Children’s Resilience Initiative

One Community’s Response to ACEs through Resilience

October 17, 2014

Stevenson, WA. Community Event

Please do not copy or distribute beyond participants
A revolution is underway!

But not the:

“One if by night and two if by day” version…
Alarm bells ringing across the nation!!

Preschool expulsions are 13 times more common than K-12 expulsions

New York Times 3/19/14
Juvenile Offenders
ACES & School Experience

**bar chart showing percentage of juvenile offenders by ACE score and school experience**

- 4+ Suspensions:
  - 0-1 ACEs: 43%
  - 2-3 ACEs: 61%
  - 4+ ACEs: 64%

- Early Suspension:
  - 0-1 ACEs: 71%
  - 2-3 ACEs: 82%
  - 4+ ACEs: 85%
ACEs are the Pipeline to Prison

- 1 in 104 American adults is behind bars
- 1 in 33 American adults is under correctional control
- 1 in 4 of the world’s inmates is in a US prison or jail
- 1 in 8 state employees works in corrections
- 1 in 14 state general fund dollars is spent on corrections

HIGH COST, LOW RETURN: \textbf{1 in 2.3 inmates returns to prison within 3 years of release}

( - ACES TOO HIGH)
Basis for revolution?

• **Science & fact**: brain becomes what it was exposed to

• **Safety & self-regulation issues**

• Thus, adult must model & build missing skills through relationship & resilience

Bruce Perry, MD; Michael Meaney, PhD; Heather Forbes, LCSW; William Steele PsyD
Why a new approach?

“When working with trauma impacted children, we must reach their hearts before we can reach their heads.”

Dr. Ken Ginsburg
Be a rebel WITH a cause!

It is up to us to find the courage to change our mindsets.

It requires an entire paradigm shift.

Heather Forbes; Paul Tough; AMA & 3 Academies (Ob/Gyn, Pediatrics, Neurology)
How does one join the revolution?

By building the capabilities of adults and strengthening communities that together form the environment of relationships for students to succeed

- [https://www.youtube.com/watch?feature=player_embedded&v=urU-a_FsS5Y](https://www.youtube.com/watch?feature=player_embedded&v=urU-a_FsS5Y)
Call out key point(s) you just heard?

1. Pile up, cumulative burden on children
2. Results in lack of skills for negotiating well-regulated environment
3. Extended period of plasticity - up to 30 yrs
4. Focus on development of adult skills first
5. Community help build & reinforce capacities for parents/children
6. Develop human capital
7. Plan for the future to have a future
Key learning

- **Adverse Childhood Experiences (ACE) Study**
- Disrupted brain development
- Resilience building blocks
- Community response

**Powerful information** we all should know about!
Children’s Resilience Initiative

Visioned-2007

Formed-2009

~25 community partners embed principles into practice

Reduce ACEs & build Resilience
No one gets to choose the family into which they are born.
Adverse Childhood Experiences Study

A hand no one should have to hold!

Dr. Vincent Felitti
Kaiser Permanente

Dr. Rob Anda
CDC
Integrating Brain & Epidemiological Research: Initial Hypothesis
What are the **Adverse Childhood Experiences**?

Grouped by:

- Child maltreatment/neglect
- Dysfunctional family environment
Maltreatment/neglect ACEs

- Child Sexual Abuse
- Child Physical Abuse
- Child Emotional Abuse
- Physical Neglect
- Emotional Neglect
Family environment ACEs

- Witnessing domestic violence against mother
- Mentally ill, depressed or suicidal family member
- Drug addicted or alcoholic family member
- Loss of a parent to death or abandonment
- Incarceration of a family member
Outcomes seen in ACE Study

- **Disease**
- **Poor Mental Health**
- **Risk Behaviors**
- **Other Challenges**
ACEs = major risk factors for later health outcomes

Nearly 2 of 3 reported one ACE
> 1 in 5 had ≥ 3 ACEs
1 in 10 had ≥ 5 ACEs

Physical abuse - 28%
Substance abuse - 27%
Parental sep/divorce - 23%
Sexual abuse - 21%

“What is predictable is preventable.”
Dose-Response Relationship: More ACEs = More Disease
ACE Score and Smoking

6 of 100 people with 0 ACEs smoke

11 of 100 people with 3 ACEs smoke

17 of 100 people with 7 ACEs smoke
ACE Score and Suicide Attempts

1 of 100 people with 0 ACEs attempt suicide

10 of 100 people with 3 ACEs attempt suicide

20 of 100 people with 7 ACEs attempt suicide
ACEs are Prevalent, Pervasive, and Cross All Sectors of a Population

