

# From Power Over

# TO POWER WITH

Rainbow Services' Transformation to a Trauma Informed Culture



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“Connection is the energy that is created between people when they feel seen, heard, and valued.”

Brené Brown

## Two of Rainbow Services' program supervisors share their experiences of what it was like working at Rainbow in the early 2000s:

“We got a new director of programs who came in and lowered the boom! We had lots of rules. Strict rules. If a participant had two violations they had to leave the shelter. For minor things, like being 3 minutes late to an appointment. I had a client who was three minutes late – this woman was trying to get here from work, after picking up her kids. She clearly was challenged to get here on time, and she tried her best and was three minutes late for curfew. I didn't want to ask her to leave the program, but my supervisor at the time said, “You know what to do!” So, I had to tell her the next day that she would have to take her kids and leave. Terrible – I felt just terrible! Everything was just so black-or-white. We seemed to be seeking some kind of perfection – which doesn't exist. I needed my job – which felt like it was to be an enforcer - so I did what I was told to do even though I felt terrible. I had nightmares! There was no compassion. And where were our clients going to go?! That apparently wasn't our problem. The supervisor seemed to believe that it was necessary to show we were in control, that this would make us the best shelter; that if we didn't strictly follow the rules we were making mistakes.”

Rainbow's emergency shelter, Rainbow House, 2004

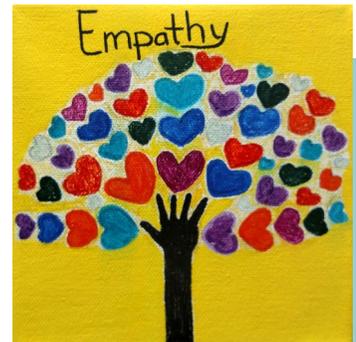
“Back then I was being trained by a staff person we called “the general.” As soon as she would come in, all the participants would go upstairs to their rooms. With this person, there were no smiles, no greetings. Everyone was intimidated. For her, it was all about we as staff being in charge – chores done, schedules kept, if participants needed to smoke they could only do so at certain times. I was trained by her so I started acting like her. It was the way I was taught. One day one of the participants asked me if she could ask me a question. I said yes, of course. She said “Are you mad at us? Did we do something wrong!?” I told her no, not at all. But then it made me think... something is wrong, but not with the participants or what they did. I needed to change, this is not what I wanted for the participants – constantly walking on eggshells, afraid of me.”



\*This report intentionally uses the term “survivor” to include all people impacted by domestic violence, recognizing that this population includes cisgender and transgender women, men, non-binary individuals and other members of the LGBTQ+ community. At the same time, we acknowledge the majority of domestic violence survivors are women.

## INTRODUCTION

**While** the services offered by most domestic violence (DV) agencies are valued and needed by survivors of DV and their children, the way in which we deliver those services may be causing additional harm to already traumatized, vulnerable families. Rainbow Services recognized that some practices of providing services to survivors were retraumatizing families by replicating the dynamics of power and control they experienced in their abusive relationship, expecting compliance with strict program requirements, and offering few choices to survivors. No DV agency intends to inflict additional harm on its participants, but existing service systems for vulnerable families tend to be structured in ways that blame or punish participants for their behavior, rather than acknowledging the impact of trauma on a survivor’s coping skills, and then helping them learn and practice new skills.



This paper tells the enlightening and inspiring story of the transformation one organization chose to take on, to move itself from a relatively good provider of domestic violence services, to a leader among trauma-informed care providers. It is a transparent telling of where Rainbow Services began this journey, back before 2006, to where it is today. In this narrative, the changes for Rainbow Services, Ltd. as an organization, for its staff, and for its participants, will be shared to help illustrate what the transformation looks and feels like. Although their journey has not ended, it should be clear that significant, exemplary progress has been made for all concerned. The stories told today are far different from the two stories about participant and staff experiences at the beginning of this narrative.

In this paper, the reader will be introduced to Rainbow Services Ltd. – what it was at the start of its transformation from *power over* to *power with*, and where it is currently. Hopefully, the reader will gain insights into what Rainbow set out to do, and the steps it took to help make its transformation deep, pervasive and sustainable. The reader will view the clear contrasts between practices that are *power over* compared to practices that are *power with*. And the reader will see that committing to and making transformative changes has not come without costs, but the rewards have been worth it – even with more of the journey yet ahead.

# OVERVIEW



- A brief description of Rainbow Services
- What caused the significant time and effort to change?
- A visual summary of what they did to make the necessary changes

Rainbow Services (“Rainbow”) is a non-profit organization, incorporated in 1983 to address the issue of domestic violence (DV). According to national estimates, one in four women will be a victim of DV in her lifetime, and the estimates for male victimization are as high as one in seven. The United States Surgeon General has long recognized DV as a public health epidemic, and both urban and rural communities cite DV as a leading cause of homelessness among women with children. The families who seek Rainbow’s help struggle to overcome the combined challenges of generational exposure to family violence and poverty, and their options for safe shelter are extremely limited due to inadequate local strategies to address homelessness for DV survivors and their children. Rainbow’s mission is to provide shelter and support to anyone impacted by domestic violence, empowering them to move beyond trauma, towards safety and stability. Rainbow’s services include: emergency shelter and crisis assistance, transitional housing, assistance with community housing, supportive services (case management, support groups, counseling), legal services, advocacy and innovative practices, and community education. More on Rainbow’s work can be found on their website: <https://rainbowservicesdv.org/>

Rainbow Services, Ltd. is known as an organization providing DV services on the cutting edge, and as such is a member of a cadre of DV organizations committed to a survivor-centered, strengths-based approach to individual, family and community practices and policies. Holding this commitment is challenging in the broader context of policies and conditions “where a mostly good-intentioned and well-meaning service delivery system for domestic violence survivors has over time drifted to one where, more often than not, the staff ‘hold the key to survivors’ healing.’ It’s where there’s the expectation of a ‘model’ to produce predetermined results...”<sup>1</sup> centered around the organization’s interests more than the survivors’ interests. Rainbow Services hasn’t always been on the cutting edge, but became a leader in the DV shelter community about twelve years ago, and an even bolder leader more recently after its immersion in trauma-informed practice.

<sup>1</sup>Against the Grain report, pg. 5



Entrance to Rainbow’s Resource Center

## What did Rainbow Services look and feel like pre-transformation



Rainbow House dining hall, 2005

*I was a residential worker then – there was definitely a lot of power over. A lot of control over client schedules, what they eat, what was best for them and their kids. It was so hard for staff! We were the ones who had to deal directly with participants, and in a super-uncomfortable, demeaning and demanding way. But we had no other choice – this was our job. The management at the time put a lot of pressure on staff. Participants were scared, angry, and avoided interacting with many staff when they could. Staff came and went. Participants were coming and going without the supports they needed. No one really felt good about the work we were doing or felt very hopeful for participants lives changing. We weren't seeing the successes we worked so hard for.*

**- Long-time Rainbow staff member**

The state-of-affairs described above became unacceptable for the staff. A journey to transformation was necessary. This journey is represented in a timeline on the following page.

