

REPORT

Cultivating
Compassionate
School Communities
Through the
Childhood-Trauma
Learning
Collaborative (C-TLC)

Survey of C-TLC Fellows 2020-2021

#### **INSIGHTS**

Fellows demonstrated increased knowledge around self-care and trauma-responsive practices, using knowledge gained from subject matter experts and each other to overcome enormous challenges during a difficult year.

#### **TRENDS**

Reducing stress and burnout and continuing to increase knowledge around self-care and community wellness are the top-trending topics among C-TLC Fellows.



# TABLE OF CONTENTS

Executive Summary	1
Key Learnings	3
Survey Results	6
Fellows' Responses	
Meet Our Fellows	10
Conclusions and Future Activities	11
About Us	i
Additional Resources	ii
Acknowledgments	iii
Disclaimer	iv

# Executive Summary

The Childhood-Trauma Learning Collaborative (C-TLC) is the learning community of the New England MHTTC's School Mental Health Initiative. Funded by the Substance Abuse and Mental Health Services Administration (SAMHSA), the C-TLC was created to address the needs of schools in responding to trauma and creating practices to buffer against trauma's negative effects while building resilience for all children.

Our mission is to enhance school culture and prepare professionals in education and mental health to improve and support the mental health and resiliency of school-aged children in the New England region, particularly those who have/are at-risk of experiencing trauma.

Through the C-TLC, public and private Pre-K-12 schools in New England gain access to evidence-based mental health resources to enhance their awareness of childhood trauma and related neurobiological implications. Our training and technical assistance supports focus on the benefits of mindfulness practices for youth, as well as ways to strengthen, value, and increase social emotional competence, accelerate learning, and develop a sense of well-being for students, teachers, and the wider school community.

The C-TLC welcomed its inaugural class of Fellows in the Spring of 2019 with initial community-building and knowledge-dissemination sessions, virtually and in-person. Training and collaborative learning activities with these 24 district and school administrators, psychologists, social workers, and other educators continued through that summer and into the 2019-2020 school year.

#### Survey of C-TLC Fellows 2020-2021



During the 2020-2021 school year, we expanded our program to include a class of Junior Fellows, more district and school staff members, as well as mental health and community organization-based members, committed to advancing compassionate school practices to address and reduce childhood trauma.

C-TLC Fellows serve as local champions who support the dissemination of trauma-informed, child-centered interventions that improve resilience, learning, and achievement for children who have experienced trauma in the six states that comprise the U.S.Department of Heath and Human Services Region One area: Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont.

My participation and the support I have received from C-TLC staff has helped me to be more aware of the issues our students face and how to better deal with them. It has helped me to have a more cohesive plan for my school."

~2020-2021 C-TLC Fellow



Sixteen of our inaugural C-TLC Fellows remained in the program and became Senior Fellows who mentored the eight Junior Fellows by sharing resources, problem-solving around implementation of compassionate school practices during COVID-19, and participating in or leading affinity groups related to specific school mental health topics.



The C-TLC has been collaborative and has provided a great platform for discussions and networking, as well as professional development opportunities." ~2020-2021 C-TLC Fellow

As we wrapped up Year 2 of the C-TLC Program and began planning for Year 3 in the middle of the COVID-19 pandemic, we were uncertain what school would look like. We closed Year 2 by developing a toolkit with guidance for how schools could support staff and student mental health going back to school in the fall, not knowing exactly where and how students would be learning.

At the close of Year 2, we conducted a survey of our C-TLC Fellows to determine their involvement, level of learning, and satisfaction with the program. To evaluate Year 3 of the program, we released a similar 12-item survey to our C-TLC Fellows and conducted individual phone conversations with each Fellow to assess their progress in implementing compassionate school practices and to learn their level of satisfaction and any improvements that could be made to the program for Year 4.

Because of the enormous workload and pressure put onto educators during this trying school year, we understood that not every Fellow had the capacity to respond to the survey or participate in the phone interviews this year. We were grateful that Fellow engagement in the activities we designed to serve them during this challenging year were well attended, and that those who had the capacity were able to provide feedback to help us design an effective program for them during the coming school year. The results of the 2020-2021 C-TLC Fellow Survey include information from 21 survey responses and 22 phone interviews, representing the opinions of 23 of our 24 C-TLC Fellows.

