Stories of Resilience
Creating Safe, Stable & Nurturing Environments for All Kids

ACEs and Resilience Statewide Community of Practice Event
October 10, 2018 • Pasco, Washington
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Background

Goals for the Community of Practice
Essentials for Childhood convened the second 2018 Community of Practice Event on October 10 in Pasco, Washington. The goals for the gathering were to:

• Create an opportunity to learn from peers deeply engaged in the work of building resilience and reducing ACEs
• Provide and grow shared language, models, resources, and approaches
• Identify how we can move forward boldly as a collective and see what the Community of Practice needs to be successful
• Connect state and community context

State Context
Washington is leading in so many ways and needs strong state-to-community partnerships to have the impact we want and need. Essentials for Childhood received several grants recently, building on our prior success and innovation. These are: Renewal of a five-year Centers for Disease Control and Prevention grant, Project Hope grant, and a likely Bezos Family Foundation VROOM grant to support positive parenting. We are also seeing alignment across the Department of Health programs and across the state on trauma informed care, as well as building solutions that are community-based and race and equity informed.

Agenda and Design
The Community of Practice is designed to maximize learning and connections among partners across the state. There are no keynote speakers, rather a set of participatory leadership and engagement strategies designed in alignment with the goals of the session and the opportunities before us within the state.

The day began with a pre-conference session on N.E.A.R. Sciences, presented by our facilitator Teresa Posakony.

The morning session used a Collective Story Harvest process to bring forward stories of breakthrough and emerging practice at different levels of system and in different parts of the community. We intentionally recruited a diverse set of topics and participants, self-selected the story to hear and had assigned “perspectives” to maximize learning and application in other contexts and situations.

The afternoon session included small group working sessions self-organized by topics generated from participants. Participants were encouraged to follow the law of two feet, “If you find yourself in a place you are not learning or contributing, move your two feet to somewhere you can.” The principles of open space technology guided the self-directed learning of the afternoon.

We also invited through the day insights and input for how we can strategically grow the community of practice, including distance offerings, needs and focus of future in-person gatherings.

Below you will find the harvest reports for each of the sessions. We hope these will inspire further learning and understanding of the work under way and the needs to boldly advance the efforts. The statewide stakeholder group will look at these harvest documents as part of building recommendations for the statewide Community of Practice in the years ahead.
Masa Dalera and Heather Jefferson first worked together in the Multicultural Center in Ferndale High School. The classroom consisted of students in grades 9–12 who were English language learners, as well as Native American students.

While working with Native American and English language learners from all over the globe, Masa and Heather discovered that teaching students English was important, but what was more important was loving them. They sometimes may have had to

Google how to help the students with their math or science assignments, but they knew how to make them feel welcome and safe; that they belonged and were cared about.

Masa and Heather shared with the disciplinary principal at the time that they “broke school rules every day” in their room: they fed students when they were hungry, let them sleep when they were tired, and let them cry when they needed to.

Their primary focus was to create a safe space and to build relationships. Masa and Heather built relationships with each other, with the students, and fostered the students’ ability to build relationships with one another. The classroom had one rule: Be Kind. The students embodied that over time.

There were students that attended the Multicultural Center who had high ACEs; students from Guatemala who were brought to the United States by smugglers; students from Haiti who were starving, malnourished, and neglected when brought to the U.S.; students experiencing systematic and historical trauma.

The students were sharing and teaching each other their world views. They learned that they had more in common with each other than they had differences; their experiences were human experiences. The students learned that their cultural identities and ethnic backgrounds gave them strength and resilience.
Ferndale School District Classroom (continued)

After two years the program dissolved. The following year the Ferndale High School received state recognition for an outstanding ELL program (they had more students test out of the ELL program than ever before.) Masa and Heather are clear that during those two years, they did not teach the students English as a primary focus, but that they were supportive, connected, and loving adults in the students’ lives.

**Question for Discussion:**
How do we change the system so we don’t quit because the school system is a punitive system?

**Speaker Comments:**
(We change things by) working within the system, making the system feel empowered.

Natives were sending their students to Ferndale School District because they believed the state school had higher test scores but they weren’t. How did the parents know?

**Questions and Discussion:**
Trying to rebuild what you did before? In a way, if everyone is good around the students, if everyone knows where their triggers are. Are the teachers okay?

Allowing them to come together speak their truths. I am a teacher not a psychologist. Allow them this truth. It’s ok, we do not expect you to be a psychologist.

It is the air you breathe. You need to be kind when you walk through this door.

See a brief video of Masa’s and Heather's story: [https://vimeo.com/299981517](https://vimeo.com/299981517)

**Question and Statement:**
Who is funding this?

This is personal. It matters to me. They are going to be taking care of me one day.

**Comments:**
We need to remember that they are the future. They are like growing trees. We are trying to help these children heal.

**Speaker Comments:**
Connected with Alaskan Initiative – if it’s an issue with me then it’s in my heart, then let’s sit with the people with the issue. The solution that is working is being able to use the asset-based solution. Being able to understand the uniqueness in each community.
Ferndale School District Classroom (continued)

I was healing in my mother’s land. I got this intense grief driving one day and I realized this is my mother’s grief. I started to heal. When you heal yourself you heal your ancestors. When you do it with intention to stay in that place. Who were you?

With intergenerational trauma there is also intergenerational wisdom.

We need to pay attention to the vocabulary we use for example, ‘restructured homes’ not ‘broken homes.’

Trauma responsive environment; the answers are in the community.

Thirteen percent native, 13 percent migrant predominant. The principal’s belief was that the students are “a part of us” not “us and them”, not “those kids, my kids”. What part do I have in creating that child into my neighbor?

Comments:
As we are trying to understand trauma not just the children have ACEs, but the teachers also have ACEs. Interesting how we talk about the children, but we need to reflect on our own bias. Just because we take the ACEs test and know the score. It’s not what happened in the past it’s what happens every day.

When you come together in gatherings, talking circles, storytelling helps people rise up at low cost, don’t need grants.

It really spoke to me when you said, “When you heal yourself ancestors heal themselves too.”

Speakers:
The power of healing is never too late. The story of the files of two boys that got mixed up: one boy would get in a lot of trouble and the other boy was labeled as being bright, the boy that was labeled as the troublemaker rose to the occasion when they thought he was the bright boy.

They had a troublemaker in class so they asked for his help. He not only sat down and became quiet, but he became the “Sergeant of Arms” in class and made sure the other troublemakers would follow the classroom norms.
Minerva Pardo originally came to Yakima from Mexico City. In Mexico, she had been an educator and after moving here, she began working with the West Valley School District as a translator. Her enthusiasm and passion for families is clear to all who meet her. District Assistant Superintendent Peter Finch saw this passion and offered her the opportunity to go through the National Alliance for Children’s Trust Funds Strengthening Families Protective Factors Framework training.

