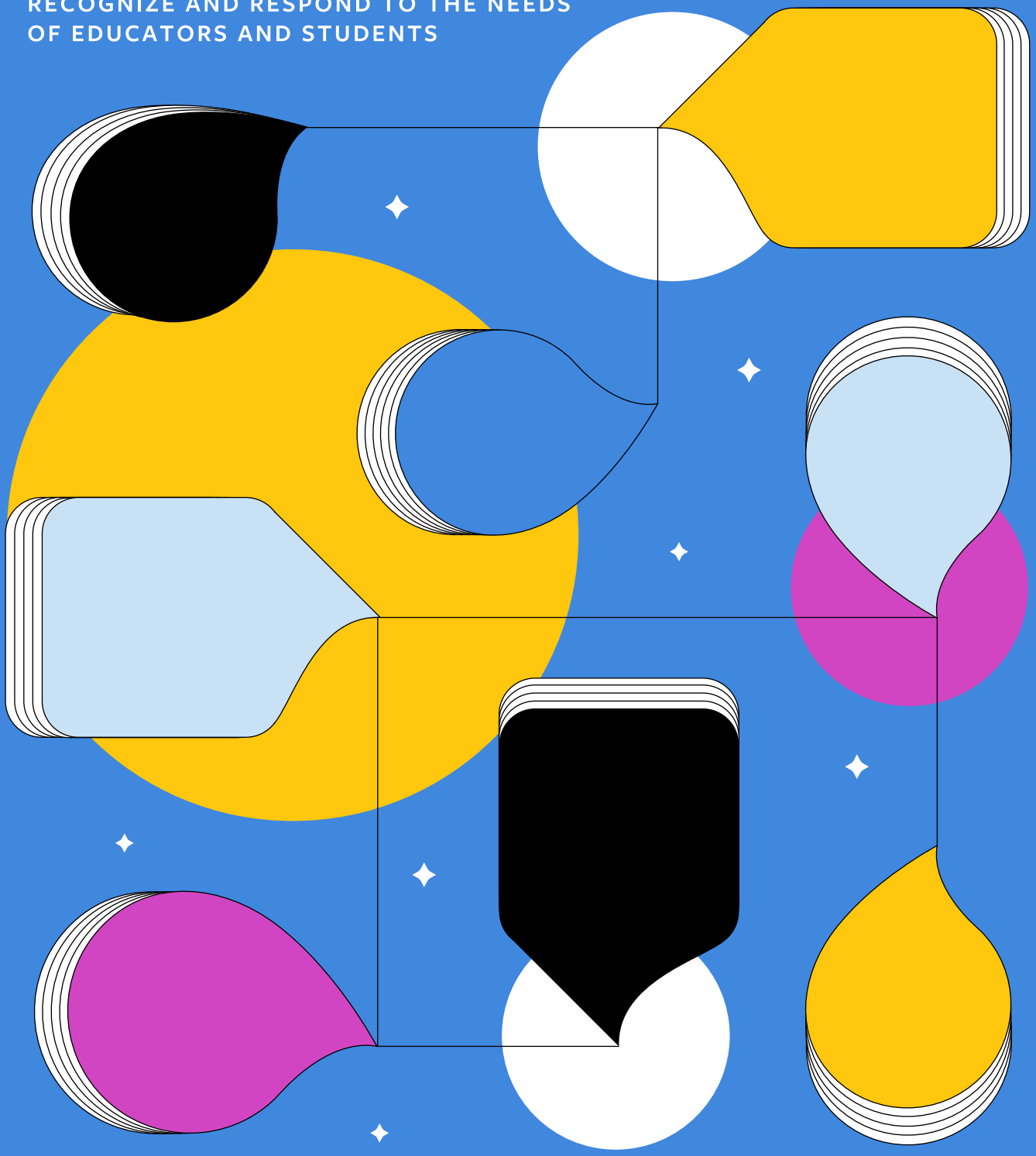
COALITION FOR COMPASSIONATE SCHOOLS

ENHANCING SCHOOL CAPACITY TO RECOGNIZE AND RESPOND TO THE NEEDS OF EDUCATORS AND STUDENTS



2015 - 2022

IMPACT REPORT

NEW ORLEANS

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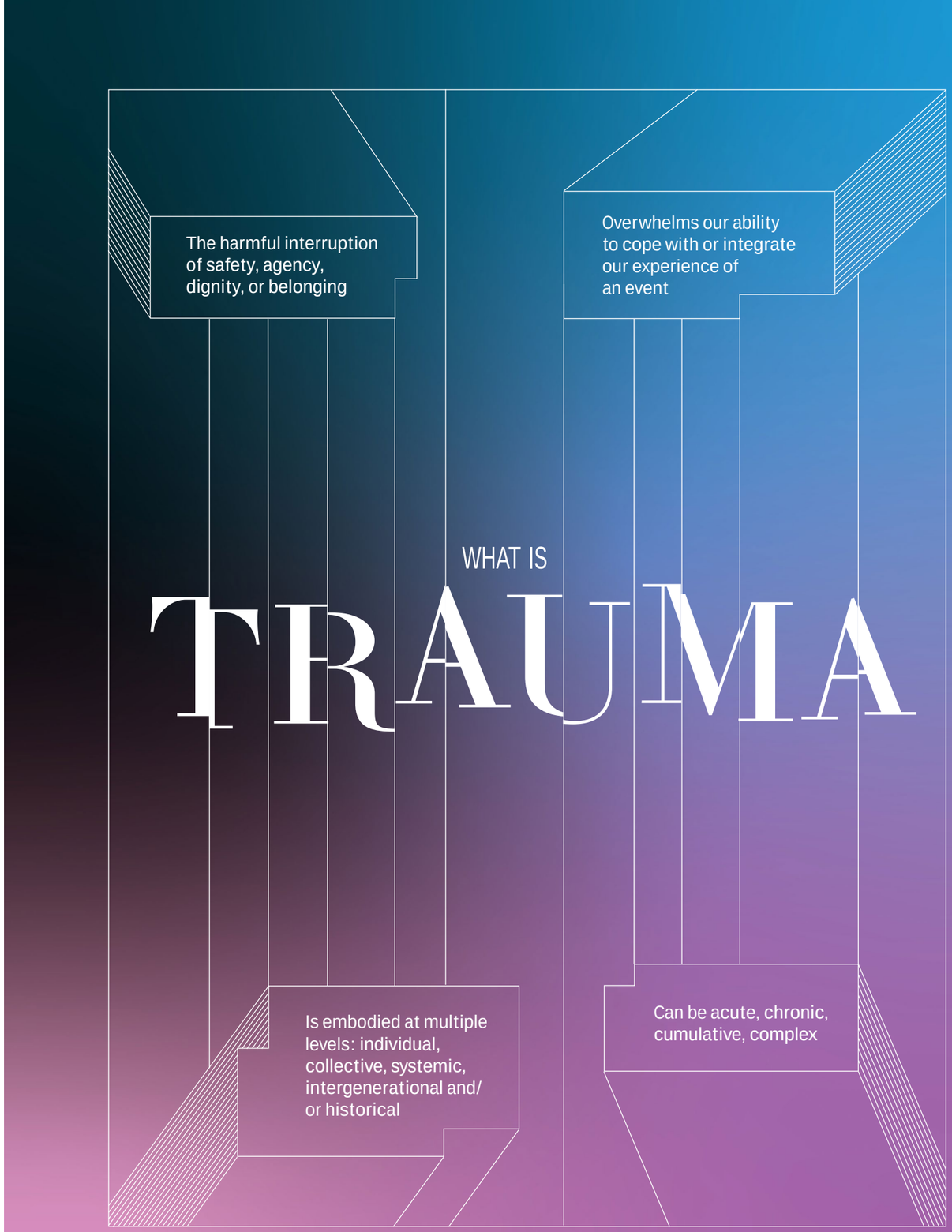
TRAUMATIC EXPERIENCES

