



Transcript:

Trauma Informed Care in African American Communities (M.7)

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MARK SANDERS: Good morning, everyone, and would you join me in giving Great Lakes ATTC a round of applause for sponsoring all of the educational events that they sponsor, both live and virtually? We'll take a moment for you to clap virtually. And I like to begin these sessions with stories of recovery. So let us begin.

May 29, 1986, my father died smoking crack cocaine. So if he were alive today, he would be 80 years old. A decade later in 1996, my youngest brother called me and said, "I have a drug problem." I said, "I know." He said, "I need help." I said, "I know." So I put my brother in detox for three days. He called me on the third day and said, "I'm bored. Now what do I do?"

I thought about that philosopher who said you can trace all of our difficulties as human beings to our inability to sit still in a room. He said, "I'm bored now. What do I do?" I told my brother to go to a meeting of Narcotics Anonymous. And after his first meeting, he called me in tears. My brother was crying. I said, "why are you crying?" He said, "Because after the speaker spoke at the meeting, I looked at the speaker and said, you spoke the truth. I was there. I remember you."

The speaker was a man who used to use drugs and sell drugs with my father when my brother was a little boy. "You spoke the truth. I was there. I remember you." The speaker said to my brother, "You don't know this, but as soon as your dad died smoking crack cocaine, I got sober." There is a famous expression that some people die so other people can live.

He said, "and you certainly don't know this. When I was out there selling drugs with your father, he saved my life twice. So I often ask God, why did you save me?" He looked at my brother and said, "Maybe one of the reasons that God saved me is so that I could help you." And they both went on to put together long term recovery. But what the speaker was talking about was purpose. And what I've learned is that when you help someone get into recovery, they start to live their life purpose.

The second story is about actress Mary Tyler Moore. In the 1970s, there was a sitcom that she starred in called the Mary Tyler Moore Show. Story had it that her son died and she started drinking alcohol and she wound up in a



treatment center for alcoholism. And the first group that Mary Tyler Moore attended, the group members were talking about God. And Mary Tyler Moore said, "you need to stop talking about God." She was angry with God. Her son had died. "If you keep talking about God, I'm going to leave this facility." And her peers kept talking about God.

So Mary Tyler Moore stood up, left the group room, and went to the nurse's station, picked up a phone to call an airline so she can get a flight out of town. And as she was giving her information to the airline employee, the employee said, "wait a minute, did you say your name is Mary Tyler Moore?" "I did." "The actress Mary Tyler Moore?" "That's me." She says, "I want to thank you so very much, because after my husband heard that you went into alcohol rehab he went into treatment. I want to thank you, because you might have saved my husband and my family's life."

Mary Tyler Moore hung up the phone, went back into the group room and said to her peers, I think I just spoke to God. And she maintained her recovery and she spent the rest of her life helping individuals with their recovery. She too was on purpose. Again, I'll repeat it, that when you help someone with their recovery, they get on purpose and they start doing good things in the world. And then the people they help start doing good things in the world. They're on purpose to. And then those that they help start doing good things in the world. In other words, your great important work never ends.

Today our presentation is entitled "Trauma-Informed Care with African Americans with Substance Use Disorders." And we begin with a definition of psychological trauma. It reads, "Damage to the mind that occurs as a result of a distressing event. Traumas often a result of an overwhelming amount of stress that exceeds one's ability to cope with the experience. Trauma may result from a single distressing experience or reoccurring events for days, weeks, months, even years."

So let's talk about traumatic stress and African Americans. And we begin with a definition of historical trauma by Brave Heart. "Accumulative emotional and psychological wounding over the lifespan and across generations emanating from massive group trauma." And African Americans have experienced historical trauma beginning with the middle passages, when they were forced to travel to the Americas from Africa on ships from West Africa through the Caribbean and the Americas. Millions died on those ships. You've seen the pictures. They were packed in the way we pack sardines in cans. Millions they say died on those ships. And when they died, they were dumped into the Atlantic Ocean.

