

Trauma-Informed PA Plan

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Gov. Wolf Acts to Reform Services and Systems to Protect and Advocate for Vulnerable Pennsylvanians July 31, 2019





Why Trauma-Informed PA?

The prevalence of trauma is intertwined with some of our largest community challenges.

Poverty Racism **Poor Physical Health Poor Mental health Barriers to Workforce Development** Crime **Substance Abuse Child Abuse/Domestic Violence Community/Economic Development** Covid-19



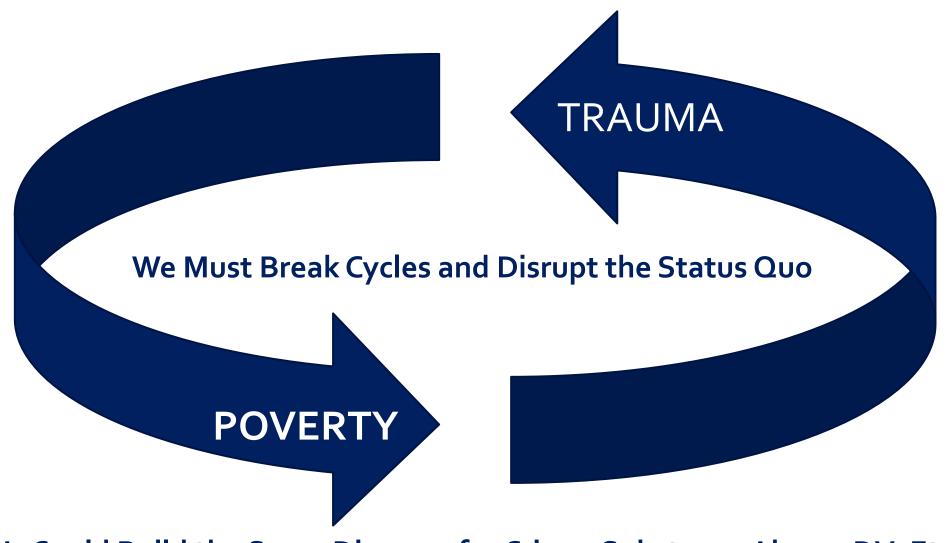
The Current Situation

According to estimates from a recent Department of Health study:

- Half of all Pennsylvanians have had at least one Adverse Childhood Experience.
- Over 19% have experienced three or more.
- 38% of all Pennsylvanians have experienced either emotional or physical abuse as a child.
- 3 out of 4 of us experience at least 1 potentially traumatic event.

Additionally, while we experience the current pandemic in different ways, each according to our own resources and levels of resilience, <u>every</u> Pennsylvanian is at least experiencing chronic stress if not trauma.

How Do We Work Ourselves Out of Business?





We Could Build the Same Diagram for Crime, Substance Abuse, DV, Etc.

Our Approach

Formation of Trauma-Informed PA Think Tank

An Outside Perspective from Experts in the Field

68 Applicants – 25 Selected Members

Virtual meetings from March through June focused on:

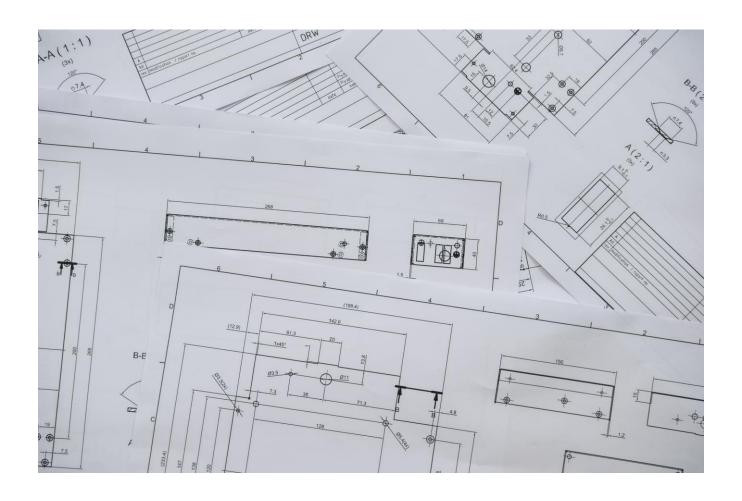
- Defining the terms we would be using as a commonwealth to ensure we were all speaking the same language.
- Setting mission, vision, and values for the effort.
- Building a network to connect and support community-based, grassroots movements across the commonwealth.
- Prioritizing changes at the state level to affect culture, policy, and practice.
- Healing from the trauma of a major disaster like the Covid-19 pandemic.
- Healing the damage of racism, communal, and historical trauma.

