

# 2024 Midwest Stream Forum

Uniting Communities to  
Cultivate Change for  
Health Equity

#MIDWESTSF24



# Trauma-Informed Motivational Interviewing

Implementing a Trauma-Informed Approach  
when engaging with Migrant Farmworkers

2024 Midwest Stream Forum  
Albuquerque, NM  
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# Facilitators



**Meghan Erkel, MPH**

Pronouns: she/her

Senior Program Manager



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Program Manager

# Health Outreach Partners

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**WE SUPPORT HEALTH OUTREACH PROGRAMS** by providing training, consultation, and timely resources.

**OUR MISSION IS TO BUILD STRONG, EFFECTIVE, AND SUSTAINABLE HEALTH OUTREACH MODELS** by partnering with local community-based organizations across the country in order to improve the quality of life of low-income, vulnerable and underserved populations.

**WE SERVE** Community Health Centers, Primary Care Associations, and Safety-net Health Organization



# Agenda



1. Welcome, Learning Objectives, & Introductions
2. Overview of Trauma among MSAWs
3. Trauma-Informed Motivational Interviewing
4. Secondary Trauma & Self Care
5. Wrap up & Evaluations

# Group Agreements

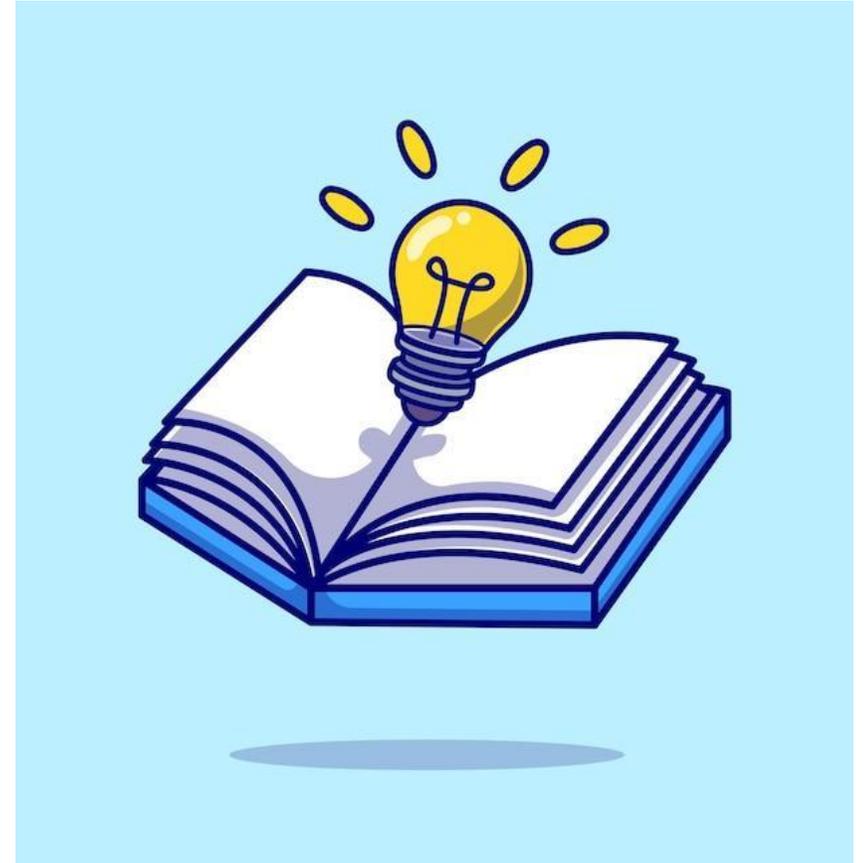
- Please silence your device.
- There are no wrong questions. We're all learning, and it's okay to make mistakes. (We encourage them!)
- Respect and value each other's opinions & experiences.
- We cheer people on.
- It's okay to disagree, kindly & respectfully
- One person speaks at a time.
- **Practice self-care.**  
**If you need to step out for a minute, please do!**



# Learning Objectives

**By the end of this webinar, you will be able to:**

- Discuss how trauma can affect individuals, groups, and communities, especially those among Migrant, Seasonal, and Agricultural workers.
- Understand the importance of implementing a trauma-informed approach to motivational interviewing when working with special populations.
- Name and apply 2 trauma-informed motivational interviewing techniques.





