

Beginning Boone's Dialogue: Building Local Systems into Trauma-Informed Entities in Rural Illinois

A collaborative presentation by:
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School Health Professionals Symposium
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Boone County Doing Something Great

Learning Objectives

- Identify at least three steps organizations or communities can take to become trauma-informed.
- Describe at least three resources available to organizations or communities addressing trauma in Illinois.
- Describe at least three components of a trauma-informed system.





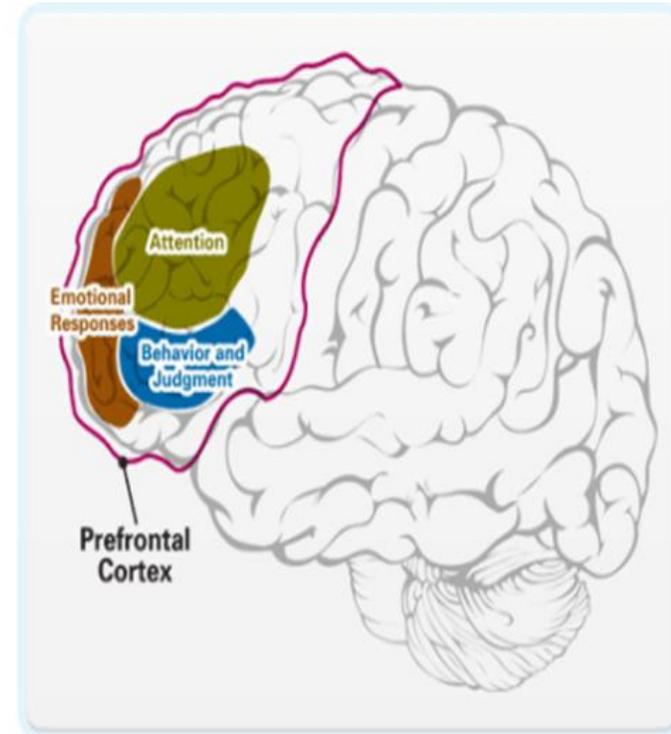
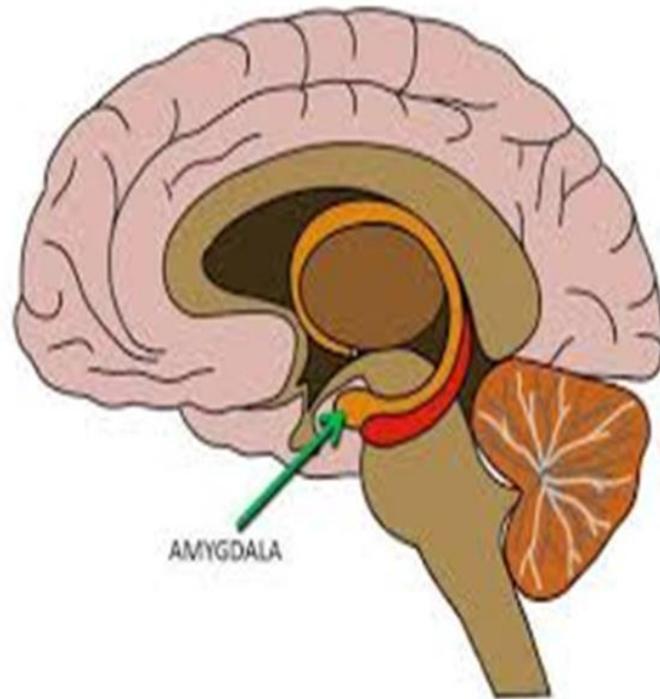
Psychological Trauma

“Individual trauma results from an **event**, series of events, or set of circumstances **experienced** by an individual as physically or emotionally harmful or life-threatening with lasting adverse **effects** on the individual’s functioning and mental, physical, social, emotional, or spiritual well-being.”

Three Es of trauma.

