Complex Trauma and Intersectionality Panel

British Columbia Trauma Informed Practice (TIP)
Justice, Public Safety and Anti-violence Community Sectors Symposium
plan

1030: Overview of intersectionality and trauma informed practice (Colleen)

1045: Introductory comments by panelists (5 minutes each)
  ➤ Nikki Zawadzki, Coordinator, Prism Services
  ➤ Ninu Kang, Director of Communications & Development, MOSAIC
  ➤ Karen Martin, Project Coordinator, Disability Alliance BC
  ➤ Marnie Stickley, Victim Services, Elder Abuse Unit, Vancouver Police Department
  ➤ Marilyn Q. Brown, Hazelton Victim Service Program

1115: Dialogue with the audience
intersectionality and trauma informed practice

Colleen Varcoe, RN, PhD
University of British Columbia
What is “Intersectionality”?

- Commonly attributed to the work of black feminists in the US, drawing attention to how racism was as critical a determinant of black women’s lives as gender,

- Critiques the primacy of any social category – e.g. gender as the most important category related to interpersonal violence,

- Integrates attention to the compounding effects of multiple forms of disadvantage – e.g. poverty, racism, ablism, heteronormativity, heterosexism, ageism, stigma related to mental health issues, etc.
Intersectionality widens your focus beyond the individual, helps put the individual in context.
Intersectionality can be taken up in ways that do not go beyond identity and individual experience; the intention is to take social contexts into account in all practices.
Intersectionality is inherent to trauma and violence informed care/practice.

Example: Indigenous women in “Reclaiming our Spirits”
Trauma- & Violence-Informed Practice

Extends the notion of Trauma-Informed Practice/Care:

- Trauma and violence (interpersonal, structural, gendered) are root causes of poor mental and physical health.
- Looks beyond the psyche of people who have experienced violence to also consider structural violence and conditions that support it; violence can be historical and ongoing.
- Recognizes client responses (including health problems) as predictable consequences of highly threatening events and as connected to structural violence.
Structural violence encompasses the forms of violence that are embedded in social, political and economic policies and organizations (Farmer, 2003).
Social inequalities are at the heart of structural violence. Racism of one form or another, gender inequality, and above all brute poverty in the face of affluence…. (Farmer, 2004)

Inequities are structural because they are embedded in the political and economic organizations of our social world, and they are violent because they cause injury to people (Farmer, 2004)

Structural violence is “generally invisible because it is part of the routine grounds of everyday life” (Scheper-Hughes & Bourgois, 2003, p. 4)
Inter- and intra-personal violence and structural violence are interrelated.

- For example, homelessness has both structural (e.g. poverty), intra-personal (e.g., mental health problems) and inter-personal causes/influences (e.g., child abuse).

- Rural inequities such as lack of access to violence services are continuous with gender inequities and gender-based violence.
Key ideas:

- Violence is commonly understood and approached within societies dominated by liberalism as an *individual* problem, with *identifiable* victims and perpetrators;
- In keeping with liberal ideology, both ‘victims’ and ‘perpetrators’ (dichotomized) are held to have (unfettered) *choice and agency*;
- Violence is seen as deviant and abnormal rather than everyday and common;
- This view of violence a) keeps the focus on individuals, b) leads to a presumption of the need for identification, c) obscures patterns (e.g. gendered, raced, classed) and systemic violence.
Trauma theory & Trauma-informed practice

Critical perspectives on interpersonal violence

Evidence about ongoing gendered interpersonal violence with cumulative effects

Goal: organizational culture based on trauma awareness, safety and trustworthiness, choice and collaboration, and building of strength and skills

Trauma & violence informed care

Evidence about ongoing gendered interpersonal violence with cumulative effects

Goal: organizational policies & professional practices address inequitable power relations, discrimination, racism, and impacts of historical injustices on health and health

Attention to disadvantage and suffering that stem from unjust structures, policies and institutional practices

Goal: organizational culture based on trauma awareness, safety and trustworthiness, choice and collaboration, and building of strength and skills

Structural Violence

Cultural safety/structural competence
The social locations of the persons you are working with:

- What are the challenges? (e.g. unstable housing, discrimination)
- What are the strengths that can be drawn upon? (e.g. resources, community centre)
- Are there groups within the broader community you are working with that have gone unnoticed? (e.g. have you considered older people, immigrants, children...?)

