

The Opioid Crisis and Its Growing Impact on First Responder Health and Wellness

The Power of Trauma-informed Communities



Promoting wellness and recovery

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Why become a trauma-informed community?



- Shared experiences/collective trauma
- Resource for resilience and healing
- Overall community impact: increased risk of heart disease, diabetes, obesity, depression, substance abuse, smoking, poor academic achievement, time off from work, and even premature death

Understanding the broad impact of trauma is the first step in becoming a compassionate and supportive community

What is a trauma-informed community?

Trauma-informed communities emphasize physical, psychological, and emotional safety for providers and for persons accessing services. They can help all involved rebuild a sense of control and empowerment



A trauma-informed community . . .

Realizes

 <u>Realizes</u> widespread impact of trauma and understands potential paths for recovery

Recognizes

• <u>Recognizes</u> signs and symptoms of trauma in residents, families, staff members, and others

Responds

 <u>Responds</u> by integrating knowledge about trauma into policies, procedures, and practices in how people live, work, and play in the community

Resists

Seeks to actively <u>resist</u> retraumatization

For more information, see: https://www.integration.samhsa.gov/clinical-practice/trauma-informed

Core Principles of a TIC



Trustworthiness and transparency

- Collaboration and mutuality
- Peer support and mutual self-help
- Empowerment, voice, and choice
- Cultural, historical, and gender issues



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Why did your county decide to move toward a trauma-informed county/community?

What was your starting point?







How we got started. What we did.

- 2014 Community Counseling Center decided to become a trauma-informed agency
- Applied for and received a grant to offer agencywide training on trauma-informed care
- Training tailored to address concerns within each sector as well as within the community as a whole
- Established a community trauma-informed care collaborative as part of the Ashtabula County Family and Children First Council (FCFC)
- Multiple groups working on similar, sometimes overlapping, goals of building resiliency
- Now, "Building Resiliency Together" combines initial FCFC with "Bridges Out of Poverty" efforts

What has evolved as a result?



- Shift in focus from trauma to resiliency. How is our community resilient? How do we foster resiliency?
- Merge with "Bridges Out of Poverty" Steering Committee
- Understanding that multiple factors play a part in building resiliency, and that coming together as a group to look at these factors has merit in and of itself



What has been the impact in your community?

Stigma reduction and shifts in language

Increased community collaboration

Increased focus on recovery versus punishment

Optimizing resources

Increased motivation and enthusiasm among participants

Increased sense of empathy and awareness

What does it take to sustain your efforts?



- Stakeholders were reeling, and fatigue was setting in
- People needed the opportunity to share their stories and then be able to focus on strengths and recovery
- Once this shift happened in the meetings, the tone became less didactic and more interactive and engaging
- Implemented Building Resiliency Together collaborative aiming to effect the "Four Rs" of a trauma-informed community



TIC and the Opioid Epidem

The *ripple effect* of the opioid epidemic hits everyone

- TIC helps shift the focus from blame to recovery
 - Coordinate with START (Children's Services) to keep families intact while in recovery
 - Relationships with community businesses to create job opportunities for people in recovery
 - MOMs Care program offers recovery resources to mothers with a history of opiate addiction
 - Connection Center offers resource linkage, probation, and recovery services in one location
- "Building Resiliency Together" has focused on connection and the healing impact it has on addiction and communities



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What was your starting point?





How we got started

- Held trauma-informed care summit—like opioid summits—for information gathering
- Kim Kehl and Joyce Starr with the Ohio Department of Mental Health and Addiction Services came to educate on trauma and the impact of trauma on individuals
- Media coverage of event helped get the message out
- Created PSA offering help for people considering suicide



More actions

- Got buy-in from sheriff and schools
 - Juvenile court identified a trauma-informed coordinator
- The Mahoning County Mental Health and Recovery Board requires contract agencies to focus on trauma- informed care
- Social services is working with 2-1-1 to compile an inventory of trauma-informed counselors
- Providing self-care support for individuals working in social services





What has evolved as a result?

The community has begun to work toward creating a seamless trauma-informed system Held Trauma-Informed Care 101 training for more than 100 community members Juvenile court trained all guidance counselors on trauma and recognizing trauma Schools created trauma-informed teams for each building All sheriff's deputies are receiving mental health first aid

What has been the impact in your community?



- Our community has begun recognizing the many different faces of trauma, causes of trauma, traumatization, its effect on people, and the importance of becoming trauma-informed
- The community is working together to address trauma and make trauma-informed services a priority at all stages of life

What does it take to sustain your efforts?