Minerva describes this three-day training as an eye opener and as the powerful connection between doing a good job and connecting in a way to truly prevent ACEs in families and communities. One of the conditions of receiving this training is to offer a training for others. Minerva and her superintendent wanted to act quickly. Two weeks after completing training, they planned to offer a seven-hour, Saturday training for their district. The response was enormous – 300 people registered and of those, 50 were Spanish-speaking. Minerva wanted to offer materials to the families she was going to train in Spanish and she set out on a whirlwind of translating materials. The National Alliance paired Minerva with a graphic designer to translate the materials for the event.

The training she received and has since offered repeatedly in her community was developed by the National Alliance of Children’s Trust Funds (https://trainers.ctfalliance.org) and is based on the Center for the Study of Social Policy’s Protective Factors Framework. In this research-informed, strengths-based framework, there are five protective factors that help to keep all families strong and developing health and well-being while preventing abuse and neglect.

These protective factors are:
- Parental resilience
- Knowledge of parenting and child development
- Social connections
- Concrete supports in times of need
- Social and emotional competence of children
Protective Factors in Spanish (continued)

Minerva’s passion and desire to provide the best materials for families, inspired multiple grants from the Yakima Valley Community Foundation to translate videos and the full curriculum and then to train ten additional bilingual trainers in the Yakima area. This work has led to travel around the state and to Denver, California, and Alabama. There were unique translational difficulties around the word resilience. Minerva states that there is not an equivalent Spanish word and had to translate the concept of “transform the pain.” Minerva believes that if you are not transformed, you are spreading the pain and that to be resilient, one must transform their pain.

Low test scores in the Latino community becomes a message that Latinos can’t learn. Good to hear that refuted! A loving, caring school environment turns that around! Low scores is an excuse! We have work to do!

Minerva stated that she “is so proud that here in Washington we have so much great work happening.”

The conversations around the protective factors have inspired multiple efforts around intersections in the West Valley School District. One effort partnered with four teachers at the middle school (4th and 5th grades). Their goal was to answer the question of “What are we going to do for kids experiencing ACEs and trauma?”

Their answer was to link them to services, including an after school program they developed to offer counseling and connections for students. This effort, CARE Team, has a PBIS Foundation with the supports offered as a Tier 2 intervention and usually begins with concrete support but results in greater connections and additional support.

These efforts combined are “small, but significant changes” and greatly impact their community. Minerva says the training, “has changed my life.”

The next event in October 2018 is a screening of the documentary *Paper Tigers* and a focused community conversation about resilience. More information on this and other workshops offered through the district is available at the West Valley School District website. For more information about this effort or to contact the amazing Minerva, her email is pardom@wvsd208.org.
Becoming a Trauma-Informed Health Department or “How the Healers Realized They Needed Healing, Too, and What They’re Doing About It.”

Public Health Seattle and King County received a maternal child health block grant and chose to focus on ACEs screening. A staff-driven ACEs collaborative asked, “Should we be screening clients for ACEs?” or “Should we utilize staff-client relationship to gradually learn client histories?” The team was immediately confronted with limited clinic time to gather information, and then, what to do with the gathered information?

The team chose to step back and define “what does it mean to be a trauma informed agency” rather than jumping directly into ACEs screening. The team also considered how to bring the grassroots initiative to the overall Public Health Department. A grant opportunity from the Kresge Foundation was identified and resulted in $150,000.

A new Interdepartmental Team was formed with representation from every division at all levels of the organization. The new team was empowered to lead and champion the initiative and would have executive management team support. A San Francisco consulting firm was hired that had successfully led the San Francisco Department of Public Health’s transformation to a trauma informed organization. An executive team was established that would meet quarterly to provide governance.

The team selected the following goals:
- Develop trauma informed guiding principles
- Integrate with the King County equity and social justice strategic plan
- Define scope, considering King County’s diverse population: urban, suburban, rural, with more than 100 languages.
- Recognize that trauma impacts systems, not just individuals

The fourth goal had particular significance to Public Health: an earlier budget crisis had rocked the organization to its core with layoffs, the threat of closing clinics, reducing services, and/or outsourcing services to lower-cost providers. The experience had been traumatic to Public Health staff and had not been forgotten.
Trauma-Informed Health Departments (continued)

Acknowledging that their organization had very much been impacted, as individuals and as a system, the transformation emphasis was placed on bringing trauma-informed concepts and practice to public health department staff by:

1. Developing training to create a broad range of knowledge, build a common language and context to build system change, develop a curriculum, and create a “train the trainer” program for each division that would provide basic concepts and create support for the initiative.

2. Establishing mini-grant opportunities to support trauma-informed practices that anyone could apply for and only required applicants to explain how it connected to a trauma-informed guiding principle and what they wanted to do with the money. Twenty-six grants have recently been launched. The Prevention/Communicable Diseases team used grant funds to paint a mindfulness room for the staff to provide a relaxing space for a high stress department.

3. Addressing Human Resources Systems and Policies to align with trauma-informed guiding principles by proposing changes to the grievance and investigation process that would place greater emphasis on restoration and repair of relationships, in addition to hiring and recruitment practices and policies.

Reflections, questions, insights from the listeners:
How did you get buy-in from administration?

A department manager who was part of the executive team was key. Executive management needed clarification i.e., understanding what we are trying to do. The interdepartmental team was provided access to quarterly executive retreats to obtain leadership buy-in. Some executives did react with “is this the flavor of the day” skepticism/can’t I just have a checklist. Also, the grant opportunity made ACEs concrete.

What’s happened with the training?

Training is just being finalized; the consulting firm is developing the training curriculum.

How did you share context for the mini grants with staff that was not familiar with ACEs/trauma-informed concepts?

The interdepartmental team worked as ambassadors holding information sessions and coaching those with less exposure to the concepts.

How does the mindfulness space work?
What are the room logistics/scheduling?

Three separate groups created mindfulness rooms – each has its own rules/processes due to varying facility requirements.

Listener observations:
For small organizations the dissenters become “heavy”. There are not enough champions.

How does this apply to your work, or other work in the state?

Benton/Franklin County’s Strategic Plan included equity and health for the first time and focused on an equity statement built into a trauma informed organization.

Spokane has an Equity Work Grant, has 25 equity champions and has added 25 more for training.
Trauma-Informed Health Departments (continued)

Closing comments by storyteller: 
ACEs screening: a decision was made not to screen ACEs; instead used the block grant to focus on becoming a trauma informed agency. Some groups within the department are screening, some are not.

Staff was not required to take resilience or ACEs assessments; the population-level ACEs is the “why” vs. the individual experience of adversity.

