

An Update on Trauma Informed Practice

**Trauma, Gender and Substance Use
Webinar Series**



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Agenda

1. An introduction to the TGS project
2. Review of key TIP concepts
 - Pause for questions and discussion
3. Recent developments in TIP
 - Pause for reflection and questions
4. Summary and next steps
 - Pause for questions

The Trauma, Gender, Substance Use TGS Project

- Financial assistance provided by Health Canada
- 2 year knowledge exchange project
 - Partner with CCSA and people working in the substance use field from across Canada to collaboratively develop:
 - Evidence based guidance
 - Training
 - Public health messages
 - Knowledge products (fact sheets, resource lists etc.)
- Gender informed and transformative principles integrated with TIP principles

TGS Project Goal

- To guide the further integration of trauma informed, gender informed and gender transformative practices into substance use prevention, health promotion, treatment, harm reduction and policy in Canada

TGS Project Activities

- National Roundtable with provincial/territorial leadership (Nov '16)
- Webinar Series
- Pilot sites
 - Creating training, messaging, materials and/or policy shifts and evaluating the outcomes in four sites across Canada
- Development of materials for service providers across Canada
 - Evidence summaries
 - Evidence based guidance
 - Fact sheets
 - Posters
- Communities of Inquiry (COI)
 - Topic 1- April 2017
- Workshop at CCSA's Issues of Substance Conference (Nov 2017)

The TGS Webinar Series

Upcoming webinars....

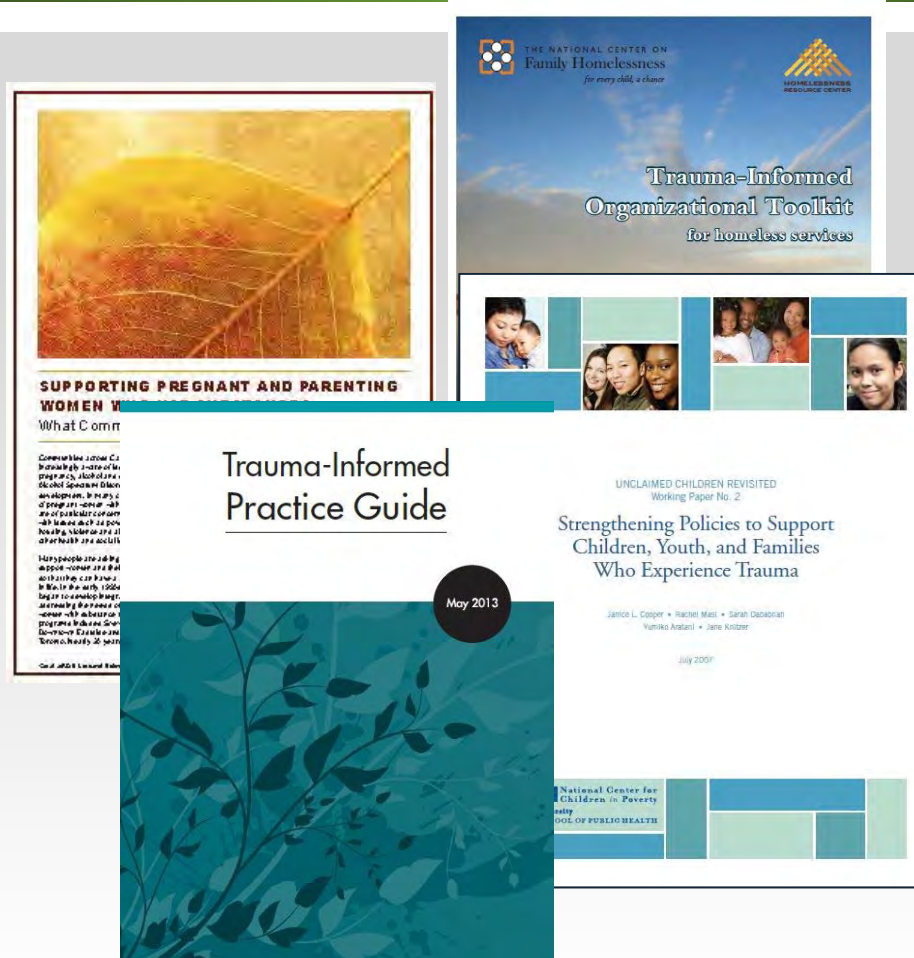
- **Webinar 2: Gender Informed Approaches In The Substance Use Field**
 - March 14, 2017
 - 9 PST, 10 MT, 11 CST, 12 EST, 1 AST, 1:30 NFL
- **Ongoing over the two year project**
- **Topics suggested to date:**
 - Trauma-Informed policy assessment, and TI leadership
 - In-depth look at bringing TI principles and approaches into settings
 - Working with trans, gender non-conforming, and non-binary populations
 - Gender- and trauma-informed approaches with men
 - Combining gender- and trauma-informed approaches
 - Trauma informed approaches linked to healing, in Indigenous communities
 - Other Suggestions?

Goal of today's webinar

- Summarize what we know about Trauma Informed Practice (TIP)
- Highlight emerging research/practice wisdom on TIP that can be applied to work in the substance use field
- Provide participants with an opportunity to share what they are working on, and offer ideas about what they need to support their practice

