



Achieving Equitable Community Development:

Creating a restorative trauma-informed approach in environmental community development organizations

by

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GROUNDWORK
USA

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Preface

The funding for Groundwork USA's Brownfields Technical Assistance program—and thereby development of this white paper—comes from the EPA Brownfields Program along with a mandate to assure equitable development and environmental justice outcomes in brownfield-affected communities we touch. As leader of this multi-year program, I've fielded my fair share of questions about how, in fact, we do this, given that brownfield cleanup and land revitalization over the past 20 years—especially in places facing decades of distress, decline, neglect and isolation—have typically signaled an open invitation to people from elsewhere to come in, invest, gentrify and displace longstanding residents.

Indeed, our team's assignment has been a fleeting one given free market economics, and we're not alone. Nationally, planning and community development practitioners, popular news outlets and even national publications of record have been documenting how Americans' renewed interest in inhabiting walkable urban centers—essentially the reverse of 1950s white flight—is causing gentrification of long-impooverished neighborhoods across American cities. As seemingly cheap housing is purchased and renovated by newcomers, and as the surrounding built environment is revitalized by local governments seeking an increase in taxable income on properties previously generating little or none, this dynamic is creating yet another disproportionate impact on low-income people and people of color. These communities have long endured systematically little or no access to employment, a living wage, mortgages and other financing mechanisms that would allow them to own property and leverage such assets to build wealth and enjoy access to new opportunity.

As a technical assistance provider tasked with supporting communities wrestling with these issues, our team has heard the call of many to identify a "recipe" for leading brownfield land revitalization work containing intentionally "baked in" ingredients—preventive and proactive strategies—that would enable the emergence of revitalized communities containing a careful balance of:

- ▶ An enhanced built environment
 - ▷ new parks! street trees! upgraded sidewalks!
- ▶ A revitalized local economy
 - ▷ new businesses! pop-up coffee shops! food trucks! an arts district! a destination! plentiful jobs offering living wages!
- ▶ An attentive local government supportive of entrepreneurs and start-ups
 - ▷ financing and capital accessible to a diverse cross-section of businesspeople!



An image of the *Sequoia sempervirens* tree adorns the cover of this white paper to serve as a visual reminder of our equitable community development aspirations. By virtue of its very existence, the mighty redwood embodies resilience, interdependence and persistence. The redwood also possesses the capacity to withstand—and thrive in spite of—harsh conditions such as wildfire or extreme drought. The restorative trauma-informed approach asserted in this paper centers a person, their lived experience, and their capacity to thrive in spite of challenge. In doing so, we move ever closer toward ensuring that prosperity and well-being are equitably accessible to that person, as well as every member of their surrounding community.

and, at the same time, in this repaired terrain, the presence of:

- ▶ Continuing availability of high-quality affordable homes and rental units
- ▶ Ample availability of and access to employment, living wages, wealth-building and affordable home ownership, especially among low-income people and people of color
- ▶ Preserved historic and cultural identity and character of the area
- ▶ Harmonious and symbiotic coexistence of residents old and new across the community

If you've read this far, I have a challenge for you. Take a moment to identify in your mind a place where you have witnessed this brownfield land revitalization "recipe" having been wrought successfully, a place where all of these types of outcomes have been achieved in balance.

Having trouble thinking of one? Us too.

This troubling and seemingly inevitable dynamic of revitalization followed by gentrification and displacement, which threatens to become a repeatable pattern in post-industrial brownfield-affected communities across our nation, inspired Groundwork USA practitioners and partners to explore, integrate into their own work, and assert the concepts presented in this white paper. While policy change at local, regional and national levels is part of the solution, practitioners also have a role to play in disrupting these patterns in their work on the ground.

In short, on behalf of communities and caring practitioners everywhere, we asked ourselves and each other as a working group how we could build our own capacity for supporting and realizing community development that is truly equitable. Several variations on a related set of questions emerged in our initial conversations:

"It's clear it'll take a village—a paradigm shift—to help all members of our society value people and the greater common good over personal profit. In the meantime, if we cannot control what happens in the free market economy, nor the dynamics of speculation among landlords, developers and would-be investors that seem to follow place-based revitalization work on brownfields in long-marginalized communities, then..."

How can we intentionally invest, too, in the personal resilience and well-being of longstanding residents—the very people who stand to lose their foothold as a result of these dynamics—so they can remain in place and live in the kind of attractive, well-appointed neighborhood that should be accessible to everyone?

How can we invest in people alongside investments made in places?

How can we develop and run programs that systemically unlock access to opportunity for everyone who has long lived in the midst of vacant and contaminated land that's now newly revitalized?

How can we ensure everyone who wishes to can participate in, and take advantage of, the wealth-building opportunities apparent on the horizon?

How can we help historically marginalized communities of people gather together their assets and put them to use in building their health, wealth and upward mobility, and that of their families?

How can we develop and run programs that are cognizant of and informed by the lived experience of those trapped by decades-long generational poverty?

How can we intentionally invest in individuals and their families to counteract and prevail above the trauma and grief associated with living in poverty, and the systemic forces that perpetuate concentrated, generational poverty and neighborhood decline?"

Our working group's answers to these questions—that is, our elucidation of the restorative trauma-informed approach to equitable community development outlined in the following pages—is informed by the theories, practice, traditions and fields of social work, public health, ecology, community development, psychology, sociology, racial equity and restorative justice. As we developed this white paper, our working group members found it validating to learn and apply such language and concepts as *adverse childhood experiences* (ACEs) and trauma from public health and social work pedagogy to describe what we had been seeing in people and in neighborhoods while engaged in equitable community building work on the ground. As our work together progressed, using these lenses to frame our work further affirmed our need for an approach to equitable community development wholly informed by and responsive to the realities of life on the ground in brownfield-affected communities.

In asserting the use of language and concepts not typically found in more traditional planning and community development pedagogy, we recognize that some practitioners may experience discomfort when reading this white paper. Surely, grappling with the concept of a person or a community of people sustaining trauma or adverse childhood experiences of any kind can be challenging for the heart and mind. As with anything newly encountered, it takes time and practice to master these concepts, and to integrate and implement the practices proposed in this white paper. The practices are meant to equip and support practitioners in the community development field and to refine its approach and best practices.

The act of identifying or recognizing trauma does not mean that individuals within an organization need to treat it. If you accept the maxim "*when we know better, we do better*," then the act of integrating restorative trauma-informed approaches into your organization's policies, procedures and program design considerations (particularly youth and workforce development programming), and the act of more organizations and institutions doing the same, will incrementally increase the efficacy and impact of equitable community development work over time. To characterize as "traumatic" or "adverse" the lived experience of a person in a low-income neighborhood or a community of color within a long-challenged brownfield-affected community is not to label or stigmatize that person, their family, neighborhood, community or lived experience. Using restorative trauma-informed approaches to train staff and frame their work helps us all honor the gravity of the conditions on the ground we encounter as people and as practitioners. It equips us to collectively understand, communicate about and ultimately rise to the challenge of realizing community development that is truly equitable.

Because we regard each and every community as an interconnected ecosystem of people, places and institutions, and because the reality we find on the ground requires it of us, we know there's no "magic silver bullet" that will enable a community to revitalize equitably. No, to realize equitable community development requires a multi-faceted approach to brownfield land revitalization, one that draws from the very best of many traditions. This white paper is written as just that: a practical guide that asserts foundational theory and framing, is informed by many fields of practice, and offers practitioners intentional best practices and next steps that can be taken—starting today—to ensure community development and brownfield land revitalization can truly be done in an equitable way.

To paraphrase Ronda Chapman, Executive Director of Groundwork DC, "If we don't start our vision and work with people at the center of it, we're going about it all wrong." In this spirit, we offer this white paper in the pursuit of equity and justice for all people and their communities.

—Kate O'Brien
November 2017

Introduction

Recent data regarding social determinants of health suggest that place-based improvements to the built environment in long-marginalized, low-income communities and communities of color can improve health equity for the individuals and families living there.¹ Similarly, conventional community development rationale presumes that place-based improvements can lead to improvements in quality of life (e.g., decreased violence and crime, better access to recreational amenities, new investments in brick-and-mortar development, increased availability of jobs, increased property values, and so on). As environmental community development organizations, Groundwork USA and its affiliated network of Groundwork Trusts across the country have worked for nearly 20 years to augment both the built environment and residents' lived experience—"changing places, changing lives" as the organization's tagline asserts. Groundwork Trusts lead transformative place-based projects and people-centric programs in neighborhoods that have experienced decades of marginalization, disinvestment, environmental degradation, segregation, poverty, racial discrimination and neglect.

Through that work, Groundwork practitioners have begun to see that while place-based improvements to the built environment may be improving health outcomes among our society's most frequently marginalized populations, improvements in their economic livelihoods aren't always following. As the Groundwork practitioners who advised the development of this

paper see it, when revitalization of a community happens, particularly in urban areas, many of the neighborhood's existing and long-time residents are unable to fully participate in its economic revitalization. Instead, they may be forced to relocate due to rising rents and speculation. Groundwork practitioners understand this disconnect not as a result of individual will or desire but as a function of the long-term trauma sustained by the current residents through various means: systemic racism, disinvestment, lack of capital, redlining, environmental degradation, poverty and violence, among others.