Your own position as a service provider:

- What are your own identities, privilege(s), and positions of power in relation to the issues you are addressing? Are you a member of the group(s) you are working with?
- How does your position impact your work?

The conditions that impact social locations:

- What are the social, political, economic, or cultural conditions that are impacting the person or group(s) you are working with?
- What, if any, are the recent policies, practices, or laws that may be particularly relevant to the person or group(s)?
Nikki Zawadzki
Coordinator, Prism Services
Intersecting Oppressions: Gender & Sexuality

- Early colonization of gender & sexuality
- Violence against Two-Spirit people then & now
- Impacts on LGBT2Q+ communities today:
  - family & societal rejection
  - violence & hate crimes resulting in death
  - increased negative health outcomes: mental health & addiction, PTSD, suicidality, etc.
Many of the laws used today to criminalize LGBT people are based on laws imposed by colonial powers in the 19th Century.
Frequent violence towards trans people (particularly trans women of colour & non-binary POC & trans/2S Indigenous women)

Kicked out of women-specific services

Cycle of oppression often replicated in healthcare & support services; trans/2S folks denied access to care or treated badly

Folks delay or refuse Tx due to lack of knowledgeable, inclusive services
Gender-based violence

Attacks on people because of their sexual orientation or gender identity are often driven by a desire to punish those seen as defying gender norms and are considered a form of gender-based violence. You do not need to be lesbian, gay, bisexual, transgender or intersex to be attacked: the mere perception of homosexuality or of transgender identity is enough to put people at risk.

© 2016 Transgender Europe’s Trans Murder Monitoring (TMM)
Ninu Kang

Director of Communications & Development, MOSAIC
- Current situation of refugees in Canada
- Challenges in integration
- Canadian values vs Canadian attitudes towards newcomers
Karen Martin
Project Coordinator, Disability Alliance BC
People with Disabilities and Violence

Disability-based violence and rates of violence

Barriers to accessing services

Social model of disability

Systemic violence – historical & institutional
Abuse of older adults

Marnie Stickley
Family Services of Greater Vancouver
Vancouver Police Department
Elder Abuse Unit
Elder Abuse Unit?

My struggle with my voicemail message!

When do we stop being who we are and become an ‘elder’ or ‘senior’?
Curiosity

- What is the primary thing they would like help with?
- What is their experience of that struggle/relationship/harm?
- What has their experience been of those that have been involved or tried to help them?
- How would they like you to help them?
- What is their experience of you?
Be ready...

- To be lied to with good reason...
  People are working hard to keep themselves safe and balance all the competing needs in their lives.

- To not take things personally or get defensive...
  “You people have never helped me”.

- To hear things that you struggle with...
  “I am okay with dying as long as my son/daughter does not die on the streets”.
Examine your goals...

If you truly hear what a person’s experience is, imagine what it’s like to live in their shoes, you will be able to work with them on their goals and not get pulled into your own goals for them.
Creativity

- We are constrained by systems and institutions just as much as the people we work with.

- Anyone who challenges what seems to the ‘norm’ of how something works (e.g. the justice system, education system, rules of interacting…) has to have been creative in seeing a different way to do things.

- Change requires creativity.

- Be creative in your work!
Intersectionality and Hazelton Victim Services

Marilyn Brown, (Taa'bekxw), Victim Services
The Land

*Spirituality*
*Sustenance*
*Livelihood*

Gitxsan Intersectionality
DESTRUCTION OF FAMILY UNITS

*Oppression*
*Displacement*
*Disease*
*Assimilation*

COLLECTIVE TRAUMA

Colonization

Intersectionality
ECONOMIC INEQUITY
VIOLENCE
RACISM
MENTAL HEALTH
POVERTY
RESOURCE EXPLOITATION
WESTERN JUSTICE SYSTEMS
ADDACTIONS

Today
*Misunderstood/blamed*
*Collective and Individual Trauma*

Intersectionality Today
The Land/
people

*Spirituality/guardianship*
*Trauma Informed Services*
*Engagement*

Optimal Intersectionality

FEAST SYSTEM

LANGUAGES

GITXSAN GOVT

RECIPECAAL

EDUCATION

ADJUATE

SERVICES

TRADITIONS

MEDICINES

LAWS-GUJ

SENDON FOODS

THE LAND/PEOPLE

*Spirituality/guardianship*
*Trauma Informed Services*
*Engagement*

Optimal Intersectionality
Your turn…

- Reactions?
- Comments?
- Questions?