Closing comments by community journalist: 
What struck me about the Seattle/King County Public Health Department’s story was that the movement to become a trauma-informed agency began as a grassroots, organic effort to better serve clients that have experienced adversity. As the initiative gained steam, the grassroots team recognized that the engagement of the overall department would be required to achieve greater impact. But not only that, in the process of defining what to do for the community, a recognition arose that the organization, and its staff, had its own healing to do before it offered these services to the broader community, thus the internal focus first.

Public Health has shaped its initiative to be highly relational and has focused on being inclusive, allowing its staff to experience what being a trauma-informed agency could look and feel like with its mini-grants, and studying the organization’s systems that are not in alignment with its trauma-informed principles.
Moving a Community to Action on Resilience and ACEs in Walla Walla: The Story of the Community Resilience Initiative

Many years ago, when partners in Walla Walla started learning about ACEs and resilience, they wanted to get the word out and have a community conversation. They found a receptive audience in professionals and providers. Walla Walla Children’s Resilience Initiative (CRI — name was later changed to Community Resilience Initiative) was formed as an informal group connected to more than 30 local agencies.

Initially, these partners found it was harder to engage parents. CRI wanted to help parents understand ACEs and how their own ACEs might impact their parenting. Teri Barila shared strategies and materials CRI has created and used over the years to engage parents and community members and activate them around resilience and ACEs.

LESSONS:

Make it fun, appealing, and visible.
- They created games, decks of cards featuring resilience building blocks, a perpetual calendar and other products (see their website: www.criresilient.org) and fun activities including a community treasure hunt and games to use the Resilience Trumps ACEs playing cards.
- They give bumper stickers, temporary tattoos, bookmarks and other materials with graphics to appeal to parents and children.
- They post banners in downtown Walla Walla.
- They hold community media festivals and arts extravaganza events, among other activities.

Reach people where they are, in accessible language.
- They give out a New Parent Guide in the hospital and tip sheets at community events.
- All materials are available in English and Spanish.
- Stick to simple, core messages, starting with brain states.

Involve the audience in product development.
- Teens in the school developed games to play with the Resilience Trumps ACEs cards.
- Teri always responded to parents questions and needs to try to develop new products to help with “common language” to build vocabulary and fluency in these topics.
Community Resilience Initiative (continued)

Embed the work across different sectors and keep working with the changing landscape.

• Community is critical. No one agency or sector can do it alone. The amazing success at Lincoln High School was possible because of community support, especially the Health Center next door and the support CRI was providing through trainings and engaging with more and more community partners. Trainings are more effective with cross-sector audiences.

• They worked with the Head Start Parent Council and developed a new way to reach out to parents using CRI’s materials and with Sesame Street materials (community toolkits created by Sesame Street).

When you heal from your traumas, you allow your ancestors to do the same. When we work with people we need to be present for them, to do that one needs to heal oneself first, so own trauma doesn’t get in the way.

— Heather Jefferson, Lummi Nation

• Three years ago, they changed their name from Children’s Resilience Initiative to Community Resilience Initiative. That clarified what they were already doing, working across the community to support children.

• Recognize that to keep on top of a changing landscape and sustain the work as partners change, you need to embed the work broadly and keep building relationships. They’ve had multiple school superintendents and have reached out to each one with varying success. The current superintendent has been very receptive and built CRI into a five-year strategic plan when staff said ACEs was their #1 area of interest. The school board voted unanimously in 2011 to close school so that teachers could go to a training with Dr. John Medina (author of Brain Rules). This was the first time the district had ever closed school for a community event.

KISS — Knowledge, Insight, Strategies and Structure approach.

There is a sequence from learning to action to change.

1. Start with Knowledge.
2. To act on that knowledge and change mental models, it takes Insight.
3. To pick effective Strategies, they must be informed by insight.
4. Work on policies and procedures to change the Structure.

Make it a regular thing.

• October is Walla Walla Resilience month. Every year they get a proclamation from the city and county, hold multiple events, and put banners on main street and inserts in the newspaper. CRI is trying to set social norms and expectations that everyone knows and benefits from learning about ACEs, brain science and resilience.

Use data to focus and engage funders

• The Healthy Youth Survey is a great source of data, including information on protective factors in youth grades 6 through 12. She has used it to reinforce messages about hope and healing. For example, when teachers address bullying, grades improve. And when teachers call families to tell them their child did something well, grades improve. CRI has a long-term relationship with evaluation and research to assess how we are learning. The website includes their research findings (with Dr. Dario Longhi and others).

CRI puts on an annual conference, can provide trainings, and sells products. The call for proposals for the 2019 conference closes November 15, 2018. For more information go to www.criresilient.org.
Moving a Rural Coalition Forward

Community members attracted to the area because it is isolated and the housing is affordable. The area was originally set up as a resort town for winter sports, but the crowds didn’t appear. Distance to anything else like a grocery store: 45 minutes to an hour drive.

There was no access to state services and few if any community services.

The catalyst of the change was a high profile child abuse/neglect case in the area that was rooted in cultural differences. CPS got involved at that time.

CPS hosted a coalition: Family to Family. CPS was involved in the community for about a year. During that year information was gathered about challenges but no action was taken. No funding or support for the community was put into place.

A partnership was formed among the school district, Community Action Partnership, Health Department, and Whatcom Family & Community Network. They took a year-long break to think about how to start and what was needed.

When Kristi started her job she reached out to the partners and they re-convened the partnership. They used the Art of Hosting to create a space where everyone was a leader. Everyone is heard. Creating spaces where no one is left out and they are all thinking of solutions.

They looked at the community as a living system from conception to birth- development- learning- maturing-composting and rebirth, etc.

Family to Family was composted. They picked up the good parts, “networking,” and continued that with new methods. The pieces of the community puzzle changed but still fit together in a new way with new pieces.

Convening was important! Service agencies, providers and neighborhoods are showing up now. The magic was bringing everyone to the table. Everyone does contribute and connect to everyone else. Their slogan is Better Together!

How to reach families was an issue. Communication via phone/internet are weak so local newsletters work well. They are in the local stores, gas stations, etc. Most people drive 40 minutes to the closest resource or more like 120 minutes round trip.

Big challenge was letting neighbors know there was a meeting and where. They started out with a lunch meeting and 1 to 5 attended. Now it has been three years of having quarterly meetings with food and 15 to 30 people attend.

An organization provides the food. They have a round table discussion about concerns and what people are doing. They spend time getting to know each other. The group is focused on solutions to identified problems and how to use existing good things (i.e. natural beauty of the area) to build solutions (incorporate in the solutions). For example, an issue is dumping/litter — not use scarcity, but abundance to get things done.

