



STATE OF HAWAII
Executive Office on Early Learning
2759 South King Street
HONOLULU, HAWAII 96826

April 6, 2021

TO: Senator Donovan M. Dela Cruz, Chair
Senator Gilbert S.C. Keith-Agaran, Vice Chair
Senate Committee on Ways and Means

FROM: Lauren Moriguchi, Director
Executive Office on Early Learning

SUBJECT: Measure: H.B. No. 1322 H.D. 1 S.D. 1 – RELATING TO TRAUMA-INFORMED CARE
Hearing Date: Thursday April 8, 2021
Time: 10:00 am
Location: videoconference

Bill Description: Establishes a trauma-informed care task force within the department of health to make recommendations of trauma-informed care in the State. (SD1).

EXECUTIVE OFFICE ON EARLY LEARNING'S POSITION: Support

Good morning. I am Lauren Moriguchi, Director of the Executive Office on Early Learning (EOEL). EOEL supports H.B. No. 1322 H.D. 1 S.D. 1 as it relates to the importance of addressing trauma-informed care and defers to the Department of Health.

EOEL is statutorily responsible for the development of the State's early childhood system that shall ensure a spectrum of high-quality development and learning opportunities for children throughout the state, from prenatal care until the time they enter kindergarten, with priority given to underserved or at-risk children.

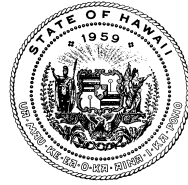
Adverse childhood experiences (ACEs) are traumatic experiences that occur during childhood and include physical, emotional, or sexual abuse; neglect; household dysfunction such as substance use, or incarceration of a household member; domestic violence; and separation or divorce involving household members. ACEs impact lifelong health and learning opportunities and toxic stress from ACEs can change brain development and affect the physical body. Furthermore, according to the Centers for Disease Control and Prevention, ACEs are linked to chronic health problems, mental illness, and substance misuse in adulthood and can diminish concentration, memory, and language abilities students need to succeed in school, impacting academic success. **ACEs, however, can be prevented.**

Supportive, stable relationships between children and their families, caregivers, and other adults can buffer children from the detrimental effects of toxic stress and ACES. **Because the EOEL Public Pre-K Program targets our underserved and at-risk children, we work with the educators in the Program by arming them with the competencies to work with children who do not come from optimal backgrounds.**

As we work to increase access to quality early learning opportunities for our keiki, we must consider that every classroom should have a highly-qualified educator in it. A highly-qualified educator is one who can nurture our children with a trauma-informed lens. We provide coaching and professional learning support through the Early Learning Academy and work with school leadership on staffing to best support preschoolers and families living in difficult circumstances. We also have a strong partnership with the University of Hawaii system to advance the critical work of building a pipeline of qualified early childhood educators for the state. Additionally, EOEL has worked with the Department of Health and other partners on community initiatives to support Trauma-Informed Care initiatives, such as the Trauma Training and Support with Dr. Sarah Enos Watamura.

Should the Department of Health convene a trauma-informed care task force, the EOEL is willing to continue our partnership and participate in the task force's efforts to develop a framework for trauma-informed and responsive practice.

Thank you for the opportunity to provide testimony on this bill.



LATE

STATE OF HAWAII
DEPARTMENT OF HEALTH
P. O. Box 3378
Honolulu, HI 96801-3378
doh.testimony@doh.hawaii.gov

**Testimony in SUPPORT of HB 1322 HD 1 SD 1
RELATING TO TRAUMA-INFORMED CARE**

SENATOR DONOVAN M. DELA CRUZ, CHAIR
SENATOR GILBERT S.C. KEITH-AGARAN, VICE CHAIR
SENATE COMMITTEE ON WAYS AND MEANS

Hearing Date: 4/8/2021

Hearing Time: 10:00 am

1 **Department Position:** The Department of Health (“Department”) strongly SUPPORTS the bill
2 and offers the following amendments.

3 **Department Testimony:** The subject matter of this measure intersects with the scope of the
4 Department’s Behavioral Health Administration (BHA) whose statutory mandate is to assure a
5 comprehensive statewide behavioral health care system by leveraging and coordinating public,
6 private and community resources. Through the BHA, the Department is committed to carrying
7 out this mandate by reducing silos, ensuring behavioral health care is readily accessible, and
8 person-centered.

9 The Department acknowledges that years of research demonstrate the harmful effect
10 that adverse childhood events (ACES; abuse or dysfunction in childhood) have on health care
11 spending, health care utilization, poorly controlled chronic illness, obesity, substance use,
12 smoking, and other risk factors later in life.¹ Thus, the Department is committed to developing a
13 system of care that is trauma-informed: recognizing and responding to the impact of traumatic
14 stress on those who have contact with the system in ways that promote healing and avoid
15 retraumatization. This commitment involves infusing “trauma awareness, knowledge, and skills

¹ e.g., Hughes et al. (2017) The effect of multiple adverse childhood experiences on health: a systematic review and meta-analysis. *Lancet Public Health*.

