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# A BILL FOR AN ACT

RELATING TO TRAUMA-INFORMED CARE.

**BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:**

1           SECTION 1. The legislature finds that research over the  
2 last two decades in the fields of neuroscience, molecular  
3 biology, public health, genomics, and epigenetics reveal that  
4 experiences in the first few years of life build changes into  
5 the biology of the human body that, in turn, influence a  
6 person's physical, mental, and spiritual health. Adverse  
7 childhood experiences are traumatic experiences that occur  
8 during childhood, including physical, emotional, or sexual  
9 abuse; physical and emotional neglect; household dysfunction,  
10 including substance abuse, untreated mental illness, or  
11 incarceration of a household member; domestic violence; and  
12 separation or divorce involving household members. These  
13 experiences can have a profound effect on a child's developing  
14 brain and body and, if not treated properly, can increase a  
15 person's risk for disease and other poor health conditions  
16 through adulthood.



1           The legislature further finds that early adverse  
2 experiences shape the physical architecture of a child's  
3 developing brain and can prevent the development of a sturdy  
4 foundation for learning, quality health, and positive behavior.  
5 Strong, frequent, or prolonged stress in childhood caused by  
6 adverse childhood experiences can become toxic stress, impacting  
7 the development of a child's fundamental brain architecture and  
8 stress response systems. Early childhood education offers a  
9 unique window of opportunity to prevent and heal the impacts of  
10 adverse childhood experiences and toxic stress on a child's  
11 brain, body, and spirit. Research on toxic stress and adverse  
12 childhood experiences evidence a growing public health crisis  
13 for the State with implications for the State's educational,  
14 juvenile justice, criminal justice, and public health systems.

15           The legislature also finds that neurobiological,  
16 epigenetics, and physiological studies have shown that traumatic  
17 experiences in childhood and adolescence can diminish  
18 concentration, memory, and the organizational language abilities  
19 students need to succeed in school, thereby negatively impacting  
20 a student's academic performance, classroom behavior, and the  
21 ability to form relationships. A critical factor in buffering



1 children from the effects of toxic stress and adverse childhood  
2 experiences is the existence of supportive, stable relationships  
3 between children and their families, caregivers, and other  
4 important adults in their lives. Cultural practices that  
5 provide asset-based approaches involving the influence of a  
6 stable non-relative adult can provide the resilience needed to  
7 mitigate a child with high adverse childhood experiences.  
8 Positively influencing the architecture of a child's developing  
9 brain is more effective and less costly than attempting to  
10 correct poor learning, health, and behaviors later in life.

11 The purpose of this Act is to establish a task force to  
12 develop and make recommendations for trauma-informed care in the  
13 State.

14 SECTION 2. (a) There is established within the department  
15 of health for administrative purposes a trauma-informed care  
16 task force. The task force shall consist of the following  
17 members or their designees:

- 18 (1) The director of health, who shall serve as the  
19 chairperson of the task force;
- 20 (2) The director of human services;
- 21 (3) The superintendent of education;



- 1           (4)    The director of labor and industrial relations;
- 2           (5)    The director of commerce and consumer affairs;
- 3           (6)    The chairperson of the board of trustees of the office
- 4                   of Hawaiian affairs;
- 5           (7)    The director of the executive office on early
- 6                   learning;
- 7           (8)    The president of the senate;
- 8           (9)    The speaker of the house of representatives;
- 9           (10)   The mayor of the city and county of Honolulu and the
- 10                   mayors of the counties of Maui, Kauai, and Hawaii;
- 11           (11)   The chief executive officer of Kamehameha Schools, who
- 12                   shall be invited to become a member by the director of
- 13                   health;
- 14           (12)   The chief justice of the Hawaii Supreme Court;
- 15           (13)   The chairperson of the department of Native Hawaiian
- 16                   health from the John A. Burns School of Medicine;
- 17           (14)   One youth and one adult consumer advocate, who shall
- 18                   be invited to become a member by the director of
- 19                   health;
- 20           (15)   A member of the health care community, who shall be
- 21                   invited to become a member by the director of health;



1 (16) A member or non-profit representative from the Compact  
2 of Free Association islander community, who shall be  
3 invited to become a member by the director of health;  
4 and

5 (17) A member of the non-profit sector, who shall be  
6 invited to become a member by the director of health.

7 (b) The task force shall develop and make recommendations  
8 for trauma-informed care in the State. Specifically, the task  
9 force shall:

10 (1) Create, develop, and adopt a statewide framework for  
11 trauma-informed and responsive practice. The  
12 framework shall include:

13 (A) A clear definition of trauma-informed and  
14 responsive practice;

15 (B) Principles of trauma-informed and responsive care  
16 that can apply to any school, healthcare  
17 provider, law enforcement agency, community  
18 organization, state agency, or other entity that  
19 has contact with children or youth;

20 (C) Clear examples of how individuals and  
21 institutions can implement trauma-informed and



- 1 responsive practices across different domains,  
2 including organizational leadership, workforce  
3 development, policy and decision-making, and  
4 evaluation;
- 5 (D) Strategies for preventing and addressing  
6 secondary traumatic stress for all professionals  
7 and providers working with children and youth and  
8 their families who have experienced trauma;
- 9 (E) Recommendations to implement trauma-informed care  
10 professional development and strategy  
11 requirements in county and state contracts; and
- 12 (F) An implementation and sustainability plan,  
13 consisting of an evaluation plan with suggested  
14 metrics for assessing ongoing progress of the  
15 framework.
- 16 (2) Identify best practices, including best practices  
17 involving native Hawaiian cultural practices, with  
18 respect to children and youth and their families, who  
19 have experienced or are at risk of experiencing  
20 trauma;



- 1           (3) Provide a trauma-informed care inventory and
- 2                   assessment of public and private agencies and
- 3                   departments;
- 4           (4) Identify various cultural practices that build
- 5                   wellness and resilience in communities;
- 6           (5) Convene trauma-informed care practitioners so that
- 7                   they may share research and strategies in helping
- 8                   communities build wellness and resilience;
- 9           (6) Seek ways in which federal funding can be used to
- 10                   better coordinate and to improve the response to
- 11                   families impacted by coronavirus disease 2019,
- 12                   substance use disorders, domestic violence, poverty,
- 13                   and other forms of trauma, including making
- 14                   recommendations for a government position that will
- 15                   interface with federal agencies to seek and leverage
- 16                   federal funding with county, state, and
- 17                   philanthropical agencies; and
- 18           (7) Coordinate data collection and funding streams to
- 19                   support the efforts of the interagency task force.
- 20           (c) The task force shall submit a report of its findings
- 21                   and recommendations, including any proposed legislation, to the



1 legislature no later than twenty days prior to the convening of  
2 the regular session of 2023.

3 (d) The task force shall cease to exist on July 1, 2023.

4 SECTION 3. This Act shall take effect upon its approval.



**Report Title:**

DOH; Trauma-informed Care; Task Force

**Description:**

Establishes a trauma-informed care task force within the department of health to make recommendations of trauma-informed care in the State. (SD1)

*The summary description of legislation appearing on this page is for informational purposes only and is not legislation or evidence of legislative intent.*