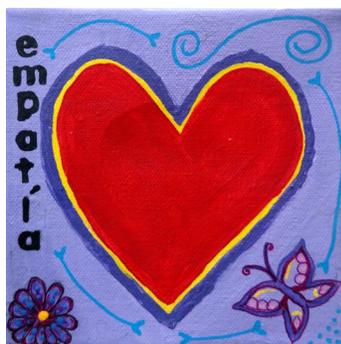
- 2006** **Harm Reduction introduced:** Rainbow first eliminated the rule of “you have to have been sober for at least 180 days” for survivors entering emergency shelters. Accordingly, policies that no longer worked for survivors were challenged.
- 2007** **Improved Services for Vulnerable Populations:** Stepped-up attention to creating more welcoming environments for persons living with disabilities, LGBTQ, mental health issues and/or substance use issues.
- 2009** **Major revisions in shelter rules and guidelines:** Focused on the way rules recreated the power and control dynamic. Changed from using the word rules to expectations and guidelines.
- 2009** **Beyond Trauma group introduced:** Continued emphasis on staff training from evidence-based models that have been used with trauma survivors.
- 2011** **Strong emphasis on training at executive and leadership levels;** development of curricula for support groups incorporating trauma theory; the Director of Programs join Blue Shield of California Foundation’s Strong Field Leadership program.
- 2012 through 2013** **Trauma Informed Care (TIC) for DV providers/Trauma-Informed Non-Violent Systems of Care launched:** ECHO Parenting partnered with Rainbow to include non-violent parenting class in the shelter, and trained staff on non-violent parenting and trauma-informed care. The training was made organization-wide. Individual Brief Therapy model introduced. Strengths based Organization work is emphasized as the Director of Legal Services joins the Strong Field Leadership Development program.
- 2014** **Psychologically Informed Environments (PIE) adopted and adapted:** Director of Programs participated in a transatlantic exchange program and was able to learn about and see in action the PIE model. Makes clear that a welcoming physical and socio-emotional environment matters for participants and staff; that on-going reflective practice is a key to supporting staff; and a therapeutic framework and practice must be incorporated across the organization.
- 2015** **An infusion of BSCF grant funds helps power Rainbow’s organization-wide strategic transition to trauma-informed care** – focused on planning and capacity-building.
- 2016** **Co-design of an evaluation of Rainbow’s TIC model occurs;** establishment of a supportive service provider network happens. A leadership program for coordinators was launched in partnership with A Thousand Joys.
- 2017** **Several changes in operations, including: quarterly all-staff trainings;** monthly reflective supervision practice for residential staff; trauma support groups in English & Spanish; executive leadership incorporates TIC principles.
- 2018** **Evaluation by National Center on Domestic Violence, Trauma & Mental Health completed;** sharing of practice documents and other training resources available on Rainbow Services website.
- TBD** **Work to do:** Working with people with untreated psychiatric illness; growing the culture shift beyond our walls and into broader community; engaging with more restorative and transformative justice promising approaches and partners; trauma informed treatment for people who harm; closing the gap between vision and practice

**The timeline** shows that, in 2006, Rainbow Services began to recognize that its top-down, command-and-control approach to supporting survivors of domestic violence was probably causing more harm than good. At that time, the emphasis was on harm-reduction, and then over the next few years in a more survivor-centered manner, Rainbow Services began shifting to trauma-informed policies and practices. The “can’t-go-back” shift to a trauma-informed approach was sporadic and experimental until about 2011 when strategic and intense changes began to take hold. In 2012, a Trauma-Informed Care goal was added to the organization’s strategic plan:

***Program Development and Outcome Measurement:** Rainbow Services will have enhanced services and expanded processes for measuring the success of its programs in order to ensure having a positive impact on clients served consistent with the application of the Trauma-Informed Service Model. Rainbow will focus its evaluation efforts both as a tool of donor communication and as a management tool for resource allocation and continuous quality improvement.*

**Excerpt from Rainbow’s 2012 Strategic Plan**

Since 2015, Rainbow Services’ organization-wide transformation has been the priority; Rainbow Services was consciously making the switch from power over to power with.



# POWER OVER / POWER WITH

- **Descriptions/Definitions: Power Over, Power With**
- **Influential Theory & Practice that helped the shift happen**
  - Trauma-Informed Care (first intervention - 2007; incrementally stepped up Efforts over time, with even more intentionality and intensity in 2011/12)
  - Psychologically Informed Environments (PIE) (second intervention - 2014)
- **Examples - compare/contrast**

As the title of this paper states, Rainbow’s transformation is described as the journey from power over to power with. So... what exactly are *power over* and *power with*?

**Power Over:** Is about creating systems that provide for an expedient way to move people through the process while satisfying the needs of organizations and funders. It is *“I am the expert, and you are the damaged person in need of help.”*

**Power With:** Survivor is the expert in their own life (also a harm reduction principle), shifting the power from the professional “expert” to a role in which they offer information and collaborate/partner with the survivor in their healing journey.

The following table compares and contrasts key distinctions between the two.

Power Over	Power With
Asks: What is wrong with you?	Asks: What happened to you?
Emphasize control and management of behavior, with safety as non-negotiable focus	Emphasize voice, choice, trustworthiness, collaboration and empowerment with shared agreement regarding safety as priority
Staff is an expert about client needs	Client as expert about his/her life
Standard prescribed services to fix what’s wrong	Focus on strengths to build toward co-created solutions that work for participant
Detached approach to progress assessment	Time together with client to think through and discuss progress on decisions and goals
Reliance on unquestioning practice	Incentivizing innovation and adaptation

# What does Power Over vs. Power With look like in on-the-ground practice?

## Asking not “what’s wrong with you” but “what happened to you?”

**Power over:** Participants must follow the rule: “no cell phone use” and so they do not have use of their cell phones while in shelter. Additionally, they cannot speak with the person who caused them harm for any reason.

**Power with:** Participants understand why contact with abusive partner may not be safe as staff begin to spend more time assessing safety for each participant, versus having a blanket rule. While they are in shelter, survivors keep and use their cell phones as long as they understand the safety concerns. They are encouraged to speak with staff about a safety plan when they intend to speak with their partner directly while staying at shelter.

## Emphasis on control and management of participant behavior vs. emphasis on voice, choice, trustworthiness, collaboration, and empowerment.

**Power over:** A client shows up 20 minutes late for an appointment with her counselor; because she has passed the “grace period” when she arrives, she is told that she knows the policy about being on time and needs to reschedule for another time. If she shows up late three times in a row, she may be dismissed from the counseling program.

**Power with:** A client shows up 30 minutes late for an initial appointment with her counselor; when she arrives, because there are still 1.5 hours left for the time scheduled, she keeps her appointment and is able to explain what happened and decide how best to use the remaining appointment time with the counselor. It is a shift from the accusatory: “You’re late” to the welcoming: “I am really glad you were able to make it today.”

