

ADDRESSING CHILDHOOD ADVERSITY ACROSS LOUISIANA

November 2022
Whole Health Louisiana
Convening

CONVENING SUMMARY
Prepared: January 2023

INTRODUCTION

Across the United States, consensus is growing that a comprehensive approach to preventing and addressing trauma is needed across child-serving systems. In Louisiana, the issue of childhood adversity and trauma is especially salient, with the state ranking 49th among all US states in terms of overall child well-being, and 3rd highest in terms of number of children per capita with two or more adverse childhood experiences.

From this need, the First Lady of the State of Louisiana launched the Whole Health Louisiana Initiative, a coordinated effort with the Louisiana Department of Health, to develop a shared framework and state trauma-informed plan that can be implemented across Louisiana's child and family serving systems.

The development of this plan has three phases:

1. An 11-month discovery process to learn about the current state of childhood adversity in Louisiana, how it is being addressed, and what barriers exist to implementing change;
2. A convening of state leaders, experts, and advocates to review the findings from the discovery process and launch the development of a state plan; and
3. A statewide process to develop the state plan.



The following report summarizes the purpose, goals, and key insights pulled from the resulting discussions of the Phase 2 convening. These insights, along with the findings from the original discovery process, will be used to inform the statewide trauma-informed plan for Louisiana.

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Convening Background + Overview

CONVENING BACKGROUND + OVERVIEW

CONVENING OVERVIEW

The WHL Convening took place on November 29, 2022 at the Governor's Mansion in Baton Rouge, Louisiana with the purpose of bringing together leaders of Louisiana's child- and family-serving systems, community advocates, and experts on childhood adversity in order to prepare for the development of the statewide action plan. More than 50 individuals participated in the day-long convening.

The objectives of the convening were to:

- Ensure collective baseline understanding of trauma-informed care and the current state of childhood adversity across Louisiana
- Foster momentum around the importance of collaborative, statewide planning efforts focused on childhood adversity
- Gather input around the best way to structure creation and implementation of the statewide plan
- Gather input around the top priorities to address in the statewide plan that are both feasible and grounded in community need

The convening included large-group facilitated discussions and breakout groups to discuss potential priority areas for Louisiana's statewide plan, potential pathways to achieving outcomes, and essential considerations for Phase 3, the planning process to develop the state plan.

GROUNDING CONTEXT FOR CONVENING

The WHL Convening used two primary discovery sources to inform the convening discussion: (1) insights from the Phase 1 Discovery Process, and (2) analysis of other states' statewide plans and initiatives focused on childhood adversity. This approach allowed the discussion to be anchored both in insights from Louisianans and in the learnings from other states who have gone through similar processes (*see the appendix for the grounding materials provided to participants*).

The full Phase 1 Discovery Report, which was developed in collaboration with Dr. Paula Zeanah with the Picard Center at the University of Louisiana at Lafayette, and supported by United Way of Southeast Louisiana, is available at the following link: <https://tinyurl.com/WHLdiscovery>

MOVING FROM PHASE 2 TO PHASE 3: PLANNING

Building upon the insights gathered from the convening, as well as the insights gathered in Phase 1 Discovery, WHL launched the planning development phase in January 2023.

The process will be **guided by a steering committee** comprising representatives from impacted state agencies, community leaders, and advocates; further developed by **cross-sector working groups**; informed by **advisory bodies** bringing additional perspectives; and adapted based upon **statewide public community conversations**.



Insights from the Convening

KEY THEMES

The perspectives shared by attendees in response to the materials and facilitation questions are summarized in the four categories and subgroups below. While the insights are neither endorsements nor decisions, the participants' perspectives expand on the areas of need illuminated through the WHL discovery process (Phase 1) and will be utilized in the WHL plan development process (Phase 3).