***Who's in the room?***

# Trauma among Migrant, Seasonal, & Agricultural Workers



@LIZ ANDMOLLIE

# Psychological Stressors among MSAW

- Economic hardship
- Work Conditions:
  - Demanding nature of agricultural work
  - Long works hours
  - Exposure to pesticides
- Migratory life-style
- Social Isolation & separation from loved ones
- Immigration status
- Poor housing conditions
- Discrimination & harassment in the community
- Exposure to violence
- Limited access to health care

# Stress vs Trauma

- **Stress:** Our body's response to pressure.
  - **Positive Stress:** Known as "good stress" is the stress response that we feel when we get excited.
  - **Tolerable Stress:** Relates to exposure to "non-normative," challenging threats and causes a lot of adversity, trouble, or difficulty (i.e. death of a family member, natural disaster, serious illness or injury). What makes this tolerable is the person and support from caring relationships that help an individual cope and gain a sense of control.
  - **Toxic Stress:** the body's response to lasting and serious stress, without enough support from a caregiver. Most often occurring in young children and causing serious harm later in life.
- **Trauma** - Trauma is a response to real or perceived harm or danger.

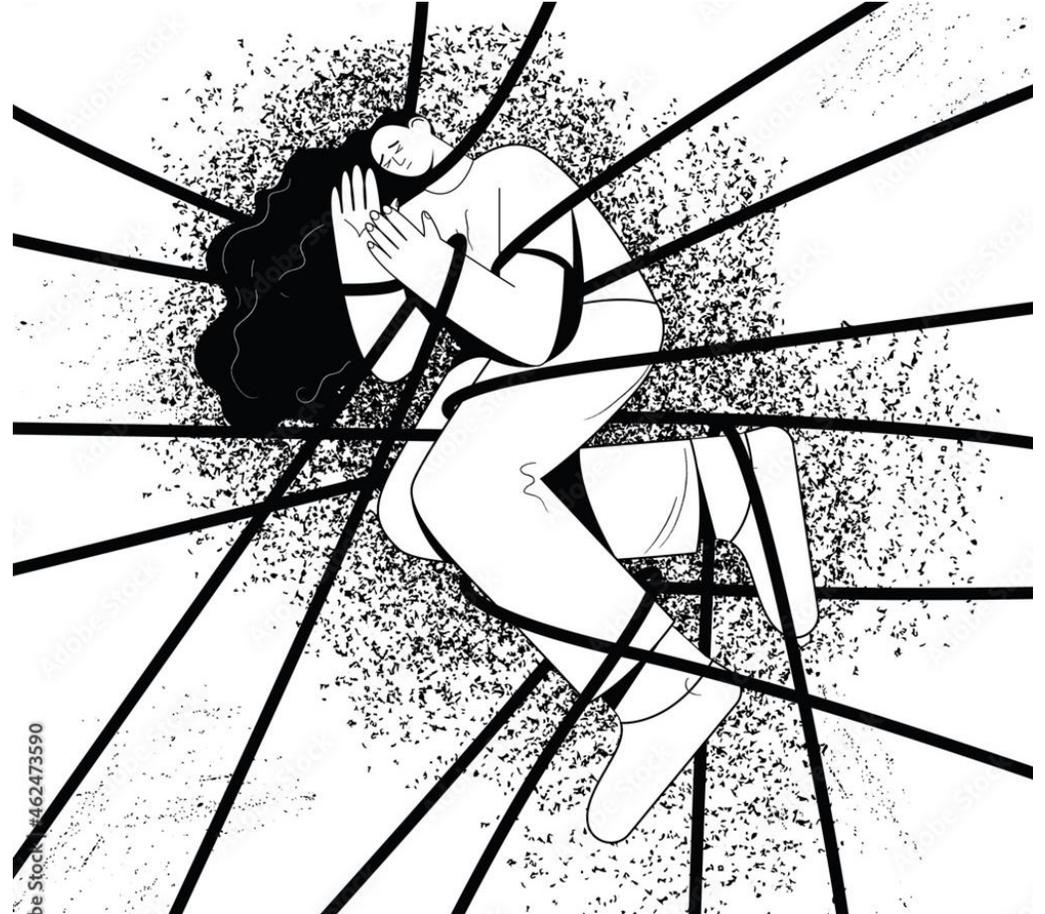
# What is trauma?