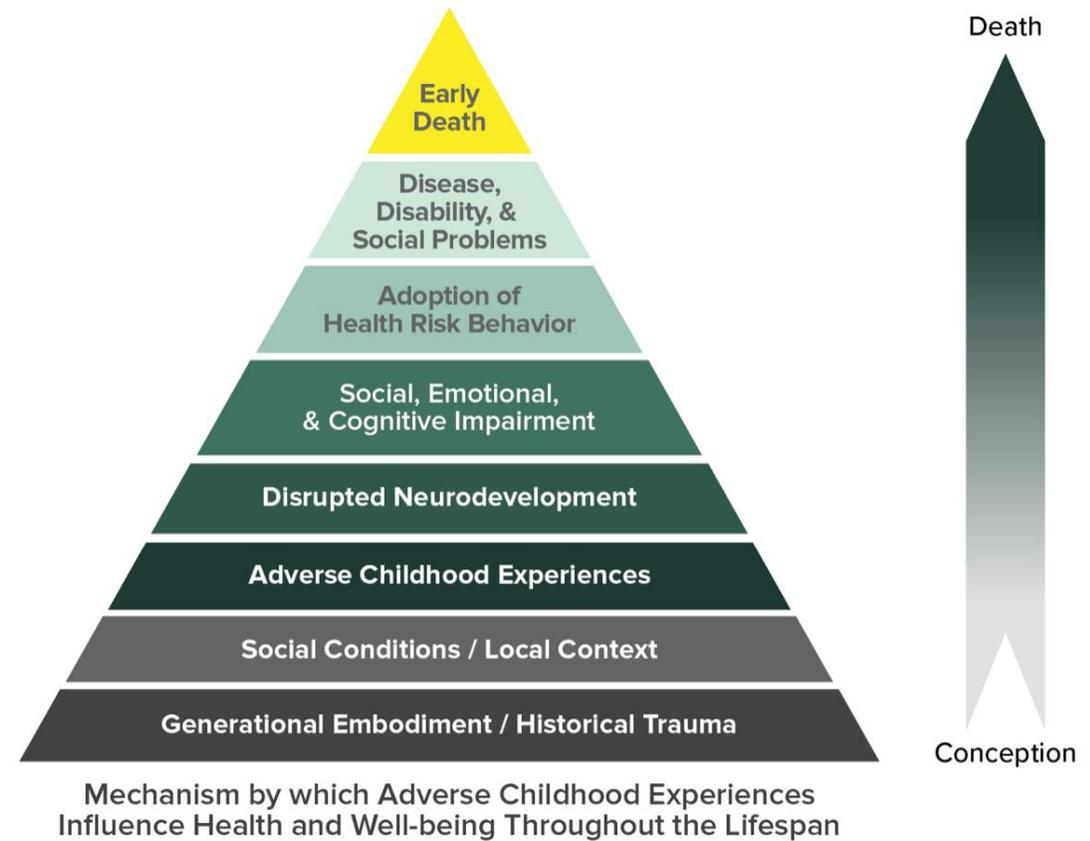
Trauma Can Create Life-Long Changes in Children

- Trauma can change brain functioning and structure
 - Effects on the amygdala and prefrontal cortex



Adverse Childhood Experiences

- Abuse
- Neglect
- Household Dysfunction



Where Did It All Start?

- Began with exposure to the concepts of psychological trauma and trauma-informed approaches.
 - Belvidere District 100
 - Boone County Health Department (BCHD)
- Both BCHD and District 100 are now collectively working together to create a more resilient Boone County.





Public Health
Prevent. Promote. Protect.

**Boone County
Health Department**

Impetus for this work at BCHD

- Field of Public Health encouraging a focus on a trauma-informed approach to our work.
- BCHD Administrator learned about trauma-informed work at the Illinois Public Health Association (IPHA) 2017 Annual Conference and at IPHA Executive Council Meetings.
- Invited to District 100's table.