- A commitment to regularly meet and continue to improve
- We are finding that a financial commitment is not necessary to begin the process





TIC and the Opioid Epidemic

- The opioid epidemic brought to light the relationship between addiction and trauma
- TIC efforts are directed towards better understanding addiction and its root causes

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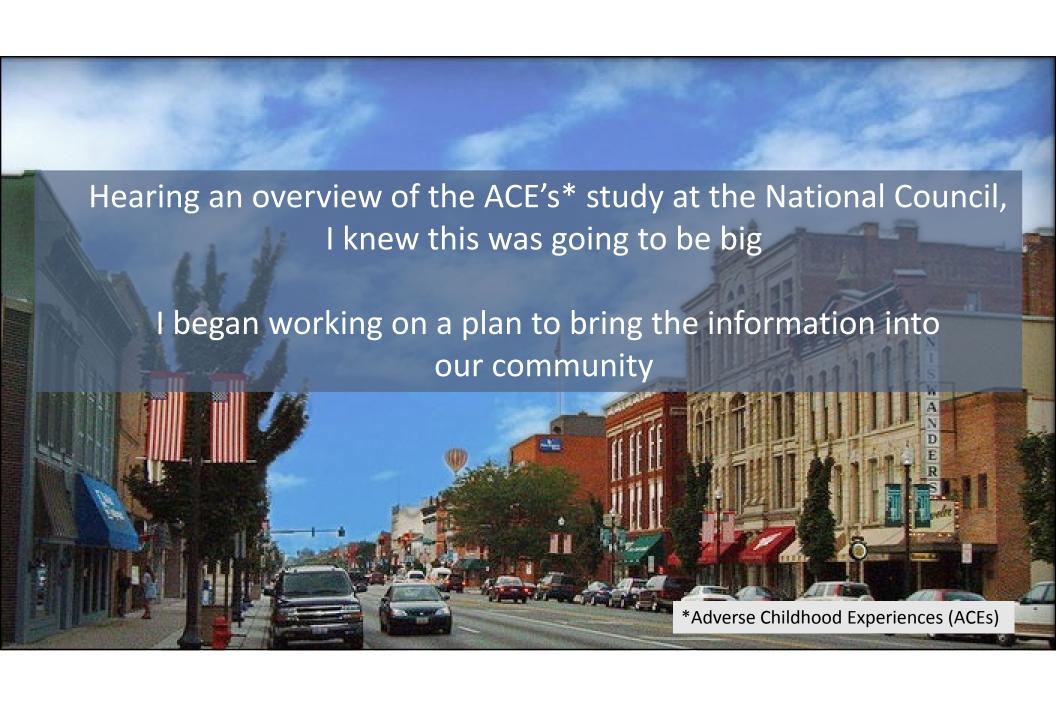




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What was your **starting point**?







How we got started

- Submitted a proposal to our local foundation to fund our participation in a Trauma Learning Community through the National Council. The grant was approved, and our efforts have been maintained since
- 22 local organizations participated in the Learning Community, including
 - Hospital staff members (e.g., obstetric, psychiatric, and emergency services)
 - Developmental disabilities
 - Law enforcement and fire department
 - Schools
 - Social services
 - Other organizations

What has evolved as a result?



- Each organization did a self-assessment, identified an area for improvement, created an implementation plan, and carried out the plan during the process
- In addition, each agency attended formal trainings on the impact of trauma and how to make improvements to become trauma-informed organizations



What has been the impact in your community?

- A deeper, cross-sectional understanding of the impact of trauma. This is helpful to people when they seek services/interact with multiple agencies
- Helped to teach the difference between explaining why a behavior happens versus excusing the behavior
- Changed the approach of many in our community, especially our city schools. They trained all staff members (more than 800), which reduced discipline issues and created empathy

What does it take to sustain your efforts?

- A champion: someone with passion to keep it moving
- Ongoing training and staff development sponsored by the University of Findlay
- Institutionalize the issue: Incorporate trauma-informed care into organizational goals and educational curriculums
- "No Wrong Door" training





TIC and the Opioid Epidemic

- The opioid epidemic has had significant impact on the community. Of utmost concern is the issue of grief and loss
- Grief and loss programming is being embedded in our treatment services, early intervention services, and community prevention efforts
- We are hopeful that this will positively impact the level of trauma experienced as a result of the epidemic in our community

Walk-Away Points

- People experience the same event differently. Avoid judging—just respect each other
- Listen to learn, and respect other people and their views. Value the experiences other people have, even if they are not your own
- Shift from asking "What's wrong with you?" to "What happened to you?"
- We all experience major events, sometimes individually and sometimes together. For some, these events are traumatic. But this does not have to be the end of the story
- COLLABORATION BUILDS HEALTHY COMMUNITIES!

Contact Information

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All photographs in this presentation were obtained through an open source search.



For more about the BJA Comprehensive Opioid Abuse Program (COAP) https://www.coapresources.org/