- SAMHSA describes individual trauma as an event or circumstance resulting in:
  - Physical harm
  - Emotional harm
  - And/or life-threatening harm
- Trauma can include one-time, multiple, or long-lasting repetitive events



# Trauma affects everyone differently

- All kinds of trauma create stress reactions.
- The impact of trauma can be subtle, subtle or outright destructive
- Common Problems That Can Occur After a Trauma
  - Posttraumatic Stress Disorder (PTSD)
  - Depression
  - Self-blame, guilt, shame
  - Suicidal thoughts
  - Anger or depressive behavior
  - Alcohol or drug abuse



# Children of MSAWs are impacted, as well

- Children of migrant workers who experience trauma are at higher risk for social, cognitive, and physical health problems
- Children of immigrants from Mexico and Central America are often escaping traumatic events such as gang recruitment, abandonment, and abuse.
- The majority of MSAW families experience traumatic events before migrating and during the migration process. Their children are at higher risk of PTSD as a result.



# Adverse Childhood Experiences (ACEs)

- Adverse childhood experiences (ACEs) are potentially traumatic events that occur in childhood (0-17 years).
- ACEs can affect the physical structure of a child's brain, which in turn affects the growing person's ability to regulate his or her behavior and emotions, as well as higher cognitive functions, memory, ability to learn, and overall physical and mental health.
- Approximately **35% of children of rural farmworkers experience at least 1 ACE** (Rosado et al., 2021).

Family-level ACEs	Community-Level ACEs
Emotional abuse	Racism
Physical abuse	Poverty
Sexual abuse	Systemic Oppression
Emotional neglect	Exposure to Community Violence
Physical neglect	Microaggressions
Household domestic violence	Stereotype Threat
Household mental illness	Discrimination (e.g. racism, homophobia, etc.)
Household substance abuse	Overly Punitive School Discipline
Parental separation or divorce	
Having a parent or family member incarcerated	

# What is a Trauma-Informed Approach?

*What's wrong with you?*



HEALTHY PEOPLE. EQUITABLE COMMUNITIES.