They used the Community Capacity Model to build community as a choice.
Moving a Rural Coalition Forward (continued)

Even people who want isolation still want community (to build neighbors). The community benefits from everyone knowing each other.

They started a Pro-Action Café at the end of their meetings where they draw on a whiteboard two sections: What’s Going On and Hopes & Dreams. They want to hear ideas for both sides. They bring both ideas and solutions.

People came to action. Example: Seniors that don’t drive but need services. How to get their support services? A group was formed to meet with the seniors and help them together.

Six groups have been created from the Pro-Action Café. More groups are growing.

Kristi sent out emails to agencies and did an e-introduction of agencies and residents to leverage resources. They also implemented community meals. Not just for the homeless and low income, but for the community. They were inclusive as a gathering place. The meal places were moved monthly. The firehouse — school — etc. Then a second group started weekly dinners and now people have both options.

The coalition created a placemat to use at the meals that list many of the purpose and services offered by the coalition.

A challenge is there are cultural communities within the communities the coalition serves. There are Slovak and Spanish communities and bringing these communities into the coalition is a challenge.

What is the coalition doing? Printing materials in Russian and Spanish. They are trying to change the stereotypes of these groups through knowledge and sharing community. They are seeking acceptance without shame or being shunned. They learned to be educated, open, and compassionate and work on solutions to the issues.

They used the REACH model (Racial & Ethnic Approaches to Community Health). They recognized the culture of the coalition was different from their neighbors’ culture. They found uniqueness and commonality to be able to understand each other.

The coalition received a grant for community health and wellness work with the school district. They have used the grant for training on ACEs, suicide prevention, and Darkness to Light. This is all the result of networking and convening!

QUESTIONS AND COMMENTS:

How does this apply to our work and work in the state?

Our communities in Asotin, Garfield, Nez Perce, and Latah counties have similar pockets of ethnic communities and rural areas without access to resources. Even in our town centers we don’t have an abundance of resources for community members. Stretching our vision to focus on solutions instead of rehashing the scarcity is important and helpful. Getting more families and neighborhoods involved is also key to our grassroots efforts to raise awareness of ACEs and build resilience.

• Art of Hosting – there is an online training about this and community process inclusiveness – Verbal Up and Get Ownership
• Hire for jobs from within the community. This creates connection!
• Use the neighborhoods to get the word out about services. They ask someone in the neighborhood to invite their neighbors to their home and this is where they share services and get to know each other. Use a BBQ setting.
Moving a Rural Coalition Forward (continued)

• Important Note: Don’t skip time at the beginning of the meeting to connect with everyone and just introduce, chat, and get to know each other!

CLOSING COMMENTS:

I really enjoyed listening to Kristi even though I was writing as fast as I could the whole time. Her story was well organized and covered a great number of helpful suggestions and lessons learned. I got several takeaways from this session!
Bridging Silos in Clark County: Connecting the Dots with Play-Doh

After introductions to the group, everyone was invited to grab some Play-Doh and other toys on the table. Delena let everyone know that her style of storytelling was messy and chaotic. I am going to be telling it as a 10 ACEs kid. She would try to keep a lot of “I’s” out of it – but understand that she is telling the story from her personal perspective.

People doing this work need to remember that we live through and remember experiences. It is sometimes uncomfortable and awkward, but the best connections are with people that can be both personal and professional. As the community journalist, I took the perspective of synchronicity and magic and became part of the background and watched the story unfold.

Delena asked each member of the group to take a container of Play-Doh. “I said we were going to play and get messy. I would like each of you to make a representation or a symbol of something that builds or represents resiliency.”

Delena starts her story reminding the audience that people latch on to relationships 150 percent of the time. This is one of three reoccurring threads.

“At 28 years of age, I was blindly walking the streets of Spokane and found my way to a park. My sister had just died. I was recently divorced. I was feeling emotionally lost. At this same time, I ran into these two people who could see I was upset and struck up a conversation with me. They told me they were working on ACEs – I asked what does that stand for and they told me – Adverse Childhood Experiences. I told them – yeah, I know a lot about having an adverse childhood experience. My mom was bipolar, single, divorced, a crack-head drug addict that eventually died of AIDS. I had lived in multiple foster homes and my sister had just died. I scored a 10 on the ACEs questionnaire. These ACEs people were Roy Harrington and Laura Porter. Roy as it turns out later knew me and my case from his work with foster care.

They listened while I told my story. In fact, they kept letting me talk about my story for six to eight
Bridging Silos in Clark County (continued)

months. By working with them I got to see me differently. I was curious about that. I started to build relationships all the time. Laura and Roy were flexible and allowed me to be curious and me. I joined Spokane Family Policy Council and became part of this project. This work energized me. I felt connected. I found out I wasn’t broken. All the shame I had been carrying unraveled. I shifted my thoughts from what is wrong with me to this is what happened to me in my life.

“I met a boy and enrolled in WSU. I moved to Vancouver and married the boy (who I’m still with). When I got to college, I enrolled in human development and was hungry for them to teach me more about understanding and helping others with ACEs – they didn’t. I felt robbed. I learned a lot about Bronfenbrenner’s ecological theory, though, and that you are a product of your environment.

After college, I worked for non-profits whose mission I thought was to be supportive of people with ACEs – I was wrong. My perspective of the people and the programs that were supposed to be supportive were that they were toxic and judging, rigid and isolating.

In 2014, I lost my shit – I left the non-profit world and invested in my own consulting company – Way Enough Decision Coaching – based on rowing and finding direction in your own life. I knew from my work with Laura and Roy that helping someone shouldn’t hurt them. Everyone should feel valued. All people should be able to talk about your lived experiences – be able to be vulnerable and feel safe with boundaries.

“My lessons for agencies: We need to establish guidelines and be mindful that we all have different lived experiences. Power disparities hurt – get rid of the “us/them.” You don’t have to be ACEs trained to know how to do this. Stop being a robot professional. I can learn how to be vulnerable – but I must feel safe before I will open up. Need to remember that we are struggling to keep our shit together. As we grow, we do learn. If it wasn’t for the positive relationships in my life, I wouldn’t be here. I am grateful for Tory, sharing dinner with her and her acceptance of me, her willingness to let me be my messy self. We don’t choose to be traumatized, and it’s not your fault that you weren’t traumatized.

“In our own ways we can build resiliency. Since everyone has their Play-Doh – I would like you to tell me how the thing you are building represents resilience. I will in turn weave my story into your representations and try and connect.”

PLAY-DOH CREATIONS:

Talking Stick (Listening and hearing what people are saying)
• Having people truly listen and hear provides a safe place to be vulnerable.

Heart (Love and understanding)
• I saw dysfunctional families still show love to one another. Understand that all families love one another – it may not look the same as the way you show it – but it’s there. Look to see how the family members connect to one another. Acknowledge them.

