

## **Moving from Informing to Transforming: Centering Cultural Humility and Equity in HEARTS Trauma-Informed School Implementation**

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### **ABSTRACT**

Healthy-Environments and Response to Trauma in Schools (HEARTS) is a whole-school, prevention and intervention approach that addresses trauma and chronic stress at the student, staff, and school organizational levels.

HEARTS is guided by six core evidence-grounded principles. One feature that distinguishes HEARTS from other school-based trauma-informed approaches is the centrality of cultural humility and equity, emphasizing that if an approach or intervention is not socially and racially just, then it is not trauma-informed.

Since 2008, HEARTS has integrated culturally responsive and anti-oppressive approaches across a variety of implementation models. This paper describes practice-based lessons learned and insights across these various implementation models with respect to moving the needle on anti-racist, socially just, trauma-informed practices. Implications for moving schools beyond information dissemination to sustained changes in policies and practices that promote equity, belonging and school success are discussed.

**Keywords:** Trauma-informed schools, culturally responsive, cultural humility, equity, school to prison pipeline, school-based mental health

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The United States is facing a significant mental health crisis, with educators and students at the forefront. Trauma and chronic stress are common among school-age children and well-established as barriers to social-emotional development and student achievement (Koslouski et al., 2023; Perfect et al., 2016). Youth of color are disproportionately impacted due to sociocultural trauma (the trauma-inducing nature of racism and other forms of oppression), which can increase the likelihood of experiencing other stressors and reduce the availability of buffering supports (Comas-Díaz et al., 2019; Saleem et al., 2022; Trent et al., 2019).

Educators continue to report burnout and symptoms of depression more than any other workers, particularly among young teachers and teachers in low-income schools (Bryant et al., 2023; Division of Adolescent and School Health et al., 2023; Steiner et al., 2022). COVID-19 greatly increased educator burnout resulting in a mass exodus of educators, which further burdened those who remained (Doan et al., 2024). This issue is pronounced in public K–12 schools, where teachers are expected to support the mental health needs of their students while managing their own elevated psychosocial distress. This double burden can create cycles of emotional dysregulation, leading to overstressed teaching and learning environments where teacher and student stress reinforce one another (Wettstein, et al., 2021). COVID-19 also exacerbated the opportunity gap for Black, Indigenous, and People of Color (BIPOC) students. These trends highlight a critical need to support the social and emotional wellness of students and educators to create equitable teaching and learning environments that foster better outcomes for the whole school community.

HEARTS is a whole-school, prevention and intervention approach that utilizes a multi-tiered system of supports (MTSS) framework to address trauma and chronic stress at the student, adult (staff and caregiver), and school organizational levels (Dorado, et al., 2016). HEARTS aims to promote school success by collaborating with school systems to create more trauma-informed, safe, supportive, and equitable school cultures that foster resilience, wellness, and racial justice for everyone in the school community.

HEARTS is guided by the following six core principles (see Figure 1) that are grounded in research on trauma interventions and trauma-informed systems, modified for educational settings: (1) Understanding Trauma and Stress; (2) Cultural Humility and Equity; (3) Safety and Predictability; (4) Compassion and Dependability; (5) Empowerment and Collaboration; and (6) Resilience and Social-Emotional Wellness (Dorado, et al., 2016). These principles are applied across the student, adult and systems levels because we recognize that each level is impacted by trauma. Rather than a set curriculum or program to add onto educators' already busy schedules, these principles provide a flexible lens to examine and strengthen existing school policies, procedures, and practices. One feature that distinguishes HEARTS from other school-based trauma-informed approaches is the centrality of Cultural Humility and Equity as one of our foundational guiding principles. HEARTS asserts that racism, ableism, homophobia, sexism, and other forms of societal oppression can be trauma-inducing (Comas-Díaz et al., 2019) and push communities of people out of schools, systems of care, and other organizations. As our Cultural Humility and Equity principle states, when we are open to reckoning with the trauma and adversity caused by historical and present-day structural oppressions and hold ourselves accountable to



counteracting these forces as individuals and institutions, we can work together to mitigate these harms and to foster equity and belonging for all of us.