Impetus for
this work:
Megan's WHY



- **My Experiences as Elementary Principal...**
- **WA Academy**
- **EC-8th Grade**
- **900 Students**
- **60% Low Income**
- **33% English Learners**
- **22% Special Education**

Boone County Snapshot

- Population is 89.20 % 'White;' 'Some other race' at 7.3 %; 3.10% 'Black;' and .30%. 'Asian.'
- 22.10% Hispanic/Latino (IL: 17.3%).
- Boone covers an area of 280.72 square miles, [2/3rds of which are rural.](#)
- Population of **53,503** with less than 20% of the population considered living in the rural parts of the county.
- 1/3 of the population between the ages of 18 and 34 are minorities (49% in the Health Professional Shortage Areas).





Boone County Snapshot

- 34.3% of the female-headed families with children are in poverty.
- Among female-headed families with pre-school age children, 76.3 % live at or below the poverty level.
- 35% in Boone are Obese (IL: 29.3%).
- 11% of families are food Insecure.
- 31.5% of families dependent on SNAP Benefits.





Boone County Snapshot

- Boone County reports 8.10% of the population has no health insurance coverage (Illinois at 9.70%).
- Boone County has the third highest drug arrest rate in Illinois.
- 175% Increase in Opioid/Heroin related Overdose Hospitalizations.

• Ratio Population per 1 Provider – Boone County 2018

- Mental Health Providers 5940:1 530:1
- Primary Care 1910:1 1240:1
- Dentists 3150:1 1330:1

(County Health Rankings)

Belvidere District 100 Snapshot



- 8,000 students
- 10 Schools
- 45% Low Income
- 1% Homeless
- 7% Student Mobility Rate
- 14% Chronically Absent
- 54% White, 37% Hispanic, 4% Black
- 15% English Learners

Process of Becoming a Trauma-Informed County

Trauma Aware

- **Pre-Contemplation:** Organization has no intention of changing. Campaigns to raise awareness should be implemented to address those in this stage.
- **Contemplation:** Organization is aware the problem exists but has not committed to a specific course of action.

Trauma Sensitive

- **Preparation:** Organization is beginning to take steps (such as building knowledge and skills) to prepare for changes and modifications in the employees' behaviors and operations of the organization.

