STATE NEWS

System of Care Conference
Family-Centered to Family-Driven: Realizing the DREAM

The Indiana System of Care Conference is an annual event where hundreds of professionals and advocates involved in mental health, child welfare, juvenile justice and education gather from all over the state to learn new and innovative ways to serve youth and to collaborate with families and child serving systems. The event includes exhibitors, speakers, sessions and networking opportunities to connect professionals, youth and families with the resources and information to enhance their success.

Registration:
Registration for the 2018 Indiana System of Care Conference is now live! Please click the link below to purchase tickets and register. The registration page includes several options, including single ticket sales and sponsorship opportunities. Family and youth scholarships are also available now!


We look forward to seeing you there!
If you have any questions regarding registration, please contact Communications@ChoicesCCS.org. If you have any questions regarding Youth/Family Scholarships, please contact Kathy Riley at OCOF@OneCommunityOneFamily.org. Any other questions, contact: bkonradi@onecommunityonefamily.org.

For more details about this event, please go to page two.
Keynote Speaker: Dixie Jordan

*Family-Centered to Family-Driven: Realizing the DREAM*

“Dreams begin with an idea that something can be better. Indiana has a dream of a unified system of supports and services for children and their families called a System of Care. Fundamental to this dream is creating or strengthening relationships between providers and with families, across cultures, socioeconomic status and diverse belief systems. A System of Care for children and families will move us from family-centered care to family-driven care. This is not an easy transition because it challenges us to think differently and to examine deeply held personal beliefs about families, professional training, life experiences and about ourselves. It is challenging and exhilarating, and no one who fully embraces this process will leave the experience unchanged.”

Location:
Marriott East Hotel, Indianapolis

Agenda:

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<th>Time</th>
<th>Session</th>
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<tr>
<td>9-10:15 a.m.</td>
<td>Opening and Keynote</td>
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<td>10:15-10:30 a.m.</td>
<td>Break</td>
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<td>10:45 a.m.-12 p.m.</td>
<td>Morning Session</td>
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<td>12 p.m.-1 p.m.</td>
<td>Lunch and Awards</td>
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<td>1:15-2:30 p.m.</td>
<td>Afternoon Session</td>
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<td>2:30-2:45 p.m.</td>
<td>Break</td>
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<td>2:45-4 p.m.</td>
<td>Afternoon Session</td>
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Breakout Sessions:

- The Brain Behavior & Learning
- Burnout and Vicarious Trauma Before the Changing of the Tassel
- Children’s Public Policy
- Indiana’s Substance Abuse Crisis: How We Got Here and How We Get Out
- Helping Families to Overcome Trauma: Bringing the Protective Factors to Life in Your Everyday Work
- Using the LifeCourse and Framework to Increase Parent Participation
- Updating the “Your Brain on Drugs,” Campaign for Parents: The New Conversation
- Self-Advocacy: Raising Your Voice
- Runaway, Fight or Freeze: A Wraparound Approach
- Plugged In: The Relationship Between Cyber-bullying and Trauma
- Beyond the School Bell: Post-Secondary Education Options
- Youth Dream to Succeed
- Make and Take
- Unique EQ: You Might Love Me But Do You Get Me
- Unique EQ: Empower Your Child’s or Client’s Unique Self-Esteem
- Dixie Jordan: Special Education Basics
- Dixie Jordan: Misbehaviors and Special Education
- Dixie Jordan: Leading the Way: Youth as Leaders in Systems of Care
Dana Gault, the SOC Coordinator for Grant County’s System of Care, Community Connection, shares how their community is addressing trauma. Their SOC is hosting two free community trainings in April that will end with a big conference that addresses how trauma untreated can lead into mental health and additional challenges for adults, youth and families. To spotlight this exciting series of events, the Chronicle-Tribune published the following article:

By Spencer Durham, www.tribune.com

The families and friends of the 17 students killed Feb. 14 at a Parkland, Fla. high school, as well as those who survived the shooting, have an understanding of trauma most people will never know—if they are lucky.