1 into organizational cultures, practices, and policies to create a climate of empathy and
2 respect.”²

3 Excitingly, other states³ have already begun to incorporate trauma-informed
4 approaches into health and human service systems of care. Such efforts have demonstrated
5 improvements in organizational culture, availability and uptake of evidence-based treatments,
6 use of trauma informed practices, and improvements in staff and caregiver knowledge and
7 attitudes.²

8 Locally, the Department is proud of its numerous efforts to infuse trauma-informed care
9 within current practice. This includes, but is not limited to:

- 10 1. Inclusion of a screener for ACES within initial mental health evaluations for
11 clients within the Child and Adolescent Mental Health Division (CAMHD);
- 12 2. A successful effort to minimize the use of seclusion and restraint in residential
13 treatment programs for adolescents in Hawaii;
- 14 3. Execution of a SAMHSA system of care grant project, supporting girls exposed to
15 trauma (Project Kealahou);
- 16 4. Implementation of the Trauma-Informed Care Initiative (TIC-IT) in the Adult
17 Mental Health Division (AMHD);
- 18 5. Development of routine staff, provider, and peer-specialist trainings on trauma-
19 informed practices;
- 20 6. Involvement in numerous trauma-informed care efforts throughout the system
21 of care and;

² U.S. Department of Health and Human Services. (2019). *Review of Trauma-Informed Initiatives at the Systems Level*. Retrieved from https://aspe.hhs.gov/system/files/pdf/262051/TI_Approaches_Research_Review.pdf

³ Missouri Department of Mental Health. (2019). *The Missouri Model: A Developmental Framework for Trauma-Informed Approaches*. Retrieved from <https://dmh.mo.gov/media/pdf/missouri-model-developmental-framework-trauma-informed-approaches>

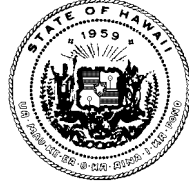
1 7. Routine meetings with family court judges.

2 We also acknowledge that many other city, county, state, grass roots, and non-profit
3 entities have made significant progress in incorporating trauma-informed care into their work.
4 That said, more coordinated, strategic effort is needed to maximize resources and formally
5 institute practices statewide. This is particularly vital as a result of the recent trauma inflicted
6 by the COVID-19 pandemic and community exposure to social justice issues.

7 Thank you for the opportunity to testify on this measure.

8 **Fiscal Implications:** The Department estimates that financial resources will be essential to
9 effectively lead the task force. Thus, we plan to draw on existing federal funding to finance this
10 effort.

DAVID Y. IGE
GOVERNOR



CATHY BETTS
DIRECTOR

LATE

JOSEPH CAMPOS II
DEPUTY DIRECTOR

STATE OF HAWAII
DEPARTMENT OF HUMAN SERVICES

P. O. Box 339
Honolulu, Hawaii 96809-0339

April 7, 2021

TO: The Honorable Senator Donovan M. Dela Cruz, Chair
Senate Committee on Ways & Means

FROM: Cathy Betts, Director

SUBJECT: **HB 1322 HD1 SD1 – RELATING TO TRAUMA-INFORMED CARE.**

Hearing: April 8, 2021, 10:00 a.m.
Via Videoconference, State Capitol

DEPARTMENT'S POSITION: The Department of Human Services (DHS) supports this measure and notes per the testimony of the Department of Health (DOH) that it aims to fund the program through available federal funds.

The Committee on Health, Human Services, & Homelessness amended the measure by:

- (1) Amending the membership of the task force;
- (2) Requiring the task force develop an implementation and sustainability plan;
- (3) Changing the effective date to July 1, 2060, to encourage further discussion; and
- (4) Making technical, nonsubstantive amendments for the purposes of clarity, consistency, and style.

The House Committees on Consumer Protection & Commerce, and Finance passed the measure unamended.

The Senate Committee on Health amended the measure by:

- (1) Requiring the Department of Health to submit its report to the Legislature no later than twenty days prior to the convening of the regular session of 2024, rather than 2023;
- (2) Extending the task force's sunset date from July 1, 2023, to July 1, 2024;
- (3) Removing from the task force, the Director of Labor and Industrial Relations, Director of Commerce and Consumer Affairs, Chairperson of the Board of

- Agriculture, Chairperson of the Board of Trustees of the Office of Hawaiian Affairs, President of the Senate, Speaker of the House of Representatives, Mayors of the Counties, and consumer advocates;
- (4) Adding to the task force the Director of Public Safety and a member of the law enforcement community;
 - (5) Making it effective upon its approval; and
 - (6) Making technical, nonsubstantive amendments for the purposes of clarity and consistency.

PURPOSE: The purpose of this measure Establishes a trauma-informed care task force within the department of health to make recommendations of trauma-informed care in the State. (SD1)

DHS will participate as a member of the trauma-informed task force. Creating a trauma-informed and responsive system requires "steady leadership and clear communications." A 2016 issue brief¹ from the Center for Health Care Strategies, Inc., remains relevant across sectors as it lays out strategies and key ingredients to implementing wide spread organizational change necessary to become a trauma-informed organization.

As the list of predictions of long term negative impacts of the pandemic grow, with particular concern of the impact on the mental health of children and youth, there is urgency for coordination and collaboration on a statewide, so children, families, and individuals receive appropriate support to build personal and community resiliency.

Thank you for the opportunity to testify on this measure.

¹ See, https://www.samhsa.gov/sites/default/files/programs_campaigns/childrens_mental_health/atc-whitepaper-040616.pdf

HAWAII YOUTH SERVICES NETWORK

677 Ala Moana Boulevard, Suite 904 Honolulu, Hawaii 96813

Phone: (808) 489-9549

Web site: <http://www.hysn.org> E-mail: info@hysn.org

Carole Gruskin, President

Judith F. Clark, Executive Director

Bay Clinic

Big Brothers Big Sisters of Hawaii

Big Island Substance Abuse Council

Bobby Benson Center

Child and Family Service

Coalition for a Drug Free Hawaii

Collins Consulting, LLC

Domestic Violence Action Center

EPIC, Inc.

