



# Healthy Workers, Healthy WI: *Trauma Informed Employment Services*

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BADER PHILANTHROPIES

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# T-SBIRT Description & Purpose

- ▶ Health Workers, Healthy Wisconsin anchor service
- ▶ 30 to 60-minute trauma responsive interview protocol
- ▶ Multiple purposes: help participants overcome trauma effects
- ▶ Developed from SBIRT for substance use
- ▶ Implemented within multiple employment services agencies including JobsWork MKE

# T-SBIRT Steps

- ▶ Screening:
  - ▶ Current health insurance coverage and healthcare access
  - ▶ Current stressors
  - ▶ Trauma Exposure (THS) &
  - ▶ Trauma Symptoms (PC-PTSD)
- ▶ Brief Intervention: Motivationally-Based and Client-Centered
  - Review screening results
  - Coping
  - Self-medication

## T-SBIRT Steps (cont'd)

- ▶ Referral to Treatment (or services)
  - Warm referrals (Mental and Behavioral Health, DV Services, etc.)
  - Enhance motivation to complete referrals (PEI by Nock)
- Tolerability and Stabilization
  - Gauge affective state
  - Implement evidence-based grounding exercise

# Results of T-SBIRT in Employment Service Programs in MKE

- ▶ Major Stressors: 100% reported
  - ▶ Finances
  - ▶ Employment
  - ▶ Housing
  - ▶ Children
  - ▶ Relationships

# Lifetime Trauma

*W2 and other employment service clients in Milwaukee area*

Trauma Index Score, Prevalence, %	Healthy Workers, Healthy Wisconsin (N=132)
0	2.3
1	6.9
2	3.8
3	10.8
4	10.8
≥ 5	65.4

# Mental Health Outcomes

## Healthy Workers, Healthy Wisconsin (N=148)

- ▶ 52% screened positive for PTSD
- ▶ 53% screened positive for GAD
- ▶ 43% screened positive for depression

# Results of T-SBIRT in Workforce Dev

- ▶ Positive Coping: 98% reported
  - Social support from family and friends
  - Physical activity
  - Artistic/creative hobbies
  - Spending time with children and grandchildren
  - Religion/faith



# Results of T-SBIRT in Workforce Dev

- ▶ Unhelpful Coping: 85% reported
  - ▶ Substance use
  - ▶ Social isolation
  - ▶ Anger/violence

# Results of T-SBIRT in Workforce Dev

- ▶ Accepted referral to mental health care: 54%
- ▶ Accepted referral to any care: 73%

Topitzes, J., Mersky, J. P., Mueller, D. J., Bacalso, E., & Williams, C. (2019). Implementing Trauma Screening, Brief Intervention, and Referral to Treatment (T-SBIRT) within Employment Services: A Feasibility Trial. *American journal of community psychology*, 64(3-4), 298-309.

## T-SBIRT in Milwaukee area W2

Mental Health Measure	Comparison Group (n=65)	Intervention Group (n=23)
Depression $\geq$ 10 T1	44.6%	60.9%
Depression $\geq$ 10 T2	41.6%	47.8%
Anxiety $\geq$ 10 T1	47.7%	65.2%
Anxiety $\geq$ 10 T2	42.6%	43.5%
PTSD $\geq$ 3 T1	53.8%	65.2%
PTSD $\geq$ 3 T2	51.1%	39.7%

# Qualitative Findings 1

- ▶ Experience a lot of stress and adversity, including financial & interpersonal
- ▶ Coping with and healing from this stress in multiple ways
  - ▶ Individual
  - ▶ Family
  - ▶ Community
- ▶ JobsWork:
  - ▶ Family environment
  - ▶ Learn soft job skills & find employment,
  - ▶ Also receive trauma-informed, holistic, community-oriented services.
- ▶ Desire to give back and heal with the community

Mueller, D., Bacalso, E., Ortega-Williams, A., Pate Jr, D. J., & Topitzes, J. (2021). A mutual process of healing self and healing the community: A qualitative study of coping with and healing from stress, adversity, and trauma among diverse residents of a midwestern city. *Journal of Community Psychology*, 49(5), 1169-1194.

# Implications

- ▶ Trauma-informed services at clinical and case management level (T-SBIRT Plus)
- ▶ Refer to mental health but also to social supports (HATCH)
- ▶ Develop community and give back to community (HATCH and JobsWork MKE)

# Questions