IMPACT LEARNING, BEHAVIOR, & RELATIONSHIPS

Trauma is often understood as a personal experience. For children of color and other marginalized groups, however, individual trauma experiences are nested in the context of collective trauma experienced by their communities and driven by racist and oppressive practices or policies implemented by institutions, including schools. In order for schools to realize their role as a potential source of systemic trauma, it is important to contextualize trauma within a sociopolitical framework. It is then that they can begin to reattribute responsibility for the outcomes associated with social marginalization away from the students, and to the system itself.

Experiences of trauma are associated with long-term, negative psychological, behavioral, and physical health consequences for our youth. However, resilience is also nested within collective and systemic contexts.

Schools can foster resilience when they own their responsibility as a potential source of trauma for students and families and then work to dismantle systems of privilege, discrimination, and oppression that result in inequities for students of color and other groups marginalized by their social identities. -Ġ ÆÊĭ ì ŮĆŮñ ì ů Ćþ´ ĉ ë ´ ŽŮ ì ôñþ ë ÊÆ ãÁØñññ¤ã are a mechanism to promote collective resilience and to disrupt the systemic trauma that is often perpetuated by schools. When schools own their responsibility as a potential source of trauma – for both students and families – they can work to dismantle systems of privilege, discrimination, and oppression that result in inequities for students of color and other ë ´ þÕŮ ì ´ ¤ŮĥÊÆ ÕþñĉûãŮÅ



Among all US states, Louisiana has the *3rd* highest number of children per capita who have experienced two or more traumatic life events[1]. In New Orleans, *90%* of children have experienced community violence, *54%* had someone close to them murdered, *42%* had seen someone shot, stabbed, or beaten[2].

[1]KIDS COUNT Data Center from the Annie E. Casey Foundation

[2]Gollub et al. (2019). PLoS ONE.

EDUCATOR STRESS & WELLNESS **IMPACT**

Students' exposure to traumatic events also impacts the lives and work of the educators who serve them. The highly interpersonal nature of educators' work paired with their daily interactions with students and families means that educators have ample opportunities to learn about student traumatic experiences and experience secondary traumatic stress (STS). Educators in New Orleans describe STS symptoms as worrying about student's safety and well-being, having ÆÚ ī ÁĉǿĜ ÁñìÁÊìĆþ´ĆÚìÕŭ´ìÆ ÔÊÊ¤ÚìÕ ØÊ¤Û¤Êāāŭanxious, and irritable[4]Ûå

The COVID-19 pandemic made working conditions even more stressful for teachers as they struggled to learn new modes of teaching, feared for their health, and juggled family demands. Pandemic-related stressors Ø´ęÊ ÀÊÊì ´āāñÁÚ´ĆÊÆ ËÚĆØ āÚÕìÚŤÁ´ìĆ ÆÊÁ¤ÚìÊā Ûì ĆÊ´ÁØÊþ ëÊìĆ´¤ØÊ´¤ĆØ ´ìÆ āÚÕìÚŤÁ´ìĆ increases in burnout, resulting in an exodus Ôþñ ë ĆØÊ ûþñÔÊāāÚñìÛå

Findings from our COVID-19 Impacts on Educator Well-Being report indicate that the mental health toll associated with the additional impact of COVID-19 is substantial and should not be overlooked by policy makers and school leaders as they plan for greater support and improved retention of educators moving forward.

Educators reported rates of emotional distress similar to or higher than those observed in a national sample of health care workers during COVID-19[3]Ûå

Teaching has long been recognized as one of the most stressful jobs in the U.S., so supporting teachers is critical and creating trauma-informed schools may be one way to do that.

36% screened positive for anxiety (vs. 33% of health care workers).

35% screened positive for depression (vs. 17% of health care workers).

The rate of depression among educators is also higher than the rate observed in the US population (27.8%) in the middle of the COVID pandemic

19% screened positive for PTSD (vs. 14% of health care workers).

Consistent with findings from our educator survey at the beginning of the pandemic, Black educators rated their mental health more positively than White educators

[1]Fleckman et al. (2022). School Mental Health. https://doi.org/10.1007/s12310-022-09515-4

[3]Young et al. (2021), Psychiatric Services. https://doi.org/10.1176/appi.ps.202000424

In a July 22, 2018, Times-Picayune op-ed, it was noted that the Orleans Parish School Board and then State Superintendent of Education John White "should look for funding to expand the trauma-informed learning collaborative launched in 2015 by the city health department with Tulane University's psychology department and social service agencies [and that] that should be a goal for the City Council and the Cantrell administration as well."

TRAUMA-INFORMED SCHOOLS

THE COALITION FOR COMPASSIONATE SCHOOLS

Trauma-informed schools acknowledge and recognize the reality and impacts of individual, collective, and systemic trauma. They adopt policies and practices to create a safe and supportive school climate that promotes healing and prevents future trauma. Trauma-informed schools are designed to transform the school climate to promote: feelings of physical, social, and emotional safety among students; positive student-teacher relationships; and culturally responsive discipline policies and practices. At the heart of this transformation is a mindset shift

from

"What's wrong with you?"

