Childhood Trauma Task Force

October 1st

10am – 12pm



Agenda

- Welcome and Introductions
- Approval of Minutes from July Meeting
- Discussion: Creating Guidelines for Trauma-Informed Practice in Massachusetts
- Annual Legislative Report
- Next Meeting



CREATING GUIDELINES FOR TRAUMA-INFORMED PRACTICE IN MASSACHUSETTS

Guidelines Development Plan

Step One:

- Develop short and accessible "guidelines document" that describes:
 - Principles of TIR care (Conceptual/Theory)
 - Domains for TIR practice (Implementation/In Practice)
- Document intended to be accessible/relevant across multiple sectors
 - Can be referenced in RFPs, trainings or policies

Step Two:

- Develop online sector-specific resource guides
 - Link to sector-specific resource guides already in existence
 - Supplement with specific examples/resources as needed
 - Implementation/organizational assessment checklists based on guidelines

Step Three:

Develop & implement dissemination strategy



Purpose

- Articulate principles of trauma-informed and responsive (TIR) care that can apply to any school, healthcare provider, law enforcement agency, community organization, state agency or other entity that comes into contact with children and youth.
- Based on SAMHSA (2014) and adapted for use across sectors.



Defining Trauma

- "Individual trauma results from an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening and that has lasting adverse effects on the individual's functioning and mental, physical, social, emotional, or spiritual well-being." SAMHSA (2014)
- When a child experiences a traumatic event, it can have a negative effect on the child's behavior and cognitive functioning.
- Common behaviors associated with trauma include problems with memory, attention, and emotional regulation.
- It is important to remember that no two children will react to the same traumatic event in the same way.



Trauma-Informed and Responsive Adults

- Any adult who interacts with a child can be trauma-informed and responsive (TIR) by doing the following:
 - Recognizing behaviors that may be signs of trauma
 - Realizing that these behaviors are the child's way of communicating emotions and coping with the effects of trauma
 - Responding to these behaviors by teaching children healthy ways of expressing feelings and coping with stressful situations, as well as seeking additional professional help when appropriate
 - Interacting with children in ways that avoid re-traumatization
- Trauma-informed and responsive adults also know that all children, including those with trauma histories, have strengths, capabilities, and talents that should be nurtured throughout their lives.



Step One: Guidelines Document

Principle #1: Safety

- Children and youth who have experienced trauma have had their sense of safety disrupted. Therefore, it is vital for any adult who interacts with children to ensure the child's physical and emotional safety.
- Ensuring a child's physical safety means making sure that any spaces where children may be are designed to prevent physical injury and are properly maintained.
- Ensuring a child's **emotional safety** means creating environments where children can freely express their ideas, thoughts, and emotions without fear of punishment, ridicule, shame, or some other psychologically detrimental consequence. Emotionally safe environments invite all children to be their authentic selves while also teaching, supporting, and encouraging children to be empathetic towards others.
- Agencies and organizations must also take steps to ensure the physical and emotional safety of staff members at all levels.

Principle #2: Trustworthiness and Transparency

- Children and youth who have experienced trauma may be distrustful of authority figures and others who have power to make decisions that can impact their lives.
- In addition, there are entire communities that have experienced trauma in a way that may make the community distrustful of those in powerful positions. Therefore, building trust is a critical component of traumainformed care.
- Adults who interact with children and youth should engage in open and clear conversations with children and their families in a timely manner, especially regarding decisions that directly impact the child.
- Open and clear communication is an important factor in building trusting relationships.



Principle #3: Empowerment, Voice, and Choice

- Children and youth who have experienced trauma may feel a loss of control and that they are powerless to do anything to change their situation.
- Adults who interact with children and youth should empower them make decisions about own their lives whenever possible.
- Adults can empower children and youth by including them in decision-making processes, giving them choices, helping them set goals, and teaching them how to advocate for themselves.



Principle #4: Peer Support

- Trauma survivors are a vital source of support for others who have experienced trauma.
- Adults who work with children and youth should help them connect them to other children, youth, and families in their community who have experienced similar traumas to provide them with support during their recovery.
- Agencies and organizations should also provide peer support for their employees, especially those who are repeatedly exposed to trauma as a part of their job responsibilities.



