





### **Trauma-Informed Care:**

## Innovations from the School Health Services National Quality Initiative

As part of the School Health Services National Quality Initiative, the <u>School-Based Health Alliance</u> (SBHA) and the <u>National Center for School Mental Health</u> (NCSMH), with guidance from the Health Resources and Services Administration's Maternal and Child Health Bureau, worked with states to increase state policies and programs that promote quality, sustainability, and growth of school-based health services, specifically school-based health centers (SBHCs) and comprehensive school mental health systems (CSMHSs).

We hosted a three-year, quarterly learning community of 24 states, the District of Columbia, and the Bureau of Indian Education and Indian Health Service. Participants included representatives from state departments of education, health or public health, and mental/behavioral health; Title V/Medicaid; other state-level agencies or organizations such as SBHC state affiliates and managed care organizations; and family organizations, youth, and other leadership.

This document highlights shared policy or practice innovations, lessons learned, and resources related to providing Trauma Informed Care in schools.

SBHCs: School-based health centers complement existing school health services by facilitating access to primary care and often behavioral health, vision, and other services through school-community partnerships for children and youth nationwide who experience barriers to accessing care because of discrimination, their family income, or where they live.

CSMHSs: In strategic partnership between schools, families, and communities, comprehensive school mental health systems use a multitiered system of support framework (MTSS) to promote positive school climate, social and emotional competencies, and mental health and wellbeing, while reducing the prevalence and severity of mental illness.

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## **Topic Overview**

According to the <u>Substance Abuse and Mental Health Services Administration (SAMHSA)</u>, by age 16, more than two-thirds of children experience at least one traumatic event, such as physical or psychological abuse, witnessing or experiencing domestic violence, and community violence.

Youth who experience a traumatic life event are at risk of experiencing long-lasting consequences, including emotional distress, behavioral problems, and illness. Trauma exposure can lead to the development of mental health challenges or exacerbate existing mental health problems.

With the increasing prevalence and recognition of the harms of trauma, there is a growing acknowledgment for the need to address trauma through an approach that includes development of awareness, prevention and early identification, and trauma-specific assessment and treatment. Trauma-informed care recognizes the presence of trauma symptoms and acknowledges the role trauma may play in an individual's life and community. In a trauma-informed school, the school community aims to cultivate a healing-centered environment that recognizes and responds to the individual and collective causes and impact of adversity, stress, and trauma. Adults are prepared to recognize and respond to those who have been affected by traumatic stress. Students are provided with clear expectations and strategies to guide them through stressful situations. Trauma-informed schools leverage individual and community strengths to foster healing.

To maximize trauma-informed practices, many state, local, and organizational systems have implemented practices and provided guidance to <u>support trauma-informed care</u> from a broader systems-level approach. This document highlights examples from three states that scaled up trauma-informed care and practices to support the development of trauma-informed schools and school-based health centers.

## **Innovations Spotlight**



### **Massachusetts**

Advancing Systems to Build State and District Knowledge and Capacity on Trauma-Informed Care

The Massachusetts Office of the Child Advocate is charged with making recommendations to improve the state's response to childhood trauma through the Childhood Trauma Task Force. The goal of the task force is to prevent future juvenile justice involvement and support positive life outcomes for youth by determining how Massachusetts can better provide services to children who have experienced trauma. Broadly, the task force aims for all child-serving organizations and systems in Massachusetts to take a trauma-informed and responsive approach.

The <u>Center on Child Wellbeing and Trauma</u> (CCWT) was established by the Massachusetts legislature in 2021 following recommendations made by the task force. The CCWT delivers trauma-informed and responsive information, tools, and training to organizations that serve children in Massachusetts. Shortly after its inception, CCWT partnered with <u>Thriving Minds</u>, a collaboration between the Rennie Center for Education Research and Policy, the Bridge for Resilient Youth in Transition (BRYT) Program, and the Massachusetts School Mental Health Consortium, to deliver a professional development series on trauma-sensitive and healing centered practices across all tiers of support open to districts across Massachusetts.