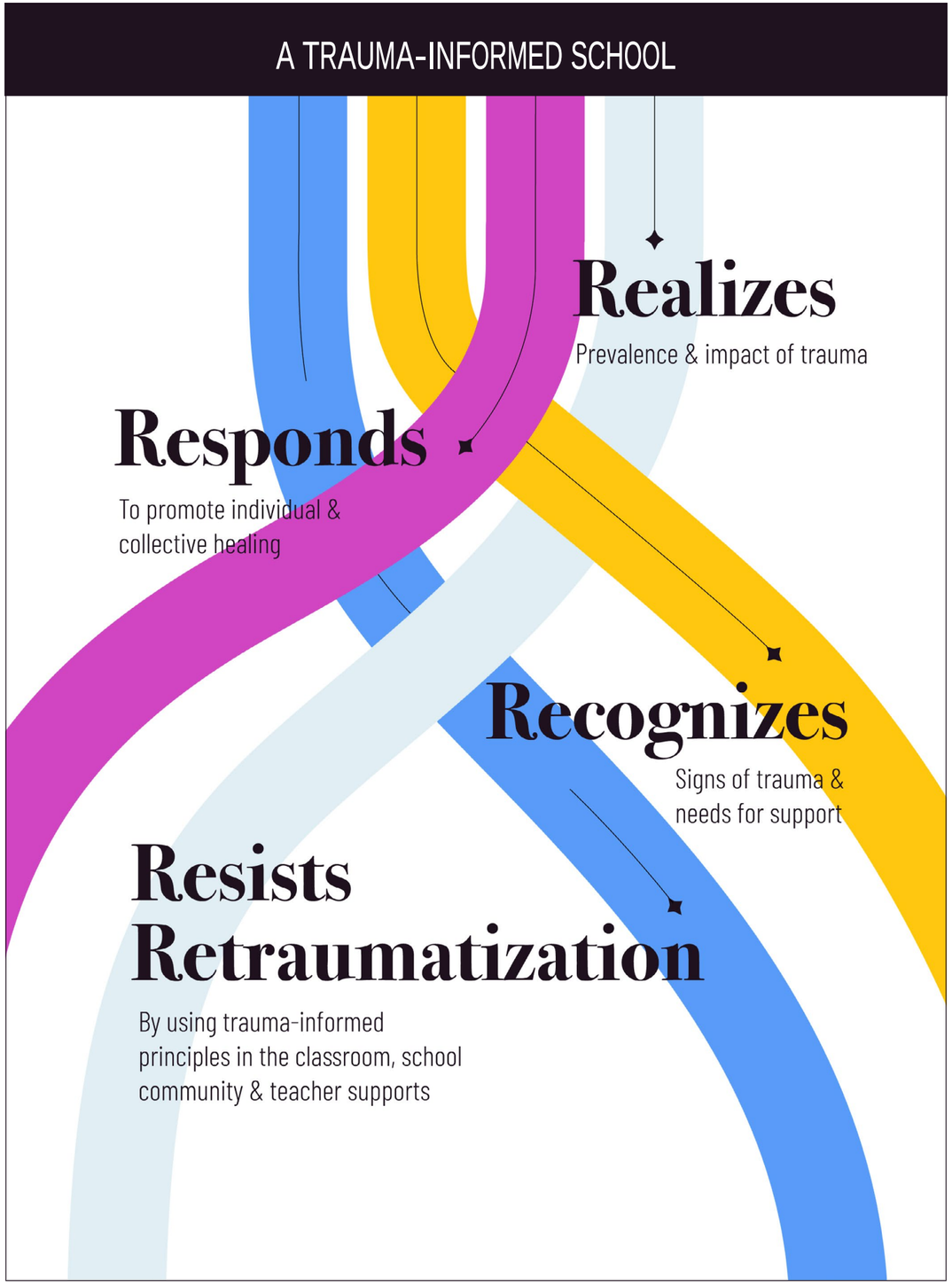
to

"I wonder what this student needs."

