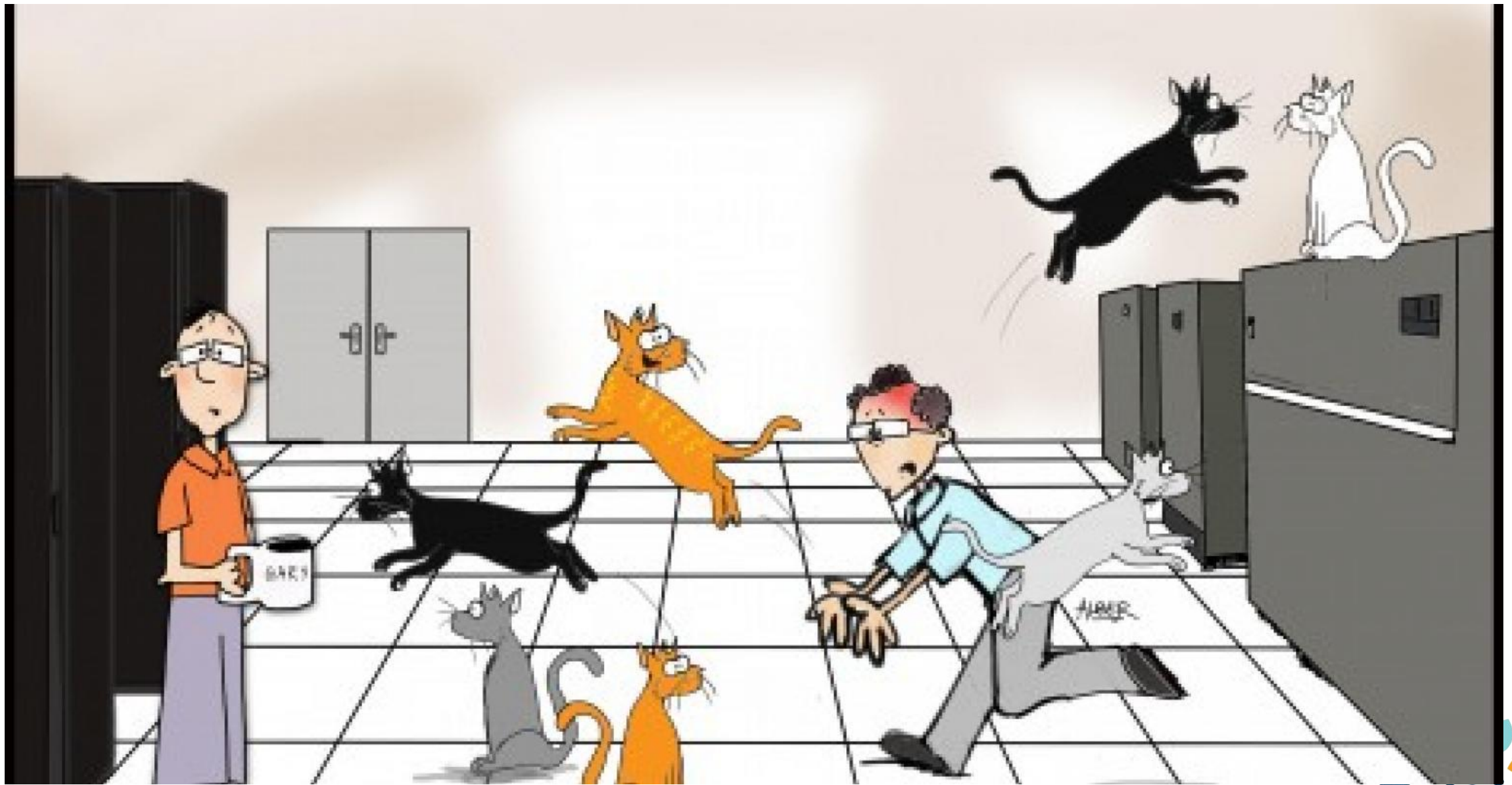
Creating a New Model



Trauma and
social location

Historical Trauma & Social Location





Not new, but different