I remember my journey to West Africa, and we would stand in front of the Atlantic Ocean. We would ask the elders and chiefs, how come the water is so turbulent and there is no wind? Think about it. In the United States when



there's a wave, usually there's some wind. There was no wind and the water was turbulent.

And the chiefs, the elders, said to us, that's our ancestors reminding us that bad things happened on these waters. African Americans have a history of slavery from 1619 to 1863. Texas got the memo in 1865 and so 1619 to 1665, sorry, 1665. Slavery was legally ended in all 50 states. But that was traumatic. 250 years of chattel slavery.

And then there were Jim Crow laws where the Ku Klux Klan and the police were used to help ensure that everything stayed separate and unequal. There were lynchings. The great Billie Holiday wrote a song called "Strange Fruit." If you were to go to YouTube, you can listen to her song called "Strange Fruit." And it's the story of one driving through the South during the Jim Crow era and seeing African Americans hanging from trees. They had been lynched. She called that strange fruit. A history of riots, which are traumatic.

The impact of historical trauma on African Americans. Loss of culture. And culture is what people fall back on during difficult times. I want to take a moment to talk about aspects of culture. We have religion. So most African Americans when you ask them what was their religion in Africa, they have no clue.

In fact, when we took the tour of Ghana, we visited the slave dungeons. And they made sure that we called them dungeons not castles, because to call them castles would glorify the experience. And those who were enslaved were in the bottom of a dungeons. And what we were taught was they had these Africans that would let the Europeans know what the Africans were talking about. So they were separated from those who spoke the same language. Language is a part of culture. So that they could not plot their escape in the new world.

Culture also involves the socialization of children and stories. In Africa, they have a term is called the griot. And the griots are the historical storytellers. Matter of fact, griots can tell the story of hundreds of years of African culture in storytelling fashion. But when they were separated from members of their own tribe during slavery, the role of the griot dramatically diminished.

Why is that important? There's an African proverb that says that once the griot dies, once the storyteller dies, once the griot dies, it's as if an entire library burned to the ground. Art is the part of culture, as is history and music. Note that in history when one culture takes over another, they always destroy the art, the libraries where the history is stored, and the music, because all of these are part of culture.

Beliefs are part of culture. Celebrations a part of culture. As I mentioned earlier, culture is what you fall back on during duress. So during that period of



historical trauma, slavery, the African Americans were robbed of their culture. Why is that significant? Because the research suggests that recent immigrants when they come to America, they start to lose some of their culture. And drinking and drug use dramatically increases during that period.

Survivor guilt. If I were to take you to my old neighborhood in Chicago on the south side, the neighbors called Englewood, but they call it now Chiraq, claiming that more murders happened in Englewood than in the Middle East during wartime. Every third house in my neighborhood is laying on the ground. You'd have thought that someone dropped a bomb on my neighborhood.

What I can tell you is this. The young men such as myself and my friends who left the neighborhood before 1986, we're all doing well. But those friends who stayed in the neighborhood after 1986, the year that crack cocaine showed up on the south side of the city of Chicago, they're not doing so well. And what I can tell you is those of us who moved and survived the trauma, there are times when we feel guilt because we survived.

Depression is one of the features of historical trauma. Traumatic stress symptoms, numbing and low self-esteem. I have a friend who's Native American and she lives in the upper peninsula of Michigan. And she asked me, she said, Mark, do you ever notice that when we talk, I rarely hold eye contact with you? I said, I noticed. She said, because historical trauma impacts our self-esteem and it becomes hard to hold eye contact.

Historical unresolved grief. Almost every African American who I talk to that takes the journey home to Africa, they come back and report that the first thing they did when they arrived to the shores of Africa is they either kiss the ground or they cry or both. They are grieving the life that they never knew. Whenever you have grief, unresolved grief, you have heavy substance use. And when you have heavy substance use, you have high rates of suicide.

