



Alameda • Contra Costa • Marin • San Francisco • Santa Clara • San Mateo • Santa Cruz

Summary

In October 2014, The Bay Area Trauma Informed Regional Collaborative group, was awarded a SAMHSA grant for their proposal to respond to trauma on a systems level, by creating a shared and trauma informed regional infrastructure to implement, sustain, and improve services for children and youth affected by trauma. The grant award will span 4 years in the amount of \$1,000,000 which will include the funding of the group's key activity: a regional clearinghouse and coordinating center designed to integrate existing knowledge, incorporate new ideas, address challenges to training and sustaining an effective and diverse trauma informed work force and develop mechanisms to support implementation and sustainability of best practices.

Background

Regional Directors of County Behavioral Health systems came together in July of 2012 to develop and share plans to take trauma-informed practices, knowledge, and approaches to a new level of regional coordination. The group began a planning process to launch a Regional Trauma Informed System of Care initiative designed to:

- Develop a regional understanding and shared approach to our response to trauma and its effects
- Embed leaders including youth and parent peers to be champions of change within and across our systems serving children and youth
- Support and maintain change efforts through deploying experts and consumer voices within our region
- Address common and pervasive patterns of disproportionality with respect to historical trauma and fragmented service delivery systems

The Directors have since met on a quarterly basis and through these meetings, has drafted strategic planning documents, shared local approaches to systems change, and identified key goals and strategies for regional collaboration. Initial goals focus on resource sharing, policy coordination, coordination of care, and cross-systems coordination. Early planning efforts have also been vetted at the regional level with systems partners, parent partners, and consumer focus group participants.

Through the BATISC planning group, several of the counties shared their modules and

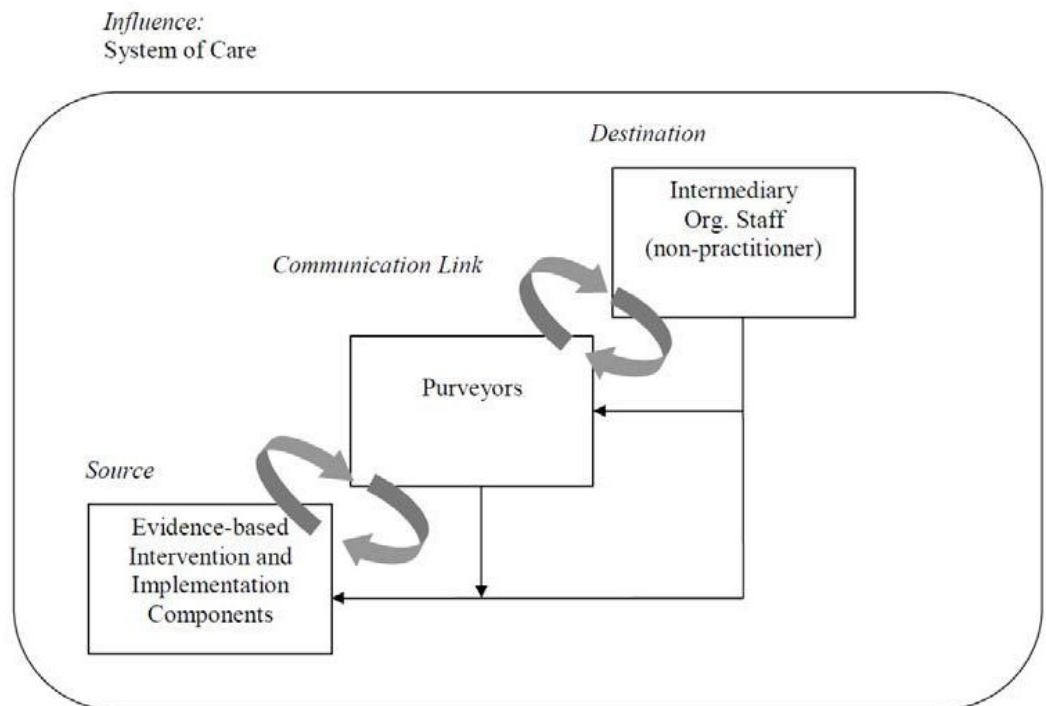
materials with the rest of the members of the Collaborative, and San Francisco, San Mateo and Santa Clara made space available in their local in-person trainings for participation by staff from other counties. The partners continued to share the idea that with a funded and lasting infrastructure and dedicated staff for this regional effort, this type of sharing will be consistent and coordinated. All of the counties will be able to benefit from jointly conducted training and the integration of shared learning approaches across the counties. In addition, the effort to implement an organized response to trauma and complex trauma and to improve access to services for children placed out of county can only be coordinated through a regional body with support and infrastructure.