## Staff as expert about client vs. client as expert about her/his life.

**Power over:** Staff determine services and supports that the participant and family need.

**Power with:** Staff share a menu of services with participant; they work together to set goals for the participant/family, and choose services the participant needs by co-designing a service plan and maintaining on-going dialogue.

## Standard prescribed services to fix what is wrong vs. focus on strengths to build toward co created solutions that work for participant.

**Power over:** A mother and her two children arrive for shelter support and the mother discloses the next day that she used drugs within the last week. Because of the rule that says the agency cannot admit anyone who has used drugs in the past six months, the mother and her two children are transferred to a dual diagnosis program.

**Power with:** A mother and her two children arrive for shelter support and the mother discloses the next day that she used drugs within the last week. The residential manager has a conversation with the woman to find out more about the drug use and determines that she has not disclosed an addiction issue, nor is she interested in seeking treatment for the drug use. The staff work with the mother to co-develop a harm-reduction plan that addresses her drug use and she stays at the shelter as staff support her with her service plan.

## Detached approach to progress assessment vs. time together with client to think through and discuss progress on decisions and goals.

**Power over:** Staff have conversations with participants, but create intervention plans on their own, making sure participants understand and follow the agency's rules. Consequence of not following rules may be dismissal from the program.

**Power with:** The co-designed participant plan is the agreement that is regularly discussed, acknowledging accomplishment of goals and working together with staff to address challenges; constantly updating goals and considering what services/supports would be helpful at that time.

## Reliance on unquestioning practice to incentivizing innovation and adaptation

**Power over:** Shelter participants are given "warnings" for breaking the rules at the shelter. One includes having food in their own room. A number of warnings turns into a written violation, and after several violations, participants are exited from the shelter. There is often no discussion about the circumstances that cause the violation other than to point out that the participant broke a rule.

**Power with:** Very few of the guidelines result in exiting participants from the shelter. If participants are presenting in a way that causes concern, staff will work with the participant to see how they can be supported in their journey.

**The very strategic and intentional push** to move from power over to power with was ushered along by Rainbow Services' investments in integrating two powerful transformative approaches: Trauma-Informed Care (TIC) and Psychologically Informed Environments (PIE). Following are brief descriptions of each approach as Rainbow learned about and then adopted/adapted them into their work.

# Trauma Informed Care (TIC)

As early as 2006, Rainbow began learning about and adapting its practice in various and at the time non-strategic ways. In 2008-2009, a more substantial re-organization of practices occurred with the establishment of the Beyond Trauma support group. A greater effort to incorporate TIC within the organization began between 2009 and 2011, with a major push in 2011 and 2012, when Rainbow added a TIC goal to the agency’s strategic plan. An even more significant, organization-wide effort began in 2015 with the acquisition of grant-funding from Blue Shield of California Foundation, but what exactly is a trauma-informed approach?

According to SAMHSA’s concept of a trauma-informed approach, 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 prevent *re-traumatization*.

SAMSA has developed six principles that are meant to be generalized across multiple types of settings, which an organization can use to determine whether their approach is trauma-informed:

<p><b>1. Safety</b></p> <p>Throughout an organization, the staff and people they serve feel physically and psychologically safe; the physical setting must be safe and interactions should promote a sense of safety.</p>	<p><b>2. Trustworthiness and Transparency</b></p> <p>Organizational operations and decisions are conducted with transparency with the goal of building and maintaining trust among clients, families and staff.</p>	<p><b>3. Peer Support</b></p> <p>Other individuals who have experienced trauma can serve as key partners in recovery from trauma.</p>
<p><b>4. Collaboration and Mutuality</b></p> <p>Partnering and leveling of power differences happen between staff and clients and among staff.</p>	<p><b>5. Empowerment, Voice and Choice</b></p> <p>Individual strengths are recognized, built on, and validated and new skills are developed as needed.</p>	<p><b>6. Cultural, Historical, and Gender Issues</b></p> <p>The organization incorporates policies, protocols, and processes that are responsive to the racial, ethnic and cultural needs of individuals served; there is a responsiveness to gender and consideration for historical trauma.<sup>2</sup></p>

<sup>2</sup>Resource Guide to Trauma Informed Human Services, <https://www.acf.hhs.gov/trauma-toolkit#chapter-6>

# Psychologically Informed Environments (PIE)

The trauma-informed approach to supporting DV survivors and their families is one fundamental component of Rainbow Services' transformation. The other is Psychologically Informed Environments (PIE), described below.

Psychologically Informed Environments (PIE) education and adoption by Rainbow Services occurred formally in 2014. In a program called The Transatlantic Practice Exchange, which was funded by the Oak Foundation and delivered by Homeless Link in England and the National Alliance to End Homelessness in the US, exchanges took place between May and July 2014, with participants spending up to two weeks in placement with their hosts and other local organizations.<sup>3</sup> At this exchange, Rainbow's Executive Director Elizabeth Eastlund (then Director of Programs) was introduced to the PIE concept, started by Robin Johnson and Rex Haigh as an advanced version of therapeutic communities. The Good Practice Guide<sup>4</sup> summarizes PIE as follows:

## PIE has 5 key elements:

1. Relationships
2. Staff support and training
3. The physical work environment and social spaces
4. A psychological framework
5. Evidence generating practice

*"These elements help staff work more effectively with people who have complex and multiple needs, changing the way we understand and tackle the behavior that leads to homelessness in a measurable way. The approach focuses strongly on relationship-building to promote recovery and can be used by outreach and day center staff as well as hostel and shelter workers."*<sup>5</sup>



It is worth noting that, following PIE's attentiveness to a transformed environment, Rainbow worked hard to make changes in its physical space and socioemotional atmosphere:

- The community building, where a majority of services take place, was refurbished in 2015.
- In 2015, Rainbow decorated its facilities with art from survivors, staff, and local artists. Halls and meeting rooms were painted with vibrant colors. Signage was humanized and the engagement at the reception desk became more welcoming. Spaces for socializing were made more comfortable. Rainbow was intentional about making warm, human spaces for other agencies to meet with Rainbow participants.

<sup>3</sup>Transatlantic Practice Exchange (2014). Homeless Link/National Alliance to End Homelessness

<sup>4</sup>Psychologically Informed Services for Homeless People - Good Practice Guide (2012) Dept. of Communities and Local Government. <http://pielink.net/>

<sup>5</sup>Creating a Psychologically Informed Environment Implementation and Assessment (2015). No One Left Out

# Both TIC and PIE share core elements which make them complementary approaches<sup>6</sup>

## Creating a Welcoming Environment

- **TIC** focuses mainly on the practitioner's interactions with participants:
  - Using basic customer service skills
  - Being curious, open and engaging
  - Observing for strengths and solution-seeking rather than deficits and problem identification
- **PIE** adds an intentional focus on the physical environment:
  - Open spaces that are well-lit (with natural light where possible)
  - Quiet spaces for rest and reflection
  - Helpful signage and displays that capture a feeling of "human-ness"

## Reflective Practice

Reflective practice makes space and time for support staff to better understand how they are affected by the work they do. It takes a close, facilitated look at survivor's responses to the therapeutic model, as well as how the interactions affect staff. Understanding what works, and developing additional solutions in staff-participant interaction is an important, practical result of reflective practice. The consistency that occurs in these guided reflections is similar for both TIC and PIE.