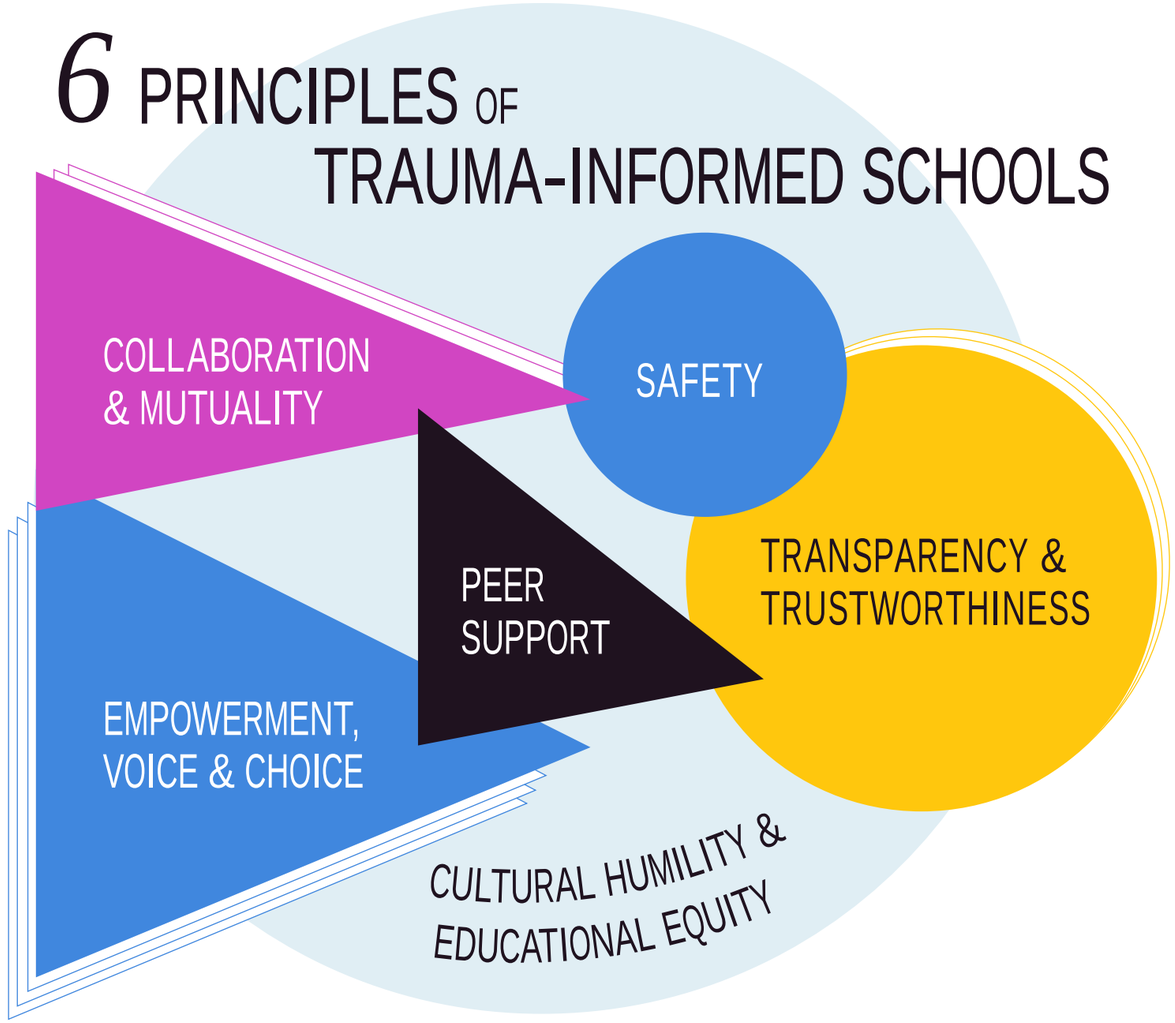
and

"What's possible for this student?"

With school systems and staff stretched thin, we prioritize mindset shifts and concrete strategies that increase individual and system-level capacity to respond to traumatic conditions. This increased capacity enables educators to realize, recognize, and respond to resist re-traumatization.



6 PRINCIPLES OF TRAUMA-INFORMED SCHOOLS



The Substance Abuse and Mental Health Services Administration (2014) worked with trauma survivors to develop six key principles of trauma-informed care. We have adapted the key principles for use in our work with schools to illustrate a foundation in cultural humility and educational equity. Our goal is to create safe, trustworthy, and transparent school environments through the utilization of peer support, mutuality and collaboration, and empowerment, voice, and choice.

Although the principles were developed in collaboration with trauma survivors, most frameworks for trauma-informed schools, including ours, have failed to partner meaningfully with the students they serve to develop, adopt, and implement trauma-informed approaches. To truly embody the key principles of trauma-informed care, we must empower students to be a part of all aspects of planning for, adopting, and evaluating trauma-informed approaches. This includes incorporating their perspectives of trauma, healing, and resilience. As an organization doing trauma-informed work in schools, our work must also be grounded in the direct experiences of young people. As we move forward, we will engage young people directly and indirectly to shape our work.

COALITION FOR COMPASSIONATE SCHOOLS

In 2013 as part of the NOLA FOR LIFE initiative, the New Orleans Health Department assembled several community agencies to provide crisis response and clinical services to schools following student-involved violence and other public-facing traumatic events. The Health Department led these efforts because New Orleans is a portfolio school district comprised of autonomous charter schools without a centralized system to coordinate school crisis response.

In 2014, we coalesced as the New Orleans Trauma-Informed Schools Learning Collaborative (TIS-LC) under the leadership of Chris Gunther, Manager of Strategic Initiatives at the New Orleans Health Department. The objectives of the TIS-LC were to provide support to schools as they transitioned to trauma-informed frameworks and to build schools' organizational capacities to implement, sustain, and continue to improve the delivery of trauma-informed approaches. In 2016, we received funding from the National Institute of Justice to rigorously test whether the strategies we were using were effective in helping schools move forward with trauma-informed practices. That project, Safe Schools NOLA (SSNOLA), allowed us to expand the work of the collaborative to six additional schools.

In 2021, we began a strategic planning process to align our partners, our name, and our efforts with our current and future directions; thus we became the Coalition for Compassionate Schools. Our new name positively re f ects our mission to build the capacity of schools, students, and parents to create transformative change in education through the adoption, implementation, and sustainment of trauma-informed, healing-centered practices. The new logo was designed to emphasize the collaborative and compassionate nature of the work.

VISION

Flourishing school systems that are rooted in community, healing, and human-centered approaches.

MISSION

Build the capacity of schools, students, and parents to create transformative change in education through the adoption, implementation, and sustainment of trauma-informed, healing-centered practices.

VALUES

The following core values inspire and guide our work, its operation and how we engage our community.

- EQUITY
- CONTINUOUS LEARNING
- COLLABORATION & MUTUALITY
- COMPASSION & HOLISTIC WELL-BEING
- ADVOCACY

COALITION MEMBERS

COURTNEY BAKER
Tulane University

AVERY BREWTON
Tulane University &
Training of Trainers for
Trauma-Informed Schools

BERRE BURCH
Children's Bureau
of New Orleans

CHARLOTTE CUNLIFFE
Children's Bureau
of New Orleans

LAURA DANNA
Project Fleur-de-lis,
Mercy Family Center

ALPHA GEBRIE
Louisiana Public
Health Institute

TORRIE HARRIS
New Orleans
Health Department

KELLI JORDAN
NOLA Public Schools

TEDDY MCGLYNN-WRIGHT
Tulane University &
Training of Trainers for
Trauma-Informed Schools

STACY OVERSTREET
Tulane University

DENESE SHERVINGTON
Institute of Women
and Ethnic Studies

KATHLEEN WHALEN
Tulane University &
Safe Schools NOLA

Evolution of the

COALITION FOR COMPASSIONATE SCHOOLS

2012 - 2014

New Orleans Behavioral Health Council forms Youth Mental Health (YMH) Workgroup

YMH Workgroup offers crisis prevention and response training to 104 attendees from 48 public schools and 8 community agencies

YMH Workgroup offers trainings in evidence-based treatments for youth exposed to trauma

YMH Workgroup becomes Trauma-Informed Schools Learning Collaborative

2014 - 2016

13 NOLA public schools apply to partner with TIS-LC to complete year-long pilot program to install trauma-informed approaches

Six schools are selected as part of the pilot; five schools complete the program with support from United Way

TIS-LC provides local and national trainings on supporting trauma-informed schools

2016 - 2020

Pilot schools receive ongoing support for implementation of trauma-informed approaches with funding from United Way

National Institute of Justice funds Safe Schools NOLA study with six schools

Department of Justice funds Trauma-Informed Schools Training of Trainers Project to support five schools (Cohorts 1 and 2)

Baptist Community Ministries funds pilot expansion of ToT project to Jefferson Parish Schools

