Introduction

• **Taryn Mackenzie Williams** is the Assistant Secretary for the Office of Disability Employment Policy.
• Find her full bio here: [www.dol.gov/agencies/odep/about/organizational-chart/assistant-secretary](http://www.dol.gov/agencies/odep/about/organizational-chart/assistant-secretary)
The Center for Advancing Policy on Employment for Youth (CAPE-Youth) Partners

https://www.csg.org/  https://www.yti.cornell.edu/

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CAPE-Youth: What We Do

• Conducts research on new and existing innovative policy and practice;
• Develops strategic partnerships;
• Shares best practices among key stakeholders; and
• Helps states identify opportunities for new programs and services.
CAPE-Youth Strands of Work

CAPE-Youth seeks to improve employment outcomes for youth and young adults with disabilities (Y&YAD) by helping states build capacity in their youth service delivery and workforce systems with attention to:

- Strategic partnerships and system coordination;
- Work-based learning; and
- Professional development (PD).
Trauma-Informed Policy for Youth: Structuring Policies and Programs to Support the Future of Work

1. Engage in care coordination and cross-systems collaboration.

2. Examine systems to identify opportunities to apply best practices in trauma-informed care within the workforce and related systems.

3. Implement culturally responsive practices within the workforce and other youth-serving systems.

Summary

COVID-19 led to elevated levels of trauma and emotional distress worldwide. Youth and young adults with disabilities (YAYAD) are among the most susceptible to experiencing long-term consequences affecting their employment and ability to contribute to their community. Trauma is common among individuals with intellectual and developmental disabilities (IDD), but is often overlooked by professionals and underreported by YAYAD. This places them at increased risk for experiencing post-traumatic stress disorder (PTSD) following stressful events such as the pandemic. Additionally, the pandemic has magnified the presence of historic and systemic racial inequity in the U.S. This can create an additional layer of trauma for individuals whose disability diagnosis is coupled with belonging to a historically marginalized minority community.

Studies of adverse childhood experiences (ACEs) reveal a direct connection between trauma experienced in youth and a variety of adverse adult outcomes, such as emotional and health risks, unemployment, disability, and elevated healthcare costs. Examples of ACEs include experiencing or witnessing abuse or violence within the home or community, belonging to a family in which a parent has a mental health condition, and a variety of other household, environmental, and community experiences.

Workforce systems that embrace a more holistic view of youth to account for specific ways trauma directly and indirectly affects the employment of YAYAD can facilitate recovery from trauma. Trauma-informed practices are those that take into consideration the principles of safety, collaboration, empowerment, support from others, and cultural sensitivity. Components of trauma-informed care (TIC) include staff training on trauma and cultural sensitivity, trauma screening, interagency collaboration to holistically address the needs of youth and their specific systems.

A more trauma-informed, culturally responsive model, focused on the needs of the whole person, aligns with the Workforce Innovation and Opportunity Act (WIOA) vision of increasing access to employment and related supports for youth facing significant barriers. State policy makers and workforce systems have a unique opportunity to leverage the present-day challenges as a catalyst to reimagine youth service delivery through developing a more uniform and collaborative cross-system network model, simultaneously supporting employment and mental wellness for YAYAD. The results could be individuals who are healthier emotionally and able to engage in work; a more robust workforce; and better long-term employment outcomes.

Trauma-Informed Policy for Youth-Brief
Effects of COVID on Y&YADs

• COVID-19 was experienced as a collective trauma across the globe.
• Youth and young adults report increased symptoms of mental health conditions in response to the pandemic.
• Y&YADs have experienced the same stressors as their peers without disabilities as well as additional stressors related to their disability.
Risks of COVID to Y&YADs

• Trauma related to the pandemic will compound previously experienced trauma (including histories of discrimination or marginalization within systems), leading to increased risk for long-term effects on well-being.