1. POTENTIAL PRIORITY AREAS FOR LOUISIANA'S STATEWIDE PLAN

2. FURTHER INSIGHTS ABOUT POTENTIAL PRIORITY AREAS

PREVENTION

AWARENESS

EDUCATION +
TRAININGSUPPORT FOR
SUPPORTS

3. POTENTIAL PATHWAYS TO ACHIEVING OUTCOMES

ALIGNED GOALS &
VISION

DATA & EVALUATION

RESOURCE
IDENTIFICATION

ESTABLISHED TRUST

STATEWIDE
COLLABORATION

SET STANDARDS

DEFINED
OWNERSHIP

POLICY CHANGE

CLEAR ROLES &
RESPONSIBILITIESINCREASED WORKFORCE
CAPACITYCOMMUNITY ADAPTABLE
PLAN

4. ESSENTIAL CONSIDERATIONS FOR PLANNING PROCESS

OPTIMISM & CARE

ACTIONABLE PRIORITIES

EQUITY & CULTURAL
HUMILITY

LONG TERM SUSTAINABILITY

FOCUSED SCOPE OF WORK

COMMUNITY VOICE +
REPRESENTATION

MOTIVATION + INCENTIVES

KEY PLAYERS & END USERS

1. POTENTIAL PRIORITY AREAS FOR LOUISIANA'S STATEWIDE PLAN

The Phase 1 Discovery process and review of other state plans illuminated ten potential priority areas which were considered by the convening participants. *[See Appendix for Phase 1 Discovery Insights and Learnings from Other States]*

Awareness + Mindset Shifts	Systems + Statewide Coordination
Embedding Trauma-informed + Evidence-based Practices into Child-serving Entities	Prevention + Addressing Social Determinants of Health
More Trauma-focused Services + Treatments	Accessible Information on Available Services
Policy Change	Accountability Systems
Reducing Barriers to Services	Funding

Convening attendees were asked to rank the top 3 priorities they would recommend be included in the Louisiana plan. Their ranking is captured below:

1. Awareness + Mindset Shifts
2. Systems + Statewide Coordination
3. Prevention + Addressing Social Determinants of Health
4. Embedding Trauma-informed + Evidence-based Practices into Child-serving Entities
5. Funding
6. Reducing Barriers to Services
7. Policy Change

The three priorities receiving the fewest votes were: Accountability Systems; Accessible Information on Available Services; and More Trauma-focused Services + Treatments.

2. CONVENING INSIGHTS ON POTENTIAL PRIORITY AREAS

The three potential priority areas identified by convening participants were explored through large and small group discussions. Additionally, attendees elevated an additional priority area for those who will be developing or implementing the plan (support for supports).

SUPPORT FOR SUPPORTS

- Those involved in the planning process and implementation of the plan need additional support through intentional community building
- Providers and direct service workers are struggling with burnout and need to be considered as a key target audience
- Parents and adults supporting children need increased services & resources

EDUCATION + TRAINING

- Education to influence behavior changes and counter misinformation
- Effective training across agencies, with an emphasis on how to bring trainings to life
- Cohorts of individuals within the same sectors to learn together (e.g., school, law enforcement)
- Training to increase understanding for those who are creating policies

PREVENTION

- Identify and amplify successful prevention efforts across the state
- Identify what needs to change in how juvenile legal and other systems services are delivered in order to better prevent trauma

AWARENESS

- Public awareness of the issue of childhood adversity is lacking
- Increased awareness and education will foster public support and buy in
- Though resources may exist, awareness of these resources needs to be emphasized

3. POTENTIAL PATHWAYS TO ACHIEVING OUTCOMES

In addition to considering the priority areas of focus, the convening participants identified “pathways” for the state plan to achieve outcomes. Some pathways are about the plan or planning process to ensure aligned vision and goals; other pathways are about changing policies that can promote or hinder change. Participants also identified key data and evaluation considerations.

ALIGNED VISION AND GOALS

The plan or planning process needs:

- Clear problem definition
- Shared definitions of success
- Shared goals
- Alignment at all levels across the state
- Alignment on vision
- Shared desired outcomes
- Value proposition / case for relevance
- Purpose and “Why now?”
- Shared values
- Shared language around trauma

POLICY CHANGE

The plan or planning process needs:

- Major policies that will effect change
- Actionable policies
- Evidence based policies
- Policies in place for support to families
- Removal of policies that are harmful
- Commitment starting at the state level, rather than with family-serving systems
- Commitment from legislative body
- Bipartisan support

DATA & EVALUATION

The plan or planning process needs:

- Data, specifically need to measure strengths, to determine impact, and to make recommendations and decisions
- Track measurement towards agreed upon goals
- Legislation and certain policies prevent data sharing; we need to be connected
- Space for best practices and shared learning - potentially through biannual reporting or convening
- Clarity and alignment on **what** we are measuring and **how** we are measuring it
- Centralized location for reporting that is accessible to the public

3. POTENTIAL PATHWAYS TO ACHIEVING OUTCOMES *(Continued)*

CLEAR ROLES + RESPONSIBILITIES

The plan or planning process needs:

- A Theory of Change for the plan to help outline the process, and help people understand their role to play
- A toolkit to help people understand their role and the actions they can do
- Clear expectations about roles in the plan