## Therapeutic Framework

- Organizational change is challenging for staff. Some may embrace the change while others may need support to understand and implement the change. Some staff may be unable or unwilling to make the shift. Both TIC and PIE expect and address staff response to change.
- *Providing front-line staff with more supports in the change process.* All staff are affected by the change process, but front-line staff are most affected and are more supported (e.g., more training, more coaching for managers and counseling). Providing specific supports are a part of both the TIC and PIE approaches.
- *All staff receive training and support, not only with understanding the frameworks but also explicitly on coping with change.* Both TIC and PIE recognize the need for these types of training and support; TIC may go one step further in its insistence on cultivating a culture of wellness where staff are attuned to how their own histories of trauma need attention, in addition to the signs of burnout, vicarious trauma, and secondary traumatic stress.

*Conversations with current staff make a clear case for Rainbow Services' transformation from power over to power with, even as it is also clear that the transformation is still a work in progress. A recent evaluation by the National Center on Domestic Violence, Trauma and Mental Health provides a more objective yet positive assessment of Rainbow's progress over the last few years. The results of this evaluation are described briefly in the next section (the full report is available from Rainbow Services or NCDVTMH).*

<sup>6</sup>Transatlantic Practice Exchange (2014). *Homeless Link/National Alliance to End Homelessness*, pgs.58-59.

# NATIONAL Center<sub>on</sub> *Domestic Violence, Trauma & Mental Health*

- Description
- Summary of Findings
- Recommendations/Implications

The National Center on Domestic Violence, Trauma & Mental Health co-designed and conducted an evaluation of Rainbow's two-year transition to a trauma-informed shelter with supportive services for survivors of DV and their families. The evaluation was made possible by funding received by Rainbow Services, Ltd. from the Blue Shield Against Violence initiative of the Blue Shield of California Foundation. Rainbow Services decided to make this transition as one of the first DV shelters to become trauma-informed organization-wide. It should be noted that Rainbow had slowly begun to make the transition years before, but it wasn't until 2015 that funding was available to be more strategic and intentional in the transition, to set-up the pre-post evaluation, and to document the process.

## The evaluation had three essential components:

- Listening sessions with staff, before and after the survey period
- Three pre-post surveys (administered a little more than a year apart; staff surveys first, followed by participant surveys):
  - *The Trauma-Informed Capacities Assessment (completed by all staff, assesses the organization as a TIC organization)*
  - *The Trauma-Informed Practice Survey (completed by all staff, with some additional questions only answered by supervisors; assesses the practitioner changes in TIC implementation)*
  - *The Trauma-Informed Outcomes Survey (assesses participant experience of TIC practices)*
- Assessment of trainings about trauma-informed practice provided by A Thousand Joys

## The evaluation had four projected outcomes that served as the basis for the evaluation:

1. Rainbow Services will implement changes consistent with a trauma-informed organizational approach.
2. Rainbow staff will have increased understanding of how trauma affects individuals and families, and will be able to consistently implement trauma-informed and/or trauma-specific interventions in their daily work.
3. Survivors who access Rainbow Services will have enhanced wellbeing and service satisfaction.
4. Rainbow Services will be able to share outcomes and lessons learned to contribute to establishment of a statewide model for working with survivors of domestic violence and their children.

# Summary of Evaluation Results<sup>7</sup>



## Evaluation Components

## Brief Description of Results

### Listening Sessions with Staff

#### Initial Conversations

- + increased understanding of staff and participants
- + reflective practice improves listening skills
- + hope re: trust-building, choice & empowerment in their work with participants, and increased empathy
- + anticipate release from pressure of being an “enforcer”
- + increased staff supports
- insecurity about job stability
- reduction of rules could lead to “anything goes”
- reduced participant accountability
- much more and more difficult work that other orgs won’t do

#### Ending Conversations

- + New efforts to increase flexibility and options for participants
- + Participants feel seen, heard and understood
- + Improved relationships among staff, and between staff and participants
- Some challenges for staff, including boundaries with participants; coping with staff turnover; and difficulty working with outside agencies who are not trauma-informed

## Pre-Post Surveys

Ninety percent response rate among staff; pre-survey done in February 2016; post-survey done in May 2017. Sixty-three participant pre-surveys done in August 2016; 72 post-surveys done in October 2017.

Noteworthy is the fact that Rainbow Services was already in the process of transitioning to TIC at the time of the pre-survey (and many shifts toward trauma-informed care had already occurred), so it is reasonable to surmise that the change from pre- to post-survey would have been greater had a true baseline been measured. Nonetheless, appreciable change from time one to time two was demonstrated in three components: capacities assessment, practice survey, participant outcomes survey. Also, the A Thousand Joys trainings were well-received and helpful for staff. Brief descriptions of these areas are delineated in the following table:

<sup>7</sup>Rainbow’s Journey to Becoming Trauma Informed, Rainbow Services, Inc. A report prepared by National Center on Domestic Violence, Trauma & Mental Health (2018).

## Summary of Evaluation Results (continued)

Evaluation Components	Brief Description of Results
<ul style="list-style-type: none"> <li>• Capacities Assessment</li> </ul> <p>Staff survey</p>	<ul style="list-style-type: none"> <li>• By post-survey, staff reported Rainbow Services had incorporated policies reflective of more input by survivors in: rules &amp; guidelines; non-discriminatory practice toward gender identity; and periodic review of policies to ensure that Rainbow is sufficiently responsive to the needs of trauma survivors</li> <li>• By post-survey, staff reported movement toward trauma-informed care in: cultural strengths; the impact of a history of trauma; the need to be transparent with participants about what they can expect in their experience with Rainbow Services practices and policies; and co-design of plans for addressing children’s needs</li> <li>• Staff reported changing their practice by: incorporating an understanding of trauma in their participant interactions; helping participants understand their emotional triggers and how to manage them; increased understanding of gender fluidity and the impact of heteronormativity; more cultural competence</li> <li>• Staff reported improvements in staff support such as wellness programs and mental health and substance abuse benefits.</li> <li>• Staff want more training in the following areas: Supporting survivors’ resilience &amp; healing; effects of trauma on child and adolescent development; impact of trauma on attachment; cultural differences in responding to trauma; collaborating with SA and MH providers; vicarious trauma</li> </ul>
<ul style="list-style-type: none"> <li>• Practice Survey</li> </ul> <p>Staff survey</p>	<p><u>Increases in Knowledge (post-survey compared to pre-survey responses)</u></p> <ul style="list-style-type: none"> <li>• Impact of DV and trauma on adults</li> <li>• Types of trauma survivors experience</li> <li>• Special challenges experienced by immigrants</li> <li>• Ways own experience affects interactions with survivors</li> <li>• Trauma-informed practice</li> </ul> <p><u>Improved Practice with Adults (post-survey compared to pre-survey)</u></p> <ul style="list-style-type: none"> <li>• Talk about relaxation skills to cope with stressful situations</li> <li>• Asking about children</li> <li>• Deciding on what to work on and how</li> <li>• Making sure to reserve time to reflect on interactions with survivors</li> </ul> <p><u>Improvements in Work Experience (post-survey compared to pre-survey)</u></p> <ul style="list-style-type: none"> <li>• Feeling positive about working at Rainbow</li> <li>• Using a variety of coping strategies to deal with stressful situations at work</li> <li>• Being aware of own triggers or feelings of burnout</li> <li>• Feeling comfortable talking with support person about feelings of burnout</li> <li>• Feeling respected and valued in my work</li> </ul>

