Fostering Positive Youth Development and Leadership
Opportunities to Reframe the Conversation About Trauma

How might we create school systems and services that engage young people to improve their experience of school climate and wellness?

Leora Wolf-Prusan, EdD
With RYSE Youth Center
REL Webinar Part II
April 1, 2016
Where have we come from and are we going today?

Webinar #1 Trauma and Resilience 101
March 14th 2016 (archived here: https://relwest.wested.org/events/329)

Webinar #2 Fostering Positive Youth Development and Leadership: Opportunities to Reframe the Conversation About Trauma TODAY

Webinar #3 Self and Collective Care of YouthServing Adults
April 8, 2016
Objectives

- Participants increase their understanding of positive youth development (frameworks and approaches) and the intersections with trauma-informed and resilience-oriented care.

- Engage in identifying meaningful ways in which youth and young adults can participate and lead school climate and wellness services and systems.

- Surface and address specific challenges with youth engagement that youth-serving educators may face.
Who is participating?

- District Office Administrative Staff
- Counselor
- Psychologist
- School Site Administrator
- Teacher
- Community-Based Organization Support Provider
- Researcher
- Other (please type your role in the chat box)
Agenda

1. Positive Youth Development, Trauma and Resilience
2. Advocacy and Partnership
3. Youth Wellness and Leadership
4. Spotlight in the Field
5. Q and A
6. Close
1. Positive Youth Development

Building our trauma and resilience capital
Trauma and Resilience

Understanding trauma dynamics creates opportunities for new behaviors, new connections, and supports towards adaptation.

Trauma:

“Experiences or situations that are emotionally painful and distressing, and that overwhelm people’s ability to cope, leaving them powerless” - The Center for Nonviolence and Social Justice

Resilience:

The processes of, capacity for, or pathways and patterns of positive adaptation during or following significant threats or disturbances.

With the right relationships and opportunities to make meaning of the experience, trauma can be a source of positive power.
Realms of Trauma Informed Care

Self

Services

Structures

Systems
Principles of Trauma Informed Care

- Consistency—Predictability
- Choice-Agency
- Attachment-Significant relationships
- Safety—Holding Space, listening & hearing
- Celebration of historical resilience (across race, gender, class, and sexuality lines)
- Competency-opportunities to build worth (HOPE)
Six Fundamental Cornerstones to Ensure Any Youth Development-Based Program Has Authentic Impact with Youth
(The Movement Strategy Center)
What is at the center of it all?
A sense of agency and empowerment for students.

“The power to understand, act on, and effect positive change in one’s personal and social contexts; embodying the sense of hope and possibility (grounded in an understanding of social reality) that one can make a difference in one’s own life, family, school, and local community and in the broader national and global community.”

Annenberg Institute for School Reform at Brown University (2000, p.2)

“Moving from destructive risk-taking to nurtured risk-taking will require an integrated approach to social change, one that transforms us as human beings as much as it transforms the system. We must craft an approach that combines healing and transformational work with work to empower young people to transform the systems and institutions that perpetuate harm and inequality.”

2. Serving as Meaning Making Partners

Stepping into the Role of Positive youth Development Advocate

“You move into a discomfort so that I can move out of pain and we can meet in the middle.”
We approach trauma and resilience through our own lenses

“Trauma and the meaning making process of it is socio-culturally bound, meaning that while many might suggest schools and the learning environment to be a place for a young person to make meaning of his or her own living context, the way in which teachers might expect him or her to do so is culturally charged.”

So, what is your lens?

• How do you define “trauma” for yourself? In your own life?
  – Without psychoanalyzing, how have you experienced trauma?
    o Episodically?
    o Environmentally?

• What might have supported you through that experience/time?

• How have you accessed opportunities to explore resilience?
And, how will this approach impact your practice?

How might becoming trauma informed and resilience oriented impact your teaching and leading?

How might becoming trauma informed and resilience oriented impact your students’ learning and leading?