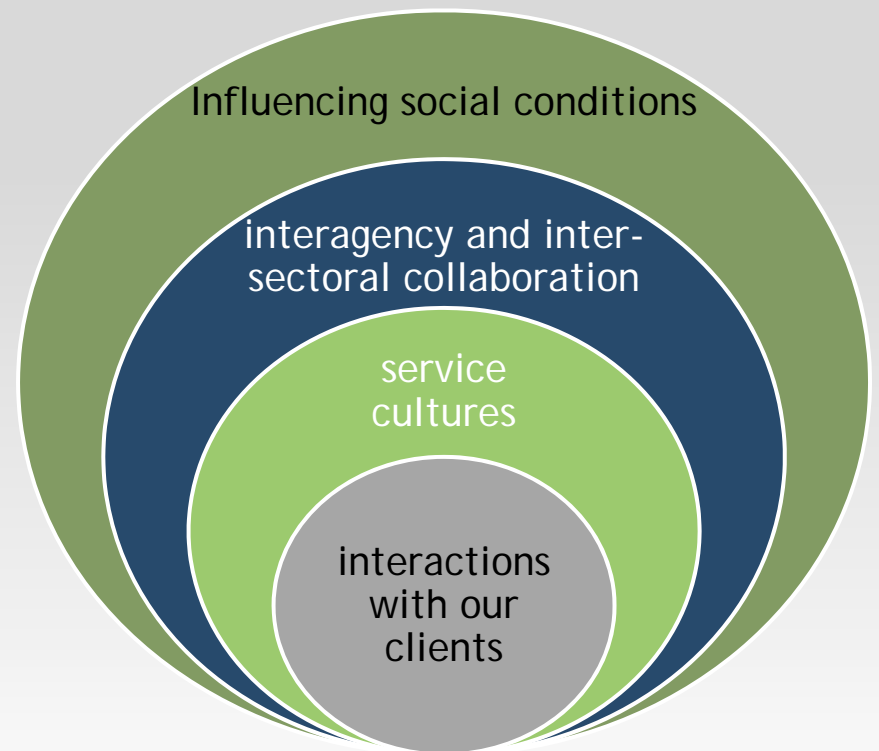
Review of key TIP concepts

TIP is being enacted in many settings and sectors

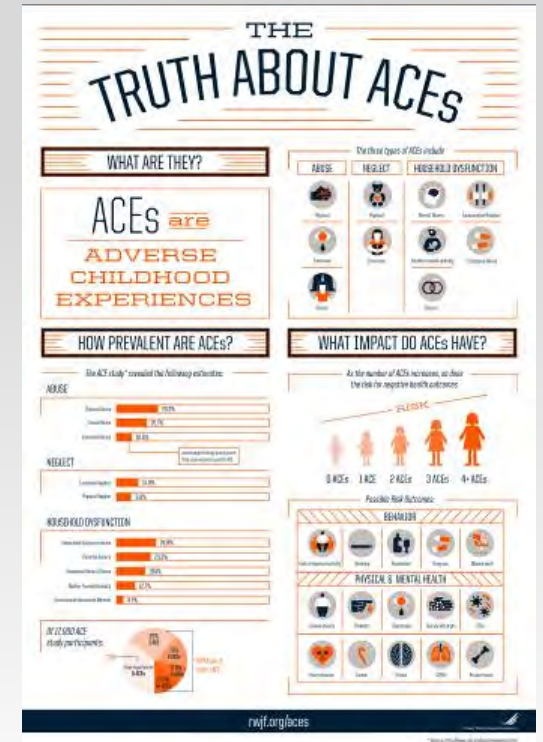
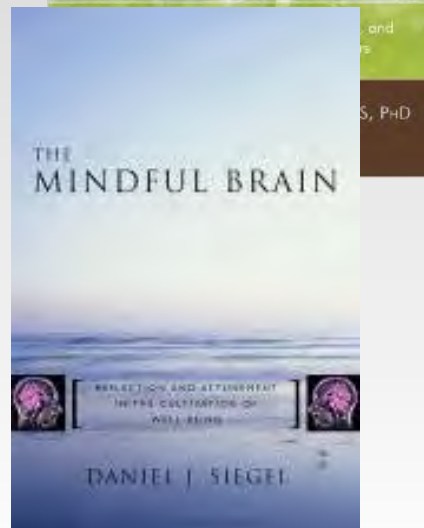
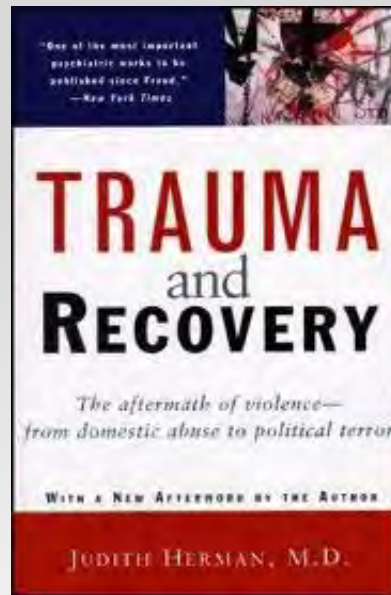
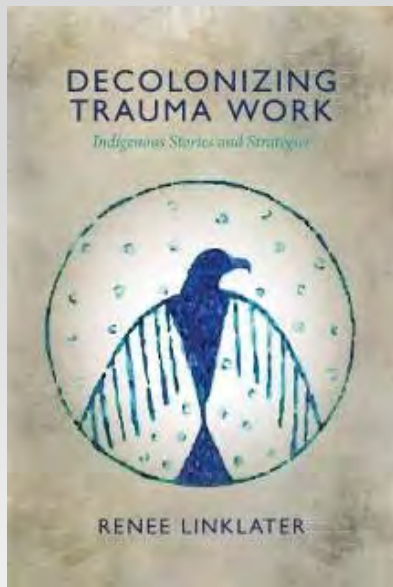


Trauma Informed Practice (TIP) as a movement

- Trauma Informed Practice is a movement - it includes changes in the way we think about how we provide social and health care services
- In practice, TIP means changes at the practice, program, and policy level
- TIP is built upon contributions and developments from a number of fields – public health, women’s health, indigenous wellness, neuroscience



Built on contributions from indigenous scholars, violence against women field, neurobiology and public health



What is TIP? and What it's not

- Trauma-informed practice refers to integrating an understanding of people's past and current experiences of violence and trauma into all aspects of service delivery.
- The goal of trauma-informed services and systems is to avoid re-traumatizing individuals and support safety, choice and control on the part of service users and service providers in order to promote health and healing.

