



Jean Tweed Centre




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JEAN TWEED CENTRE




- The Jean Tweed Centre is a community-based agency providing day, residential, outreach and case management services to women who struggle with substances and/or are facing difficulties related to problem gambling .
- The Centre was founded in October 1983 by a group of people dedicated to bringing to reality Jean Tweed's vision of women-centred recovery.
- The Jean Tweed Centre is a non-profit organization funded by the Ministry of Health and Long Term Care and by donations.

OUR APPROACH AND PRACTICES




- Gender Matters: Reducing Barriers
- Determinants of Health
- Partnering for Better Access and Care
- Reducing Harm
- No wrong door
- Low threshold and Easy Access
- Client centered
- Trauma informed
- Harm reduction
- Collaborative

TYPES OF SERVICES




- Outreach, Advocacy and Case Management
- Support and Stabilization
- Intensive Programs
- Individual and Group Counselling
- Child care and Parenting
- Family support
- Continuing Care
- Trauma specific programs



PATHWAYS TO HEALTHY FAMILIES:


OUTREACH & CASE MANAGEMENT:



For Pregnant and parenting mothers with children under the age of 6 yrs.


- Information, Support, Counseling, Referrals
- Assistance with child welfare issues
- Parenting programs
- Child Development services

Locations throughout Toronto




MK2 (MOM AND KIDS TOO):

INTENSIVE PROGRAM – 21 DAY



Offers services to pregnant and or parenting mothers having children under the age of 6 years.

- Mom and Kids Too offers:
- Day treatment - 3 days per week for 7 weeks
- Parenting workshops ,Child development workshops
- Attachment activities ,Group Therapy
- Relapse prevention strategies
- Goal orientated programming
- child attends with you (if your child is in foster care we will work with child welfare to have your child attend)



CHILD CARE AND CHILD DEVELOPMENT CENTRE



- A licensed child development centre is available for all women who are accessing services at the Jean Tweed Centre in any of the programs.



TRAUMA-INFORMED PRACTICE

“a strength based framework that is grounded in an understanding of and responsiveness to the impact of trauma, that emphasizes physical, psychological and emotional safety for both providers and survivors, and that creates opportunities for survivors to rebuild a sense of control and empowerment.”

Coalescing on Women and Substance Use



TRAUMA-INFORMED PRACTICES

key principles:

- Acknowledgement
- Safety
- Trustworthiness
- Choice and Control
- Relational and collaborative approaches
- Strengths-based empowerment modalities



TRAUMA-INFORMED PRACTICES

Organizations - and their staff:

REALIZE the prevalence of trauma

RECOGNIZE how trauma affects everyone involved with the organization (including its own workforce)

RESPOND by putting that knowledge into practice



Jane is a 22 year old female, presented at Jean Tweed looking for support during her pregnancy. Jane stated that she was struggling to stay abstinent from alcohol while pregnant. Jane shared that growing up she was gang raped twice . She states her involvement with "bad" crowd while in high school. Jane comes from a catholic background, and while family is very important to her she has a unhealthy y relationship with her mother. For the past two years she was in an on-again off-again relationship with her boyfriend who has his own substance use and mental health struggles. When Jane found out about her unexpected pregnancy, she was not sure if she wanted to keep it but her family told her they would disown her if she had an abortion and in order to save the relationship she has decided to keep the baby. Recently Jane's partner told her he cannot handle "this" and left her. Jane shared that since high-school she has been using alcohol whenever she is having a hard time. Jane is now 20 weeks pregnant, and while she states she has been abstinent during the length of the pregnancy she shared that now that her partner is gone she has been struggling to maintain this.



CLIENT STORY - JANE

Age: 22

Sex: Female

Ethnicity:

Culture: Catholic

Pregnant: Yes (unplanned)

Presenting Issues: Alcohol use, single parent cultural expectations, relationships (parents and on-again off-again boyfriend)

History: Teenage trauma, Gang raped



GOALS:

- Abstinence
- Healthy baby
- Triggers
- Coping skills
- Prenatal supports
- Relationship
- CAS



STRENGTHS BASED AND SKILL BUILDING

- Identifying what is an issue
- Analyzing the causes
- Deciding on goals to eliminate these causes
- Making realistic plans that will achieve the goals
- Implementing the plan
- Evaluating whether or not the issue is getting better ?



STRENGTHS BASED AND SKILL BUILDING

- Seeking support
- Honest/Transparent
- Prenatal need
- Alcohol history
- Courage
- CAS concern
- Goal as abstinent
- Decision making
- Age related strength



STRENGTHS BASED AND SKILL BUILDING

- Every person has potential to change
- Focus on strength, not on the problem
- Use of Language that is not stigmatizing
- Stages of change – Change is inevitable
- Collaborative work
- Client and family – Holistic approach
- Capacity building



OUTCOME

- Validation and appreciation
- Aware of community as well as own recourses.
- Setting realistic goals and expectations
- Exploration of coping skills
- Ability to overcome challenges
- Self-esteem and competence
- Manage herself in her life
- Assertiveness and self advocacy
- Prenatal care, (HARP)/ CHC / Hospital
- CAS / PAC worker



TO WHAT EXTENT ARE YOU AWARE OF AND USING 'PERSON-FIRST' LANGUAGE, E.G., "CHILDREN WITH DISABILITIES"?
WHAT LANGUAGE DO YOU USE TO DESCRIBE THE FAMILIES YOU WORK WITH?

- Language is key at the Jean Tweed Centre
- When working with anyone who walks through the JTC doors or has a relationship with JTC we are constantly using Trauma informed language.
- Being hyper aware that anything can impact / trigger an individual.
- Non Stigmatizing - Use "Substance Involved" or individual with SU challenges instead of substance abuse or addict



WHAT EDUCATION AND SUPPORT RELATED TO VICARIOUS OR SECONDARY TRAUMA PROVIDED WITHIN YOUR PROGRAM OR ORGANIZATION? WHAT EDUCATION OR SUPPORT DO YOU NEED? HOW COULD YOU GET THEM?

- Clinical supervision
- Workshops
- EAP programs
- Self care
- Clinical consultant
- Peer support



HOW DO CHILDREN AND FAMILIES IN YOUR PROGRAM INFLUENCE PROGRAM DELIVERY? ARE THERE OPPORTUNITIES FOR PEER SUPPORT, PARTICIPATION IN PROGRAM PLANNING, PARTICIPATORY EVALUATION METHODS?

- Community Engagement Council- clients can participate in quality improvement activities over the year.
- Evaluation for each programs
- client & stakeholder focus groups, if that is helpful
- Individual meeting with clients
- Anonymous Client feedback / suggestions box available at agency