These practitioners share a recognition that in order for current residents, many of whom are people of color and living in poverty, to reap the benefits of neighborhood revitalization, and for the work of the Groundwork Trusts and other neighborhood organizations to realize community development that is truly equitable, Trust practitioners must operate with full acknowledgment of the deep-rooted individual and community-wide trauma existing within the neighborhood as well as the ability of individuals and communities to be resilient even in the face of huge obstacles. Groundwork leaders aspire to integrate this awareness more systematically and explicitly into their approach to community building in urban neighborhoods.

A restorative trauma-informed approach that shares elements with an asset-based community development rationale informs this new paradigm and the associated strategies for its implementation in community development



EQUITY

Just and fair inclusion into a society in which all can participate, prosper and reach their full potential. Unlocking the promise of the nation by unleashing the promise in us all.

—PolicyLink's Equity Manifesto http://www.policylink.org/sites/default/files/pl_sum15_manifesto_FINAL_4app.pdf

work.ⁱⁱ It integrates traditionally isolated fields of public health, social work and community development. It values personal healing and builds individual coping skills and personal resilience. Over time, it can lead to more equitable access for oft-marginalized residents to the myriad economic benefits associated with brown-field cleanup, reuse and redevelopment—in other words, to realize *truly equitable* community development.¹

Given Groundwork's place-based and people-centric approach, coupled with its leaders' desire to more intentionally integrate this recognition into their work, the Groundwork model offers an excellent and transferable basis for exploring how community development organizations can adopt and implement a restorative trauma-informed approach over time.

¹ The United States Environmental Protection Agency (EPA) defines a brownfield site as real property, the expansion, redevelopment or reuse of which may be complicated by the presence or potential presence of a hazardous substance, pollutant or contaminant.

Goals of the Paper

The purpose of this white paper is to show the need for and define the model and approach to equitable community development that is trauma-informed and uses restorative practices to increase personal resilience and improve long-range economic and social outcomes for program participants. With this paper, practitioners in the field of community development can learn how to implement programming that provides opportunities for current residents to harness the wave of prosperity that comes with brownfield cleanup, reuse

and redevelopment in long-marginalized neighborhoods experiencing new investment and revitalization.

Many Groundwork Trusts and other community development organizations have demonstrated an interest in and a readiness to implement a restorative trauma-informed approach, so this white paper was written to achieve these objectives:

Outline the research basis for using a restorative trauma-informed approach to youth and community development as

well as tackling environmental problems, particularly in urban environments.

Explore the elements and principles of a restorative trauma-informed approach toward youth and workforce development programs (like those run by Groundwork Trusts).

Provide a framework for implementation of a restorative trauma-informed approach in an effort to promote equitable community development.

Part I: The basis for a new approach

Background: How Do We Prevent Displacement in the Wake of New Investment?

During the 2016 Groundwork USA National Assembly, in a session called “Building Healthy, Healing Communities,” a panel of Groundwork Trust practitioners shared experiences, observations and concerns about the possibility that their projects and programs could perpetuate patterns of inequitable community development. Panelists wondered how they could more intentionally build the personal resiliency of neighborhood residents participating in that work.

The Groundwork model was established in the United States in the late 1990s by an interagency agreement between the National Park Service Rivers, Trails and Conservation Assistance program and the Environmental Protection Agency Brownfields program, informed by Groundwork UK, which was founded in the United Kingdom in the 1980s. From a cluster of three pilot Groundwork communities in New England to now 20 Groundwork Trusts located in communities from coast to coast, the Groundwork USA network has grown steadily as constituencies in an increasing number of brownfield-affected communities seek strategies for addressing the intertwined environmental, economic and social legacies that remain in the wake of globalization, a shifting national economy and the continued presence of persistent systemic inequities.

Many Groundwork Trusts have found their place in communities frequently overlooked by funders and policymakers. Though such communities can contain a crowd-

ed field of nonprofits, Groundwork Trusts have stood out in their unique capacity to establish cross-sector partnerships that drive to completion place-based transformation projects (i.e., brownfields to parks, vacant lots to community gardens, etc.) and deliver high-quality youth and workforce development programming. In spite of and because of their successes, some Groundwork practitioners have worried that their place-based and people-centric work has fallen short for many of our society’s most marginalized residents. As can be seen in communities across the country, especially those where high concentrations of poverty and isolation have been the norm for decades, place-based transformation efforts alone—absent meaningful partnership and program investments in the “cradle to career” development of residents—have led to inequitable results, particularly among the low-income individuals and families of color living in long-challenged, now newly revitalized communities.

To further support practitioners wrestling with these patterns unfolding across American brownfield communities in and beyond its own network, Groundwork USA pursued and was awarded a five-year Brownfields Training, Research and Technical Assistance (K6) cooperative agreement from the EPA² in 2014. This multiyear funding sustains Groundwork USA’s Brownfields Technical Assistance program, which supports the integration of environmental justice and equitable development in brownfield-impacted communities across the United States. In the first three years of its technical assistance program, Groundwork USA worked with municipal and nonprofit orga-

nizational staff from dozens of brownfield-affected communities via workshops, webinars and direct technical assistance engagements. That work showed Groundwork USA’s team that while most communities aspire to ensure more equitable impact and distribution of benefits from brownfield cleanup, reuse and redevelopment, few have access to or knowledge of models, theories of change and resources integrated from multiple fields of practice to help them disrupt patterns of inequity, especially among the marginalized populations who stand to gain the most.

Building upon this technical assistance work and following the 2016 “Building Healthy, Healing Communities” workshop, Groundwork USA convened an ad hoc Equitable Development Working Group, composed of a few Groundwork Trust executive directors, to continue this important conversation. The group recognized that such fields of practice as public health, social work and some parts of community development have already begun to acknowledge and embrace a trauma-informed approach to working with individuals and communities. Group members hypothesized that they could use that awakening to inform a scope of work for their own organizations. Groundwork USA further theorized that this exercise could also benefit the work of like-minded community development organizations in communities well beyond its own network of affiliates.

Groundwork USA retained public health consultant Liz Blackwell-Moore in early 2017 and commissioned her to lead a literature review, to co-reconvene the Equitable Development Working

² CERCLA 104(k)(6) provides the EPA with the authority for a program of training, research and technical assistance to individuals and organizations to facilitate the inventory of brownfield properties and assessments, the cleanup of brownfield properties, community involvement, or site preparation.

Group and, with that group, to scope, develop, refine and finalize this white paper.


Trauma and Toxic Stress

Trauma and Its Effects on Individuals

Over the past two decades, the research and understanding of the impact of trauma and adverse childhood experiences, often known as ACEs, on individual and community health has been steadily growing. The field of behavioral health has recognized the connection between trauma and mental health and substance use disorders since the early 1990's.ⁱⁱⁱ The field of public health began to recognize the connection between trauma and overall health when a landmark study, known as the original Adverse Childhood Experiences Study, was completed in 1998. The types of ACEs examined in the study are shown in Graphic 1.^{iv}

The ACEs Study showed a strong connection between the number of ACEs and increased future health risk behaviors known to be the cause of many physical and behavioral health diseases.^v The research showed that the more ACEs a person has, the greater the risk for chronic disease, mental health disorders, violence and being a victim of violence. Not only are people with more ACEs more likely to suffer chronic diseases, they are also more likely to end up in prison.^{vi}

Since the original study, other researchers have replicated the study with different populations. A study completed in 2013 in Philadelphia, called the Urban ACE Study, included more people of color and people with a wider range of socioeconomic status. While this study found a similar link between more ACEs and higher risk factors for disease and early death, the researchers found higher rates of ACEs