# **Key Learnings**

#### Increase in Knowledge

- Fellows reported increased knowledge on the following topics at the rate noted parenthetically below:
  - COVID-19 trauma (95%)
  - o Trauma, brain development, and neuroplasticity (90%)
  - Compassionate discipline (90%)
  - Re-opening schools after COVID-19 (86%)
  - Mental health concerns (86%)
  - Student self-regulation (81%)
  - Needs and concerns of parents and families (81%)
  - Racial equity and justice (76%)
  - Mindfulness in early childhood (76%)
  - Identification and screening of children at-risk for mental illness (76%)
  - Early intervention (76%)
  - How to further student voice (76%)



100% of C-TLC Fellows agreed that they increased their knowledge about implementation of yoga, meditation, and mindfulness in classrooms; compassionate school mental health; educational leadership; and collaborations between schools and community partners.



"The C-TLC has provided many resources to assist in addressing mental health in schools and to provide teachers in their support of students with mental health needs."

~2020-2021
C-TLC Fellow

- 67% of Fellows increased knowledge about how to prepare for and handle the aftermath of tragedies in the school community.
- 57% of Fellows reported an increase in knowledge around restorative justice.
- 52% of Fellows increased knowledge around delivery of mental health services in remote and rural areas.



#### Cultivating Compassionate School Communities Through the C-TLC

# **Key Learnings**

#### **Program and Community Engagement**

During our evaluation of the program last year, we saw that a large proportion of our Fellows were actively engaged in networking and conference presentation opportunities to further disseminate compassionate school practices throughout their local, state, and regional communities; however, the demands of COVID-19 decreased Fellows' ability to engage in these activities during the 2020-2021 school year. There was a variety of involvement in C-TLC activities with Fellows choosing the activities that best fit their needs from our menu of options.

The most popular program options for C-TLC Fellows were:

- Collaborations with mental health providers and government agencies
   100% considerably or somewhat engaged
- C-TLC/HEART Compassionate Conversations Series
   95% considerably or somewhat engaged
- Furthering heart centered and compassionate practices in local schools and districts
   95% considerably or somewhat engaged
- Sharing information from the C-TLC with local educators and the community
   95% considerably or somewhat engaged

- Attendance at workshops and conferences related to student mental health
   95% indicated participation
- Participation in webinars outside of the C-TLC
   90% indicated participation
- Implementation of a compassionate school practice, model, or program in school/district
   90% indicated this level of program engagement
- Networking with state and local mental health providers and officials 80% indicated this level of community engagement
- Presenting at local or national events and arranging local speakers
  - o 65% noted a local event
  - o 38% noted a national event
  - 57% noted they arranged for local speakers

Given the impact of the COVID-19 pandemic on schools, anecdotal reporting indicates that because of closures and social distancing policies, Fellows were less engaged in networking and recruiting schools to join or take our school culture assessment.

See Survey Results on page 6 for more information.

The majority of Fellows were satisfied and interested in continuing education in all topics explored during this year of the C-TLC program. Most Fellows found these Year 3 program topics of interest for Year 4:

- Trauma-conscious leadership for school administrators
   100% very or somewhat interested
- Compassionate Conversations in Schools 95% very or somewhat interested
- Optimism and resiliency
   95% very or somewhat interested
- Compassionate School Mental Health Model
   95% very or somewhat interested
- Compassionate School Practices Book Study 90% very or somewhat interested
- Optimizing systems for optimal child well-being 90% very or somewhat interested

# Future Areas of Focus

80% of C-TLC Fellows are also interested in continuing to learn about children's mobile crisis teams and helping families navigate child therapy. This demonstrates that Fellows were not only satisfied with all program topics introduced in Year 3, but that they want to continue to go more in-depth with each.