The country that has the highest suicide rate in the world is Lithuania. And Lithuania sits between Russia and Poland. I learned on my journey to Lithuania that Hitler took over Lithuania in the 1930s and Stalin took over Lithuania. So when you have these hostile takeovers, you have lots of trauma combined with grief, heavy substance use, and suicide.

Traumatizing others at the micro and macro levels. I would like to quote a revolutionary named Frantz Fanon who wrote a book in the '60s called *The Wretched of the Earth*. And here's the quote. "When people are oppressed, they fight their oppressor back. The oppressor retreats and they start to fight themselves." Gandhi led that nonviolent social protest during a time when the word on the street was that the sun never sets on the British island. And after he led that social protest and the British retreated, the Muslims and the Hindus started killing each other.



At live seminars, I often ask people have they ever heard of Liberia. Maybe one or two hands go up. And then I ask does anyone know the capital of Liberia? Located in West Africa is Liberia near Ghana in Nigeria. The capital city of Liberia is Monrovia. Here's the story.

When James Monroe was President of the United States, he allowed a group of Africans to go back to Africa, and they went to Liberia, and they took over the country. It's said that traumatized people traumatize others. So after they took over the country, those who have been enslaved in America, the country's been fighting a 200 year civil war.

I had a conversation with the former founder of the Latin King street gang on the northwest side of Chicago. And he shared his story. He said, my family came in the 1950s from Puerto Rico to Chicago looking for better opportunity. And we were attacked by white gangs that were already in Chicago.

And then we went to school. Our teachers talked to us like we were stupid because we spoke with accents. But we were too young to understand that we spoke with accents but we didn't think with accents. There was no relationship between how we spoke and how we thought. Here we were able to communicate with individuals from 22 Latino nations.

We spoke two languages. Our teachers spoke one. But we were so young that they said we were dumb and we were attacked. So we formed a gang called the Latin Kings so that we could fight back. The white gangs retreated. For the next 40 years, Latino Hispanic gang members have been killing other Latino Hispanic gang members. That was never the goal.

You could also say that when African Americans made the journey from the southern states during the great migration to the north, Chicago, New York, Detroit, et cetera, even west, LA, that they formed street gangs in response to being attacked by gangs that were already in Chicago. Those gangs retreated, mostly Irish gangs, Italian gangs. They retreated. For the next 40 years, African Americans have been shooting other African Americans, gang affiliated or not.

So let's talk about traumatic stress disorders. The first we will talk about is post-traumatic stress disorder. The person has been exposed to a traumatic event. They're having recurrent intensive distressing recollections of the event. Efforts to avoid conversations, activities, and places that bring up memories of the event. Many people when they come back from prison, they like to isolate. Or when they come back from war, they like to isolate. Difficulty falling or staying asleep. Nightmares and flashbacks.

The reason they call post-traumatic stress disorder post-traumatic stress is because many people do not experience the symptoms until they return from war, return from prison. Approximately 7% of individuals exposed to traumatic



events develop post-traumatic stress disorders. African Americans can be included in that list.

And then there is post-traumatic stress disorder and the difference between post-traumatic stress disorder and complex trauma. In order to be exposed to post-traumatic stress disorder, you need to have something specific that happened, that occurred, you either witness or you experienced, and now you're having flashbacks, nightmares, bad dreams, et cetera, like a bad car accident. Or maybe you were robbed or assaulted or something like that.

With complex trauma, exposure to a specific event is not needed. The only requirement is that you have years where you live with multiple traumatic experiences like neglect, abandonment, multiple placements. As you know, wards of the state often move from group home to group home. Multiple placements, parental substance abuse, adult emotional unavailability, multiple losses, exposure to domestic violence and abuse. And you are vulnerable to complex trauma.

