

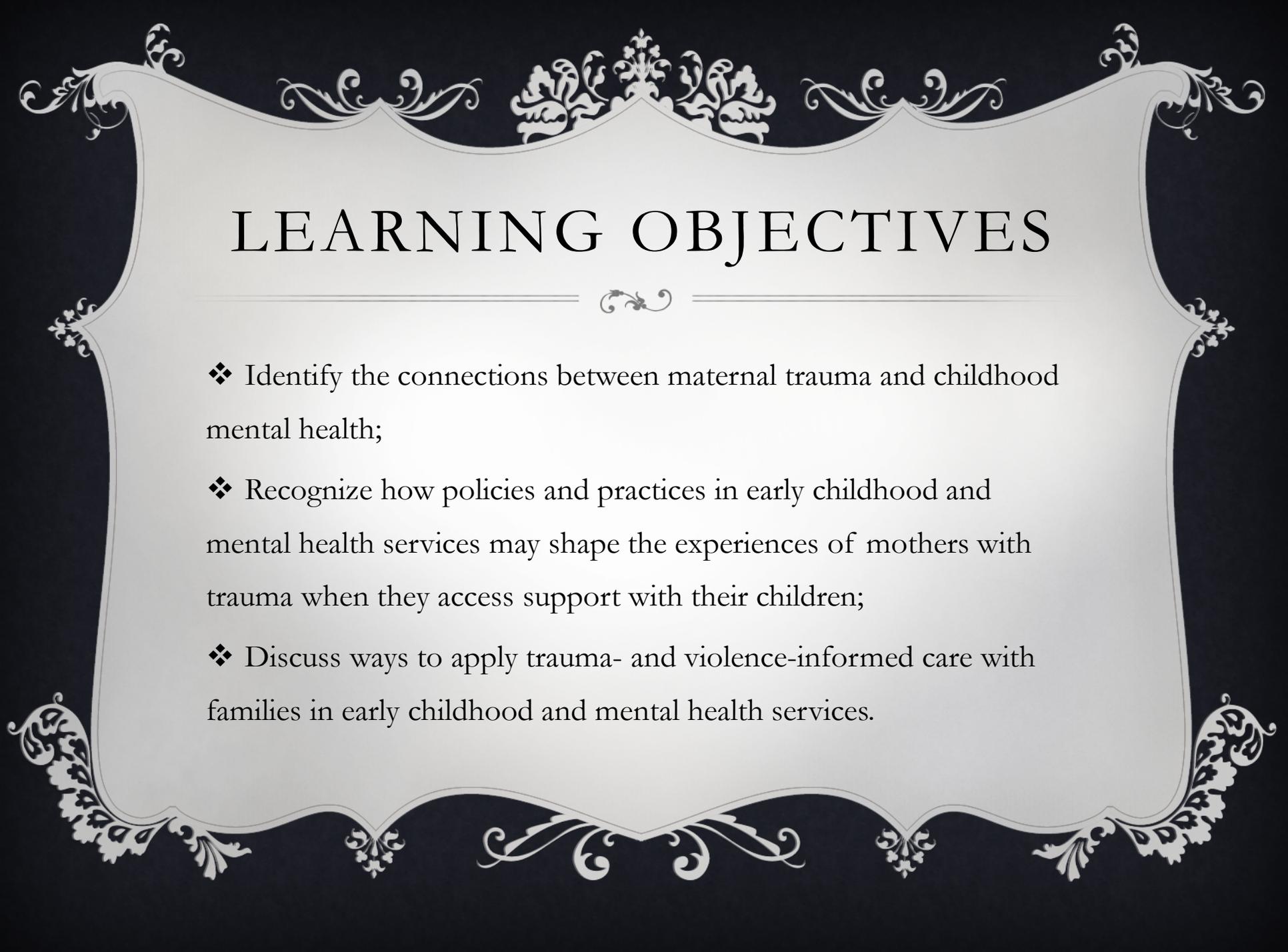
**THE INTERFACE BETWEEN  
MOTHERS WITH  
EXPERIENCES OF TRAUMA  
AND CHILDREN'S MENTAL  
HEALTH SERVICES**

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# LEARNING OBJECTIVES

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- ❖ Identify the connections between maternal trauma and childhood mental health;
- ❖ Recognize how policies and practices in early childhood and mental health services may shape the experiences of mothers with trauma when they access support with their children;
- ❖ Discuss ways to apply trauma- and violence-informed care with families in early childhood and mental health services.



# INTRODUCTION

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- ❖ How is this topic relevant? Why is this topic important?
- ❖ Researcher positioning.