Fits into current portfolio

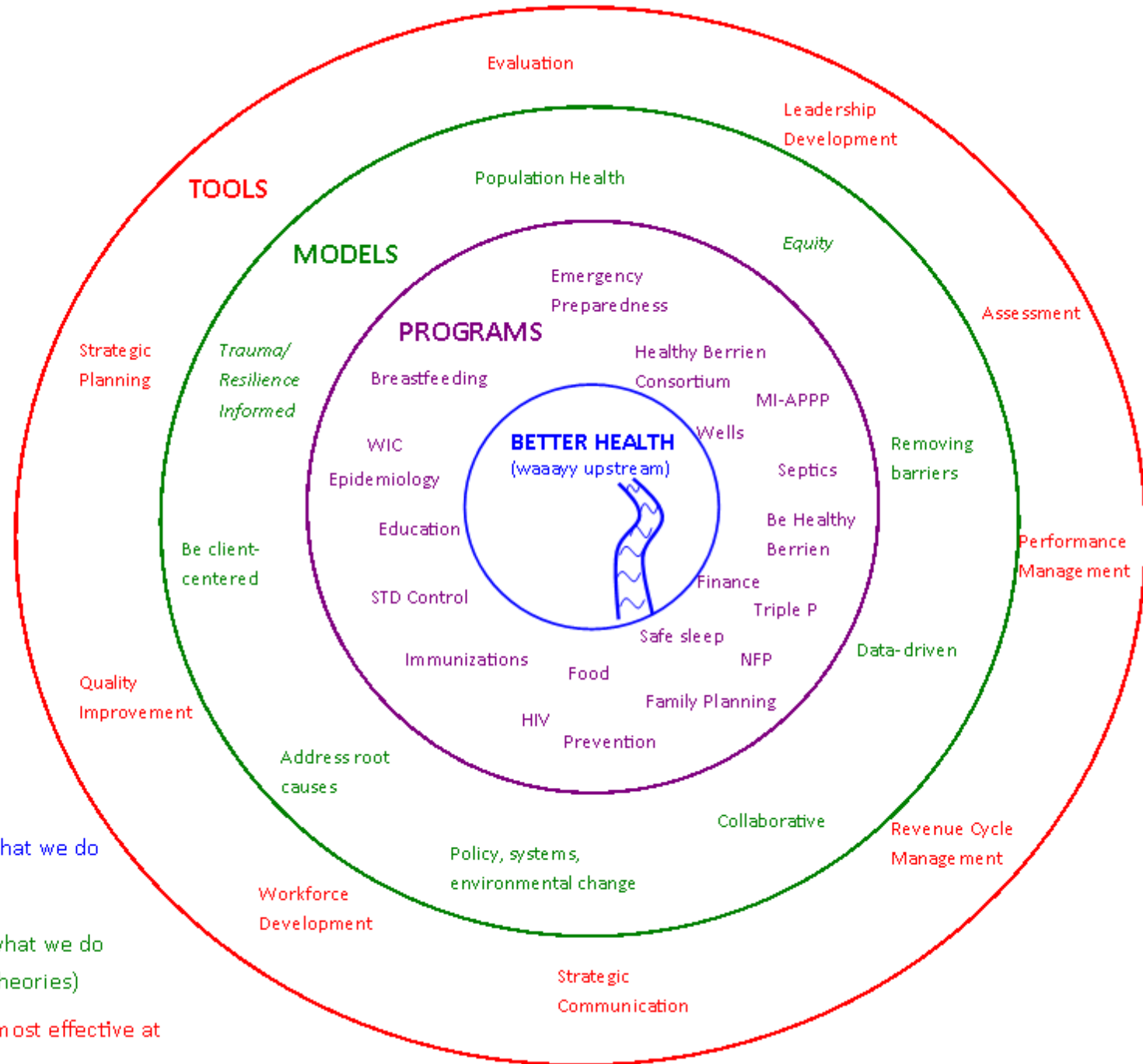


WHY we do what we do

WHAT we do

HOW we do what we do
(models and theories)