At live seminars, I often ask participants do they think more of their clients have post-traumatic stress disorder or complex trauma? Nearly 100% of respondents will say they are more likely to have complex trauma, but we talk little about complex trauma. If some of the primary symptoms of PTSD is avoidance, hypervigilance, difficulty falling asleep and staying asleep, flashbacks.

The primary symptom of individuals with complex trauma is difficulty regulating emotions. That 65% of individuals with complex trauma have difficulty regulating emotions. And what we mean by that as they go from calm to explosive. You've probably seen individuals go from calm to explosive. Some of you have teenagers at home. You know exactly what we mean. Calm to explosive.

For about five years, I work with groups of African American teenagers and young adults who were diagnosed with complex trauma. And the number one symptom they have was difficulty regulating emotion. And the experience for these young men that lay underneath the challenge of regulating emotions is what we call father hunger father wounds. They either didn't get enough fathering or they were somehow injured by their father and the emotion that they produced was rage.

You might have heard the story about Rock and Roll Hall of Fame guitarist Buddy Guy. He has a blues club on the south side of Chicago called Legends. Story had it when Buddy Guy was a young guitarist, he got a woman pregnant on the road and felt that she trapped him. So he stayed away for about 20 something years. But then he became curious. Did she have a son or daughter? So he met with her, found out he had a son who also played the guitar.



When I read that story, I thought about a friend who I went to high school with in the 1970s named Joe. Joe had a huge afro. We called them Joe Fro. We were not very creative. And when we were in high school, Joe would sit in the cafeteria and he would pretend that he was playing the piano on the cafeteria table while music was glaring through the speakers in the cafeteria. We would say to Joe, Joe, you have really gifted hands. Look at how your hands move across that table. You should take piano lessons.

Joe called me when he was 40 years old and told me that he met his father for the first time. His father was a jazz pianist that got his mother pregnant on the road. It was in his hands. So Buddy Guy said to the young man, son, I want to teach you to play the guitar like me. He said, I don't want to play like you. You left me. I want to play like my idol, Prince. He met Prince. And Prince told him, in order to play like me, you've got to study my mentor, a man named Jimi Hendrix. Then you have to study his mentor, a man named Buddy Guy.

There are young men who I met who have no contact with their father or they are filled with rage connected to their father. And many of them will try to escape their father. When we were in Ghana, West Africa, the chiefs told us to tell these young men, if you look like your father and every time you look in the mirror you see that man, if you hate that man, you have some work to do.

And so what lots of these young men will do to deal with the rage connected to like father is they'll smoke marijuana every day or use other drugs like heroin to numb the pain. 63% of those with complex trauma have difficulty with impulse control or negative self image or difficulty concentrating. They might be misdiagnosed with ADD. Why is that significant? Because African American children and adolescents are disproportionately diagnosed with ADD. But it may be a misdiagnosis. What they might actually have is complex trauma, aggression conduct disorder, a misdiagnosis. It might be complex trauma, which shows up as difficulty regulating emotion.

12% of those with complex trauma also have post-traumatic stress disorder symptoms. They can't sleep and they're having nightmares and they have difficulty regulating emotions at the same time. And then approximately 10% of those with complex trauma will medicate it with the use of alcohol and other drugs.

There's a type of trauma that happens in communities, large urban areas, some African American communities, I'm calling it 24-7-365 terror. And the way that differs from post-traumatic stress disorder is that with PTSD, you might actually leave a place that's traumatic like war, come home to someplace safer like home, and now you're starting and adding symptoms.

With 24-7-365 terror, you never get relief from something possibly happening that's traumatic. This is present in communities that have lots of gun violence



in neighborhoods, street gang violence, et cetera. By the way, there are some African Americans who will get high every day just to medicate the terror that they experience in community.

Let's talk about addressing trauma with African Americans with substance use disorders. We'll start with historical trauma. We owe a great deal of gratitude to the Native American communities who've done a great deal of work in addressing historical trauma. And according to them it begins with an awakening and collective commitment, mass mobilization, and personal and collective mourning. In other words, the first step to heal historical trauma is to bring the entire community together.