**Figure 1: HEARTS Core Principles**

The original “HEARTS Full” model embeds a HEARTS-trained consultant in a school 3–5 days per week, collaborating with leadership and staff across all three MTSS tiers. Tier 1 supports include ongoing professional development (PD) for staff around key concepts and practices related to the guiding principles. Staff also receive one-on-one or group consultation to apply learnings to real-life scenarios. The consultant works with school teams to integrate a trauma-informed lens into school-wide supports and may attend meetings to support this integration. In some cases, the consultant provides education for students and caregivers on stress management and wellness.

School personnel at the four schools included in a program evaluation study on the HEARTS-Full model reported a significant increase in their knowledge and use of trauma-informed practices, as well as increases in their students’ school engagement. Further, student disciplinary incidents significantly declined (Dorado, et al., 2016). Despite these promising outcomes, the cost and resource intensiveness of this model makes it difficult to scale.

Beginning in 2013, HEARTS adapted to focus primarily on Tier 1 and 2 supports depending on a site’s needs and resources (“HEARTS Flex”). PD and consultation are typically delivered in person, supported with school or district funds, and may involve leaders, educators, and specific school teams. Consultants may also support district-wide teams or CBOs providing services in schools, but do not typically provide clinical services directly. In 2020, HEARTS piloted a virtual, two-year Professional Learning Institute (PLI) with three school teams, and a second grant in 2023 funded a new cohort in a hybrid format, including live virtual, asynchronous, and in-person elements. Both cohorts focused on Tier 1 practices. Overall, HEARTS has been implemented in around 50 schools across 13 districts (see Figure 2).