Family Programs Hawaii

Family Support Hawaii

Friends of the Children of West Hawaii

Friends of the Children's Justice Center of Maui

Hale Kipa, Inc.

Hale 'Opio Kauai, Inc.

Hawaii Children's Action Network

Hawaii Health & Harm

Reduction Center

Ho'ola Na Pua

Kahi Mohala

Kokua Kalihi Valley

Kokua Ohana Aloha (KOA)

Maui Youth and Family Services

Na Pu'uwai Molokai Native

Hawaiian Health Care Systems

P.A.R.E.N.T.S., Inc.

Parents and Children Together (PACT)

PHOCUSED

PFLAG – Kona Big Island

Planned Parenthood of the Great Northwest and

Hawaiian Islands

Residential Youth Services & Empowerment (RYSE)

Salvation Army Family

Intervention Services

Sex Abuse Treatment Center

Susannah Wesley Community Center

The Catalyst Group

April 6, 2021

To: Senator Donovan Dela Cruz, Chair
And members of the Committee on Ways and Means

Testimony in Support of HB 1322 HD 1 SD 1 Relating to Trauma-Informed Care

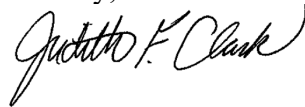
Hawaii Youth Services Network, a statewide coalition of youth-serving organizations, supports HB 1322 HD 1 SD 1 Relating to Trauma-Informed Care.

In the past year, we have all experienced trauma related to the COVID-19 pandemic, economic devastation, educational disruption, political turmoil, violence, and more. Many of us are dealing with the grief of losing loved ones. Health and human service workers are experiencing secondary trauma as they try to meet the many needs in new ways.

Now, more than ever, we need to ensure that services to our children, youth, families, and elderly use a trauma-informed approach. We need to prevent exhaustion and burnout among our most critically needed service providers.

Thank you for this opportunity to testify.

Sincerely,



Judith F. Clark, MPH
Executive Director



david.miyashiro@hawaiikidscan.org
hawaiikidscan.org

David Miyashiro
Executive Director

April 8, 2021

Committee on Ways and Means
Senator Donovan M. Dela Cruz, Chair
Senator Gilbert S.C. Keith-Agaran, Vice Chair

State Capitol
415 South Beretania Street
Honolulu, HI 96813

Aloha Chair Dela Cruz, Vice Chair Keith-Agaran, and Members of the Committee,

HawaiiKidsCAN strongly supports HB1322 HD1 SD1, which establishes a trauma-informed care task force within the department of health to make recommendations of trauma-informed care in the State.

Founded in 2017, HawaiiKidsCAN is a local nonprofit organization committed to ensuring that Hawaii has an excellent and equitable education system that reflects the true voices of our communities and, in turn, has a transformational impact on our children and our state. We strongly believe that all students should have access to excellent educational opportunities, regardless of family income levels and circumstances.

Adverse Childhood Experiences (ACEs) – which include factors such as abuse, neglect and other traumatic experiences – have a potentially long-lasting effect on children’s cognitive functioning and physical, social, emotional, mental and spiritual well-being. Research shows that most adults, regardless of their background, have experienced at least one ACE in their own childhood, and more than a tenth have a total ACE score of 4—a score which doubles their risk of heart disease and cancer, increases their odds of becoming an alcoholic by 700%, and their risk of attempted suicide by 1,200%.

Experts have warned that children are likely to be experiencing much higher levels of trauma and abuse due to the COVID-19 pandemic, and that social emotional learning and mental health services are less available in a distance learning setting. With no end to the pandemic in sight, Hawaii needs a coordinated approach - from keiki to kupuna - to fully address the impact of ACEs. HB1322 HD1 SD1 will bring together a key group of leaders who can develop such an approach and truly make Hawaii a trauma-informed state.

Much of the change needs to happen in our schools. Intervention is crucial to mitigating the detrimental effects of childhood trauma. Implementing trauma-informed, or trauma-sensitive, practices in schools can have a significant impact, including improvements in behavior, fewer

suspensions and expulsions and improvements in academic achievement. With quality trauma-informed training for educators and school staff, schools can better support students to feel engaged and connected with teachers and peers. Trauma-sensitive training gives educators the tools to be responsive to the social, emotional and behavioral needs of their students.

HB1322 HD1 SD1 will help to spur broader awareness and access to additional resources, ultimately making Hawaii a more resilient state.

Mahalo for your consideration,

David Miyashiro
Founding Executive Director
HawaiiKidsCAN



42-470 Kalaniana'ole Hwy. Bldg. 8 Kailua, HI 96734

RE: House Bill 1322, House Draft 1, Senate Draft 1 Relating to Trauma Informed Care

April 6, 2021

Aloha Chair Dela Cruz, Vice Chair Keith-Agaran and Members of the Ways and Means Committee:

Kinai 'Eha is a workforce development program that works with Hawai'i's most vulnerable youth. Through our work at Kinai 'Eha, my team and I are acutely aware of the critical importance of trauma informed care in serving not only our at-promise youth but how it can also benefit all individuals who have suffered any kind of trauma.