• Without appropriate support and/or treatment, trauma can lead to long-term mental health conditions, disrupting employment, and leading to lower lifetime earnings, increased unemployment and reliance on social supports.
Early Results from the Pandemic

Findings from a study published in January 2021:

• Increase in psychiatric symptoms among youth and young adults, specifically symptoms of depression, panic/somatic experiences and generalized anxiety.

• “Overall, this report suggests that the COVID-19 pandemic is having multifarious adverse effects on the mental health of youth.”

(Hawes et al., 2021, p. 1)
Long-Term Consequences of COVID-19 Infection on Individuals

Recent review of medical records from Oxford shows that 33-62% of individuals infected with COVID experience a mental health condition within the following 6 months. (Taquet et al., 2021)

- Recovery clinics are reporting surprising rates of “Long COVID” symptoms, which are often not linked to the severity of the initial infection. (AARP, 2021)
- Long COVID is now recognized as a disability under several federal acts. (HHS.gov, 2021)
Trauma Challenges Experienced by Y&YADs

• Communication and language barriers
• Behavior that may be misinterpreted as related to disability
• Contact with a wide variety of caretakers, professionals and paraprofessionals
• Greater likelihood of experiencing trauma in the context of everyday life

(Horton et al., 2021)
The Costs of Trauma

One Adverse Childhood Experience (ACE) for a child is associated with a 7.3% reduction in earnings and a significant increased likelihood of welfare dependence.

The US spends an estimated $748 billion annually on costs associated with ACEs.
How Can Workforce Systems Respond?

1. Engage in care coordination and cross-systems collaboration.

2. Examine systems serving Y&YADs to identify opportunities in learning and applying best practices in trauma-informed care (TIC).

3. Implement culturally responsive practices within the workforce and other youth-serving systems to improve access to employment for youth who have experienced trauma.
HEAL PA:
The Movement to Make Pennsylvania a Trauma-Informed, Healing-Centered State
Dr. Daniel L. Jurman, DMin – Executive Director
Why Trauma-Informed PA (TIPA)?

The prevalence of trauma is intertwined with some of our largest community challenges.

- Poverty
- Racism
- Poor Physical Health
- Poor Mental health

- Barriers to Workforce Development
- Crime
- Substance Abuse
- Child Abuse/Domestic Violence
- Community/Economic Development
- COVID-19
**Syndemic**: A set of linked health problems involving two or more conditions, interacting synergistically, and contributing to excess burden of disease in a population.

**Syndemics** occur when health-related problems cluster by person, place, or time.
Formation of Trauma-Informed PA Think Tank

An Outside Perspective from Experts in the Field
(68 Applicants – 25 Selected Members)

- Virtual meetings from March through June focused on:
  - Defining the terms we would be using as a commonwealth to ensure we were all speaking the same language;
  - Setting mission, vision and values for the effort;
Our Approach (2 of 2)

• Building a network to connect and support community-based, grassroots movements across the commonwealth;
• Prioritizing changes at the state level to affect culture, policy and practice;
• Healing from the trauma of a major disaster like the COVID-19 pandemic; and
• Healing the damage of racism, communal and historical trauma.
• State agency staff from DHS, OMHSAS, PDE, and DOH helped to edit the plan.
• **Phase One:** putting these concepts into a plan that is both aspirational and actionable.
The Plan

CAPE - Youth
CENTER FOR ADVANCING POLICY
ON EMPLOYMENT FOR YOUTH
A. State Government
   1. Culture
      a) Training
      b) Job Descriptions
   2. Policy
      a) Retraumatization
      b) Prevention
      c) Healing
   3. Licensing
      a) Continuum
      b) Retraumatization
      c) Prevention
      d) Healing
Recommendations Structure (slide 2)

B. Community-Based, Grass Roots Movement
   1. ACEs Connection
   2. Community-Based Coalitions
   3. Free Training and Technical Support
   4. Annual Summit
C. Communal Trauma

1. Racism, Discrimination, and Disproportionate Minority Contact
   a) Core Causes
   b) Creating Safe Spaces
   c) Incentivize People Who Have Experienced Racism and Discrimination to Become Healers
Racism, Discrimination, and Disproportionate Minority Contact (continued)

d) Eliminate Policies and Practices that Retraumatize

e) Shift from Unnecessary Levels of Policing to Social Work, Therapy, and Healing
2. Natural Disasters, Crisis, and Public Health Emergencies (Learning from COVID-19)
   a) Understanding Where We Are During Crisis
   b) Healing What We’ve Experienced
   c) Building on Empathy
Training to Change Our Culture

- We recommend that all state employees and the employees of all licensed, contracted and funded entities be required to (at a minimum) successfully complete a Trauma-Informed Care introductory training.