Communication (Teach children about using snail mail, writing thank you notes and letters, going to the post office, putting letters in mail and waiting for return letters)
• Understand that we have not grown up with the best communication, we don’t use our best words to describe our emotions, we cuss. Teach us how to connect to other people. Give us boundaries that will keep us safe.
Bridging Silos (continued)

Exercise (Self care)
- Change comes – acknowledge the changes – there will be times when we slip back. It must be done at my own pace. Acknowledge and respect changes in behavior.

Cube (Structure)
- Don’t expect perfection. Allow flexibility to find balance in structure and to experiment and be curious.

Smiley Face (Coming to work with a smile, being there for them)
- We don’t really know what’s going on behind the smile. Lots of insecurity and conflict that change brings. Pay attention to our face – we have learned to be people pleasers – check in to make sure the value is something they value. We want to be seen.

Connect (Positive relationships with others)
- The point is that positive relationships are the connectors. Connections are extremely important – 10 ACE folks learn to challenge folks – that’s our safety. If you are a professional robot that is giving lip service, they will spot that it is not safe. They will not share and a positive relationship will not be formed. You can still be professional and personal. Show me you care about me. Be personal and professional.

Heart (Love)
- Be humble less judgmental in your work – shift and look to see if your heart is open, are you ready to honor and connect?

Cat (Foster care system)
- I saw a child whose parent blows off their sixth birthday visit. I asked child what their favorite animal was and the child said a kitten; then clarified momma cat and kitten – still included parent even though they were disappointed.

- Support and relationship. We don’t know her ACEs inside. I got to play both sides – I got to learn and listen better. Children need our support and they need to be able to continue to navigate through the mess.

Brain (Delena)
- Look at the resources in your community. Look at the different perspectives. Don’t isolate because we are the clients. I sometimes wondered if I was being given a space at the table as the professional acting client or as a professional. We need to be truly recognized and authentically included – need to be at the table in order to be able to make change. The stoner parents need to be invited to the table for drug prevention efforts. They have strengths and creativity that changes the conversation and gives us a different perspective than our own. You need to hear their voices – don’t isolate even if you don’t agree with them. Two of our prevention efforts – Weed Can Wait and Youth Now – gets the conversation started from the stoner parents and youth perspective. It gets the real conversation started. If you are a low ACEs person who is not listening, you are being judged by the high ACEs people.

REFLECTIONS, QUESTIONS AND INSIGHTS

- Appreciate openness and vulnerability to share.
- Appreciate the conversation and work with people.
- Love your “I’m owning it and “I’m working on it,” authenticity.
- Love the creativity and messiness – bringing the voice of the 10 ACEs
- Using real words – real rules.
- Loved the messiness of it – getting into the story and realizing you don’t have to be perfect, no one is expecting that – expecting us to be present and real.
- ACEs is personal – need to feel safe in order to show vulnerability.
Bridging Silos (continued)

How does this apply to your work? Or work in the state?

- Listening to others’ stories is personal, gives us ability to see how we can do better as professionals to engage our whole community and see different perspectives.
- Provides us with the ability to convey the deeper truths and what professional skills are needed in order to be provide a safe, positive and supportive community that is welcoming.
- In discussion about positive relationships several ideas came up:
  - Connection room being done at one of the elementary schools in Clark County – educators and paraprofessionals have a room where kids can. There is a dedicated connection room in an elementary school in Clark County. The connection room is a space where educators and paraprofessional can work together to build positive connections.
- Connecting the Dots – School improvement work done in early 2000 using SEARCH institute and ASSET – staff place dot next to each student that they have a positive relationship with. The data was correlated with other factors (attendance, discipline, honor roll list and school testing scores) to show importance of connection.
- Positive mentors in schools.

Closing comments by storyteller:
- Our community resilience mantra – We can heal us – there is Life after ACEs
- Don’t feel sorry for me – I mapped out timeline by age when ACEs occurred in my life – many before the age of 7. I also went over and beside it wrote in my resiliency at the same time. Resiliency is about relationships and connecting the dots. At various points in my life when I experienced an ACE – I had positive counterbalances – and healthy systems.
- Storytelling is chaotic, like us. Telling our perspective lets us know you value us. We are sometimes socially awkward, we have our own experiences as our teacher. In order to engage, you have to be able to take off your professional hat sometimes and be real and personable.
- Three overall threads:
  - Be personal and professional
  - In order to be vulnerable, have to feel safe
  - It’s all about positive relationships and belonging

Community Journalist comment:
In order to make positive changes in our lives, we must have hope. One of the first things that Delena stated was her shift and change from “What’s wrong with you?” to “What happened to you?” That came from people in her life listening to her, caring about her, letting her be her authentic self. I learned that active listening and allowing someone to tell you their story is an important part of healing. Providing services that we feel are best for someone and not hearing and honoring their perspective stops the conversation and may do more harm. As a provider of services and someone who makes referrals to other professional agencies – I often hear from clients, “I won’t go there, they don’t listen to me,” or “they don’t care” or “I’m not going to jump through their hoops.” This session provided me with hope that when I hear those statements again, I really do listen to what they think would be best for them and their children and allow them a safe place to be vulnerable.
Shifting the System by Shifting the Mindset: Asset-Based Community Development in Bellingham School District

Geof began our discussion with a beautiful country-western song he wrote about people living with HIV/AIDS. He said his work has been influenced by the mindset of going into a community with a question and not an answer, and that all people have gifts to share. It is our job to work to identify those strengths and gifts through building a relationship with community members in order to help the community change for the better.

Geof also brought to our attention how communities are equipped to solve their own problems from within, and it is our duty to help the community navigate the healing using preexisting resources.

• Metaphor: Physicians don’t heal the body, they just set the body up to heal on its own.
• Healing comes from within the community.

Geof explained there is a need to shift the language surrounding trauma and that ACEs scores are not a diagnostic tool.

• In addition, Geof said “I understand things from my cultural context” and that much of the ACEs research is whitewashed. We need to speak using the community’s language, and we learn that through the stories community members tell us.

Geof then expanded on “Asset-based Development Work”.

Just before introducing his story, Geof mentioned we must be able to calm our minds to pay attention and listen to people. This can be interpreted multiple ways depending on the context, but it rings true when creating positive learning environments for children. In order for a child to truly listen and learn, they must be able to calm their mind. By acknowledging that every child has a different background, we can work to shift the system and ensure every child feels safe and has the tools necessary to learn.