## Summary of Evaluation Results (continued)

Evaluation Components	Brief Description of Results
<ul style="list-style-type: none"> <li>Participant Outcomes Survey</li> </ul> <p>Participant Survey</p>	<p><u>Improvement in staff practice</u> (in 5 of 8 areas)</p> <ul style="list-style-type: none"> <li>Staff reminders of dealing with triggers re: abuse experiences</li> <li>Support in understanding how history of abuse affects people’s thinking and memory</li> <li>Support in understanding how history of abuse affects health</li> <li>Support in understanding how history of abuse affects relationships</li> <li>Staff respect of participants’ choices</li> </ul> <p><u>Improvements in Participant Outcomes</u></p> <ul style="list-style-type: none"> <li>Feeling less alone than before (greatest increase)</li> <li>Solving problems better than I did before (2nd greatest increase)</li> <li>Feel that I can be myself</li> <li>Hopeful about the possibilities for my life</li> <li>Less sadness or painful feelings as often as before</li> <li>More comfortable exploring my own interests</li> <li>More interest in connecting with people in my community</li> <li>Trust my own sense of what will keep me safe</li> <li>Less anxious than before</li> <li>Comfortable expressing thoughts and feelings</li> </ul> <p><u>Improvements in Parenting</u></p> <ul style="list-style-type: none"> <li>Better understanding of how children have been affected by abuse and violence</li> <li>Better able to talk with children about how abuse and violence might have affected them</li> <li>More often see children as themselves and different from abusive partner</li> <li>More likely to feel that children and parent can talk about anything (the largest increase)</li> </ul>
<ul style="list-style-type: none"> <li>Trainings Assessment</li> </ul> <p>Staff trainings provided by A Thousand Joys</p>	<p>All trainings received consistently high ratings, for content and facilitator, as well as knowledge gained. Specifically, staff appreciated:</p> <ul style="list-style-type: none"> <li>The training in communication patterns, both knowledge and tools</li> <li>SMART goals and being able to use in goal-setting, having a common language to use with other staff</li> <li>Having difficult conversations, delivering difficult messages</li> <li>The role plays that helped staff deal with all the organizational change</li> <li>Emphasis on self-care as prerequisite for providing care and support for others</li> <li>The inclusive nature of the training where all participants and their contributions are valued</li> <li>Having constructive ways to see participant behavior differently and respond more compassionately</li> <li>Learning more about and appreciating the effects of trauma – both participants’ trauma and staff’s own trauma</li> </ul>

# Summary of Evaluation Findings



The extensive evaluation by The National Center on Domestic Violence, Trauma & Mental Health provides a snapshot in time (over two years) that demonstrates that Rainbow Services has made significant progress in its desired transformation to a trauma-informed organization – from power over to power with. There is clear forward movement in four areas from a staff perspective:

There are noticeable improvements from the participant perspective in three areas. The participant response showed more improvements the longer they stay and the more involved they were in services and supports at Rainbow Services:

The evaluation provides concrete evidence for Rainbow Services' undeniable advancement toward the goal of becoming a *power with* organization. The evaluation is also clear that there are areas of remaining challenge and growth, including:

The organization's capacity as a trauma-informed entity  
Staff knowledge of trauma-informed practice  
Staff practice that is more trauma-informed  
Staff supportive experience in the workplace

Staff practice  
Participant knowledge and behavior  
Parenting knowledge and practice

Clarity regarding boundaries with participants  
Coping with high levels of change and staff turnover  
Difficulty working with outside agencies who are not trauma-informed

# RAINBOW'S LEARNING FOR THE ROAD AHEAD

Rainbow Services has made substantial progress in its transformation from power over to power with. What does Rainbow Services look and feel like on-the-ground today? There is improved flexibility, consistency, and adaptability to the needs of the participants and their families; it builds hope, decreases shame, and empowers survivors to envision their futures. It builds voice and choice in their lives. Inside the organization one can see:

- Commitment to learning, both for staff and participants
  - Individual supervision of staff
    - Group supervision of staff
    - Reflective practice sessions for direct service staff
- Regular staff training & professional development • Wellness events led by the "Cheerness" Committee • Regular evaluation and learning • Organizational values awards

**Check-In**  
Support and  
encourage staff

*Assign self-care partners*  
*Surround yourself with*  
*positive affirmations and quotes*

*Celebrate Success*  
**Be comfortable**  
**saying "NO"**

Create informal  
staff support groups  
**Open Communication**

**Reach Out**  
Be aware of  
how others feel

**Allow space for discomfort**

Share our learning

*A "Self Care Checklist" created by Rainbow staff*

# More specifically, the progress one can see inside Rainbow Services

## Movement from Rules to Guidelines<sup>8</sup>

- Many revisions over the years which included essential input from shelter staff
- Main decision-rule: "Does this rule/guideline/expectation have anything to do with SAFETY?"
- Questions staff ask themselves: What risk are we taking if we let go of this rule? What may be the benefit of letting go?
- Being mindful of our language - "We offer these services, what do you think will work best for you and your family?"