- We likewise have recommendations for training for police officers, judges, parole officers, social workers, etc.
Recommendation Highlights (2 of 4)

Licensure Based on People

We recommend we reimagine how we license and review facilities through the lens of building trauma-informed cultures based on the latest scientific knowledge, as opposed to cultures focused on compliance and liability. This would include licensing based on customer feedback, measures of quality of care, positive relationships, access to treatment, physical safety and positive outcomes.

3800 Regulations and 3700 Regulations
Expanding Our ACEs Definition

We recommend expanding the list of ACEs the commonwealth recognizes to include the list of expanded ACEs laid out in *Adverse Childhood Experiences: Expanding the Concept of Adversity* as well as one ACE recommended through our work. They include:

- Witnessed violence;
- Felt discrimination and bigotry;
- Lived in an unsafe neighborhood;
- Experienced bullying;
- Lived in foster care or another youth congregate care setting; and
- Experienced poverty for an extended period of time.
Recommendation Highlights (4 of 4)

Requiring the Evolution to Trauma-Informed and Beyond

We recommend the PA continuum from Trauma-Aware, to Trauma-Sensitive, to Trauma-Informed to Healing-Centered be employed to guide all state agencies, offices, licensed, contracted and funded entities in the steps and requirements to become trauma-informed and healing-centered.

This was already in development by DHS (OMHSAS & OCYF).
Early Wins (1 of 4)

- OMHSAS/OCYF - Working on TIC Licensing & Assessments using the Trauma-Informed PA continuum
- Office of Advocacy and Reform (OAR) - First recorded training tested for DHS (available to the public soon)
- PID/OMHSAS - Working on parity and telehealth
- Governor Wolf - $368.7 million for broadband access
- PDE - ACEs related questions will be in Youth Risk Behavior Survey (YRBS) and new trainings available to all PA schools
• Universal Healing strategy coming out of National Governors Association (NGA) ACEs collaborative - building resources and tool kits for caregivers
• OAR - Highlighting intersectionality between chronic stress and trauma from 20/21 with escalating public health emergencies
• AG/OAR - PATIN page on PACEs Connection with partners
Early Wins (3 of 4)

• Legislature - TI training for law enforcement Title 53, Sec 2164, (18) – Attorney General working on training curriculum for all police departments

• Legislature - Enhanced de-escalation training Title 53, Sec 2164, (6)

• Community Conversations starting post COVID-19
Early Wins (4 of 4)

• Work on prevention of violent extremism connected to white supremacy in partnership with Mediators Beyond Borders and Parallel Networks
• Trainings on trauma and intersectionality of trauma with poverty, juvenile justice, congregate care, intellectual disabilities and racism (77)
• OAR - Actively advocating for funding and policies based on TIPA
Questions?

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https://www.governor.pa.gov/about/office-of-advocacy-and-reform/
Wisconsin
Trauma-Informed Care

Allison Gordon
Bureau of Consumer Services Director
Wisconsin Department of Workforce Development (DWD)
Division of Vocational Rehabilitation (DVR)
DWD TIC Training Initiatives

• WI state agency focus - Fostering Futures
• DVR internal focus on training
  o Regional Trainings
  o 2020-2021 All staff training
• Other DWD trainings
• DVR statewide service provider training
Milwaukee Equity Action Plan