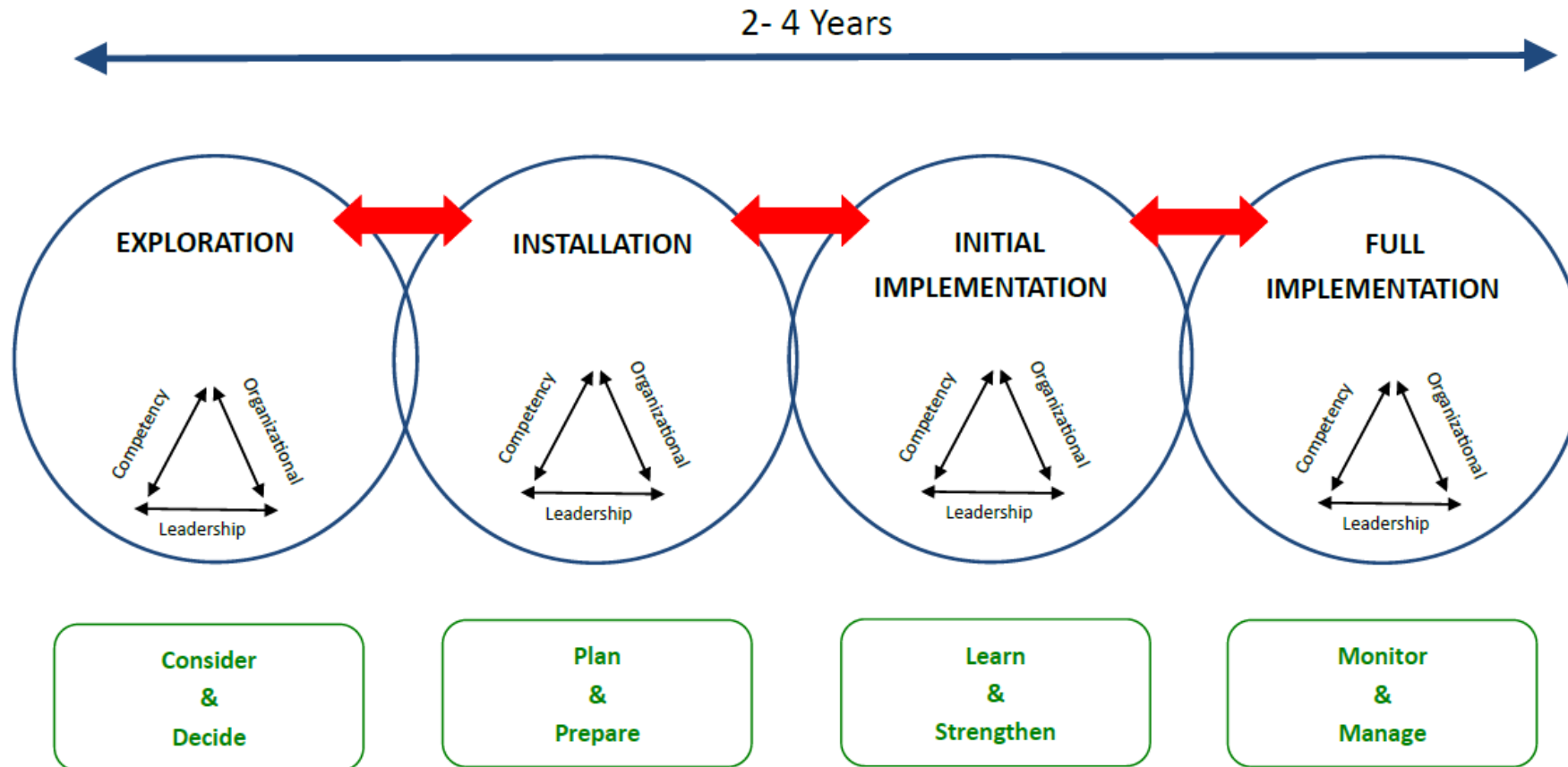
TOOLS to be most effective at
what we do



