



Center for Native Child and Family Resilience

Case Scenarios

Facilitators may consider the following examples to highlight the nuanced differences between centering trauma and centering resilience. Choose an example or create one that will resonate most clearly with the community.

Food Security Scenario	
Trauma-Informed Care	Resilience-Informed Care
<p>The community recognizes that many people experience food insecurity. In response, a program has been developed where families can complete a form documenting their need and in response will have access to a food pantry each week.</p>	<p>The community recognizes that many people experience food insecurity. In response, they have made a food pantry available to anyone who is in need. There is no documentation requirement or limit to who can access the meals. The community might also host meals each week where anyone can attend and receive a meal; perhaps community-based programs have tables at these events to advertise other supports throughout the community.</p>

Family Violence Case Scenario	
Trauma-Informed Care	Resilience-Informed Care
<p>Family violence is prevalent within the home. The child has been exposed to the violence continually and was recently injured, though they were not the intended target. The Tribal child welfare program has received several reports about the family and has escalating concerns for the child's safety. They suggest to the non-offending caregiver that they go with the child to a shelter or the child will be placed with their grandmother. The parent who perpetrated the violence is arrested, and a temporary restraining order is put into place.</p>	<p>In the same scenario but using a resilience-focused approach, the caseworker would request that a safe relative move into the home to support the child and caregiver while controlling for safety. The offending caregiver would be referred to rehabilitation services to heal and learn the skills needed to live free from violence. The child would stay in the home with their caregiver and extended family who ensures safety, while the caregiver who threatened the child's safety and the family's wellness would have access to treatment services grounded in traditional practices that support living well.</p>