Geof’s story was about the Bellingham School District. When a new principle was hired, they noticed the gap between white and Latino student’s scores was a striking difference of nearly 20 points. Bellingham School District is known for having phenomenal teachers, but the data still showed a systemic flaw. Data showed that teaching content the exact same way to all students detrimentally affected ESL/ELL/low literacy students. These findings prompted administration and affiliate organizations to create, conduct, and analyze
Shifting the System by Shifting the Mindset (continued)

results of the Healthy Youth Survey, which surveyed ACEs scores, students’ overall sense of belonging. They also correlated between drug use and school engagement, and between suicidal ideation and relationships to others at the school, etc.

With that data analysis, the school district moved forward to change the way teachers conducted classroom activities. Teachers received trauma informed training and training on how to teach to ESL/ELL/low literacy students. In addition to training, the schools restructured their idea of school punishment. The research showed that children who were suspended more did worse in school. The district realized that students are better off cared about than not, and sending children home for bad behavior is only harming, not helping, the child. Out-of-school suspensions went down from 152 to 8 in the next school year. In addition, the gap between white students’ and Latino students’ scores are down to 2 points.

Bellingham School District has shifted their mindset on punishment and “trouble children,” now aiming for every student’s story to be known by at least one trusted adult because every student deserves to feel loved and cared about. Geof finished his story with a powerful statement: “If the system says the children are ‘bad,’ the system isn’t working.”
Who Heals the Perpetrators?

This story was exceptionally personal and based upon a life experience that Deb had with her family, specifically her father.

Deb was raised in a family with five children. One brother and four sisters, of which Deb was the eldest. One sister has since passed away.

Apparently there was a certain level of manipulation present from both mother and father while the family was intact. The father left the family after a period of time. Eventually father was unable to care for himself and Deb became his caretaker.

Part of this story is a little unclear. Before becoming her father’s caretaker, Deb was drawn to studying manipulation and manipulators perhaps because of personal insight, and sensing that this was a factor in her childhood. She was just starting to research and try to understand the mechanism of manipulation, and narcissism when she started to care for her father.

Caring for her father was much more involved than just daily physical care of her father, it also included caretaking of finances, rental properties, etc. In addition, her father provided her with the unlimited use of a vehicle, power of attorney to handle financial matters – all paid for with only free rent, no other payment for her services.

Deb’s father would frequently berate her, make her feel incapable, useless, and devalue her contributions to his wellbeing. Gifts that he was giving her, were not truly gifts, and were never really made hers, they were only given conditionally but without her being aware this was happening. Her investment in caring for her father was done without reservation.

All these responsibilities were taken on with care and attention to detail. In the midst of this, for reasons unknown, her father accused her of mishandling his finances and stealing from him regardless of the proof she could provide of her honesty in dealing with his finances. She became jobless and homeless in the period of one week.

A catalyst for some of this was her recognition of his manipulations of her. His behavior would devalue her, and she would push back. When she learned that her reactions made the behavior worse, she learned to not react. Not reacting created a far more negative return from her father that culminated in the accusations against her – all accusations that were never proven as she had not done anything wrong.

Ultimately, her message is that she would like ACEs to provide more information about how to recognize familial manipulation and how to guard against it as she had a difficult time finding resources to help her understand the trauma she went through with her narcissistic and manipulative father. Only one sister has ever asked her for her side of the story. The relationship between siblings remains fractured. Her father is now passed on.

Deb spent the better part of a year dissembling what had happened to her at the hands of her father. Her abuse was not physical or sexual, it was completely emotional. Finding a counselor to help her work through her trauma was also challenging and many she met were unable to help. (According
Who Heals the Perpetrators? (continued)

to her statistics people often see up to six therapists before they find one that understands the traumas they experienced and how to help heal them. Some therapists can actually cause additional harm.

Deb’s major concern is who heals the perpetrators? With three out of five people having been victims of some sort of physical violence from an intimate partner, or family member, and therapists not necessarily being skilled to work with a person affected by these behaviors, can we find or secure a better method of actually healing those affected and those affecting? Can we make Washington State an ACEs, trauma, and perpetrator free zone? We need to go further than just being ‘trauma informed’ and start on a goal towards being ‘trauma healed.’
Small Group Working Session Notes

Latino Providers United

Convener: Minerva Pardo  
Community Journalist: Alicia Martinez

Challenges and Opportunities:
- Lack of bilingual/bicultural providers
- Family education – parenting
- ACEs Education with families
- Learn/share resources among providers
- Limited education of some families
- Gap in resources/access to services
- Involving seniors in mentorship
- Spanish classes for indigenous migrants
- EST for adults and new migrants
- “Fear” of immigrant experience
- Isolation

What Helps: Understanding unique needs, focus on education and solution. Fatherhood program involving fathers in an active role. Focus on the whole family beyond the child: mother, father, grandmother, aunt, uncle, etc.

Recommendation: Latino ACEs Networking Group: Latino providers want to support and learn together. Great caucusing today and beyond!

Trauma Informed Bossing

Convener: Delena  
Community Journalist: Carla

Challenges and Opportunities: How do we move beyond “Safety First?” What one small change in policy/practice would have the ripple effect of wellness in the workplace?

- Focus/assume positive intent from bosses
- Limitation within bargaining units
- Emotional safety
- Time for reflection
- Acknowledge contributions
- Employees know job best

What Helps:
- Culture: Values wellness/vacation, two-way communication, 360 interview, values priority setting and self-care
- Human Resources changes in hiring practices
- Better change management
- Assure staff are taking vacation time; encourage and allow it
- Actively show you trust employees
- Allow alternative work schedules and/or telecommuting
- Don’t be manipulative – realize behavior is happening to ensure safety and survival
Moving a Community Coalition Forward

**Convener:** Debbie Gaidos  
**Community Journalist:** Chris Schranty

**Challenges:** There is no funding, all volunteers, need sustainability. There are thousands of resources we are working in silos and there are too many groups. Not moving forward.

**Opportunities:** People collaborated, resources shared, statewide 2-1-1 call center supportive of ACEs Coalition. All agencies coming together, to create common language. Early learning coalition bringing speakers and training, collaborating group within the community and business (as opposed to several small groups working in silos).

**Key Connections, Models, and Resources:** Fee for individual/agency. United Way, Early Learning Coalition, ACEs support group, bringing in trainers together, website, Partner organizations co-funding collaboration, an open source website. See the Lewis County Valley Resilience Coalition website as an example of a coalition site.

**Key Needs:** Funding community coalitions. How do we quantify stories, how to create a website, getting NEAR trained, Lewis County wants help.

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Equity – What and How

**Convener:** Kristi Slethe  
**Community Journalist:** Daniel Torres

**Challenges and Opportunities:** Equity is everywhere, well known definitions but not broad buy-in. White privilege pushback or thinking we’ve got it covered. If it’s equitable is it also trauma informed? ACEs study left out equity, also can feel like a label. Use strength of prevention slide. Trauma informed sometimes seems like “word of the month.”