Dana Gault, System of Care coordinator for Family Services, hopes to educate residents on trauma in order to serve those with mental health problems, which are often caused by trauma.

Gault said she initially attempted to pull together a number of community members from various organizations into a Crisis Intervention Team last November with a goal of better addressing the ongoing mental health crisis.

“Getting the county to buy in is a challenge, honestly,” said Gault, the System of Care Coordinator for Family Services.

But, after a well-attended first meeting, attendance dwindled. Since then, she said, she’s reworked her focus to educating the community on trauma, its causes and its treatment.

“I don’t think we understand trauma,” she said.

Trauma is caused from severely distressing events and can manifest itself in a variety of ways. If not addressed early on, trauma can compound and cause mental health problems later on in life, Gault said.

Debbie Stiles, assistant professor of social work and director of field experiences at Taylor University, takes a special interest in traumatic experiences in children. Traumatic experiences can include witnessing domestic violence and growing up in a household where mental, emotional and physical abuse take place. Other environmental factors, such as poverty, adversely impact children, as well as adults, who have experienced trauma as well, Stiles said.

Understanding what trauma looks like can help better identify someone who may need help. However, trauma does not always take on an apparent form, Stiles said. The Taylor professor said if a child is standing in line and is bumped or pushed and then lashes out, it may be a sign of a traumatic experience in the child’s past.

“A lot of trauma displays itself, especially with children, in ways we don’t expect,” Stiles said.

Children who experience a lot of trauma have a higher “fight-or-flight” response. They are always ready to run or fight, Stiles said. She added some children who display signs of Attention Deficit Hyperactive Disorder or ADHD may be more on edge due to past experiences.

“The more fear we have in life, the more we will use the primitive parts of our brain,” she said. “When we understand childhood experiences, we get a better understanding of what might have shaped a child’s brain when they were younger.”

Kelvin Twigg, licensed mental health counselor and supervisor of outpatient services and crisis services at Cornerstone Behavioral Health, said trauma negatively impacts the brain. This includes shrinking the amygdala, the part of the brain associated with the flight-or-fight response.

According to data provided by Twigg, 80 percent of people in psychiatric hospitals have experienced some sort of abuse. Sixty-six percent of people in substance abuse treatment report childhood abuse or neglect.

Two-thirds of all suicide attempts can be attributed to childhood adverse experiences.

Stiles said building resilience in people who have had traumatic experiences is key to overcoming it. This includes being able to handle strong emotions more effectively, such as being able to work through an argument, instead just walking away.

“The more resilient we are, the better we handle it,” Twigg said.

Consistency is another key. Stiles said one caring adult in the life of a child can have a tremendous impact.

“Studies have shown that makes all the difference in building resiliency in kids,” she said.

“The more we can create a safe environment ... is one of the first things we have to do,” Twigg added.

A simple 10-question test, the Adverse Childhood Experience (ACE) Questionnaire, can indicate whether someone has experienced trauma. The questionnaire asks various questions including if one has experienced physical abuse from a parent, experienced a parent divorce or had a family member battle addiction. For every question one can answer “yes,” one point is added. If the score falls between one and 10, this can indicate trauma.

Trauma can be generational, especially if not addressed, Stiles said. Parents can repeat the same mistakes they experienced as children if they are not made aware of their traumatic experiences.

Gault said people who see youth regularly are already identifying trauma. Schools are already taking necessary steps, such as Allen Elementary’s “New Beginnings” program, which helps students work through problems, instead of just suspending them.

In addition to growing the number of people who can identify potential signs, is providing people with services they can be directed to, Gault said. Community members don’t have to have all the solutions, she said. Being able to just identify trauma and know who to reach out to is more than half the battle.