Making Hawai'i a trauma informed state will ensure that all state and county agencies and the programs and services they provide to our residents will incorporate and integrate trauma informed care approaches and practices in a consistent, coordinated and accountable fashion. We are in full support HB1322 HD1, SD1! I humbly request your support in passing this bill for the health and wellbeing of the State of Hawai'i and those that call Hawai'i home.

Mahalo nui,

Josiah 'Akau
Executive Director
Kinai 'Eha

Thursday, April 8, 2021 at 10:00 AM
Via Video Conference

Senate Committee on Ways and Means

To: Senator Donovan Dela Cruz, Chair
Senator Gilbert Keith-Agaran, Vice Chair

Re: **Testimony in Support of HB 1322, HD1, SD1
Relating to Trauma-Informed Care**

My name is Michael Robinson, and I am the Vice President of Government Relations & Community Affairs at Hawai'i Pacific Health. Hawai'i Pacific Health is a not-for-profit health care system comprised of its four medical centers – Kapi'olani, Pali Momi, Straub and Wilcox and over 70 locations statewide with a mission of creating a healthier Hawai'i.

I write in **support** of HB 1322, HD1, SD1 which establishes a trauma-informed care task force within the department of health (DOH) to make recommendations of trauma-informed care. Trauma-informed care is a concept that is recognized as a very important aspect of care across the lifespan. Should there be a need for input from a health care provider perspective, HPH would be able to assist with the process and welcomes the opportunity to serve on the task force.

A trauma-informed approach to care acknowledges that health care organizations and care teams need to have a complete picture of a patient's life situation — past and present — in order to provide effective health care services with a healing orientation. Adopting trauma-informed practices can potentially improve patient engagement, treatment adherence, and health outcomes, as well as provider and staff wellness. It can also help reduce avoidable care and excess costs for both the health care and social service sectors.

Adverse childhood experiences are traumatic experiences that occur during childhood, including physical, emotional, or sexual abuse; physical and emotional neglect; household dysfunction, including substance abuse, untreated mental illness, or incarceration of a household member; domestic violence; and separation or divorce involving household members. These experiences can have a profound effect on a child's developing brain and body and, if not treated properly, can increase a person's risk for disease and other poor health conditions through adulthood.

Involvement of not only private health care providers, but entities at the state and county levels to examine all aspects of trauma and its causes will lead to a clearer understanding

of the causes of trauma and its effect on individuals' lives. A comprehensive approach to trauma-informed care can lead to positive health outcomes.

Thank you for the opportunity to testify.



**Testimony to the Senate Committee on Ways and Means
Thursday, April 8, 2021; 10:00 a.m.
State Capitol, Conference Room 211
Via Videoconference**

RE: HOUSE BILL NO. 1322, HOUSE DRAFT 1, SENATE DRAFT 1, RELATING TO TRAUMA-INFORMED CARE.

Chair Dela Cruz, Vice Chair Keith-Agaran, and Members of the Committee:

The Hawaii Primary Care Association (HPCA) is a 501(c)(3) organization established to advocate for, expand access to, and sustain high quality care through the statewide network of Community Health Centers throughout the State of Hawaii. The HPCA **SUPPORTS** House Bill No. 1322, House Draft 1, Senate Draft 1, RELATING TO TRAUMA-INFORMED CARE.

The bill, as received by your Committee, would:

- (1) Establish within the Department of Health for administrative purposes a Trauma-informed Care Task Force (Task Force) to create a statewide framework for trauma-informed and responsive practice; and
- (2) Require the Task Force to also develop an implementation and sustainability plan.

The bill would take effect upon approval.

By way of background, the HPCA represents Hawaii Federally-Qualified Health Centers (FQHCs). FQHCs provide desperately needed medical services at the frontlines in rural and underserved communities. Long considered champions for creating a more sustainable, integrated, and wellness-oriented system of health, FQHCs provide a more efficient, more effective and more comprehensive system of healthcare.

The experience of trauma has widespread impacts on the lives of our citizenry. This often leads to or exacerbates mental illnesses, substance use and physical health conditions. Because of this, in a truly integrated whole health system of health care, effectively treating behavioral and physical health conditions must involve the impact of trauma.

Testimony on House Bill No. 1322, House Draft 1, Senate Draft 1
Thursday, April 8, 2021; 10:00 a.m.
Page 2

Unfortunately, despite the best efforts of policy makers, health care providers, and government workers, the very services and systems designed to help people become healthy can be re-traumatizing.

This bill seeks to improve the quality of outcomes for youths impacted by trauma by establishing the framework for a statewide trauma-informed and responsive practice. Accordingly, we respectfully urge your favorable consideration of this bill.

Thank you for the opportunity to testify. Should you have any questions, please do not hesitate to contact Public Affairs and Policy Director Erik K. Abe at 536-8442, or eabe@hawaiiipca.net.

Date: April 6, 2021

To: Committee on Ways and Means
Senator Donovan M. Dela Cruz, Chair
Senator Gilbert S.C. Keith-Agaran, Vice-Chair

From: Early Childhood Action Strategy
Re: Support for HB1322, Relating to Establishing a Trauma-informed Care Task Force

Early Childhood Action Strategy (ECAS) is a statewide, cross-sector collaborative designed to improve the system of care for Hawai'i's youngest children and their families. ECAS partners work to align priorities for children prenatal to age eight, streamline services, maximize resources and improve programs to support our youngest keiki.