*What happened to you?*

# Case Study: 37 Year Old ER Patient

**HPI:** Patient is a 37-year-old Spanish-speaking male found down with LOC

**PMH:** Frequent flyer well known to the ED for EtOH-related trauma, withdrawal associated with seizures

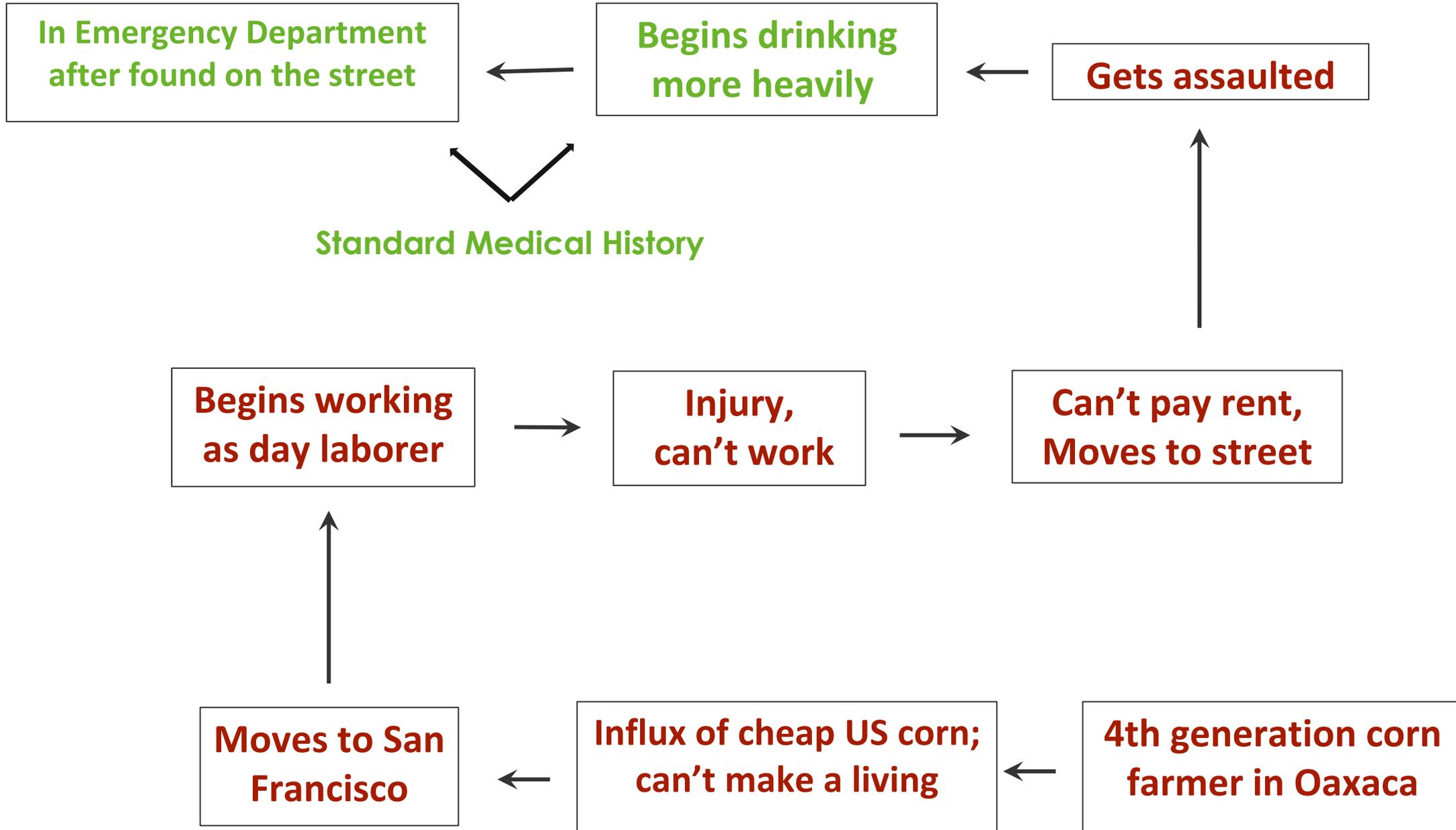
**PSH:** R orbital fracture 2/2 assault w/o operative intervention

**SH:** Heavy EtOH use, other habits unknown. Apparently homeless

**Meds:** currently noncompliant with all meds, D/C'ed after last hospitalization on folate, thiamine, multivitamin, and seizure prophylaxis

**Neuro/Mental Status:** pt. muttering in incoherent Spanish, inconsistently able to answer “yes/no” and follow simple commands





# A trauma-informed approach seeks to:

- Realize the widespread impact of trauma and understand path for recovery
- Recognize the signs and symptoms of trauma in patients, families, and staff
- Integrate knowledge about trauma into policies, procedures, and practices
- Actively avoid re-traumatization

# The 6 Guiding Principles of Trauma Informed Care

# Safety



Staff and the people they serve, whether children or adults, feel physically and psychologically safe.

*Do the people served feel safe? How do you know?*

*What changes could be made to address individual's safety concerns?*

# Trustworthiness & Transparency

Making sure people really understand their options; being authentic; directly addressing limits to confidentiality.