Gault and System of Care are sponsoring two upcoming trauma-informed trainings. The first is today from 2–3 p.m. at City Hall. Stiles and Twigg will lead the training session. The next meeting will be March 14 from 1:30-3:30 p.m. at Grant-Blackford Milestone.

Both are free and open to the public.

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For additional information about how Grant County is addressing trauma, contact Dana Gault at dgault@famservices.com.
When you live it, you have a different understanding...
When you live it, you know how things work in-practice, not just how they are “supposed to work” in theory...
When you live it, you understand the importance, the ripple effects, and the life-changing impact of mental illness, trauma and more.

The Indiana System of Care (INSOC) Youth and Family Subcommittee lives it. The Youth and Family Subcommittee (YFSC) is made up of teens, young adults and family members who are impacted by mental illness and who live it on a daily basis. We have foster and adoptive parents and those who grew up in the foster system. We have people who deal with substance use and recovery on a daily basis, and we have people who grew up in homes impacted by addiction. We have people who have directly experienced trauma and those impacted by secondary trauma. We have people with mental illness and those who live with, love, and support those with mental illness. Some members have lived with violence and others have lived with isolation. Each individual on the YFSC brings a wealth of unique lived experience to the committee, and that lived experience helps shape our perceptions, opinions and desire to improve our state and community, so that all individuals in Indiana, starting in youth and continuing into adulthood, achieve wellness, engage in their community and, together, promote wellness for generations to come.

The lived experience YFSC members have influences our views and the needs we see in the State and in our communities. YFSC can serve as a real-time focus group to give feedback on services and community resources. We can tell providers and the State what is effective, what isn’t and what needs people still have. We can talk about what adjustments can make services and supports more effective to benefit youth in need and to assist providers in their business model of providing effective intervention and, as a result, improving the quality and quantity of their business.

Most importantly, as the clients of these services, YFSC can explain what we experience in-practice, not just what is intended on paper. We can identify gaps. We can identify implementation difficulties. Because we are the people involved, we see things holistically. We aren’t focused exclusively on mental illness because that is simply one facet of life we deal with. We must integrate all the different systems our loved ones deal with—mental health, physical health, insurance, Medicaid, education, work, criminal justice, etc. and it is the YFSC and its members who must synthesize this information for ourselves and our loved ones. We are a sounding board for new ideas and potential changes and we will propose new ideas and potential changes to make things better for youth and families. We will help troubleshoot problems as they arise and help develop solutions. As one agency makes changes, it is the youth and family who will feel the effects of those changes and how it may impact other agencies and programs. We are partners. We are here because we want to make things better for our loved ones and ourselves. We want to make things better for our communities. We want to make things better for those who provide services and supports to our families because we recognize that they care about us, too. We want to make things better so no other youth or family faces the difficulties we have experienced, and we want to make sure individuals and families get the supports they need to succeed.

To learn more about the Youth and Family Subcommittee, contact Erin Tock at etock@namiindiana.org.
Growing Demographic Diversity: Adaptive Capacity Challenges

Brenda Graves-Croom, Cultural & Linguistic Competency Coordinator

Connolly describes the lifecycle model of a non-profit organization or agency as having an organic, nonlinear flow of five stages: start-up, adolescent, mature, stagnant and defunct (2006). At each stage there is the possibility to stagnate and dissolve, or renew and revert to an earlier stage. Mature agencies are established, well-regarded, with formalized operations and systems, and with capable executive and board leadership. The core components of the lifecycle model consist of four capacities: adaptive, management, leadership and technical. The capacities require transformation during the life-cycle phases to be successful and are influenced by an organization’s culture, resources, and external environment.