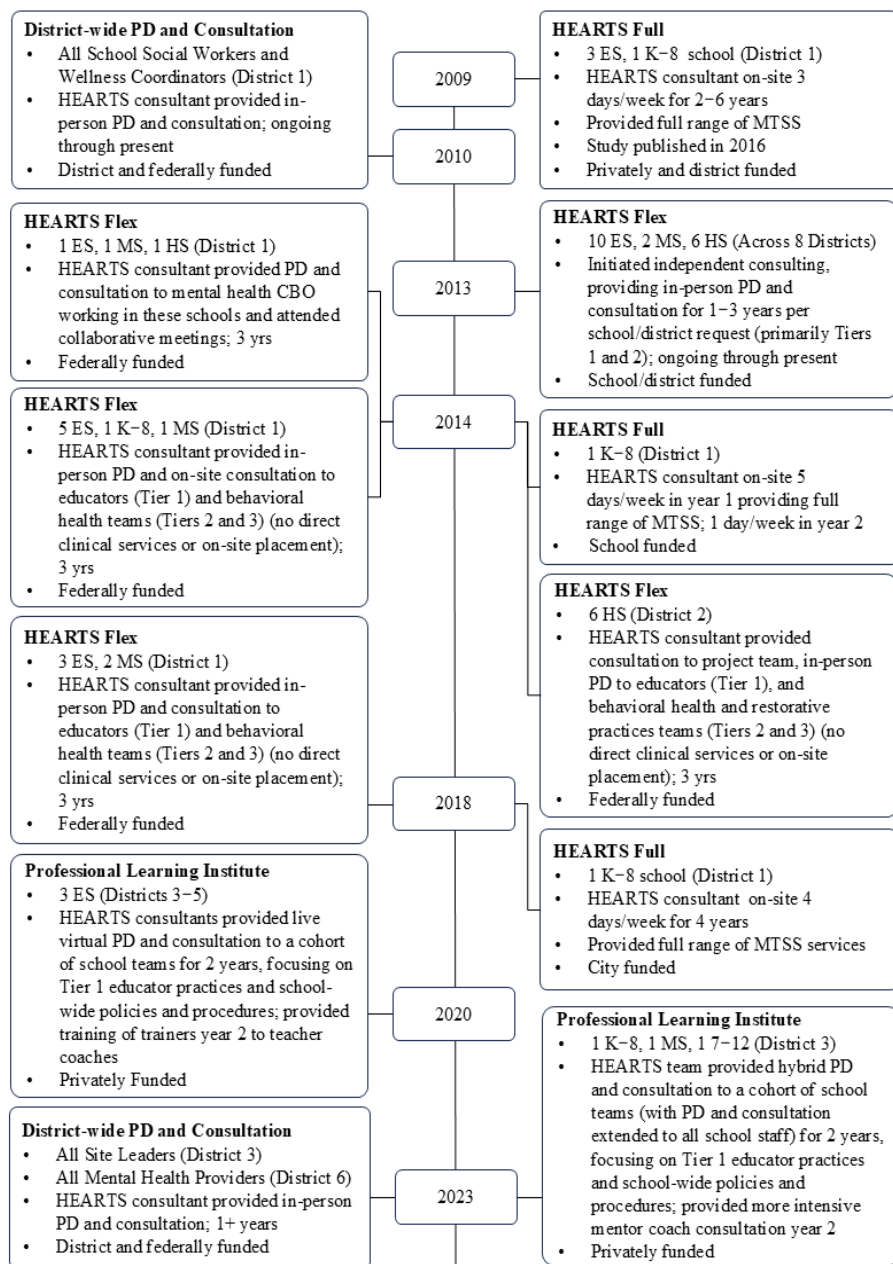


Figure 2: HEARTS Implementation Models and Timeline

Drawing from the collective experiences of our team, this paper describes practice-based lessons learned and insights with respect to moving the needle on anti-racist, socially just, trauma-informed practices across these various implementation models in K–12 public schools. Implications for moving schools beyond information dissemination to sustained changes in policies and practices that promote equity, belonging and school success are discussed.

### **WHO WE ARE**

This paper's authors have each worked as a member of the HEARTS team as the model has evolved over the years. Our individual racial and social identities have shaped our experience of the work, and the collective insights presented here. These positionality statements provide added context to our views.

Joyce: I am a Filipina American cisgender woman. My parents emigrated to the Midwest from the Philippines in the mid-1960's shortly before my birth. I am a clinical psychologist and the HEARTS director. I co-founded HEARTS in 2008 with my exceptionally supportive Latine director and mentor who deeply understood the needs of the communities we served at our public hospital. From the beginning of HEARTS, I was deeply committed to combatting systemic oppression as part of my trauma-informed schools work. I myself had personally experienced the protective nature of safe and supportive K–12 schools that had made me feel valued and cared for despite adversities I faced as a young person of color with a history of trauma. I also had professional experience in harnessing the power of interdisciplinary collaboration to address trauma. Inspired by the Trauma Sensitive Schools Massachusetts Advocates for Children work (Cole et al., 2013), it was clear to me that culture change in schools was essential for facilitating meaningful change for trauma-impacted students and the adults who serve and care for them.

Martha: I am a biracial Korean/white, queer, non-binary person, and when I started doing this work, I was just out of clinical psychology graduate school and barely making enough to survive. My own public-school education matched in many ways those of the students we were trying to serve—punished for asking questions educators deemed problematic and being told directly that my input was not valued. This added to my own sense of urgency related to the work. HEARTS at that time, still operated with consultants embedded at the school site, providing direct services to students and consultations and PDs with teachers and social workers.

When I started this work, we talked about racism (ableism, sexism and other isms) with schools in the context of the other HEARTS principles, largely naming the ways that these sociocultural traumas impact children and adults rather than providing strategies for mitigating these harms. At the end of my postdoctoral training, I left the university and continued to present the HEARTS principles at schools and other organizations but focused on Tier 1 and Tier 2 supports. As I traveled outside of that initial district (which had some foundational knowledge of these issues), I found that

I had to draw the connection between racism and trauma in much more explicit ways. As I did so, however, I faced considerable push back.

Nyasha: I am a Black, biracial, cisgender woman. I came to the HEARTS team as a burnt-out educator and school administrator, eager to make transformational change within school systems while still grappling with the complexities of COVID-19 and its disproportionate impact on Black and Brown communities. As a Black woman, I found myself struggling with feelings of guilt as I made the shift from being in schools full time to being in a fully remote role where I suddenly had time, space, and a team deeply committed to wellness. My new role allowed me to connect with schools through our HEARTS PLI, where we provided monthly virtual PDs and consultations for schools. Within this model, we had the opportunity to work across multiple districts and connect with school staff multiple times a month. This unique position allowed me to observe how staff work amongst each other, and offered insights into a persistent question: why is it that some schools can easily shift practices, while others struggle to implement change?

Stephanie: I am a white, cisgender woman who has institutional training in public health with a focus on systems level prevention and interventions to address childhood adversity. After leading two large projects in the San Francisco Bay Area in 2016 to implement and evaluate Tier 2, trauma-specific interventions in school-based health centers, I grappled with my role as a white woman leading initiatives designed to reach trauma-impacted, often Black and Brown youth, particularly when evidence-based models were not culturally relevant (e.g., white-centric, clinical, focused on acute trauma rather than system harm). In 2016, I attended the Racing ACEs convenings hosted by the RYSE Youth Center (Dhaliwal, 2016)—an integral community partner to the schools I worked with—and experienced profound inspiration from community healing in action that far surpassed my experience with institutional learning. There I discovered HEARTS, and four years later, joined the team to support the inaugural HEARTS PLI at the start of the COVID-19 pandemic.

