



In collaboration with



Fostering Futures Collaborative

*A pilot project in Wisconsin to improve
child and family well-being through
trauma-informed care*

Executive Summary

M A R C H 2 0 1 5

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Executive summary

Description of Fostering Futures

The Fostering Futures Collaborative was implemented in 2013 as a two-year pilot project designed to translate scientific evidence about Adverse Childhood Experiences (ACEs), trauma-informed care (TIC), and resiliency into communities with a focus on systems of care that impact Wisconsin children and families. The project focused on developing non-clinical strategies for effective implementation of TIC practices, identifying and eradicating barriers to this implementation, and stimulating the creation of policies that advance TIC and subsequently improve the health and well-being of Wisconsin children and families.

At the center of the Collaborative were three pilot communities across Wisconsin: Douglas County (rural), Milwaukee's Harambee neighborhood (urban), and the Menominee Nation in Menominee County (tribal). Each community was tasked with developing a Core Team to lead efforts in the local community as well as an Advisory Team to help champion the work. In addition, a Policy Advisory Council (PA Council) comprised of legislators, judicial officials, department leaders, and others was formed to leverage their influence for the promotion of TIC at the policy level and to provide support to Core Teams. A Steering Committee provided oversight and guidance to the Collaborative, while consultants were utilized for technical assistance, facilitation, evaluation, and general guidance.

The Fostering Futures approach sought to employ the following primary strategies:

- **Peer Learning Collaboratives (PLCs)**, which brought together Core Teams, the PA Council, and the Steering Committee to receive peer technical assistance regarding trauma-informed care in four, two-day, shared learning sessions over a twelve-month period;
- **A media/marketing campaign**, to educate members of the pilot communities about ACEs, the effects of toxic stress, trauma-informed care, and building resilient communities to improve healthy growth and development of children; and,
- **A blueprint (website)** that would exist as a community resource for trauma-informed care and could include information on general concepts, evidence-based trauma-informed practices, and sample policies, procedures, and tools.

Overview of the project evaluation

The aim of the Wilder Research evaluation was to document the development and progression of Fostering Futures during the pilot phase, the experiences of the three pilot

communities as participants in this Collaborative, the implementation and integration of trauma-informed care in pilot communities, and the initial impact of this work in each community. This was accomplished using the following methods: a web-based Process Survey administered to Core Team, Advisory Team, and PA Council members when they first joined the Collaborative (baseline) and again at the end of the pilot phase in late 2014 (follow-up); a one-time web-based survey administered to the PA Council; a focus group with representatives from each Core Team; qualitative observations of the PLCs by the evaluation team; and monthly reports submitted by Core Teams about their activities, successes, and challenges.

Implementation of the Fostering Futures Collaborative

In an effort to achieve the overall goals of the Collaborative, participants engaged in a diversity of activities.

Core Teams met monthly to strategize and coordinate their efforts. Early in the process, they participated in several group formation activities to help solidify their thinking and formulate their teams' goals and related strategies. As they began to internalize the concepts of TIC for themselves, members then conducted outreach, such as trainings and presentations in the community, to share information about TIC and ACEs. Core teams adapted materials and approaches to accommodate each community's needs and interests (e.g., some focused on issues of ongoing trauma or historical trauma, and emphasized resiliency and community strengths). Members also utilized newsletters and the media to further share information about TIC/ACEs with their community.

The PA Council was convened to promote TIC in all three branches of government and provide guidance to the Collaborative as a whole. The Council's role evolved over the course of the pilot. Originally conceived of as a fourth Core Team, they eventually adopted a dual role that involved pursuing PA Council-identified initiatives related to the promotion and integration of TIC within state systems, while also providing some degree of support to Core Teams. This support included strategizing with Core Teams on ways to address policy barriers; connecting them with elected officials in their region; participating in the development of a white paper describing the *Connections Count and Safe Baby Court initiatives*, which were the prevention and intervention initiatives supported by the PA Council.

The Steering Committee was the founding body of Fostering Futures and provided general oversight and guidance throughout the pilot. The Committee was comprised of 10 professionals from multiple disciplines including medicine, mental health, child welfare, and human services, with experience in organizational development and systems reform. As a whole, members generally met at least monthly; they also formed smaller workgroups

focused on distinct aspects of the Collaborative, such as the PLCs, the PA Council, the Blueprint, and the evaluation. The Committee obtained and managed funding for the Collaborative, and continues to actively pursue additional support to sustain Fostering Futures going forward.

Outcomes of the Fostering Futures Collaborative

A number of accomplishments were achieved during the two-year pilot including:

- **Increased personal knowledge of TIC and ACEs:** Participants demonstrated growth in self-reported knowledge of the core concepts over the course of their involvement. Significantly more participants reported knowing “a lot” about trauma-informed care and ACEs research at follow-up compared to baseline. Overall, about half of all survey respondents showed increases in self-reported TIC and ACEs knowledge between baseline and follow-up.
- **Increased use of TIC principles in interactions with others:** Participants were also significantly more likely to report using trauma-informed principles and to consider ACEs research in their interactions with others at follow-up compared to baseline. This suggests the ability of participants to apply what they have learned.
- **Enhanced cohesiveness within teams:** Core Teams reported growing closer as a team over the course of the Collaborative. They had established goals, a collective vision, and commitment to trauma-informed care principles.
- **A collaborative, bipartisan approach:** The Policy Advisory Council included policymakers from both major political parties and all three branches of state government, demonstrating widespread commitment to the work. Additionally, as a result of their efforts, connections were made between Fostering Futures participants from different sectors within the Collaborative (e.g., the PA Council and Core Teams), as well as with local agencies.

Less evident at this stage were changes at the systems- or policy-level, although: (1) several participants indicated they were actively working towards such change, which is significant progress in and of itself; and (2), there were the beginnings of change at the organizational level. Some participants noted that by providing training and support to others in their own agency around TIC and ACEs, specific practices at the organization were refined to make them more trauma-informed.

A number of factors contributed to the progress made by the communities and Collaborative as a whole. These include: developing relationships within participant teams and with community agencies; hosting trainings and workshops in the community on TIC/ACEs, as

well as using existing community events/gatherings as opportunities to share this information; having buy-in and support from agency leaders in the community; the ability of teams to work with their community's political landscape; and leveraging existing networks to disseminate TIC/ACEs information.

These accomplishments occurred despite some of the challenges participants encountered, such as the perceived lack of engagement or support from some community members and leaders; limited time and resources; the overall scope and complexity of the work; ambiguity around goals, expectations, and next steps; difficulties recruiting and utilizing the Advisory Teams; and some level of disconnect between the PA Council and Core Teams.

Recommendations for future work

Overall, while participants generally found most of the information shared and the Collaborative activities to be helpful to their work, understanding the lessons learned behind these successes *and* challenges can inform future phases of this work. The following summarizes key recommendations for consideration based upon these findings.

- Provide more clarity about the Collaborative upfront, including information about its goals, the expectations for participation, and content.
- Provide participants with more guidance, direction, and leadership throughout the process.
- Give participants ample time to process the information and implement the approach, as it takes time to fully understand and absorb these concepts.
- Integrate the voices of families and Core Team members into the development and planning of the work.
- Provide more opportunities for interaction between the PA Council and communities.
- Offer Teams more financial resources to carry out the work.
- Keep expectations realistic given the other commitments of the volunteer participants.
- Refine the ACEs Master Trainer series to allow more members to participate and the requirements more feasible to accomplish.
- Bring a spirit of cultural humility and learning such that the unique context and perspective of each community is considered.
- Provide more training and resources on the topic of resiliency.