



Department of Health, Housing
& Community Services
Mental Health Division

**CITY OF BERKELEY
MENTAL HEALTH SERVICES ACT (MHSA)
PROPOSED INNOVATIONS (INN) PLAN
TRAUMA INFORMED CARE FOR EDUCATORS
PROJECT SUMMARY**

The City of Berkeley is proposing to allocate \$180,000 of unspent Innovations (INN) funds to pilot test a Trauma Informed Care (TIC) For Educators training project in three Berkeley Unified School District (BUSD) schools. The proposed INN project will seek to learn whether modifying the mental health approach of TIC Training for educators will increase access to mental health services and supports for students in need, (particularly for underserved ethnic groups), and increase the quality of mental health services, including providing better outcomes.

BACKGROUND

Berkeley Unified School District (BUSD) is currently challenged with closing the academic achievement gap, which specifically impacts African American and Latino children and youth. The 2020 Vision is a local city-wide movement that was created in 2008 to ensure academic success and well-being for all children and youth growing up in Berkeley, by closing the achievement gap in Berkeley's public schools by the year 2020. On June 24, 2008, Resolutions were adopted by the Berkeley City Council and Governing School Board to authorize the development of plans and models for internal and cross-jurisdictional collaboration to remove barriers to learning and to promote healthy development for all Berkeley children and youth (64, 113-N.S).

To date, there has been significant input during the 2020 Vision work and the BUSD "Local Control and Accountability Plan" (LCAP) process (which informs the plan on how certain state funding will be allocated) that the mental health needs of students in BUSD, particularly children of color, are not being adequately addressed. Feedback received during these processes has largely been based on information gathered from other school systems who have implemented the "Adverse Childhood Experience Survey" (ACES) which measures abuse, neglect and other traumatic experiences that occur to individuals under 18 years of age. Additionally, many BUSD teachers have provided input that they don't feel adequately prepared to support students who are coming into school with so much trauma.

The effects of trauma can have ripple effects on an individual's ability to be successful in school. Children and youth who have been traumatized often “act out” at school through various behaviors that are traditionally viewed as “problematic”. Youth exhibiting acting out behaviors are customarily subjected to disciplinary sanctions, which don't address their trauma issues and instead, often re-traumatize (or further traumatize) the individual. African American, Latino and Native American families are often disproportionately impacted by trauma. It is also often the case, in particular with African American youth that acting out behaviors may lead to inappropriate over-referrals to the mental health system. Based on research, it has been determined that trauma, which can be caused by racism and the social determinants associated with it, leads to stress and affects a child's ability to cope, thrive and succeed in life.

The mental health approach of TIC has become an innovative strategy to change the way school systems serve children of color, who have been historically and systematically marginalized.

TIC trained systems

1. Trauma Understanding
2. Cultural Humility and Responsiveness
3. Safety and Stability
4. Compassion and Dependability
5. Collaboration and Empowerment
6. Resiliency and recovery

A review of the research on school systems that have implemented a TIC model showed that following TIC Training for educators there were initial decreases in disciplinary actions and suspensions around “problematic” student behaviors. These schools utilized outside trainers who came into the system and worked with school staff. However, the model was not sustainable once the trainers left the system and the funding ended. It is also unknown whether the approach had a simultaneous effect on assisting students who were suffering from trauma and mental health issues to receive the mental health supports they needed.

PROJECT OVERVIEW

The proposed INN project will implement TIC training for educators, other school staff and interested parents in three BUSD schools. The primary purposes of this project are to increase access to mental health services for students in need, increase access for underserved groups, and increase the quality of mental health services, including better outcomes. The project will test whether

changing the method of training school personnel in the TIC model and providing embedded follow-up supports will increase the effectiveness of TIC in creating better mental health access and the appropriateness of mental health referrals. The proposed INN project will make a change to existing TIC for educator models through the following:

- Implementing a “Train the Trainer” model to build capacity and sustainability in the participating schools and to create an ;
- Implementing the project through an existing Learning Collaborative (2020 Vision) which will stay involved in, connected to, and provide support on the strategy on an ongoing basis through “Peer Support Learning Circles”;
- Focusing on the educator’s recognition of their own trauma/trauma triggers as a conduit to better understanding youth “acting out” behaviors;
- Inviting parents to participate in the training to assist them in recognizing their children’s and their own trauma/trauma triggers and in seeking supports.
- Create “coaching circles” for school personnel to continue to consult with the internal expert around challenges they face in implementing TIC.

The timeline of the project is June 2016 through June 2018. It is envisioned that an Evaluator will be involved at the beginning and throughout the project, as such, the specific evaluation design and methodology has yet to be developed. Stakeholders will have the opportunity to meet with the Evaluator to provide their perspectives on the proposed evaluation methodology and the methods for disseminating the results.

The Intended Outcomes are:

- To create a change in the way teachers view and handle problematic student behaviors (which often mask trauma);
- To create an increase in access to mental health services and supports for students in need; and
- To promote better mental health outcomes by increasing student referrals to “appropriate” mental health services.

Outcomes may be measured through the following: TIC Training of educators pre and post trauma perception surveys; review of number and type of mental health referrals compared to a baseline of the previous year; and tracking and comparing with previous data the appropriateness of referrals. Following the completion of the two year project, the results will be written up, communicated through various venues and disseminated throughout the City via a variety of means.

COMMUNITY AND STAKEHOLDER INPUT

This project is being prioritized in response to community input around the need for trauma services and supports for students in need. Repeatedly voiced

through multiple MHSA Community Planning processes has been the need to institute supportive services to address trauma within the youth population. A call for solutions to be implemented within school settings has been especially noted.

Additional community member and stakeholder feedback received on this project during the 30-day Public Review and/or at the Public hearing which will be utilized to shape project implementation included: providing Albany Unified School District (AUSD) with the opportunity to participate in the project; ensuring the project will be culturally responsive; providing safeguards for the protection of youth to avoid unnecessary mental health referrals; and creating opportunities for the community to further inform the project.

Being able to implement the proposed INN project will be very timely, and would represent a confluence of other local initiatives around Trauma Informed Care. Recently there has been a push within the City of Berkeley for each system (Public Health, Mental Health, Police Department, Schools, etc.) to be trained in the mental health approach of Trauma Informed Care. Additionally, in October 2014, the Bay Area Trauma Informed Regional Collaborative (a group of Bay Area Regional Directors of County Behavioral Health systems who have met on a quarterly basis since 2012 to share plans to take trauma-informed practices, knowledge, and approaches to a new level of regional coordination), was awarded a \$4,000,000 federal grant from the Substance Abuse, Mental Health, Services Administration (SAMHSA) to span over a four year timeframe. The grant funds were provided to the San Francisco, Department of Public Health to administer, who through a Request for Proposal (RFP) process awarded a contract to East Bay Agency for Children to implement the “Trauma Transformed” (T²) Regional Center. This initiative has created the only regional center and clearinghouse in the Bay Area that promotes a trauma-informed system by providing trainings and policy guidance to systems of care professionals and organizations. The results of this innovations grant would inform future efforts of the regional center.