Another significant effort to foster trauma-sensitive and healing-centered systems and practices is reflected in the state's <u>Department of Elementary and Secondary Education Safe and Supportive Schools Framework</u>. Safe and Supportive Schools are defined as those that foster a safe, positive, healthy, equitable, and inclusive whole-school learning environment. The definition explicitly highlights that services and initiatives should be sensitive to trauma. The department further outlines essential elements of Safe and Supportive Schools such as supporting all students, deepening understanding, advancing equity, exemplifying cultural

responsiveness, and reflecting and adapting. Within these key elements, "the urgency for addressing systemic inequities, including racism, trauma's impact on learning, and other systemic issues" is highlighted. The department provides schools and districts with a <u>robust guide and self-reflection tool</u> to assess strengths and opportunities for growth related to fostering a safe and supportive school environment.



Massachusetts also uses trauma-informed practices at the district level. For example, Methuen Public Schools has pushed for a cultural shift in schools to recognize trauma-informed practices as a universal support. In response to staff requests for practical tools to help implement trauma-informed practices in the classroom, the district developed the Methuen Public Schools Trauma-Sensitive Classroom Strategies Guide, which includes standards and associated self-reflection tools. To supplement the guide, the district provided presentations to schools across the district that gave staff a foundational understanding of how trauma impacts students and not only demystified what constitutes trauma and its impact on students but also informed staff's selection of interventions and approaches. Methuen's implementation of universal trauma screening also serves as an example of district-level implementation of a system designed to support early identification of students experiencing post-traumatic stress in a proactive manner before diagnosis and crisis.

Many initiatives at the state and district levels in Massachusetts have been influenced by the work of the <u>Trauma and Learning Policy Initiative</u>, a collaboration between Massachusetts Advocates for Children and Harvard Law School.



#### Ohio

A Statewide Approach to Trauma-Informed Care

Since 2013, the Ohio Department of Mental Health and Addiction Services (OhioMHAS) and the Ohio Department of Developmental Disabilities have partnered to develop a statewide approach to trauma-informed care using the Six Key Principles of a Trauma-informed Approach, featured in SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach, as a guide. Together, these departments have used a multi-method approach and have integrated trauma-informed care into hospitals and the organizational and administrative commitments of government agencies. The initiative has spurred state-level cross-system partnerships, trainings, and development of regional collaboratives.

As part of this statewide approach, OhioMHAS worked with the Ohio Department of Education to develop the department's strategic plan, Each Child, Our Future. Within the strategic plan, the five tenets of Ohio's Whole Child Framework reflect a trauma-informed approach that aims for students to be healthy, feel safe and supported through strong systems and relationships, and to be challenged and engaged in learning. Further, OhioMHAS and the Ohio Department of Education and other agencies have collaborated to host the Trauma-Informed Schools Conference and the Trauma-Informed Care Summit.

SAMHSA's Six Key Principles of a Trauma-Informed Approach

- 1 Safety
- 2 Trustworthiness and Transparency
- **3** Peer Support
- Collaboration and Mutuality
- 5 Empowerment, Voice, and Choice
- 6 Cultural, Historical, and Gender Issues



#### **California**

Practices to Increase Healing and Trauma-Informed Services at School-Based Health Centers

From 2015 to 2020, the <u>California School-Based Health Alliance</u> (CSHA) developed and supported work to improve how schools and SBHCs address the impacts of trauma on students and schools. The Oakland Opportunity Fund, funded by The San Francisco Foundation, aimed to mitigate the effects of trauma in students and school environments by increasing trauma screening and intervention and improving school culture and climate to be more trauma-informed through SBHCs in Oakland Unified School District. Through this project, CSHA staff hosted a yearlong supportive learning community that met weekly to train SBHC staff to launch trauma-informed services and interventions; guide SBHCs to make trauma-informed services sustainable through maximized billing and identifying other funding; and support SBHCs and schools broadly to adopt a trauma-informed culture and climate.

Participating SBHCs started screening and connecting students with positive screens to services. SBHC staff thought they gained skills in de-escalating students and using trauma-informed approaches, and thought their school was a more supportive innovating place. School-staff participants reported that student learning and engagement improved because of social-emotional learning. This project was most successful when there were strong relationships between SBHC staff and school staff and administrators.

