TRAUMA INFORMED
COMMUNITY BUILDING

A Model for Strengthening Community in
Trauma Affected Neighborhoods

Weinstein, Wolin, Rose

BRIDGE HOUSING CORPORATION

BRIDGE Housing Corporation is a leader in the field of affordable housing with over 30 years of real estate development, property management and asset/portfolio management experience. BRIDGE's mission is to strengthen communities by developing, owning, and managing high quality, affordable homes for working families and seniors. Since inception, BRIDGE has believed that an apartment with an affordable rent should be a stepping stone for advancement. Ranked among the most successful in the nation, BRIDGE has developed over 14,000 homes.

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BRIDGE Housing

HEALTH EQUITY INSTITUTE

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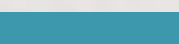
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I. INTRODUCTION

Across the country efforts to revitalize low-income and public housing are underway as part of large-scale community development initiatives that seek to alleviate poverty and improve neighborhoods. Community development is a continuous process of identifying community needs and developing the assets to meet those needs (Green and Haines, 2007). It is well recognized that community development of public housing sites requires extensive community building, which is the active participation of residents in the process of strengthening community networks, programs and institutions (Naparstek, Dooley & Smith, 1997). Federal housing programs such as HOPE VI and CHOICE Neighborhoods mandate community leadership as integral to revitalization efforts and have institutionalized this approach by requiring resident involvement in determining community needs and the development of local solutions. This widely supported community building approach seeks to acknowledge and tap into community assets and to prioritize community member voices and engagement. However, there is a growing understanding that trauma experienced by many low-income and public housing communities present a challenging context for these community building efforts.

Trauma is a set of normal human responses to stressful and threatening experiences (National Center for PTSD, 2007). Low-income and public housing residents may experience cumulative trauma resulting from daily stressors of violence and concentrated poverty, as well as historic and structural conditions of racism and disenfranchisement (Collins, et al., 2010). Public housing residents are over twice as likely as the general American population to suffer from gun violence (National Department of Housing and Urban Development [HUD], 2000). In addition, historical trauma due to a legacy of racism, residential segregation and oppression takes its toll on residents' emotional and physical well-being (Wilson, 1987). For many adults, children and families these conditions cause chronic stress and overwhelm residents' abilities to cope (Marmot, 2004; Substance Abuse and Mental Health Services Administration [SAMHSA], 2013).

Pervasive current and historical trauma demands a community building approach that takes into account residents' emotional needs and avoids re-traumatization triggers, which "traditional" models of community building may ignore or exacerbate. Just as a "trauma informed approach" is now accepted as essential for effective service delivery to many individuals living in these communities (SAMHSA, 2012), a trauma informed approach to community building is required to create sustainable improvements to their social and physical environment.

We present a model of Trauma Informed Community Building (TICB) that addresses the challenges trauma poses to traditional community building strategies. TICB strategies de-escalate chaos and stress, build social cohesion and foster community resiliency over time. The TICB model is based on BRIDGE Housing Corporation's experience doing community building work over the past five years in the Potrero Terrace and Annex public housing

MORE THAN
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site in San Francisco. The work in Potrero is part of San Francisco's HOPE SF initiative, a public-private partnership led by the San Francisco Mayor's Office to rebuild some of the most distressed public housing in San Francisco. The TICB model effectively takes into account the real-life experiences of low-income and public housing residents. Its application ensures that community building promotes community healing as part of housing transformation efforts.

