Module V: Interdisciplinary Care Model and Approaches

Crossing Worlds, Intersecting Services
April 24, 2017

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Learning Objectives

After this session, participants will be able to:

• Describe interdisciplinary, coordinated approaches to refugee care
• Name core values of trauma-informed care
• Identify strategies to enhance their interdisciplinary approach to care
Large Group

- Describe your agency’s care model or approach to care in fewer than 3 words
Health

“A state of complete physical, mental and social well-being, and not merely the absence of disease or infirmity.”

World Health Organization Constitution
Silos

- Physical
- Psychological
- Social
- Legal

Hierarchy

- Physical
- Psychological
- Social
- Legal
Interdisciplinary/Integrated

Legal

Community

Social

Psychological

Medical

Psychiatric

client
Thought Exercise

- Which model most resembles your agency/program
- Write down 1 strategy to become more integrated or interdisciplinary
What do all providers working with refugees need to know?

- Knowledge relating to the trauma of up-rootment, separation and loss, hardship and persecution
- Knowledge of world conditions which have led to displacement
- Knowledge relating to cultural factors, and the effects of xenophobia in the host community
- Knowledge about laws and policies in the new country that impact refugees
- More?
Video

- What are potential points of entry for your profession or agency?
- What approaches to care could be helpful for this family?
- How could interdisciplinary or integrated care be provided to this family?
Contexts of our Work with Refugees & Asylees

- Refugee & IDP Camps
- Detention Centers
- Refugee Resettlement Agencies
- Health Care Settings – hospitals, clinics, private practice
- Elementary, Middle, High Schools (child and/or parent)
- Universities
- Community Organizations
- Legal and Immigration Support Settings
- Torture Treatment, DV, Trafficking Programs
- Child Protective Services
- Homes and Community
- Religious, Spiritual, Traditional Healing Centers
- Global forums
- More?
Our Roles with Displaced Populations

- Investigators into the political and socio-cultural factors
- Designers and developers of policies and programs
- Direct Service Providers
- Administrators and Managers of projects
- Evaluators of services and programs
- Advocates, grass roots organizers
- Researchers
- Elected officials
- Police
- Friends and neighbors
Refugee Care Approaches

- Ecological/Multi-Systems
- Client-Centered Health Narratives
- Trauma-Informed
- Resiliency-Based
Ecological/Multi-Systems

Chronosystem
Time and Space

Macrosystem
Values and Beliefs

Mesosystem
Policy

Exosystem
Environment

Microsystem
Interpersonal

Individual

Bronfenbrenner, U. (1992)
Clients’ understanding of their own health: Arthur Kleinman’s Questions

- What do you call this issue?
- What do you believe is the cause of this issue?
- What course do you expect it to take? How serious is it?
- What do you think this issue does inside your body?
- How does it affect your body and your mind?
- What do you most fear about this condition?
- What do you most fear about the treatment?
Trauma-Informed Care

• 5 Core Values: Safety, Trustworthiness, Choice, Collaboration, Empowerment

• Recognition of:
  – High rates and broad impact of trauma
  – The resilience of survivors
  – The reparative role of clinical relationships
  – “Symptoms” in the context of one’s experiences and culture
  – The impact of the trauma work on service providers

*Fallot & Harris (2009). Creating Cultures of Trauma-Informed Care.
### Displaced Persons: Triple Trauma Paradigm*

<table>
<thead>
<tr>
<th>Pre-Flight</th>
<th>Flight</th>
<th>Post-Flight</th>
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<tbody>
<tr>
<td>War</td>
<td>Fear</td>
<td>Language/cultural barriers</td>
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<td>Violence and Torture</td>
<td>Lack of access</td>
<td>Financial instability</td>
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<td>Arrests</td>
<td>Hiding</td>
<td>Housing instability</td>
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<td>Fear, threats</td>
<td>Risks</td>
<td>Immigration stressors</td>
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<td>Lack of access</td>
<td>Lack of basic needs</td>
<td>Change in roles</td>
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<td>Secrecy</td>
<td>Unknowns</td>
<td>Family tension</td>
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<td>Disrupted daily life</td>
<td>Violence</td>
<td>Differing acculturation</td>
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<td>Separation and death</td>
<td>Leaving others behind</td>
<td>Discrimination</td>
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<td>Loss</td>
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<td>More</td>
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*Center for Victims of Torture
Resiliency-Based

- Resilience: the ability to cope with trauma and adapt to challenges and change
- Mobilize resources
- Promote capacities to adjust, cope and heal by relieving environmental stressors
- Empower clients to navigate systems and resources with independence
- Re-establish safe relationships
Application of Approaches in an Interdisciplinary Model

• Acknowledge your and your agency’s limits
• Support client in establishing agency in her own care
• Prepare patient for what to expect and potential challenges/barriers with other services
• Expand patient’s support system by referring to other community programs
• Facilitate successful connection with new provider/agency
• Incorporate patient’s traditional and spiritual practices into the referral plan
• Refer out when other individuals or agencies have greater expertise or when you cannot meet patient’s cultural/linguistic needs
• Become familiar with other providers and agencies, their services, and their approaches to working with survivors. Visit them and establish referral and coordinated care plans
One Model: PSOT

Legal

Community

Social

client

CAM

Medical

Psychological

Psychiatric
Your Action Steps

- Write down 3 individuals, agencies, or types of program you want to reach out to in order to develop a partnership
- Write down 2 questions you want to ask every individual or agency you reach out to
- Write down 1 suggestion you will make to your agency by May 15, 2017, to enhance interdisciplinary care for your clients.
Additional Resources & Learning Opportunities

- Center for Victims of Torture (CVT)  http://www.cvt.org/
- Community Connections – Creating Cultures of Trauma-Informed Care  http://www.communityconnectionsdc.org/web/page/673/interior.html
- Heal Torture – Helping Torture Survivors Heal  http://healtorture.org/
- International Rehabilitation Council for Torture Victims (IRCT)  http://www.irct.org/
- National Center for Social Work Trauma Education and Workforce Development  http://www.ncswtraumaed.org/
- National Children Traumatic Stress Network (NCTSN)  http://www.nctsn.org/
- National Consortium of Torture Treatment Programs (NCTTP)  http://ncttp.org/
- Partner for Healing – Practical Guidance and compassionate solutions for trauma care professionals  http://partnerforhealing.org/
References


References, cont.