**What Helps:** Accountable Community of Health requires an equity component, they pick the social determinants of health but need consumer input. Money for rural communities is more per person. Equity language in contracts. State equity workgroup. King County’s Race and Social Justice Initiative infrastructure helps and didn’t allow for siloed efforts.

**Key Connections:** Yakima tribe and regional Accountable Community of Health partnership, handout of key resources.
Social Norms

Convener: Marilyn Gisser
Community Journalist: Courtney Jiles

Challenges and Opportunities:
- Negative: People don’t seek out child protective services (CPS), mental health, parenting, etc. How do you change this to positive?
- Relationship is important, meet parents where they are.
- Want to see parenting classes as a norm for all parents when child is born.
- Positive example: New Horizons alternative school – love notes – work with teen parents, space for and resources to advocate for what they need. Have a day care. Teach how to navigate the system. Don’t blame and shame; include moms when reporting (domestic violence and Child Protective Services).
- Do parenting in childbirth education, more time for and focus on dads is needed.
- Change norms around social using positive reinforcement. When you see a parent do something well in public make a comment.
- Parenting class only for “referred” parents (troubled or struggling parents) perceived norm is you should know how to parent.

What Helps:
- Okanogan offering Parenting with Love and Logic for everyone. Prevention coalition there has adopted Parenting with Love and Logic.
- Needs to be unity between what teachers are teaching and what parents know (example: nutrition).
- Peer learning is important (example: teen parent)

Key Connections (to People, Ideas, Models, Resources):
- “They don’t come with an instruction book.”
- Another norm to promote – all parents are literate and like to read to kids. Example: receive a book in hospital.
- Positive norm that is working – not smoking near children.
- Community baby showers for first time parents; girls circle and boys council.
- Drug and substance coalition and suicide prevention groups.
- Strengthening Families has been a good program for families.
- Reach out to MCOs, they can be helpful in engaging parents.
- In England, the norm is to send a nurse to visit first-time parent once a week for the first six weeks.

Key Question:
- What’s missing is ACEs and Resilience workshop for parents and families.
- Family Policy Council used to bring in more classes and workshops for families. Example: taming the dragon.
- No longer have parent helpers in the classroom.
- Hold Parent Advisory Committee meetings.
- Churches can be big supports in community.
Early Childhood Mental Health Consultations

Convener: Janet
Community Journalist: Larry Alwardt

Challenges and Opportunities:
- Consultations are difficult
- Training for caregivers of children with behavior challenge is needed
- There is a decrease in the number of providers willing to take subsidies
- Many children are not in the system
- Waitlists for licensed childcare
- Structural inertia

What Helps:
- Consultation support
- Sufficient number of licensed daycare providers
- Coaching staff and interaction and training for childcare providers
- Developmental schooling and screening

Key Connections: Head Start, Birth to Three

Abortion and Trauma

Convener: Gretchen Sewart
Community Journalist: Kaylee Wells

Challenges and Opportunities: Abortion can cause trauma or be a result of trauma (“forbidden grief.”) Society doesn’t allow for healing after abortions. One of four women in the U.S. have an abortion or will have an abortion. Abortion is very politicized. Post abortion recovery can give people hope.

What Helps: Compassion – regardless of the reason for the abortion. Need time for self-awareness and reflection; there can be strong emotions and grief after miscarriage and abortions.

There is a lack of resources. One good resource is Forbidden Grief: The Unspoken Pain of Abortion.

LGBTQ Inclusion

Convener: Rebecca Schmieman
Community Journalist: Kaylee Wells

Challenges and Opportunities: Lack of inclusive language (pronouns and assumptions), lack of support in medical field.

What Helps: Sense of community, a place to gather and meet together (not at a bar), a place to bring in youth, too.

Key Questions: What supports exist for LGBTQ community?

Who is Healing Perpetrators?

Convener: Deb Blakeslee

Challenges and Opportunities: We can’t jail our way to success (undefined). How can we bring families together? There are not enough counselors to help. If perpetrator goes to counselors our mental health services are negligible.

What Helps: Social services (whatever they are). Look at costs and new models of care. Face the fact that perpetrators need help. Key connection is someone safe the person can trust. To perpetrators ask the question, “what was your family like?”
Mental Health Supports for Students and Families in School Settings

Convener and Community Journalist: Ruvine Jimenez

Challenges and Opportunities: Lack of inclusive language (pronouns and assumptions), lack of support in medical field.

Carolyn Cox was hired by Pasco School District and works at New Horizon High School. New Horizons High School has a contract with Comprehensive Health for a mental health counselor twice a week in addition to a drug and alcohol counselor. They are starting groups’ twice a week for marijuana, meth and cocaine. They provide office and space.

They have a lot of students living on their own. This gives students an option to see a counselor at school. If the student needs medication the school nurse can facilitate and they can refer to a psychologist.

Mr. Peralta worked at PHS to do research on their high absentee problem. He used a project management approach. He looked at 20 students with perfect attendance and asked them a series of questions such as:

- When was the last time you hugged your mom?
- When you graduate who do you want to see at your graduation?

Seventy five percent of chronic absentee students lived in chaotic home environments, high poverty, single parent homes, two-parent homes with chaotic home environments, stressors at home. The answer: strengthening families, resilience support system.

Southwest Washington Accountable Community of Health, how can we harness that interest into ACEs, funding resilience programs, media campaign, social media, and public awareness announcements?

Ninth Grade Transition

Crises referral for students take too long. By the time a student gets referred to support off campus because possibly thinking of suicide they either go through with it or they no longer are thinking of suicide.

Counselors need room in school for mindset reset time. (New Horizons has a Mindset Reset Room that sometimes even staff use.) The room can be used for meditation, self-soothing skills.

Mindfulness for students

Dialectical behavior therapy (DBT)

As soon as students age out, where do they get supports? There are no supports.

Yoga moves — breathing techniques, brain gym techniques — art therapy, students need recess.

No restriction on foods, growth mindset posters — videos — you are more than an ACE score.

Tri-Cities has community members that are certified in many strengthen-based programs but there is no funding to put on community trainings.

Learning social emotional connections from toddlers to teen.

Authors Ann Corwin and Debbie Johns curriculum.

Need funding to provide food, childcare facilities, training time.
Mental Health Supports (continued)

Family System Youth Roundtable, Washington State Community Connectors may have funding.

Mental health social workers should be a given. When there is an issue students do not have someone to go to. Need school psychologists, nurses, counselors.

There needs to be a change in way the Office of Superintendent of Public Instruction (OSPI) looks at systems. What we want is a community that is a better place to live.