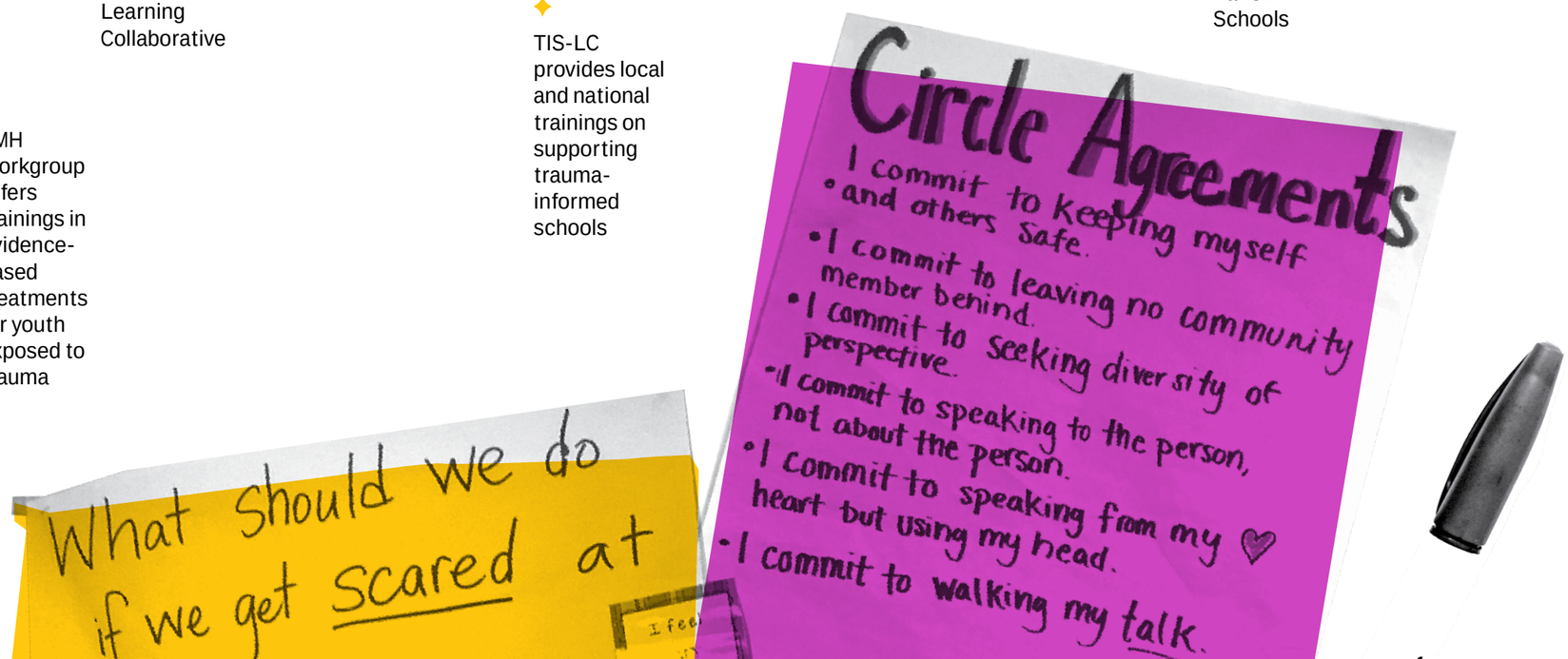
2020 - PRESENT

TIS-LC conducts COVID-19 educator surveys and webinar

TIS-LC engages in strategic planning, changes name to Coalition for Compassionate Schools

Baptist Community Ministries funds mapping project to identify trauma-informed school-based initiatives in NOLA public schools

Baptist Community Ministries and LoveTruth funds ToT expansion to three Cohort 3 schools



CCS IS CREATING A POSITIVE IMPACT

SAFE SCHOOLS NOLA

Safe Schools NOLA (SSNOLA) was funded by the National Institute of Justice (2015-CK-BX-0020; Co-PIs: Stacy Overstreet and Courtney Baker) to determine the best strategies to support schools in the adoption and implementation of trauma-informed approaches.

Schools participated in a year-long intervention designed to build educator and organizational capacity to integrate trauma-informed approaches within the universal level of their existing multitiered systems of student support. The intervention was delivered by a full-time Teacher Support Specialist embedded in the school and through monthly consultation with the project team.

SHARED LEARNING ABOUT TRAUMA

SUMMER TRAINING

Foundational trauma-informed schools professional development for all school staff based on Substance Abuse and Mental Health Services Administration guidance for trauma-informed care

TEACHER SKILL BUILDING, CONSULTATION & SUPPORT

SKILL BUILDING TRANINGS

Safe & supportive classrooms

Co-regulation to foster student emotional regulation

Strengthening teacher-student relationships

TEACHER CONSULTATION AND SUPPORT

Classroom observation and debrief after each skill-building training

Additional, differentiated consultation and support to teachers

SCHOOL-WIDE PLANNING & SUPPORT

DEVELOPMENT OF A LEADERSHIP TEAM

Typically consisted of the school principal(s) and assistant principals, the dean of students, special education and response to intervention coordinators, the school mental health service provider, and a small group of teachers

LEADERSHIP TEAM CONSULTATION AND SUPPORT

Completion of needs assessment

Creation of a school speci f c, data driven trauma-informed action plan

SCHOOL MENTAL HEALTH TEAM CONSULTATION AND SUPPORT

Clinical support for evidence-based traum-focused interventions

TRAUMA-INFORMED SCHOOLS CHAMPIONS

DEVELOPMENT OF A PEER SUPPORT TEAM

Typically consisted of four educators and/or support staff that spanned all grade-levels of the school

PEER SUPPORT TEAM CONSULTATION AND SUPPORT

Shared learning about trauma and trauma-informed practices

Individualized coaching for personal practice goals and the piloting of trauma-informed practices

Individual consultation to support effective leadership in needs assessment and action planning

MULTIPLE BASELINE DESIGN

A multiple baseline design was used to evaluate the effectiveness of the intervention. Following a baseline year (2016-17), six schools were randomly assigned to receive the intervention in 2017-18, 2018-19, or 2019-20. One school was dropped from analyses and did not receive the intervention because it lost its charter during ĆØÊ Áñĉþā Ê ñô ĆØÊ ā ć ĉ Æ Ġ Ů ȁ

Analyses examined the extent to which the intervention resulted in changes in teacher and school capacity ćñ´ÆñûĆ´ì Æ Ú ë ûæ Ê ë Ê ì Ć Ćþ´ĉ ë ´ Ž Ů ì ô ñ þ ë Ê Æ ´ûûþñ´ÁØÊā þÊæ´Ć ę Ê ćñ ĆØÊ À´ā Ê æ Ů ì Ê GÊ´pŮ¤Ê´þ ţ ÊÔÔÊÁć ā þÊûþÊāÊ ì Ć the average effect across all schools at the end of the intervention year relative to the end of the baseline year. Years 2/3 effects represent the average effect across all schools at the end of school years following the intervention relative to the end of the baseline year.

