

Interview on Interpersonal Violence/Assault with McKenzie, a provider

Hello my name is Cari Hartinger and I would like to welcome you back to “Rising from the Ashes Trauma Talks, a podcast series brought to you by UB School of Social Work The Institute on Trauma and Trauma-Informed Care. This series provides an opportunity for individuals to share their witness of how strength and resiliency has allowed individuals to rise from the ashes. Trauma Talks follows people who have worked within the field of trauma as well as those who have experienced trauma. Here we will reflect on how trauma informed care can assist those who have experienced traumatic events to embrace a new life of wholeness, hope, strength, courage, safety, trust, choice, collaboration and empowerment. Today I am here with McKenzie Madison. McKenzie is a social worker at a medical clinic with youth who are survivors of sexual assault, adolescents with HIV and youth at risk for HIV. On behalf of the Institute we would like to thank you for being here today and sharing your story with us. I'm going to let McKenzie begin with giving you, the audience, a sense of how she came to interact with this field.

1:03 **McKenzie:** I came to the UB School of Social Work in 2010 as a full time student and my first field place experience was at Erie One Boces in the Leaving Our Legacy Program. So I did my first field experience there and I loved it. I was really scared and nervous at first to work with youth in the field of sexual health. That group was more focused on prevention and working with peers, youths working with peers to reduce the rate of teen pregnancy, HIV, STI's etc., and so going into the field was really scary for me because I had never thought that it was something I would ever do. But I kind of came to love it. I learned so much through that internship experience in terms of youth engagement, specifically also working with disadvantaged populations in the City of Buffalo and understanding poverty in different ways and also how trauma can affect youth, their development and the choices that they are making. And I was really able to develop some meaningful relationships with youth through that process and then when I finished my internship I was hired as a program coordinator for my second year of grad school. And I have basically been with the program since the beginning, working part time with the program and the youth; and working from a positive perspective but also we have really been able to incorporate the trauma piece as well.

2:27 **Kari:** Great, so I would just like to ask you a little bit about each of the principles and how you kind of, incorporate those or if he knows maybe. So can you talk a little bit about what safety means to you as a provider and how you know safety when you see it or when you feel it?

2:41 **McKenzie:** You know safety is really something to me that's the most important for youth in terms of opening up and being really honest and having an authentic relationship with a provider. It is something that I think in order to develop that youth have to feel safe with you. To kind of witness their experience, and for you to witness their experience, and then to be able to kind of share with you. They have to be in this place to feel that you are listening to them and that they are heard and that you care.

3:08 **Kari:** Right.

3:09 **McKenzie:** And so there's kind of a piece of being really genuine in that and being with them in that and so that is something that I personally work on in terms of the engagement piece with youth. You know, now working in the clinic and working with youth who are diagnosed with HIV, new diagnosis kids that have been diagnosed for years that is huge because there is a confidentiality piece of that and an intense fear of any of that information leaking out into the community. And so they really need to feel safe with you even if though they know you are a medical provider and you are bound by HIPAA and that kind of stuff, there is still that sense of...but I don't really know this person and I don't know if I really trust them with my personal information.

3:47 **Kari:** Absolutely.

3:48 **McKenzie:** So we definitely...I think as a team that I work with now, we have had to work really hard and we have really great team members, you are able to work with clients to help them feel safe. You know we have absolutely had youth come in who are survivors of sexual assault and aren't comfortable in waiting in our waiting room and being with people. You know they're having a little bit of social anxiety after that type of an event and so we're always really good about notifying the up front staff to pull them back into a room immediately. They know they can call me at any time to give me updates on that but I think really as a team, we try to all be on the same page so that we can build that safety into our program as well. And the same goes for the youth that I have worked with for the LOL Program. I mean obviously they really need to be in a space where they can share their thoughts, they can share their feelings and experiences, especially as we've gotten into this trauma stuff where they trust each other. So trust and safety kind of go hand in hand with that I think.

4:47 **Kari:** Right I think...

4:48 **McKenzie:** That's definitely in terms of making...helping them to feel safe in the environment too and where the Clinic is located and if they have any street affiliations. You know sometimes coming to the neighborhood where the clinic is can be dangerous. So we want them to be open and honest with us so that we can make sure that we enhance their physical safety, as well as their emotional safety so they can be open and honest with us as providers. So that they can share what kind of...is really going on.