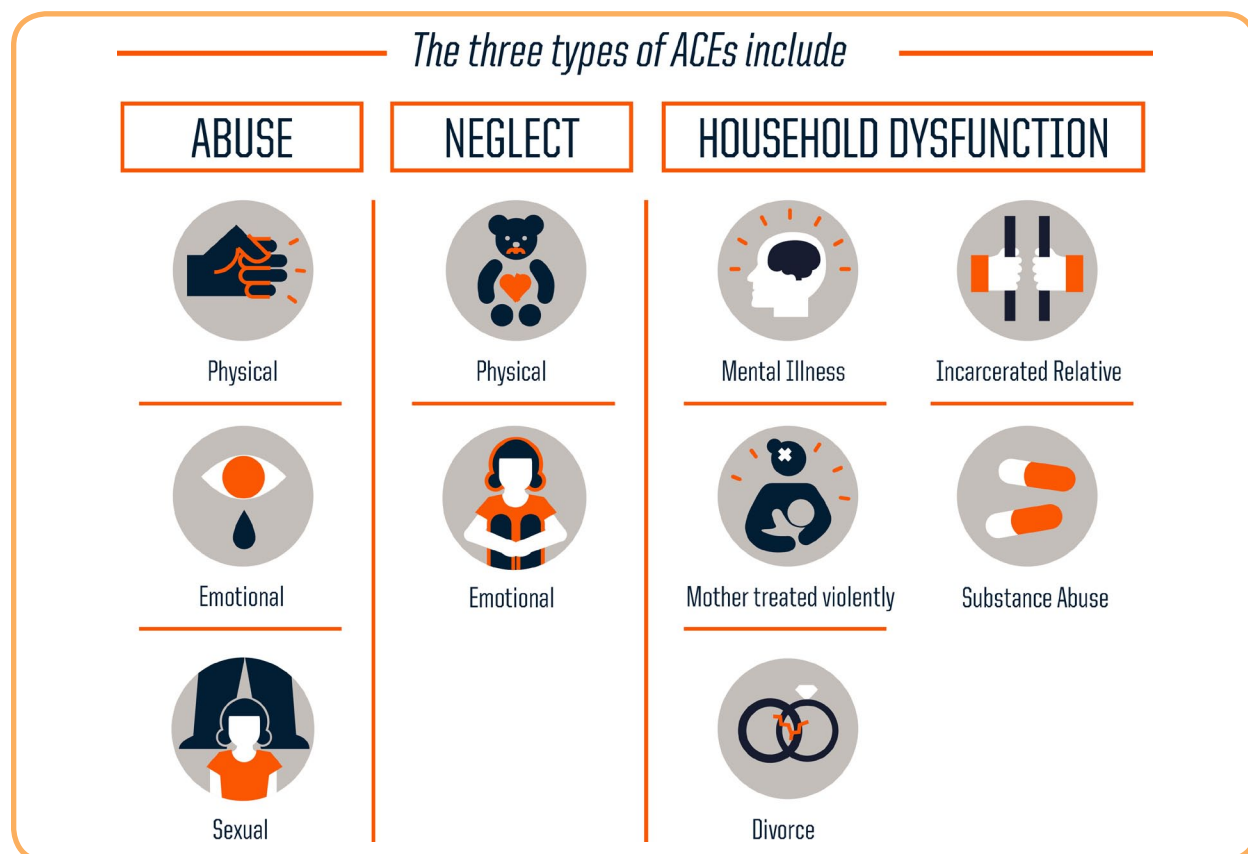


TRAUMA

Individual trauma results from an event, a series of events or a set of circumstances that is experienced by an individual as physically or emotionally harmful or life-threatening and that has lasting adverse effects on the individual's functioning and mental, physical, social, emotional or spiritual well-being.

—Substance Abuse and Mental Health Services Administration
<https://www.samhsa.gov/trauma-violence>

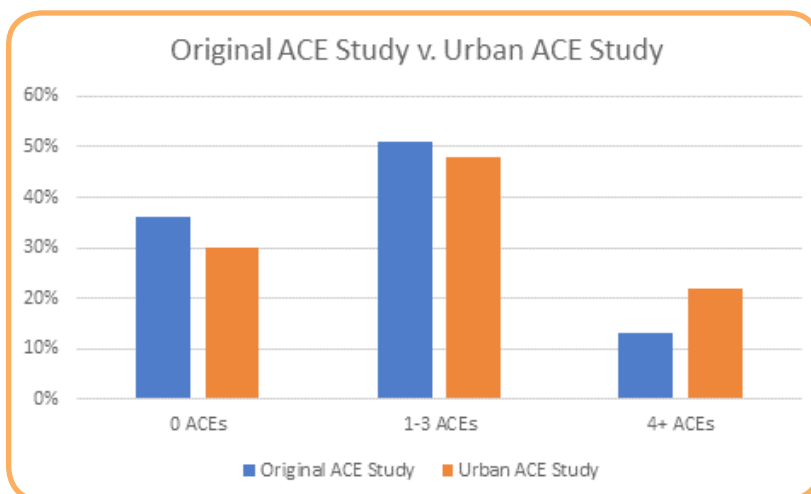
among Philadelphia residents overall than the original study participants who were more



Graphic 1: The types of trauma researched in the original ACE study. *Infographic: Robert Wood Johnson Foundation; Source: Centers for Disease Control and Prevention*

white and middle class as shown in Graphic 2.^{vii}

The Urban ACE Study also included additional research on the prevalence of community ACEs, which the researchers identified as unique to children living in an urban environment. These community stressors—including witnessing violence, feeling discrimination, having an adverse neighborhood experience, being bullied or living in foster care—had been linked to more disease risk factors in previous studies. When the standard ACEs were added with the community ACEs, 81 percent of the people in the Urban ACE Study had experienced at least one ACE. And in all but the bullying measure, the black people in the study showed higher rates of experiencing community stressors than the white participants, as shown in Graphic 3. The Urban ACE Study indicates that people in an urban environment are not only experiencing higher rates of individual ACEs, African Americans are also exposed to more community ACEs that increase their risk factors for disease and early death.



Graphic 2: The difference between ACE scores of participants in the original ACE study and the Urban ACE Study

Community ACE	White	Black
Witnessed violence	26%	52%
Felt discrimination	16%	50%
Had an adverse neighborhood experience	19%	29%
Were bullied	9%	6%
Lived in foster care	1%	4%

Graphic 3: The percentage of white and black people who experienced a community ACE in the Urban ACE Study



BRAIN DEVELOPMENT

The Center on the Developing Child at Harvard University is at the forefront of understanding and explaining the latest science on brain development.

<https://developingchild.harvard.edu>

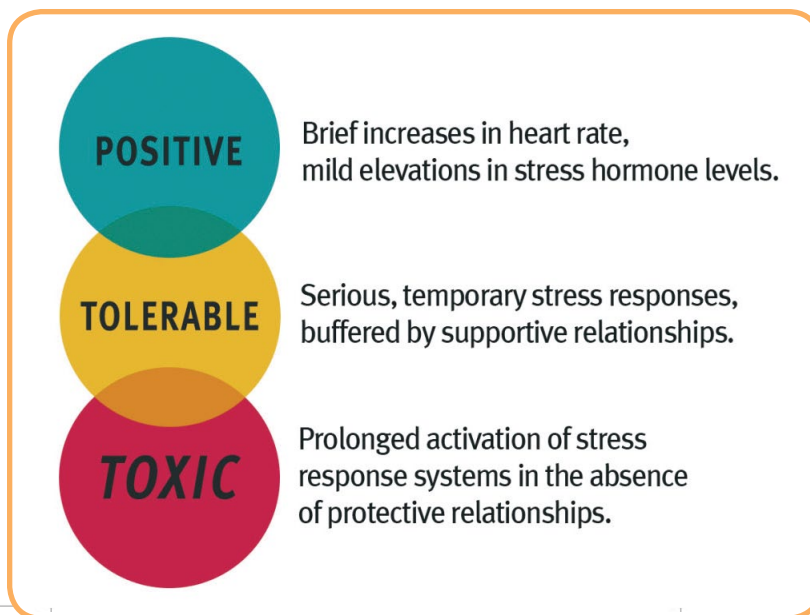
Toxic Stress

The Center on the Developing Child at Harvard University is at the forefront of the research on child development and the development of programs and policies to improve life outcomes for young people. Its research has shown that ACEs can cause what the center refers to as “toxic stress.” Unlike positive or tolerable stress, toxic stress can disrupt the development of the brain architecture and other organ systems, as shown in Graphic 4. This disruption in brain development

increases the risk for stress-related diseases, as well as cognitive impairment throughout a person’s life if not resolved in some way.^{viii}

Trauma and Its Impact on Community Development

Toxic stress and trauma have also been found to have significant impacts on communities and their ability to take part in community-building efforts, particularly in communities like Philadelphia or in public housing neighborhoods where there are high rates of ACEs among individuals and



Graphic 4: The different types of stress people experience as children. *Graphic created by the Center on the Developing Child at Harvard University*

high rates of community stressors, like poverty, discrimination and violence. In a 2014 report called *Trauma-Informed Community Building*, Bridge Housing and the Health Equity Institute in San Francisco identified five ways in which trauma directly impacted community-building efforts. This groundbreaking report put a spotlight on the challenges of developing an inclusive process to community development. Below is an adapted summary of those challenges:^{ix}

Challenge 1: Lack of Trust and Social Cohesion

Trauma to an individual can disrupt trusting relationships. Widespread community violence can create mistrustful relationships among neighbors. Without trust, there is often a lack of social cohesion, an essential element in community building.

Challenge 2: Lack of Stability, Reliability and Consistency

People who have experienced a lot of trauma are often overwhelmed by their need to cope with their trauma and to survive poverty. They may also experi-

ence trauma symptoms, such as reduced attention and memory, as well as impaired problem-solving. Asking residents to show up consistently and to actively participate in traditional community development often fails because of the need to first address survival before planning for the future.

Challenge 3: Disempowerment and Lack of a Sense of Community Ownership

People who live in neighborhoods of concentrated poverty and systemic segregation often have less access to resources and social capital, which leads to feelings of disempowerment. Disempowerment and continued trauma can cause those living in the community to feel as if they do not have ownership of their community or the ability to change it for the better.

Challenge 4: Inability to Envision the Future

New research shows that the mental burden of living on the brink of survival, often the reality for people in neighborhoods of concentrated poverty and

violence, leaves people with a decreased ability to plan for the future. Trauma further makes it difficult for people to weigh the future implications of their current decisions and to envision a brighter future for themselves and their family. Traditional community development requires community members to envision a future that they may think will not exist nor would they be able to access.