Not treatment, not a technique, instead a paradigm

Disclosure of trauma, not required in TI approaches

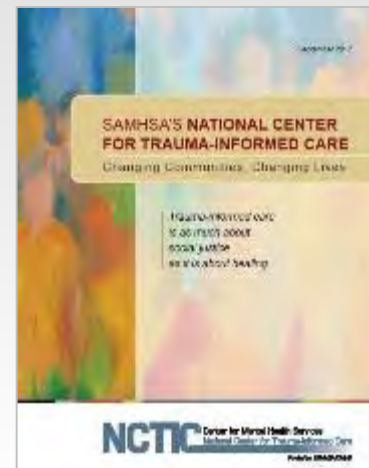
Linkage to trauma specific treatment/healing is important

What do trauma-informed services look like?

The Four 'R's (SAMSHA, 2014)

"A program, organization or system that is trauma informed:

1. **REALIZES** the widespread impact of trauma and understands potential paths for recovery;
2. **RECOGNIZES** the signs and symptoms of trauma in clients, families, staff, and others involved with the system;
3. **RESPONDS** by fully integrating knowledge about trauma into policies and procedures, and practices;
4. Seeks to actively **RESIST RE-TRAUMATIZATION.**"



TIP is important for the substance use field because

1. Many people with traumatic experiences use substances to cope
2. Trauma affects service access and engagement: e.g. difficulty with trust and relationships, reluctance to engage, and quick to drop out, ambivalence to give up or change coping mechanisms . . .
3. We in the field need to be part of the movement: to recognize and help people with trauma responses, be healthy ourselves as we deliver services, create interagency and intersectoral nets of support for substance users/people in recovery, make links to TRC Calls to Action/culturally safe service delivery . . .

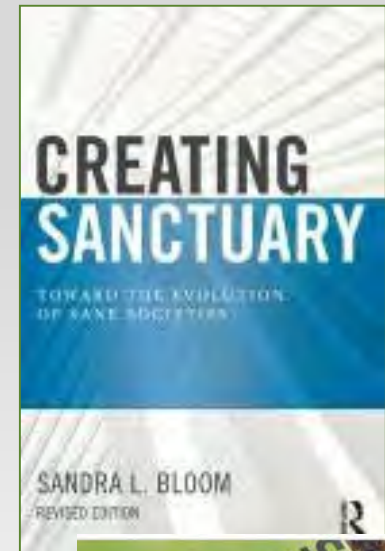
A key aspect of TIP is the promotion of healthy organizations

Healthy organizations are emotionally well regulated.

Organizational TIP is "an approach to a whole culture that increases the emotional IQ of everyone and the organization as a whole"

Bloom's 7 qualities of TI Organizational culture

1. Culture of *non-violence*
2. Culture of emotional intelligence
3. Culture of inquiry and social learning
4. Culture of democracy
5. Culture of open communication
6. Culture of social responsibility
7. Culture of growth and change



<http://thesanctuaryinstitute.org/>

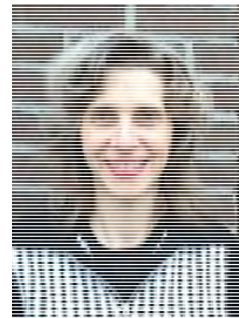
What stands out for you?

Comments, Questions,
Discussion

Type your
questions

In the Q&A
box in the
bottom right
hand corner

Lucy Hume Denise Bradshaw Holly Murphy Julia Bloomenfeld



An update on trauma informed practice

Current action and promising practices

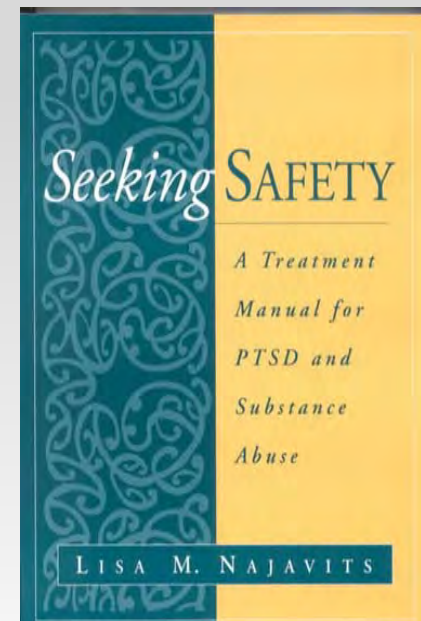
Lots of work is being done in jurisdictions across Canada and internationally:

- In different levels of service - prevention, harm reduction and treatment services
- At agency level – e.g. in staff training, agency assessment checklists
- By and with interagency partners – child welfare, indigenous health . . .
- Resources and educational materials

Research on TIP in treatment contexts

In the academic literature *Seeking Safety* (which has trauma informed and trauma specific aspects) is the most studied