ECAS strongly supports the passage of HB1322. Research shows that exposure to sustained trauma within the first five years of life can have lasting effects on brain development and long-term health outcomes. Adverse Childhood Experiences (ACEs) and early trauma, such as chronic child abuse and neglect, family substance use and mental health challenges impede on healthy early attachments between primary caregivers and our keiki. A secure relationship buffers keiki's hormonal stress response and therefore, protects the developing brain from harmful effects of stress hormones. Additionally, women exposed to intimate partner violence are at four-times the risk for antepartum hemorrhage, preterm delivery and low birth weight for baby, which all impact overall family health.

The impacts of exposure to early trauma can have long-term consequences. Risks include

- Behavioral, psychological, and physical health challenges
- Academic failure
- Alcohol and substance use
- Youth Delinquency
- Adult criminality

Abuse and neglect of family members, substance use and mental health challenges are on the rise in Hawai'i, due to the stressors of the COVID19 pandemic and have ripple effects into our communities. Creating a system of trauma-informed care is imperative for the success of Hawai'i's families, schools and businesses, which directly impact Hawai'i's economy. Please support the formation of the Trauma-informed Care Task Force within the Department of Health, so we can establish a coordinated response and a well-designed prevention strategy.

Mahalo for your consideration in supporting HB1322.



Hawaii
Children's Action Network Speaks!
Building a unified voice for Hawaii's children

Hawai'i Children's Action Network Speaks! is a nonpartisan 501c4 nonprofit committed to advocating for children and their families. Our core issues are safety, health, and education.

To: Senator Dela Cruz, Chair
Senator Keith-Agaran, Vice Chair
Senate Committee on Ways and Means

Re: **HB 1322 HD1 SD1- Relating to Trauma-Informed Care**
10:00 AM, April 8, 2021

Chair Dela Cruz, Vice Chair Keith-Agaran, and committee members,

On behalf of HCAN Speaks!, thank you for the opportunity to testify in **support of House Bill 1322 HD1 SD1,**

which seeks to establish a trauma-informed care task force within the department of health to make recommendations of trauma-informed care in the State.

Trauma-informed care is a structure and framework that recognizes and understands the effects of all types of trauma. According to the Substance Abuse and Mental Health Services Administration, "There is an increasing focus on the impact of trauma and how service systems may help to resolve or exacerbate trauma-related issues. These systems are beginning to revisit how they conduct their business under the framework of a trauma-informed approach¹". Trauma can be caused by experiences in childhood, experiences in adulthood, and experiences to ancestors.

Hawai'i has a history of adopting legislation supportive of trauma-informed practices. House bill 1322 builds off of the foundational work of Act 217 (2019), Act 82 (2019), and HCR 205 (2019). As a state with Indigenous people who have been repeatedly harmed and suffer long-term consequences of actions against them, recognizing the historical trauma of Native Hawaiians and actively working to remedy the trauma today and in the future is crucial. Additionally, the positive outcomes of HB 1322 seek to uplift all members of our community.

The importance and value of trauma-informed care is recognized at both the national and state level. Over 26 states have passed legislation to address childhood trauma, child adversity, toxic stress or adverse childhood experiences². The task force created through this bill is very similar to the Interagency Task Force on Trauma-Informed Care established at the federal level³. Understanding adverse childhood experiences and trauma effect a person and how they in turn effect the community and state can help inform changes needed to create a more responsive, cost-effective system. Additionally, as we see federal agencies adopt more trauma-informed practices and programs, the work in HB 1322 HD1 SD1 will help Hawai'i become more competitive in securing federal funding.

For these reasons, HCAN Speaks! respectfully requests that your committee vote to pass this bill.

Kathleen Algire

¹ Substance Abuse and Mental Health Services Administration, *SAMHAS's Concept of Trauma and Guidance for a Trauma-Informed Approach*, https://ncsacw.samhsa.gov/userfiles/files/SAMHSA_Trauma.pdf

² National Conference of State Legislatures, <https://www.ncsl.org/research/health/reducing-the-effects-of-adverse-childhood-experiences.aspx>

³ Interagency Task Force on Trauma-Informed Care, <https://www.samhsa.gov/trauma-informed-care>



— H a w a i i —
Children's Action Network Speaks!
Building a unified voice for Hawaii's children

Director of Early Learning and Health Policy



UNIVERSITY OF HAWAII SYSTEM

Legislative Testimony

Testimony Presented Before the
Senate Committee on Ways and Means
Thursday, April 8, 2021 at 10:00 a.m.

By

Jerris Hedges, MD, Dean
Keawe Kaholokula, MD, Chair
Native Hawaiian Health
John A. Burns School of Medicine
University of Hawai'i at Mānoa

HB 1322 HD1 SD1 – RELATING TO TRAUMA-INFORMED CARE

Chair Dela Cruz, Vice Chair Keith-Agaran, and members of the Committee:

Thank you for this opportunity to testify in **support** of HB 1322 HD1 SD1 which establishes a trauma-informed care task force within the Department of Health (DOH) to make recommendations of trauma-informed care in Hawai'i. The John A. Burns School of Medicine (JABSOM) appreciates the opportunity to participate on the task force. We suggest a minor amendment as to the JABSOM representative on page 4, lines 5-6 as follows:

(7) A faculty member from the John A. Burns school of medicine [~~department of native Hawaiian health~~];

This amendment would enable any faculty member from JABSOM with expertise in the field of trauma-informed care to serve on the task force instead of limiting representation to faculty from the Department of Native Hawaiian Health. JABSOM has a wide range of expertise that could complement the task force members, and we welcome the opportunity to work with DOH to form a strong task force with multiple viewpoints ranging from care delivery settings, educational settings and socio-economic situations.