5:11 **Kari:** Exactly and I heard you touch on a couple of the other principles, trust and teamwork so collaboration. What has been your experience through not only being a provider but just kind of a colleague in general I guess, with the team that you work with and how do you think that has facilitated your experience?

5:32 **McKenzie:** I think at the end of the day you know you have to trust who you are working with. You know the one thing that I think can always be emphasized more is that trauma informed care isn't just for us to be completely centered on our clients. We also need to be centered on ourselves and on our colleagues and on our environment. And so for me I think you really have to work at the relationships with your coworkers. You know I tell my clients all the time you know when you go to a counselor for the first time...you know we're constantly trying to refer youth to appropriate services and you know just because they have the letters at the end

of their name doesn't mean that you're going to get along with them. Or that they are the right fit for you. And so we need to be realistic and like you know sometimes it doesn't work. And I think for me as a coworker you are not always going to be best friends with who you are working with but you have to have that basic level of trust. And so I think we worked really hard in the clinic especially to come together as a team to acknowledge differences sometimes but we always have each other's back. If that makes sense?

6:37 **Kari:** Uh huh.

6:38 **McKenzie:** And so that's not easy you know. Obviously all coworkers...everybody you work with, you're not going to go out and be friends with them on the weekend, but at the same rate when you're at work it needs to be professional, and you need to be supportive of one another and put differences aside. And so that's not always easy, but I feel like we do that really well. And you know in terms of the LOL Program with the youth, you know we're letting the youth make the decisions for the program in terms of all types of events we're going to do, what we're going to be involved with and so we as adults have to trust them in their vision because they know more about their world than we do. They have to trust us. And know that sometimes, if we're giving them some advice that maybe they don't want to hear like "you know I really don't think we need to do that" like trust that we are trying to guide you in that, in the right direction and have your best interest in mind. So I guess I kind of work with...I think about trust in a lot of different ways in terms of my experiences. Again I think it's about being authentic and being real and being there and not just seeming like I am there for the paycheck. And that's one of those things again you know... youth that I work with tell me time and time again when they go and then meet with a service provider and if they feel like you are genuinely not interested in a word that they're saying or aren't willing to put yourself in their shoes and see it from their perspective they absolutely feel like why would I tell her anything that's true because she might just go and tell this person or or she might just go and do this. And so a part of that is really setting up the boundaries ahead of time with the client and saying you know I'm here and your information is confidential and will stay with me but if you say this, this or this or if you tell me this is happening, that's when I might need to take a step outside of this relationship. So always bringing that up front and I mean I guess the other thing that I've had with in terms of making CPS calls is I call the parents and let them know I'm going to call CPS. I don't just blindly call. I work with them and help it to be a supportive process as much as possible. Because I've also found when you called blindly you are not developing a relationship or trust with that family. And I've had some really wonderful outcomes with parents that I can call in or call back and say listen I really got a call on this and this isn't just because I think you're a bad parent this is because I think you need some more support. And what can we do to help you. So I guess that's a really long winded answer...so do with it what you may.

9:08 **Kari:** You mentioned earlier that the youth like the LOL Program, they kind of spearhead the organization or program.

9:18 **McKenzie:** Yes

9:19 **Kari:** And so how do you or how have you seen that that impacts their sense of empowerment? So I guess for kids coming that have been through these experiences and are

willing to get involved, put themselves out there, how do you think that this option of choice in how they go about facilitating things? Their involvement and what they can choose to be involved in?

