Trauma-Informed Care and Child Welfare Approaches for the Opioid Crisis

The 21st Century CURES Act enacted by Congress in December 2016 recognized that states need significant help to combat the opioid epidemic across the nation. It is designed to modernize health care through enhanced innovation, research and communication, leading to better outcomes. The Act also makes new funding available to states to combat the prescription opioid and heroin crisis through the Substance Abuse and Mental Health Services Administration (SAMHSA). SAMHSA will provide up to $970 million to states and territories over the next two years, beginning in 2017.

As one of the states hit hardest by the opioid epidemic, Ohio is among the largest recipients of grant funding. Over the next two years, Ohio will receive $26 million per year that will focus on several core principles including, child welfare and trauma-informed care. A vast majority of individuals with opioid use disorders have a history of trauma, as well as those involved with the child welfare system. Not only does trauma play a role in the lives of those with opioid use disorders, but professionals working with these populations can also be impacted and experience vicarious trauma as a result of their exposure to the traumatic experiences of others. Training and resources related to providing trauma-informed care as well as education regarding vicarious trauma is a significant piece for professionals working with populations with opioid use disorders. The opioid crisis has also had a major impact on the child welfare system, as it serves families with co-occurring parental substance abuse and child maltreatment. Consequently, efforts have also been targeted at assisting addicted parents that are involved with the child welfare system through the use of additional programming specialized to treat parents with opioid use disorders.

Vicarious Trauma-Informed Care Symposia

Regional vicarious trauma-informed care symposia will be offered twice per year in addition to curricula that will be made available at no cost online. Vicarious trauma is the occurrence of emotional duress resulting from the knowledge of trauma experienced by another person. Professionals that work with individuals affected by opioid use disorders can be impacted by vicarious trauma due to their exposure to trauma experiences of their clients. The symposium will encompass representatives from many different disciplines that work with the opioid use disorder population such as child protection workers, foster parents, first responders and peer supporters, to ensure that the content is culturally competent to the various backgrounds impacted by vicarious trauma. The training will provide tools, skills, and community resources to address vicarious trauma experienced when working with clients affected by opioid use disorders.

Learning Community Development

Learning communities will be developed to contribute to Ohio’s six regional trauma-informed care collaboratives and will address practices within child welfare agencies, addiction treatment agencies, and the courts to improve outcomes for families, first responders, and peer supporters. As part of the trauma-informed care initiative, the regional collaboratives meet to provide support to persons specializing in trauma. They identify strengths as well as barriers and gaps for implementing trauma-
informed care, develop shared resources and knowledge, and provide support and training for the implementation of trauma-informed care throughout the state.

The implementation of learning communities will establish a platform for groups with similar topics and practice models to meet regularly to share information and learn from each other. Participants will receive assistance from one another to help address challenges and share information and practices. The learning communities will utilize a Guided Application to Practice (GAP) model, which is an interactive, collaborative approach to learning through support and information sharing among participants.

The learning communities will focus on improvements to practice areas such as treatment models, screening and assessment tools, and the use of peer supports and recovery mentors. The learning communities will also address practice and policy changes related to information sharing, collaboration, employee cross-training, and the integration of services across family service agencies and healthcare entities.

Expanding Access to Recovery Supports and Intensive Child Welfare Case Management through the START Program

Training and technical assistance will be offered through the Institute of Human Services to support the Ohio START (Sobriety, Treatment, and Reducing Trauma) project, which was created through the office of Ohio Attorney General Mike DeWine and is managed by a grant with the Public Children’s Association of Ohio (PCSAO). Ohio START is a modified version of the Kentucky START (Sobriety, Treatment, and Recovery Teams) model, recognized as a promising practice by the California Evidence Based Clearinghouse for Child Welfare. This approach is promoted by the Annie E. Casey Foundation as an effective model to address the challenges of parents affected by substance abuse in the child welfare system.

The Ohio START model targets families with co-occurring parental substance abuse and child maltreatment, which are identified through the use of a universal screen completed by the children services caseworker during the investigation process. Parents with a substance use disorder are provided access to substance abuse services through the collaboration of the children services caseworker and a behavioral health provider. Identified parents will also be linked with a Family Peer Mentor, who will provide supportive services and integrative care through collaboration with the child welfare team and the behavioral health provider. Families will also be screened for trauma and connected with mental health services as appropriate.

Currently, there are 16 Ohio counties with local START teams, including the following counties: Athens, Brown, Clinton, Fairfield, Fayette, Gallia, Highland, Hocking, Jackson, Lawrence, Meigs, Perry, Pickaway, Ross, Scioto and Vinton. The Institute for Human Services will develop a training manual, provide in-person and online training, and offer technical assistance to participating START teams. Local Ohio START teams will receive continuing education credits for in-person training, which will focus on topic areas related to serving families with substance abuse issues, including screening and assessment tools for trauma and substance abuse. START teams will also be able to request technical assistance for topics such as substance abuse, child welfare, integrative care strategies, recruitment of family mentors, and other areas of need related to families involved with the child welfare system with parental substance abuse.