TRAUMA INFORMED COMMUNITIES:
MOVING BEYOND CLINICAL SKILLS

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The Licking-Knox Counties’ Journey
Where Did We Begin?

**Knox County**
- Knox County Health Department
- 2013 - 2014 Community Health Assessment (CHA)
- Community Health Improvement Plan (CHIP)
- Prevention/Resiliency Planning Team – A3 Prevention Planning

**Licking County**
- Criminal Justice System – Licking County Municipal Court Adult Probation Department
- Joint planning for federal trauma grant - 2014
- Joint sponsorship of SAMHSA community presentation – Raul Almazar
- Development of Trauma Taskforce
Background

Mental Health and Substance Use issues frequently have roots in childhood trauma or Adverse Childhood Experiences (ACEs). ACEs include abuse; neglect; witnessing domestic violence; loss of a caregiver from mental illness, substance abuse, divorce, or incarceration; or poverty.

Knox County Issue: Mental Health and Substance Use Disorders

ACEs Iceberg:
- Early Death
- Disease, Disability
- Social Problems
- Adoption of Health-risk behaviors
- Social, Emotional and cognitive impairment
- Disrupted neurodevelopment

Knox County Adolescents in Substance Abuse Treatment Have High Rates of ACEs

- No ACEs: 15%
- 1-2 ACEs: 19%
- 3-4 ACEs: 18%
- 5 or more ACEs: 48%

N=73, 2015

Knox County Data
- 238 (2014) law enforcement responses to domestic violence (228 in 2013)
- Open cases of child abuse or neglect 524 (2014) and 540 (2015)
- Maternal smoking rate at delivery: 26% (2014)

Future State

Reducing ACEs Predicts Decreases in Harmful Conditions

- Anxiety (-56%)
- Mental Health condition Disturbed 14+ days of work (-62%)
- Alcohol, Heavy Drinking (-21%)
- Cardiovascular Disease (-26%)
- Cancer (-25%)
- Separation or Divorce (-33%)

Every Child is Resilient

- Connected to Competent and Caring Adults
- Competent and Able to Contribute
- Thinking and Self-Regulation Skills
- Positive View of Self

 aceS in Ohio: The rate of ACEs in Ohio is significantly higher than most other states

**Analysis**

“It’s not about what is wrong with a person, but what happened to them.”

**Countermeasures**

Building a Nurturing Community that:

**Supports Families**
Parents/Families develop skills which support positive development for their children.

**Supports Children**
All children develop age-appropriate competencies throughout childhood.

**Provides Trauma-Informed Services**
Residents access support and services that build resiliency and support recovery.

**Plan**

**Strategy:**
Parents/Families access parent education and community resources.

**Implement/strengthen universal child-centered programs targeting early childhood (focused on building resiliency skills which diminish the negative impact of early trauma)**
Recommended/Funded Programs:
- Triple P Parenting
- Family Foundations
- Active Parenting
- Conscious Parenting

**Identified Program:**
- Good Behavior Game

Lead Organization: Freedom Center

**Recommended Program:**
- Family Connects

Lead Organization: Health Dept.

**Implement community-wide initiative to become a Trauma-Informed Community targeting organizations which serve children and their caregivers**

Identified Approaches:
- Public Awareness Campaign
- Strengthening trauma informed organizational practices

Lead Organization: KHPP Resilience Team

**Programs Reviewed**

- 19 programs targeting children were identified and reviewed in the 3 focus areas
- All reviewed programs had research supporting the effectiveness of the program
- Recommended programs were rated and prioritized using a cost-benefit analysis; this analysis included impact on preventing/recovering from trauma, strength of the research, costs, and community readiness to implement
Knox County

- Trauma Informed Community – Walla-Walla, Washington as model
- Foundation funding of Triple P
- MHR funding of Good Behavior Game
- Development of community – wide resiliency resources
- Resilience (The Biology of Stress and the Science of Hope) Film – Shown at the Knox County Addiction Summit including a Panel Presentation and the Mt. Vernon City School Elementary Schools
Licking County

• Licking County Trauma Summit and OPODA Training and Work Group
• Our Futures Educational Committee and ACES Planning Sub-group
• Triple P and Good Behavior Game
• Licking County Trauma Informed Collaborative
Community Plan

• 5-Year MHR Strategic Plan

• Strategic Goal – Fund and maintain a high quality, cost effective service delivery system that is responsive to the needs of all Licking and Knox County residents.

• Objective – Advocate and support implementation of trauma-informed services delivery system.
Community Plan

• **ARTIC Scale** (Attitudes Related to Trauma – Informed Care) – valid measure of attitudes toward TIC. Administered to entire workforce of contracted MHR providers and Knox County Health Department, Knox County Board of Developmental Disabilities, and Knox County Head Start employees

• **Workforce training & retention**

• **MHR funded**
THE
RICHLAND COUNTY JOURNEY
The Past

2005 Trauma-Informed Cognitive Behavioral Therapy Training
- One and Done
- 80 People Trained
- No Follow Up
- Little to no evidence one year after

2011 Trauma-Informed Cognitive Behavioral Therapy Training
- Larger one day training (80+ People)
- Intimate 2nd Day Training for 2 agency teams
- Monthly phone supervision with presenter for 1 year
- Lasted until the staff turned over
2015 Hired Consultant from L. Harrison and Assoc. for a 21-Month Contract

- Combine Trauma-Informed and Recovery Oriented Approach
  “Addressing the influence of the past with a future focus”

- All contract agencies participated as well as the Board
  No favoritism, no punishment an “all in” approach

- Systems Approach
  “Fertile Ground Concept”
  Organizational Evaluations, professional evaluations

- Started from the “Top Down” with trainings and education
  Administration-management-supervision-line staff-front desk
  Community perception and internal perception
Richland County Trauma-Informed Recovery Oriented Community of Care (TIROCC is Born)

- All Agencies with influence from Peers and Families
  
  Representation built in to Contracts

- 5-Year Trauma Informed Recovery Oriented Strategic Plan
  
  TIROCC is driving decisions

- Changes to language
  
  Policies, Procedures and general communications

- Focus of Training
  
  Minimum of two TIROCC focused CEU’d trainings per year
The Future

- Public Awareness and Communication
  - New Multi-Platform Media Campaign
- Contracted Trauma Screening on all assessments
  - Use of the PCL (PTSD Check List) Abbreviated for adults
  - Use of the SCARED (Screen for Child Anxiety Related Emotional Disorder) for 17 and under
- TIROCC Recognition of Agencies with a push to certification
  - All participating agencies will be reevaluated in 2020
- New agencies will need to demonstrate TIROCC
  - Standardize procedure for evaluating future treatment agencies
- Branch to Community Partners
  - Currently trained in Trauma Informed Policing
  - Have Partnered with 211, Adult Protective and Juvenile Court
THANK YOU WE WILL NOW TAKE ANY QUESTIONS FROM THE AUDIENCE