## TIC Organizational Responsibilities

- Leadership consistently models and communicates a TIC message
- Staff are trained and adopt processes and protocols
- Job performance appraisals encourage creating a goal connected to ongoing learning of TIC
- Helps staff develop personally meaningful stress management strategies and encourages them to act on them
- Compassionate safety protocols and training
- Investment in the work environment—facility maintenance to create a welcoming place
- Shared leadership
- Solicit input; demonstrate how staff input makes positive change
- Trauma-Informed Supervision
  - Teach people how to debrief (sliming vs low-impact debriefing)
  - Coach on how to keep things in perspective
  - Strengths-based
  - Fail forward principals
  - Set a good example
  - Normalize and address secondary trauma; create structure to discuss self-care
  - Transparency
  - Training in evidence-based practices
  - Training on importance of tracking and analyzing data
  - Be curious versus critical

<sup>8</sup>Power point presentation "From Power over to Power With: Applying Trauma-Informed Care to Our Work. Elizabeth Eastlund, Rainbow Services and Amy Turk, Downtown Women's Center

## And very specifically, the following infrastructure changes are visible<sup>9</sup>

### New Programs

A housing department, participation in a community arts initiative, more types of support groups (Beyond Trauma, Seeking Safety and a parenting class)

### New Structure

Recognition that the job of Director of Programs was not sufficient to support all direct service staff. In 2017, duties of the Director of Programs were separated into two positions: Director of Housing Programs and an Associate Director of Support Services

### Flexibility

Participants can use phones in shelter, new spaces created for families with pets and for adult male participants, some families allowed to stay beyond traditional time limits, flexibility in scheduling appointments with service providers

### Process

Team meetings where participants express thoughts and feelings, more training and support for reflective supervision so staff supervision is less about management issues and more about vicarious trauma. Residential advocates offer to watch participants' children so participants can practice self-care. Providing a menu of services...and openly having conversations about [participants'] needs and what is working for them and what is not.



<sup>9</sup>Rainbow's Journey to Becoming Trauma Informed, Rainbow Services, Inc. A report prepared by National Center on Domestic Violence, Trauma & Mental Health (2018), pg. 24

There are also several valuable **lessons learned** that were summarized in a recent progress report to the funder (Blue Shield of California Foundation)

**Lesson #1** *Sustainable change requires agency leadership to adopt and continuously support TIC practices.*

Rainbow has been implementing TIC approaches for some time now, including utilizing a harm reduction philosophy. Harm reduction shares many similarities with TIC, including seeing survivors as experts in their own life and the need to ensure survivors' voice and choice in decision making processes. Being able to formally evaluate the approaches has helped us to realize how far we have come. Though we faced many challenges in program leadership, our Executive Director's understanding of TIC brought the perspective to the Executive level. We also learned that, as we grew in our understanding of the approach, there was a need to restructure program leadership to ensure proper support and oversight of staff. We changed the interview questions for all staff positions to provide better insight into each candidate's values and principles, and how those have been developed and applied throughout the candidate's career to identify candidates who will fit well with the organizations' culture.

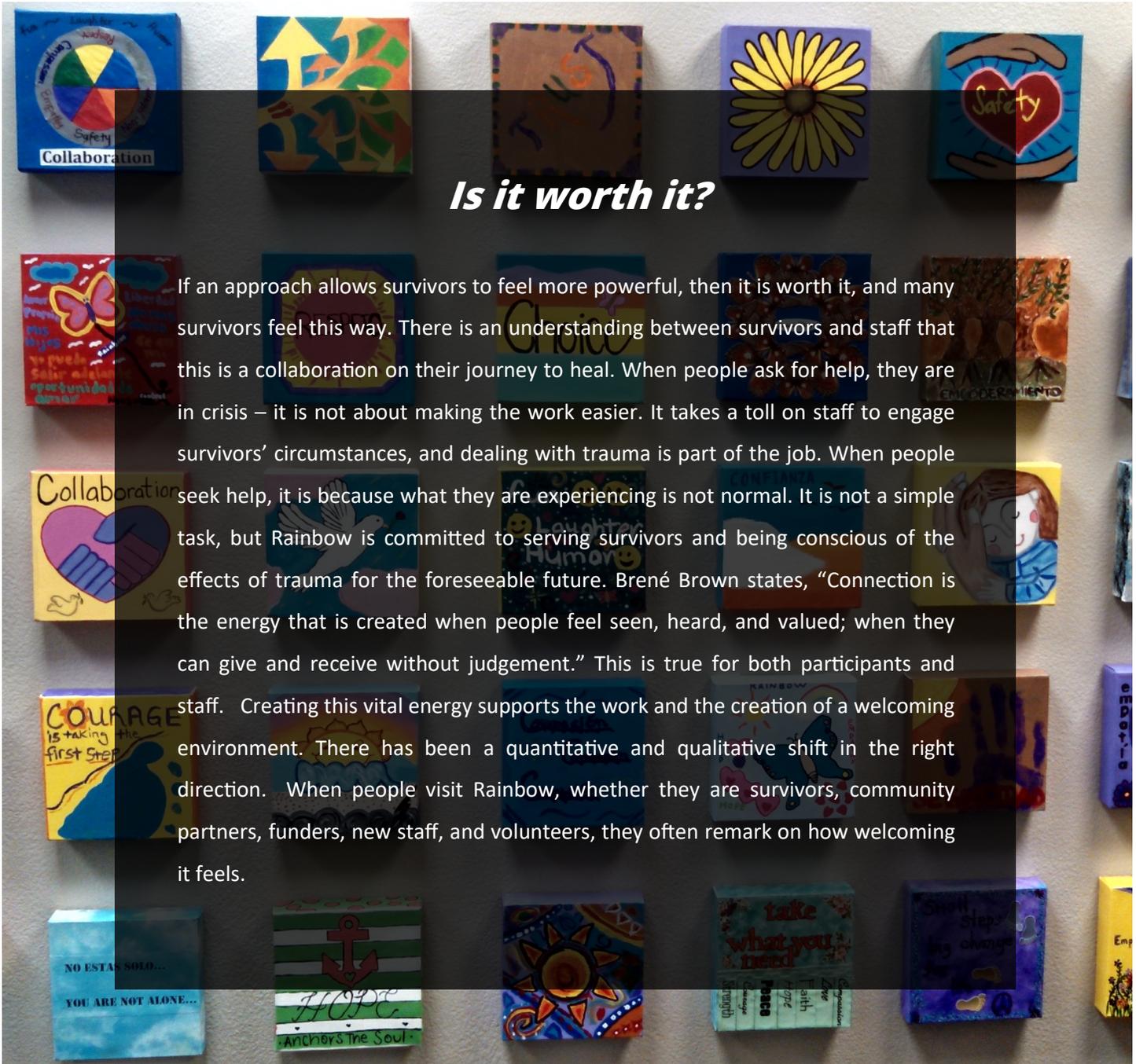
**Lesson #2** *Expect some staff to decide that TIC is not for them, and have practices in place to facilitate healthy, supportive staffing changes.*

We had begun to learn that sharing power means survivors hold more power, and that we expect difficulties and challenges with the shift in power. Being survivor centered means, by understanding trauma and its effects, there is a shift in our expectations of how survivors will present themselves. Several staff were not comfortable with the shift, and have chosen to move on to new opportunities. Others seem to understand the shift, though continue to need supportive coaching and training to align their actions with the change in organizational culture. We continue to work towards breaking down power structures and identifying ways to empower staff to make decisions, take risks, and improve their confidence in doing this work.