Hazel: I am a Pinay (Filipina American), queer, straight-passing, cisgender woman who immigrated with my family as a child (1.5-generation). I started with HEARTS as a clinical psychology postdoctoral fellow in 2016, providing services at a middle school. At that time, I was on-site three times a week, providing direct services for students and consultations and support for staff and administration. I returned to HEARTS as a staff member in 2024, now providing on-site support to three middle schools through the HEARTS PLI. In this iteration, I am on-site once a month to provide staff PD, staff observations and consultations, as well as virtual sessions for administrators and site teams.

Collectively, our team is uniquely situated across a constellation of intersectional identities, and we come to this work from different personal and professional pathways. We also play different roles in the broader social change ecosystem (Iyer, 2024)—we are caregivers, healers, disrupters, storytellers, experimenters, guides, builders, and weavers. The strengths of this diversity are two-fold. First, as we navigate our own situatedness and power hierarchies, we are called to examine and reflect upon our biases and growth edges and compassionately model for others how to stretch into their own growth. Second, any one of us alone could share our unique perspective to the work, and while all perspectives are important, we are more likely

to connect most easily to the people who are most like us (e.g., educators relating to another educator, clinicians relating to other clinicians). Sharing multiple, diverse perspectives allows us to reach more people and build bridges in understanding across identities and roles.

## **PRACTICE-BASED INSIGHTS**

We have come to understand that there are certain key ingredients that help move this work forward. What follows are lessons learned from our individual and collective experiences.

### **Addressing Bias and Oppression Directly**

While the trauma-inducing nature of racism was recognized in the literature as early as 2002 (Butts, 2002), HEARTS was one of the first trauma-informed schools programs in the field to explicitly address structural oppression as a key component in addressing trauma in schools. The HEARTS approach to cultural humility and equity has evolved in response to changes in social context. From its founding in 2008, HEARTS explicitly addressed the “cradle to prison pipeline,” describing how unaddressed trauma is related to school dropout (Porche et al., 2011), that Black and Brown students were more likely to live in under-resourced neighborhoods with high community violence, and that these factors are related to the disproportionality in Black and Latino students being pushed into the carceral system. Our PDs included information on the harms of structural oppression such as institutionalized racism, which we referred to as “insidious trauma,” a term coined by Maria Root (Root, 1992, as cited in Brown, 2008, p. 103). HEARTS’s understanding of the connection between trauma and disproportionality was aligned with the district’s strategic plan to address the sociopolitical factors driving the achievement gap.

In 2013, after the highly publicized trial of George Zimmerman in relation to the killing of Trayvon Martin, we underscored the all-too-often lethal effects of racism, and the urgency of addressing racism in schools. We emphasized the way societal oppressions can be experienced as trauma due to threats that one’s safety is not as valued as another’s due to the lottery of birth (e.g., the color of one’s skin). We included in PDs the ways stress exacerbates implicit bias (Casey et al., 2012). We continued to emphasize that combatting structural oppression is critical in trauma-informed schools work. That same year, the HEARTS director served as one of the founding workgroup members for the San Francisco Department of Public Health Trauma Informed Systems (SFPDH TIS) initiative (Loomis et al., 2019). HEARTS modified and adopted an educational system version of the SFPDH TIS core guiding principles, and Cultural Humility and Responsiveness (later changed to Cultural Humility and Equity) formally became one of our foundational principles. In this way, HEARTS consultants were ahead of the curve asserting that schools must mitigate the effects of racism as a key component of trauma-informed practices.

Years later in 2016, the National Child Traumatic Stress Network (NCTSN) published a position statement, *Racial Injustice and Trauma: African Americans in the U.S.*, as a call to action (NCTSN, 2016). While this was a bold step, this statement

did not yet explicitly name racism as trauma-inducing. The NCTSN published their resource, *Being Anti-Racist is Central to Trauma Informed Care*, in 2022 (NCTSN, 2022; NCTSN Anti-Racism Faculty & NCCTS Data and Evaluation Program, 2023), six years after our commitment to center an anti-oppressive stance in all of our systems-change efforts.