ORGANIZATIONAL CAPACITY IMPACT

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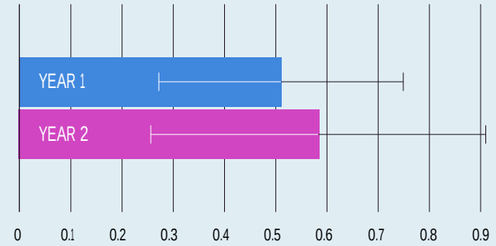
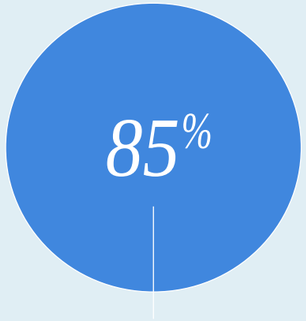
- Discipline policies that balanced accountability with an understanding of trauma;
- Opportunities for professional development determined by their needs
- The availability of consultation with a trauma expert, classroom observations, and opportunities for team work.

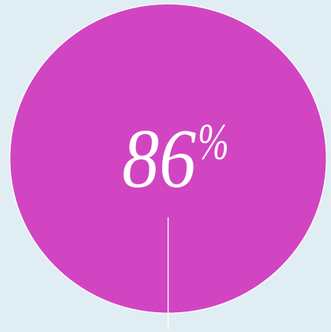


EDUCATIONAL CAPACITY IMPACT

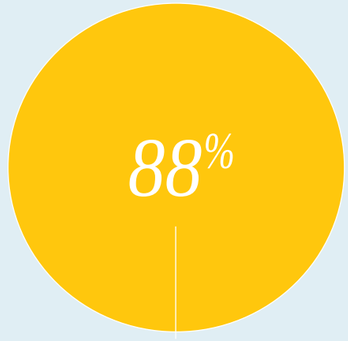
- 5/6 schools completed the intervention year and developed a trauma-informed action plan to guide implementation in the year following the project.



Agreed or strongly agreed that the foundational training increased their knowledge.



Agreed or strongly agreed that they would be able to apply the knowledge and skills taught in the foundational training.



Of school staff agreed or strongly agreed that trauma-informed approaches were acceptable.

CLASSROOM OBSERVATIONS

The use of explicit trauma-informed strategies for student engagement and classroom management was evaluated using the Assessing School Settings: Interactions of Students and Teachers Observation System, an observational coding system that tracks both teacher and student behavior. Findings from classroom observations indicated that the intervention had large positive effects on educator and student behavior. The positive changes were even greater in the years following the intervention.

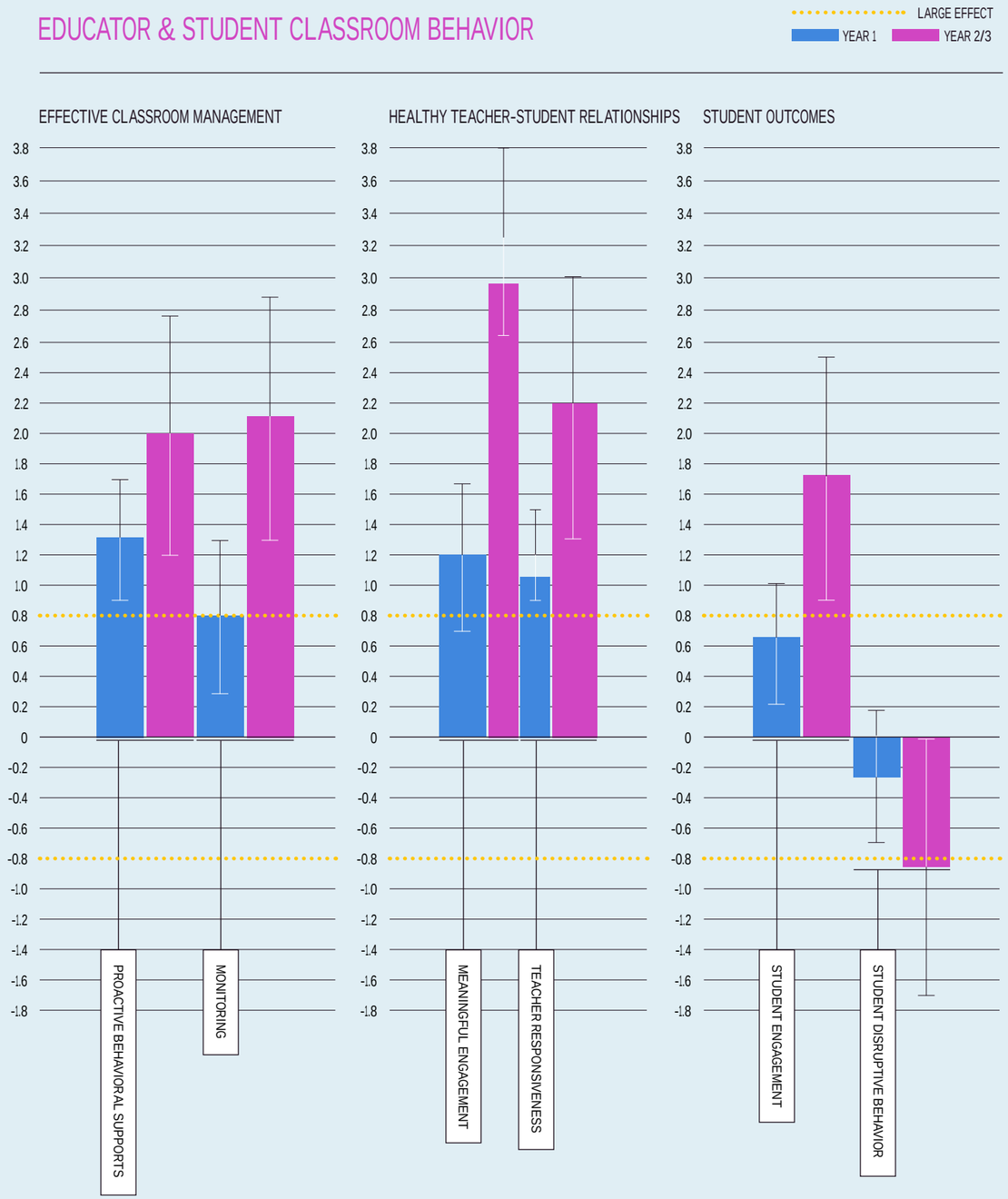
Large effect sizes are considered exceptional for interventions that target populations (like a school community) versus individuals*.