*Do the people served trust staff? How do you know?*

*What changes could be made to address trust concerns?*



# Peer Support



Peer support and mutual self-help are key vehicles for establishing safety and hope, building trust, enhancing collaboration, serving as models of recovery and healing, and maximizing a sense of empowerment.

# Collaboration and Mutuality



Partnering and leveling of power differences between staff and clients; demonstrates that healing happens in relationships, and in the meaningful sharing of power and decision-making.

Everyone has a role to play.

*What does collaboration look like when working with a patient?*

*How is this important when working with patients?*

# Empowerment, Voice, and Choice



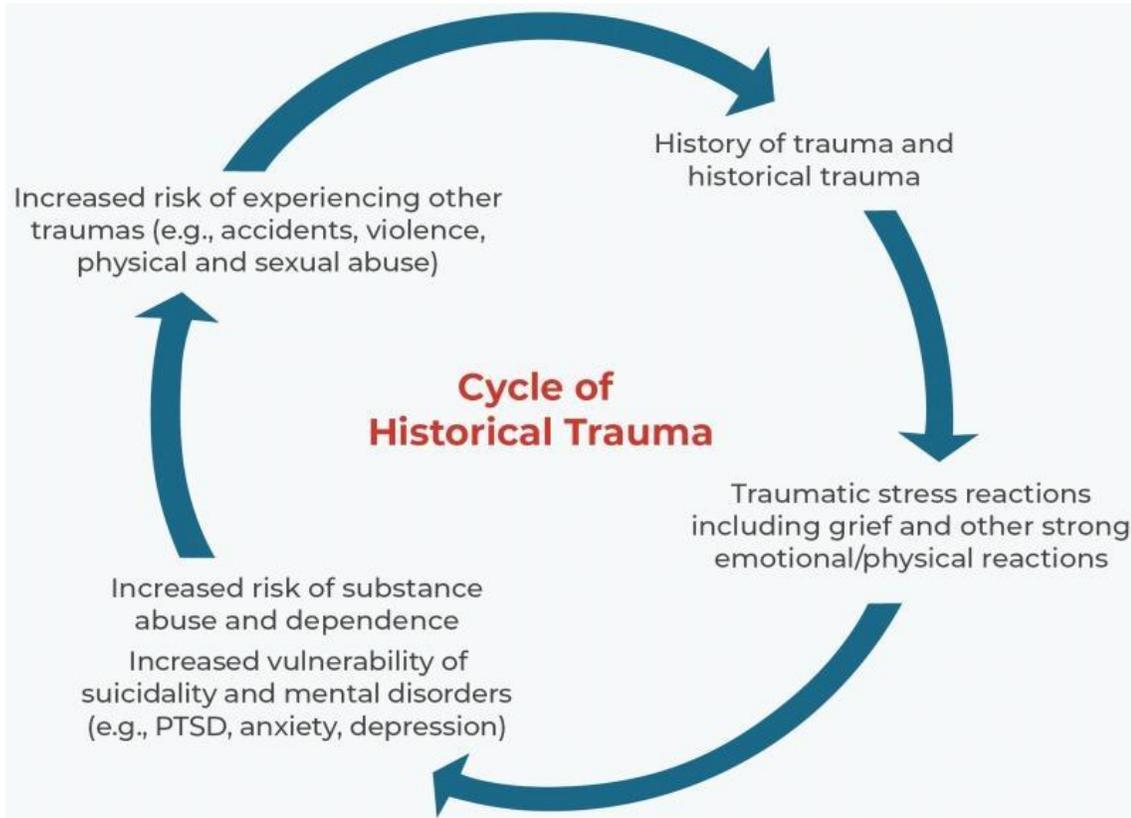
Individuals' strengths and experiences are recognized and built upon; the experience of having a voice and choice is validated and new skills develop.

Fostering a belief in resilience.

*How can you use your clients' strengths?*

*Can you think of language or practice that does the opposite – that take voice, choice and decision-making away? How could these be changed?*

# Cultural, Historical & Gender Issues



Moving past cultural stereotypes and biases, offers gender-responsive services, leverages the healing value of traditional cultural connections, and recognizes and addresses historical trauma.

