Case Study: The Story of Akasha

Akasha, a client, is a new resident of the program. She has resided there for a few days and still hardly looks up while her two young children cling to her tightly. She was living in a car for a couple of weeks during the summer after losing her apartment. Akasha and her children were unable to access bathroom and shower facilities and, therefore, arrived at the shelter wearing clothes that were turned inside out and covered in sweat. After three days, she and her children still had not showered or changed. Other residents are beginning to complain to the staff. One of the shelter workers, Maria, approaches Akasha and in a friendly voice says, “Hi, my name is Maria, what’s yours?” while extending her hand. Akasha doesn’t look up or make any motion to indicate that she sees Maria standing there. Maria continues, “I know it has been hot out there. Maybe you and the kids would like to use the shower.” Akasha becomes immediately angry and starts to raise her voice saying, “I don’t need a damn shower and neither do my kids.” She gets up off the couch where she was sitting and storms toward her room.

At a staff meeting later that day, staff members Rose, Maria, and Carla disagree about how best to approach and engage Akasha. Rose says the shelter should call the mental health emergency services team to conduct an assessment. Her belief is that Akasha probably has some sort of psychiatric problem. Carla wonders if Akasha was taking medication and has stopped. She also suggests that the new resident is withdrawing from drugs and that is why she is a bit edgy and withdrawn. Maria wants to ask what is making Akasha so angry. Is she frightened? Does she feel unsafe? Did something happen? Carla and Rose disagree with Maria’s approach. They think that only professionals should ask Akasha about her anger. They feel unqualified to ask her in-depth questions about her life. In addition, Carla and Rose are concerned that Akasha will scare the other residents and children. They express uncertainty about whether the program should have admitted her at all or if she would be better served by the mental health system.
Discussion Questions

1. Who is approaching Akasha more traditionally? What makes this approach traditional?

2. Who is thinking in a trauma-informed way? What makes their approach trauma-informed?

3. Can you think of other relevant questions to ask Akasha?

4. What might have been going on that could explain Akasha’s response? What might be some possible remedies or alternative ways of responding to this?

5. How would your answers to the above questions change if you knew that Akasha’s batterer had beaten her while she and her children tried to hide in the shower?