# BACKGROUND

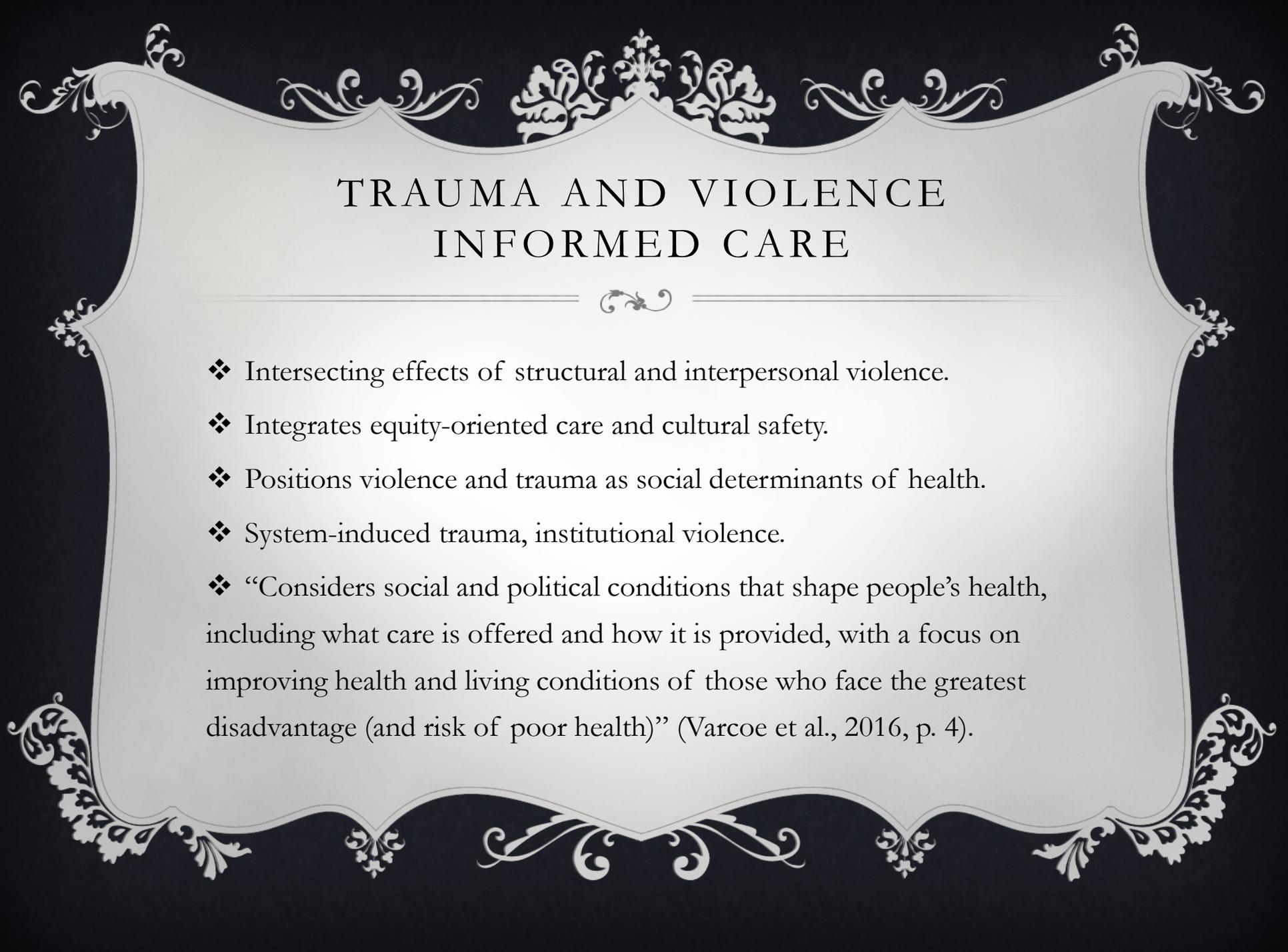
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## **“MATERNAL TRAUMA” & CHILDREN’S MENTAL HEALTH:**

- ❖ Trauma discourses
- ❖ Interpersonal and structural violence
- ❖ “Intergenerational trauma” discourse
- ❖ Mothering discourses
- ❖ Mothering under challenging circumstances (trauma and parenting)
- ❖ Attachment discourses

# TRAUMA-INFORMED CARE

- ❖ Recognition of the role of trauma in the lives of clients.
- ❖ Services not specifically designed to treat symptoms related to trauma, but are informed about and sensitive to trauma-related issues present in survivors.
- ❖ This understanding is then used to accommodate the vulnerabilities of trauma survivors and to deliver services in a way that will avoid re-traumatization.
- ❖ Impact of hierarchal service relationships and challenges with the diagnosis/treatment/intervention processes.
- ❖ Trauma-informed language.
- ❖ Limitations of TIC.



## TRAUMA AND VIOLENCE INFORMED CARE

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- ❖ Intersecting effects of structural and interpersonal violence.
- ❖ Integrates equity-oriented care and cultural safety.
- ❖ Positions violence and trauma as social determinants of health.
- ❖ System-induced trauma, institutional violence.
- ❖ “Considers social and political conditions that shape people’s health, including what care is offered and how it is provided, with a focus on improving health and living conditions of those who face the greatest disadvantage (and risk of poor health)” (Varcoe et al., 2016, p. 4).



# CURRENT STUDY

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*“The Discursive Organization in Children’s Services of Mothers with Experiences of Violence”*

- ❖ Purpose
- ❖ Research questions
- ❖ Research objectives
- ❖ Research design



# INSTITUTIONAL ETHNOGRAPHY

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- ❖ Standpoint
- ❖ Embodied experiences
- ❖ Social organization of knowledge
- ❖ Social relations, ruling relations
- ❖ Text mediated discourses (e.g. policies and practices)

# INTERSECTIONALITY

- ❖ Intersection of social identities/locations/positions, related to systems of oppression and domination.
- ❖ Systemic injustices based on social locations do not act independently.
- ❖ Policies often only address individual/independent marginalized identities.
- ❖ Relevance to mothers who have experienced violence/trauma.
- ❖ Does not generalize individual experiences, but can examine the generalized ruling relations that shape individual experiences of intersecting social positions.



# KNOWLEDGE TRANSLATION AND TVIC

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- ❖ How do we integrate knowledge gained from research into practice (and policies relevant to practice)?
  
- ❖ How do we apply trauma and violence informed care into children's services? (E.G. infant and support child development, key worker, special needs, mental health, and family support programs.)