Trauma Responsive

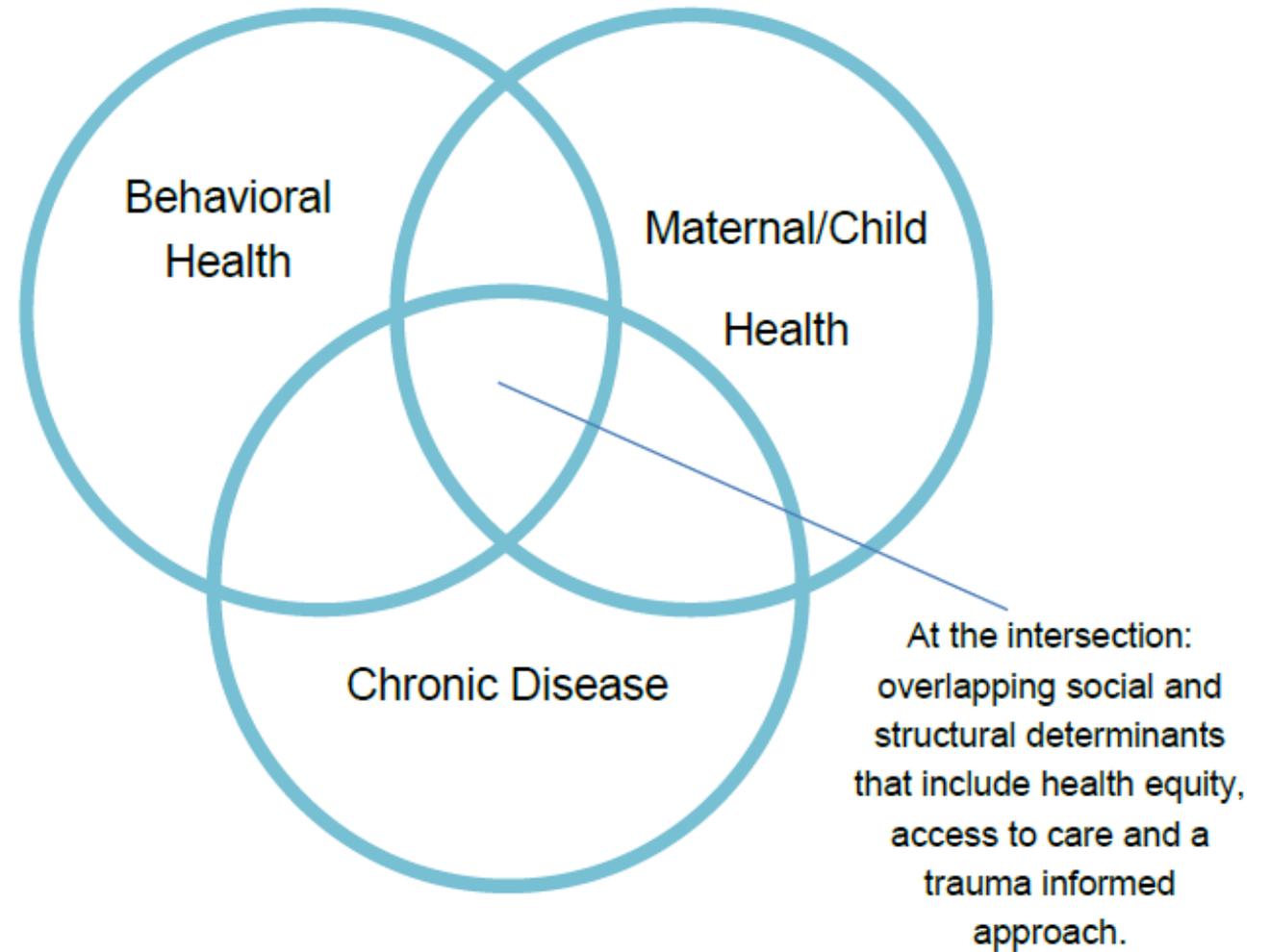
- **Action:** The organization and all those working there are actively adjusting behavior and all other aspects of the organization for the purpose of becoming trauma-informed.

Trauma Informed

- **Maintenance:** Changes made are sustained and have replaced old approaches.
- **Relapse:** Potential relapses (reverting to old practices, procedures, and policies).
- **Upward Spiral:** Using relapses as an opportunity to learn and improve previous practices.

BCHD IPLAN 2018

Top Three Health Priorities
Identified/Selected for the
2018 Community Health
Improvement Plan:



BCHD Strategic Plan

- **Four Focus Areas**
 - **Population Health**
 - Communication
 - Performance Management
 - Funding Diversity
- Population Health Group working on Health Equity and Trauma
 - **Trauma Action Committee (TAC).**
 - Vision: To become a trauma informed health department.
 - Mission: To promote optimal trauma informed practices through staff trainings, collaborations with external partners and to promote community awareness and engagement.



Initial Steps w/ our Schools & Community

Creating...

Trauma Awareness

Social Emotional Awareness

Developing...

Initial Committee Work

Community Partnership- BCHD

Trauma Informed Community
Group

Grant Searching and Writing

District 100's
Two-Pronged
Approach

Social and Emotional Learning



“Social and emotional learning is the process through which children acquire and effectively apply the knowledge, attitudes, and skills necessary to...

- Set and achieve positive goals
- Feel and have empathy for others
- Establish and maintain positive relationships
- Make responsible decisions”

www.casel.org

Addressing Trauma

SEL Standards



SEL Goal 1

Develop self-awareness and self-management skills to achieve school and life success.

SEL Goal 2

Use social-awareness and interpersonal skills to establish and maintain positive relationships.

SEL Goal 3

Demonstrate decision-making skills and responsible behaviors in personal, school, and community contexts.