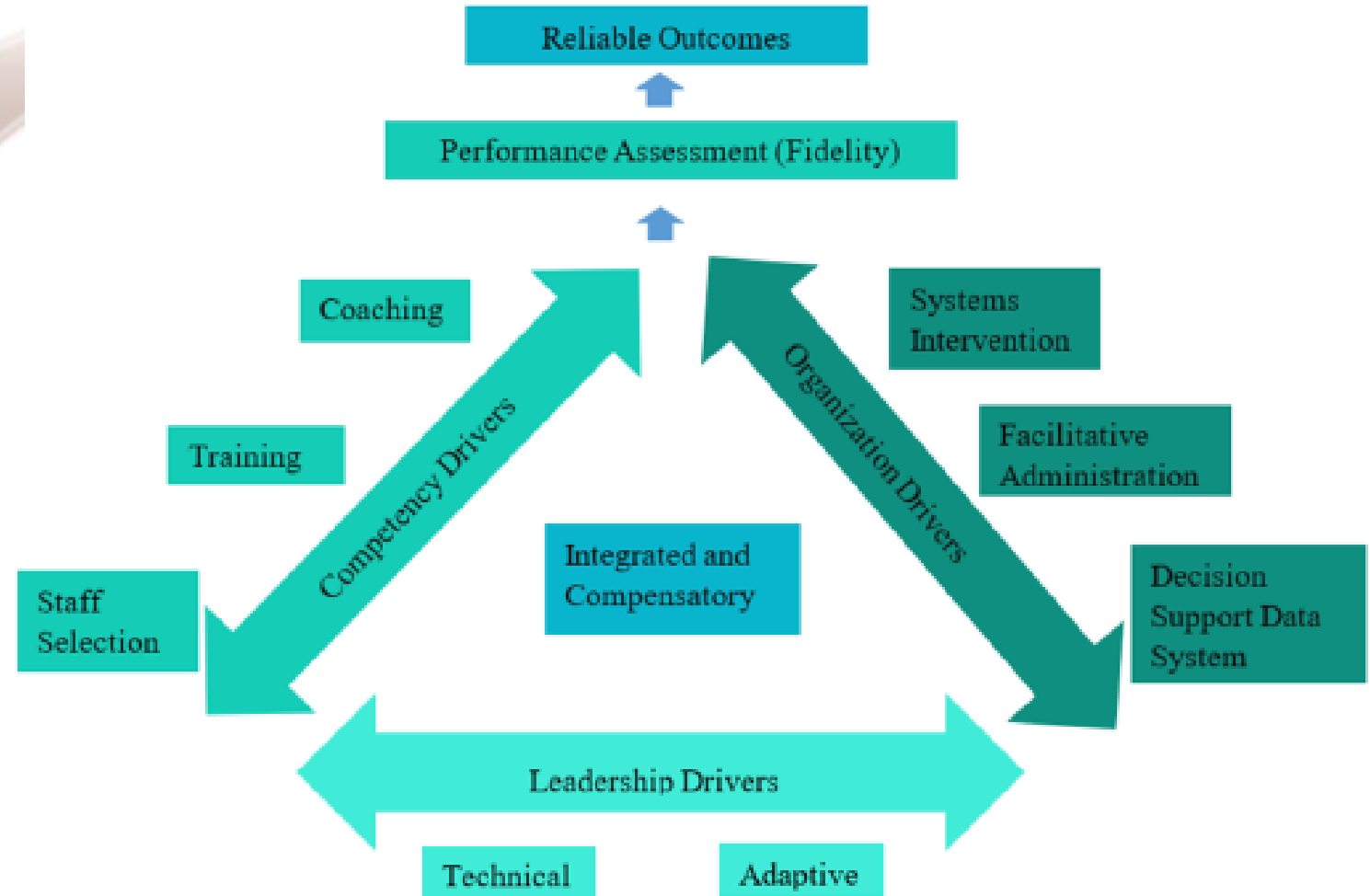
Stop Talking and Forge A Path



What does Implementation Look Like...