Although racial justice movements are not new to the United States, there has been an ongoing shift toward explicitly addressing structural racism in institutions. The summer of 2020 ushered in a nationwide reckoning, with protests across the country in response to the murder of George Floyd and the killing of numerous other unarmed Black people by police officers (Buchanan et al., 2020). This sparked individuals and organizations to examine their own biases and take action. This sea of change enabled HEARTS to name white supremacy as a toxic force, and to advocate for anti-racist practices and policies in schools. At one school, the administrator requested that HEARTS focus every PD on addressing racism and other societal oppressions, in part because educators regularly denied that their students were impacted by these systemic problems.

A backlash followed. In September 2020, policy changes and an executive order banned federal agencies and recipients of federal funding from addressing structural racism (Executive Order on Combating Race and Sex Stereotyping, 2020). Although the order was rescinded in 2021, divisive concept laws began passing in May 2021, and in August 2021 teachers began to lose their jobs for discussing systems of oppression and white privilege. Harmful litigation continues to pass, emboldening racist behaviors.

Given the current context, explicitly discussing structural racism in schools is fraught; nevertheless, it remains necessary. With 79% of classroom teachers being white, schools serving majority Black and Brown students often do not have teachers with a shared identity (Egalite, 2024). When these identities differ, educators must ensure that their curriculum is culturally inclusive, their teaching strategies are culturally relevant, and that they teach skills that promote empathy, tolerance, and a sense of global citizenship.

The most challenging aspect of this work is addressing overt racism and navigating individuals and communities reluctant to shift their mindsets. At school sites we have served, we observed that well-meaning educators who had not done deep personal work considering their own biases inadvertently enacted these biases in their classrooms. When our work touched on these issues, some educators became overwhelmed and simply turned away, certain that they did not have such biases. Sometimes educators asserted that we as the practitioners were biased against them (reverse racism) or that the disparities were “normal.” Multiple educators told consultants that they appreciated the training, but could not understand why we mentioned racism, ableism, sexism, etc. For those people, these were conceptualized as discrete issues, rather than understood as intersecting with education and trauma.

When educators were able to acknowledge the possibility of bias, they were better able to engage in practices that would reduce the likelihood of enacting those biases. Some educators told us that explicitly naming the biases that exist in schools (and beyond) provided an acknowledgement that their experiences were real and afforded a sense of relief. Co-creating ways to interrupt the enactment of biases

allowed them to feel agency and to agree that interrupting could be established as the norm, rather than something that only a few would do. We talked explicitly about ways others could support the interrupter, as well, so that no one would feel as if they were the lone person focusing on these issues. Educators reported that they took many of these ideas back into their classrooms where students were regularly talking about racism and felt better prepared to have these complicated conversations.

### **Deep Engagement with Transformational Leaders**

School leaders play a crucial role in this work and often serve as a catalyst for program success. Principals are multifaceted, serving as the face of the school, a mentor to peers, consultant to staff, and a model for students. The weight of these responsibilities often leads to feelings of anxiety, depression, and burnout. A recent study reported that over 85% of principals experience feelings of unhealthy stress (Steiner et al., 2022), which can exacerbate a tendency to enact biases (Eberhardt, 2019). Transformative leaders create communities of trust and openness, where there is a collective vision and shared responsibility of sustaining a safe teaching and learning environment for all. This collaboration leads to increased motivation and engagement within the school ecosystem (Wilson Heenan et al., 2023). When leaders transparently address their own internal growth, they model and implement strategies and systems for others to do so as well. When school staff engage in a similar process of self-reflection, there is more space to examine their school system(s) and have meaningful conversations around the impacts of sociocultural trauma. The downstream effect directly impacts students because staff understand the importance of knowing themselves and bring it into their daily practices with students.

Schools that struggle with high-turnover, tension amongst staff, and lack psychological safety are often led by principals who entered the school community with a white-savior complex. Leaders who positioned themselves as the sole answer to the school's challenges often framed the community, families and caretakers as broken, or in need of rescue. Instead of co-creating solutions with the community, these leaders made unilateral decisions, reinforcing power imbalances. The narrative became one of saving versus serving, a model rooted in ego rather than consciousness and equity. Without the willingness of leadership to critically examine their role in perpetuating harm, both the leaders and the school communities remained entrenched in cycles of instability, and we observed principals depart after only 1–2 years.