District 100'S Trauma Work Supports Overarching Goals

OUR GOALS AND ALIGNED STRATEGIES

THE WORK WE WILL DO

STUDENTS

We will provide a quality education for all students to ensure career, civic, and college success.

- We will provide a student-centered learning environment through personalized, competency-based, student-owned, and technology enhanced learning experiences.
- We will ensure a rigorous, standards-based academic and social-emotional curriculum aligned to a system of assessments.
- We will implement instructional practices that help all students grow and succeed.

PEOPLE

We will ensure trust, effective collaboration, innovation, and engagement to foster a professional work environment.

- We will promote healthy relationships between the board, administration, and staff.
- We will ensure effective, two-way internal communication.
- We will provide professional development to equip staff with necessary knowledge and skills.

COMMUNITY

We will ensure excellent service to our students, their families, and our community.

- We will ensure effective, two-way external communication.
- We will engage families and the community in decisions that impact them.
- We will cultivate positive relationships between district employees, students, staff, parents, and community members.

QUALITY

We will use effective practices to ensure the highest quality education for our students.

- We will implement consistent district, school, and team continuous improvement processes.
- We will monitor and report progress aligned to our goals at all levels of the district.
- We will utilize performance evaluation systems that are meaningful, credible, and actionable.

RESOURCES

We will ensure excellent stewardship of community resources to achieve our district's mission, vision, and goals.

- We will examine opportunities to maximize use of time, staffing, and technology.
- We will examine the effectiveness of our programs and services to ensure a return on our investments.
- We will be proactive in forecasting, prioritizing, and aligning fiscal resources to district priorities.



District 100 Measures of Success

-
- Trauma Informed Implementation Framework
 - Student Achievement Data (this will take time)
 - Student Discipline Rates/Data
 - Student SEL/Engagement Surveys
 - Staff/Parent Input



Public Health
Prevent. Promote. Protect.

**Boone County
Health Department**

Challenges

Resistance to change

Turnover

Training

Getting all of the right parties interested

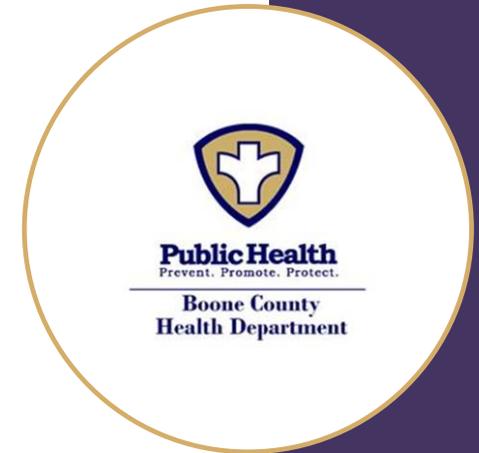
Gaining buy in from local leaders and officials

Convincing all to share resources and data

Applying for grants to align with a trauma-informed approach to our work

Successes

- Management Backing.
- Staff interest.
- Engaged Community Partners.
- Using Trauma Informed lens in our IPLAN.
- Merging concepts with County Comprehensive Plan.
- Networking with trained professional prepared to provide TA and WFD.



Recommendations and Advice



Public Health
Prevent. Promote. Protect.

**Boone County
Health Department**

- Public health can assume the role of connector rather than provider.
- Begin your partnership efforts NOW.
- Start educating your boards, councils, government agencies early.
- Be willing to push forward while not stepping on toes.
- Work to educate the public about trauma and creating a trauma aware and informed system.
- Work on the culture shift – new concepts are not creating more work, existing work needs to align under new concepts.

Challenges

- SEL/Trauma is only part of my role (1/6)... wish I could spend more time on this but...I have other responsibilities to the district.
- Students need this now... but it takes time to build... doing the best we can wishing we could do more.
- Society's understanding of student behavior and their idea of discipline (i.e. they should just behave or else they shouldn't be in class/school).