*How can we use a patient's culture without reinforcing stereotypes and biases?*

*What are some ways to include this when working with a patient? Why is it important?*

Source: Behavioral Health Services for American Indians and Alaska Natives: For Behavioral Health Service Providers, Administrators, and Supervisors [Internet]. Rockville (MD): Substance Abuse and Mental Health Services Administration (US); 2018. (Treatment Improvement Protocol (TIP) Series, No. 61.) [Figure, The Effects of Historical Trauma on American Indians and Alaska Natives Today].

# 6 Guiding Principles of a Trauma-Informed Approach

1. Safety

3. Collaboration & mutuality

1. Trustworthiness & transparency

4. Empowerment & choice

1. Peer Support

5. Cultural, historical & gender issues

# Trauma-informed Motivational Interviewing

# What is Motivational Interviewing (MI)?

- MI is a collaborative conversation to encourage someone's motivation for and commitment to change.
- It puts the patient in the driver's seat. Rather than **telling** someone what to do we ask them questions to help them **realize** what they need to do.
- You're probably incorporating motivational interviewing techniques into your everyday conversations with farmworkers without even realizing!



# Trauma-informed MI

- Trauma-informed MI recognizes that, unless we are aware of how trauma and adverse events affect how a person thinks and acts, as well as how trauma influences health risks, **we may unknowingly re-traumatize clients even when they believe we are being respectful and curious.**



# A Non-Trauma-Informed Conversation May:

- Ask about circumstances the client is not comfortable sharing.
- Overlook SDOHs.
- Use triggering or judgmental language.
- Ignore cultural, historical, and gender issues that have an influence on the client's way of communicating and what they feel comfortable speaking about values and decision-making process, and other.



# Why Is Trauma-Informed MI Important?

- It helps create a safe space for people who have experienced trauma.
- Whether or not we use trauma-informed MI, we are trying to help the patient make progress in their health, but how we ask questions and engage in conversation can make all the difference!
- We set people up for success when we help them make decisions autonomously and organically, while avoiding retraumatization.



# Why Is Trauma-Informed MI Important?



## Standard Conversation:

*“So you mentioned that you didn’t have a good experience at XYZ health center. Tell me about it.”*



## Trauma informed MI:

*“In your previous response, you mentioned that you didn’t have a good experience at the health center. That must have been hard, and I’m sorry. Would you be comfortable telling me more? How was the experience difficult for you? The information will help me respect your needs and avoid repeating the same mistakes.”*

# Fundamentals of Trauma-Informed MI

- **Expressing empathy** by use of reflective listening
- **Developing discrepancy** between client goals and current problem behavior by use of reflective listening and objective feedback
- **Avoiding argumentation** by assuming that the client is responsible for the decision to change
- **Rolling with resistance** rather than confronting or opposing it
- **Supporting self-efficacy** and optimism for change

# Trauma Informed Motivational Interviewing Techniques

# Technique 1: OARS

## What does OARS stand for?

- **O**pen Ended Questions
- **A**ffirmations
- **R**eflective Listening
- **S**ummarize the Visit



# Open-Ended Questions

- Using open questions gives the client the opportunity to tell their story and provide important information.
- This skill demonstrates interest in the client's life and their struggle with behavior change, and it assists in building acceptance and trust.
- It's important to first ask permission and open the door and encourage the client to talk.

***“How comfortable are you about telling me what's been going on with you since we last met?”***

***"If you are comfortable sharing, what have you tried before to make XXX change? This information will help us create a plan together moving forward..."***

# Affirmations

- When you review your patients' goals, take joy in their successes and express empathy during tough spots.
- Must be a true, sincere statement.

*"I appreciate your openness and honesty today."*

*"I appreciate how hard it must have been for you to decide to come here. You took a big step."*

*"You are very courageous to be so revealing about this."*

*"That must have been hard, and I'm sorry."*

*"You're a strong person, a real survivor."*

# Reflective Listening

- Reflective listening is a special type of listening that involves paying respectful attention to the content and feeling expressed in another person's' communication.
- It's hearing and understanding, then letting the other know that they are being heard and understood.
- It is a way of checking rather than assuming you know what they mean. It shows you have interest and respect for what they have to say.