Adverse childhood experiences are traumatic experiences that occur during childhood, including physical, emotional, or sexual abuse; physical and emotional neglect; household dysfunction, including substance abuse, untreated mental illness, or incarceration of a household member; domestic violence; and separation or divorce involving household members. These experiences can have a profound effect on a child's developing brain and body and, if not treated properly, can increase a person's risk for disease and other poor health conditions through adulthood. These issues are highly prevalent in native Hawaiian and Pacific Islander (NHPI) groups, and affect their ability to access health care as well as leads to problems that stem from the lack of proper medical treatment.

A trauma-informed approach to care acknowledges that health care organizations and care teams need to have a complete picture of a patient's life situation — past and present — in order to provide effective health care services with a healing orientation. Adopting trauma-informed practices can potentially improve patient engagement, treatment adherence, and health outcomes, as well as provider and staff wellness. It can also help reduce avoidable care and excess costs for both the health care and social service sectors. Involvement of not only private health care providers, but entities at the state and county levels to examine all aspects of trauma and its causes will lead to a clearer understanding of the causes of trauma and its effect on individuals' lives. A comprehensive approach to trauma-informed care can lead to positive health outcomes.

Thank you for this opportunity to testify.



HAWAI'I COMMUNITY
FOUNDATION

To: The Honorable Donovan M. Dela Cruz, Chair
The Honorable Gilbert S.C. Keith-Agaran, Vice Chair
And Members of the Senate Committee on Ways and Means

From: Micah Kāne, Chief Executive Officer & President
Hawai'i Community Foundation

Re: Testimony in Support of HB1322 HD1 SD1 Relating to Trauma-informed Care

Date: Thursday, April 8, 2021

Time: 10:00 A.M.

Place: Via Conference Room 211 & Videoconference

My name is Micah Kane, President & CEO of the Hawai'i Community Foundation. I am submitting this testimony in SUPPORT of HB1322 HD1 SD1 that establishes a trauma-informed care task force within the Department of Health to make recommendations of trauma-informed care in the State, supported by community partners.

In 2019, the Hawai'i Community Foundation ("HCF") launched Promising Minds, a three-year initiative dedicated to improving early childhood behavioral health in Hawai'i by investing in the future of our keiki, especially those at-risk of trauma, abuse and neglect, or dealing with their aftereffects. Promising Minds goal is to help strengthen early relationships and healthy development to set the foundations for long-term benefits to individual children, parents and caregivers. For two years, HCF has engaged early childhood providers in a community of practice to learn and adopt trauma-informed approaches. We see the need for expanded efforts to bring trauma-informed strategies into all prenatal through age 5 service settings. Promising Minds has also helped to expand the pool of mental health professionals able to buffer against early trauma and build resilience through a Fellows Program developed by the Association of Infant Mental Health Hawai'i.

The proposed task force within the Department of Health would strengthen the ability of public private partnerships to take action to address early adversity and trauma across the lifespan on every island. Its purpose directly relates to the Promising Minds Initiative.

Buffering against trauma and toxic stress is made more urgent with the COVID-19 pandemic which has overloaded families and shut them out from supports that can help like care and learning settings, regular health care access, and other routines. We do not fully know the extent that isolation and persistent stress will have on brain architecture of young children. Early research shows that 52% of

children in families with financial hardship are facing emotional distress.¹ Even before the COVID-19 pandemic, early childhood mental health was already a silent crisis—one in six U.S. children ages 2 to 8 years-old (17.4%) had a diagnosed mental, behavioral, or developmental disorder.² Finally, research has concluded the direct relationship between Adverse Childhood Experiences (ACEs) and negative life outcomes for children ranging from chronic disease, drug abuse, depression, involvement with the juvenile justice system, family violence, and early death. Additionally, children with higher ACE scores are more likely to be disengaged from school.

Prevalence of Childhood Trauma in Hawai'i Before the COVID-19 Pandemic:

- Nearly half of all children (46%) in Hawai'i experience Adverse Childhood Events (ACEs), with 20% experiencing two or more ACEs³
- Native Hawaiian and Pacific Islander children experience ACEs at a higher rate⁴
- 49% of children in Hawaii with 2 or more ACEs are engaged in school, compared to 75% of peers with no ACEs⁵
- 4.8 per 1,000 children were victims of abuse and neglect⁶
- Hawaii's preschool expulsion rate is higher than average and behavior problems are often cited; 7.56 per 1,000 children, compared to 6.67 children nationally⁷

As we at the Hawaii Community Foundation work to bring the philanthropic community as a collaborative partner to the efforts of government, the private sector, healthcare and others who continue to serve those in need, we are supportive of measures like this where broader initiatives are strengthened through the type of collaborative effort that this task force would bring to our State. Furthermore, these collective efforts are necessary to help accelerate the recovery of our communities impacted by the pandemic.

We strongly support HB1322 HD1 SD1 and look forward to further discussion on the bill. Thank you for the opportunity to provide testimony on this matter.

¹ RAPID-EC Survey 2020. <https://medium.com/rapid-ec-project/a-hardship-chain-reaction-3c3f3577b30>

² Centers for Disease Control, Children's Mental Health. <https://www.cdc.gov/childrensmentalhealth/data.html>

³ National Survey of Children's Health. Accessed online at <http://childhealthdata.org/learn/NSCH> (2016 data)

⁴ National Survey of Children's Health. Accessed online at <http://childhealthdata.org/learn/NSCH> (2016 data)

⁵ CAHMI. "Hawaii | Fact Sheet 2019: Strong Roots Grow a Strong Nation." Data from 2016-17 NSCH and Behavioral Risk Factor Surveillance Survey (BRFSS).