TRAUMA INFORMED
COMMUNITY BUILDING

Housing Development

Programs & Services

Community Building
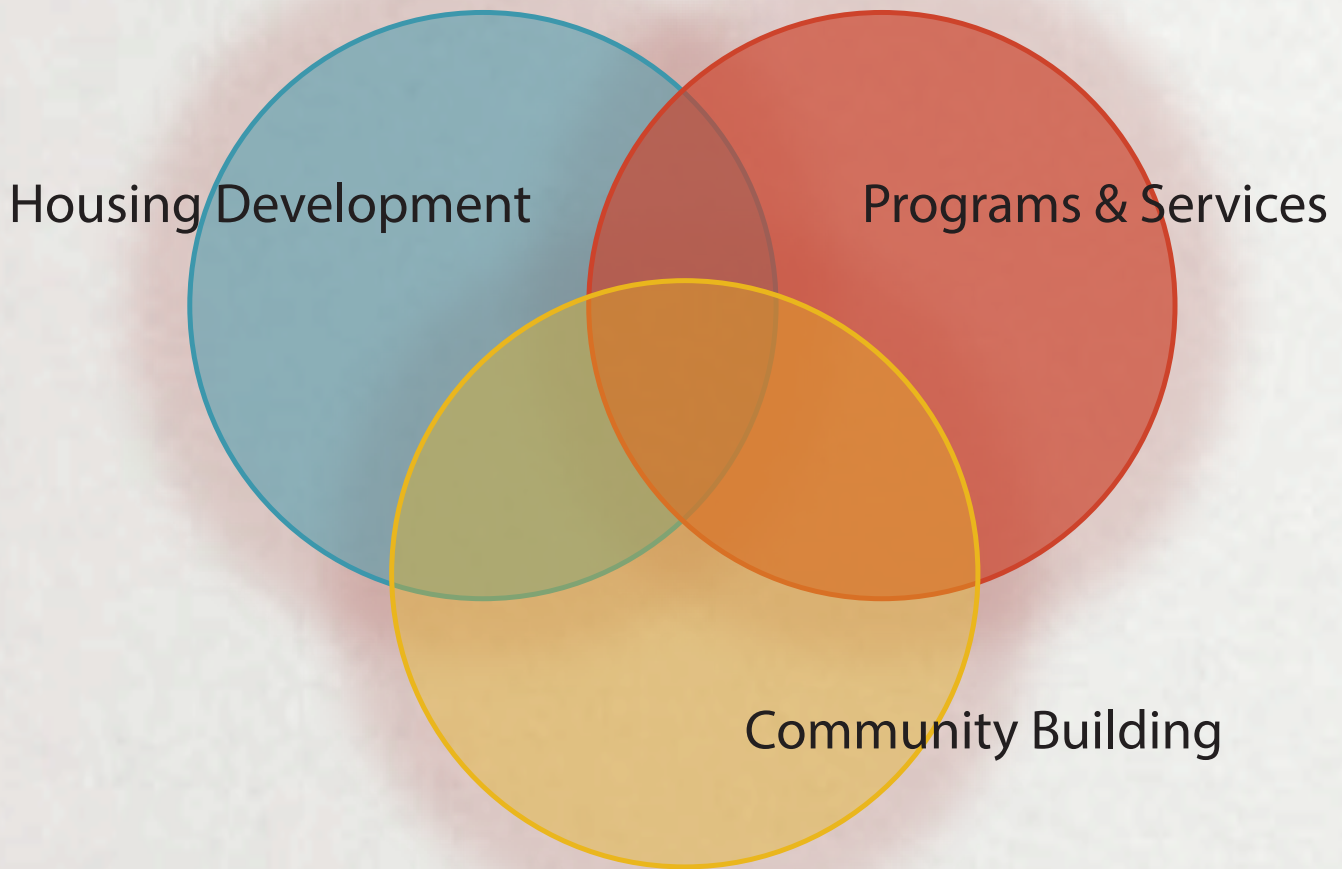
TRAUMA

- Violence
- Crime
- Poverty
- Isolation
- Poor Education

II. COMMUNITY BUILDING

In 1997, the U.S. Department of Housing and Urban Development (HUD) released Community Building in Public Housing: Ties That Bind People and Their Communities (Naparstek, Dooley & Smith, 1997) as a foundational document to promote community building as a central element in the transformation of public housing in the United States. HUD recognized that community building has been a successful approach to engaging residents and local organizations to improve community functioning and ultimately help residents to solve problems and achieve sustainable independence (Naparstek, Dooley & Smith, 1997). Unlike traditional programs and services, which direct interventions to the individual, community building is an engagement process for building social capital and the community's investment in its own future (Chaskin, 1999; McKneely, 1999).

The 1997 HUD report offered strategies to put residents at the center of revitalization efforts and encouraged developers, property managers, program staff and others to actively engage residents in the process of strengthening community institutions and programs. While there is no singular definition of community building, most emphasize resident-driven, asset-based approaches tailored to neighborhood scale and conditions (Kingsley, McNeely & Gibson, 1999). It is now widely accepted that community building efforts in low-income and public housing neighborhoods seek to counteract the deterioration of social structures and weakened formal and informal institutions that support the life of a community (Wilson, 1987). "Traditional" community building efforts share strategies to effect change, including: building social networks; engaging residents in planning and vision setting; and leveraging community capacity to solve collective problems.

