Becoming Trauma Informed
Youth Emergency Services and Shelter Thrives with the Sanctuary Model

In 2008, when Stephen Quirk assumed the role of CEO at Youth Emergency Services and Shelter (YESS) in Des Moines, he knew things had to change.

“Staff didn’t have a say in how things were done; [management] was top-down. Service delivery was scripted and linear … and all the walls were gray,” says Quirk.

So they started painting.

Within a few weeks, the space was transformed from institutional gray to a palette of bright colors, murals, children’s handprints and inspiring quotes. What Quirk didn’t know then is that changing the physical environment to one that feels welcoming and safe is a step toward becoming a trauma informed care organization — something the agency has been actively pursuing since 2010.

What Happened to You?

Trauma informed care (TIC), a framework grounded in the awareness of trauma and its effect on behavior, has been gaining momentum in recent years. Des Moines’ own Trauma Informed Care Project, which started in 2009 with a few mental health providers, now boasts about two-dozen partners statewide, including Mid-Iowa Health Foundation.
“Trauma is not just a mental health issue,” says Gladys Alvarez, a clinical social worker at Orchard Place and coordinator of the Trauma Informed Care Project, which aims to bring systems change to how the community understands and responds to trauma. “Being aware of trauma and building resiliency has long-term benefits for communities: lower health care costs, increased productivity, decreased jail time … benefits in all areas of society.”

The project’s website (www.traumainformedcareproject.org) defines TIC as an “organizational structure and treatment framework that involves understanding, recognizing and responding to the effects of all types of trauma” and emphasizes the “physical, psychological and emotional safety for both consumers and providers.”

Quirk describes TIC as the 2x4 that hit him on the head.

“Kids were coming to YESS with much higher levels of acuity; their ACES [adverse child experiences] scores are off the charts and their mental health diagnoses are more severe,” says Quirk. “We needed to get out ahead of that or we were going to be in trouble … trauma informed care made sense.”

**Disruption with a Purpose**

Early advocates for TIC, Quirk and his colleague, Katie Kamienski, COO at YESS, sought a roadmap for transforming their agency into a trauma informed organization. After much deliberation, the pair traveled to New York in 2010 where they immersed themselves in the Sanctuary Model before implementing it at YESS.

“When we completed training Mid-Iowa Health Foundation wanted to hear about the experience, and afterwards, they encouraged us to submit a business plan for consideration,” says Quirk.

With that first proposal Mid-Iowa Health Foundation became a lead funder for the project; a role the organization has maintained ever since.

Centered around seven commitments – nonviolence, democracy, social responsibility and others – the Sanctuary Model is a blueprint, rather than specific interventions, for changing an organization’s culture to one that promotes healing from the effects of trauma. Although the model is adaptable to an agency’s specific needs, experts caution that undertaking Sanctuary implementation causes an upheaval of the existing system.

“Sandra Bloom [founder of Sanctuary Model] told me this was going to be hard. It would have been easier not to do this, but the payoff is going to be awesome,” says Quirk.

**Worth the Risk**

A time and labor-intensive process, the Sanctuary Model implementation has finally taken shape at YESS. Within the agency’s colorful walls, children participate in art and music therapy, a talent show, and are comforted by a therapy dog. Employees enjoy yoga classes, a salad bar and generous health care coverage. These additions may sound like luxuries, but they are part of a
strategic plan that includes less tangible principles such as a commitment to nonviolence, open dialogue and personal safety plans for children and staff.

The Sanctuary Model permeates every area at YESS, including the interview and onboarding processes. As Quirk says, the agency expects everyone to “jump on the bus.” This high level of commitment to Sanctuary is working: Employee satisfaction is up, tenure has increased, and the incidents of child restraint and runaways are significantly lower.

“There are still people who wrinkle their noses at the Sanctuary Model, and I get it. I did too,” says Quirk. “It requires you to take a lot of risks, and that’s hard to do in a nonprofit. But we took the leap — and we are so thankful.”

— Sherry Speikers is a communications consultant working with nonprofits in central Iowa.