Successes



- Union/Leadership partnership... growing and learning together as a team... pooling our resources together.
- Health Department/School District partnership... perks up everyone's attention when they hear that we are working together... this must be something important then.
- Buy-in and support from our School Board.

Recommendations and Advice



- Utilize a framework of some sort (we used Trauma-Informed Schools/Practices...). This has helped greatly when we remind people "We are just in an awareness phase" when they begin to become discouraged on how far we still are from helping kids.

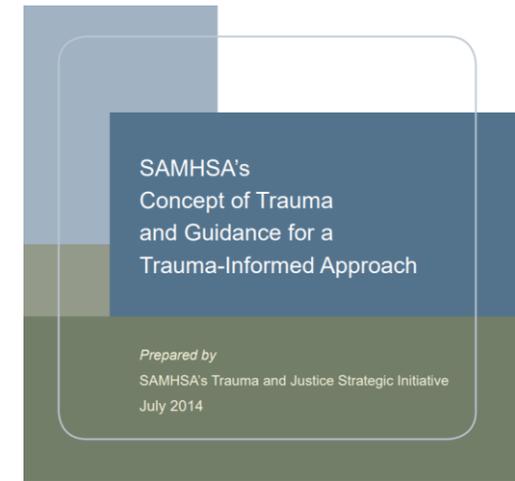
SAMHSA Resources

- Concept for Trauma and Guidance for a TIA:

<https://store.samhsa.gov/system/files/sma14-4884.pdf>

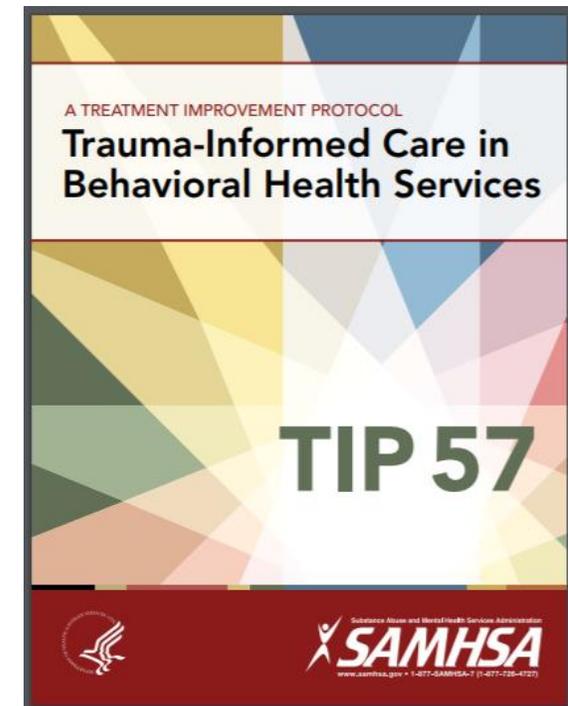
- TIP 57:

https://www.integration.samhsa.gov/clinical-practice/SAMSA_TIP_Trauma.pdf



SAMHSA's
Concept of Trauma
and Guidance for a
Trauma-Informed Approach

Prepared by
SAMHSA's Trauma and Justice Strategic Initiative
July 2014



A TREATMENT IMPROVEMENT PROTOCOL

**Trauma-Informed Care in
Behavioral Health Services**

TIP 57



Substance Abuse and Mental Health Services Administration
SAMHSA
www.samhsa.gov • 1-877-SAMHSA-7 (1-877-726-4727)



Associations' Resources

- IPHA Trauma-Free Illinois Initiative
 - Guidance for LHD on the Process of Becoming Trauma-Informed
 - Missouri Model used for development of tool.
- IEA webpage about trauma
 - <https://ieanea.org/resources/trauma-informed-practices-and-aces/>



ACESCONNECTION / COMMUNITIES / KANKAKEE IROQUOIS CARES (KANKAKEE, IL) / HOME

Blog Posts



Post

Questions?

Do you have questions? Need Help? Too many emails?



Please contact our community manager:
Kate Lanelle Reed



Additional Questions

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