General areas of interest for knowledge increase included several more topics of consensus for further learning:

- Racism and trauma
   100% considerably or somewhat interested
- Preventing teen suicide
   100% considerably or somewhat interested
- School-community health collaborations
   100% considerably or somewhat interested
- Reducing stress for staff and students
   95% considerably or somewhat interested
- Self-care and burnout
   95% considerably or somewhat interested
- Organizational and community wellness
   95% considerably or somewhat interested

- Understanding and responding to early psychosis
   95% considerably or somewhat interested
- Alleviating the impact of childhood trauma 95% considerably or somewhat interested
- Identifying and diagnosing students most at-risk for mental health disorders
   95% considerably or somewhat interested
- Furthering and implementing compassionate practices
   90%-95% considerably or somewhat interested

## **Survey Results**

The results of this survey show that while C-TLC Fellows continued to increase their knowledge of compassionate, trauma-informed practices in the school building and to share this knowledge with the staff in their schools and districts, they engaged in fewer activities to disseminate this knowledge widely in their states, regions, and at the national level. Schools were less concerned with assessing their school culture and attending meetings to network, because they were attending to urgent concerns within their school buildings.



Our original goal in Year 3 was to increase capacity to move beyond the school or district level to disseminate compassionate school practices and other resources to support and sustain comprehensive, trauma-informed school mental health services at the state and regional level, and to mental or behavioral health agencies and other community-based organizations that serve youth.

However, COVID-19's impact on the education system kept our Fellows' focus on their individual communities as they pivoted everything they did to adapt to the changing concerns related to the pandemic and its devastating effects on staff and student mental health.

#### Space for Community

During our phone conversations, Fellows expressed appreciation for the spaces we held for them to be in community with each other while learning about traumaconscious self- and community care practices during the affinity groups, C-TLC/ **HEART Compassionate Conversation** Series, and Compassionate School Practices Book Study. They appreciated the balance of structured learning and time for open dialogue that these activities allowed. Despite not being able to meet inperson as we have done for Years 1 and 2, we were able to create virtual spaces to increase our sense of community, modeling ways for Fellows to take these practices into their schools and organizations.

#### **Flexibility**

An important learning for the C-TLC staff during this year of the program was the need to be flexible in our expectations and offerings. While we continued to ask Fellows to complete an Action Plan, we offered a more flexible menu of options from which Fellows could chose the activities that best supported the unique needs of their staff and students. We also understood that measuring school culture using our School Compassionate Culture Analytical Tool for Educators (S-CCATE) did not make sense for many schools during this unpredictable school year. Fellows appreciated this less prescriptive method of monitoring their progress towards becoming a more compassionate, trauma-skilled school. Even though Fellows' needs were diverse, we were able to offer a variety of program options that left all Fellows feeling satisfied with the program.

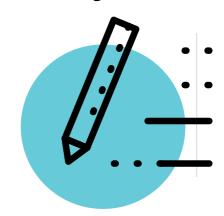
## **Survey Results**

#### Demonstration of Knowledge in Action

As our survey results indicate, our programming and resources were highly successful in helping educators gain the skills and tools they need to cultivate a compassionate school culture to buffer against and address trauma. While our webinars with subject matter experts, research-based tip sheets and articles, and comprehensive training opportunities contributed to this learning, the interactions between Fellows where they shared real life experiences about delivering trauma-skilled education and care in schools were significant to Fellows' increase in understanding. Seeing the ways in which Fellows were able to pivot to online learning with grace and compassion helped us recognize that this is a group of truly impressive educators who will make a significant contribution to their communities.

#### Fellows' Responses: Year 3 of the Childhood-Trauma Learning Collaborative

"The C-TLC has impacted my understanding of students and how to implement effective programs to improve school/district response to student mental health needs by providing up-to-date and relevant resources and strategies that educators can implement in a wide range of educational settings. The resources often contain a parent component as a linkage between home, school, and the community recognizing the importance of developing support systems."



"Prior to C-TLC, I compartmentalized mental health care to the most extreme cases as a special education endeavor. Since my involvement in the project, I now know this is 100% an all level of education approach and there are so many early intervention strategies that can be used with little humans to positively affect their coping strategies and self-regulation strategies for life."

"I have had access to so many resources. I can e-mail and ask questions of the C-TLC team, including other Fellows. I can access so many resources through Basecamp or attend a webinar or read a recommended book that is matched to the topics that I am working on."

"My involvement with the C-TLC has given me both the knowledge/training as well as the 'clout' to be able to present this information to the staff at my school and to gain the respect of administrators. It has helped my school to implement the district's strategic plan goal of utilizing mindfulness in classrooms to help students self-regulate and achieve academically."