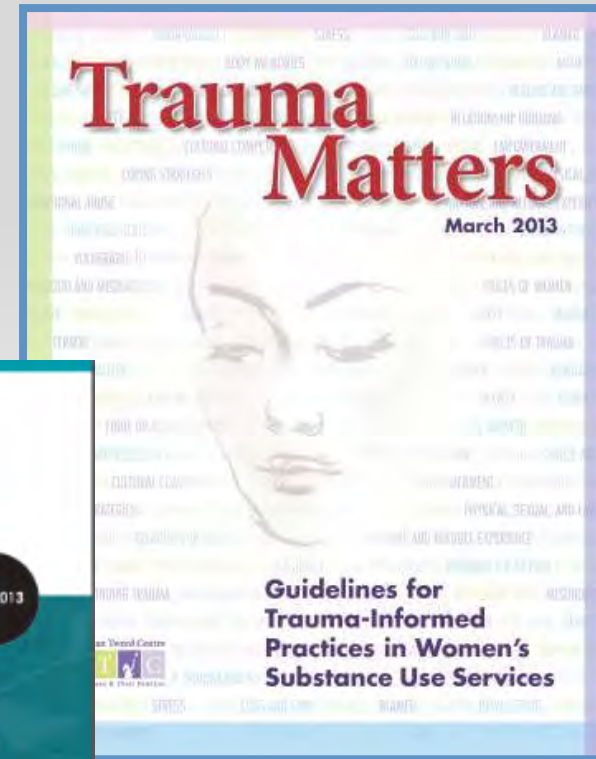
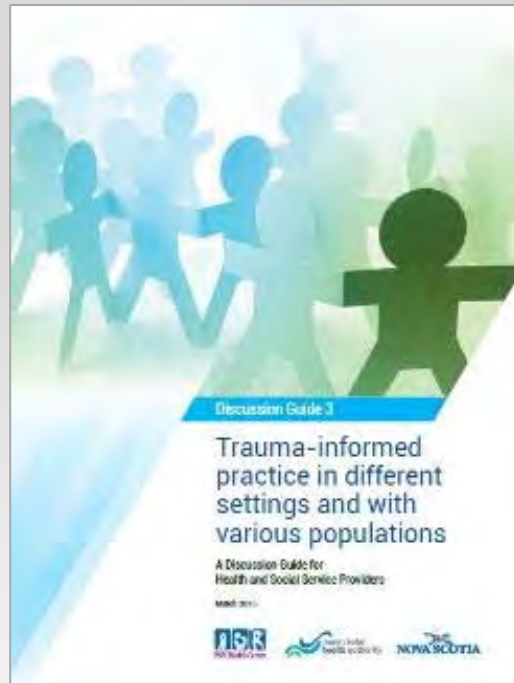
- Present focused, creating safety and recognizing connection between substance use and trauma
- many evaluations, wide range of groups and settings
- Effective in: reducing trauma symptoms, improving safe coping skills, therapeutic alliance
- Reductions in SU, although in some evaluations this is not sustained



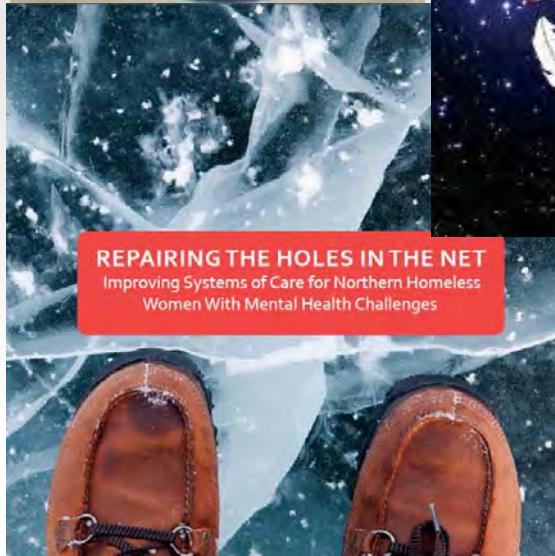
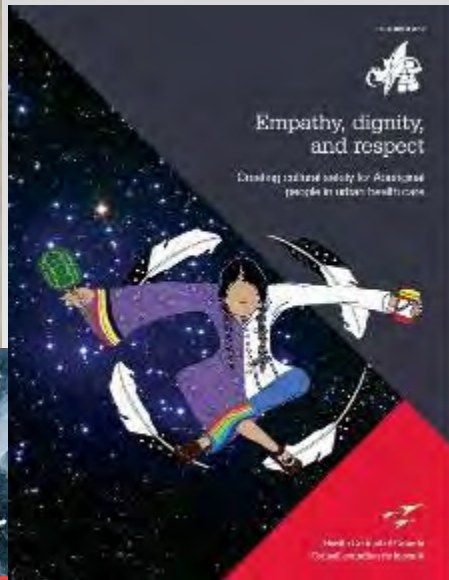
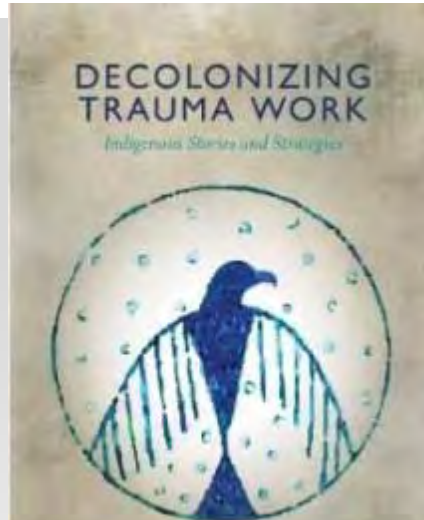
www.seekingsafety.org



TIP GUIDANCE DEVELOPED IN SUBSTANCE USE TREATMENT SETTINGS IN CANADA



TI, wellness-oriented, cultural interventions in Indigenous settings



REPAIRING THE HOLES IN THE NET
Improving Systems of Care for Northern Homeless Women With Mental Health Challenges

The role of the treatment provider in Aboriginal women's healing from illicit drug abuse

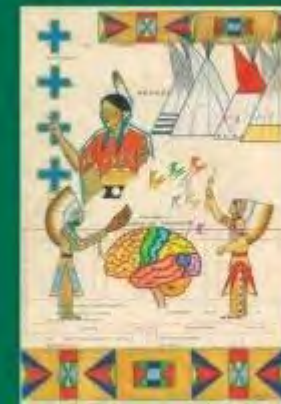
In 2005, a community-based collaborative research project was initiated by the National Native Addictions Partnership Foundation, the Canadian Centre on Substance Abuse and the University of Saskatchewan. The project examined the role that identity and stigma have in the healing journeys of criminalized Aboriginal women in treatment for illicit drug abuse at National Native Alcohol and Drug Abuse Program centres across the country.



RE-CLAIM

- Empathy**
 - *Re-claim empathy* for the struggles that women face due to their problematic substance use (for example, loss of custody of their children).
- Acceptance / Having a non-judgmental attitude**
 - *Be accepting and non-judgmental* about women's past behaviours (for example, women's involvement in prostitution for survival).
- Inspiration**
 - *Provide inspiration* by acting as a role model (for example, when appropriate share parts of your own healing journey to show it is possible to gain further education as an adult and secure meaningful employment).
- Recognition**
 - *Recognize* the impact of trauma in women's healing (ranging from the intergenerational effects of colonialism through to the disproportionate rates of interpersonal violence faced by Aboriginal women).
- Communication**
 - *Open lines of communication* for two-way, non-hierarchical dialogue with the women.
- Care**
 - *Show care* for the women and passion for your role as a treatment provider.
- Link to spirituality**
 - *Support the link to spirituality* in women's healing through Aboriginal culture as well as any other traditions and teachings with which the women identify.
 - *Promote momentum* in the women's healing.