It is recommended when delving into trauma-informed care initiatives and support to start where it is easiest to facilitate change. Staff at departments of health and SBHA affiliates should aim to begin this work directly with sponsoring organizations and SBHCs where they have the most control. Ensure SBHC staff train on trauma-informed care and that the forms and signage used reflect a commitment to trauma-informed care. Next, broaden the work to the larger school environment by engaging school and community partners.

Based on this work, CSHA developed a <u>Trauma-Informed Services at SBHCs Toolkit</u>, a collection of lessons learned from these projects and resources to help SBHCs more effectively support schools and students in addressing trauma and chronic stress. The toolkit features sections on trauma-informed interventions, trauma screening, trauma-informed clinics, school interventions, family support, staff wellness, and staff development.





## **Lessons Learned**

Schools and SBHCs are well-positioned to support youth by increasing awareness of trauma-informed and healing-centered practices, providing prevention and early intervention, and implementing trauma-specific assessment and treatment. While individual schools, districts, and SBHCs can adopt these practices independently, there is greater synergy and follow-through when states are aligned across and within systems at all levels. States can emphasize the importance of prioritizing the integration of trauma-informed approaches to care at a systems level through strategic planning, training, resource sharing, policy, and capacity building.

### Resources

- >>> The National Child Traumatic Stress Network (NCTSN) aims to raise the standard of care and increase access to services for children and families who experience or witness traumatic events. The Network, which is administered by the SAMHSA, comprises frontline providers, family members, researchers, and national partners. The NCTSN has nearly 200 funded centers and over 200 affiliates. To accomplish NCTSN goals, grantees and affiliates engage in activities such as the developing and disseminating interventions, providing education and training programs, and informing public policy. The NCTSN has a curated resource center specifically for school personnel. Examples include:
  - Creating, Supporting, and Sustaining Trauma-Informed Schools: A System Framework
  - Child Trauma Toolkit for Educators
  - <u>Supporting Trauma-Informed Schools to Keep Students in The Classroom: A Focus On</u> Trauma-Informed Practices
- The National Center for Safe Supportive Schools (NCS3) is a Center of the National Child Traumatic Stress Network that represents a national-regional partnership between the National Center for School Mental Health (NCSMH), the NCTSN Center for Trauma Care in Schools in Massachusetts, and the Center for Childhood Resilience in Illinois. The center's mission is to provide states, districts, and schools with the knowledge and tools to implement culturally responsive, trauma-informed policies and practices that promote equity and well-being.
- Responding to Trauma Through Policies that Create Supportive Learning Environments, a brief from Child Trends, introduces a Trauma-Informed Policy Framework to Create Supportive Learning Environments to help state officials create supportive learning environments that meet the needs of students with a history of traumatic experiences and ensure that all students succeed in school.

- >>> The **Trauma Responsive School Implementation Assessment (TRS-IA)** offers district and school teams an evidence-informed tool to assess trauma responsiveness in eight domains. The tool was developed by the NCTSN Treatment and Services Adaptation Center for Resilience, Hope, and Wellness in Schools and the NCSMH. It is available on the <u>School Health Assessment and Performance Evaluation (SHAPE) System</u>. In addition to describing key components of trauma-informed schools, <u>this webinar</u>, led by NCSMH Co-Director Dr. Sharon Hoover, provides an overview of the TRS-IA.
- Creating Trauma-Informed Policies: A Practice Guide for School and Mental Health
  Leadership, a resource developed by the Mental Health Technology Transfer Center
  Network, provides an overview of four leadership "choice points" that influence the creation,
  development, and impactful implementation of school practices and approaches that align
  with trauma-informed and compassionate school principles.
- >>> SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach provides a working concept of trauma and trauma-informed approaches. The document presents a framework that helps systems "talk" to each other, to understand better the connections between trauma and behavioral health issues, and to guide systems to become trauma-informed.
- >>> Building Trauma-Sensitive Environments

This webinar from the SBHA and the Children's Health Fund explores the impact of trauma and chronic stress on the brain and body, while offering strategies providers can care for themselves as a way of practicing trauma-sensitivity and self-awareness. Presenters practice using trauma-sensitive approaches amidst the current disruptions in the lives of students and their families, as well as within their own practice.

# **Suggested Citation**

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