⁶ Hawaii's Children 2017. Child Welfare League of America. Accessed online at <https://www.cwla.org/wp-content/uploads/2017/04/HAWAII-revision-1.pdf>

⁷ Gilliam WS. Prekindergarteners left behind: Expulsion rates in state prekindergarten programs (Abbreviated as Foundation for Child Development Policy Brief Series No. 3, May 2005). Available at: <https://www.fcd-us.org/assets/2016/04/ExpulsionCompleteReport.pdf>



Kamehameha Schools®

Senate Committee on Ways and Means

Date: April 8, 2021

Time: 10:00 a.m.

Where: CR 211 & Via Videoconference

TESTIMONY

By Kau'i Burgess

Director of Community & Government Relations

RE: **HB 1322, HD1, SD1 - Relating to trauma-informed care**

E ka Luna Ho'omalua Dela Cruz, ka Hope Luna Ho'omalua Keith-Agaran, a me nā Lālā o kēia Kōmike, aloha!

We are writing in **SUPPORT of HB 1322, HD1, SD1**, which establishes a trauma-informed care task force within the Department of Health. We support the charge of the task force to make recommendations for a more systematized approach to trauma-informed care in Hawai'i.

Kamehameha Schools believes that the environment that surrounds our keiki impacts their ability to be successful in education and life. We recognize that the environment of many Native Hawaiian keiki places them disproportionately at-risk to suffer from social, generational, cultural, 'āina and historical trauma. We also acknowledge the impacts of COVID-19 on health, education, economy, and social interaction have accentuated these risks. Trauma-informed care aims to address these sources of shock as a key strategy to improve life outcomes.

We believe the task force proposed by this bill will elevate the discussion of trauma-informed care and improve implementation of cross-sectoral, collaborative solutions that value a cultural approach to healing and recognize traditional practices. For these reasons, Kamehameha Schools is happy to serve on this task force as requested in the bill as it directly aligns with the mission of our organization to improve the lives of Native Hawaiian children through education.

Founded in 1887, Kamehameha Schools is an organization striving to advance a thriving Lāhui where all Native Hawaiians are successful, grounded in traditional values, and leading in the local and global communities. We believe that community success is individual success, Hawaiian culture-based education leads to academic success and local leadership drives global leadership. Mahalo nui!

HB-1322-SD-1

Submitted on: 4/6/2021 10:57:49 AM

Testimony for WAM on 4/8/2021 10:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Joe Hammond	Individual	Support	No

Comments:

I am in support of this bill, which establishes a trauma-informed care task force within the department of health. I believe that with this bill will start many discussions of trauma-informed care and will seek to improve the quality outcome for our youth who are impacted by trauma.

HB-1322-SD-1

Submitted on: 4/6/2021 1:07:54 PM

Testimony for WAM on 4/8/2021 10:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
chelsea pang	Individual	Support	No

Comments:

- Hawaii needs a coordinated approach - from keiki to kupuna - to fully address the impact of ACEs. HB1322 HD1 SD1 will bring together a key group of leaders who can develop such an approach and truly make Hawaii a trauma-informed state.
- With quality trauma-informed training for educators and school staff, schools can better support students to feel engaged and connected with teachers and peers. Trauma-sensitive training gives educators the tools to be responsive to the social, emotional and behavioral needs of their students.
- HB1322 HD1 SD1 will help to spur broader awareness and access to additional resources, ultimately making Hawaii a more resilient state.

Committee on Ways and Means
Senator Donovan M. Dela Cruz, Chair
Senator Gilbert S.C. Keith-Agaran, Vice Chair

HB 1322, HD1, SD1 RELATING TO TRAUMA-INFORMED CARE is an important bill in building wellness and resilience in our state- especially during this time of a global pandemic. It will establish a trauma-informed care task force within the department of health to make recommendations of trauma-informed care in the State of Hawai'i.

Aloha, my name is Daniel Goya. I was a public/private educator for 15 years and worked for a Native Hawaiian non-profit for 13 years, in which, I created a nationally accredited and recognized homeless 2Gen preschool and a 12-bed residential facility for adjudicated youth ages 13-17 that is an alternative to youth incarceration. I have seen the effects of trauma and how it is passed through generations. I am submitting this testimony to express my very strong support for HB1322 as I have seen first hand how adverse childhood experiences (ACE) have negatively impacted the children and families.

Research has indicated that an adult who has experienced 4 or more ACEs has an increased risk in preventable health diseases, greater chances at falling behind or dropping out of school, higher chance of using drugs and early death.

COVID-19 can be argued as an adverse childhood experience for this generation. COVID-19 has been extremely stressful and is potentially the catalyst for inter and transgenerational trauma for our current keiki and future keiki. The stress and challenges of distance learning has impacted our students, teachers and families. Our communities have been impacted by the loss of life, work, fear of the pandemic as well as the tumultuous racial and political climate in our country. These events have contributed to toxic stress for many people in our state. This bill will commission a task force that would make critical recommendations to address these issues and promote a wellness and resilient state that employs trauma-informed strategies.

COVID-19 has also negatively impacted our state's economy. This task force will be able to seek out pathways and make critical recommendations that can seek federal funding to provide relief to our schools, workforce and community health by employing trauma-informed federally funded programming.