What supports/resources might you need to nurture your trauma capital?
3. Youth Wellness and Voice

Creating, supporting, and advocating for youth choice and voice in their (and our) healing
Youth-Adult Relationship (Hart’s Ladder)

- Student-initiated, shared decisions with adults
- Student-initiated, student-led decisions
- Adult-initiated, shared decisions with students
- Students informed and consulted
- Students informed and assigned
- Students tokenized
- Students are decoration
- Students are manipulated

Spectrum of Youth Leadership (Movement Strategy Center)

- Youth Led
- Youth Run
- Youth Driven
- Youth Involvement
- Youth Participation
- Youth as Clients

Spectrum of Student Voice (Students at the Hub)

- Leadership
- Activism
- Partnership
- Participation
- Consultation
- Expression
**What could this look like contextualized for wellness and support systems?**

**Activities that incorporate youth participation and**

<table>
<thead>
<tr>
<th>Highest Youth Participation and Consent</th>
<th>Quality of Participation or Consent</th>
<th>Rungs of Youth Voice</th>
<th>Wellness and Support Systems</th>
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<tbody>
<tr>
<td></td>
<td>Young people and adults share decision-making</td>
<td>Young people have the ideas, set up the project and invite adults to join them in making decisions throughout the project. They are equitable partners. Note that Hart’s original ladder uses “equal partnership”; Fletcher suggests “equitable partnerships” as the highest rung whereas “equal partnerships” are more appropriate for the sixth rung.</td>
<td>Young people actively identify their own wellness and support system needs, approaches, and services and invite adults to partner with them throughout the process. Any adult action is youth-centered and responsive. Mental health needs, approaches, and services also refer to preventions, interventions, and assessments.</td>
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<tr>
<td>Very High Youth Participation and Consent</td>
<td>Young people lead and initiate action</td>
<td>Young people have the initial idea and decide on how the project is to be carried out. Adults are available and trust in the leadership of young people.</td>
<td>Young people initially identify a/their wellness and support system need(s) and then determine which services and approaches they would like to access.</td>
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<tr>
<td>High Youth Participation and Consent</td>
<td>Adult-initiated, shared decisions with young people</td>
<td>Adults have the initial idea, and young people are involved in making decisions, planning and implementing the project.</td>
<td>Adults initially identify the wellness and support system need(s) of young people, and young people are involved in making decisions around the response to those needs.</td>
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<td>Somewhat High Youth Participation and Consent</td>
<td>Young people are consulted and informed</td>
<td>Adults design and facilitate the project and young people’s opinions are given weight in decision-making. Young people receive feedback about their opinions.</td>
<td>Adults design and facilitate the referral pathways, processes and policies related to young people’s wellness and support systems. Young people are asked for their opinions based on their lived experiences; they receive feedback about their lived experiences (validating or invalidating their opinions). “Referral pathways” are defined as “the series of actions or steps that begins at the moment a person in the school or local community identifies a mental health-related concern in a school-aged young person” (School Mental Health Referral Pathway Toolkit, SAMHSA, 2015)</td>
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<td>Medium Youth Participation and Consent</td>
<td>Young people assigned but informed</td>
<td>Adults decide on the project and young people volunteer for it. Young people understand the project and adults respect their views.</td>
<td>Adults design and facilitate the referral pathways, processes, and policies related to young people’s wellness and support systems and young people volunteer to participate in some or all of the steps of the processes and policies. Adults ensure that there are structured opportunities to check for youth [and their families’] understanding of the process, policies, and pathways in place regarding youth wellness and support systems.</td>
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What could this look like contextualized for wellness and support systems?

*Activities that do not incorporate youth participation and consent*

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<tr>
<th>Quality of Participation or Consent</th>
<th>Rungs of Youth Voice</th>
<th>Wellness and Support Systems</th>
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<tr>
<td><strong>Low Youth Participation and Consent</strong></td>
<td>Tokenism</td>
<td>Young people are given a limited voice and little choice about what they say and how they can communicate.</td>
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<tr>
<td><strong>Very Low Youth Participation and Consent</strong></td>
<td>Decoration</td>
<td>Young people can take part in an event in a very limited capacity and have no role in decision-making</td>
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<td><strong>Lowest Youth Participation and Consent</strong></td>
<td>Manipulation</td>
<td>Adults have complete and unchallenged authority to abuse their power. They use young people’s ideas and voices for their own gain.</td>
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Examples across disciplines, departments and realms