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III. TRAUMA AS CHALLENGE TO COMMUNITY BUILDING

CHALLENGES TO TRADITIONAL COMMUNITY BUILDING STRATEGIES

TRADITIONAL COMMUNITY BUILDING STRATEGIES	TRADITIONAL COMMUNITY BUILDING EXAMPLES	TRAUMA CHALLENGES TO COMMUNITY BUILDING
Build Social Networks. A thriving community has a strong social fabric, woven together by the connections between people. Building social networks is an essential piece of strengthening a community.	**Build Social Networks:** Bring people together for a community BBQ, party or potluck.	**Lack of trust and social cohesion**: Residents don't want to hang out with each other so they either don't show up or show up for the food and leave.
Engage residents in planning and vision setting. Community building efforts often turn to community members to envision solutions to community problems and determine community issues and priorities.	**Engage residents in planning and vision setting:** Conduct visioning exercises, focus groups, design charettes, asset mapping and needs assessments.	**Lack of stability, reliability and consistency:** Residents are tired of empty promises that don't result in tangible changes or that exist for only a short time so they don't participate in community building activities. **Inability to vision the future.** Residents are often overwhelmed by the realities of their current life and can't imagine how things will be different or trust that it will happen so they don't attend the planning activities or actively protest the project.
Leverage community capacity to solve collective problems Existing community groups may be enlisted to address community issues or new groups may be created to tackle common concerns.	**Leverage community capacity to solve collective problems** Establish resident driven projects and/or community driven "issue" committees.	**Disempowerment and lack of a sense of community ownership.** The community has faced years of disinvestment and a scarcity of resources from outside sources so residents don't believe that there participation will result in community change or long term funding. This also results in internal fighting between community stakeholders over small amounts of money. **High level of personal needs** Residents face daily stresses in their lives that make it hard for them to focus beyond their immediate needs. Therefore participating in community change is not a priority.
Collaborate with systems and organizations to improve social and community outcomes. As part of community building efforts, city agencies, local foundations and other institutions often seek out partnerships with community representatives and organizations to fund and implement programs and services that meet resident needs.	**Collaborate with systems and organizations to improve social and community outcomes.** Partner with community stakeholders to fund the implementation of a program that meets the needs of a specific resident demographic group.	**Depth and breadth of community needs** Due to historical disinvestment in the community, the needs of the community are extensive and the ability of community based organizations to meet those needs is limited by resources and capacity.

Ongoing trauma can have lasting adverse effects that compromise an individual's mental health and overall well-being (Luby, 2013; SAMHSA, 2012). Moreover, trauma manifests at the family and community level by altering social networks and reducing community capacity to collectively identify and address its problems and plan for its future. Trauma can also undermine "readiness" for individual and community change -- the extent to which community is prepared and inclined to take collective action on an issue (Oetting, et al., 1995).The trauma-related challenges laid out in the table are some of the barriers to traditional community building strategies and have been experienced by BRIDGE Housing at the Potrero public housing site.

CHALLENGE 1: LACK OF TRUST AND SOCIAL COHESION

Social cohesion is a critical element of community building that is absent when trauma has deteriorated trusting relationships. The experience of trauma resembles "a loss of confidence in the surrounding tissue of family and community, in the structures of human government and in the larger logics by which mankind lives..." (Erikson,1995). Isolating behavior and an inability to empathize with others are common reactions (Cook, Blaustein, Spinazzola and Van Der Kolk, 2005). Chronic trauma deteriorates coping mechanisms and damages healthy and trusting relationships (Collins, et. al., 2010; Ackerman, Kogos, Youngstrom, Schoff & Izard, 1999) while pervasive violence and physical isolation creates mistrustful relationships among neighbors (Vale, 2002). In communities with high rates of violence, many residents will not open their doors for strangers doing community building outreach, or attend community building events with other residents. Their reasoning is often real or perceived safety concerns, or an apprehension to interact with neighbors because of negative relationships or past drama (Wolin, et al., 2013).

Furthermore, the traumatic history of continual re-development and social resource cuts in distressed communities has created mistrust in government and service providers that could potentially play a central role in community building efforts. Instead, many residents view plans for revitalization or proposed programs and services with skepticism. Residents are more inclined to expect to lose their housing after the renovations, rather than believe that they will be able to move back into a renovated housing unit.