- 62%: at least 1 ACE
- 25%: 3 or more ACE
- 5%: more than 6
- Cluster/co-occur
  84% w/physical abuse have 2+

87%
with 1 ACE
have another

- 1 in 3 Emotional Abuse
- 1 in 4 Sexual Abuse
- > 1 in 5 Substance Abuse
- > 1 in 5 Loss of Parent
- 1 in 7 Mental Illness
- 1 in 7 Physical Abuse
- 1 in 8 DV
Population Attributable Risk - WA State Data

Percentage of ACE impact to sectors of life and society
National prevalence

> 1 in 10 children 3 or more ACEs
The impact of ACEs can now only be ignored as a matter of conscious choice. With this information comes the responsibility to use it.”

Anda et al 2010
Key findings

• The “witness” phenomenon & its impact
• Liberating - crisis line calls
• Diagnostics as history; look beyond symptom
• AMA and 3 national Academies
• Growing national movement to address impact
• Bottom line: protect children from early trauma and decrease ACE transmission
• With this information comes the responsibility to use it
Responses

• Liberating- leave behind the shame and blame
• I thought it was my fault
• Now I know why I’m on my 4th marriage
• This saved my life
• I understand better now why my mother parented the way she did, but I will break the cycle
• I will be intentional in building resilience
• Hope and healing; I’m not alone
• Why haven’t I heard about this before?

Good Stress, Bad Stress

• cortisol and adrenaline – designed for 20 min. bursts to address danger

• if 24/7, negative effects on brain structure and function

• results is an entirely different brain with different reactions and responses

• brain adapts to daily experience as brain develops over the 25+ year process

• experience drives development
Brains Reflect the Environment Lived

**DEVELOPMENT for a tough life:**
- Emotion processing regions smaller, less efficient
- Efficient production of stress-related chemicals
- Dysregulated happy hormones
- Fewer receptors for calming
- Less white matter

**DEVELOPMENT for a good life:**
- Emotion processing regions robust and efficient
- Abundant happy hormones
- High density white matter, especially in mid-brain

**INDIVIDUAL characteristics & traits**
- Competitive
- Hot tempered
- Impulsive
- Hyper vigilant
- “Brawn over brains” or
- Withdrawn
- Emotionally detached
- Numb

**WHY IT WORKS**
Under the worst conditions, both the individual & the species survive.

**WHY IT WORKS**
By striving for cooperative relationships, individual & species live peacefully.

**Assuming neutral start:**
All brains will adapt to survive.

**Toxic Stress**
Key Variables In Brain Outcomes

Age of Maltreatment
Effects of maltreatment correspond to the region and/or function that developing at the time of maltreatment.

Types of Abuse
Different types of maltreatment activate different processes (chemicals, hormones, electrical activity, cell growth, & specialization of cells)

Gender
i.e., the effects of sexual abuse are more profound in girls while the effects of neglect are more profound in boys.
**Healthy Brain**

This PET scan of the brain of a normal child shows regions of high (red) and low (blue and black) activity. At birth, only primitive structures such as the brain stem (center) are fully functional; in regions like the temporal lobes (top), early childhood experiences wire the circuits.

**Front**

- **Temporal lobes**

**Back**

**An Abused Brain**

This PET scan of the brain of a Romanian orphan, who was institutionalized shortly after birth, shows the effect of extreme deprivation in infancy. The temporal lobes (top), which regulate emotions and receive input from the senses, are nearly quiescent. Such children suffer emotional and cognitive problems.
Executive State
Prefrontal Lobes
What can I learn from this?

Emotional State
Limbic System
Am I loved?

Survival State
Brain Stem
Am I safe?
Car as an analogy of brain

**Brain Stem**
- Physical
- Need is safety

**Limbic System**
- Emotional
- Need is connection

**Prefrontal Cortex**
- Thinking
- Need is to create meaning
Survival Mode Response
Dr. John Medina - Brain Rules

Toxic stress

Brain is overwhelmed with “cortisol”

Fight-Flight-Freeze
Lack of safety = threat

The brain cannot physiologically take in new knowledge or problem-solve

It is out of the student’s control-hardwired
ACE Study: A Paradigm Shift

Mechanisms by which Adverse Childhood Experiences influence health and well-being throughout the lifespan.
What we see in this research…

ACEs drive:

- Health outcomes & healthcare costs
- Special education needs & rates of school failure
- Criminal justice costs
- Intergenerational patterns of high-cost social problems

We can prevent and protect children from ACEs
Use a “Trauma Lens” to better understand behavior.