So just imagine a day when the entire African American community comes together and maybe a city or a town or province and they mourn together the historical trauma they experienced. The loss of culture, the loss of language, the loss of connection to a continent, and they cry, they grieve together. The next step according to them is forgiving the unforgivable. Then the most important is returning to the culture that you were robbed of. What Native Americans have been illustrating is that a return to culture dramatically increases recovery rates.

There is a social worker in Liberia named Leymah Gbowee, sorry for messing up your name, from Liberia. And recently she became tired of boys and men in Liberia killing each other. As I mentioned, they were fighting a 200 year civil war. You see, when me and my friends traveled to Ghana, it was supposed to be a nonstop flight from New York to Ghana, but the plane stopped in Liberia. And at the airport in Liberia, we saw 12-year-old boys with automatic weapons bigger than them at the airport. They were still fighting the civil war.

So this social worker got tired of that. So she organized the women in Liberia. That's what social workers do. They organized. And she and the women decided that they would go on a sex strike and a prayer vigil. That they will stop having sex, so they would pray every day, until the men and the boys stopped killing each other. The way you knew which women were on a sex strike and praying every day, they would wear white dresses. These women stopped the 200 year civil war. It stopped because of those strikes.

And because men declare war, the women were organized and they were able to get elected the first female president in the history of Liberia. This woman received the Nobel Peace Prize. Walt Disney's niece traveled to Liberia and says, how come the world doesn't know about how these women came together, sex strike prayer vigil, and stopped the 200 year war? So she wrote a book called or a documentary called Pray the Devil Back to Hell. We're looking at here on the screen the winner of the Nobel Peace Prize.

In LA, Father Gregory Boyle, a Jesuit priest, wrote a book called Tattoos on the Heart. He started some employment programs for gang members in LA



called Homeboy and Homegirl Industries. And his belief is that the greatest deterrent from a bullet is a job. So if you bring gang members together from rival gangs and you have them work side by side, this is no longer your enemy or your rival. This is your coworker. The long and short it is nontraditional approach to dealing with trauma in African American and Latino Hispanic communities, the long and short of it is that this program is the most successful prison release program in all of California.

We're continuing to talk about addressing trauma with African Americans with substance use disorders. According to research, the most effective ways of addressing post-traumatic stress disorder and complex trauma is the use of cognitive behavioral therapies. So a few years ago a young man who grew up in my neighborhood, they called it Englewood when I was his age, now they call it Chiraq. He went back home on a weekend pass from a residential facility.

He was on intensive probation, 20 years old. And the facility had a policy that no one can use drugs get high while they're in the facility. So he came back home from the weekend pass, knew that he smelled like marijuana. He said, oh my god, they'll know I've been smoking marijuana. So he went across the street to Target, the department store, bought a bottle of Febreze and sprayed it all over himself. Then what'd you smell like? He said weed and Febreze. Oh, it's hard to get rid of that smell.

So he walked into the residence of facility and one of the staff said, you smell like weed and Febreze. That's it. You violated the no drug use policy. You can't go outside next weekend. And he was livid. He's one of those young men with complex trauma. So he was so angry. He says, Mark, I'm going. I don't care what they say. I'm going outside next weekend. I said, you're on intensive probation. You know if you go outside they're going to violate you. He said, Mark, I don't care. Next weekend is my birthday. I'll be 21 years old. I have three friends who never lived to see their 21st birthday. I'm going.

So I knew he was having difficulty regulating emotions. He was really angry. So I asked him if I could help him. And I said, the problem is that the staff is worried about you going home to our old neighborhood, our old neighborhood, and they're afraid that you might get killed. So would you be willing to negotiate? And I'll back you. I'll support your negotiation. You go to the staff set up a meeting and ask if you can go downtown for your birthday rather than our old neighborhood. So they agreed.