COMMUNITY ADAPTABLE PLAN

The plan or planning process needs:

- Broad goals that can be adapted or operationalized to meet the unique needs of communities across the state
- Tailored language for various groups
- Implementation flexibility across regions and within regions

SET STANDARDS

The plan or planning process needs:

- Shared criteria that organizations can assess their policies against
- Standard of accountability

DEFINED OWNERSHIP

The plan or planning process needs:

- Top down AND bottom up approach
- Give cities and municipalities shared ownership
- Strong local and state champions
- State agency ownership may be challenging, communication is needed
- A “backbone” organization outside of traditional systems to take the lead, coordinate efforts across state
- Communications plan + coordinated group of community “influencers” across the state to advance sense of shared ownership
- Shared accountability and group oversight of plan

3. POTENTIAL PATHWAYS TO ACHIEVING OUTCOMES *(Continued)*

INCREASED WORKFORCE CAPACITY

- There is a workforce crisis within state systems and direct service jobs due to low wages and exhausting work
- Commitment to this work may exist but workforce capacity is limited
- Agencies and staff are at maximum capacity; additional work needs to be integrated into the work they are already doing

STATEWIDE COLLABORATION

The plan or planning process needs:

- Information sharing across systems
- Improved ease of redirecting resources
- Shifting from a competitive to a collaborative culture across entities
- Systems coordination
- Addressing silos that are barriers to cross-sector collaboration
- Network of collaborators
- Collaborative and/or group of people that are continuing the work
- Multi-agency agreements and protocols that would need to be updated annually
- Safe spaces for conversation and honesty
- Accountability
- Transparency
- Collective leadership

RESOURCE IDENTIFICATION

- Identify which resources are available and what is still missing
- Align resources to avoid wasted effort and redundancy
- Leverage the strengths of various organizations and service providers
- Build on what is already being done well by looking at best outcomes
- Ensure list of available resources is up to date and accessible to the community

ESTABLISHED TRUST

- Currently there is a lack of trust in state entities and higher trust in faith-based communities and healthcare entities
- Need to build trust between individuals and systems
- Leverage community partners already connected in the community
- Relationship-centered approach with upfront education and trust building

4. ESSENTIAL CONSIDERATIONS FOR PLANNING PROCESS

Convening participants shared insights across the four categories below when discussing key considerations to be taken into account during the planning process. These insights were recommended to ensure the final product will be feasible, sustainable, and relevant.

COMMUNITY VOICE + REPRESENTATION

The plan or planning process needs:

- Incorporating voices of those impacted
- Inclusive plan with community representation
- Power sharing
- Community-driven strategies
- Endorsement of plan from those with lived experience
- Local buy in
- Community systems involved (Beyond Education and Healthcare)

IDEAS FOR PLAN SCOPE + SUSTAINABILITY

The plan or planning process needs:

- Phased approach to plan. Start with easy wins, and make the process easily implementable
- Targeted priorities, do not go in too many directions
- Focus on state agencies
- Policy change to allow for sustainability
- Adequate and sustainable funding is a priority

INCENTIVES + MOTIVATION

The plan or planning process needs:

- Realistic incentives to drive behavior change and provide sustained motivation across many years

ACTIONABILITY OF FINAL PLAN

The plan or planning process needs:

- Plan accessibility and readability
- A toolkit to make the plan usable
- Resources for collaborators, including what they should now and how they can plug in

4. ESSENTIAL CONSIDERATIONS FOR PLANNING PROCESS *(Continued)*

EQUITY & CULTURAL HUMILITY

- Ensure the planning process incorporates best practices around equity, diversity, and inclusion
- Share power, developing solutions **with** those who will be impacted, not **for** them
- Be intentional about providing culturally competent recommendations

OPTIMISM AND CARE

- Reflect care, compassion, and hope throughout plan & process
- Focus on opportunity, not adversity
- Strengths based vision
- Humanize language
- Instill empathy

Barriers

- Communities that historically have been deprived of the power to make change
- Ignorance, indifference, and apathy

KEY PLAYERS AND END USERS

- The planning process requires inclusion of those who will be most impacted by the outcomes
- Key players will differ by region
- Need rural representation
- Include parents, providers, faith based orgs
- Need business sector & other industries
- Focus on education sector
- Incorporate judicial involvement
- Ensure child centricity