Challenge 5: Breadth and Depth of Community Needs

Unresolved trauma impacts all parts of a person's life. People who have experienced a lot of trauma that has not been resolved often have lower educational attainment, poorer overall health, substance use problems, and other barriers to attaining quality jobs and maintaining employment because of poverty and institutionalized racism. Neighborhoods impacted by high levels of trauma require a breadth and depth of resources and time to facilitate their participation in healing and community building efforts.

Resilience

Personal resilience is the ability to recover quickly from hardship or difficulty. While some children

PERSONAL RESILIENCE

In the context of equitable community development, to not only recover quickly from hardship but to thrive and continue to live in the revitalized neighborhood.

and adults have the ability to overcome hardships and others do not, “Resilience requires relationships, not rugged individualism,” according to the Center on the Developing Child at Harvard University.^x Their research identifies a common set of factors that make it more likely for an individual to be resilient in the face of great difficulty:

- 1 At least one solid relationship with an adult
- 2 A sense that they can succeed
- 3 Opportunities to strengthen coping skills and emotional regulation
- 4 A source of faith or hope, or cultural traditions

To foster resilience in young people, Ken Ginsburg, a pediatrician specializing in adolescent medicine, established the “7 Cs of Resilience,” outlined in Graphic 5.

While trauma can have incredibly long-lasting impacts on communities, the effects of trauma do not have to be carried into adulthood or from one generation to another. With a trauma-informed approach, programs and people in the community can foster resilience in children and strengthen it in adults, making communities and the people living in them more resilient overall.

Restorative Practices

Restorative practices are processes that proactively build healthy relationships and a sense of community to prevent and address conflict and wrongdoing.^{xi} Restorative practices have gained traction in recent years because research has shown that zero-tolerance policies (those that take a very strict, uncompromising approach to enforcement of rules, often with harsh punitive consequences) are largely ineffective at correcting problem behavior,

7 Cs of Resilience

Competence: When young people are doing right and have opportunities to develop important skills, they feel competent. Their competence is undermined when they aren’t allowed to recover themselves after a fall.

Confidence: Young people need confidence to be able to navigate the world, think outside the box and recover from challenges.

Connection: Connections with other people, schools and communities offer young people the security that allows them to stand on their own and develop creative solutions.

Character: Young people need a clear sense of right and wrong and a commitment to integrity.

Contribution: Young people who contribute to the well-being of others should receive gratitude rather than condemnation. They then learn that contributing feels good and may therefore more easily turn to others without shame.

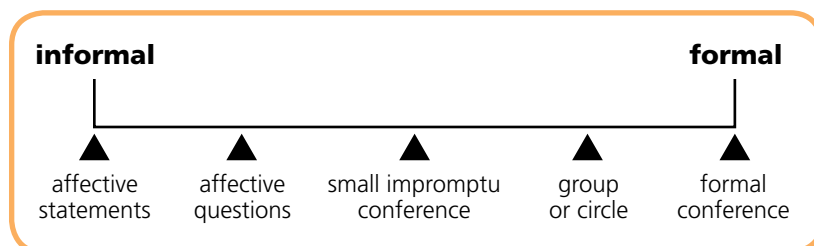
Coping: Young people who possess a variety of healthy coping strategies are less likely to turn to dangerous quick fixes when stressed.

Control: Young people who understand that privileges and respect are earned through demonstrated responsibility learn to make wise choices and feel a sense of control.

Graphic 5: The 7 Cs of Resilience. Created by Ken Ginsburg

especially among youth.^{xii} A significant amount of data also shows that schools use harsher punishments with students of color and students in special education than with white students or students in regular

education. In the summer of 2016, the U.S. Department of Education issued guidance to school superintendents and launched a website to encourage school leaders to rethink discipline. These materials outlined the detrimental effects



Graphic 6: The restorative practice continuum. Created by the International Institute of Restorative Practices

that suspensions and expulsions have had on students and, in particular, students of color.^{xiii}

Restorative practices have become a leading alternative to zero tolerance. According to the International Institute of Restorative Practices, a world leader in restorative practices, the approach has its roots in restorative justice, a way of looking at criminal justice that emphasizes repairing the harm done to people and relationships rather than only punishing offenders. While restorative practices can be used as an alternative to punishment, there is a continuum of restorative practices from informal to formal:

Affective Statements: Statements that express how someone feels, such as “I feel ... when you” Using and teaching young people to use affective statements is the foundation of restorative practices.

Affective Questions: These statements turn the usual questions used in conflict into questions that get at the deeper issues at play in a conflict. Instead of “Why did you do that?” an affective question would be “What happened and what were you thinking of at the time?” A list of affective questions used in typical restorative practices can be found here: <https://www.iirp.edu/>.

Small Impromptu Conference: This practice is used to address small problems quickly, in real time, to keep them from escalating. The facilitator of the impromptu conference uses affective statements and questions to quickly address a conflict.

Circles: Circles can be used as a response to wrongdoing. They are often used to build a sense of community and establish group norms.

Restorative Questions

To Respond to Challenging Behavior:

- What happened?
- What were you thinking of at the time?
- What have you thought about since?
- Who has been affected by what you have done? In what way?
- What do you think you need to do to make things right?

Graphic 7: Restorative questions. Created by the International Institute of Restorative Practices

Formal Conferences: Restorative conferences are formal responses to wrongdoing in which all those involved and affected by an incident come together with a trained facilitator to explore what happened, who was affected and what needs to be done to make things right.

The fundamental unifying principle of restorative practices is that human beings are happier, more cooperative and productive, and more likely to make positive changes in their behavior when those in positions of authority do things *with* them rather than *to* them or *for* them. While restorative practices are not expressly stated as “a trauma-informed approach,” participants and facilitators all along the restorative practice continuum develop skills that follow the principles of a trauma-informed approach. By addressing the behavior and helping build the behavioral skills of the person that caused harm, that person is more likely to succeed in the future and not rely on problem behavior to deal with challenges. Using restorative practices throughout an organization can lead to a

The fundamental unifying principle of restorative practices is that human beings are happier, more cooperative and productive, and more likely to make positive changes in their behavior when those in positions of authority do things *with* them rather than *to* them or *for* them.

deeper understanding of the causes of behavior and allow more opportunity for building skills that increase successful participation in youth, workforce and community development.

Part II: A Restorative Trauma-Informed Approach to Equitable Community Development

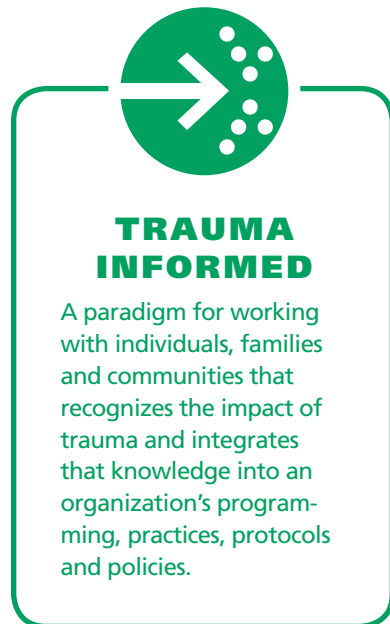
Continual trauma and high levels of community stress present a serious challenge to the success of equitable community development in high-poverty urban neighborhoods. Understanding the underlying causes and finding ways to address those challenges are essential for success. Using

a restorative trauma-informed approach to equitable community development does not mean that an organization must treat trauma directly; it means the organization and staff understand the impact of trauma and seek to respond in ways that improve peoples' lives.

by fully integrating knowledge about trauma into policies, procedures and practices; and seeks to actively **resist re-traumatization**.^{xiv}

Foundational Elements

The impact that trauma plays on health and well-being has been well known in the field of psychology and social work for decades. It is slowly becoming more mainstream knowledge within the fields of public health, medicine, education and youth development. For community development organizations like Groundwork Trusts to fully realize the impact of trauma on efforts to achieve equitable community development and find the pathways to resilience and recovery, the approach must draw from many fields of knowledge and various evidence-based approaches. Several foundational elements make up the knowledge base of a restorative trauma-informed approach to equitable community development. Those elements, as they relate to each other, are shown in Graphic 8.

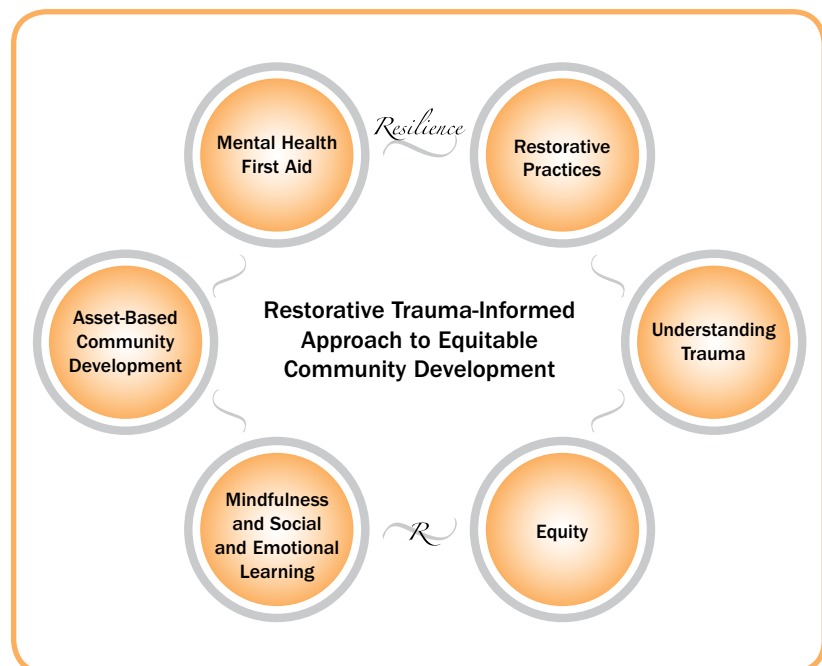


Using a restorative trauma-informed approach to equitable community development does not mean that an organization must treat trauma directly; it means the organization and staff understand the impact of trauma and seek to respond in ways that enhance program design and improve peoples' lives.