**Lesson #3** *Investing in training/professional development for supervisors and staff is a core operating expense in this field, not a luxury or bonus.*

We hope to continue offering a welcoming environment for anyone who comes through our doors, and to use a "curiosity versus critical management" approach in supporting staff. One of the most vital lessons learned is that maintaining a survivor-centered, trauma-informed environment requires an ongoing investment in staff training, monthly reflective practice, and incorporating elements of reflective practice in meetings and individual supervision sessions. Training and professional development must be integrated into operating costs and not seen as something we do when there's a surplus or a new grant opportunity.<sup>10</sup>

<sup>10</sup>Transforming to a Trauma-Informed Care Model in the DV Shelter Setting, a report to Blue Shield of California Foundation, July 2018.



## *Is it worth it?*

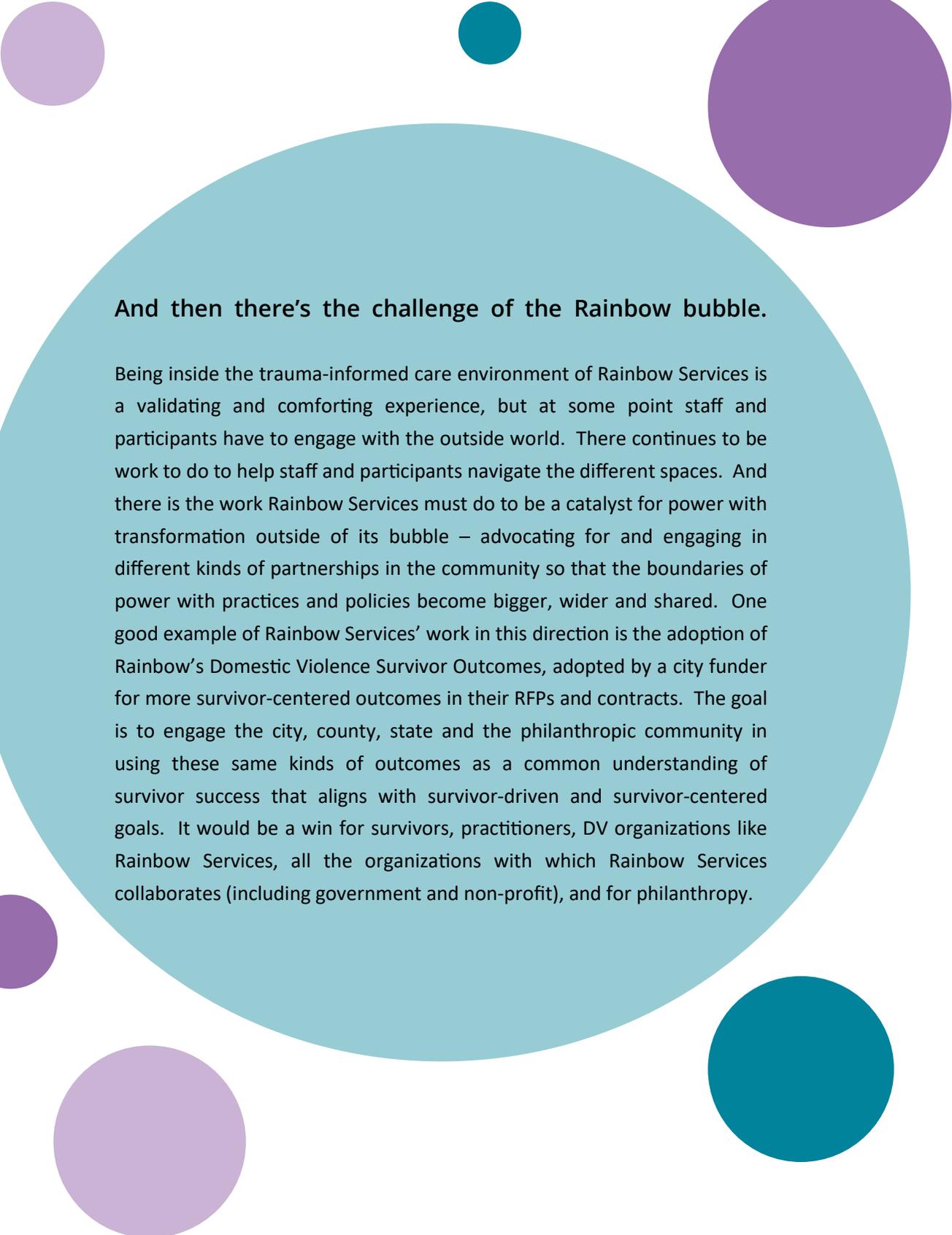
If an approach allows survivors to feel more powerful, then it is worth it, and many survivors feel this way. There is an understanding between survivors and staff that this is a collaboration on their journey to heal. When people ask for help, they are in crisis – it is not about making the work easier. It takes a toll on staff to engage survivors’ circumstances, and dealing with trauma is part of the job. When people seek help, it is because what they are experiencing is not normal. It is not a simple task, but Rainbow is committed to serving survivors and being conscious of the effects of trauma for the foreseeable future. Brené Brown states, “Connection is the energy that is created when people feel seen, heard, and valued; when they can give and receive without judgement.” This is true for both participants and staff. Creating this vital energy supports the work and the creation of a welcoming environment. There has been a quantitative and qualitative shift in the right direction. When people visit Rainbow, whether they are survivors, community partners, funders, new staff, and volunteers, they often remark on how welcoming it feels.



*The journey has already made clear some areas for Rainbow to work harder and smarter on the road ahead*

- Continue to find ways to increase communication across departments—to enhance service transparency and awareness, and the consistency of what it means to be trauma-informed.
- Clarify and address the questions about accountability—of participants within the program, of staff and participants reciprocally, and of staff to one another.
- Continue to offer training, utilizing in part the priorities identified by staff, and find ways to make it available to all staff. Training for residential staff, especially when some are part-time, work evening shifts, and have other jobs, can be especially challenging, but is important, especially because of the time they spend with survivors.
- Continue to provide training in the basics and nuances of trauma-informed approaches in response to staff turnover and to reinforce basic principles.
- Continue to provide safe spaces for coaching and mentoring—for managers so they can model and reinforce trauma-informed practice with staff, and for staff to ensure the principles are embodied in their interactions with participants and each other.<sup>11</sup>

<sup>11</sup>Rainbow's Journey to Becoming Trauma Informed, Rainbow Services, Ltd. A report prepared by National Center on Domestic Violence, Trauma & Mental Health (2018), pg. 24



## And then there's the challenge of the Rainbow bubble.

Being inside the trauma-informed care environment of Rainbow Services is a validating and comforting experience, but at some point staff and participants have to engage with the outside world. There continues to be work to do to help staff and participants navigate the different spaces. And there is the work Rainbow Services must do to be a catalyst for power with transformation outside of its bubble – advocating for and engaging in different kinds of partnerships in the community so that the boundaries of power with practices and policies become bigger, wider and shared. One good example of Rainbow Services' work in this direction is the adoption of Rainbow's Domestic Violence Survivor Outcomes, adopted by a city funder for more survivor-centered outcomes in their RFPs and contracts. The goal is to engage the city, county, state and the philanthropic community in using these same kinds of outcomes as a common understanding of survivor success that aligns with survivor-driven and survivor-centered goals. It would be a win for survivors, practitioners, DV organizations like Rainbow Services, all the organizations with which Rainbow Services collaborates (including government and non-profit), and for philanthropy.

