

BEYOND THE MASK

Promoting Transformation and Healing in School Reopening

CULTURALLY RESPONSIVE, TRAUMA-INFORMED, HEALING-CENTERED MENTAL HEALTH CARE

By Kayla Tawa

THE CHALLENGE

The United States has historically marginalized those with mental health conditions, leading to stigma and deficit-based framing.ⁱ This framing and subsequent stigma furthers the marginalization creating a vicious cycle. To shift the focus to overall wellness and prevention, school-based mental health systems should recognize the role of historical and cultural traumaⁱⁱ; embrace healing practices that are rooted in racial/ethnic and cultural identitiesⁱⁱⁱ; and view healing as an ongoing and holistic process that works toward individual and community wellness.^{iv}

The U.S. Department of Education required each state to submit a reopening plan outlining how they were using and planned on using [Elementary and Secondary School Emergency Relief \(ESSER\) funds](#). The Center for Law and Social Policy (CLASP) conducted an analysis of 37 state plans to better understand if and how schools were prioritizing culturally responsive, trauma-informed, and healing-centered care.

We found that while some states have robust culturally responsive and/or trauma-informed systems, no states are explicitly prioritizing healing-centered care.

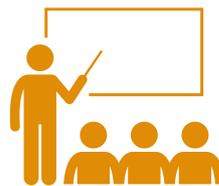
KEY POLICY TOOLS



Grants



Technical Assistance



Training



Partnership



Guidance



Data Collection



Resource Development



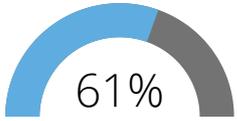
New Positions

WHAT IS CULTURALLY RESPONSIVE CARE?

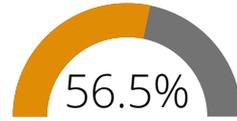
Cultural responsiveness requires providing quality care and services that are effective, equitable, understandable, and respectful. Care and services should be responsive to diverse cultural beliefs and practices; preferred reading, writing, and spoken languages; health literacy^v; and other communication needs.^{vi} School administrations must recognize and respond to all cultures present on their campus, recognizing cultures defined by race/ethnicity; sexual orientation; gender; neighborhood; job; and age, including youth culture. Culturally responsive care requires a diverse workforce, education about different cultures, and ongoing professional development training for all staff.^{vii}



NEW YORK: ^{viii} Integrating ESSER Funding into a Culturally Sustaining Framework



Title I Schools*



students of color

New York has adopted a **Culturally Relevant Sustaining Education (CRSE) Framework**. The goal of the framework is to prioritize the whole child by helping educators create equitable learning environments that affirm racial, linguistic, and cultural identities. The four principles of the CRSE framework are: welcoming and affirming environment, high expectations and rigorous instruction, inclusive curriculum and assessment, and ongoing professional learning. The vision of the CRSE framework is to have an education system that creates students who are academically successfully, socio-politically conscious and socioculturally responsive, and who challenge inequitable systems through a critical lens.

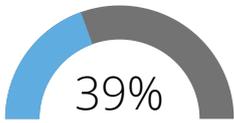
Key Uses of ESSER Funds:

- Provide **grants** to Local Education Agencies (LEAs) to integrate evidence-based practices in Social-Emotional Learning (SEL) and CRSE in their approaches to address lost instructional time and pre-existing performance gaps;
- Offer **technical assistance** to LEAs on implementing CRSE principles by creating a series of briefs;
- **Train educators** on strategies for integrating SEL and trauma-responsive practices into remote learning;
- Enhance existing **staff capacity** to support student and family engagement, trauma-responsive practices, SEL, and restorative practices; and
- Provide LEAs with **Mental Health First Aid Training** through a collaboration with the Mental Health Association of New York.





OREGON:^{ix} Using ESSER Funding to Bolster Existing Supports



39%

Title I Schools*



38%

students of color

In 2019, Oregon passed the Student Success Act that required districts to engage students of color; students experiencing disabilities; emergent bilingual students; students navigating poverty, homelessness, and foster care; and other students who have historically experienced inequities in schools. The Oregon legislature is expected to pass a new bill that strengthens the Student Success Act by allowing LEAs to establish targets related to student mental health and behavioral needs.