Key Assumptions

The Substance Abuse and Mental Health Services Administration (SAMHSA), a federal agency with the U.S. Department of Health and Human Services, outlines the key assumptions of a trauma-informed approach that the restorative trauma-informed approach outlined in this paper aspires to embody:

A program, organization or system that is trauma informed **realizes** the widespread impact of trauma and understands potential paths for recovery; **recognizes** the signs and symptoms of trauma in clients, families, staff and others involved with the system and **responds**



Graphic 8: Foundational elements of a restorative trauma-informed approach to equitable community development

Most of the elements have been previously defined in this white paper. The additional elements are defined as:

Asset-Based Community

Development: An approach to community building that centers and builds upon a community's inherent strengths and assets (rather than its needs or deficits) to inform the strategies that advance its transformation and overall well-being.

Mental Health First Aid: A course that teaches how to identify, understand and respond to signs of mental health and substance use disorders in the community.^{xv}

Mindfulness: A mental state achieved by focusing one's awareness on the present moment, while calmly acknowledging and accepting one's feelings, thoughts,

and bodily sensations, used as a therapeutic technique.^{xvi}

Social Emotional Learning: The process through which children and adults acquire and effectively apply the knowledge, attitudes, and skills necessary to understand and manage emotions, set and achieve positive goals, feel and show empathy for others, establish and maintain positive relationships, and make responsible decisions.^{xvii}

Graphic 8 shows the importance of resilience and of pulling from many fields of practice to realize truly equitable community development. It can serve as a checklist for future workforce development trainings for leaders of an organization. It also shows how individuals and leaders may come to the



STRENGTHS-BASED APPROACH

Emphasizes people's self-determination and strengths. It is a philosophy and a way of viewing people as resourceful and resilient in the face of adversity.

work from many different lenses. National and online resources regarding the foundational elements listed here are outlined in Appendix C.



Principles

Groundwork Trusts are not traditional mental health agencies nor traditional community development organizations. While working to improve the physical environment, the Trusts offer a variety of projects, programs, partnerships and connections to other resources for people in neighborhoods experiencing high poverty, high levels of violence and the effects of environmental degradation. Given this integrated approach to community revitalization, a similar fusion of trauma-informed principles is necessary for Groundwork Trusts and other organizations working across sectors that have previously been isolated.

This white paper asserts six principles for a restorative trauma-informed approach to equitable community development, which are shown in Graphic 9. These six principles are gathered and integrated from a variety of sources, including the principles of a trauma-informed organization outlined by SAMHSA; the principles for trauma-informed care outlined by the Institute on Trauma and Trauma-Informed Care^{xviii}; and the principles of trauma-informed community building outlined by Bridge Housing and the Health Equity Institute in San Francisco.^{xix} These are the six principles for a restorative trauma-informed approach to equitable community development:

Implementing a Restorative Trauma-Informed Approach

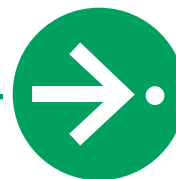
How to Make the Paradigm Shift

Equity and equitable community development can only be achieved through just and fair inclusion and the removal of barriers to economic, physical

and emotional well-being. Once there is an acknowledgement of trauma—current and past, individual and community—it becomes clear that the pathway to equity is through a restorative trauma-informed approach. A restorative trauma-informed approach is not just a programmatic or policy change, but a paradigm shift that will take time and planning to implement into all aspects of an organization.

While immediate actions can be taken to make certain organizational practices more trauma-informed or certain procedures more restorative, shifting the paradigm of an organization to restorative and trauma-informed ensures that all staff and the organization's leadership will have the support and guidance to carry the mantle of resilience and equity into their daily work and decision-making. It creates a shared vision and language for the work, and it allows community members to partake in the approach, since it is explicitly stated by the organization. Applying the approach to all aspects of an organization has several other benefits:

- **Funding:** When soliciting funding or communicating about their programs, organizations can confidently talk about the research-based approach and can characterize their organization as one that is striving to implement the approach at all levels.
- **Scaling Up Programming:** It will be more feasible to scale up programs with fidelity when there is a formalized approach to the work in which all staff are trained, when that approach is reinforced by internal policies, and when the work processes can be easily taught



RESTORATIVE TRAUMA INFORMED APPROACH

A restorative trauma-informed approach is not a programmatic or policy change but a paradigm shift.

to new staff members. There will be less pressure on staff members to hold the institutional knowledge of how things are done within an organization and more ways to use outside resources to help guide new staff in the approach.

- **Sustainability:** There will be greater sustainability of the vision and the practice within an organization by implementing a framework at all levels of the organization.
- **Evaluation:** Restorative practices and trauma-informed approaches to youth development have gained national footing and are beginning to have research to back them up. By using evidence-based elements that make up the restorative trauma-informed approach, such as restorative practices and trauma trainings, an organization is more likely to be able to transfer its evaluation results to other programs and organizations doing similar work. At the same time, organizations implementing the approach outlined in this paper as a means to create equitable community development would be embarking on

relatively new territory. Evaluation of these new efforts by an organization like a Groundwork Trust would offer them a better understanding of what parts of a program work best. Funders are infinitely more interested in seeing evaluation results to justify continued funding allocations for programs.

A Framework for Implementing a Restorative Trauma-Informed Approach

Implementing a restorative trauma-informed approach does not have to happen all at once. Eventually, the goal is to shift the whole culture of an organization to be restorative and trauma-informed for everyone involved. However, an organization is rarely ready, nor does it have the resources, to do so all at once. Where an organization begins implementing the approach will depend on what elements of the approach people involved with the organization are already familiar with.

Once leaders assess the current understanding of their organization, they can determine what low-hanging fruit the organization should pick first. An organization's board of directors may have recently completed a training on institutional racism and is ready to have a training on trauma to consider the role that trauma plays in limiting long-marginalized residents' access to the positive benefits and outcomes of community development and revitalization. The organization may already have staff members using restorative circles in a youth program and would like to improve their skills in using restorative practices to deal with problem behavior by youth participants.

To determine where to begin implementation, each organization

Implementation Domains

- 1 Governance and Leadership
- 2 Policy
- 3 Physical Environment
- 4 Engagement and Involvement
- 5 Cross-Sector Collaboration
- 6 Screening, Assessment
- 7 Training and Workforce Development
- 8 Progress Monitoring and Quality Assurance
- 9 Financing
- 10 Evaluation
- 11 Culture of Self-Care

Graphic 10: Implementation Domains for a restorative trauma-informed approach to equitable community development

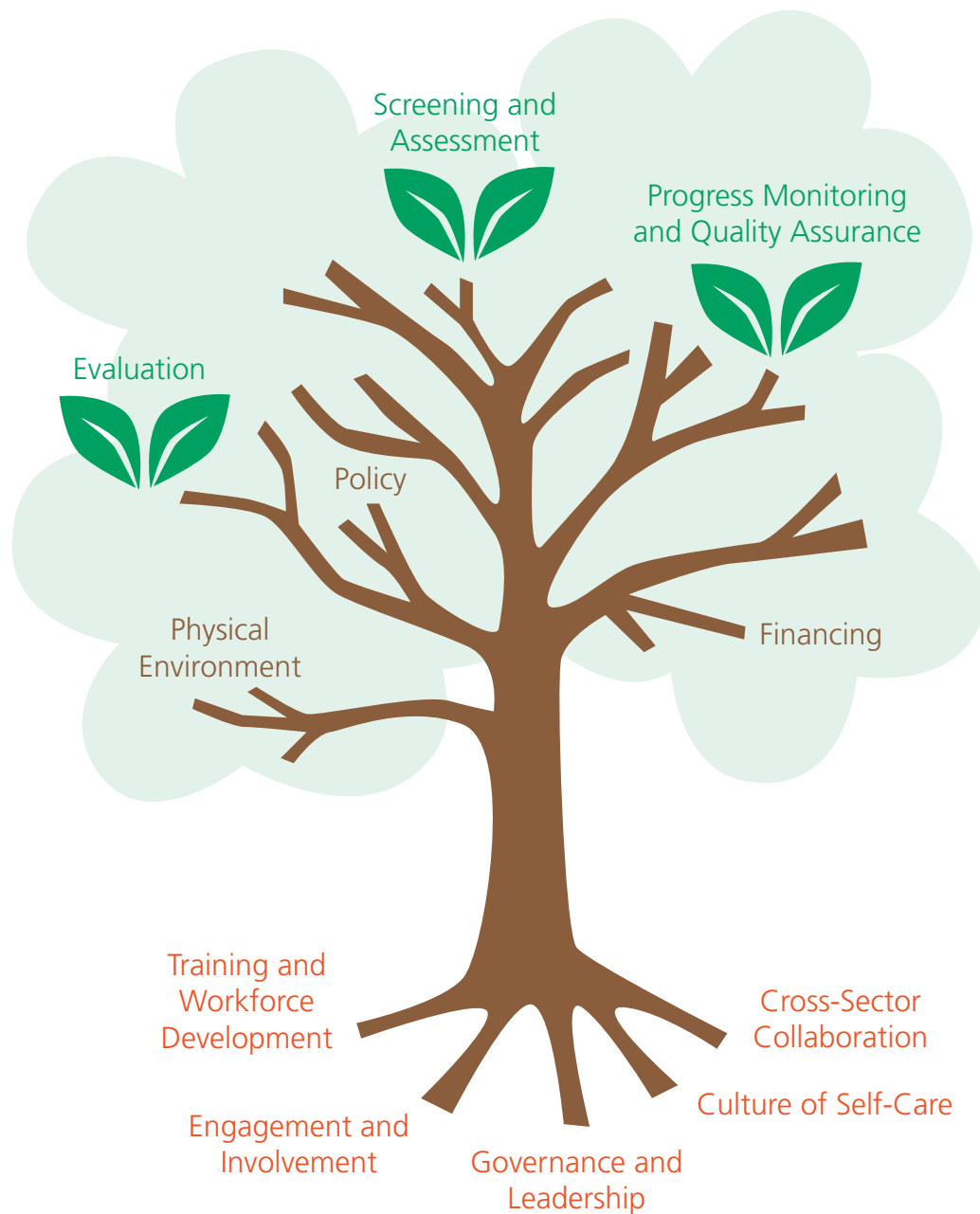
should consider these questions:

- ▶ What elements do we need to learn more about first? Trauma? Restorative practices? Mental health first aid? Social and emotional learning? (Appendix C contains a list of national and online resources.)
- ▶ Where is there significant readiness within the organization to implement a new approach?
- ▶ Who are the leaders in the organization that will push this paradigm shift forward?
- ▶ What resources, either local or national, are available to assist us with implementation in a specific domain?
- ▶ What are the current needs of our constituency, and from what domain will they most benefit? How can those people inform and be involved in our implementation work?

In SAMSHA's guidance for a trauma-informed approach, ten implementation domains are outlined. In Graphic 10, SAMSHA's domains have been adapted to meet the needs of organizations

seeking equitable community development. In many ways, the domains are like the parts of a tree. Creating practice improvements opportunities in the roots of an organization such as the leadership, governing board, and staff, will make readiness to address the domains in the branches and leaves of an organization

Many organizations are likely to find the readiness to implement a restorative trauma-informed approach within the governance and leadership domain if they have an executive director and a board whose members are trained in the impacts of racism on health and well-being.



Graphic 11: The organizational process for Implementing a restorative trauma-informed approach to equitable community development

more plausible. As an example, if staff are not trained in using restorative practices on a regular basis, a change in the discipline policy from punitive to restorative will be difficult to implement consistently. Many organizations are likely to find the readiness to implement a restorative trauma-informed approach within the governance and leadership domain if they have an executive

director and a board whose members are trained, for example, in the impacts of racism on health and well-being. It will be easier to implement in the training and workforce development domain if there are staff who have a strong desire for more training and if the organization is involved in cross-sector collaborations with partner organizations already implementing trauma-informed care. These

domains are the foundation of an organization, and also the foundation of implementing a restorative trauma-informed approach. Organizations may find the most success in implementing the approach if they begin in the roots and work up through the branches to the leaves, as depicted in Graphic 11.

The way in which an organization's program participants are involved in day-to-day programs and the extent to which their feedback is encouraged and incorporated into those programs distinguishes a restorative trauma-informed approach from a regular approach to community development.

Implementing Strong Roots in an Organization

Below is a summary of actions that an organization can take at the foundational layer of a restorative trauma-informed approach. For a full summary of all the domains, please see Appendix B.

Training and Workforce Development:

Having staff trained in restorative practices and trauma-informed approaches is of critical importance for implementing a restorative trauma-informed approach. Providing training not only helps with the current work of the organization, it offers specific skill development to the staff, invests in people on their career path and legitimizes the critically important work of delivering restorative trauma-informed programs. Identifying local resources and developing a training plan for all staff ensures that they are able to

implement the approach. Appendix C contains a list of national organizations that offer trainings, webinars or resources on various topics related to a restorative trauma-informed approach.

Culture of Self-Care

Working with individuals and communities who have experienced trauma can produce emotional stress for staff. It is critical that staff have support from within an organization to take care of their own emotional and physical health so they can succeed in their work. As the number of staff grows, developing an intentional self-care model is important for creating a sustainable culture of self-care within an organization. This could include staff wellness activities and encouraging the use of paid time off when one is feeling overwhelmed or in need of a break from the emotional stress. Creating space for staff to reflect with and relate to one another on the restorative trauma-informed approach will also enhance the work and provide them with a way of dealing with the stress of the work. Partnering with a mental health agency to provide free or reduced-rate "clinical supervision" for staff would also be a possible way of creating a culture of self-care. Clinical supervision involves working with a licensed clinical social worker who can offer support and skill building for staff to address the difficulty of working with people who have experienced a lot of trauma. This has been mostly available to social workers and case managers, but would be an enhancement for staff working in youth and community development.

Engagement and Involvement:

The way in which an organization's program participants are involved in day-to-day programs and the extent to which their

feedback is encouraged and incorporated into those programs distinguishes a restorative trauma-informed approach from a regular approach to community development. Having an intentional plan for engagement and involvement is advised. Here are some areas to consider:

Recruitment: In many youth development programs in low-income, high-trauma neighborhoods, the young people with the most support and resources (either internal or external) are the ones who apply for and become a part of youth development programs. They are also the young people most likely to be able to ride the wave of prosperity. In an effort to reach beyond that group and reach the young people and families most impacted by trauma, actively recruiting young people with fewer skills or support may be necessary. Some ideas for recruiting that population while also harnessing internal and external support for working with them:

- ▶ Leverage partnerships with organizations doing trauma-informed treatment to recruit young people for the program.
- ▶ Tap relationships with specific trusted adults in the community (teachers, counselors, afterschool workers) to recommend and support a young person they know to apply for the program.
- ▶ Develop relationships with school guidance or counseling departments to help recruit students receiving increased support within the school.

Activities and Schedules:

People who have or are experiencing trauma can have difficulty processing information. Keep participants informed

of activities and schedules in ways that are least likely to overwhelm them or cause confusion:

- ▶ Create a schedule that is as simple and consistent as possible.
- ▶ Communicate the schedule and activities in a consistent way.
- ▶ Have gear and what to wear each day be as consistent as possible.
- ▶ If last-minute changes happen, have a predictable process already in place for communicating those changes to limit the “failures” for participants.

Skill-Building and Restorative Practices: All young people lack skills in some areas of their lives because they are still learning. Some people who have or are experiencing trauma may lack more skills or have specific deficits in decision-making or relationship building. Incorporating restorative practices into the day-to-day programs of an organization is a specific way of improving the relationship-building skills of participants and creating an environment of shared decision-making. Group decisions, group norms, defining problematic behavior and reinforcing new skills can all happen through restorative practices, like affective statements or incorporating circles into the day-to-day program.

Rules and Procedures: Having clear rules and procedures that are consistently enforced is important to the success and psychological safety of all participants. Clarity and consistency promotes transparency and trust among staff and participants. If participants feel that one member is receiving special treatment or overly harsh treatment, the success of

all participants may be at stake. Consistent enforcement does not mean harsh punishment. It just means remaining consistent to whatever the organization has outlined as its rules and procedures. A restorative approach to dealing with a harm done within a program will hold young people accountable while also repairing the harm. When the group is familiar with the approach and knows how it works, care must be taken by the organization to utilize the system it has outlined. Sometimes time gets in the way of consistency, so every effort should be made to make the time for whatever process the organization has chosen. In the beginning, a restorative approach may take up more time. In the long term, a restorative approach embedded in the program will reduce the amount of problematic behavior and therefore less time will be needed to deal with harm done.

Governance and Leadership:

The leadership and board of an organization supports and invests in implementing a restorative trauma-informed approach. The organization understands this is a long-term process and commits time and resources to implementation and reflection. There is an identified point person within the organization to lead the implementation of the approach. The organization considers ways to engage participants and community members in the process of implementation.

Cross-Sector Collaboration:

Creating partnerships with other community members, institutions and organizations can be essential to meeting the needs of people who have experienced a lot of trauma. Ensuring that partner organizations are using a trauma-informed approach is of critical importance. Here are

suggestions for improving or ensuring collaboration with restorative trauma-informed people and organizations:

- ▶ Find ways to attend or organize cross-sector training for trauma-informed or restorative practices.
- ▶ Have a system for communicating with partner organizations or community members. This might be through hosting formal organization meetings, sending periodic emails or newsletters, or inviting people who support your participants to specific events.
- ▶ Seek out an intern in a social work or public health program to do research on local organizations and their approach to working with young people in the neighborhood.
- ▶ Use asset-mapping tools to find out what resources are already available in a community to support the work and participants of the organization.