State agency staff from DHS, OMHSAS, PDE, and DOH helped to edit the plan.

Phase One was putting these concepts into a plan that is both aspirational and actionable.



The Plan





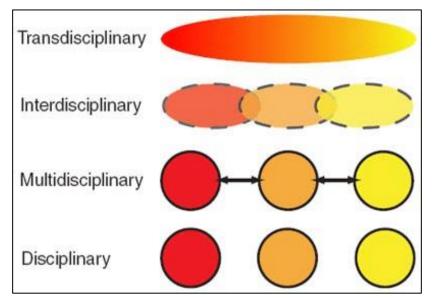
Social Ecological Model

	Short Term	Medium Term	Long Term
Individual			
Interpersonal			
Organizational			
Community			
Policy			



Key Tenet - Transdisciplinary Approach

Approaches conducted by professionals from different disciplines working jointly to create new conceptual, theoretical, methodological, and translational innovations that integrate and move beyond discipline-specific approaches to address common problems. A transdisciplinary team begins to focus on the common problem through the lens of each partner, and how it intersects with each discipline involved, not just through the lens of their individual silos (see the illustration below).





Recommendations Structure

A. State Government

- 1. Culture
 - a) Training
 - b) Job Descriptions
- 2. Policy
 - a) Retraumatization
 - b) Prevention
 - c) Healing
- 3. Licensing
 - a) Continuum
 - b) Retraumatization
 - c) Prevention
 - d) Healing

- B. Community-Based, Grass Roots Movement
 - 1. ACEs Connection
 - 2. Community-Based Coalitions
 - 3. Free Training and Technical Support
 - 4. Annual Summit
- C. Communal Trauma
 - 1. Racism, Discrimination, and Disproportionate Minority Contact
 - a) Core Causes
 - b) Creating Safe Spaces
 - c) Incentivize People
 Who Have
 Experienced Racism
 and Discrimination to
 Become Healers

- d) Eliminate Policies and Practices that Retraumatize
- e) Shifting from
 Unnecessary Levels of
 Policing to Social
 Work, Therapy, and
 Healing
- 2. Natural Disasters, Crisis, and Public Health Emergencies (Learning from Covid-19)
 - a) Understanding Where We Are During Crisis
 - b) Healing What We've Been Through
 - c) Building on Empathy



Recommendation Highlights



Actions Already Underway

Insurance Parity Telehealth Coverage Resource and Referral Tool Living Minimum Wage Broadband Access Anti-Stigma Campaign for Mental Health



Expanding Our ACEs Definition

We recommend expanding the list of Adverse Childhood Experiences the commonwealth recognizes to include the list of expanded ACEs laid out in *Adverse Childhood Experiences: Expanding the Concept of Adversity* as well as one ACE recommended through our work. They include:

- Witnessed violence
- Felt discrimination and bigotry
- Lived in an unsafe neighborhood
- Experienced bullying
- Lived in foster care or another youth congregate care setting
- Experienced poverty for an extended period of time



Child Abuse as a Public Health Crisis

We recommend the Governor and the Secretary of the Department of Health declare child abuse and neglect a public health crisis.

How much worse will this problem be when we emerge from Covid-19?



Requiring the Evolution to Trauma-Informed and Beyond
We recommend the PA continuum from Trauma-Aware, to
Trauma-Sensitive, to Trauma-Informed, to Healing-Centered be
employed to guide all state agencies, offices, licensed,
contracted, and funded entities in the steps and requirements to
become trauma-informed and healing-centered.

This was already in development by DHS (OMHSAS & OCYF)



Connecting the Dots and Sharing Ideas Across Sectors

We recommend the creation of the Pennsylvania Trauma-Informed Network page on the ACEs Connection network. This would bring together and connect to community-based coalitions and movements across the commonwealth and share resources and best practices. As these networks would be run at the local level, they would be more likely to be culturally competent and reflect the differences in approaches and ideas from urban, suburban, and rural localities.

Rob Reed from the AG's Office has been working on this for some time. This is now ready to launch.



