

## Developing a trauma informed children's services workforce in Argyll and Bute: *Children and Young People's Experiences*

### Shumela Ahmed

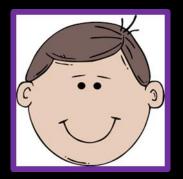




Sample Young Person, case study A: Shannon, aged 19

- Both primary care givers alcoholics
- Lived in 'Woman's Aid' refuges throughout early childhood
- Taken into care aged 12
- Left school aged 14, with no formal qualifications
- Multiple convictions
- Experience of homelessness as child, teenager and as an adult
- Teenage pregnancy
- First serious relationship is domestically violent





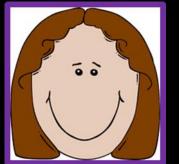
Sample Young Person, case study B: Jamie, aged 19

- Primary caregiver is in abusive relationship
- Primary caregiver has issues with problematic alcohol use and violence
- Witnessed extreme amount of violence as a child and teenager
- Leaves school aged 15
- Convicted of possession and intent to supply aged 17
- Becomes teenage father aged 18
- First custodial sentence aged 19



#### QUESTIONS?

- What services would/should have been around these two young people?
- What could/should these services be doing to ensure positive outcomes for each young person?
- What do we think the future looks like for each of these young people?



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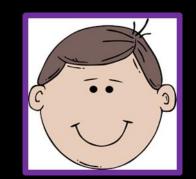






Shumela Ahmed, aged 37 (Shannon, case study A)

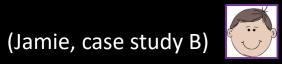
- Married with two beautiful sons aged 10 & 17
- Graduated with both PG and UG degree in 2018currently reading for third degree in Psychology
- Managing Director of RLP
- Trauma Informed Leader
- TED Talk (Trauma Informed Practice)
- Co-author of NES TPT Training Plan 2019
- Member of the 'National Steering Group on Trauma Training Implementation'
- Member of Stop/Go Group 'Independent Care Review'







#### Jamal Ahmed: 1987-2007



# Deceased aged 19, three weeks after release from first custodial sentence.



#### Was Jamie/Jamal's Outcome Inevitable?

- Locking our young people up is very rarely the answer-Jamal should never have gone to prison, I should never have gone into care the way I did.
- If they do need to go into to care, they need to be part of the process from the very beginning- *I* had no concept of what was going on when *I* went into care. *I* was 12 years old, it traumatised my brother just as much as it traumatised me.
- If young people are experiencing or witnessing any type of abuse from within the family home the correct and sufficient supports must be put in place- *My brother and I never received any sort of support as children or YP. We lived in various Women's Aid refugees throughout early childhood.*



### Why was Shannon/Shumela's Outcome Different?

- Access to services is vital- *I didn't get access to appropriate service provision until age 29.*
- Education is key- Non-disruption of school must be paramount. Finally getting access to education healed me more than trauma therapy ever has or could.
- Finding a voice- Most significant aspect of my own and any other YP coming from similar circumstances journey. Never underestimate the power of giving someone a voice and then actually listening to what they say and doing something with it.

#### Voice

#### Independent **Care Review**

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our hearings, our voice

National **Steering Group** on Trauma Training – **Action Plan** 







#### 03 | CO-PRODUCING TRAUMA TRAINING

Co-producing trauma training with people with lived experience has the potential to enhance training quality.

The co-production process presents an opportunity to embed the trauma-informed principles of safety, choice, collaboration. empowerment and trust into all aspects and all stages of co-production, from initial conversations around who can contribute and how, to how contributions are acknowledged and remunerated.

#### **Co-production considerations:**

- · Promoting fair opportunities and creating structures to ensure that people with lived experience who wish to participate in contributing to increasing understanding of trauma, can safely do so.
- · Attending to issues around power, equality and consent in commissioning and developing training involving people with lived experience
- · Ensuring that forums are safe for contributors
- · Offering options and choices on what is contributed, how, and for how long.
- · Recognising strengths and skills and enabling contributions to be developed around these
- · Building in support and scaffolding, traumatisation

programme intended learning outcomes Discussing how contributions are to be acknowledged

Agreeing when and how contributions are to be remunerated, and creating workable payment mechanisms

· Being clear about how the involvement of

people with lived experience contributes to

- where needed, and guarding against re-

#### Inclusive Justice

Involvement in Community Justice

UNE 2019





For those of you who have already or are in the process of designing your own trauma training- have you included people with Lived Experience of trauma either in the design and or the planned delivery of the training?

It's not trauma informed if it's not informed by people with lived experience!

**CHOICE**: Choose to consult and seek input from the young people your organisation works with who have Lived Experience. Give them a choice of how, where and when they can have input and give feedback. Ask how this could be done, give them the opportunity to choose from a range of options. Be braverelinquish your control! *'European* governments are increasingly emphasising the importance of service user involvement in the design, development and delivery of public services' (Weaver et al 2019)

**COLLABORATION:** People with Lived Experience have so much to teach you about trauma. You also have a responsibility to enable this learning to take place by providing the space, time and resources needed to make it happen. Working in partnership and authentically seeking consultation and feedback is vital. Give power over to those with LE, encourage participation groups, peer support programs and forums. Remember- you don't only need to consult with children and young people! What about former YP? EMPOWERMENT: Empowerment is in the hands of the person it belongs to and it's not something that is teachable. However, we can create the Relationships, spaces and environments for children and young people to become empowered. Many of you have the power and resources to create such spaces and environments. Empowerment also comes through allowing young people to be heard- Advocacy access!

**TRUST:** Trust that children and YP with LE can help and guide you in this. Too often those with LE are not trusted to be able to take part in such work. WRONG! Perhaps you need to think about how you have previously set up this type of work/group. Do you always have the best people in place for that? Could you tap into the already existing world and expertise of LE work already going on across Scotland? **SAFETY:** Anyone who has

experienced trauma needs to feel safe. When this type of work is going on, safety must be paramount. Often, consultation, participation and other forms of gathering input or feedback from people with LE can be conducted without safety in mind. Do not rush into the process of working with people with LE, regardless of age, ensure you have created the mechanisms to allow for authentic, meaningful and safe work to take place.



### Supporting children and young people to recover from the effects of psychological trauma



### Some final thoughts....

Negative outcomes are not inevitable.

Service provision is key to getting it right for our young people.

Young people are resilient and are more than capable of helping you out with this!

To authentically include, meaningfully participate and truly connect with the children and young people you work with can open up a whole new world of learning. It can also provide the empowerment we want to see in our YP and thus build resilience. However, it means we need to relinquish control and that's the paradigm shift that's being presented here- are you ready to make that change?



Thank You for Listening....

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