

IMPROVED PREVENTION, STRONG COMMUNITIES



Scaling trauma-informed approaches to strengthen community well-being

OPPORTUNITY

Strengthen families and communities through broad prevention efforts and adoption of trauma-informed practices so fewer families need social services.

CHALLENGE

Getting “upstream” in our solutions will require us to engage whole communities differently as we seek to build resiliency, promote preventative services, and adopt new behaviors as a nonprofit sector. Too often, families seek help only after they have experienced trauma. Wellness, particularly considering COVID-19 experiences, will require a prevention focus on addressing mental health and the stigma associated with seeking help.

PORTFOLIO COMPOSITION

Investment of
\$1,485,000
in 14 partners



SYSTEMS CHANGE PARTNERS

- Big Brothers Big Sisters of Greater Cincinnati
- Central Clinic Behavioral Health
- Family Nurturing Center
- Greater Cincinnati Behavioral Health Services
- Holly Hill Child & Family Solutions
- Jurisdiction-wide Resident Advisory Board (J-RAB Inc.)
- Mental Health America of Northern Kentucky & Southwest Ohio
- NewPath Child & Family Solutions
- One Community, One Family
- Safe Passage Inc.
- Talbert House
- Consortium for Resilient Young Children - a collaborative managed by Best Point Behavioral Health
- The Ion Center for Violence Prevention (formerly Women's Crisis Center)
- Youth Encouragement Services Inc.

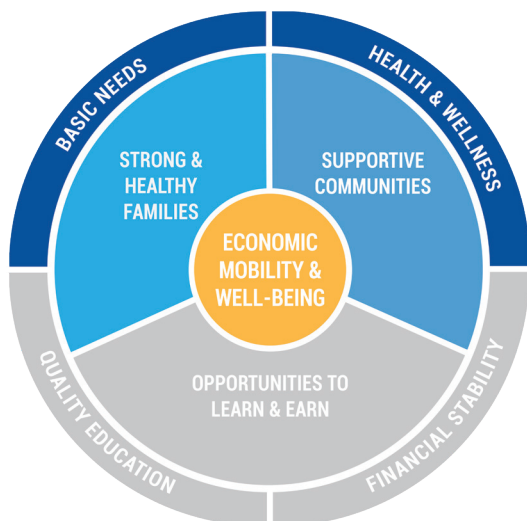
WHY THIS IS IMPORTANT:

Trauma, or any event or series of events that causes significant stress, can come in many different forms. Through strong social support, coping abilities and other protective factors, many people experience only short-term reactions to traumatic events.ⁱ For others, traumatic experiences have lifelong impacts on their development, health and overall well-being.ⁱⁱ This is especially true for populations that disproportionately experience trauma, such as families living with low incomes.ⁱⁱⁱ By focusing on prevention, we can work to minimize the negative impacts of trauma and build well-being.

While it is important to build individual resilience, it is equally important to understand the role that families, organizations and communities play in supporting well-being. Staff at many nonprofit organizations also experience secondary trauma, or the effects of interactions with another person sharing their personal stories of abuse, trauma or disempowerment.^{iv} This trauma is associated with detachment, burnout or compassion fatigue.^v Individual staff experiences can build up within an organization and result in unhealthy characteristics across an organization, such as rigid or unfriendly boundaries, constant stress or distrust.^{vi}

At a community level, trauma aggregates and manifests into much larger symptoms that are interconnected with other community challenges, such as concentrated poverty, high violence or substance use rates, dilapidated infrastructure, damaged social networks or low performing schools. Those larger symptoms add additional stressors for families and communities. While the economic, social-cultural and physical environments in communities can contribute to trauma, positive environments help prevent trauma and promote well-being.^{vii}

Focusing our efforts on “upstream” solutions that promote healing and resiliency for individuals, families, nonprofit organizations and communities will build well-being and positive long-term outcomes for our region.