In contrast, we have seen the most transformation in school culture when leadership (including administrators, lead educators, coaches, etc.) center their own personal and professional growth. Leaders that are both self-reflective and willing to share power create spaces that allow staff to be vulnerable, express concerns, and share accountability. In practice, this is when leaders examine their own biases; interrogate school-wide practices, policies, and procedures through an anti-oppressive lens; and make changes as needed. Specifically, one school leader we worked with is exceptionally transparent about their own commitment to growth and addressing anti-Black racism within their site. Despite not sharing the same identity as their students, the principal has demonstrated what it means to show up for community, investing in local agencies, hiring staff from the community, and inviting

families into the decision-making process. The culture shift within this school site was awe-inspiring, and the school is now seen as an exemplar within the district for transitioning to a suspension free campus. They have replaced punitive approaches to discipline with restorative strategies, student-led reflection processes, and an increased use of wellness spaces. Simultaneously, teachers and staff were encouraged to implement culturally relevant approaches to teaching that incorporated identity work and inclusive curricula. These shifts positively transformed the relational culture of the school, helping staff better understand that affirming identities and maintaining compassionate relationships lead to improvements from a whole-child perspective—not only social emotional wellness, but also bolstering mathematics and reading achievements.

### **Authentic, Compassionate Relationships**

Systems change moves at “the speed of trust” (Covey, 2008). As humans we are hardwired for attuned interactions which help us move from emotional dysregulation (i.e., intense distress) to emotional regulation (i.e., composure), creating a sense of safety (Siegel, 2007). Relationships are central to effectively facilitating change in systems and organizations (Brown et al., 2017; Johnston & Brinamen, 2006). Thus, we focus on developing compassionate and dependable relationships with school staff, attending to their social-emotional wellness, and honoring and building upon their strengths. This approach is particularly important for advancing cultural humility, equity, and racial justice because these issues can provoke discomfort, anger, pain, and shame by bringing to light past or current instances of racial harm. We aim to move through these more challenging feelings by leaning on relationships and providing attunement and co-regulation so that educators are able to stay engaged in learning and implement anti-oppressive strategies. When staff experience caring and trustworthy relationships from HEARTS consultants and colleagues, this can enable them, in turn, to practice relationship-centered strategies with students and with other colleagues.

The most intensive HEARTS implementation model (HEARTS Full) enables deep relationship-building between the consultant and school staff. The consultant builds connections with staff in small moments between classes, by attending staff meetings, or with frequent touchpoints and interactions. These positive relational connections are valuable to draw upon when addressing more challenging topics, such as examining bias in the classroom or discriminatory school discipline practices. At one school, an educator approached a HEARTS consultant to talk about the ways their colleagues were isolating a Black student, uncertain about how to proceed. The educator wanted to intervene, but they had no one to speak to at the school about this injustice. Given that there was a trusting relationship already established, the consultant was able to serve as a thought partner for the educator.

On the other end of the spectrum, in the less intensive, virtual implementation model (the PLI) these relational connections are more challenging to foster given time-limited interactions of virtual meetings, increased cognitive load of online learning (Skulmowski & Xu, 2022), and the inevitable technical barriers. In the period following COVID-19, educators who participated in the second cohort of the PLI

reported less satisfaction with online learning when compared to those who participated in the first cohort during COVID-19 when most people were working virtually. The absence of these relationship-building moments, coupled with the barriers of online learning, challenged our ability to create a container of safety for having difficult conversations about race. With this feedback, we shifted to a hybrid learning model that allowed more time for a HEARTS consultant to be on campus. In doing so, educators' satisfaction with the HEARTS content and their willingness to engage in challenging conversations improved.

Compassionate relationships matter in anti-racist work because the complexity and emotional labor involved is such that missteps and relational ruptures are to be expected. We are all deeply mired in racism, so even the most well-intentioned of us will likely do and say things that are harmful. Indeed, being willing to stay in healthy struggle is a necessary component of working towards bridging potential divides as we seek solutions to complex and multilayered problems such as structural racism in schools. When, for instance, one educator recognized the way that their own bias was showing up in the classroom, they were able to share it with the consultant. After an open and vulnerable conversation, the educator developed a plan for themselves to increase opportunities for student voice, broadening the educator's understanding and perspective. When we have strong relationships, we can repair ruptures, learn from our mistakes, and continue to do the good work.

