Developing Trauma Resilient Communities through Community Capacity Building

Funded through the MHSA component of Innovation, this project centers on building the capacity of the community to identify and support community members at risk of trauma or experiencing trauma utilizing the assets of the community by testing out strategies that allow local communities to work together in ways that will ultimately lead to better mental health and reductions in trauma, through the building of shared community values, leadership development and community member empowerment.

Community Selection
Each of the five (5) Supervisorial Districts will have two community partnerships located in geographically-defined communities. Communities of interest are those with a concentration of inequalities, including disproportionate levels of poverty, high concentrations of unserved and underserved individuals and poor health and well-being outcomes, including educational and unemployment inequities. Lead agencies will be selected through a solicitation process and will be expected to identify robust community partnerships as part of the solicitation. Each proposing organization and their community partners will select specific strategies from the menu below, based on their community’s interests. Beyond the implementation of selected strategies, each community partnership will be responsible for building the capacity of the specific communities to work collectively toward supporting community identification and reduction of trauma, as outlined in the solicitation.

Budget
Each of 10 selected community partnerships will have a budget of $2 million per year for 4 years, not matchable to Medi-Cal.

Strategies
- **Building Trauma Resilient Families** targeting children ages birth to five and their caregivers who have experienced trauma and/or are at risk for trauma. Activities include assessing and educating families and young children for exposure to Adverse Childhood Experiences (ACES).

- **Trauma-Informed Psycho-education and Support for School Communities** Training/workshops on recognizing behaviors and symptoms of stress and trauma in children provided to early care/education (EC/E) and school personnel and community mentors who work with children ages 0-15. The workshops would teach simple trauma-informed coping techniques that can be implemented within EC/E and school settings to reduce stress experienced by children.

- **Outreach and engagement to Transition Age Youth (TAY ages16-25) and TAY peer support groups** to outreach and engage TAY who are at risk of or experiencing trauma as a result of homelessness.

- **Coordinated Employment within a community**. Through a standardized employment assessment tool, a network of businesses within a specific community will be created that will provide coordinated job opportunities to individuals who are mentally ill and homeless/formally homeless. Job opportunities will be sought out in the competitive employment market and through the development of social enterprises within the neighborhood.
- Community Integration for individuals with a mental illness with recent incarcerations or who were diverted from the criminal justice system. A community response involving the creation of a consortium of law enforcement, the courts and community agencies designed to reduce re-incarcerations.

- Geriatric Empowerment Model designed to outreach, engage and house homeless older adults.

- Culturally competent non-traditional self-help activities for families with multiple generations experiencing trauma, including engagement, intergenerational story-telling and intergenerational mentorship programs.

**Estimated Implementation Timeline**

Solicitation issue date targeted for early 2017 with services targeted to start in the Spring, 2017 for 4 years.

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