Educators demonstrated meaningful positive changes in their ability to engage their students and manage their classrooms during the intervention year and in subsequent years. As educators provided more proactive and responsive supports and engaged their students, students demonstrated higher levels of engagement and lower levels of disruptive behaviors in the classroom. These positive shifts in the classroom climate are particularly important for students exposed to trauma. Supportive and engaging classroom environments can diminish the alarm response of students exposed to trauma and allow them to focus on learning.

Findings are encouraging because an improved school climate is critical for school satisfaction, student well-being, student engagement, academic motivation, and achievement. It also decreases disruptive behaviors, peer victimization, absenteeism, and suspensions. However, we can't rely solely on teacher reports or classroom observations to evaluate the impact of trauma-informed approaches on school climate. To truly embody the key principles of trauma-informed care, we must empower students to be a part of all aspects of planning for and adopting trauma-informed approaches, including: incorporating their perspectives of trauma, healing, and resilience in trainings provided to educators; involving them in the needs-assessment process and action planning that guides initial implementation of trauma-informed approaches; and drawing on their voices ćñ ÆÊ ĭ ì Ê ĺĵ ì Æ‖Á´ćñþā ñô āĉÁÁÊāāů

*Matthay EC, Hagan E, Gottlieb LM, Tan ML, Vlahov D, Adler N, Glymour MM. Powering population health research: Considerations for plausible and actionable effect sizes. SSM Popul Health. 2021 Apr 6;14:100789. doi: 10.1016/j.ssmph.2021.100789. PMID: 33898730; PMCID: PMC8059081.

EDUCATOR & STUDENT CLASSROOM BEHAVIOR



TRAINING-OF-TRAINERS

The SSNOLA model relied on an external project team to lead the school through a series of capacity-building activities to integrate trauma-informed approaches within the universal level of their existing multitiered systems of student support.

Given that the successful adoption, implementation, and sustainment of trauma-informed approaches is a multi-year process, reliance on an external team to support the work is not practical. However, due to a lack of centralized services within New Orleans' portfolio school district of charter schools, there was no mechanism for the district to provide training and support to schools. Furthermore, there was limited professional capacity to meet the demand to support trauma-informed schools; community agencies supporting this work were being pushed ÀÊĜñìÆÁ´û´ÁŰĆĜŮÀ

To address these needs, the Training-of-Trainers (ToT) project was developed to increase the capacity of the New Orleans public school system to overcome the structural challenges of creating and sustaining trauma-informed schools. The project was designed to build professional capacity in our community and provide training and implementation support to schools through our TIS Implementation Model. In addition, the project strategically established a network of support to grow and sustain trauma-informed schools by recruiting trainee dyads from the administrative staff of the Orleans Parish School Board and from charter network organizations. This approach created capacity at the administrative level to ensure organizational capacity to sustain the TIS Implementation Model beyond the year-long ToT project.

> *"It allowed me to empower students to advocate for themselves. It gave them strategies that made them feel comfortable being who they are in my classroom. She also helped me enhance my self-care."*
>
> PARTICIPATING TEACHER
> SAFESCHOOLSNOLA

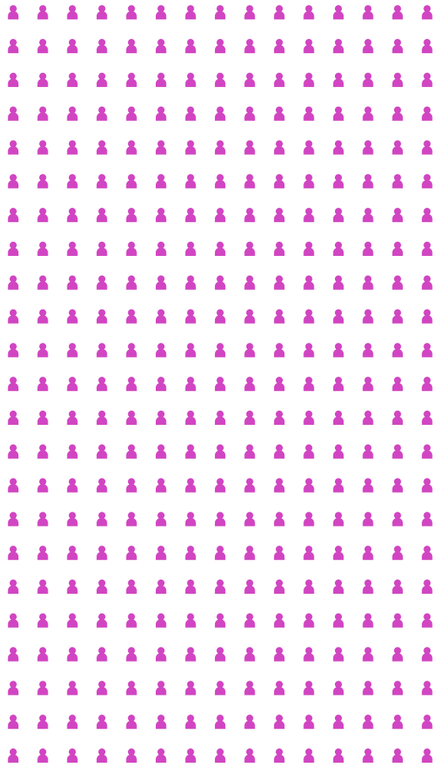
By the Numbers

91% of those trained agreed or strongly agreed that the training increased their knowledge

91% of those trained agreed or strongly agreed that they would be able to apply the knowledge/ strategies in their classrooms.

90% of those trained agreed or strongly agreed that trauma-informed approaches are acceptable

345 school personnel in Orleans & Jefferson Parishes in foundational training in trauma-informed schools.



300 educators in skill-building trainings focused on creating safe & supportive classrooms & supporting student regulation

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21 individuals in 5 charter management organizations and at the district level in Orleans Parish

17 individuals in 2 schools and at the district level in Jefferson Parish

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17 in 5 charter management organizations and at the district level in Orleans Parish & 2 in Jefferson Parish

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In Turn

- THOSE CERTIFIED TRAINED

- THOSE CERTIFIED SUPPORTED **6** *OF THE* **8**

partner schools in the development of trauma-informed action plan to carry trauma-informed practices into the next school year, focusing on the implementation of restorative discipline approaches to reduce suspensions and expulsions, and the adoption of social and emotional learning curricula to support the well-being of students.

- THOSE CERTIFIED LED EXPANSION **3** *NEW SCHOOLS*

of trauma-informed approaches into 3 new schools within their respective charter networks.

We have been able to generate system and adult-level capacity in our schools and CMOs to do trauma-informed schools work. Since 2019, our ToT program has partnered with 20% of CMOs in New Orleans (including past & current partners) to expand access to trauma-informed schools. We hope to reach all CMOs in the next 5 years as we expand our model to include student engagement and adaptations for high schools. Gì ñĉþ ĭþāĆ ĜÊ´þŭ Ţ ÁÊþĈŮĭÊÆ Ćþ´Ůì Êþā ÁÊþĈŮĭÊÆ Tư additional educators and administrators in our model. Our next step is to investigate how young people experience and are affected by this increased system capacity.

