

To: Chair Kaiser and members of the Ways and Means Committee

From: Shamoyia Gardiner, Education Policy Director

Re: House Bill 277: State Department of Education – Guidelines on Trauma–

Informed Approach

Date: February 5, 2020

Position: Support

ACEs, or Adverse Childhood Experiences, are a category of early life traumas which negatively impact long-term health, prosperity, and social mobility outcomes¹. ACEs encompass traumatic experiences at all levels of severity and include: emotional, physical, and sexual abuse, emotional and physical neglect, domestic and intimate partner violence, illicit substance use in the home, untreated mental illness in the home, the incarceration of a household member, and the separation and/or divorce of adult caregivers². ACEs have the potential to hinder an individual's neurological, sociobehavioral, and emotional development, all of which have repercussions for students' well-being and their ultimate academic success.

ACEs don't target individuals based on race, gender, ability status, sexuality, nationality, socio-economic status, or any of the identity markers we typically use when disaggregating data. The groundbreaking 1998 study found that ACEs are relatively common--about 67% of survey participants had at least one ACE³. Unfortunately, the study also demonstrated that when an individual had more ACEs, the odds of them experiencing negative outcomes like alcohol and substance abuse, depression, adolescent parenthood, and many other issues also increased. Having 3 or more ACEs is typically the threshold for these negative outcomes.

More than 40% of Maryland children have at least one ACE—15.4% have had two or more.⁴ Last year, Maryland adopted a statewide Community School model as preparation to implement the Blueprint for Maryland's Future. With the growth of Community Schools strategies across the state, we can expect to witness the benefits of investing in a whole-child, student-centered approach to education.

When implemented with fidelity, Community Schools offer a full range of health, mental health, and social services that are explicitly designed to promote the well-being of students and remove barriers to their learning⁵. **ACY hopes to see any funding from the**

¹ Centers for Disease Control and Prevention.

https://www.cdc.gov/violenceprevention/childabuseandneglect/acestudy/index.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fviolenceprevention%2Facestudy%2Findex.html

² ibid

³ibid

⁴ Baltimore Sun. More than 40 percent of Maryland children experience traumatic events. October 19, 2017.

⁵ National Center for Community Schools. "Building Community Schools: A Guide for Action" October 2011 Advocates for Children and Youth builds a strong Maryland by advancing policies and programs to ensure children of every

Trauma-Informed Schools Expansion Program be allocated to schools equitably, based on the demonstrated student need.

We do caution that in the implementation of this or any other trauma-informed directive, the State Department of Education (MSDE) **remain mindful of two potential unintended consequences when developing the guidelines for a trauma-informed approach in Maryland schools**: (1) fixating on the negative experiences face by students, as many may have developed resilience and (2) ethical issues that may occur in the form of re-traumatization when attempting to identify students who have had traumatic experiences, or ACEs⁶.

Additionally, we wish to avoid the impression that only students who have experienced 3 or more ACEs or only students with Individualized Education Plans (IEPs) and 504 Plans or only students who are facing disciplinary action need to be approached from a trauma-informed perspective. Guidelines for trauma-informed approaches in schools should be developed with all students in mind, through an anti-racist lens.

HB 277 is the legislative embodiment of Proposed Action 2.2 of Recommendation 2 of MSDE's Mental Health Committee's October 2017 report. We urge this committee to issue a favorable report on HB 277 to remain consistent with MSDE's own recommendations and to better meet the needs of Maryland students who persevere in the face of traumatic experiences.

⁶ Leitch, Laurie. "Action Steps Using ACEs and Trauma-Informed Care: A Resilience Model". Springer Open, Health and Justice. December 2017.

⁷ http://www.marylandpublicschools.org/stateboard/Documents/10242017/TabG-MentalHealthUpdate.pdf