CHALLENGE 2: LACK OF STABILITY, RELIABILITY AND CONSISTENCY

Engaging and sustaining participation of residents in community building activities is difficult if their capacity is overwhelmed by their need to cope with trauma challenges and survive in poverty. A person who experiences trauma may feel the world is unstable and unreliable (Cook, et. al., 2005), so the new roles and activities proposed by community building have the potential to intimidate or overwhelm. Barriers to sustaining resident participation include trauma symptoms such as disturbances of attention, memory, cognition,

THE EXPERIENCE OF **TRAUMA** RESEMBLES "A LOSS OF CONFIDENCE IN THE SURROUNDING TISSUE OF **FAMILY** AND **COMMUNITY...**

impaired problem-solving, and behaviors that can impair rationale decision making ability (Lerner & Kennedy, 2000). As experienced in Potrero motivating residents to show up consistently and actively participate in ongoing activities is problematic, and traditional outreach tactics prove ineffective. Respecting traditional community organizing outreach principles—avoid oversaturating residents with multiple and disparate requests; "one touch, one ask"—would mean that solicitation methods would be too weak to get residents to attend and participate.

CHALLENGE 3: DISEMPOWERMENT AND LACK OF A SENSE OF COMMUNITY OWNERSHIP Lacking a sense of community ownership or a desire to invest in the collective good are immediate barriers to traditional community building strategies of collaborative planning and vision setting. The experience of historical and chronic trauma, caused by concentrated poverty and systemic segregation, can result in disempowerment and decreased social capital and economic resources (Wilson, 1987). Disempowered communities experience limitations on their ability to access capital and resources through existing structures and networks, and lack control over their social and political environment (Wallerstein & Bernstein, 1994). As a result, a trauma affected, disempowered community may experience a loss of the sense of self-sovereignty, and instead develop a spectrum of reactions to outside groups, from obedience to aggression (Wesley-Esquimaux & Smolewski, 2004).
At Potrero, and in many other public housing developments, as is often the case in public housing developments, residents have had negative relationships and experiences with housing management or public agencies; they may harbor resentment or feel remiss to personally invest in their public housing community. The community response to inequitable, traumatizing relationships becomes a barrier to stakeholder collaboration for community building.

CHALLENGE 4: INABILITY TO VISION THE FUTURE
While the involvement of residents in setting goals and strategies is a core principle of "traditional" community building (Naparsteck, et al., 2007), communities affected by trauma have fewer opportunities to invest in planning their future. Many public housing residents have faced persistent barriers to personal and economic growth. If they are also dealing with trauma, they may experience depression and related hopelessness as symptoms (Scher & Resick, 2005). On a practical level, new research shows that the everyday concerns of surviving in poverty create such a mental burden that there is little cognitive capacity available to plan and excel in other aspects of life (Mani, Mullainathan, Shafir & Zhao, 2013). Trauma's effect on cognitive skills make it difficult for a person to weigh future implications of current decisions, or manage changes in life circumstance, rules or expectations (Babcock, 2014; Mani, Mullainathan, Shafir & Zhao, 2013). Individuals and families with overwhelming life experiences may have trouble visioning the future, which inhibits them from taking action towards positive change and a better future (Bloom, 2007). In Potrero, as in many communities, maintaining resident engagement and investment in a long-term change process is an ongoing challenge.

CHALLENGE 5: BREADTH AND DEPTH OF COMMUNITY NEEDS

Community building progress depends on the strength of social support, which can only develop if individuals receive the support that they need to deal with their own trauma. Trauma can affect a person's self-concept, causing low self-esteem, shame, or guilt (Cook, et al., 2005), and inhibits many residents to step up in leadership roles. Many public housing residents deal with the instability and isolation of poverty in their daily lives. Their ability to schedule or be punctual is compromised by the obligation to meet daily needs for themselves and their families. Many adults in impoverished neighborhoods such as Potrero lack professional skills and the opportunities to acquire them, due to low educational attainment, poor overall health, substance abuse history or the variety of other access barriers related to poverty and institutionalized racism. Substance use issues are common in in Potrero and other trauma affected communities, further complicating issues of participation and engagement in activities. In addition, wariness of service settings and outsider professionals, as well as cultural and logistical barriers can deter families from accessing services and supports (de Arellano, Ko, Danielson & Sprague, 2008). Residents affected by trauma require a breadth and depth of resource and time intensive services to facilitate their participation in community building efforts.