For Indigenous Minds Only: A Decolonization Handbook



Edited by
Waziyatawin and Michael Yellow Bird



TIP in community support settings

- Outpatient group run by trauma counsellor and addiction counsellor at Victoria Sexual Assault Centre – based on community collaboration to provide integrated services with the Island Health Authority
- Adapted *Seeking Safety* model:
 1. ***Seeking Information*** sessions (3): focus on coping strategies
 2. ***Seeking Understanding*** (12 weeks): in-depth examination of topics related to trauma and substance use



www.seekingsafety.org



TIP in community support settings

TIP IN ACTION IN A PREGNANCY OUTREACH PROGRAM FOR ABORIGINAL WOMEN - MANITO IKWE KAGIIKWE: THE MOTHERING PROJECT, WINNIPEG

- Peer Driven Program Development - Valuing of Experiential Wisdom
- TIP tools – Motivational Interviewing, building space with TIP in mind, gardening, food as medicine, yoga and mindfulness activities
- Drum Group and opportunities for healing related to the drum
- System navigation and interdisciplinary collaboration
- Low Threshold Intake process



Oriented towards kindness



Trauma informed – in harm reduction contexts

In the academic literature 2 Canadian studies looked at trauma informed approaches in services with harm reduction focus

Smye et al 2011 (Canada)

- qualitative study with Aboriginal clients accessing methadone maintenance therapy in DTES
- Linked issues impacting access: stigma and prejudice; social and structural constraints; and homelessness

Torchalla et al 2015 (Canada)

- Qualitative study with pregnant and postpartum women accessing harm reduction services in DTES
- trauma-informed approaches more appropriate than trauma-specific interventions in low-threshold harm reduction services

Trauma informed – in prevention settings

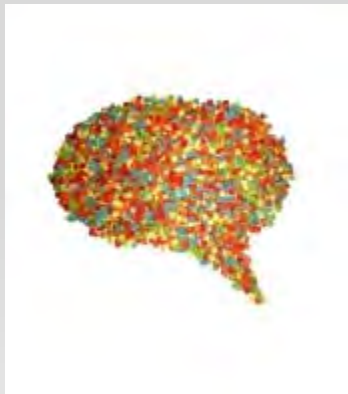
Pokhrel et al. 2013

- A review of school based drug use prevention programs. Self regulation training to reduce risk of substance use initiation

Sockolow et al. 2017:

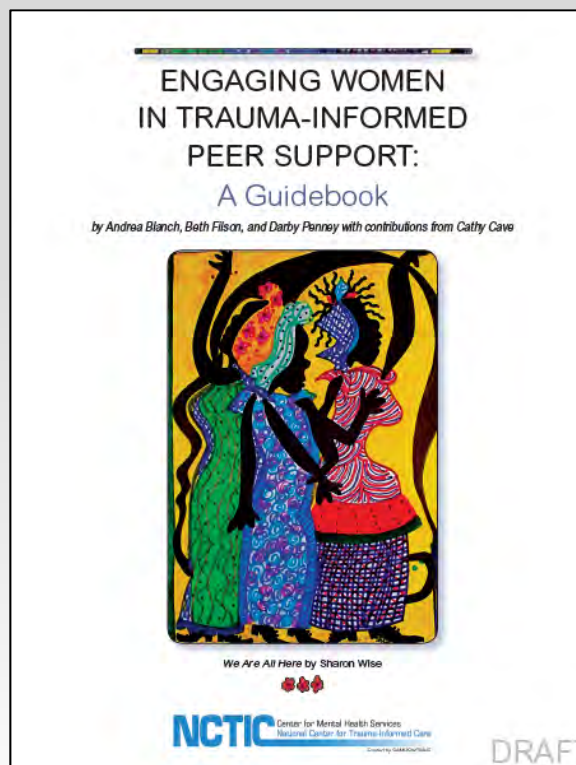
- Describes the development of a trauma-informed psychoeducational interactive story/ game app. Developed with/for urban, low SES, African American 13-17 year old adolescents (sample primarily girls) with high rates of adverse childhood experiences. Includes 4 role playing games, including: deciding how to approach the first real argument with a romantic partner regarding substance abuse

T-I PEER SUPPORT



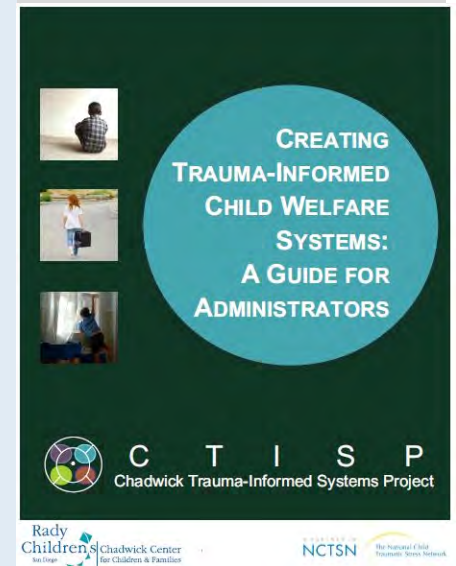
Rising from the Ashes -
Trauma Talks
Buffalo Center for
Social Research

- Online personal
accounts from
survivors and
providers



TIP in allied sectors e.g child welfare practice

- *A trauma-informed child welfare system is one in which all parties involved recognize and respond to the varying impact of traumatic stress on children, caregivers, families, and those who have contact with the system. Programs and organizations within the system infuse this knowledge, awareness, and skills into their organizational cultures, policies, and practices.*



Essential Elements of a Trauma-Informed Child Welfare System Addressed



Workforce supports

ADDRESSING SECONDARY TRAUMATIC STRESS AMONG CHILD WELFARE STAFF

A PRACTICE BRIEF

INTRODUCTION

Child welfare staff are not recognized as first responders — yet, just like police officers and the firefighters, they must react to crisis situations with immediate attention about what they lie ahead. In addition to the very real personal physical risks associated with responding to a report of suspected child abuse or neglect, there are risks of psychological injury when responding to situations involving children and families that are experiencing poverty, neglect, family and/or community violence. Unfortunately, child welfare staff receive little public recognition for the risks that work entails, and child welfare-related news very rarely focuses on the positive aspects of child protection and the many day-to-day successes that result from staff's efforts. Instead, the public focus is usually negative, which can increase stress and pressure on child welfare staff and the system overall.