9:44 **McKenzie:** It's interesting because people today when they see our youth present I think they have an assumption that yeah these kids are from the City of Buffalo and yeah they probably had some tough experiences but I mean they are the outliers. They are the ones that probably already had it okay and had some support in place. And that is really not true. I mean how far I have seen or used come over the years that I have worked with them it is amazing. And so in terms of the programming at LOL, it is extremely trauma-informed in its nature. And I think that's why our collaboration with UB and the Institute on Trauma and Trauma-Informed Care has work so well because you know we've really... Sue Donovan and I, true LOL have really worked to empower the youth like you were saying in terms of being the decision makers, being able to choose like I said what type of events that we do, what they want to be involved with, what trainings they want, what knowledge they want to get and what they want to have and us kind of trusting in that process with them and working through it with them. And you know we've made mistakes and we've had to try things differently and it is definitely a slower process when you're working with youth and you're planning a conference like we've done you know a few times but in the end it's all worth it for them because it is so empowering. And I think through that process they've really been able to kind of sort through some of the barriers they have had in their life, understand them in a different way and also understand their peers in a different way and every time more compassionate towards the people that they work with. And so now I was taking the next step with these years and we have trained them in trauma informed care which you know you don't really hear people training youth in trauma informed care and wanting to present it as well and that's giving them the power that we're not just going to invite you to conferences and have you talk about your trauma. We want you to understand why. And we want you to understand the principles. So instead of just having you come and share stories which is absolutely powerful we are incorporating them into the training piece. So they are aware of the principles, they can share and relate their stories to the principles. And that has been an amazing experience and super-empowering for the youth that we worked with in terms of their progress. And then being able to come to us as adults and having those safe people that if they are feeling triggered or they're having a hard time with something or they're not having a good day, to be able to put words to that has been really amazing. And also in terms of them being able to come and open up and share. So it is definitely something I am passionate about and do a little bit of that type of work and education with the youth at the program that I work with patients living with HIV. You know in terms of their education piece and how to understand some of the feelings that they are having and sometimes I can help direct them to services that they might have been resistant to in the past.

12:35 **Kari:** Definitely and I think like I said that's a huge, huge improvement from what we have seen in the past with you know, we bring the kids in and they share their stories. Anyone can share their story. But it takes more than that as they say to "rise above the ashes." And to use that as the change agent I think it's a completely new generational thing that we are doing and to make that change is huge. I would like to talk a little bit more about your services when you provide them. I know that you have regulations. I know that you have policies and things like

that. How do you go about providing trauma informed services in a sense when you want to provide choice to clients but they are mandated, or how do you work with your team to do that?

13:25 **McKenzie:** You know we have some really creative ways of going around things and working with clients. I mean we recently...we had a kid we really wanted to start an HIV medication after a year of being diagnosed. And we kind of had to ride through that process with him in terms of where can you keep your meds, how can you be adherent and it kind of...in some ways didn't split the team but there were different opinions on what his plan was for what he was going to do and where he was going to be able to keep his meds and how are we going to manage the disclosure piece of him being able to keep his diagnosis because he wasn't ready to share it yet. And so what we ended up doing was really non-conventional. Something that we never tried before but we went with what the client's plan was consistently from day one. Everybody thought that really is not going to work and how realistic is that for him to do this that and the other. But we now have a kid who's been on meds for 3 weeks and has been really consistent and successful with support from the team. So of course we hope that will continue. But sometimes it's about...we have to give in my opinion, we have to give sometimes the client the benefit of the doubt. This is their plan that they have consistently said they think it will work. And even if we look at this plan and we're like this does not sound like it's going to work for this kid. For us it might not work, but that might be the only option that the client has at this point to be adherent to medication. So I guess in those situations we just really try to be unconventional. We need to meet the client where they are at. We do home visits, we can make kids after school, we are really flexible with that and channel are necessarily approved to be driving clients and we approved to be out in the field all that much not necessarily but we can make it work. And so yeah there's definitely some bending of the rules. That happens, but sometimes in order to be trauma informed in a system that isn't necessarily trauma-informed how can you do that? And still do what's right for the client. And so I think in terms of that, our team is really good about being on the same page about giving things a try and letting the youth be the leader of the team and letting them make the decision, their own medical decisions with support from us and follow up of course. So yeah it's tough, it's really tough sometimes, but you know sometimes you got to bend the rules to get good outcomes and knock on wood we've been doing okay with that. We haven't had any mishaps. But a whole system change is really, really hard when you're talking about a big health system. Or even a big school district like Boces. Sometimes you have to push the limits a little bit and be a little unconventional to make things right for the client. So we really do the best we can with support from our middle managers.

16:26 **Kari:** I completely agree. Well thank you for sharing about your experience and thank you for being there today.