The impacts of sustained trauma and persistent stress on a community result in challenges to traditional community building strategies. Fully understanding these challenges and how they impact a community's readiness for sustained neighborhood change is essential for community building efforts.

IV. TRAUMA INFORMED COMMUNITY BUILDING

Trauma Informed Community Building (TICB) recognizes the impact of pervasive trauma on a community and creates a process to address the resulting challenges to traditional community building approaches. Through intentional strategies that de-escalate chaos and stress, build social cohesion and foster community resiliency over time, TICB can increase the community's readiness to engage in traditional community building efforts. The outcomes of effective TICB are the conditions for sustainable individual and community change. They are also the foundation and support for a coordinated program and service delivery system that can address individual and community needs such as mental and physical healthcare, educational attainment, economic self-sufficiency, safety, and healthy child development

TRAUMA INFORMED COMMUNITY BUILDING

TICB

OUTCOMES

• De-escalates chaos and stress

• Fosters resiliency

• Strengthens social connections

• Recognizes trauma

Increased readiness

• Foundation and support for effective delivery of programs and services

• Creates conditions for long-term community and individual change

The model for TICB can be applied to efforts in various types of neighborhoods and communities facing poverty, ongoing violence, isolation and limited resources. A program or intervention is trauma informed when it has an understanding of the ongoing impact of trauma on community members' lives, and when all aspects of its response aim to appropriately address their specific needs and avoid re-traumatization (Harris & Fallot, 2001). Trauma informed intervention models do not aim to treat trauma directly, but welcome community members, acknowledge their special needs, and have the capacity to identify trauma and its relation to other issues in their lives. Programs and services without a trauma informed approach may fail to engage community members, to sustain their participation or to provide them with positive outcomes. They may even create environments or interpersonal dynamics that are unsafe and disempowering, and risk triggering community members' trauma reactions (Harris & Fallot, 2008).

Underlying the TICB model are four principles that reflect the beliefs and practices of its resident-centered approach. The principles are not specific procedures but instead a set of values that influence all of the work.

PRINCIPLE 1: DO NO HARM: Be aware of past and current trauma and promote activities, programs and services that avoid re-traumatizing individuals and the community. TICB recognizes mental health triggers in the community and consciously creates environments that de-escalate stress and provide opportunities for mental health support. It is also important to acknowledge that traumatized communities face ongoing insecurities around the sustainability of programs, services and institutional relationships. Therefore TICB only engages in activities when financial sustainability and organizational structure is guaranteed for multiple years and is not only focused on short-term activities.

PRINCIPLE 2: ACCEPTANCE: Meet residents where they are, accept the realities of the community conditions and set expectations accordingly. TICB recognizes that residents in trauma affected communities cope in a variety of ways and participate in activities for a variety of reasons. All members of the community are welcome to participate and TICB makes every effort to adapt activities to the realities of violence, mental health conditions, substance abuse and other trauma related issues. In accord with understanding community readiness (Oetting, et al., 1995), TICB sets goals that allow residents to grow, but does not push them past their capacity or understanding of an issue. By accepting all community members where they are in their lives, TICB can set realistic expectations and goals for the long-term outcomes and community improvements.

PRINCIPLE 3: COMMUNITY EMPOWERMENT: Recognize the importance of self-determination to encourage community investment and that everyone can play a supportive role. Inclusiveness is core to community development in trauma affected neighborhoods, where generations have been marginalized from development processes and excluded from reaping the benefits. Community empowerment theory explains the importance of equitable participation and accountability among stakeholders to build community

perception of ownership over change (Freire, 1970; Maton, 2008). The process of empowerment begins at any stage of readiness to ensure community members feel control over the change that they are experiencing. Peer support in particular promotes a sense of hope and control, and validates individuals' actions as having meaning and value, which is necessary for visioning for the future and actualization of plans.

PRINCIPLE 4: REFLECTIVE PROCESS: Take a sustained approach over multiple generations to improve outcomes in a trauma impacted community. TICB engages in an ongoing reflective practice that responds to new developments and knowledge, and is constantly adjusting to meet the needs of the community and the overall vision for the neighborhood. It prioritizes working towards distinct community building outcomes, such as increased social cohesion, resilience and collective vision of change. Though its objectives should not be subsumed by larger community development goals, TICB provides a foundation for coordinated community development and the delivery of programs and services. TICB activities carry on throughout all the development phases. Once awareness of trauma is raised, TICB continues to incorporate the voice of residents into the planning of physical development and program and service design so that they address the root causes of trauma.