Secondary traumatic stress (STS), also known as vicarious trauma or compassion fatigue, refers to the experience of people — usually professionals — who are exposed to others' traumatic stories and as a result can develop their own traumatic symptoms and reactions. Child welfare staff have to deal with both direct and secondary exposure to dangerous situations — this combination can result in occupational stress.

Child welfare staff are susceptible to STS and occupational stress because of the vulnerable nature of their clients, the unpredictable nature of their jobs, the culture of their workplaces and their psychological protection. Research notes that "vicarious exposure to the events of daily life for child welfare workers and may be more toxic than direct exposure to violent events" because of workers' lack of control and inability to adequately impact clients' lives". Child welfare staff, like nurses, have reduced perspective and critical thinking capacity and have difficulty recognizing and monitoring their emotions and reactivity. A lack of potentially traumatic events, they may be more apt to avoid reminders of past or potential hazards to themselves or to their clients, and separate techniques with their supervisors and colleagues.

Traumatic event exposure has consequences that can be contagious. If several people are exposed, argumentative and pessimistic as a result of their exposure to trauma can negatively affect the people around them. Over time, this can lead to an entire work behavior like a traumatic event. In this sense, trauma exposure can function like a virus all times of heightened stress and public scrutiny, where the focus is on what decisions may be made in a heartbeat.

There is a growing literature concerning the effects of these occupational stresses on staff. In a survey of Colorado child protective staff, 50 percent had "major" or "severe" fatigue, and in a survey of child welfare professionals across the states, more than



ACE-NYU CHILDREN'S

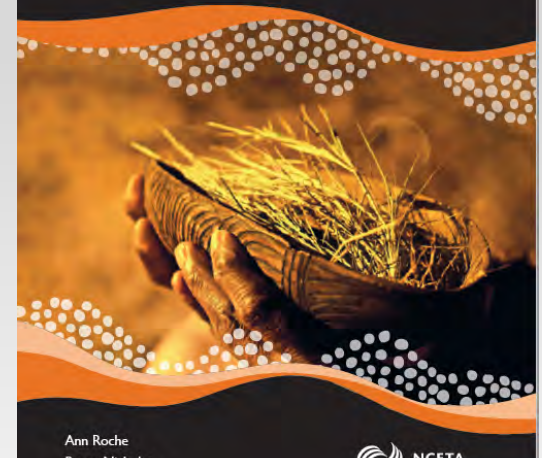
When Compassion Hurts:

Burnout, Vicarious Trauma and Secondary Trauma in Prenatal and Early Childhood Service Providers



Staying Deadly:

Strategies for preventing stress and burnout among Aboriginal and Torres Strait Islander alcohol and other drug workers



Ann Roche



Comparing Burnout, Vicarious Trauma and Secondary Trauma

Burnout	Vicarious Trauma, Compassion Fatigue	Secondary Trauma, Indirect Trauma
Cumulative, usually over long period of time	Cumulative with symptoms that are unique to each service provider	Immediate and mirrors client/patient trauma
Predictable	Less predictable	Less predictable
Work dissatisfaction	Life dissatisfaction	Life dissatisfaction
Evident in work environment	Permeates work and home	Permeates work and home
Related to work environment conditions	Related to empathic relationship with multiple client's/patient's trauma experiences	Related to empathic relationship with one client's/patient's trauma experience
Can lead to health problems	Can lead to health problems	Can lead to health problems
Feel under pressure	Feel out of control	Feel out of control
Lack of motivation and/or energy	Symptoms of post-traumatic stress disorder	Symptoms of post-traumatic stress disorder similar to client/patient
No evidence of triggers	May have triggers that are unique to practitioner	Often have triggers that are similar to the client's/patient's triggers
Remedy is time away from work (vacation, stress leave) to recharge or positive change in work environment (this might mean a new job)	Remedy is treatment of self, similar to trauma treatment	Remedy is treatment of self, similar to trauma treatment

Leadership on TIP implementation in agencies – using learning models

- In the implementation of Signs of Safety in Australia, practice leaders in each district lead e-learning, peer reflection and feedback initiatives; and deliberate, ongoing coaching and supervision (including coaching by credible peers) is made available.
- They have built upon and adapted the 70/20/10 learning model where:
 - 70% of learning is acquired through work based activities such as mentoring, debriefing and group reflection
 - 20% through networking and collaboration
 - and only 10% through formal learning strategies

Salveron, M., et. al. (2015). 'Changing the way we do child protection': The implementation of Signs of Safety® within the Western Australia Department for Child Protection and Family Support. *Children and Youth Services Review*, 48(0), 126-139.