Reach out to

WHL@la.gov

for more information and/or
to get involved

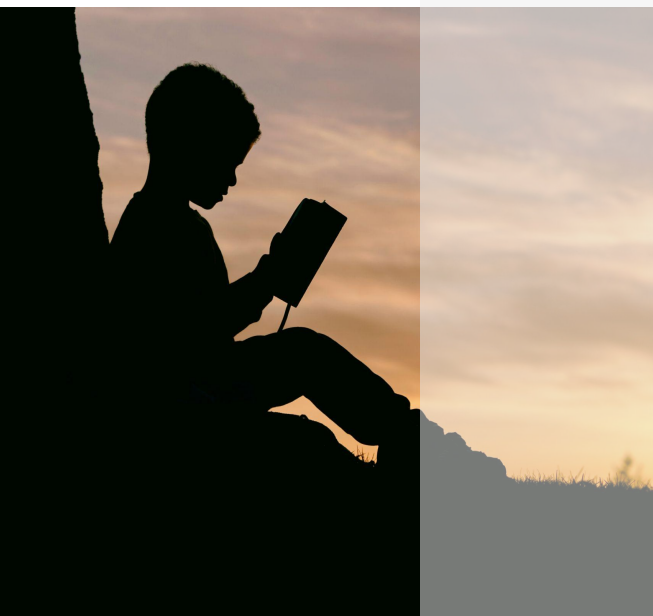


APPENDIX

SUMMARY OF PHASE 1 DISCOVERY
INSIGHTS AND LEARNINGS FROM
OTHER STATES PRESENTED DURING
WHL CONVENING

Potential Areas of Focus

How to Approach Plan Development
+ Implementation



Potential Areas of Focus

STATEWIDE PLANNING: THE WHAT

CORE FOCUSES OF STATEWIDE PLANS

Across the United States, consensus is growing that a comprehensive approach to preventing and addressing trauma is needed across child-serving systems.

The movement towards adopting a trauma-informed approach is **expanding from individual to cross-sector initiatives** and moving **towards larger efforts to build trauma-informed cities and parishes.**

SYNTHESIS OF PRIORITIES FROM ACROSS STATE PLANS

Below are themes from efforts of states across the country who have created statewide plans, initiatives, and/or coordinating bodies to reduce childhood adversity and its impacts, and to create trauma-informed states. Examples include Michigan, New Jersey, Oklahoma, Pennsylvania, Tennessee, and more.

**AWARENESS +
MINDSET SHIFTS**

**PREVENTION +
ADDRESSING SOCIAL
DETERMINANTS OF
HEALTH**

**REDUCING BARRIERS
TO SERVICES**

**EMBEDDING TRAUMA-INFORMED
AND EVIDENCE-BASED PRACTICES
INTO CHILD-SERVING ENTITIES**

**SYSTEMS + STATEWIDE
COORDINATION**

POLICY CHANGE

ACCOUNTABILITY

FUNDING

STATEWIDE PLANNING: THE WHAT

PRIORITIES FROM ACROSS STATE PLANS

AWARENESS + MINDSET SHIFTS

- Increasing **awareness** of childhood adversity and trauma-informed care **within all child-serving entities**
- Increasing the general public's awareness, as well as advancing **public will-building** to expand and sustain strategies and initiatives

PREVENTION

- Increasing the adoption of evidence- based and evidence-informed **primary prevention strategies** to prevent the occurrence of childhood adversity,
- ...including focusing on **social determinants of health** and **healing and preventing communal, racial, and historical traumas**

REDUCING BARRIERS TO SERVICES:

Prioritizing **access to and affordability of behavioral health services** for children, youth, and families

EMBEDDING TRAUMA-INFORMED AND EVIDENCE-BASED PRACTICES INTO CHILD-SERVING ENTITIES

- Promoting a **trauma-informed workforce** with demonstrated knowledge and skills
- Building systems and practices for **ongoing quality-improvement** that continually embed **evidence-based and culturally competent interventions and promising practices** into child-serving entities
- **Revising physical environments** to reduce further traumatization and promote healing

SYSTEMS + STATEWIDE COORDINATION

- Establishing state-wide cross-sector **commitments to:**
 - **advancing widespread collaboration**, coordination, and infrastructure
 - **a shared framework for becoming trauma-informed** agencies or entities
- Establishing a **system for coordinating efforts and driving collaboration** across sectors
- Fostering and **connecting community-based, grassroots efforts** across each parish or region of the state

STATEWIDE PLANNING: THE WHAT

PRIORITIES FROM ACROSS STATE PLANS

POLICY CHANGE

- **Advancing state-level policies** in service of embedding trauma-informed care across systems
- **Revising state agency policies or procedures** that conflict with organizations' ability to implement trauma-informed care

ACCOUNTABILITY SYSTEMS

- Establishing **shared accountability systems**
- Incorporating **youth and family voice** into efforts to ensure accountability to community
- Establishing and utilizing **shared metrics for tracking efforts** and outcomes

FUNDING

Seeking sustainable funding to ensure the state maintains a long-term commitment to reducing the impact of adverse childhood experiences.