Step One: Guidelines Document

Principle #5: Combatting Discrimination and Promoting Racial/Gender/Cultural Responsivity

- Individual stereotypes and biases negatively influence how people interact with one another, whether they are based on race, gender identity, sexual orientation, immigration status, or some other cultural factor.
- In addition, structural racism, sexism, homophobia and other forms of systemic discrimination that are inherent in all institutions are types of trauma that negatively impact children, youth, and families.
- It takes both individual and collective action to undo the harm that has already been done by systemic discrimination and to prevent future harm from occurring.
- Adults who interact with children and youth should acknowledge their own stereotypes and biases, be aware of how these biases may be influencing their interactions with children and families, and learn to undo the biases that they hold. Adults should also take corrective action to minimize the impact their biases have on decisions that affect children and families.
- To address systemic issues, agency and organization leaders should create opportunities for staff members to engage in open, honest dialogues about issues of race, gender, sexual orientation, and other cultural factors. Agencies and organizations should also identify and take concrete actions to address systemic racism, sexism, homophobia, and other forms of systemic discrimination in their institutions.

Step One: Guidelines Document

Six Domains of Trauma-Informed and Responsive Practice

Organizational Leadership

Policy and Decision-Making

Physical Environment

Youth and Family Engagement

Training and Workforce Development

Quality
Assurance and
Evaluation



Organizational Leadership

- Trauma-informed and responsive leaders:
 - Articulate the principles of TIR care in their mission and/or vision statements.
 - Use their decision-making authority to make the financial and time investments needed to implement the TIR domains.
 - 3. Clearly communicate roles, responsibilities, and expectations to youth, families, and staff members.
 - Invite youth, families, and staff members to provide input and feedback into organizational decision-making.
 - 5. Are visible members of the agency/organization and the community.

Physical Environment

- Trauma-informed and responsive physical environments:
 - 1. Are well-lit with natural light or soft, bright lighting
 - Keep noise levels to a minimum
 - Provide comfortable seating options that are accessible to all types of bodies
 - 4. Use welcoming language on signs
 - Provide private spaces for youth and families to have conversations with staff members and/or regroup after a triggering event
 - 6. Are designed with input from youth, families, and staff members

Training and Workforce Development

- Agencies and organizations can build a trauma-informed and responsive workforce by:
 - Asking potential employees about their awareness of trauma and trauma-informed and responsive practices during the hiring process
 - Hiring individuals with lived experience
 - Providing training on childhood trauma to <u>all</u> <u>employees and volunteers</u> during orientation and as a part of ongoing professional development.



Training and Workforce Development

- Training on trauma-informed and responsive practice should include:
 - Explanations of the different types of trauma (acute, complex, historical, racial, intergenerational)
 - The biological effects of trauma on brain development
 - The effect that trauma can have on a child's sense of safety and sense of self
 - The impact that trauma can have on a child's behavior. This should include discussion of internalizing and externalizing behaviors, as well as how these behaviors may vary by age.
 - Information about trauma in vulnerable populations of youth (e.g. LGBTQ+ youth, homeless youth, commercially sexually exploited children)
 - Protective factors that can help children recover from trauma
 - Information on how to identify potential triggers/activators
 - De-escalation and other communication techniques
 - Information about Secondary Traumatic Stress (STS) and practices for prevention



Training and Workforce Development

- Suggested practices to address Secondary Traumatic Stress:
 - Reflective supervision
 - Peer support
 - Mindfulness exercises
 - Manageable caseloads (classroom sizes, ratios)
 - Adequate staffing (numbers/positions)
 - Mental health benefits



Guidelines: Next Steps

- Incorporate edits from today's discussion
- Next meeting: discussion on remaining domains
- OCA will continue working on Step Two (Online Resource Guides) and Step Three (Dissemination Plan) for review/discussion at future meetings



Annual Legislative Report Proposed Plan for Completion

- Required by statute to report annually to the Legislature on findings and recommendations
- First Initial/Interim Report Outline:
 - Description of CTTF Work thus far
 - Meeting presentations (agency & invited)
 - Survey results
 - Initial Findings based on above
 - Recommendations
 - Develop of Trauma Informed & Responsive Care Guidelines
 - Committee Next Steps/Areas of focus for Year 2
- Aim to develop report with more substantial recommendations by Summer 2020



Annual Legislative Report Proposed Plan for Completion

Task	Timeline
Review detailed outline of report & provide feedback	October 22 nd Meeting
Review draft report & provide feedback	November 7 th Meeting (Draft to committee by November 1 st)
Review final report	December Meeting (TBD)



Next Meeting

- October 22nd, 1pm 3pm
 - Ashburton, 21st Floor, Room 2

- Agenda:
 - Presentation/Discussion with Laurie Leitch
 - Continued Discussion on TIR Guidelines
 - Review of Annual Report Outline