Nova Scotia – IWK Education Plan

- **Level 1:** Foundational Education and support for EVERYONE
- **Levels 2:** Attachment, Regulation and Competency Training For Designated Mental Health and Addictions Staff & Identified Individuals/Teams
- **Levels 3:** Specific Trauma Treatment For Designated Mental Health and Addictions Staff & Identified Individuals /Teams
(core competencies in development for all levels)

<http://yourexperiencesmatter.com/>



TRAUMA-INFORMED ORGANIZATIONAL IMPLEMENTATION TOOLKIT

Developed by

ADDICTIONS
FOUNDATION
OF MANITOBA

ENHANCING CAPACITY FOR TRAUMA-INFORMED CARE

<https://afm.mb.ca/makeconnections/links/trauma-informed-care-resources/>



FRANÇAIS | EENET CONNECT 
ABOUT US PRODUCTS COIS DTFP RESEARCHERS NEWS BLOG PROJECTS

Search Results for: trauma informed

Trauma Matters: Guidelines for trauma-informed practices in women's substance use services

The prevalence of trauma among substance-involved women is high. The impact of trauma is profound and wide-reaching. Trauma-informed practices take into account an understanding of the prevalence and impact of trauma and integrate that understanding into...

[Learn more >](#)

Webinar recording: Trauma-informed justice: A system-level transformation in Kenora Rainy River

On January 11, 2017, was held the sixth webinar in the INTERVENTIONS IN PRACTICE series, highlighting evidence-informed interventions implemented as part of the Systems Improvement through Service Collaboratives (SISC) initiative. "Trauma Informed Justice: A System..."

[Learn more >](#)

We connect people and evidence.

Evidence Exchange Network (EENet) is a knowledge exchange network that brings together mental health and addictions stakeholders from across Ontario.

JOIN THE NETWORK

<http://eenet.ca/>

<http://www.icscollaborative.com/>



This national webinar series provides an opportunity to share knowledge, experiences and perspectives in support of collective efforts to strengthen Indigenous cultural safety in health and social services.

Jean Tweed Centre - Learning and Collaborating with Partners

- 16 Partnerships
- Shared values/MOU's
- Knowledge Sharing
- Training
- Consultation & Dialogue
- Sector Networks
- Conferences
- Organizational Specific Training

The Jean Tweed Centre



For Women & Their Families

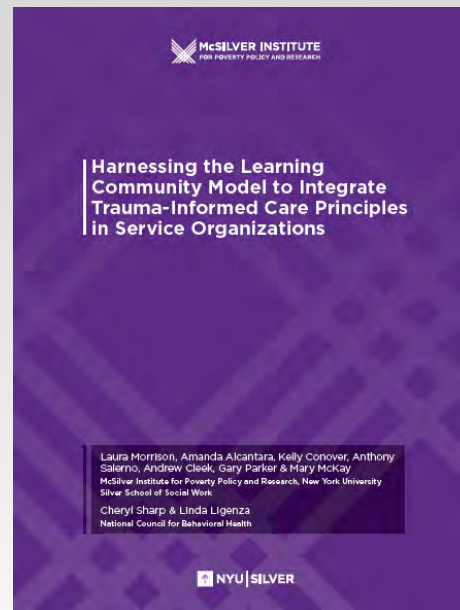
<http://jeantweed.com/>



Leadership on TIP implementation – learning models

“Given trauma’s prevalence and strong correlation with physical and mental illness, risk behaviors, and functional difficulties, TIC requires a comprehensive review and redesign of every aspect of an organization’s operations with strong commitment from leadership, active engagement of consumer survivors, and buy-in from stakeholders at every level.”

Harnessing the Learning Community Model to Integrate Trauma-Informed Care Principles in Service Organizations. 2015 McSilver Institute for Poverty Policy and Research, NYU and National Council for Behavioural Health

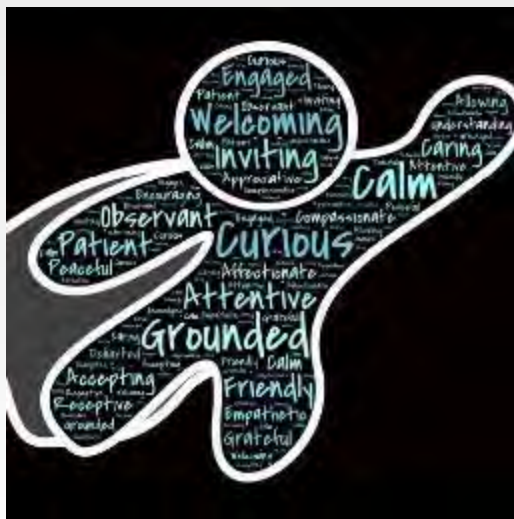


Domains of action:

- ▶ Trauma-Informed, Educated and Responsive Workforce
- ▶ Provision of Trauma-Informed, Evidence-Based, and Emerging Best Practices
- ▶ Create a Safe and Secure Environment
- ▶ Engage in Community Outreach and Partnership Building
- ▶ Consumer Driven Care and Services
- ▶ Ongoing Performance Improvement and Evaluation

TOOLS & RESOURCES

- Tools such as checklists, discussion sheets, pamphlets, screen savers, pamphlets, screen savers, posters etc. have been created to support learning, collective action and visibility of TIP – what else is needed?



We appreciate the strengths of the people we work with everyday.

Trauma-Informed Practice Principles

Trauma Awareness

Trauma awareness is the foundation for trauma-informed practice. Being 'trauma aware' means that individuals understand the high prevalence of trauma in society, the wide range of responses, effects and adaptations that people make to cope with trauma, and how this may influence service delivery (e.g., difficulty building relationships, missing appointments).

Safety and Trust

Physical, emotional, spiritual, and cultural are important to trauma-informed practice. A necessary first step for building trustworthiness and service and healing. Developing safety within informed services requires an awareness of secondary traumatic stress, vicarious trauma, and self-care for all staff in an organization.

Choice, Collaboration And Connection

Trauma-informed services encourage options for working collaboratively with children, youth, and families. They emphasize creating opportunities for choice and connection within the services provided. This experience of collaboration, and connection often involves involvement in evaluating the services, as well as service user advisory councils that provide input on service design as well as service users.

Strength Based

Skills and strengths are the foundation for recovery. Trauma-informed services focus on building on strengths and skills, rather than focusing on deficits.