### **Working With, Rather than Doing To or For**

Working in collaboration *with* sites, as opposed to doing things *to* or *for* them, fosters a collective approach and empowers school communities. Coming from a place of curiosity, not judgement, and maintaining humility while working with school communities allows schools to find solutions that make sense for them. We've learned that top-down policy change can be extremely challenging. Mandated trainings on sensitive topics related to mitigating bias and addressing structural oppression without relationship building and meaningful input from educators can feel punitive, making school staff feel done to, rather than worked with.

Our usual approach to recruiting schools is to invite sites that are already interested in engaging in a systems-level approach to addressing trauma and are willing to go through an interview process to ensure there is sufficient buy-in from both leadership and staff. This approach is especially important when focusing on sociocultural trauma. When we have on occasion, at the invitation of a school or school district, provided en masse PD discussing the adverse impact of racism on Black and Brown students, this has unfortunately created challenges and push-back from some training recipients. As mentioned above, conversations about racism and other sociocultural traumas can be deeply uncomfortable.

Who is doing the work matters, too. If the push for change comes primarily from folks marginalized by these systems, it is easy to dismiss them as problematic people (e.g., "oversensitive," "irrational," etc.). One key way to gain support from a critical mass of school staff can be through a team of champions with the social capital that can lead the effort toward culture change. An effective team of champions consists of school administration, student support staff, classroom teachers, and teacher coaches

dedicated to improving school culture and climate. These individuals commit to attending (and gradually leading) PDs and consultation, supporting school-wide implementation planning, and bridging the connection between HEARTS consultants and broader school staff.

Having a team of champions makes schoolwide shifts more sustainable, as the responsibility does not lie with one person and can be held amongst multiple individuals. These individuals are able to leverage relationships with other school staff and provide their colleagues ongoing support as they adopt new practices, so they are not left alone to navigate and metabolize the complexities of working with trauma-impacted individuals—particularly if they hold marginalized identities or are trauma-impacted themselves. Without sufficient support, we all risk our physical and mental health, and run the risk of burnout and staff turnover. While the HEARTS consultant augments this support initially, that role gradually shifts to the team of champions, allowing this supportive structure to continue even after the partnership with HEARTS ends.

### **Effects of Parallel Process on Consultants**

Addressing structural racism can be challenging not only for school communities but for consultants providing this support. As described above, it is only relatively recently that the trauma-inducing nature of racism, the necessity of an anti-racist approach in trauma-informed work, and the need to address structural racism as a trauma-inducing force at an institutional level have been widely discussed. Because HEARTS has been at the vanguard in this domain, consultants frequently find themselves out on a limb in ways that can be quite stressful.

Within the traditional model, behavioral and mental health difficulties are addressed by providing treatment to individuals and families, rather than focusing efforts on addressing the influences that organizations, institutional policies, and societal issues have on individuals and communities. Unfortunately, not accounting for these contexts can inadvertently lead to pathologizing individuals and families generally, with disproportionate effects on BIPOC communities when the harmful nature of structural racism is ignored.

In the case of HEARTS, while the people we served in schools and school districts found our work quite valuable, our systems change work was not always understood by larger institutions (with our own being no exception), as well as by some of our funding structures. This dynamic at times led to a feeling of isolation and of being unacknowledged. Further, we often found ourselves working without adequate funding and structural support.

A parallel process is often defined as a dynamic in which processes that occur in the therapist-supervisor relationship are recognized as reflections of the client-therapist relationship; however, these parallel processes occur in all directions (Johnston & Brinamen, 2006). For example, in schools, BIPOC students who are experiencing sociocultural trauma as well as often other forms of trauma feel helpless, devalued, and rendered voiceless. In parallel, educators who work with these students may feel disempowered, underappreciated, etc., and in turn administrators and others who support educators may feel powerless, undervalued, hamstrung, and so on.

Similarly, as consultants, we also sometimes found ourselves caught up in this dynamic. As part of a public institution, our division was chronically under-resourced and thus understaffed, which led to administrative and structural challenges that overtaxed our team and contributed to our level of burnout. In this context, who is doing the work matters as well. We've been told on occasion that information provided by consultants with marginalized identities is "irrelevant" or "over-the-top," but when told similar information by a white consultant, educators stated that they found the information helpful and timely.