STATEWIDE PLANNING: THE WHAT

INSIGHTS FROM LOUISIANA

ADDITIONAL BARRIERS ELEVATED BY LOUISIANANS

Many of the challenges identified during the WHL discovery phase (e.g., stigma, siloes, workforce burnout) are encompassed in the strategies of other state plans covered in the previous pages.

Additional challenges elevated by Louisianans in our discovery process include:

- **Disparate experiences across urban, rural, and suburban communities** that are not effectively addressed by the current system (e.g., greater service satisfaction in suburban communities, more barriers to access and greater stigma in rural communities)
- Disparate experiences and unique challenges for White and non-White communities (e.g., greater trust in systems for White respondents), including the **lack of culturally competent approaches**

POTENTIAL PLAN PRIORITIES ELEVATED BY LOUISIANANS

Through the discovery process, **seven top priorities** emerged. They are ranked in order of importance, though all seven were deemed high priority.

1. Prevention: Improving environmental factors that can cause adversity for children (ex: poverty, discrimination, unstable housing)

2. More Trauma-Focused Services + Treatments: Increasing the number of service providers offering trauma-informed or trauma focused services or treatments

3. Education for Service Providers: Increasing trauma-informed education across all family and child-serving providers

4. Decreasing Stigma: Decreasing stigma around mental health and trauma

5. Collaboration across Services: Improving collaboration between services for more holistic care

6. Awareness for the General Public: Campaign to increase messaging and education about childhood adversity and trauma-informed care to the general public

7. Accessible Information on Available Services: Establishing an up-to-date database detailing available services by region



How to Approach Plan Development + Implementation

STATEWIDE PLANNING: THE HOW

LOUISIANA INSIGHTS: KEY SUCCESS FACTORS

Participants throughout the 2021 - 2022 WHL discovery process highlighted four key success factors for any statewide planning or implementation efforts related to childhood adversity and trauma:

Balancing Voices.

It is imperative to include both agency and government representation as well as involvement from community members and interested groups during the statewide priority setting and implementation process.

Locally-led Implementation.

Implementation of a state-level action plan should engage local champions and leaders who are able to shape initiatives in line with their local context.

Need for Dedicated Funding and Long-term Funding Plan.

Interested parties expressed concern around unfunded mandates related to trauma and emphasized that any statewide action plan should include a clear outline for long-term funding.

Longevity over Time.

Many noted the importance of creating a plan that will be championed by actors across administrations and political parties, so that funding and initiatives can continue without interruption when local or state officials leave office.

ADDITIONAL CONSIDERATIONS FOR PLAN DEVELOPMENT

In addition to the key success factors and the seven initiatives, our discovery process illuminated the following considerations that cut across each initiative:

- **Parents and families are critically important to the success of this work**
 - Meet families where they are
 - Utilize **relationship-building** to build trust with families
 - **Decrease stigma** around mental health within families
- Leverage **faith-based communities** and **healthcare providers** as key partners
- Identify opportunities to **leverage schools** without adding to schools' capacity strain

STATEWIDE PLANNING: THE HOW

OTHER STATES: KEY SUCCESS FACTORS

From the review of other statewide plans, various themes emerged in terms of plan components necessary for plan success. Statewide plans to address childhood adversity often incorporate:

- Outlined goals and sector-specific objectives to become trauma-informed
- Priorities around funding and cross-sector collaboration
- The designation of a planning or governing entity to oversee trauma-informed approach efforts
- Strategies for legislative policy change that is supported with technical assistance and training resources managed by an oversight body
- Guiding principles that inform the plan development and implementation

EXAMPLES OF GUIDING PRINCIPLES UTILIZED IN OTHER STATE PLANS

Inclusive Process In Which We Engage Those Most Directly Impacted

Exploring Solutions Based On A Public Health Approach

Goal Driven

Mutual Respect

Shared Ownership

Authentic, Respectful, Collaborative Engagement

Implementing Data-driven Continuous Quality Improvement

Equity

Accountability

Transparency

WHOLE HEALTH LOUISIANA

Convening Summary

Commissioned by



SUPPORTING LOUISIANA'S CHILDREN, OUR CHILDREN

Prepared by



In Partnership with



United Way of
Southeast Louisiana