The Bay Area is fortunate to have national experts in trauma throughout the region. This expertise, however, remains in separate silos in university settings, challenged by needing to constantly seek soft funding, called upon to train other localities in the U.S or around the world, or simply challenged to reach beyond their program or facility. As a result, the opportunities to deliver and translate this local knowledge and expertise into practice for Bay Area community systems and programs have been few.

In 2013, to combat this disconnection and fragmentation, the San Francisco Foundation convened a

conference to engage local trauma experts in a conversation about barriers to developing and sustaining a workforce competently trained in the pervasive impacts of trauma on children, families, communities, and institutions. The expert summit concluded that the Bay Area needed a

centralized clearinghouse with a diverse advisory and oversight to help integrate practices, develop common principles and organize resources in a way that focus on knowledge transfer to the workforce, practice changes, and the sustainability of changed practice.



Goals

Overarching Goal: Transform the regional, overlapping systems into a coordinated, trauma-informed, youth-guided and family driven, evidence-based system of care.

- 1) Regional Center:** Develop a regional center to support and sustain a system of care that is trauma-informed, youth-guided, family-driven, and culturally competent.
- 2) Trauma-informed Training:** Develop and coordinate trauma informed training resources for dissemination to county staff, providers, and consumers.
- 3) Coordination of Care:** Establish a regional model to provide coordinated services for youth and children placed out of county, and children, youth, and families served by multiple systems within counties.
- 4) Policy and Practice Sustainability:** Develop and sustain promising practices from the project and incorporate them throughout the region.

Principles

Understanding Trauma & Stress

Without understanding trauma, we are more likely to adopt behaviors and beliefs that are negative and unhealthy. However, when we understand trauma and stress we can act compassionately and take well-informed steps toward wellness.

- 1. Trauma* – We understand that trauma is common, but experienced uniquely due to its many variations in form and impact.
- 2. Stress* – We understand that optimal levels of positive stress can be healthy, but that chronic or extreme stress has damaging effects.
- 3. Reactions* – We understand that many trauma reactions are adaptive, but that some resulting behaviors and beliefs may impede recovery and wellness.
- 4. Recovery* – We understand that trauma can be overcome effectively through accessible treatments, skills, relationships, and personal practices.

Compassion & Dependability

Trauma is overwhelming and can leave us feeling isolated or betrayed, which may make it difficult to trust others and receive support. However, when we experience compassionate and dependable relationships, we reestablish trusting connections with others that foster mutual wellness.

- 1. Compassion* – We strive to act compassionately across our interactions with others through the genuine expression of concern and support.

2. *Relationships* – We value and seek to develop secure and dependable relationships characterized by mutual respect and attunement.

3. *Communication* – We promote dependability and create trust by communicating in ways that are clear, inclusive, and useful to others.

Safety & Stability

Trauma unpredictably violates our physical, social, and emotional safety resulting in a sense of threat and need to manage risks. Increasing stability in our daily lives and having these core safety needs met can minimize our stress reactions and allow us to focus our resources on wellness.

1. *Stability* – We minimize unnecessary changes and, when changes are necessary, provide sufficient notice and preparation.

2. *Physical* – We create environments that are physically safe, accessible, clean, and comfortable.

3. *Social-Emotional* – We maintain healthy interpersonal boundaries and manage conflict appropriately in our relationships with others.

Collaboration & Empowerment

Trauma involves a loss of power and control that makes us feel helpless. However, when we are prepared for and given real opportunities to make choices for ourselves and our care, we feel empowered and can promote our own wellness.

1. *Empowerment* – We recognize the value of personal agency and understand how it supports recovery and overall wellness.

2. *Preparation* – We proactively provide information and support the development of skills that are necessary for the effective empowerment of others.

3. *Opportunities* – We regularly offer others opportunities to make decisions and choices that have a meaningful impact on their lives.

Cultural Humility & Responsiveness

We come from diverse social and cultural groups that may experience and react to trauma differently. When we are open to understanding these differences and respond to them sensitively we make each other feel understood and wellness is enhanced.

1. *Differences* – We demonstrate knowledge of how specific social and cultural groups may experience, react to, and recover from trauma differently.

2. *Humility* – We are proactive in respectfully seeking information and learning about differences between social and cultural groups.

3. *Responsiveness* – We have and can easily access support and resources for sensitively meeting the unique social and cultural needs of others.

Resilience & Recovery

Trauma can have a long-lasting and broad impact on our lives that may create a feeling of hopelessness. Yet, when we focus on our strengths and clear steps we can take toward wellness we are more likely to be resilient and recover.

1. *Path* – We recognize the value of instilling hope by seeking to develop a clear path towards wellness that addresses stress and trauma.
2. *Strengths* – We proactively identify and apply strengths to promote wellness and growth, rather than focusing singularly on symptom reduction.
3. *Practices* – We are aware of and have access to effective treatments, skills, and personal practices that support recovery and resiliency.

Structure