With support from the Collaborative for Academic Social Emotional Learning (CASEL) and the Council of Chief State Schools Officers (CCSSO), Oregon launched the Strengthening Mental Health in Education Initiative (SMHiE).^x This project reinforces the need for a robust, culturally responsive mental health infrastructure and workforce to equitably meet the mental health needs of Oregon school communities.

Key Uses of ESSER Funds:

- Ensure the continuity of mental health services, including **access to telehealth services**, by working with the Oregon Health Authority;
- **Guidance requiring LEAs** to include how they will meet the mental and behavioral health needs of all students in their plans;
- Create mental health and wellbeing **resources** for LEAs; and

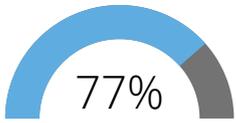
▶ **Promote mental health and wellbeing in summer learning**, with activities including strengths-based, trauma- and social emotional-informed, equity-centered mental health services and supports.

- Oregon's funding of summer learning programs that explicitly prioritize mental health and wellbeing underscores the state's commitment to year-round mental health care. This use of ESSER funding aligns with **CLASP's Core Principles to Reframe Mental Health**. We advocate for a healing-centered framework that redefines mental health to be strengths-based, enhances culturally responsive services that respond to trauma, and addresses social needs like education.^{xi} Oregon's summer learning program is moving towards this framework by requiring activities be strengths-based, trauma- and social-emotional-informed, and equity-centered.

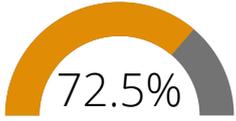
WHAT IS TRAUMA-INFORMED CARE?

Trauma-informed care is an organizational structure that acknowledges the deep impact of trauma on people in a system (including staff) and responds by incorporating education about trauma into policies, procedures, and practices while actively resisting re-traumatization.^{xii} Providers who accurately identify trauma symptoms can reduce exposing young people to more trauma and/or aggravating past trauma. Conversely, a system that is not trauma-informed risks retraumatizing students and doing more harm. Trauma-informed systems are empowering, collaborative, safe, and rooted in trust.^{xiii}

STATE SPOTLIGHTS


TEXAS:^{xiv} Using ESSER Funding to Make Initial Investments


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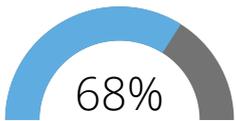
students of color

Based on stakeholder feedback and listening sessions, Texas recognized that many students and teachers are experiencing trauma and grief. Texas noted that COVID-19 is not the first large-scale traumatic event to impact the state, citing Hurricane Harvey as one other example of an event that created long-lasting and wide-ranging mental health effects for students.

Texas used previously available federal funding to build a trauma-informed training video series. This series was designed to connect educators to relevant science and strategies to help address the emotional needs of their students, their colleagues, and themselves. Texas continued to further its commitment to trauma-informed care in their reopening plan.

Key Uses of ESSER Funds:

- Create trauma-informed **teacher training modules** and supports for teachers;
- Provide LEAs with **guidance** on how to support student mental and behavioral health, and how to implement trauma-informed practices; and
- Connect counselors with **resources**, including a series of COVID-responsive **guidance lessons and trainings**, on trauma-informed counseling through **project and grant programs** for LEAs.


DELAWARE:^{xv} Using ESSER Funding to Build on Existing Momentum


Title I Schools*



students of color

In 2018, Delaware became a trauma-informed state via executive order.^{xvi} Among other items, this executive order required Delaware to develop a trauma-informed toolkit that included a self-care component; identify gaps in trauma-related services; and implement trauma-informed practices among state agency staff and when working with the public. Delaware is also working on a trauma demonstrative project, Project Thrive, which develops trauma-specific therapeutic service delivery models for students requiring higher levels of support. Through the Delaware Department for Children, Youth, and Families, Delaware staffs family crisis therapists in 51 elementary schools and has behavioral health consultants in 30 middle schools. There are 105 public elementary schools and 34 public middle schools in Delaware, and an additional 17 public schools that serve multiple grades^{xvii}

