



Talking Points: Handle With Care

We must focus on childhood trauma.

All schools and cities have children who experience childhood trauma.

Childhood trauma—such as physical, sexual, and emotional abuse, domestic violence, witnessing a crime, food insecurity, racism—and the resulting stress can have negative, lasting effects on a child’s emotional, mental, and physical well-being.

Childhood trauma can:

- Interrupt normal brain/body development
- Interfere with ability to trust, organize, comprehend, remember, and produce work, which are critical in learning to read, write, engage in discussion, and do math problems.
- Increase risk for engagement in risky behavior
- Increase risk for involvement in the criminal justice system
- Increase risk for chronic mental and physical health problems



The first step to being trauma-sensitive is understanding how prevalent trauma is. Childhood trauma is widespread. Among the 17,000 adults surveyed in the 1990 Adverse childhood Experiences (ACEs) study, just over 50% reported having experiences at least one of 10 forms of childhood adversity. If we add those to the numerous other forms of childhood adversity, the number of children affected by adversity grows even larger.

Salud America!

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Childhood trauma has ripple effects on the state's public health, education, law enforcement, family services, and juvenile and criminal justice systems. These issues, such as [child abuse](#), are still issues when school is out for the summer or closed due to a pandemic like [COVID-19](#).

Schools must focus on childhood trauma.

If subjected to prolonged, severe, unpredictable stress, a child in school may experience either hyperarousal or hypoarousal and may be in constant fight, flight, or freeze mode, causing other higher order functions to become secondary in importance, making it difficult to learn.

It is important for teachers and all school staff to understand the short- and long-term impacts of traumatic stress and be able to identify children and utilize trauma-sensitive approaches to help children heal and build resilience.

Every child reacts to trauma differently, thus it is important not to judge the severity of the experience and provide support for all students.

You might think, "It's not my child," but your child is sitting next to a traumatized struggling child and the teacher is spending all their time redirecting the behavior. No one is learning.

Police must focus on childhood trauma.

Law enforcement officials respond to traumatic scenes everyday where children are present.

Trauma in children turns off the learning switch and turns on risky behavior. Kids at risk tend to skip school, use drugs, become violent, commit crimes, and end up meeting law enforcement.

Police are ground zero for childhood trauma related to the opioid crisis, as drug-endangered children are having drug-endangered children. They have no sense of feeling safe in their own skin or environment. They don't know how to have healthy attachments to others. They don't know how to self-regulate, or how to act.

Being a victim of or witnessing violence between one's parents or caretakers increases risk of perpetuating or becoming a victim of violence in the future.

Mental health leaders must focus on childhood trauma.

Prolonged activation of the stress response system can disrupt children's development of brain architecture and other organ systems and increase risk of cognitive impairment and disease.

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It is toxic for children to grow up with trauma, constantly flooded by stress hormones in a state of fight, flight or freeze.

Children with histories of traumatic experiences are more likely to have chronic health conditions as they age, such as anxiety, depression, posttraumatic stress disorder, cardiovascular disease, diabetes, cancer, stroke, asthma, lupus, multiple sclerosis, osteoporosis, viral infections, and autoimmune diseases, which are exacerbated by risky behavior.

Building resilience and teaching healthy coping skills in schools will decrease the need to engage in risky behaviors associated with numerous chronic diseases.

We can do something about childhood trauma.

You have an opportunity to implement a proven, no-cost program to provide support to children who endure extreme trauma in your community.

That program is called “Handle With Care.”

You can start a Handle With Care program even when school is out for the summer or closed due to a pandemic like [COVID-19](#).

The Handle With Care program can support children of trauma in our area.

Handle With Care is a program that enables local police to notify school districts when they encounter a child at a traumatic scene, so the school staff and mental healthcare providers can then provide support right away for the student, even if that support is virtual or online.

The program has three main components:

- When police identify a child at the scene of a traumatic event (domestic violence, meth lab explosion, drug raid, shooting, etc.), they will send a confidential notification (by email, text, or 911 dispatch) to the school district or childcare agency. The confidential notification, which is documented in the police report, contains four pieces of information: the child’s name, age, school name, and a message to “Handle With Care.”
- A school district, school, or childcare agency will create a process to triage “Handle With Care” notifications from police. The process will involve notifying relevant teachers and staff to observe the student’s behavior and academic performance and be prepared to provide trauma-sensitive support as needed, even if closed due to summer, holidays, or pandemics.
- When school trauma-sensitive interventions are not sufficient, mental health professionals, who are trained in Trauma Focused Cognitive Behavior therapy, can

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provide therapy on site at school at a time that is least disruptive to the student's academic schedule (with consent from the parent or guardian).

Starting a Handle With Care program isn't hard.

65 cities currently have a Handle With Care program, and more are on the way.

To start our own, we can use the free "Handle With Care Action Pack" created by Dr. Amelie G. Ramirez, director of the *Salud America!* Latino health equity program at UT Health San Antonio, in collaboration with Andrea Darr, director of West Virginia Center for Children's Justice, which launched Handle With Care in 2013.

The action pack has five basic steps:

1. **Start the Conversation for Handle With Care.** Use our model emails and talking points to engage decision-makers about the need for Handle With Care.
2. **Create a Group and a Vision.** Use our guide, checklist, and materials to host a 90-minute community meeting to build support for and plan your Handle With Care program.
3. **Create Your Notification Flow.** Use the model notification system to create your Handle With Care Notification Flow from police to a school district staffer.
4. **Implement the Program and Train Key Personnel.** Use and customize our materials to train police, school, and mental healthcare personnel to implement Handle With Care.
5. **Promote the Program.** Use our press toolkits and sharable social media messages and graphics to raise awareness of your program in your community.

As part of the *Salud America!* "Handle With Care Action Pack," a person will be available to provide guidance and technical assistance as we create our own Handle With Care program.

We can reflect on how people started a Handle With Care program in San Antonio, Texas.

In Spring 2019, the San Antonio Police Department (SAPD) and three school districts collaborated to pilot the Handle With Care program in one of the six patrol areas that serves 48 schools.

A student support leader in one of the



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school districts learned about Handle With Care at a conference and asked a partner with the police department if they could try it. They reached out to two neighboring school districts to join.

They established an email notification system and trained law enforcement and school personnel. Now, whenever SAPD encounters a child on a traumatic call, such as domestic violence or drugs, or during normal investigation, one patrol officer will ask the child for three pieces of information: name, age, and school and send this information to the distribution email with the subject "Handle With Care."

The police chief said: "Life for that child does not stop once the officer leaves the scene. That child has the challenge of dealing with their current circumstances while trying to learn and thrive in school."

One educator said: "It's not all hands-on deck for every kid. Teachers monitor demeanor behavior in classroom and escalate as needed, maybe referring to the counselor who then determines if or what services are needed."

Over the four-month pilot, law enforcement sent 56 notifications impacting 88 students.

Officials have since announced plans to expand the program citywide.

When the COVID-19 pandemic struck in March 2020, several San Antonio school districts [adapted their Handle With Care program](#) for virtual connections. San Antonio ISD implemented an app to track students. East Central ISD began "delivery teams" to check in on students. Northeast ISD created a digital social-emotional learning environment.

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