# Fellows Responses: Year 3 of the Childhood-Trauma Learning Collaborative Fellows' Responses

"The impact of C-TLC has been a nice compliment to my understanding of student mental health. I did feel confident in my previous understanding, however I find this opportunity to be beneficial in that it gives me time to connect with other professionals that I would not otherwise have had access to. Additionally, with Basecamp I am able to access resources when I need them on a platform. This is much more helpful than saving emails or filing Google docs, etc. I appreciate the professional development opportunities and have shared them with all my coworkers as well."

"As a result of the program, I have recognized the importance of training and professional development for all school staff. Our school district has embarked on a rigorous training model for our paraeducators and support staff. During the past school year, almost all support staff have engaged in at least eight hours of professional development focused on trauma-informed practices. We have also provided professional development focused on equity and inclusion of all marginalized populations. Lastly, we have provided professional development for paraeducators and support staff focused on appropriate behavioral interventions which include mindfulness activities and restorative practices. The focus on professional development for paraeducators and support staff will enrich our schools so that teachers and paras are focused, trained, and equipped with strategies that align with our district's philosophy."



#### Fellows' Responses: Year 3 of the Childhood-Trauma Learning Collaborative

"The conversations have been helpful to me as a leader and in turn to my team. We never had yoga and mindfulness for staff before and now we do. I have heard wonderful comments from staff and they keep coming! Our yoga teacher is now doing mindfulness with our 5th graders regularly. I still have to share many of the ideas with my staff, but there is a lot that I needed as a leader."

"The resources I am exposed to via webinars and Basecamp continue to be instrumental in furthering my understanding and planning around school and district practices related to student mental health and trauma. This year, in particular, I have appreciated the resources/presentations that have also focused on adult SEL."

The C-TLC will continue to bring trauma-informed mental health resources to Region 1. Our goal is to enhance school culture and prepare school personnel to improve the mental health of children, youth, and the adults who teach and care for them in the New England region.

# 2020-2021 Childhood-Trauma Learning Collaborative Fellows



The C-TLC is supported by a diverse group of educational leaders and mental health professionals from across the six states in the New England region.

A

C-TLC Fellows are our program ambassadors!

With the C-TLC, we are providing an infrastructure in support of local actions and self-determination under an umbrella of furthering a compassionate response to children's mental health in school communities."

~Martha Staeheli, PhD, Director

New England MHTTC School Mental Health Initiative

#### **Conclusions and Future Activities**

During the 2020-2021 school year and Year 3 of the Childhood-Trauma Learning Collaborative (C-TLC), Fellows demonstrated tremendous resilience, compassion, and creativity in their response to the challenges of the COVID-19 pandemic. Senior C-TLC Fellows used the knowledge they accessed in the first two years of the programs to help their staff, students, and students' families prioritize their mental health and well-being—and they helped Junior C-TLC Fellows navigate the vast library of resources compiled to impact a new group of school communities.

C-TLC Fellows overwhelmingly reported an increase in knowledge due to the webinars, toolkits, blogs and articles, and other resources about supporting youth mental health and addressing childhood trauma that the C-TLC and the MHTTC network provided during this past year. They expressed appreciation for the spaces we held for them to gather in a difficult year to share challenges and find inspiration from one another. Because C-TLC staff designed the Year 3 programming using direct feedback from Fellows on their needs and wants, they were satisfied with the topics and delivery of knowledge. While staff and Fellows alike were disappointed to miss our annual in-person meeting, we found ways of building community online as we look forward to once more seeing each other face-to-face.

In Year 1 of the program, we laid the foundation for understanding the neurobiology of trauma and the research behind mindfulness as a tool to heal the body and the brain from the effects of trauma and toxic stress. In Year 2, we expanded that foundation to include compassionate practices that schools could use to cultivate a compassionate school community on the journey to becoming trauma-skilled. In Year 3, the C-TLC program began to focus more on the roles of leadership, interconnected youth-serving systems, and comprehensive school-based mental health in compassionately responding to the needs of the entire school community. In Year 4, we will work with Fellows to further their understanding in these areas while assisting them in bringing in more members of youth-serving organizations and systems as community partners in supporting youth, staff, and family mental health.