Key Uses of ESSER Funds:

- Use ESSER II CRRSA Funds to develop a Social, Emotional, and Behavioral (SEB) Wellbeing plan to **provide districts with support and resources** on identifying student mental health needs;
- Build out a multi-tiered system of support (MTSS) with **SEB instructional materials** for each tier;
- Support **preventative and intervention strategies**, like mental health literacy for all; youth mental health first aid; increased capacity for school counselors; and student advisement support;
- Invest in multiple sources of **data collection**, including universal screening data, progress monitoring data, and implementation data, to identify and respond to SEB across tiers of support; and
- Ensure **equitable access** to support for each student.

KEY RECOMMENDATION: PRIORITIZE HEALING-CENTERED CARE

While multiple states mentioned culturally responsive and trauma-informed practices in their reopening plans, no state mentioned healing-centered care. Healing-centered care is holistic, extending beyond diagnosis to focus on culture, spirituality, civic action, and collective healing. Dr. Shawn Ginwright, a professor of Education, and African American Studies at San Francisco State University, explains that the healing-centered approach asks, “what’s right with you” instead of, “what happened to you.” He outlines some key elements of healing-centered engagement, including being culturally grounded; viewing healing as the restoration of identity; understanding that healing is experienced collectively; and embracing a holistic view of wellbeing that includes the “spiritual domains of health.”^{xviii} Healing-centered care allows for a strong focus on prevention, individual wellbeing, and community.

*TITLE I AND ENROLLMENT DATA NOTES & SOURCES

Title I Schools: At least 40% of students are low-income

Title I data, 2015-2016

Enrollment data: 2017-2018

Sources:

Title I (National Center for Education Statistics) https://nces.ed.gov/pubs2018/2018052/tables/table_03.asp

Enrollment (Office of Civil Rights) <https://ocrdata.ed.gov/resources/downloaddatafile>

ENDNOTES

[i] <https://www.comnetwork.org/resources/asset-framing-the-other-side-of-the-story/>

[ii] <https://www.clasp.org/blog/young-minds-matter-historical-and-cultural-trauma>

[iii] <https://www.apa.org/monitor/2018/02/cover-healing-heritage>

[iv] https://www.clasp.org/sites/default/files/publications/2021/01/2020_Core%20Principles%20to%20Reframe%20Mental%20and%20Behavioral%20Health%20Policy.pdf

[v] <https://www.hrsa.gov/about/organization/bureaus/ohe/health-literacy/index.html>

[vi] <https://www.clasp.org/sites/default/files/publications/2020/06/CLASP%20REPORT%20-FINAL.pdf>

[vii] *ibid*

[viii] <https://oese.ed.gov/files/2021/06/New-York-ARP-ESSER-Application.pdf>

[ix] <https://oese.ed.gov/files/2021/06/Oregon-ARP-ESSER-State-Plan.pdf>

[x] <https://www.oregon.gov/ode/students-and-family/equity/SchoolSafety/Pages/Strengthening-Mental-Health-in-Education.aspx>

[xi] https://www.clasp.org/sites/default/files/publications/2021/01/2020_Core%20Principles%20to%20Reframe%20Mental%20and%20Behavioral%20Health%20Policy.pdf

[xii] <https://store.samhsa.gov/system/files/sma14-4884.pdf>

[xiii] <https://www.clasp.org/sites/default/files/publications/2020/06/CLASP%20REPORT%20-FINAL.pdf>

[xiv] <https://oese.ed.gov/files/2021/06/Texas-ARP-ESSER-State-Plan.pdf>

[xv] <https://oese.ed.gov/delaware-arp-esser-state-plan/>

[xvi] <https://governor.delaware.gov/executive-orders/eo24/>

[xvii] <https://rodelde.org/ataglance/>

[xviii] <https://ginwright.medium.com/the-future-of-healing-shifting-from-trauma-informed-care-to-healing-centered-engagement-634f557ce69c>