B. TICB STRATEGIES

The TICB model does not prescribe a set of activities, but rather a set of intentional strategies that address the challenges that trauma poses to traditional community building efforts. TICB recognizes the impacts of sustained stress and trauma in all aspects of neighborhood well-being. It's strategies are framed by the social-ecological model, which portrays the interconnectedness of individuals with the social and environmental dynamics that influence them including interpersonal, community and system factors (McLeroy, Bibeau, Steckler, & Glanz, 1988; Stokols, 1992; Dahlberg & Krug, 2002). TICB proposes a set of intentional strategies at every level of the ecological model to have the greatest impact on community outcomes and to ensure their sustainability.

TRAUMA INFORMED COMMUNITY BUILDING

A Model for Strengthening Community in Trauma Affected Neighborhoods
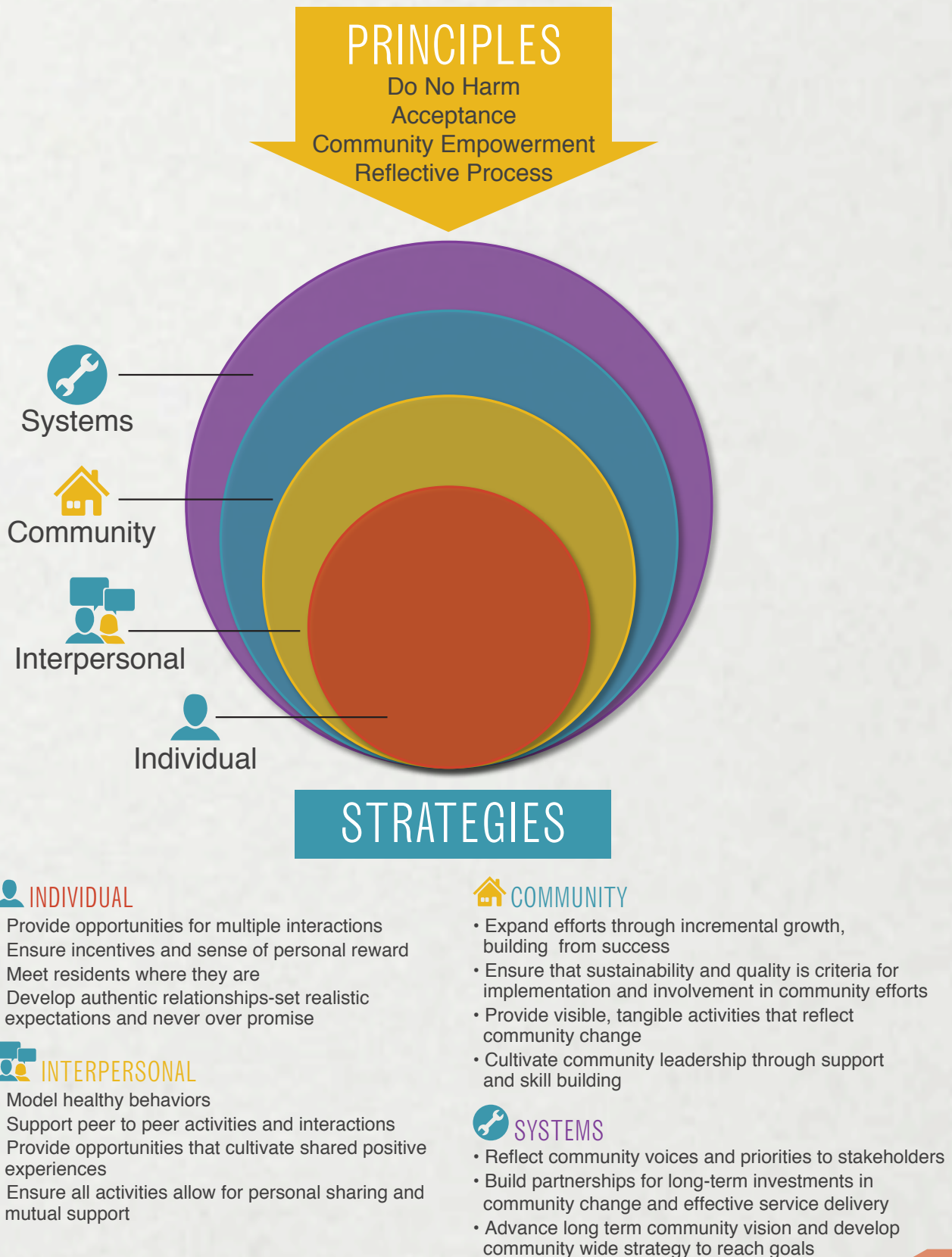
PRINCIPLES

