



Talking Points: Handle With Care



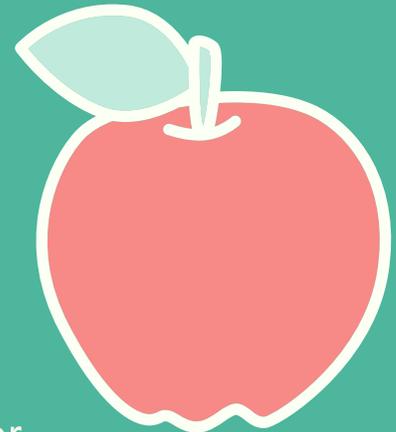
We must focus on childhood trauma.

All schools and cities have children who experience childhood trauma.

Childhood trauma- such as physical, sexual, and emotional abuse, domestic violence, witnessing a crime, food insecurity, racism- and the resulting stress can have negative, lasting effects on a child's emotional, mental, and physical well-being.

Childhood trauma can:

- Interrupt normal brain/body development
- Interfere with ability to trust, organize, comprehend, remember, and produce work, which are critical in learning to read, write, engage in discussion, and do math problems.
- Increase risk for engagement in risky behavior
- Increase risk for involvement in the criminal justice system
- Increase risk for chronic mental and physical health problems



The first step to being trauma-sensitive is understanding how prevalent trauma is. Childhood trauma is widespread. Among the 17,000 adults surveyed in the 1990 Adverse Childhood Experiences (ACEs) study, just over 50% reported having experiences at least one of 10 forms of childhood adversity. If we add those to the numerous other forms of childhood adversity, the number of children affected by adversity grows even larger.

Childhood trauma has ripple effects on the state's public health, education, law enforcement, family services, and juvenile and criminal justice systems.

Allen County Drug and Alcohol Consortium, Inc. (DAC)

532 W. Jefferson Blvd. Fort Wayne, IN 46802

(260) 422-8412 | coordinator@dacac.org

Schools must focus on childhood trauma.

If subjected to prolonged, severe, unpredictable stress, a child in school may experience either hyperarousal or hypoarousal and may be in constant fight, flight, or freeze mode, causing fight, flight, or freeze mode, causing other higher order functions to become secondary in importance, making it difficult to learn.

It is important for teachers and all school staff to understand the short- and long-term impacts of traumatic stress and be able to identify children and utilize trauma-sensitive approaches to help children heal and build resilience.

Every child reacts to trauma differently, thus it is important not to judge the severity of the experience and provide support for all students.

You might think, "It's not my child," but your child is sitting next to a traumatized, struggling student and the teacher is spending all their time redirecting the behavior. No one is learning.



Police must focus on childhood trauma.

Law enforcement officials respond to traumatic scenes everyday where children are present.

Trauma in children turns off the learning switch and turns on risky behavior. Kids at risk tend to skip school, use drugs, become violent, commit crimes, and end up meeting law enforcement.

Police are ground zero for childhood trauma related to the opioid crisis, as drug-endangered children are having drug-endangered children. They have no sense of feeling safe in their own skin or environment. They don't know how to have healthy attachments to others. They don't know how to self-regulate, or how to act.

Being a victim of or witnessing violence between one's parents or caretakers increases risk of perpetrating or becoming a victim of violence in the future.

Mental health leaders must focus on childhood trauma.

Prolonged activation of the stress response system can disrupt children's development of brain architecture and other organ systems and increase risk of cognitive impairment and disease.

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Children with histories of traumatic experiences are more likely to have chronic health conditions as they age such as anxiety, depression, posttraumatic stress disorder, cardiovascular disease, diabetes, cancer, stroke, asthma, lupus, multiple sclerosis, osteoporosis, viral infections, and autoimmune diseases, which are exacerbated by risky behavior.



Building resilience and teaching healthy coping skills in schools will decrease the need to engage in risky behaviors associated with numerous chronic diseases.

We can do something about childhood trauma.

You have an opportunity to implement a proven, no-cost program to provide support to children who endure extreme trauma in your community.

That program is called "Handle With Care."

The Handle With Care program can support children of trauma in our area.

Handle With Care is a program that enables local school districts to be notified when police encounter a student at a scene, so the school staff and mental healthcare providers can then provide support right away for the student.



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The program has the following main components:

- When police identify a student at the scene of a traumatic event (domestic violence, meth lab explosion, drug raid, shooting, etc.), they will send add the following information to their reports: a Special Attention Code (SAHWC), the student's name, and the student's date of birth.
- DAC finds out what school each student attends, then sends a HWC notification via CrisisGo.
- A school district or school will create a process to triage "Handle With Care" notifications from police. The process will involve notifying relevant teachers and staff to observe the student's behavior and academic performance and be prepared to provide trauma-sensitive support as needed.
- When school trauma-sensitive interventions are not sufficient, mental health professionals, who are trained in Trauma Focused Cognitive Behavior therapy, can provide free therapy on site at school at a time that is least disruptive to the student's academic schedule (with consent from the parent or guardian).