Therefore, providing ongoing support is necessary for consultants. Support in organizations is frequently focused on resources, growth and development; however, in this context, support might include reminding the consultant about the parallel process. Recognizing and identifying that what is happening may be part of a larger process can be freeing and offers multiple points of entry to alleviate its adverse effects. Support might also include using whatever privileges and powers we have as a team to address concerns, rather than expect consultants to do so as individuals. Finally, offering opportunities to strengthen their sense of community and deepen their learning through conferences and other gatherings of like-minded professionals working towards similar goals may be useful. These efforts make space for consultants to grow and develop in safe spaces.

### **Ongoing Reflection and Practice**

Though many identify and strive to be lifelong learners, the reality is that educators are busy with a never-ending task list. Regardless of school buy-in, we often were faced with the reality that the HEARTS framework is a lot of information to take in. In our first iterations of HEARTS, the team worked diligently to ensure participants were exposed to every key concept through lectures, with the hope of whetting participants' appetites for continued learning. This approach often resulted in school staff feeling overwhelmed and experiencing information overload. Through a partnership with a kindred organization, we were able to re-format HEARTS content to be more conducive to adult learners. We created bite-sized learning opportunities, paired with key practices that helped school staff apply their learning.

While learning about brain science can feel daunting to some people, talking about racism is difficult in its own unique way. Few people have had the opportunity to talk about racism and its effects in a systematic way and so feel unprepared and sometimes worried about misunderstandings and ruptures in relationships (Eberhardt, 2019). As we moved away from lectures, we increased the amount of direct practice educators and students were able to have with support.

We have seen that talking forthrightly about bias and explicitly naming the presence of structural oppression in the system, in one's own school, and in one's own work has a direct impact on school culture. When adults are able to engage in critical self-reflection as well as talk to one another within the context of sufficient relational safety about the ways the school's policies and procedures might be doing harm to the students they serve, they are more willing to consider change and to work together towards that change. Optimally, as participants build their skills, they are

able to do so within neutral, low-risk settings prior to bringing them into the more complex real-life settings of over-stressed, under-resourced schools.

That said, change does not happen overnight. This work takes time and effort and making it clear that systems change typically takes two to six years or more can help to set realistic expectations and maintain hope and momentum in the face of inevitable setbacks (Fixsen et al., 2005). We have to be willing to stay in the conversation (Hardy, 2013), especially when the conversation involves someone else telling us we have harmed them. When we are able to lean on strong relationships to recognize and repair harm when it happens, we make space to create systems that work for everyone.

## CONCLUSION

Ultimately, integrating anti-racist and equitable frameworks within trauma-informed schools work is necessary systems work, not as an add on, but integrated into all trauma-informed work. Meaningful systems change takes time and considerable effort. To do it well, we need to engage authentically with our whole selves, starting with understanding our own multiple selves, social locations, and biases.

Doing this work requires deep engagement with leadership and school staff. Working well with educators means taking time to listen and be responsive to their needs and concerns. As we connect, we can build authentic relationships that foster feelings of safety and belonging. When we have strong working relationships, we are more likely to be successful as we address bias. This enables us to be compassionately direct in our communication and to stay in conversations with those we serve, even when it feels difficult (Hardy, 2016). When we bring our whole selves, we can engage with committed school staff and allow them the time and space to understand their own identities and biases.

To maintain the kind of commitment required, consultants need to work within a caring, supportive team, where support is not only appreciation for the ways that we do the work, but also offers opportunities to continually improve and build skills. Further, in order to do this work sustainably, consultants must be well-supported by their organization. When consultants feel supported, they are able to more effectively and sustainably lend that support to educators. By recognizing that parallel processes travel in all directions, consultants and participants may feel some relief and be able to compassionately attend to feelings they may experience.

Finally, to be able to close out partnerships with schools and build a site's internal capacity, consultants must work with a dedicated team of champions responsible for continuing the work. By engaging in an "I do, we do, you do" model with the consultant, the team of champions is able to move into a more consultative role with their colleagues. In order to do so, they need low risk learning environments to build and improve their skills, the same way participants do. In this way, our consultants are able to offer supports to the team of champions so that they can maintain their engagement in this work, while ensuring the work continues beyond our time at the site.

Rather than simply providing information about what makes a trauma-informed school, HEARTS has evolved into a program that supports participants in sharing a lived experience of it. By utilizing authentic and compassionate relationships in a way

that allows us to work with (rather than to or for) schools and encourage continued reflection, we have been able to engage in deep systems change. In this way, these insights have created a program culture wherein we have shifted away from informing to transforming.

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