A shift in perspective from:

“What is wrong with this person?”

to

“What has this person been through?”

Reading from “On Playing a Poor Hand Well” by Mark Katz.
This is NOT about letting people off the hook, or excusing actions because of trauma history.

Data suggests accountability CAN actually increase!
Neuroscience gives us a new perspective

We have a deeper understanding of the brain

Therefore, we have a deeper understanding of our students

And we know that caring adults have a significant impact on students’ lives

Heather T. Forbes, “Help for Billy”
A child’s *reality* from his caregiver(s) is all that he knows...

**Trauma child’s environment is broken up and many pieces are missing**

**Child from supportive environment is healthy and stable**

Heather T. Forbes, “Help for Billy”
Trauma child’s belief system built on negatives

Unlovable  Worthless  Forgotten  Powerless  Helpless  Hopeless

Isolated  Emotionally neglected  Abandoned  Physically neglected  Feelings of being trapped  Can’t see beyond current circumstances

“When children are given environments of support, love, and attention, and when their needs are met... the impact of traumatic experiences is minimized, and in many cases - avoided.”

Heather T. Forbes, “Help for Billy”
Window of “Stress Tolerance”…

Baseline levels of stress...

Healthy child’s baseline of stress

Trauma impacted child’s baseline of stress

Breaking point

Space difference till breaking point

Heather T. Forbes
Areas of difficulty with trauma history

↓ Perception of safety
↓ Ability to regulate emotion
↓ Ability to regulate behavior
↓ Ability to master academic content
↓ Development of personal agency and social competence

From: Teachers’ Strategies Guide for Working with Children Exposed to Trauma, Framingham Public Schools 2010
Trauma is **not** a cognitive experience

**Act** (not **think**) when triggered
Safe and supportive to us...
But not to the triggered child...
Frequent misinterpretation of behavior

- Looks like defiance or opposition
- Is body’s way to adapt to danger and prepare to protect self (fight, flight, freeze) or shut down and prepare for damage
- Trauma = loss of control and sense of utter powerlessness

...leads to punishment rather than skill building
“If the only tool you have is a hammer, you tend to see every problem as a nail.”
Abraham Maslow

Heather T. Forbes, “Help for Billy”
We have to start from the bottom to get to the top of the pyramid...

Maslow’s Hierarchy of Needs

1. Physiological needs must be met
2. Student must feel safe
3. Connected through relationship and love
4. Self-respect & confidence
5. Academic learning
Our Goal

ReAgesce

The powerful force that can drive forward action for our community
Opportunities for Resilience

Moving forward with this powerful information

Current research is discovering that nurturance is actually reparative and regenerative!!
Why do some rise above the ACE load and others don’t?

- Attachment to caring adult(s)
- Opportunities
- Choices
- Privilege/ resources
- Ethnicity/culture
- Relationships
- Timing
What is Resilience?

Resilience - the ability to bounce back from challenges - is the most important tool you can give a child.
Resilience: ability to recover from or adjust to change
Relationship...

...shapes neural system of stress response

Template that molds future responses...
• Able to recognize resilience in self/others

• Become aware of how to promote it

• Vocabulary reinforces feelings and beliefs

from Grotberg, PhD; Bernard Van Leer Foundation
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<thead>
<tr>
<th>Grothberg</th>
<th>Boss</th>
<th>Blaustein</th>
<th>Masten</th>
<th>Brooks &amp; Goldstein</th>
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<tbody>
<tr>
<td><strong>I HAVE</strong> (external supports)</td>
<td>Attachment &amp; belonging</td>
<td>Attachment</td>
<td>Connection</td>
<td>Positive relationship w/caring adult</td>
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<tr>
<td><strong>I AM</strong> (personal strengths)</td>
<td>Community, culture &amp; spirituality</td>
<td>Regulation</td>
<td>Affirmation</td>
<td>Self-esteem through emotional awareness &amp; control</td>
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<tr>
<td><strong>I CAN</strong> (social &amp; interpersonal skills)</td>
<td>Capability</td>
<td>Competence</td>
<td>Chores, choices, mastery of skills</td>
<td>Effectiveness in one’s own world</td>
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## Skill Building