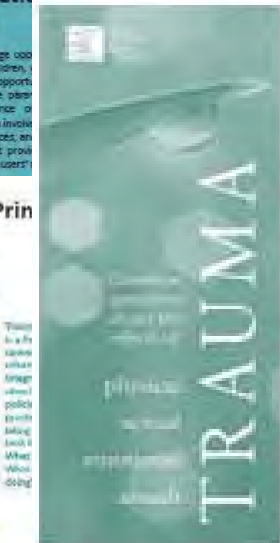
Trauma-informed practice integrates an understanding of current experiences and trauma into all aspects of service delivery. The goal of trauma-informed practice is to avoid re-traumatizing individuals and support safety and control in order to promote healing.

Trauma-Informed Practice Principles: TRAUMA AWARENESS



Trauma is a life event that can have long-term effects on physical, emotional, and mental health. It can lead to a range of symptoms, including anxiety, depression, and PTSD. Understanding trauma is the first step towards healing and recovery.

- Screening Guidelines to Get Started:**
1. The first step in your organization is to have a conversation with the top level of leadership to ensure they understand the importance of trauma-informed practice.
 2. Develop a trauma-informed practice plan that outlines the goals and objectives of your organization. This plan should be reviewed and updated regularly.
 3. Train staff on the importance of trauma-informed practice and how to provide trauma-informed care. This training should be ongoing and tailored to the specific needs of your organization.
 4. Create a safe and supportive environment for staff and clients. This includes providing access to resources, such as counseling and support groups, and ensuring that staff and clients feel safe and supported.



WHAT ARE THE EFFECTS OF TRAUMA?

sleep problems
chronic pain
chest pain
asthma
autoimmune disorders
heart palpitations
jumpiness

BODY

breathing problems
pelvic pain
tension
headaches
digestive problems
chronic fatigue

nightmares
dissociation
anger
flashbacks
hypervigilance
overwhelmed
feeling out of control
mood swings
feeling distracted

avoiding certain places, people, situations
difficulty concentrating
enjoying time with family and friends
suicidal thoughts
anxiety
loss of time

MIND

numb
depression
feeling disconnected
alcohol and drug use
shame
guilt
loss of interest in life
sadness
faith
self-hate
isolation
self-blame
grief

hopelessness
lack of trust
loss of meaning
irritability

Trauma affects everyone differently. People can and do heal from trauma.

Download the BC Trauma-Informed Practice Guide from www.bccpr.ca



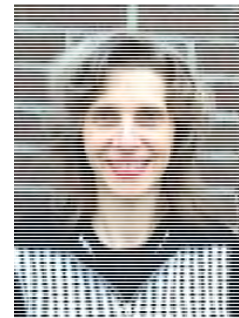
Comments, Questions, Discussion

What learning and resources are needed?

Type your
questions

In the Q&A
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TRAUMA-INFORMED PRACTICE RESOURCES

The following includes a selection of treatment related resources and curricula. Some are focused solely on trauma-informed practices and others incorporate elements of both trauma-informed and trauma-specific approaches.



Aboriginal Peoples and Historic Trauma: The processes of intergenerational transmission (2015)

This report from the NCCAR discusses how trauma must be conceptualized within the context of Aboriginal people in Canada. It provides a description of the patterns and processes of transmission of trauma. It calls for holistic healing strategies that are implemented not only within the health domain, but in other domains as well including education. 30 pages.

<http://www.nccarh-cnrsa.ca/930/aboriginal-peoples-and-historic-trauma-nccarh>



Becoming Trauma-Informed (2012)

Published by the Centre for Addiction and Mental Health in Ontario, this book offers examples of the ways in which practitioners have applied principles of trauma-informed practice in their work with diverse populations and in diverse settings within the MHSU field.

http://www.camh.ca/en/education/about/camh_publications/Pages/becoming_trauma_informed.aspx



Beyond Trauma: A Healing Journey for Women

This manual makes the connection between women's experiences of trauma and their substance use. Includes 12 sessions that integrate evidence from neuroscience with research on trauma and PTSD. Based on the principles of relational therapy, it uses cognitive-behavioral techniques (CBT), mindfulness, expressive arts, and body-oriented exercises. It can be used in a variety of settings, including residential and outpatient treatment settings, mental health programs, and criminal justice settings. \$595 US for complete set of materials; \$159 for facilitator's guide and 10 workbooks.



Coalescing on Women and Substance Use: Trauma Informed Online Tool (2011)

Based on the findings of a one-year research project (2010-2011) on trauma-informed approaches in Canada, provides an overview of key issues and themes in practice and policy, promising practices, and tensions. It also provides links to recommended readings, curricula and training resources, for understanding the connections between substance use, mental health and trauma, and strategies for developing trauma-informed practices and services. 56 pages.

<http://www.coalescing-uc.org/virtual-learning/documents/trauma-informed-online-tool.pdf>



CCSA: Trauma Informed Toolkit (2014)

Provides an overview of trauma, key principles of trauma-informed approaches, and implications for substance abuse services. 7 pages.

<http://www.ccsa.ca/ResourceLibrary/CCSA-Trauma-Informed-Care-Toolkit-2014-en.pdf>

<http://bccewh.bc.ca/>

Let us know via the post-webinar evaluation survey if you want to:

- Present on your work in future webinars
- Join a community of inquiry
- Be part of developing a new resource
- . . .

Contact us:
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Webinar Series

An Update On Trauma Informed Practice

February 21, 2017, 9 am Pacific

Gender Informed Approaches In The Substance Use Field

March 14, 2017, 9 am Pacific

Who Should Attend

These webinars are for people working in the substance use field—at every level—health promotion, harm reduction, treatment, aftercare.

Featuring

- Brief presentations by researchers and service providers on new research and applications to practice
- Opportunity for questions
- Links to further information

Project Goals

These webinars mark the beginning of a 2 year process of knowledge exchange, to guide the further integration of trauma informed and gender informed practices into prevention, health promotion, treatment, harm reduction and policy affecting those with substance use issues in Canada.

Register

Please register at:

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hostedincanadasurveys.ca/](https://bccewh.hostedincanadasurveys.ca/)

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