## In closing, here is a recent story about the experience of a teenager and his family that exemplifies Rainbow's work today...

John was 14 when he came to Rainbow's emergency shelter with his two siblings and his mom. John's mom had endured nearly two decades of physical, emotional, and financial abuse. It was challenging for John to adapt to a new environment. He continually mentioned missing his dad and that his dad was mean to his mom but not to him. He would describe feeling angry and sad – angry because he could not see his dad and sad because he had to leave his home and his friends. He was angry as he watched other kids leave for the weekend to spend time with their dads when he could not. After a few months in emergency shelter, the family moved to the only available unit in our transitional housing program, a small one-bedroom apartment. In the past, we would not have considered placing a mom and three children in a one-bedroom. But adopting trauma-informed practices taught us to be more flexible and find a solution that would work for this family's safety.

There were a lot of teenagers at the transitional housing program during that time and held group meetings with them; focusing on respectful language and positive relationships, communication and behavior. Fourteen-year-old John could be described as an instigator, or as someone with unusual leadership skills. The old school social service model would see John as a trouble-maker and use potentially retraumatizing techniques to “manage” his behavior, versus helping him to understand how his exposure to trauma has affected his ability to communicate.

Staff asked themselves “What need is John attempting to fulfill?” and “How do we support mom in addressing issues with John?” John started individual counseling and attending support groups which helped him understand why he could not see his extremely violent father. At the same time, John's mom was also seeing a counselor, attending support groups, and receiving parenting support to help her understand John's challenges. Our residential staff held family meetings to help the family understand respectful language and the importance of supporting one another. After a while, John started to behave much more positively and interacted with his mother differently – he became our “junior” advocate at Rainbow, and a teenage liaison with the other kids.

Eventually, John thanked the staff for not giving up on him and for showing him that he is not a bad person. He transformed into a happy teenager who discovered that he has a lot of potential. John enrolled in the high school of his choice and was very helpful to his mother. He continued to talk about how he missed his dad, yet he was happy for his mom and sisters. John continued to learn more about family violence and realized that even though the physical abuse did not happen to him, it affected him emotionally. With the assistance of Rainbow, John learned to identify that violence in any form is not okay. John's dream is to go to college and become a sports coach for youth, to mentor them and keep them out of trouble. He shared with staff that when he grows up, he is going to donate to Rainbow so that we can continue to help kids like him. Through helping John understand what healthy connection looks like, John is now a part of building a healthy community.

## John and his family provided us with a great lesson:

We don't give up on families, we don't give up on people. With John, we learned to focus on strengths and foster them. It was an example of how to evaluate a situation that, at times, felt hopeless, and find the strengths within the family, as well as within our own practice. John felt that his own journey, from traumatized and angry teenager to helpful, healthy kid, was worth the effort. One family at a time, this is how we are going to end the generational cycles of abuse and violence in families.



# Closing Summary

**Rainbow's journey** to creating a trauma-informed culture required buy-in from all levels of the organization. The executive-level team was willing to take a chance to change the course that had been in place for some time, to challenge the very structures the DV field created to help survivors. It was, and is still, necessary to honor the past, to celebrate the grass roots on which the DV field was built. It was also necessary to acknowledge that with funding came an over-professionalization which took some of the humanness out of the work. Social services are, at their core, humans providing services to other humans. It became imperative for Rainbow to find the balance between the standardization expected by government funding sources, and the humanness that is essential to a trauma-informed approach.

For Rainbow, the journey so far, has had many challenges, even with the support of the organization's leaders to explore survivor-centered approaches. Coordinators providing direct supervision to front line staff had many conversations about how to best implement newly learned approaches. Discussions at the staff level were sometimes challenging, and along the way, some chose not to stay or were asked to leave when they were not able to embrace the principles and approaches that are essential to creating a welcoming and supportive environment. Having black and white rules and rigid structures makes this work easier for some. Being flexible and adaptable requires more work on the part of front line staff, and some interpreted flexibility as having no structure. Trauma -informed care has a definite structure, built upon a foundation of guiding principles: safety; trustworthiness and transparency; peer support and mutual self-help; collaboration and mutuality; empowerment, voice, and choice; and a proactive approach to cultural, historical, and gender issues. Inherent in these principles is the requirement for an individualized approach for each survivor and family that is asking for help. The organizational change process at Rainbow took years and is an ongoing effort. Sharing power was difficult for some. During the transition, staff often shared feeling that participants held *all* the power. The organization exists to be of service to those seeking help. Staff sharing power with participants requires an examination of the very power structures on which organizations were built. It is not an easy examination. *Power with* means approaching the work from a place of curiosity versus a place of criticism. *Power with* means supporting staff in recognizing burnout, vicarious trauma and addressing their own trauma triggers. That takes resources. *Power with* empowers survivors to make decisions to move beyond the trauma they have experienced and towards safety and stability.

# Resources

## **Rainbow Services**

rainbowservicesdv.org

(310) 548-5450

## **National Center on Domestic Violence, Trauma & Mental Health**

[nationalcenterdvtraumamh.org](http://nationalcenterdvtraumamh.org)

## **National Center for Trauma-Informed Care | SAMHSA**

[samhsa.gov/nctic](http://samhsa.gov/nctic)

## **Domestic Violence Evidence Project**

[dvidenceproject.org](http://dvidenceproject.org)

## **Safe Housing Partnerships**

[safehousingpartnerships.org](http://safehousingpartnerships.org)

## **A Thousand Joys**

[athousandjoys.org](http://athousandjoys.org)

## **Trauma Informed LA**

[traumainformedla.org](http://traumainformedla.org)

## **Downtown Women's Center**

[downtownwomenscenter.org/trauma-informed-care/](http://downtownwomenscenter.org/trauma-informed-care/)

## ACKNOWLEDGEMENTS

We are truly grateful to the Rainbow Services Staff who dedicate their lives to being of service to survivors and for embracing a trauma informed culture and creating a welcoming environment.

Special thanks to A Thousand Joys for guiding us in our journey and for being our thought partner over the past few years.

Special thanks to Eleanor Lyon, Carole Warshaw, and the team at the National Center on Domestic Violence Trauma and Mental Health for your guidance, the evaluation of our organization, and for your broader work of creating evidence-based practice for domestic violence services.

We are grateful to the Blue Shield of California Foundation for its investment in and commitment to survivor-centered approaches that made this work possible.

Finally, our heartfelt appreciation to the survivors and their families whose courage inspires us to want to provide the best possible service. Thank you for allowing us to collaborate with you on your healing journey. We see you, we hear you, we believe you.