***“So what I’m hearing is XXXX, is that right? please correct me if I misunderstood you”***

***“When you say ABC, do you mean XYZ?”***

# Summarize the visit

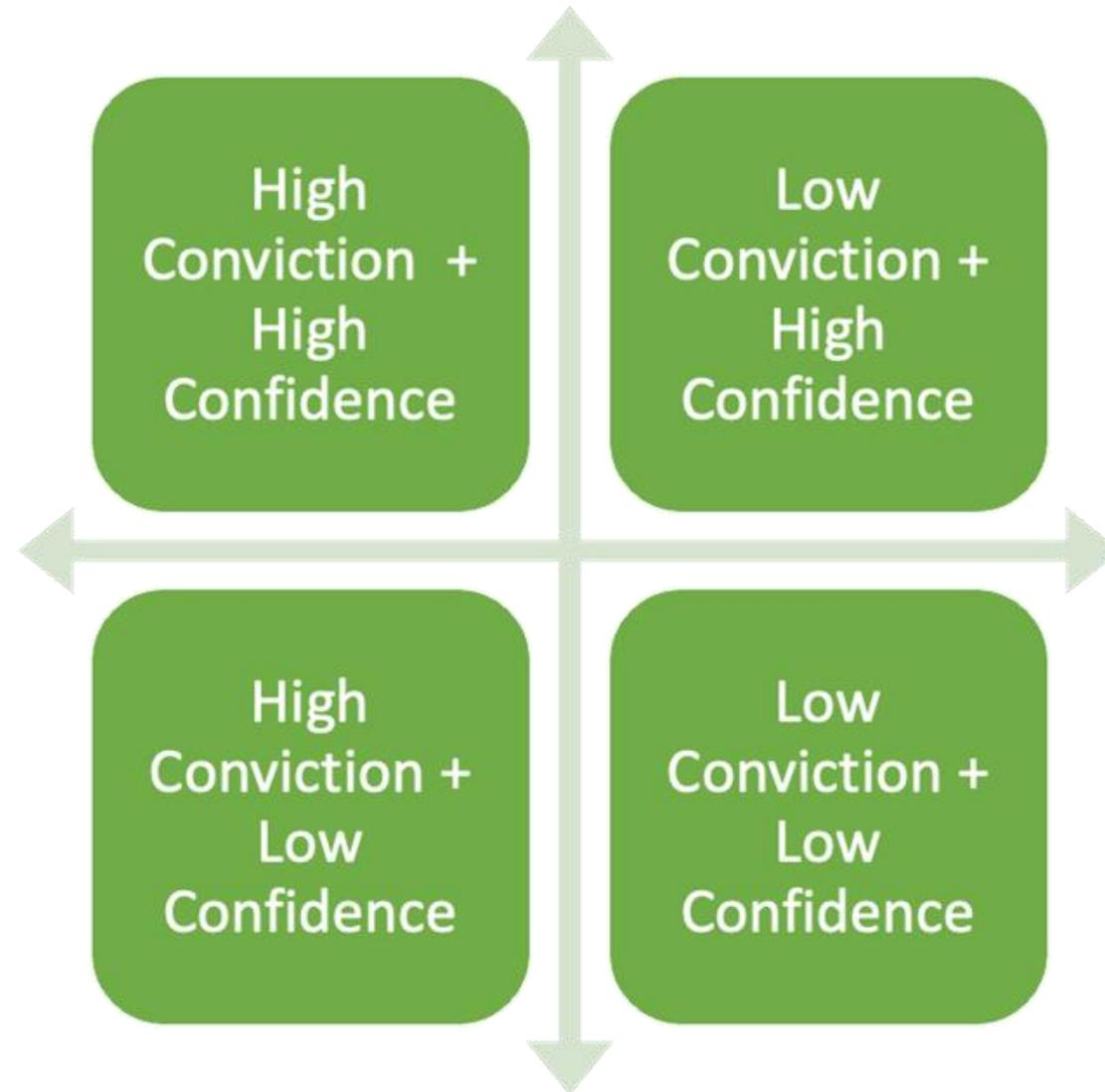
- This involves recapping what the patient has said, calling attention to the important points of the discussion, and allowing the patient to correct any misunderstandings.
- Draw together what happened, and highlight to them the main talking points especially the ones that the person has made.