Getting to the Heart of Racism

We recommend that each community identify safe spaces to have conversations about racism, reconciliation, and healing led by entities that are run by African Americans, Latinos, LGBTQ+ individuals, and other ethnic and religious groups that have experienced hate and discrimination.



Reducing Disproportionate Impact on Minorities

We recommend a deeper investigation into the disproportionate amount of contact between children and youth services and African American families, and the development of prevention strategies focused on the identification of client-specific, culturally appropriate, evidence-informed and community-based programs.

Similar work will be likely from the Juvenile Justice Task Force based on the data examined so far.

Connect People to Each Other and Healers During Crisis We recommend the creation of targeted, temporary support groups in communities that have experienced trauma as well as chronic and toxic stress due to natural disasters, crisis, and public health emergencies.



What's Next?

Phase One - Create the plan



Phase Two - Build diverse Action Teams to set and achieve shortterm goals and metrics

Phase Three - Implement the plan and turn early successes into momentum (Several recommendations are already underway by multiple agencies, OAR, and even some think tank members)

NOTE: Phases two and three will be engaged at the same time





Healing-Empowerment-Advocacy-Learning-Prevention-Action

Trauma-Informed Pennsylvania Leadership Team

The Leadership Team will meet quarterly for the first year and will determine if that frequency is sufficient after that (whether that be more or less frequency). It will be made up of former think tank members and representatives of multiple state agencies. The Leadership Team will be responsible for bringing the work of the action teams together across all issues and recommendations, and for ensuring that the plan continues to improve and evolve with science, data, and each new success over time.

Trauma-Informed Pennsylvania Action Teams

Action Teams will meet monthly and will need to elect co-chairs annually or as needed. Co-chairs must also serve on the Leadership Team in order to make sure there is close coordination of efforts with no duplication or silos. These teams will be made up of former think tank members, think tank candidates, state agency representatives, and other community members with knowledge or expertise that helps each team reach its goals. Co-chairs will also be responsible for working to find ways to involve practitioners and regular citizens affected by each team's purview in membership as appropriate.



Universal Teams -



Community Outreach and Communication Action Team creating clear communications and facilitating outreach opportunities in communities across the commonwealth. Serves as a support to all other action teams for their communication and outreach needs and should be composed of at least two to three communications professionals.



Policy and Legislation Action Team - advocating for policy changes and legislative changes to support the plan. Serves as a support to all other action teams for their legislative advocacy needs and should be composed of at least two to three advocacy professionals.



Development Action Team - taking advantage of opportunities to apply for grants or engage major donors who can move strategies in the plan forward. Serves as a support to all other action teams for their grant writing needs and should be composed of at least two to three development/grant writing professionals.



Data and Evaluation Action Team - helping to gather pertinent data and stats on trauma/ACEs for distribution, evaluate the success of any intervention through use of data, and serve as consultants to orgs that want to evaluate programs and initiatives.



Targeted Teams -



Training Action Team - assisting with training strategies and vetting training partners as well creating a pool of volunteer trainers to help us keep training free for agencies and communities without resources.



Education Action Team - focusing on our education-based recommendations and supporting our early education settings, K-12 schools, and colleges to become traumainformed and healing centered.



Racial and Communal Trauma Prevention Action Team - focus on not only on healing the trauma of racism and discrimination, but also getting to the heart of what causes this behavior and working to prevent it.



Criminal Justice Reform Action Team - work to improve criminal justice outcomes through trauma-informed and healing-centered practices as well as supporting re-entry and prevention activities.



Poverty Reduction Action Team - work to break the cycle of trauma and poverty by supporting upstream solutions to eliminate poverty and advocating to eliminate structural policies and practices that criminalize poverty.



Business Involvement Action Team - working with chambers of commerce, workforce development, and businesses to understand the impact of trauma on recruitment, retention, and productivity and what role the private sector can play in improving these outcomes.



Child Abuse Prevention Action Team - helping to coordinate the child abuse prevention campaign laid out in the plan and planning out the response that would/should follow child abuse being declared a public health crisis.



Organizational Support Action Team - providing technical assistance to organizations attempting to move along the continuum from trauma-aware to healing-centered.



Physical and Behavioral Health Action Team - working to educate providers and bring more trauma-informed screening, healing, and prevention practices into primary care and hospitals.



What is Required to Succeed?

Funding

Persuasion

Trust

Partnerships

Change

Legislation

Hope

Belief that It's Possible



Questions?