#### Considerations for Next Year

As a part of Year 4 activities, we will focus on the areas that C-TLC Fellows reported were most relevant. The full list of future topics can be found on page 5 of this report. We will continue with our monthly webinar series, bringing in experts who can speak to the topics that most interest Fellows, such as trauma-conscious leadership, racism and trauma, and preventing teen suicide—topics that 100% of Fellows would like to learn more about.

Another issue that C-TLC Fellows unanimously want to increase their knowledge around is school-community health collaborations. We will continue to expand the Healthcare workers and Educators Addressing and Reducing Trauma (HEART) Collective efforts around this topic, and further involve C-TLC Fellows in those efforts. The HEART Collective will facilitate a learning collaborative to help schools and community health centers enhance collaboration around school-based mental health, release a website, and engage in a public mental health awareness campaign.

# Strengthening the Field

Through the work with HEART and the C-TLC, we will continue to share information around our *Compassionate School Mental Health Model* and the best practices that support it as noted in the C-TLC's *Compassionate School Practices* publication, both of which 95% of C-TLC Fellows are interested in learning more about as well.

With nearly all Fellows interested in continuing to learn more about our Compassionate Conversations in Schools work, we will release an implementation guide for this conversation series that will help C-TLC Fellows lead these unique dialogues with their own staff, students, and their families. Through this resource, Fellows and the general public will have the tools they need to hold a healing space with their communities to open with a brief mindfulness practice, provide helpful tips and strategies on a wellness topic, and have open dialogue about the struggles and successes that their community members experience around that topic. Topics explored include addressing school related trauma, community wellness, and compassion fatigue and burnout.

Reducing stress and burnout and increasing knowledge around self-care and community wellness continue to be topics of great interest. We will continue providing resources and technical assistance on these topics through our wellness initiatives.



The C-TLC is excited to announce new resources that will support Fellows and the general public in becoming more compassionate and trauma-skilled.

Our Year 4 plans include the release of a 12-hour, self-directed online learning course on the HealtheKnowledge platform, *Cultivating Compassionate School Communities that Respond to Trauma Effectively*. This course guides educators and community members through the steps to becoming trauma-skilled. We will offer technical assistance and release an implementation guide as well to support administrators with effective course usage.

We look forward to working more closely with member schools and organizations in the New England region during Year 4 and to advocating for more effective collaborations among youth-serving systems—especially education and mental health—to ensure trauma-skilled, recovery-oriented, person-centered, equitable, effective, and compassionate practices.

We are amazed by the shining examples of compassionate, transformational leadership that this class of Childhood-Trauma Learning Collaborative Fellows embodied during this impossible year. We are incredibly grateful to be learning alongside these educators who inspire their school communities and us to continue together on this difficult journey to reduce childhood trauma and increase community wellness with hope and tenacity.

## **ABOUT US**

New England MHTTC serves Health and Human Services (HHS) Region 1, which includes the states of Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont.

New England MHTTC offers support at local, regional, and national levels on recovery-oriented practices, including recovery supports, within the context of recovery-oriented systems of care. These include, but are not limited to, person-and family-centered care planning and shared decision-making; peer support; supported employment, education, parenting, and spirituality; and other strategies to promote the community inclusion of children/youth and adults with serious mental illnesses and their loved ones.

Support is provided to educators and schools in New England through the Childhood Trauma-Learning Collaborative (C-TLC), a school mental health initiative collaborating with twenty-four C-TLC Fellows (administrators, educators, school psychologists, and social workers) in the six New England states.

The goals of this collaborative are to accelerate learning about and implementation of best and promising practices to improve supports and services to students with behavioral and emotional challenges who are most at-risk. We further services in New England through the Fellows who act as ambassadors providing a conduit to their local communities and as exemplars of some of the best and most promising practices.



The Substance Abuse and Mental Health Services Administration (SAMHSA) has funded the New England Mental Health Technology Transfer Center in part to "heighten awareness, knowledge, and skills of the Region 1 mental health workforce to implement evidence-based prevention, mental health promotion, treatment, and recovery support services across the continuum of care" (New England MHTTC, 2019).