<table>
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<tr>
<th>Think</th>
<th>Not</th>
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<tr>
<td>Lack of Skill</td>
<td>Intentional Misbehavior</td>
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<td>Building Missing Skills</td>
<td>Shaming for Lack of Skills</td>
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<tr>
<td>Nurture</td>
<td>Criticize</td>
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<td>Teach</td>
<td>Blame</td>
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<tr>
<td>Discipline</td>
<td>Punishment</td>
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<tr>
<td><strong>Think</strong></td>
<td><strong>Not</strong></td>
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<td>“I need to know how hard this is for you.”</td>
<td>“It’s not that difficult.”</td>
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<td>“I’m here. You’re not in trouble.”</td>
<td>“Go to the principal’s office.”</td>
</tr>
<tr>
<td>“I don’t want you alone in this. Let me help you.”</td>
<td>“You need to learn to deal with life.”</td>
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<tr>
<td>“It’s okay to feel.”</td>
<td>“Stop crying.”</td>
</tr>
<tr>
<td>“That really set you back, didn’t it?”</td>
<td>“Stop being such a baby.”</td>
</tr>
</tbody>
</table>

Heather Forbes, Help for Billy
Community Partners

- Law Enforcement
- School Districts
- Public Health
- Medical Community
- DSHS
- Mental Health
- Social Service Providers
- Neighborhoods
- Businesses
- Municipalities
- Public Library
- Alternative Programs
- Employment
- Parents
- Court Ordered Clients
Paradigm shift: “Traditional” disciplinary protocol for students with trauma history was not effective. Accountability was maintained or even increased!
Resilience trumps ACEs!

Correlate resilience (problem solving, optimism, supportive relationships): academics: ACE level

Increases:

- Student resilience overall
- With higher ACE students whose resilience was lowest before entering Lincoln
- Fewer absences, greater improvements on standardized tests
- Moderated the effects of ACEs on current school performance at Lincoln
Direct Correlation to CPS involvement and depression
Policy example

- All volunteers trained in ACEs
- Manual includes ACE info
- Active in promoting resilience
Play well together and learn new things together!
We invite you to attend a training by Ann Smith, LCSW, director of St. Luke’s Intervention Prevention Services and Children’s Resilience Initiative. They will be sharing their work around trauma and how it affects children’s emotions. Ms. Smith has been a key leader in the pilot program “Head Start Trauma Smart”. Learn more about how each of us can impact trauma education and awareness for young children in our valley, as we continue to expand our community’s response to ACE’s, brain development and resilience strategies. This session is open to anyone involved in child development or in working with families with young children.

where:
Walla Walla Airport Community Room
45 Terminal Loop Road
when:
October 9th, 8:30 a.m.-3:30 p.m.

Sponsors:
WWCC Early Learning Coalition
WWCC Head Start/EDRAP
Children’s Resilience

PROCLAMATION

WHEREAS, there is compelling evidence of a correlation between the experience of childhood trauma and resulting behavioral and health problems, when the trauma is unrecognized and unaddressed; and

WHEREAS, the cumulative effects of such trauma over a lifespan, if ignored, are detrimental to individuals and communities; and

WHEREAS, the Children’s Resilience Initiative of Walla Walla has a vision of a community where all young people thrive and all parents raise their children with consistency and nurturance to develop lasting resilience, and a mission to mobilize the community through dialogue to radically reduce the number of Adverse Childhood Experiences while building resilience and a more effective delivery system.

NOW, THEREFORE, I, Jerry Cummins, Mayor of Walla Walla, do hereby proclaim October 2014 to be:

Children’s Resilience Month in Walla Walla

and urge all residents to become informed about childhood trauma and how to create resilience in individuals who have suffered such trauma, to integrate these principles into their everyday work and practice, and to otherwise support the work of the Children’s Resilience Initiative.

Jerry Cummins, Mayor

www.ci.walla-walla.wa.us
Resilience Rocks Treasure Hunt
Feeling helpless & hopeless
Can never do enough
Hypervigilance
Loss of creativity Embracing complexity
Anger & cynicism
Deliberate avoidance Addictions
Sense of persecution Grandiosity
Numb Minimizing
Dissociative moments
Fear Exhaustion & ailments Guilt
Daily practice of centering

Professional Self-care Personal

Know the warning signs

Get support

Laura vanDernoot Lipsky, Trauma Stewardship
“What we cannot argue anymore is that there’s nothing we can do...”

“We can change our approach.”

Paul Tough, How Children Succeed
At first, people refuse to believe a strange new thing can be done. Then, they begin to hope it can be done. Then, when it is done, all the world wonders why it was not done sooner.

Frances Hodgson Burnett
Sparking your shift and response

- Talk
  - Share
- Listen
  - Act
- Respond
  - Schedule
Reflection

How do we know whether we are becoming a Trauma-Sensitive Community?
What indicators for yourself and your community will you establish?
Children’s Resilience Initiative

Empowering community understanding of the forces that shape us and our children

Website: www.resilienceetrumpsaces.org