Incorporating restorative practices into the day-to-day programs of an organization is a specific way of improving the relationship-building skills of participants and creating an environment of shared decision-making.

Conclusion

Public policy solutions—such as those to create more affordable housing, affordable, high-quality childcare and early childhood education, universal healthcare, and environmental regulations that protect the most vulnerable, among others—are critical to restoring the vitality of marginalized communities and the individuals living in them. And while community leaders, advocacy groups and politicians are working on advancing those policies, there is an important role for small community organizations to play that will make immediate impacts in the lives of the people who participate in their programs, and incremental impacts across the communities in which they work.

Adverse childhood experiences and trauma can have long-lasting impacts on the health and well-being of individuals and communities unless there is a counterweight to their destructive power. Many people living in brown-

field-affected communities have experienced individual and community trauma, which can make it more difficult for long-time residents to reap the benefits of revitalization efforts. Taking best practices from the fields of social work, public health, ecology, community development, psychology, sociology, racial equity and restorative justice, a restorative trauma-informed approach to community building can be the counterweight that leads to more equitable community development outcomes. By understanding and recognizing trauma and its potential effects, and by using restorative practices in the design and delivery of our community development work, we can foster personal and community-wide resilience, and thereby make equitable community development a reality.

While the ultimate goal of this white paper is to support practitioners seeking to embed restorative trauma-informed approach-

es in their organizations' practices and policies, it is profoundly important to simply begin by implementing small, deliberate steps that build toward lasting change within an organization, and thereby its surrounding community of people, over time. The principles of the approach (Safety, Voice & Choice, Collaboration, Trustworthiness & Accountability, Skill Building, and Cultural, Historic & Gender Issues) can be a guide for leaders and staff as they facilitate the paradigm shift necessary to integrating the approach into their organization. With strong organizational roots and internal champions dedicated to the restorative trauma-informed approach, individuals living in communities that are touched by the organization and face revitalization will not have to fear displacement. They will be more likely to have the skills and the resilience to overcome challenges and find ways to thrive in a newly revitalized community.

Appendix A: Common Language Guide

Equity: Just and fair inclusion into a society in which all can participate, prosper and reach their full potential. Unlocking the promise of the nation by unleashing the promise in us all.

—*PolicyLink's Equity Manifesto*

Trauma: Individual trauma results from an event, a series of events or a set of circumstances that is experienced by an individual as physically or emotionally harmful or life-threatening and that has lasting adverse effects on the individual's functioning and mental, physical, social, emotional or spiritual well-being.

—*SAMHSA's definition*^{xx}

Toxic Stress: Toxic stress response can occur when a person experiences strong, frequent or prolonged hardship—such as physical or emotional abuse, chronic neglect, caregiver substance abuse or mental illness, exposure to violence, or the accumulated burdens of family economic hardship—without adequate support.

—*Center on the Developing Child at Harvard University*

Trauma Informed: A paradigm to working with individuals, families and communities that recognizes the impact of trauma and integrates that knowledge into an organization's programming, practices, protocols and policies.

Resilience: The ability to overcome serious hardship.

—*Center on the Developing Child at Harvard University*

Restorative Practices: A set of practices that proactively build healthy relationships and a sense of community to prevent and address conflict and wrongdoing.

—*International Institute of Restorative Practices*

Strengths-Based Approach: Emphasizes people's self-determination and strengths. It is a philosophy and a way of viewing people as resourceful and resilient in the face of adversity.

Appendix B: Implementation Domains of a Restorative Trauma-Informed Organization

In SAMSHA's guidance for a trauma-informed approach, ten implementation domains are outlined. Here, SAMSHA's domains have been adapted and summaries are intended to meet the needs of organizations seeking equitable community development.

FOUNDATIONAL:

Training and Workforce Development: Having staff trained in restorative practices and trauma-informed approaches is of critical importance for implementing a restorative trauma-informed approach. Providing training on the approach not only helps with the current work of an organization, it offers specific skill development to the staff, helping them on their career path. Identifying the local resources and developing a training plan for all staff ensures that they are able to implement the approach.

Engagement and Involvement: The way in which participants are involved in the day to day and the extent to which their feedback is encouraged and incorporated into the programs distinguishes a restorative trauma-informed approach from a regular approach. Having an intentional plan for engagement and involvement is advised. Here are some areas to consider:

- ▶ Recruitment
- ▶ Activities and schedules
- ▶ Skill-building and restorative practices
- ▶ Rules and procedures

Governance and Leadership: The leadership and boards of an organization support and invest in implementing a restorative trauma-informed approach. There is an identified point person within the organization to lead the implementation of the approach. The organization considers ways to engage participants or community members in the process of implementation.

Culture of Self-Care: Working with individuals who have experienced trauma can produce emotional stress for staff. As the number of staff grows, developing a self-care model will be an important tool for creating a sustainable culture of self-care within an organization. This could include staff wellness activities, encouraging the use of PTO when feeling overwhelmed or in need of a break from emotional stress, or partnering with a mental health agency to provide free or reduced "clinical supervision" of staff.

Cross-Sector Collaboration: Creating partnerships with other community members, institutions and organizations can be essential to meeting the needs of people who have experienced a lot of trauma. How to ensure that partner organizations are using a trauma-informed approach is of critical importance.

REFINEMENT

Policy: The vision statement of an organization includes a restorative trauma-informed approach. Policies are reviewed and revised to ensure that they are in line with the approach. If there is not currently the capacity to change the policies, or if staff need to be trained first in order to implement new policies, a plan is made for reviewing and revising the policies in the near future. A clear policy for dealing with disciplinary action is strongly advised for consistent use of a restorative trauma-informed approach by all staff and future staff.

Physical Environment: An organization works to create an environment that promotes safety and collaboration by having a setting that feels safe and inviting while also encouraging transparency and openness with participants and staff.

Financing: Soliciting funding outside of program dollars can be difficult. Using the above information on the importance of a restorative trauma-informed approach to get better program outcomes could help funders understand the need for ongoing staff training, improvements of the physical environment of the program and resources devoted to cross-sector collaboration.

Seeking out interns is another way of building the skills of the people living and studying in the local community while also receiving assistance with work that is oftentimes outside of the usual funding mechanisms. People working on a macro social work degree or a public health degree are often looking for experience in assessments, program development, as well as survey and evaluation design. Interns could assist with vetting possible partnerships with wraparound service providers, writing draft policies, creating and collecting evaluation surveys from participants and staff, as well as seeking out funding or opportunities for evaluation of the programs.

FORMALIZATION:

Evaluation: Using this paper as an outline, organizations could identify what activities they currently do and what activities they plan to implement in an effort to become a more restorative trauma-informed organization. This type of evaluation is called a “process evaluation.” At a regular interval (quarterly, biannually, annually), an organization’s leadership and staff can evaluate their efforts against the plan and make a revised plan for the next time period. Using feedback from staff and participants, the organization can slowly move to implement a restorative trauma-informed approach in all aspects of the organization.

In time, evaluating the effects of the new approach on the outcomes of the young people involved in programming and the community as a whole, or an outcome evaluation, will provide Groundwork USA with important information on this endeavor. Once a few organizations like Groundwork Trusts begin to implement the approach, evaluators would be able to track the outcomes of those youth and communities and compare them with Trusts or organizations not implementing the approach, as well as with comparable youth and communities without the support of an organization doing this work. Having a standard of practice for the restorative trauma-informed approach will make this type of evaluation easier to complete.

Screening, Assessment and Treatment Services: If an organization has a trusted relationship with an agency providing trauma-informed treatment, the organization can consider using a screening tool to assess trauma, behavioral health issues or other needs early on in relationships with new participants. This will help the organization see the full spectrum of participants’ needs and connect them with additional support as they complete the program. Screening should occur only if there are known, accessible and sustainable treatment options that use a trauma-informed approach.

Progress Monitoring and Quality Assurance: Having some way to collect feedback from participants and staff on how the restorative trauma-informed approach is working, even if an organization has limited capacity, will be important for maintaining the vision. Creating a simple evaluation for participants to fill out from time to time, asking questions about their feelings of safety, inclusivity, consistency of procedures and policies, the use of restorative practices and other indirect questions related to their emotional well-being within the program can provide an organization’s leadership with meaningful information to inform future staff training or organizational reforms. Receiving anonymous feedback from staff may be more difficult for small organizations. If anonymous surveys are not possible, having a staff meeting on occasion with the expressed goal of evaluating the restorative trauma-informed approach and facilitated by an outside person could help guide future training and reforms as well.

