A BILL FOR AN ACT

RELATING TO TRAUMA-INFORMED CARE.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

- 1 SECTION 1. The legislature finds that research over the
- 2 last two decades in the fields of neuroscience, molecular
- 3 biology, public health, genomics, and epigenetics reveal that
- 4 experiences in the first few years of life build changes into
- 5 the biology of the human body that, in turn, influence a
- 6 person's physical, mental, and spiritual health. Adverse
- 7 childhood experiences are traumatic experiences that occur
- 8 during childhood, including physical, emotional, or sexual
- 9 abuse; physical and emotional neglect; household dysfunction,
- 10 including substance abuse, untreated mental illness, or
- 11 incarceration of a household member; domestic violence; and
- 12 separation or divorce involving household members. These
- 13 experiences can have a profound effect on a child's developing
- 14 brain and body and, if not treated properly, can increase a
- 15 person's risk for disease and other poor health conditions
- 16 through adulthood.

1 The legislature further finds that early adverse childhood 2 experiences shape the physical architecture of a child's 3 developing brain and can prevent the development of a sturdy 4 foundation for learning, quality health, and positive behavior. 5 Strong, frequent, or prolonged stress in childhood caused by adverse childhood experiences can become toxic stress, impacting 7 the development of a child's fundamental brain architecture and 8 stress response systems. Early childhood education offers a 9 unique window of opportunity to prevent and heal the impacts of 10 adverse childhood experiences and toxic stress on a child's 11 brain, body, and spirit. Research on toxic stress and adverse 12 childhood experiences evidence a growing public health crisis 13 for the State with implications for the State's educational, 14 juvenile justice, criminal justice, and public health systems. 15 The legislature also finds that neurobiological, 16 epigenetics, and physiological studies have shown that traumatic 17 experiences in childhood and adolescence can diminish 18 concentration, memory, and the organizational language abilities 19 students need to succeed in school, thereby negatively impacting 20 a student's academic performance, classroom behavior, and the 21 ability to form relationships. A critical factor in buffering

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- 1 children from the effects of toxic stress and adverse childhood
- 2 experiences is the existence of supportive, stable relationships
- 3 between children and their families, caregivers, and other
- 4 important adults in their lives. Cultural practices that
- 5 provide asset-based approaches involving the influence of a
- 6 stable non-relative adult can provide the resilience needed to
- 7 mitigate a child with high adverse childhood experiences.
- 8 Positively influencing the architecture of a child's developing
- 9 brain is more effective and less costly than attempting to
- 10 correct poor learning, health, and behaviors later in life.
- 11 The purpose of this Act is to establish a task force to
- 12 develop and make recommendations for trauma-informed care in the
- 13 State.
- 14 SECTION 2. (a) There is established within the department
- 15 of health for administrative purposes a trauma-informed care
- 16 task force. The task force shall consist of the following
- 17 members or their designees:
- 18 (1) The director of health, or the director's designee,
- who shall serve as the chairperson of the task force;
- 20 (2) The director of human services;
- 21 (3) The superintendent of education;

(4)	The director of labor and industrial relations;
(5)	The director of commerce and consumer affairs;
(6)	The chairperson of the board of agriculture;
(7)	The chairperson of the board of trustees of the office
	of Hawaiian affairs;
(8)	The director of the executive office on early
	learning;
(9)	The president of the senate;
(10)	The speaker of the house of representatives;
(11)	A member of the judiciary;
(12)	The mayor of the city and county of Honolulu and the
	mayors of the counties of Maui, Kauai, and Hawaii;
(13)	A faculty member from the John A. Burns school of
	medicine, department of native Hawaiian health;
(14)	The chief executive officer of Kamehameha Schools, who
	shall be invited by the chairperson;
(15)	A member of the non-profit sector, who shall be
	invited by the chairperson;
(16)	An adult consumer advocate, who shall be invited by
	the chairperson;
	(5) (6) (7) (8) (9) (10) (11) (12) (13) (14)

1	(17)	A youth consumer advocate, who shall be invited by the			
2		chairperson; and			
3	(18)	A community member or non-profit representative from			
4		the Compact of Free Association islander community,			
5		who shall be invited by the chairperson.			
6	(b)	The task force shall develop and make recommendations			
7	for trauma-informed care in the State. Specifically, the task				
8	force sha	11:			
9	(1)	Create, develop, and adopt a statewide framework for			
10		trauma-informed and responsive practice. The			
11		framework shall include:			
12		(A) A clear definition of trauma-informed and			
13		responsive practice;			
14		(B) Principles of trauma-informed and responsive care			
15		that can apply to any school, health care			
16		provider, law enforcement agency, community			
17		organization, state agency, or other entity that			
18		has contact with children or youth;			
19		(C) Clear examples of how individuals and			
20		institutions can implement trauma-informed and			
21		responsive practices across different domains,			

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1			including organizational leadership, workforce
2			development, policy and decision-making, and
3			evaluation;
4		(D)	Strategies for preventing and addressing
5			secondary traumatic stress for all professionals
6			and providers working with children and youth and
7			their families who have experienced trauma;
8		(E)	Recommendations to implement trauma-informed care
9			professional development and strategy
10			requirements in county and state contracts; and
11		(F)	An implementation and sustainability plan,
12			consisting of an evaluation plan with suggested
13			metrics for assessing ongoing progress of the
14			framework;
15	(2)	Iden	tify best practices, including best practices
16		invo	lving native Hawaiian cultural practices, with
17		resp	ect to children and youth and their families, who
18		have	experienced or are at risk of experiencing
19		trau	ma;

1	(3)	Provide a trauma-informed care inventory and
2		assessment of public and private agencies and
3		departments;
4	(4)	Identify various cultural practices that build
5		wellness and resilience in communities;
6	(5)	Convene trauma-informed care practitioners so that
7		they may share research and strategies in helping
8		communities build wellness and resilience;
9	(6)	Seek ways in which federal funding can be used to
10		better coordinate and to improve the response to
11		families impacted by coronavirus disease 2019,
12		substance use disorders, domestic violence, poverty,
13		and other forms of trauma, including making
14		recommendations for a government position that will
15		interface with federal agencies to seek and leverage
16		federal funding with county, state, and
17		philanthropical agencies; and
18	(7)	Coordinate data collection and funding streams to
19		support the efforts of the interagency task force.
20	(c)	The task force shall submit a report of its findings
21	and recom	mendations, including any proposed legislation, to th

- 1 legislature no later than twenty days prior to the convening of
- 2 the regular session of 2023.
- 3 (d) The task force shall cease to exist on July 1, 2023.
- 4 SECTION 3. This Act shall take effect on July 1, 2060.

Report Title:

Department of Health; Trauma-informed Care; Task Force

Description:

Establishes a trauma-informed care task force within the department of health to make recommendations of trauma-informed care in the State. Effective 7/1/2060. (HD1)

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