# **Follow Up Protocols**

## **Trauma-Informed Care**

Trauma can change the way a person perceives and experiences the world.

Trauma-informed practices recognize that trauma is pervasive in society.

Health care providers and social service practitioners who are trauma-informed adapt their approaches to better account for trauma and avoid practices that can re-traumatize people.

For midwives, it is important to understand how the physiology of trauma can impact attachment, bonding, early parenting, and decision-making.

Trauma-informed care should be practiced at all stages of the client-midwife relationship, including intake, pre-natal, parturition, and post-partum.

Throughout each stage, always strive to meet clients where they are, let them take the lead, and don't push them to do anything out of their comfort zone.

## For midwives, the principles of trauma-informed care include:

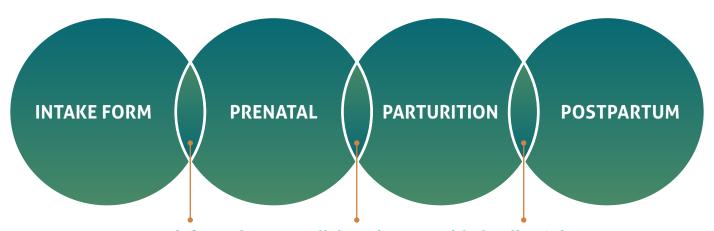
- Learning about your client and their community/family
- Understanding the impact of cultural, historical, and gender issues
- Checking your own implicit biases
- Collaborating with your client
- Being transparent and keeping things confidential
- · Providing informed choices
- · Being non-judgemental
- Creating a safe(r) space

Trauma is not what happens to you, it is what happens inside you.

- Gabor Maté

## AFTER DISCLOSURE

#### HOW TO SHAPE TRAUMA-INFORMED MIDWIFERY CARE



Trauma-informed care — collaborative care with the client's input

## Understanding the midwife-client relationship

Every midwife-client relationship is unique. Many socio-economic factors influence whether a client discloses family violence and how a midwife understands and responds to disclosure. A midwife's skills, knowledge about family violence, and understanding of the scope of care and mandatory obligations, all play a role.

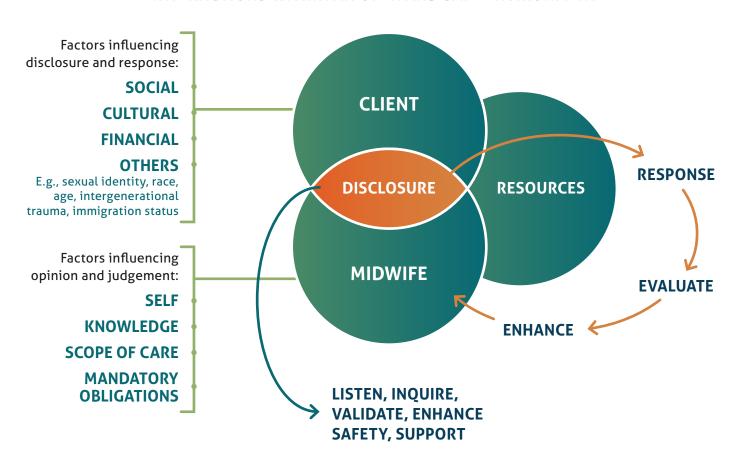
Building a relationship of trust is the key to responding to family violence. To build trust, engage clients in decision-making as you seek access to needed services, resources, and information.

It's important to know when trust may be compromised. This may be the case if a midwife has a relationship with a client beyond the professional context; this is called a dual relationship. A dual relationship is common in close-knit communities or where there are limited midwifery services. If boundaries are respected, a dual relationship does not necessarily mean there is a conflict of interest, although this is often the perception.

If you are in a dual relationship, seek an external evaluation to determine whether your professional judgement may be compromised.

## THE MIDWIFE-CLIENT RELATIONSHIP IN RESPONSE TO FAMILY VIOLENCE

#### INTERACTIONS WITHIN AN OPEN AND SAFE ENVIRONMENT



## Making an appropriate referral

There is a lot to consider in order to identify and make appropriate referrals for clients. In your role as a midwife, you may not have all the answers. That's why it is important to know your community to determine who and how to ask for help in supporting your clients.

## **3 KEY QUESTIONS:**

- **1.** What are the characteristics of the midwife/ midwifery group?
- 2. What community resources are available?
- **3.** Do you have a community engagement strategy?

# WHO, WHAT AND HOW LOCAL RESOURCE MAPPING

## MIDWIFE/ MIDWIFERY GROUP

- Who are your clients?
- What services do you provide?
- Are there any barriers to practicing midwifery where you are?
- Are all midwives adequately trained?
- Are policies and protocols in place?

# WHAT COMMUNITY RESOURCES ARE AVAILABLE?

- Mental health services
- Food access points (i.e., food banks, community kitchens)
- Housing and (emergency) shelter
- Employment
- Addiction services
- Community-based agencies

- Translation
- Health care allies
- Religious/cultural groups
- Social service agencies
- Immigration agencies
- Local, provincial, and federal programs and services
- Family children services



- Social determinates of health
- Seeing the whole person
- Life circumstances
- Different formats and opportunities for disclosure
- Safe environment
- Advocacy



## SUPPORTING RESOURCES

Visit canadianmidwives.org/family-violence/resources/ for our companion resources on recognizing and responding to family violence:

- · Documentation Guidelines
- Home Visit Risk Assessment & Safety Planning
- Child Maltreatment & the Duty to Report
- · Safety Protocols for Home Visits
- The Role of a Midwife in Disclosures and Reporting Family Violence
- Safety Planning Templates
- Help Lines Poster & National Resources
- Checklist for Supporting Clients Experiencing Violence

### **REFERENCES:**

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