- Compton lawsuit - youth suing a school district for meaningful access to their learning
- E4FC - youth who are undocumented working in partnership with allied educators
- Teens on Target (Youth ALIVE) - youth mentor, teach, and organize through peer to peer work on preventing and healing from experiences with violence
- Advisory programs that position students at the center of their own experiences through student-led conferences
- Instructional practices like Youth and Community Participatory Action Research
- Youth-led restorative circles in schools
- Youth Wellness Summits
4. Transition to spotlight practitioner

What does all this look like in practice?

http://rysecenter.org
Abbas Khalid, Member Engagement Re-entry Coordinator, RYSE

Abbas was born and raised in Oakland, CA and is currently working on his BA in Public Health and Sociology at San Francisco State University. He began organizing in Youth Together (YT) at the age of 15 after moving from Los Angeles due to family tragedy. He was able to learn self healing and fight for educational justice through his continued work with Youth Together. Throughout high school, he was able to implement youth into the hiring process for teachers and the principal. Following high school graduation, he became the Youth Justice Corp intern through AEJ and focused on national policies with youth across the country to change zero tolerance policies and the school to prison pipeline. He then became the Site Organizer at Castlemont YT where he worked for 3 years organizing the school community, helping to lead and win a campaign focused on school funding on a state level, supporting community engagement in the development of the Castlemont school restructure and performing national coalition work for educational justice. During his employment at YT he was also accepted into a 3 year life coaching and facilitating training to become a Rap Director through College Summit, and worked as Adult Mentor for the Boys and Men of Color Camp for 3 years. He also is a member of the Black Lives Matter chapter in Oakland, organizing multiple actions across the Bay Area and building a community garden at Qilombo. Outside of organizing and social work he enjoys photography, visual arts, and music production.
Brian Villa,
Community Health Coordinator,
RYSE

Born and raised in Los Angeles, CA, Brian studied Southeast Asian Studies and Education at the University of California, Berkeley. Brian has been at the RYSE Center since August 2012 and has supported youth in different capacities. He started off doing college access work promoting higher education and helping create a college-going culture. He then transitioned and became the Health and Education Coordinator where he started working with LGBTQ youth providing programs and services. Currently, he is the Lead Community Health Coordinator, helping support and facilitate the organization of onsite Community Health programming. In addition, he has been teaching Asian American History for 4 years at Balboa High School in San Francisco through and organization called PEP (Pin@y Educational Partnerships)
RYSE Youth Center

RYSE creates safe spaces grounded in social justice that build youth power for young people to love, learn, educate, heal and transform the lives and communities.

Background

Opened Fall 2008

Born from youth organizing

Built on youth-adult and cross-sector partnership

Created to address and promote health equity

Integrative Model:

All right doors

Systems change focused; values driven

Critical responder to acute incidents of violence

Convener of trauma and healing learning community
LEADING WITH LOVE

Do all this with each other

- Acknowledge and appreciate
  - Greet members when we see them
  - Thank them for being at RYSE
  - Appreciate that they got to RYSE however they came in
  - Every interaction in an moment to heal, restore, and celebrate

- Listen with love and openness
  - Say yes more than no
  - Ask how more than why or why not
  - Ask questions
  - Be honest when you don’t know, commit to finding out, and follow up

- Avoid labeling, especially closed language
  - Victim vs perpetrator
  - Good vs bad, right vs wrong
  - Fixed identities, needs, priorities, interests (enable dynamic subjectivities)

- Provide space AND structure
  - Guidance and expectations that cultivate connection and validation
  - Allow/encourage risks, mistakes, and innovation with young people
Examples of RYSE in Practice

Heal, Celebrate and Restore/
Listening with Love
• Listening Campaign
• Trauma Learning Series

Avoiding Labels and Holding Space
• RYSE Youth Organizing Team
• Youth Justice Programming
What’s the connection between youth healing leadership and educator self and collective care?

To prepare/support your work with youth living in chronic trauma so that the teaching and learning is meaningful and equitable.

To prepare/support you from secondary traumatic stress and burnout, compassion fatigue.

Other?
Please contact us for more information

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