Instead of expelling students for failing classes, have a classroom to teach them about drug and substance abuse affects.

There was a job opening in one of the Pasco Middle Schools In School Suspension and the Parent Information Center, which contains a computer lab. I would have loved to apply for both of those jobs and combined them into one position so when students would be sent into In-School Suspension (ISS), I would have them work on their High School and Beyond plan. I would have them do their Career Bridge Inventory Assessment and then look at the jobs based on their career interests in the computer lab in hopes of getting them excited about their education. Give them the reason of why.

During the session one of the participants stated they changed their In-School Suspension program to “In-School Supports” (ISS). If students were sent to the ISS office and they were hungry, school staff fed the student. When group participants stated how they used ISS, I also shared my idea. Another person shared they would expel students if they failed four classes. Instead, teach them about the effects of drug and substance abuse.

Review school discipline rules.

School does not allow enough opportunity for relationship building between adults nor peers.

In the Community In Schools study, a third of students do not have an adult they can talk to.

Bring in a community health worker, a safe, trusted adult. Can identify when student needs extra help, warm hand off, not just public schools.

Alternative schools = inequity.

Peer specialists, youth partners in schools. Graduates want to give back but need time for debriefing and support for peers as well. Mental health first aid. Debriefing and support for all.
Action Areas

Positive Parenting

- Single parent support group/network locally.
- Parenting with Love and Logic taught broadly.
- Mandatory parenting classes offered at hospital when delivery at hospital (Colorado model).
- “Toddler 2 Teens” Parent Boot Camp Social – Emotional Learning for parent; for all parents.
- There should be more court-approved counselors for child dependency cases.
- Partner intentionally with parents in informative and non-judgmental ways. Continual offers of support.
- Have more than EBPs and more dynamic and funded than EBPs.
- Letting parents know it’s OK not to be perfect! “Forgive themselves.”
- Follow Alison Gopnik in her book “The Gardener and the Carpenter.” She’s a scientist, philosopher, and a grandmother.
- We need to move foster kids out of foster care faster. They need their forever home.
- Pornography figures into many of the social ills we work to address. Objectifying women – could that lead to traumatizing women? Absent dads? Google “protect young minds” or “Porn recovery” for resources.
- Youth leadership conference that include portions with adolescence and parents, modeling youth/adult partnership.
- Prenatal marijuana use is a rising problem with the legalization of marijuana. We don’t have clear research on the consequences. More individuals are self-medicating depression, anxiety, and pain with marijuana, including during pregnancy. Needs to be more formally addressed. Also impacts of Marijuana use on being present to your child and parenting skills.

Intersection of Trauma-Informed with Race/Equity/Gender

- Highlight tribal practices for healing and learn from these.
- Build a coalition addressing this specific group.
- Always have equity lens on.
- Acknowledge the resilience that already exists in communities of color.
- No trauma informed training, conversations, planning, etc., without equity lens.
- Increase focus on resilience – building an understanding through community resilience, research focused on race/equity/gender.
### Trauma and Resilience Informed Schools

- Fund peer support in school.
- Support strength-based practices.
- Providing a shower and clothing for those who can’t (in a safe place). Basic needs help with belonging and confidence.
- Can DOH/HCA/DBHR and OSPI Partner to fund health centers in most or all schools?
- Leading with staff over the past three years: ACEs trainings and committee, Paper Tigers Film (at high school, district invited), Resiliency Committee (evolved from ACEs and includes community and other schools in district), resilience film (high school, district, and community), fostering resilient learners book study at high school this year.
- Handle with care
- One-on-One mentoring program in schools
- Training to create awareness
- Looking for tools for staff beyond ACEs 101, useful in school classroom settings. (Example: student blows up and teacher reaction strategy.)
- Support, take care of and love the adults (teachers, administrator, parents, bus drivers, etc.) and the children will thrive.
- Community Resilience Initiative trauma informed curriculum used successfully in schools NEAR, Brain States, R.O.L.E.S. Four Levels in the curriculum.
- Connection rooms in schools for children that don’t have a lot of resiliency.
- Onward, a book on cultivating emotional resilience.
- Antioch University in New Hampshire has a micro-credential (on trauma-informed).

### Organization, Systems, and Culture Shift to Trauma Informed

- Training to create awareness
- Focus on Community Capacity Building Principles and Frameworks of Abundance. Include training and tech support.
- Motivational interviewing.
- Reach out to judges, courts, law enforcement.
- Broadly teach and promote better (trauma informed) strategies for dealing with anxiety and depression. Self-medication with marijuana is growing, not getting to the root problem of ACEs and increasing negative impacts.
- Abortion is a cause and a result of trauma. Solutions: Publicize resources, for example, afterabortion.org and the book “Forbidden Grief.”
- The ladies from Ferndale (Whatcom County) led the a.m. session I attended; so inspirational! Collective Story Harvest.
- Who heals the perpetrators of abuses that lead to trauma?
- We need an in-person support network where people can connect in a safe community to learn how to recognize manipulations, repel/disarm manipulations, and heal from our traumas. Goal is not trauma informed – rather trauma healed.
Getting Local “Network” in Place and Engaged

• Community Garden
• Community Café
• Volunteer recruitment (like me).
• Prenatal focus on resiliency in multiple areas including doctor’s office.
• How do we energize others to advocate for the needs of high ACEs children?
• AmeriCorps and AmeriCorps Vista
• This is not a poverty or homelessness issue! Everyone needs to take the ACEs test. We are all alike.

ACEs and Resilience: “Contagious” Information in Community

• Build in resiliency factors in community activities, social market – get youth involved earlier.
• Community Café’s
• Support groups and resources
• Group workgroups for business leaders: Focus on leadership groups, community news on Trauma Informed Care, Rotary and other fraternal groups, and the Chamber of Commerce. This was supported by state funds.
• Keep communication across the state happening. Events, training activities, models, grant opportunity, and awards, keeps us connected.

• Everyone wants and needs money. Provide a funding stream to do this work.
• Notify members of this Community of Practice about grant opportunities for grassroots organizations to grow and leverage resources so we can spread the word on resilience.
• Training on engaging parents and community.
• Include small grants that support parent-home connection and caregivers in schools.
• You don’t have to be credentialed to help people be resilient.
• Relationships and making connections are important.
• Walla Walla has well development materials and strategies that are proven.

Convening and Aligning Partners

• The Art of Community Building around this work.
• The relationship building that is essential for whole community change.
• If it’s our issue we have the answer.
• Work with strengths and assets of community to solve with and not for.
• Offer Art of Hosting training and support to convene solution-focused work.
• Help Me Grow.
• Find coalitions that have partners you need and join forces.
• We need free “train the trainer” for 4/county ACEs Trainers. All speak the same lingo.