Do No Harm
Acceptance
Community Empowerment
Reflective Process

Systems

Community

Interpersonal
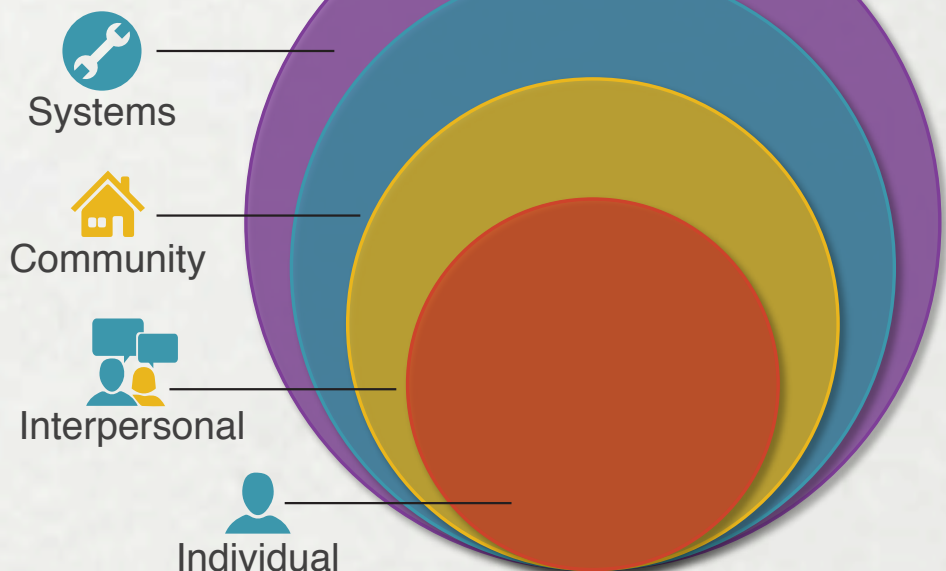
Individual

STRATEGIES

INDIVIDUAL
• Provide opportunities for multiple interactions
• Ensure incentives and sense of personal reward
• Meet residents where they are
• Develop authentic relationships-set realistic expectations and never over promise

INTERPERSONAL
• Model healthy behaviors
• Support peer to peer activities and interactions
• Provide opportunities that cultivate shared positive experiences
• Ensure all activities allow for personal sharing and mutual support

COMMUNITY
• Expand efforts through incremental growth, building from success
• Ensure that sustainability and quality is criteria for implementation and involvement in community efforts
• Provide visible, tangible activities that reflect community change
• Cultivate community leadership through support and skill building

SYSTEMS
• Reflect community voices and priorities to stakeholders
• Build partnerships for long-term investments in community change and effective service delivery
• Advance long term community vision and develop community wide strategy to reach goals

INDIVIDUAL

In a trauma affected community, TICB focuses attention on appropriately engaging individual residents with various needs and capacities. First, stakeholders should express *acceptance of the experiences and circumstances of individuals,* no matter if they may pose a challenge to community building activities. Due to the nature of traumatic experience and symptoms, individuals may engage in seemingly unhealthy or destructive behaviors. However, this does not preclude them from having leadership qualities and being able to contribute to their communities over time. Next, it may take *multiple touches, or interactions* to recruit an individual to participate in an activity, engage with the overall community building process and eventually offer positive contributions to community change. Frequent touches must be intentional and authentic, to build credible relationships. To maintain individuals' long-term participation in the community building process *providing incentives and tangible rewards* for participation is key. Incentives bring community building beyond relationship building, to give residents a sense of accomplishment and self-efficacy, whether internal—like a sense of well-being—or external—like a gift card or other tangible reward. Finally, TICB takes great care that messaging and activities *do not over promise*, so that individuals do not feel disillusioned, or worse re-traumatized, by their commitment to a group and process that was misrepresented.

