

2023

TRAUMA-INFORMED AWARENESS DAY

AhaSlides Analysis and Report

**The Illinois
ACEs Response
Collaborative**

a program of

**HEALTH & MEDICINE
POLICY RESEARCH GROUP**



EVENT OVERVIEW

On May 25th, 2023, the Illinois ACEs Response Collaborative held the fifth annual Trauma-Informed Awareness Day: Building a Healing-Centered Future. The day was honored with a full lineup of events featuring a keynote address by Lieutenant Governor Juliana Stratton and interactive discussions highlighting solutions from the community for a healing-centered Illinois. Over 300 partners, advocates, policymakers, and community members from across Illinois gathered that day, representing diverse sectors and communities with a shared commitment to creating trauma-informed, healing-centered initiatives that support resilience and thriving for all Illinoisans.

This event also served as a culmination of awareness-raising activities spearheaded by the Collaborative throughout the month of May. Each week of the month engaged the public in relevant events, actions, and resources focused on four key themes: health, education and youth, the criminal-legal system, and community. On Trauma-Informed Awareness Day, participants attended interactive breakout sessions to further discuss and unpack these topics. In each breakout session, participants used the AhaSlides virtual platform to share their reflections and answer question prompts led by a guest facilitator.

This report includes a summary of the events held on Trauma-Informed Awareness Day as well as an analysis of themes and ideas that were generated by participants during the AhaSlides activity. We encourage participants to draw from these findings to keep the conversation going and continue building upon these ideas in their own work.



Her remarks drew attention to promising policy efforts currently in progress in Illinois, including the [Action Plan to Address Childhood Adversity](#), the [Whole Child Task Force recommendations](#), and legislation creating a [Task Force for a Healing-Centered Illinois \(SB 646\)](#). She then asked participants to reflect on trauma-informed, healing-centered specific programs or initiatives that they have witnessed in their communities.

“I want to ask for folks to think for a minute about what your bright spots are. What are you seeing in your work in your communities or your organizations that you would want to share as a bright spot?” – Bridget Gavaghan

Participants named a variety of initiatives they have seen, including the Restorative Justice Circle Keeper training as well as trauma-informed and mentoring services for previously incarcerated individuals. Participants also mentioned yoga and mindfulness initiatives used with communities of color to prevent violence and promote healing. Others highlighted organizations conducting important healing-centered and trauma-informed work, including Miles Square Health Center, Children’s Home Association of Illinois, and Chicago Torture Justice Center.

Several policy initiatives were also mentioned, including the Reimagine Public Safety Act to reduce gun violence in Black and Brown communities, expansion of Medicaid for immigrants over 42 years of age, and the Chicago Department of Public Health’s mental health and violence prevention initiatives. Participants also shared initiatives geared toward children and families. For example, one participant mentioned the statewide expansion of early childhood mental health consultation. Another participant mentioned the [Children’s Best Interest Act](#), which requires that courts involved in Illinois child custody cases make decisions that prevent unnecessary harm to children. Furthermore, participants discussed trauma-informed changes in education (early childhood and beyond), such as supporting childcare providers in adopting trauma-informed practices and working with school districts to incorporate trauma-informed policies.

AFTERNOON SESSION

During the second half of the day, attendees attended small group sessions focused on the month's themes: health, education and youth, the criminal-legal system, and community. These sessions provided participants the opportunity to connect with one another and engage in visioning activities to formulate and share ideas for achieving a truly trauma-informed, healing-centered state. Each afternoon session was led by a guest facilitator:

- Bridget Gavaghan, Director of the Illinois ACEs Response Collaborative, Health & Medicine Policy Research Group, led the Health breakout session.
- Gita Krishnaswamy, Deputy Director, Health & Medicine Policy Research Group, led the Education and Youth breakout session.
- Dr. Elena Quintana, Executive Director of the Institute on Public Safety & Social Justice at Adler University, led the Criminal-Legal breakout session.
- Marlita White, Director of the Office of Violence Prevention & Behavioral Health at the Chicago Department of Public Health, led the Community breakout session.

The following is a summary of the themes that emerged across all four breakout sessions. The themes reflect aspects that participants identified as challenges and opportunities for advancing trauma-informed, healing-centered solutions in their communities.

Challenges

During these afternoon sessions, participants were asked to reflect on challenges that are interfering with their ability to move forward with trauma-informed work.

“What external conditions are creating challenges for your community?”

One common theme among participants was the lack of funding and community resources to advance these trauma-informed changes. Many participants also named long-standing structural problems, including “historical disinvestment,” “racism,” “racial and cultural barriers,” and burnout in the workforce. “Staff and volunteers are burnt out and need more support,” noted one participant. Participants also discussed how individual-level factors contribute to community-level challenges, such as stigma and bias, lack of self-advocacy and help-seeking skills, close-mindedness, and fears of sharing one’s insecurities.

“We know that the demands, the complexities, the inequities of our current health system are in themselves barriers to receiving timely care, they are sources for trauma for communities that are impacted.” – Bridget Gavaghan

Opportunities

Throughout the day, participants were also asked to reflect on the opportunity for change. Across the various conversations, multiple participants highlighted the need for more cross-sector partnerships and inclusive collaboration. One participant explained the issues their FQHC encounters due to this lack of coordinated and holistic care:

“We have extensive but limited services, so we must refer out to other systems that are less caring, more traumatizing, [and] financially opaque. So, despite our best efforts, we continue to traumatize our patients.”

Another participant explained that holistic decision-making requires “having different types of people, organizations, and voices at the table” rather than silos. Echoing this, one participant mentioned the need for “buy-in from stakeholders across all sectors, including parole, people with lived experience, housing organizations, schools, etc.”

Participants also spoke to the lack of educational and professional development opportunities available to professionals across the state: “When harm occurs, yet is not properly addressed, it perpetuates harm and compounds traumas. We need better education that doesn’t perpetuate stigma, myths, and harm.”

“We have the epigenetic and neurobiological proof that when people are treated well, they heal. That goes against the whole idea of more punishment is better.” – Dr. Elena Quintana

Participants were also asked about policy changes they would like to see:

"If you could make one policy change happen overnight that would make your community or sector more trauma-informed and healing-centered, what would it be?"

Several common themes emerged among participant responses:

- Trainings on trauma-informed and healing-centered approaches for community members and for the workforce across multiple sectors, including health, education, and community-based organizations.
- Universal essential supports for well-being (universal basic income, early childhood development, free health care, mental health care, substance use treatment services, etc.) provided to all Illinois residents.
- Prioritization of healing and restoration over punishment, exclusion, and isolation.
- Addressing systemic harms through reparations and engaging impacted community members in the design of systems, policies, and programs.

"We don't want to be limited by what we were able to do so far, we want to think about how we can create equitable systems that are going to foster well-being and good health from the start so we don't have to only think about how we to repair systems but how we can bake a better cake."

– Marlita White

CONCLUDING REMARKS

We thank the incredible speakers, guest facilitators, and participants for generating such powerful discussions on their vision, ideas, and commitments for advancing trauma-informed, healing-centered transformation in Illinois. As we continue to make progress on the [Action Plan](#) and begin work on the newly enacted [Senate Bill 646](#) to establish a task force for a healing-centered Illinois, the ideas in this report resonate with these initiatives and offer areas that still need attention. We look forward to continuing these conversations as we look at the year ahead and beyond.