• Focus groups & outcome report
  o Vocational Rehabilitation Technical Assistance Center - Targeted Communities (VRTAC-TC) Technical Assistance
  o Gain better understanding of VR needs of consumers in central Milwaukee and improve service delivery

• TIC Recommendations
  o Enhance awareness & sensitivity among staff
  o TIC agency assessment
  o Partner Collaboration
Outcomes to Date

• Positive feedback on training
• Local level efforts
• Policy/procedure review
• Continue training efforts
• Milwaukee Equity Action Plan project planning & implementation in process
Jade Gingerich, Director of Employment Policy, MD Department of Disabilities (DOD)

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Kristen Patterson, Coordinator, Disability and Youth Services, MD Department of Labor (DOL)

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MD Department of Disabilities 2004

- Charged with coordinating and improving delivery of services to individuals with disabilities in the state of Maryland.
- Coordinates development of a State Disabilities Plan across all the partner agencies and provides input, technical assistance, policy recommendations and more.

**Policy Domains include:** Employment, Transportation, Housing, Community Living, Emergency Preparedness and Behavioral Health.
Maryland Capacity and Demands

MD Division of Rehabilitation Services (DORS), as a result of federal funding limitations, has been subject to Federally required Order of Selection (OOS) since the 1990s.

- OOS Category 1: Most Significant Disability
- OOS Category 2: Significant Disability—currently several year (3+) waiting list
- OOS Category 3: Non-Severe Disability—not served since 1990s

Maryland DOL a key partner particularly in serving individuals with non-obvious disabilities.
Maryland State Agency Transition Collaborative (1 of 2)

MD DOD, DORS, DOL, Behavioral Health Administration (BHA), Developmental Disabilities Administration (DDA), Special Education, and Career and Technical Education (CTE), Parent Training Center, local school systems and higher education.

• Interagency collaboration is an evidence-based predictor of post-school success (Test et al, 2009).
2014 Workforce Innovation and Opportunity Act (WIOA; P.L. 113-128) and Individuals with Disabilities Education Act (IDEA) of 2004 call for government agencies to intentionally coordinate services and connections for youth with disabilities to facilitate the transition out of the education system and into adult roles.
Maryland Labor

- Benchmarks of Success
- 14 Program Elements vs. Pre-Employment Transition Services (Pre-ETS)
- In-school-youth (ISY) Waiver
- Local control
- Recognition that individuals may identify across a number of Disadvantaged Categories
- Role of Coordinator of Youth and Disability
Policy Examples

• Waiver to emphasize serving individuals with disabilities

• Documentation of disability for eligibility

• Foundation/programming to improve staff and system capacity
Other Strategies/On the Horizon

• Connecting youth coordinators with local school system transition coordinators
• Cross-agency trauma-informed training to improve cultural responsiveness
• Recognition of individual service strategies with comprehensive partner engagement

(Blitz et al., 2020)
Resources

- Information on MD Department of Disabilities
  www.mdod.Maryland.gov

- State Agencies’ Transition Collaborative (SATC) MOU

- Information on MD Department of Labor
  http://dllr.state.md.us
ODEP Closing Remarks

• Thanks to our colleagues for presenting your important work.

• ODEP believes that providing mental health resources to youth with disabilities is key to their success and trauma informed workforce systems can help increase access to services for youth that have experienced ACEs.
1. Engage in care coordination and cross-systems collaboration.

2. Examine systems to identify opportunities to apply best practices in trauma-informed care within the workforce and related systems.

3. Implement culturally responsive practices within the workforce and other youth-serving systems.
The Center for Advancing Policy on Employment for Youth

Questions about Trauma Informed Care
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Contact Us

If you are interested in learning more about our work or participating in our research initiatives, please contact:

https://capeyouth.org/
info@capeyouth.org.
Participate in Our Research

Interagency Collaboration Coordination Study

https://capeyouth.org/participate-in-our-research/
References (1 of 5)

• AARP. (2021, May). *Six things you need to know about long COVID.* https://www.aarp.org/health/conditions-treatments/info-2021/long-covid.html


References (3 of 5)


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