INTERPERSONAL

TICB activities aim to build interpersonal relationships and create channels of communication to ensure awareness of and participation in the ongoing community building process. Social cohesiveness is a resilience factor that can both protect residents from the impact of trauma, as well as contribute to the prevention of future triggers. TICB activities offer a way for residents and their families to leave their homes and enter a safe and welcoming environment where they can share a *positive experience* with their neighbors. Activities at the interpersonal relational level can be valuable simply by *creating opportunities for personal sharing and mutual support* that become positive shared memories, in addition to any other tangible outcomes. Another objective of trauma informed community building activities is that they *model healthy behaviors*, and develop family and community norms that perpetuate healthy behaviors. The sharing of positive norms and the awareness built by modeling them to the community, can support collective influence and engagement in the community building process. TICB *supports peer-to-peer strategies* as a model to increase social support and social cohesion. Peer-to-peer strategies involve community residents working to address community issues by serving as a source of information, bridge to services, advocate for community needs, facilitator of community action and organizer of community building activities.

🏠 COMMUNITY

Promoting collective action at the community level, in the face of barriers caused by trauma, requires an investment of time and effort that build trust in a collective process. In many trauma affected communities there is a collective memory of public programs and services that were ineffective or ended without delivering on promised benefits. At all stages, TICB aims to *provide visible, tangible activities that reflect community change.* Opportunities are provided for residents to play a role in decision-making, set the agenda, and reap the benefits of their collective actions. All stakeholders receive *regular and dependable communications* about past and upcoming community building activities and events, so that an inclusiveness sense of awareness is built around the process. Activities are designed to *cultivate community leadership through support and skill building*, to encourage a sense of ownership and to *ensure that sustainability is a criterion for implementation and involvement in community efforts*. TICB strategies plan for incremental growth so that the scope and trajectory of activities can *build on previous successes.*

🔧 SYSTEMS

TICB supports residents in identifying their needs, and *reflects community voices and priorities to stakeholders*. TICB builds the capacity of the community to incubate and advocate for the way that it wants community development to progress, and to inform the way that services should be designed appropriately for their community. It also *builds the capacity of service providers to build partnerships for long-term investments in community change and effective service delivery,* within a trauma informed service system. By encouraging *community feedback*, alongside frequent and transparent communication of the purpose and intention of all activities to all stakeholders, inclusive systems are developed that *advance long-term community vision and develop a community wide strategy to reach goals.*

CONCLUSION

Using a Trauma Informed Community Building (TICB) approach requires only small shifts in perspective, expectations and activities to achieve the positive outcomes of community strengthening work. Together these adjustments that take into account the reality of community members' lives and emotional experiences make a powerful and necessary change in approach. It is the sum of the TICB strategies that make the long-term difference. Furthermore, using a trauma informed approach to community building paves the way for the effective delivery of individual, family and community services, as well as providing the foundation for a healthy, sustainable and thriving neighborhood. The system focused strategies of TICB – reflecting the voices of community members to system stakeholders and providing feedback to service providers – are a critical piece of ensuring that the revitalization of low-income and public housing and other trauma affected communities truly meets the needs of residents. Supporting the development and implementation of trauma informed services is an essential role for community building work and critical to the overall success of housing transformation efforts.

For housing developers TICB has significant implications for how comprehensive redevelopment efforts should be implemented in low-income, marginalized and sometimes violent communities. There is recognition that community "readiness" (Oetting, et al., 1995) is essential for the uptake and effectiveness of programs and services and in order to meet long-term neighborhood goals. Increasing the stages of readiness in public housing and trauma affected communities requires developers to prioritize community building as a first and essential step in their redevelopment efforts. However, TICB is not simply a step to be taken and then completed. TICB must continue over time to support residents' needs and sustain systemic community change. TICB emphasizes the need for community stakeholders to be present "for the long haul" and avoid the harm caused by an inconsistent or short-term presence.

An ongoing challenge to all community building activities, and in particular TICB, is securing financial support for activities that are largely outside the scope of "reimbursable" services or predevelopment housing costs. TICB calls for flexible funding that is long-term. These resources would be well spent as they are critical to ensure the effectiveness of all investments in programs and services and to meet the long-term vision of a thriving and revitalized community. It falls upon developers and the policy stakeholders in the transformation of public housing and other distressed communities to create funding streams to support TICB.

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