RESEARCH ARTICLE

Compassion Satisfaction, Secondary Traumatic Stress, and Burnout: A Mixed Method Analysis in a Sample of Public-School Educators Working in Marginalized Communities

Juilia M. Fleckman[1] • Lea Petrovic[2] • Kathryn Simon[3] • Haley Peele[4] • Courtney N. Baker[4] • Stacy Overstreet[4] • New Orleans Trauma-informed Schools Learning Collaborative

RESEARCH ARTICLE

Psychology in the Schools

Centering trauma-informed approaches in schools within a social justice framework

WEBINAR

United Way

Trauma-informed Schools Organizational Readiness Assessment

ASSESSMENT TOOL

Traumatic Stress Institute

Attitudes Related to Trauma-Informed Care

FUNDING

SAMHSA
Substance Abuse and Mental Health Services Administration

Coalition for Compassionate Schools Awarded $1.17 Million

Coalition for Compassionate Schools awarded $1.17 million from the Substance Abuse and Mental Health Services Administration to become a National Child Traumatic Stress Treatment and Service Adaptation (TSA) Center. The funding will support the Coalition as it works to provide local, regional, and national expertise for the installation and implementation of trauma-informed practices in schools.

Advancing the National Conversation

Since 2015, we've been invited to share our approach to the work at eight national conferences of professional ñþÕ´ì ìÚĥ´ĆÚñì ā āû´ì ì ìÚì Õ ĭęÊ ÆÙÔÔÊþÊì Ć ÆÙāÁÙûæÙì Êāů

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We've created a toolkit designed to serve as an information resource for schools to implement, sustain, and continue to improve the delivery of trauma-focused services.

DOWNLOAD TOOLKIT*

Convenings were held by federal funding agencies:

NIJ | National Institute of Justice

SAMHSA
Substance Abuse and Mental Health Services Administration

*The Coalition for Compassionate Schools toolkit is available on our website: www.cforcs.org

- American Psychological Association
- NASP National Association of School Psychologists
- NASW National Association of Social Workers
- ABAI Association for Behavior Analysis International
- NASDSE Guiding Change — National Association of State Directors of Special Education
- APHA American Public Health Association
- *The UCLA/RAND Trauma-Informed Schools Summit*

Strategic Direction

WhAT'S NExT fOR ThE COAlITION

BUILDING ON OUR SUCCESSES

The Coalition has enjoyed several successful years bringing trauma-informed practices into schools in Orleans and Jefferson Parishes. This is largely due to strong relationships that were formed and maintained over a lengthy period. With that success has come increased requests for engagement beyond our charter members, and expansions beyond the schoolhouse doors. Recent funding from the Substance Abuse and Mental Health Services Administration provides two years of infrastructure support (2023 – 24) allowing us to continue our work with schools and build an active community-based advisory board and expand our programming to afterschool programs.

New Orleans Public Schools is a decentralized 'portfolio district' with high teacher and support staff turnover, so our role of networking with different schools, CMOs, and organizations is vital. Supporting the Coalition directly can accelerate our ability to generate change by sharing resources, information, and even staff.

We have already begun the work of intentionally coordinating the work our various members do while sitting on city- and state-wide councils, roundtables, and coalitions. Supporting the Coalition's role as a convener and coordinator provides the help we need to make our mental and behavioral health systems for young people ë ñþÊ Ê ī ÁÚÊ ì ĈÛ

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Supporting this Strategic Direction centers our ability to share our successes and lessons learned in our immediate community, and to our wider set of stakeholders. Our singular focus on doing the work has taken precedence ñęÊþ ûþñ ë ñĆÚ ì Õ ÚĆ ĆñĆØÊþā ĆØ´Ć ÁñĉǽÆ ÀÊ ì Ê ĭ ĆŮ This needs to change and we have a chance to change it, but we could use some help. We are, ÀĠ ÆÊ ĭ ì ÚĆÚñ ì ǔ ûþ´ ÁĆÚĆÚñ ì Êþā ´ ì Æ þÊāÊ´ þÁØÊþāǔ ì ñĆ graphic designers or media experts.

In addition to supporting the production of print and electronic materials like this one, funding partners can directly support bringing people together in meaningful ways locally, regionally, and nationally. In addition to convenings, cross-sector trainings have the potential to expedite our dissemination efforts and vastly increase the accessibility of the work.

We will continue to publish scholarly articles and create reports that respond to important events, like our report on how COVID-19 has impacted teacher mental health and wellbeing. What we need is to build communication and dissemination channels and relationships to get the information and practices in the hands of those who need it most.

INCREASED YOUTH AND PARENT VOICE

In addition to expanding and communicating our work within the provider community, we are also intent on increasing youth voice in the Coalition. We plan to do this in three ways:

1. Expanding into high schools for our ToT programming
2. Involving the voices of young people and families directly in our decision-making as a Coalition
3. Engaging/supporting youth participatory action research projects focused on youth safety, trust and transparency.

} Ê å ì ñĚ ĆØ´Ć ñĉþ Ěñþå āÚÕ ì Ú ĭ Á´ ì ĆǽĠ Ú ë û´ ÁĆā school culture, teacher-student relationships, and policy. As a whole-school (and ultimately whole-community) approach, we never forget ĆØ´Ć āĆĉÆÊ ì Ćā ´ þÊ ĆØÊ Ĉ¤ĆÚ ë ´ ĉÊ ÀÊ ì Ê ĭ ÁÚ´ þÚÊā ñÔ our work.

The next necessary phase of our work involves bringing youth voice directly into the evaluation and shaping of our work.

Supporting this next phase of evolution directly supports youth (and family) engagement in shaping school policy and practice.

SUPPORTING EDUCATORS

As summarized in this report, teacher mental health risk soared during the pandemic. We recognize the time is now for a dramatic shift in how we respect and support teachers. Schools play a unique role in the community; as seen during the pandemic, they were essential to the social, economic, and public health of our communities. Teachers have experienced extraordinary stress during the last two years as they dealt with exposure to COVID-19, shifts in schedules, teaching remotely, and loss of colleagues, family members and students. So impactful were these experiences that they had similar or higher rates of PTSD, anxiety, and depression than healthcare workers. At the same time, we have observed that teachers report lower levels of stress and burnout in schools where SAMHSA's Six Principles are in û¤´ ÁÊÚÀ

Our work with teachers will continue to center teacher wellness, since they are "the most trauma-informed tool in the classroom," and expand to advocating for teacher-friendly policies including increased wages, access to mental healthcare, and instructional supports.

We are seeking support for future efforts to partner with local teacher training programs ǩÀñĆØ Ćþ´ ÆÚĆÚñ ì ´¤´ ì Æ Ê ë ÊþÕÊ ì ÁĠŽÁÊþÓÚ ĭ Á´ ĆÚñ ì ǩ to ensure that all incoming teachers have at least some exposure to trauma theory and trauma-informed teaching practices.