And so what I've learned in my work is that the best time to like gain insight is not when you're in a crisis, not when you're disregulated, not when you're angry, you're filled with rage. It's after the event occurs. So we went downtown and bought himself some new Nike gym shoes. The following week we met, I was ready for him. I asked him a series of questions. Then I shared some information with him.



So when he returned the first question I asked him is, how long do African American males live? My friends across this country have asked African American males that question. And the most typical answer I get from young African American males is 21. They tell me that most black men live to be 21 years old. Let me tell you what they're telling me. Those who are 19 years old are telling me they have two more years to live. Those who are 18 years old are saying they have three more years to live. So if you think you'll be dead soon, why would you take anything serious?

So what I've done with that is just ask a number of questions and share information. So annually in Chicago there are 500 murders and 40,000 annual births in the city of Chicago. In other words, I shared with this young man for every African American that's murdered, eight are born, and there are 2.7 million residents in Chicago and 500 murders annually. Then I showed him Cook County statistics. These are the suburbs outside of Chicago. Nine million residents, about 50 murders annually in those suburbs. Combined with the 500 in the city, that's 550 out of nine million residents.

I showed him that in my old neighborhood, his neighborhood, Englewood, there are 112 murders over a 20 year period. 112. There are 73,000 residents in that neighborhood. Then I shared them the life expectancy of African American men in Chicago is age 70. Latino Hispanic males 73. He snatched that paper from my hand. He said, you're saying I can live? I said, it looks like it. He said, man, I gotta smoke some weed and think about this.

Let's talk about trauma-informed care. A trauma-informed system of care recognizes that therapeutic response to the impact of traumatic stress on those who have contact with the system from the initial phone call through termination and follow up. In a trauma-informed system of care, every member of the service team, the janitor, the receptionist, the secretary, counselors, case managers, the boss, every member of the service team has to have an awareness of their role in reducing impact of trauma on those seeking services.

So there are steps to developing a trauma informed system of care. The first step involves creating a trauma-informed change team, including peers, people with lived experience, people in recovery. You want to select leadership for that change team. And then announce the agency's commitment. When you say it out loud and let the rest of the agencies know about that, that suggests even more commitment to a trauma-informed system of care.

The fourth step in developing a trauma-informed system of care is to train staff in evidence based practices. Let us pause. Because as I do trainings all over the country, I only see a small percentage of African Americans at those conferences where we talk about evidence based practices.



Unless we create a mechanism for African Americans to be introduced to evidence based practices and trauma-informed care, then it will be close to impossible to develop a trauma-informed system of care. You want to select the evidence based practices that you want to use with input from direct line staff counselors, case managers, et cetera. Because when the change comes from the top, you will see more resistance.

Also when you implement evidence based practices, you can expect the staff to experience grief. In essence, what will happen is they will miss the old way of doing business. So what is needed is you want to make sure that wherever there is grief, there is a need for a funeral. You want to bring the staff together and talk about what they're missing and then what they stand to gain as you move in the direction towards evidence based trauma-informed care. Cultural competence training is necessary.

And then boundaries are really important. The mother of trauma-informed care, Judith Herman, says that some of our clients who have histories of trauma unconsciously, that's unconsciously, our clients who have histories of trauma, some of them unconsciously, need their therapist, their counselor, their recovery coach to traumatize them too.

In other words, what better way to prove that I'm unlovable is to get traumatized by your counselor? That means that those of you doing this trauma work need to have impeccable boundaries. And that should be a part of training. Then if all else fails, we should be taught to do no harm in our work with African American clients with substance use disorders as it pertains to trauma.

So how to avoid re-traumatizing African Americans with substance use disorders while in treatment. How we can harm. Our biases, our threats, and our stereotypes. That's why we want to make sure that everyone doing this work is trained in cultural competence, cross-cultural counseling. Microaggressions. By definition, a microaggression is an intentional or unintentional slight or harm that can create a bridge, sorry, a barrier, a wall rather than a bridge in a therapeutic relationship.