Using the lifecycle model to assess the stage of your own organization, in what stage do you think it is? Is your organization mature and possibly going stagnant? Signs of stagnation may include diminished funding support, lessened demand for services, declining volunteers, low staff morale and key people leaving. I have observed mature agencies experiencing stagnation and attempting to renew. These agencies are mature in many ways such as having personnel policies and a hierarchy of positions that include specialized program staff who report to professional managers. Core capacities are relatively aligned and functioning more or less effectively to advance the mission, yet there is a struggle with not being able to adapt well to changes in the external environment. This is the case with organizations that have not kept up with changes to policies, practices and procedures so that they are responsive to the growing demographic diversity of Indiana.

One adaptive capacity strategy is increasing the cultural and linguistic competency (CLC) of agencies and staff. CLC is the ability to interact effectively with people of different cultures and to convey communication effectively so that clients or patients can make informed health care decisions (National Center for Cultural Competence). CLC is founded on being responsive to demographic diversity, being inclusive of all cultures and promoting equity in access to services. CLC of agencies and staff is very important for groups that are potentially marginalized in the community, because these groups often encounter barriers accessing services or experience increased stigma and discrimination that prevent them from accessing services. Unfortunately, marginalized groups are often not represented in key roles and able to influence decision-making of management or those on volunteer boards and councils. Yet, in order to keep up with Indiana’s growing diversity, it is necessary to advocate for the representation of marginalized groups within agencies and organizations.


RESOURCES

This section of the newsletter has been added in an effort to share with you resources to build you up… ones that are meant to strengthen our mind, soul and skill sets… and encourage us to continually develop new insights and brighter visions for improving the lives of youth and families.

The first resource highlighted was shared by Lisa Felsman, supporting local SOC development in Wayne, Union and Rush Counties. She has this to say about the book and the journey:

In my role as mentor for the Centerstone SOC coordinators, I have been working with them on having a growth mindset. We have listened to teaching from Carol Dweck on growth mindset, and we have taken the grit scale from Angela Duckworth and talked about how we can become “more gritty” and move forward.

Angela Duckworth says, “My research focuses on two traits that predict achievement: grit and self-control. Grit is the tendency to sustain interest in and effort toward very long-term goals (Duckworth et al., 2007). Self-control is the voluntary regulation of impulses in the presence of momentarily gratifying temptations (Duckworth & Seligman, 2005; Duckworth & Steinberg, 2015). On average, individuals who are gritty are more self-controlled, but the correlation between these two traits is not perfect: Some individuals are paragons of grit but not self-control, and some exceptionally well-regulated individuals are not especially gritty (Duckworth & Gross, 2014).”

If SOC development isn’t a long-term goal, I don’t know what would be! Make those phone calls, write those warm and engaging emails, go and meet people, welcome them, include them, ask them how we can help, connect them with other partners, follow up when you say that you are going to do something. Be a “noticer” and “caller-outer” of strengths. All of those things take soft skills—the ability to put yourself out there.

If you would like to check out this resource, visit one of the following links:

https://angeladuckworth.com/grit-scale
SAVE THE DATE

Upcoming System of Care Meetings

Local SOC Subcommittee Meetings

Friday, May 11 (10 a.m.–3 p.m.)
Quarterly Training
Noblesville Schools Education Services Center
18025 River Road, Noblesville, IN 46060

Friday, June 8 (9–11 a.m.)
Webcast/Teleconference Call
Contact: Lisa.Stewart@fssa.in.gov

Local System Grantee (Contractor) Calls

Friday, May 11: No grantee call due to quarterly training
Friday, June 8 (11:15 a.m.–12 p.m.)
Call follows the Local SOC Subcommittee meeting
Contact: Lisa.Stewart@fssa.in.gov

IN-SOC Governance Board Meeting

Information to come
Contact: ETock@namiindiana.org

Youth & Family Subcommittee Meeting

Saturday, May 12 (11 a.m.–2 p.m.)
Location: TBD
Contact: ETock@namiindiana.org

17th Annual Indiana System of Care Conference

Thursday, June 14, 2018 (8 a.m.–4 p.m.)
Marriott East in Indianapolis.
Contact: bkonradi@onecommunityonefamily.org