***“Before I provide you with some referral recommendations, let me summarize what you’ve told me so far, and see if I’ve missed anything important....Is there anything else that you would like to add before we move on?”***

***"What you said is important. I value what you say. Here are the important points."***

# Technique 2: Conviction – Confidence Ruler

# Conviction - Confidence Ruler



# Conviction - Confidence Ruler

## Conviction

- On a scale of 0-10 (0 meaning not at all; 10 meaning you already booked an appointment), how convinced are you that it is important to get the COVID/flu vaccines?

## Confidence

- On a scale of 0-10 (0 meaning not at all; 10 meaning you already booked an appointment), how confident are you that you can successfully receive the COVID/flu vaccine?

# Case Study

# Case Study: 37 Year Old ER Patient

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# Main Takeaways

- Trauma-informed MI is a tool for building an authentic connection with your client, understanding their circumstances and way of thinking, and creating a non-judgmental space for critical thinking & problem-solving.
- There is no single strategy or be-all, end-all approach. You should pair this with other approaches and tools that you see fit.
- Do your best to keep lines of communication open so you can receive feedback on how they are feeling with their progress, and how you can improve.



**THANK YOU! ANY QUESTIONS?**

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**CONTACT**



# Session Evaluation (in mobile app)

**Please complete the evaluation for this session.**

To do so, click on the link above session description on the Whova platform. In the mobile app, select session and expand description to access the evaluation link.

The screenshot shows a session page with the following details:

- Session Title:** Intensive: Building Agricultural Worker Wellness and Resiliency
- Date and Time:** Monday, April 24, 2023, 8:30 AM - 12:00 PM
- Location:** Capital View Terrace South
- Topic:** Overcoming Emerging Issues
- Attendance:** Added to My Agenda (3 attending)
- Interactive Features:** Q&A, Polls, Like (1), Chat
- Overview:** Access to mental health resources can be challenging among Migratory and Seasonal Agricultural Workers (MSAWs) due to... (with a "See more" link)
- Personal Notes:** Take Notes
- Speaker (2):** Monica Garcia, Program Director, MHP Salud
- Actions:** Star, Speakers, Say Thanks

A red circle highlights the "CLICK HERE TO COMPLETE THE SESSION EVALUATION" link in the Overview section.

[CLICK HERE TO COMPLETE THE SESSION EVALUATION](#)

Access to mental health resources can be challenging among Migratory and Seasonal Agricultural Workers (MSAWs) due to varied cultural conceptions of mental illness that can also limit their access to mental health care. The Community Resiliency Model (CRM) aims to help create trauma-informed and resiliency-focused communities that share a common understanding of the impact of trauma and chronic stress on the nervous system and how resiliency can be restored or increased using this skills-based approach. This interactive workshop will provide health center staff and Community Health Workers (CHWs) who work with MSAW populations with information and resources to promote self-care, community resiliency, and access to mental health well-being. Participants will practice the core CRM wellness skills: (1) Tracking, (2) Grounding, (3) Resourcing, (4) Gesturing, (5) Shift & Stay and (6) Help Now! - used to bring our bodies, mind, and spirit back into a state of balance. Participants will also have the opportunity to engage in peer-to-peer discussions on mental health concerns and address how these wellness skills can be made accessible to MSAWs and their families to build and restore resiliency.

Learning Objectives:



# Session Evaluation (QR Code)



**<https://www.surveymonkey.com/r/8W63ZF5>**



**Thank you for attending  
today's session!**

**Enjoy the rest of the  
Forum**

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