



HOPE Organization/School Application

Contact Information

Organization/School Name _____

Address _____

Phone _____

Email _____

Point of Contact:

Will greet facilitators at the entrance and remain for the beginning of the training, to support in any delays or concerns.

Name _____

Title _____

Mobile _____

Email _____

IT Contact

Name _____

Title _____

Mobile _____

Email _____

Parking and Entrance/Room Directions

Preparation Survey:

What are the 3 greatest pain points for your organization/school regarding behaviors and those you serve/work with?

How are these issues being handled now in your organization/school?

In regard to teacher/student/colleague relationships:

What is going well?

What is tricky?

What is the greatest need?

What initiatives do you have in place to support trauma informed care and healing-centered principles?

Are there particular staff who exhibit an interest in pursuing greater knowledge in trauma informed care/healing-center principles?

Is your organization/school committed to becoming trauma-informed? If so, is it part of your strategic plan?

Training/Coaching Logistics

Do you have a line item in your budget for training/coaching? YES NO

How many participants will you commit to offer time release so they may participate in the training?

Please list the Departments/Grade levels represented by participants.

Training Dates

Please give dated time frames for TBRI® trainings/coaching.

TBRI® trainings are offered in person, per best practice; we are open to discuss virtual options when necessary. In person trainings require the following AV components:

- HDMI cord
- TV or Flat White Screen
- Microphone, speakers that connect to computer, screen, or projector
- Technical assistance 30-40 minutes prior to session start time
- Tables and Chairs for participants, two additional tables for presenter and check-in

Printed Name of Applicant/Title _____

Signature of Applicant _____

Date _____

Please submit completed/signed form to info@hopestreetinc.com

Received by (Hope Street Member) _____ on _____.

Why partner with Hope Street?

When individuals, families and communities experience trauma that goes unresolved, it can interfere with trust in relationships. By understanding trauma and its impact, shifting the mindset from “What’s the matter with you?” to “What happened in your story?”

Let Hope Street help you explore pathways to resolve trauma and develop everyday trauma-informed responses and relational connections that strengthen and support individual and community resilience.

What to expect.

Short-term Individual and Systems Impact

Parents/caregivers/child-serving professionals will track and report increased:

- Knowledge re: ACEs, trauma, TBRI® strategies.
- Capacity to recognize trauma-related challenges.
- Self-awareness and behavior adjustment to problematic behaviors in children.

Schools will track:

- Increased family engagement.
- Reduced disciplinary actions.

Systems will track:

- Increased use of trauma-informed /TBRI® strategies.

Mid-term Individual and Systems Impact

Parents/caregivers/child-serving professionals will track and report:

- Reduced stigma around ACEs and trauma.
- Increased understanding of behaviors attributed to trauma/ACEs.

Schools will track and report:

- Improved academic outcomes/school performance.
- Reduced disciplinary actions.

Systems will track and report:

- Increased utilization of trauma-informed services.
- Increased trauma-informed:
- Systems of Care services; and Connection of Systems of Care services.

Long-term Individual Impact

Parents/caregivers/child-serving professionals will:

- Recognize and meet children's physical, social, and psychological needs through a TBRI® lens.
- Structure experiences to enhance emotional and behavioral self-regulation through a TBRI® lens.
- Build and strengthen secure attachments resulting in resilience.
- Master the use of proactive TBRI® strategies for behavioral change.
- Master the TBRI® IDEAL Response® (Immediate, Direct, Efficient, Active, Leveled at behavior, not child).
- Master TBRI® Levels of Response™ (Playful, Structured, Calming, Protective).

Long-term Systems/Organizational Impact

Jacksonville Systems of Care organizations will track and report:

- Increased numbers trained in trauma/ACEs/TBRI®.
- Increased trauma-informed policies.
- Increased collaborative, relational partnerships to serve children.

FL Department of Children and Families will track and report:

- Reduced child abuse and/or neglect reports and investigations.
- Reduced child removals.
- Reduced child maltreatment.
- Reduced domestic violence.
- Reduced juvenile recidivism.
- Increased child wellbeing.

Definitions

Trauma

Trauma results from an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening and that has lasting adverse effects on the individual's functioning and mental, physical, social, emotional or spiritual well being." According to the *Substance Abuse and Mental Health Administration (SAMHSA)* examples of trauma include, but are not limited to:

Experiencing or observing physical, sexual, and emotional abuse;

- Childhood neglect/abandonment;
- Family member with a mental health; substance use disorder; or incarcerated;
- Experiencing or witnessing violence in the community or while serving in the military; and
- Poverty and systemic discrimination.

Adverse Childhood Experiences (ACEs) are potentially traumatic events that occur in childhood. ACEs can include violence, abuse, and growing up in a family with mental health or substance use problems. Toxic stress from ACEs can change brain development and affect how the body responds to stress. ACEs are linked to chronic health problems, mental illness, and substance misuse in adulthood. However, according to the CDC, ACEs can be prevented and/or resolved.

Preventing ACEs can help children and adults thrive and potentially:

- Lower risk for conditions like depression, asthma, cancer, and diabetes in adulthood.
- Reduce risky behaviors like smoking and heavy drinking.
- Improve education and employment potential.
- Stop ACEs from being passed from one generation to the next.

Trauma Informed Care approaches shift the focus from "What's wrong with you?" to "What happened to you?" by:

- Realizing the widespread impact of trauma and understanding potential paths for recovery;
- Recognizing the signs and symptoms of trauma in individual clients, families, and staff;
- Integrating knowledge about trauma into policies, procedures, and practices; and
- Seeking to actively resist re-traumatization (i.e., avoid creating an environment that inadvertently reminds patients of their traumatic experiences and causes them to experience emotional and biological stress).

SAMHSA (2014). SAMHSA's Concept of Trauma op. cit.

SAMHSA (2014). TIP 57: Trauma-Informed Care in Behavioral Health Services. Available at: <http://store.samhsa.gov/product/TIP-57-Trauma-Informed-Care-in-Behavioral-Health-Services/SMA14-4816>

Trust-Based Relational Intervention® (TBRI®) continues to address the effects of early adversity and relational trauma through three sets of practice principles: *Connecting, Empowering, and Correcting* through the delivery of trauma informed care training and TBRI®, an attachment-based, trauma-informed, whole-child approach to meeting the needs of children and youth who have experienced early adversity, toxic stress, and/or relational trauma. The TBRI® model was developed at Texas Christian University by Dr. Karyn Purvis and Dr. David Cross.