Countertransference reactions. Sigmund Freud said that countertransference are the negative reactions that helping professionals have towards the clients they serve. A number of years ago, I was supervising a young social worker. And she had a session with an African American male client who said that he was a Muslim.

She walked into a staff meeting and says, I don't like Muslim men. Well, my client just told me that when he goes to prayer on Friday, the men sit in front of the women in prayer and that's sexist. I don't like Muslim men. And there were two Muslim males on the staff, and they looked at me like, you're going to write her up, right?



What I learned, my friends, if every time someone says the wrong thing, make a microaggression, if we write them up, people will stop talking to each other. I said, no, we'll do some research. She and I turned on the computer. And what we read was that 1,400 years ago when the religion of Islam began, they were in wars and they would practice their religion in caves. And we learned that the reason the men stand in front of the women in caves is so that if there was an attack, they'd be like a human shield.

I remember a number years ago I was working with a young social work student. She came into the supervision and asked, Mark, why do African American mothers discipline their sons in malls more than other mothers do? I said, they do? I had no clue. So we went on the computer we found something called mall studies. And what we learned is that there are people who sit in malls not to try to decide if you're stealing or not, just to study your behavior in malls. And what the research showed is that mothers across cultures discipline their sons in malls more than they do their daughters from running and jumping and climbing. That's what many boys do. They run, they jump, they climb.

So I asked my student to look into our question. On the internet, she found a curriculum called effective black parenting. And what she read traumatized us both. And I will share what she read and invite you to take care of yourself as you listen.

During slavery, there were revolts. And once captured, what they would do is take the most rebellious slave, the ones who escaped, the ones that fought back, take them to the town square, have them lay on the ground on their back, and tie a horse to each of their legs. And then they would invite the mothers to watch the spectacle. Not the fathers, because the mothers were the ones they thought that counted in the situation. And what she read to me is that the horses would be told to pull in different directions, splitting the African American's body in half.

And what she read to me is that once mothers saw this happen to an African American male, they would never want this to happen to their son. So they would make sure that their son stayed close to them and never made a whole lot of noise, fearing that they might be lynched or their body might be torn apart. And then my student stretched and said, maybe one of the reasons that the mothers discipline their sons in malls is because they don't want them to experience police brutality.

Not believing in the client. As mythology out there that says that African Americans are less honest than others. But not believing the client as he tells his story, as she tells her story, can harm the client.

Low expectations can harm. Touch. Inappropriate touch, touch without permission, unwelcome touch. A number of years ago, I did a consultation



where there was a young white counselor about 22 years old in a session with an African American male, 18 years old. Notice three years difference in age. William White, the historian, said that in the future, counselors will get whiter and younger and clients will get darker and younger. So there they were working together. And as the session ended, the counselor touched the hair of the African American male and he became extremely angry.

And they invited me to talk about it. And I told them a historical question that during slavery, whites would often touch the head of the Africans that were enslaved, including children. If you can imagine a seven year old boy touching the hair of a 60 year old African American male that was enslaved. Or even during the Reconstruction period after slavery or in the Jim Crow period that for many African Americans, this becomes a cultural boundary violation. Language. The words we use can be traumatizing.

Or how about disproportionate service discharge. One thing I invite every agency to do is look at whether or not there is a fairness in who gets programmatically discharged. Does race kick in there? Is it the same across the board? Are African Americans discharged more than others in your program for violating the same rules? Take a look at that. Then if that's the case, put measures in place to correct it.

Service energy. Turns out that low service energy when African Americans are sitting in the waiting room sends a signal you're not welcome here. Second class service can harm. The pictures on the wall, audio, visual, and written materials tell a story who's welcome, who's not. When African Americans seek services at your agency, do they see images of themselves on the pictures on the wall? What about the audio visual movies and videos that are used? Do they depict some African Americans' experiences and families? And then the same with your written material. Does some of your written material include the experiences of African Americans?