Appendix C: National Resources

Below is a list of organizations that offer resources online and/or to a national audience. This is not an exhaustive list and will be updated on the Groundwork USA website regularly. <http://www.groundworkusa.org>

Trauma

- ▶ ACEs Connection: <https://www.acesconnection.com>
An online community dedicated to research on ACEs and the practice of building resilience in people and communities.
- ▶ Risking Connection: <http://www.riskingconnection.com/>
Offers custom trainings on trauma and trauma-informed practices.
- ▶ Institute on Trauma and Trauma-Informed Care: <https://socialwork.buffalo.edu/social-research/institutes-centers/institute-on-trauma-and-trauma-informed-care.html>
Offers online trauma-informed organization coursework at a low cost.
- ▶ Paul Abernathy's TEDtalk on Trauma-Informed Community Development <https://youtu.be/kcbu58p0fbA>
- ▶ The Kirwan Institute for the Study of Race and Ethnicity document titled, "From Punitive to Restorative: Advantages of using trauma-informed practices in schools" <http://kirwaninstitute.osu.edu/wp-content/uploads/2015/10/ki-punative-to-restorative.pdf>

Restorative Practices

- ▶ International Institute of Restorative Practices: <https://www.iirp.edu/>
An educational institute offering restorative practices training and graduate level coursework.
- ▶ National Association of Community and Restorative Justice: <https://www.nacrj.org/>

Resilience

- ▶ Fostering Resilience (Ken Ginsburg): <http://www.fosteringresilience.com>
- ▶ Center on the Developing Child at Harvard University: <https://developingchild.harvard.edu/science/key-concepts/resilience/>

Equity

- ▶ PolicyLink: <https://www.policylink.org>
A national research and action institute dedicated to advancing economic and social equity. It focuses on policies affecting low-income communities and communities of color.

Mental Health

- ▶ Substance Abuse and Mental Health Service Administration: <https://www.samhsa.gov/nctic/trauma-interventions>
Offers data and resources on how to be a trauma-informed organization, mostly for behavioral health practitioners.
- ▶ Mental Health First Aid: <https://www.mentalhealthfirstaid.org/cs/>
This course teaches how to identify, understand and respond to signs of mental health and substance-use disorders in the community.

Social and Emotional Learning

- ▶ Collaborative for Academic, Social and Emotional Learning: <http://www.casel.org>

Asset-Based Community Development

- ▶ ABCD Institute: <https://resources.depaul.edu/abcd-institute/about/Pages/default.aspx>

Appendix D: Matrix of Activities

Domains	Suggested Activities to Implement a Restorative Trauma-Informed Approach
FOUNDATIONAL	
Training and Workforce Development	<ul style="list-style-type: none"> <input type="checkbox"/> Staff have training in trauma and trauma-informed approaches to working with youth. <input type="checkbox"/> Staff have training in restorative practices. <input type="checkbox"/> Staff have opportunities for internal practice improvements on the restorative trauma-informed approach, such as specific discussion time during staff meetings or support from an outside agency. <input type="checkbox"/> Staff have resources and support for self-care.
Engagement and Involvement	<ul style="list-style-type: none"> <input type="checkbox"/> Young people who are most impacted by environmental degradation are recruited for the youth development programs. <input type="checkbox"/> Activities and schedules are consistent and communicated in ways that do not overwhelm participants. <input type="checkbox"/> Skill-building opportunities are inserted into the work as much as possible. <input type="checkbox"/> Restorative practices, like affective statements and circles, are used in daily practice by staff and participants. <input type="checkbox"/> Participants lead circles as their skills develop. <input type="checkbox"/> Rules and procedures are clearly communicated and consistently enforced.
Governance and Leadership	<ul style="list-style-type: none"> <input type="checkbox"/> A point person is identified to guide implementation of a restorative trauma-informed approach. <input type="checkbox"/> An organization's board is educated; it supports and wants to invest in the approach. <input type="checkbox"/> Leadership considers ways to engage participants or the community in the implementation of the approach. <input type="checkbox"/> The executive director and key staff are trained.
Culture of Self-Care	<ul style="list-style-type: none"> <input type="checkbox"/> Staff are encouraged to take care of themselves in light of the work they are doing with people who have experienced a lot of trauma <input type="checkbox"/> Staff have designated time for reflection as a group on the work and the approach <input type="checkbox"/> A self-care model is created and used by the organization
Cross-Sector Collaboration	<ul style="list-style-type: none"> <input type="checkbox"/> Possible partners are vetted for their trauma-informed approach. <input type="checkbox"/> Staff attend cross-sector training to improve or develop relationships with other organizations while increasing knowledge and skills to implement a restorative trauma-informed approach. <input type="checkbox"/> The organization has a system for communicating with organizations or individuals supporting participants. <input type="checkbox"/> Asset-mapping tools are employed.

Domains	Suggested Activities to Implement a Restorative Trauma-Informed Approach
<p>REFINEMENT</p> <p>Policy</p> <p>Physical Environment</p> <p>Financing</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Mission or vision includes a restorative trauma-informed approach. <input type="checkbox"/> A plan exists for reviewing and revising policies to align them with a restorative trauma-informed approach. <input type="checkbox"/> Policies are enacted that are restorative and trauma informed. <input type="checkbox"/> Policies are regularly communicated to participants in accessible ways. <input type="checkbox"/> The physical space that participants are in is safe and inviting. <input type="checkbox"/> The organization and staff are transparent and open about organizational systems and decision-making. <input type="checkbox"/> Research on a restorative trauma-informed approach is included in funding requests. <input type="checkbox"/> Interns are considered to assist with policy and evaluation development and cross-sector collaboration.
<p>FORMALIZATION</p> <p>Evaluation</p> <p>Screening, Assessment and Treatment</p>	<ul style="list-style-type: none"> <input type="checkbox"/> The organization has a plan for implementing a restorative trauma-informed approach and regularly assesses its efforts to date. <input type="checkbox"/> The organization considers working with the whole network to evaluate the youth development and job training programs. <input type="checkbox"/> If a community organization has a trusted relationship with wraparound services or another agency providing trauma-informed care, the organization can implement a trauma-screening tool.
<p>SERVICES</p> <p>Progress Monitoring and Quality Assurance</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Participants are regularly surveyed on their feelings of safety, inclusivity, restorative practices, etc. <input type="checkbox"/> Staff are regularly surveyed or given opportunities to provide feedback on the organization's implementation of a restorative trauma-informed approach.

Endnotes

- ⁱ <https://www.cdc.gov/socialdeterminants/>
- ⁱⁱ <https://resources.depaul.edu/abcd-institute/about/Pages/default.aspx>
- ⁱⁱⁱ "SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach," prepared by SAMHSA's Trauma and Justice Strategic Initiative, July 2014, <https://store.samhsa.gov/shin/content/SMA14-4884/SMA14-4884.pdf>.
- ^{iv} "Adverse Childhood Experiences," Centers for Disease Control and Prevention, <https://www.cdc.gov/violenceprevention/acestudy/>.
- ^v Felitti, Vincent J., et al. "Relationship of Childhood Abuse and Household Dysfunction to Many of the Leading Causes of Death in Adults." *American Journal of Preventive Medicine* 14, no. 4: 245–258, [http://www.ajpmonline.org/article/S0749-3797\(98\)00017-8/pdf](http://www.ajpmonline.org/article/S0749-3797(98)00017-8/pdf).
- ^{vi} Wolff, Nancy, and Jing Shi. "Childhood and Adult Trauma Experiences of Incarcerated Persons and Their Relationship to Adult Behavioral Health Problems and Treatment." *International Journal of Environmental Research and Public Health* 9, no. 5 (May 18, 2012): 1,908–1,926.
- ^{vii} Philadelphia Urban ACE Study, <http://www.instituteforsafefamilies.org/philadelphia-urban-ace-study>.
- ^{viii} Center on the Developing Child Harvard University, <http://developingchild.harvard.edu/>.
- ^{ix} "Trauma-Informed Community Building," Bridge Housing Corporation and Health Equity Institute at SFSU, <http://bridgehousing.com/PDFs/TICB.Paper5.14.pdf>.
- ^x Center on the Developing Child Harvard University, <http://developingchild.harvard.edu/>.
- ^{xi} International Institute of Restorative Practices, <http://www.iirp.edu/what-we-do/what-is-restorative-practices>.
- ^{xii} American Psychological Association Zero Tolerance Task Force. "Are Zero Tolerance Policies Effective in the Schools? An Evidentiary Review and Recommendations." *American Psychologist* (December 2008).
- ^{xiii} "School Climate and Discipline," Department of Education, <https://www2.ed.gov/policy/gen/guid/school-discipline/index.html>.
- ^{xiv} "SAMHSA's Concept of Trauma and Guidance for a Trauma-informed Approach," prepared by SAMHSA's Trauma and Justice Strategic Initiative, July 2014, <https://store.samhsa.gov/shin/content/SMA14-4884/SMA14-4884.pdf>.
- ^{xv} Mental Health First Aid: <https://www.mentalhealthfirstaid.org/cs/>
- ^{xvi} Merriam Webster Dictionary definition
- ^{xvii} Collaborative for Academic, Social and Emotional Learning: <http://www.casel.org>
- ^{xviii} The Institute on Trauma and Trauma-Informed Care at the Buffalo Center for Social Research, State University of New York, Buffalo, <https://socialwork.buffalo.edu/social-research/institutes-centers/institute-on-trauma-and-trauma-informed-care.html>.
- ^{xix} "Trauma-Informed Community Building," Bridge Housing Corporation and Health Equity Institute at SFSU, <http://bridgehousing.com/PDFs/TICB.Paper5.14.pdf>.
- ^{xx} "SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach," prepared by SAMHSA's Trauma and Justice Strategic Initiative, July 2014, <https://store.samhsa.gov/shin/content/SMA14-4884/SMA14-4884.pdf>.