Mahalo for your time and consideration and please support HB1322.

Mahalo,



Daniel Goya

HB-1322-SD-1

Submitted on: 4/6/2021 4:09:57 PM

Testimony for WAM on 4/8/2021 10:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Kelsey Amos	Individual	Support	No

Comments:

I support trauma informed care. It is so important for many people.

HB-1322-SD-1

Submitted on: 4/7/2021 7:30:34 AM

Testimony for WAM on 4/8/2021 10:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Tia Roberts Hartsock	Individual	Support	No

Comments:

Aloha Committee Members -

Mahalo for the opportunity to submit testimony on this important bill. HB1322 HD1 outlines a much needed effort to establish a formal approach around trauma-informed care practices for the state.

As a certified trainer for the Substance Abuse and Mental Health Services Administration (SAMHSA) on trauma-informed care, I support this bill. I have been working with communities within the state and across the US for almost 15 years to establish trauma-informed practices that create awareness around the impact of early adverse childhood experiences. Trauma-Informed Care is based on the knowledge and understanding of trauma, its pervasiveness in our communities, and its impacts on our daily lives. The goals of creating trauma-informed practices and approaches simply focus on not triggering or re-traumatizing people and helping to build skills around emotional regulation.

With the current pandemic, now more than ever, our communities need to understand how to minimize the impacts of prolonged exposure to traumatic stress and develop daily practices, policies and procedures, and organizational supports to build healthy and resilient communities. The impacts of traumatic stress are well researched and best-practices in mental health around trauma-informed care can offer our state departments and service providers a framework to address the impacts of exposure to trauma, historical trauma, vicarious trauma and compassion fatigue. SAMHSA's efforts, as well as other national mental health organizations, have focused on developing and disseminating research on trauma-informed frameworks for behavioral health sectors such as child welfare, education, criminal and juvenile justice, primary health care, military and other settings that have potential to ease or exacerbate an individual's ability to cope with traumatic events and experiences. Within these frameworks, guiding principles provide service providers, families and individuals ways to increase their

awareness on how trauma impacts their behaviors, how to minimize triggering environments, how to increase emotional regulation and create healthier ways to cope with stress.

During this pandemic, I have been overwhelmed with the amount of companies reaching out on a weekly basis for help to support their employees and families who are struggling with this prolonged exposure to traumatic stress. The impacts of this pandemic and the social justice issues on our collective mental and physical health are yet to be measured.

I strongly support the effort to increase formalized approaches to manualizing and instituting trauma-informed approaches and practices within our state system of care. Lastly, I would like to humbly request to add family and youth representation to the task group, as well as Judiciary and higher education representation.

Mahalo, Tia Lynn Roberts Hartsock, MSW, MSCJA Community Member

HB-1322-SD-1

Submitted on: 4/7/2021 9:36:05 PM

Testimony for WAM on 4/8/2021 10:00:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
May Roque	Individual	Support	No

Comments:

Aloha Committee on Ways and Means, Senator Donovan M Dela Cruz,

My name is May Roque and I am in support of House Bill 1322, Relating to Trauma-Informed Care which is being heard on Thursday, April 8th, 2021 at 10:00AM.

I am currently attending the University of Hawaii at Manoa Thompson School of Social Work and Public Health in their Master's of Social Work program. This bill is the basis that establishes a trauma-informed care task force within the department of health to make recommendations of trauma informed care in the state. Further into this bill, it discusses adverse childhood experiences as a major factor that influences the development of an individual's physical as well as emotional wellbeing. I thoroughly enjoy the fact about adverse childhood experiences being exploited and the focus of trauma in early childhood prevention is a key component to the way children and our youth can become successful and self-fulfilled in their own way later in life. Gathering a task force that encompasses the director of the department of health, the director of human services, and the superintendent of education, and more stakeholders of the task force. I also believe that consisting of this task force team should include spokespersons that are of indigenous backgrounds like Native Hawaiians and other Pacific Islanders who may play a role in the cultural framework dynamic; the communities that should be served within the same socio-economic background.

It is important to fight and advocate for early prevention programs as well as placing an emphasis on underrepresented communities that are existent in the state of Hawai'i.

Sincerely,

May Roque

House Bill: HB1322

Relating to: Trauma-Informed Care

Submitted by: Lisa Ho

Senator Donovan M. Dela Cruz, Chair
Senator Gilbert S.C. Keith-Agaran, Vice Chair

Testimony in support of HB1322, relating to Trauma-Informed Care

Dear Senator Donovan M. Dela Cruz and Senator Gilbert S.C. Keith-Agaran,

My name is Lisa Ho. I am currently a graduate social work student at University of Hawaii. I am also employed by the State of Hawaii as a Social Worker under Child Welfare Services.

I am in support of this bill and I truly believe trauma-informed care is very important to those we serve in the community. As a worker at Child Welfare Services, we deal with a lot of children that has been through a lot of trauma and just having the knowledge and insight of trauma-informed care will truly help a worker better help and assist the families we work with. I strongly feel is necessary to include all parties listed in the bill to be educated on this topic. It is very important to come up with a plan to educated others, find the right resources and services to help those in need. I agree that we need to create, develop, and adopt a statewide framework for trauma-informed and responsive practice and the framework to include any school, health care provider, law enforcement agency, community organization, state agency, and other entity that has contact with child and youth. It is extremely important for all parties to practice the same framework.

I would like to take the time to thank you for this opportunity to testify.