The fifth step in developing a trauma-informed system of care is training the leadership team to make sure that you get buy in, that the agency really is moving in the direction towards trauma informed care. Make sure policies and procedures are trauma-informed, including the vision, the mission, and value statement of the agency. You want to have a good vacation policy. I know the counselors listening to this webinar are clapping about that. You want to make sure that you have a health insurance that has a good benefit for counseling, because as you know, when you become trauma-informed, secondary trauma, secondary PTSD has a higher occurrence.

And then seven. You want to collect data, staff retention. I mentioned earlier that in a previous webinar, a young African American male that I was working with who was speaking to me in one word paragraphs. You've had clients who talk to you in one word paragraphs. Everything I ask him he said yes, no, yes, no. So we explored how come he wasn't talking to me.



And he said, Mark, I had four counselors this year. You're my fifth counselor. Why should I talk to you? You'll be gone soon anyway. So we want to collect data, staff retention. Because think about it. High staff turnover in itself can be traumatic. Not only did my parents abandon me, the client says, I've been abandoned by five counselors.

New client satisfaction surveys. Look at no show rates. We want to look at whether or not there is a difference in no show rates based on ethnicity, gender, et cetera. Recovery rates. Are there differences? It might be helpful to just do a walkthrough, the entire intake experience. NIATx, which is a part of Great Lakes ATTC, has a program where they teach you how to do therapeutic walkthroughs to see what it's like from the initial phone call through intake and then make changes to improve accordingly.

It's important to recruit, hire, and retain trauma-informed staff. If you are working with African Americans around traumatic stress disorders, it's also important to recruit, hire, and retain a diverse staff, including individuals who are indigenous to the communities in which they are serving.

So on my final slide of the webinars, I always invite you to visit the Museum of African American Addictions Recovery. So the link is above. And there you will find additional materials that will help you work with African Americans with substance use disorders more effectively. There are articles and workbooks. We have workbooks on how to work with African American women, African American men. We have leadership interviews with experts. African Americans chime in on how to do better work with African Americans with substance use disorders. There is a lot there.

So when you do trauma work, there really is a need to take care of yourself. I mentioned earlier the importance of really taking vacations. How about lunch every day and a break? How about something every evening when you go home from work that centers yourself? Prayer and meditation or quiet time. But I think vacations are important too.

So a number of years ago I took a vacation to Las Vegas. How many of you have ever gone to Las Vegas? It looks to me that 90% of you have raised your hand. And Vegas is really exciting. Every hotel theme in the world is there. I've stayed at Caesar's Palace. It's so beautiful with the lights on at night. I'm convinced that if Julius Caesar came to Earth, he would want to stay at Caesar's Palace in Las Vegas. Yet no matter where I go, including Vegas, I can't wait to make it home after about the fourth day.

So the last time I was in Vegas, it was the fourth day. I'm at the airport, can't wait to get home. And the announcement came across the speaker that says, your plane has been delayed. I'm angry my plane is delayed. I couldn't wait to get home. Instead of focusing on my anger while I waited for the next plane, I played the slot machines at the airport. I won \$1.7 million. Just kidding. I don't



even gamble. I don't like the odds. I'm like Sam Cooke who said if I ever get my hand on a dollar again, I'm going to hold onto the eagle grin. I don't gamble.

My next stop was to a small town called Galena, Illinois. And Galena, Illinois is like any small town in America. No roulette wheels, no traffic, no noise. Just you and your thoughts, crickets, and stars. I came back home from that small town replenished, ready to take on the world. I agree with Norman Vincent Peale who said that busy people like you who help others for a living, it's mandatory that you spend at least 15 minutes alone each day just to replenish yourself. And you have that much more to offer the world. Dale Carnegie said if he had 10 hours of work to do and five hours to do it, the first thing he'd do is take a 15 minute break just to replenish himself.

Thank you very much for joining me in this webinar. Enjoy the rest of your day. Bye bye.