# Acknowledgments

We are pleased to acknowledge the contributions of the Yale Program for Recovery and Community Health and the New England MHTTC staff and collaborators who contributed to this report:

#### Larry Davidson, PhD, Director

New England MHTTC and Yale Program for Recovery and Community Health; Professor of Psychiatry, Yale School of Medicine; and Senior Policy Advisor, Connecticut Department of Mental Health and Addiction Services New Haven, CT

#### Maria E. Restrepo-Toro, BNS, MS, Co-Director

New England MHTTC; Project Manager, Education & Training, Yale Program for Recovery and Community Health

New Haven, CT

#### Martha Staeheli, PhD, Program Director

Yale Program for Recovery and Community Health; Instructor, Yale School of Medicine, Department of Psychiatry New Haven, CT

#### Christine Mason, PhD, Advisor

Childhood-Trauma Learning Collaborative New England MHTTC New Haven, CT Executive Director Center for Educational Improvement Vienna, VA

#### Dana Asby, MA, MEd, Education Coordinator

New England MHTTC New Haven, CT Director, Innovation and Research Support Center for Educational Improvement Vienna, VA

## Ingrid Padgett, Communications & Program Strategist

New England MHTTC New Haven, CT Director, Communications and Development Center for Educational Improvement Vienna, VA

# SPECIAL APPRECIATION

Heather J. Gotham, PhD, Director Mental Health Technology Transfer Center Network Coordinating Office Stanford University School of Medicine Palo Alto, CA

# About the Mental Health Technology Transfer Network (MHTTC)

The purpose of the MHTTC Network is technology transfer—disseminating and implementing evidence-based practices for mental disorders into the field.

Funded by the Substance Abuse and Mental Health Services Administration (SAMHSA), the MHTTC Network includes 10 Regional Centers, a National American Indian and Alaska Native Center, a National Hispanic and Latino Center, and a Network Coordinating Office.

This collaborative network supports resource development and dissemination, training and technical assistance, and workforce development for the mental health field. We work with systems, organizations, and treatment practitioners involved in the delivery of mental health services to strengthen their capacity to deliver effective evidence-based practices to individuals.

MHTTC services cover the full continuum spanning mental illness prevention, treatment, and recovery support.

### For more information, contact the MHTTC Network Office

Email: networkoffice@mhttcnetwork.org

Phone: 650-721-8692

**How to cite this work:** New England Mental Health Technology Transfer Center (2021, August). *Cultivating compassionate school communities through the Childhood-Trauma Learning Collaborative: 2020-2021 Survey of Fellows*. Program for Recovery and Community Health at Yale University.

# Classroom USE Well-Being Information and Strategies for Educators



**Online Course** 



Video Library + Resource Collection



Website

# Now Available at www.classroomwise.org

Classroom WISE is a FREE 3-part training package that assists K-12 educators and school personnel in supporting the mental health of students in the classroom. Developed by the Mental Health Technology Transfer Center (MHTTC) Network in partnership with the National Center for School Mental Health (NCSMH), this package offers strategies and skills to engage and support students with mental health concerns in the classroom. In addition to a free online course on mental health literacy for educators and school personnel, a video library and resource collection are also available!

A free **certificate of completion** will be provided to participants upon completion of the course requirements.





#### **DISCLAIMER**

This presentation was prepared for the New England MHTTC under a cooperative agreement from the Substance Abuse and Mental Health Services Administration (SAMHSA). All material appearing in this presentation, except that taken directly from copyrighted sources, is in the public domain and may be reproduced or copied without permission from SAMHSA or the authors. Citation of the source is appreciated. Do not reproduce or distribute this presentation for a fee without specific, written authorization from the New England MHTTC. This presentation will be recorded and posted on our website.

At the time of this presentation, Dr. Miriam E. Delphin-Rittmon served as SAMHSA Assistant Secretary. The opinions expressed herein are the views of the moderator and panelists and do not reflect the official position of the Department of Health and Human Services (DHHS), or SAMHSA. No official support or endorsement of DHHS, SAMHSA, for the opinions described in this presentation is intended or should be inferred.

This work is supported by grant #1H79SM081775 from the DHHS, SAMHSA.



# Mental Health Technology Transfer Center Network Funded by Substance Abuse and Mental Health Services Administration