UNDERSTANDING THE CHALLENGE:

Trauma is a risk factor for nearly all behavioral health and substance use disorders, according to Substance Abuse and Mental Health Services Administration (SAMSHA).^{viii} Instead of seeking help, many people choose to conceal their trauma because of internalized stigma, resulting in feelings of shame and efforts to manage it on their own.^{ix} As stated by Arthur Evans, CEO of the American Psychological Association (APA), when individuals have symptoms of trauma, such as viewing the world as unsafe, it's usually interpreted as “there's something inside of me that's wrong.” Approaches such as trauma-informed care in social work provide a framework and the tools to flip this mindset. Instead of thinking something is wrong with them, “the idea of trauma helps people to understand that, no, this is something that is happening to me and how I'm responding is a natural response,” said Evans.^x

COVID-19 and the economic challenges resulting from it have negatively affected many people's mental health. Prior research on economic downturns has shown associations with increased depression, anxiety, distress and low self-esteem.^{xi} New anxieties and low, but constant stresses of COVID-19 have been felt across socioeconomic and geographic boundaries. The full, longer-term impact of these events on the mental health of Americans is yet to be understood.^{xii}

There are promising practices and research that trauma-informed care supports positive outcomes and well-being despite exposure to trauma, especially in children. Building resiliency, defined as “a dynamic process encompassing positive adaptation within the context of significant adversity,” can help heal the negative impacts of trauma, prevent recurrence of reactions despite further exposure and help avoid traumatic experiences regardless of risk.^{xiii xiv} Building resilient and trauma-informed communities is crucial for healing, treating adverse experiences and building positive well-being.^{xv}

continued

“Mental health issues are a primary concern. If people are worried about so many things, everyday activities like getting up and going to work become a challenge.”

– Community Member

NATIONALLY

- **The average share of adults reporting symptoms of anxiety disorder and/or depressive disorder in January 2021 jumped to 41.1%** compared to 11% averaged between January – June 2019.^{xvi}
- **Prior to the pandemic, 1 in 3 young adults (age 18-25) experienced a mental illness and 1 in 10 experienced a serious mental illness. 1 in 5 young people reported that the pandemic had a significant negative impact on their mental health.**^{xvii}

LOCALLY

- Ohio was found to be **one of Five states with the highest prevalence of children who experienced three or more adverse- childhood experiences (ACEs) as many as one in seven children-** placing them in a category of especially high risk.^{xviii}
- **A Cincinnati task force that is focused on addressing the increase in youth violence suggests supporting and expanding programs in schools that are trauma-informed** as well as exploring programs that train community volunteers on mental health wellness.^{xix}

“ A lot of youth don't have anyone to guide them, they are just winging it – they need adults to be role models to help youth become good adults.”

– *Community Volunteer*

OPPORTUNITIES FOR SYSTEMS CHANGE

PREVENTION MINDSET AND PRACTICES

Not only does stigma hold families back from seeking help, but reactive and punitive practices in systems of support can deter families from accessing help or create a “fear of the system.” For example, historically, the child welfare system has been reactionary. If a child is suspected of being abused or harmed, adults are mandated to report it. This can open a door to a formal investigation and result in removing a child from the family. Frequently, the reported concern does not warrant an investigation, but there is rarely a formal process to proactively support those families and resolve the challenge. There is an opportunity to explore new practices and mindsets focused on prevention and building resiliency as opposed to maintaining reactionary systems that respond only after trauma has been experienced.

By centering a mindset toward prevention and building resiliency, we can build community well-being and work to reduce the negative impact of traumatic experiences.

How might we build systems and practices that focus on prevention and support families in proactive resiliency strategies to improve well-being?

BUILDING COORDINATED AND SUPPORTIVE ENVIRONMENTS

As the need for mental health care is rising, nonprofit organizations best equipped to provide trauma-informed care are facing a shortage of mental health professionals. While families are experiencing more obstacles connecting with mental health supports, many families are still accessing the nonprofit system of care for other services such as basic needs programs like food pantries. Organizations that are less equipped or trained in trauma-informed practices may unintentionally create barriers for their staff and the people they serve. Similarly, other systems that families engage with, whether it be work, school or public benefits, often lack the capacity or capability to establish trauma-informed environments. Building community well-being requires a coordinated approach across stakeholders and systems.

How might we work to broaden the adoption of trauma-informed practices through a coordinated effort to strengthen communities and build resiliency?

DATA FROM INSIGHTS

Survey participants shared the following insights:

- 58% of participants identified health and wellness as one of the top challenges, including, “People struggling with increased stress/anxiety can't access services that assist with these types of needs.”
- 52% identified children not having the support to develop healthy social and soft skills as a top community challenge.
- 59% identified solutions that build stronger connections between stakeholders in the community as a top priority.

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