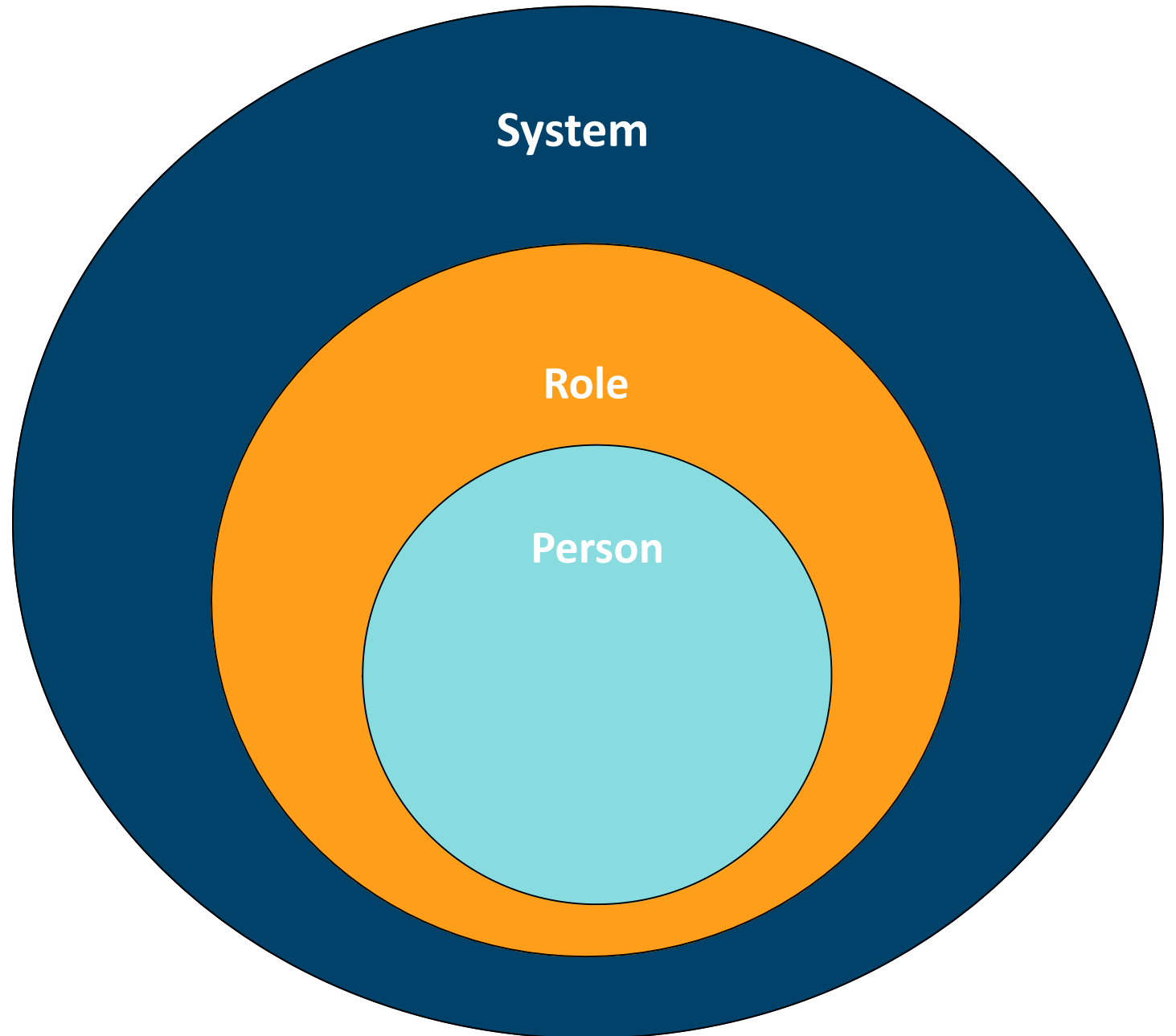
Building Skills and Tools for Success





System Transformation

Transformed people transform their roles which ultimately transforms the system. A focus on systems is essential, but we can't forget the people



Should you start?

Yes! Where are your on ramps?



Our Path

Road map visual from a staff meeting in 2015? About PHAB things and equity

Experience working with partners through the collective impact model

Frequent conversations with board of health to prime pump about sdoh and health equity

Manager with an interest becomes health officer

ACEs and trauma knowledge leads into resilience

CHNA mental health; everyone is focusing on mental health

Increase PHAB alignment

Weaving equity thread through everything

Build leadership skills of leadership team members

Revitalize and combine community advisory groups to do more upstream thinking, not just checking boxes

Plot your next move



What is **ONE** thing you could do next week to improve readiness/gain altitude/gather parts?

What is **ONE** thing you could do before the end of the year?

Write these down on large post-it notes, put on chart paper.



Lessons Learned

Strong leadership skills to lead change, hold space for history, being able to reframe concepts and practices, listening and talking skills are crucial. Start with this team, internally.

Diverse leadership is essential. Diversity in thought, race, gender, age, professional background, life experiences, etc. If your leadership team doesn't have this diversity, work to change it. Invite new people to the table to lead this, no official title necessary.

The best way to build trust to keep saying you are going to do what you said you would do. This is simple yet oh so challenging.

Don't assume that those working in public health inherently get these topics

People really must undergo personal growth to be able to see the world, their work, and those they serve differently. The default system tends to point to those burdened with health inequities as the problem when in fact it is systems and policies that keep them there. As PH professionals, we must be vigilant not to slip into old habits, remain stuck with one worldview, etc.

There is risk in being different, but we have usually been able to find that we can do much more within our true boundaries than we have been. We just have to be willing to work to the edges of those boundaries, explore the corners

PH staff do not naturally have the skills to successfully lead a community coalition, advisory group, etc. These are specific skills to hone.

There is an appetite for this work, for the results of this work, there is support for it. You may not see it at first, but when you start doing things differently, people and partners with similar goals seem to come out of the woodwork



Resources...

Health Equity Guide (Human Impact Partners)

<https://healthequityguide.org/>

Trauma Transformed

<https://traumatransformed.org/>

Public Health Awakened

<https://publichealthawakened.com/>

Kresge – Emerging Leaders in Public Health

<https://kresge.org/elph>





Questions?

Contact us...



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