



Adverse Childhood Experiences (ACEs): Advocating Against Toxic Stress

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Inspire Advocate Cultivate

Our goal is to have a basic understanding of ACEs and consider next steps in our work as a migrant educators

Agenda

- Setting the stage: Neuroscience and epigenetics
- What are adverse childhood experiences (ACEs)?
- How does toxic stress affect our brain and body?
- Next steps: Building relationships and beyond

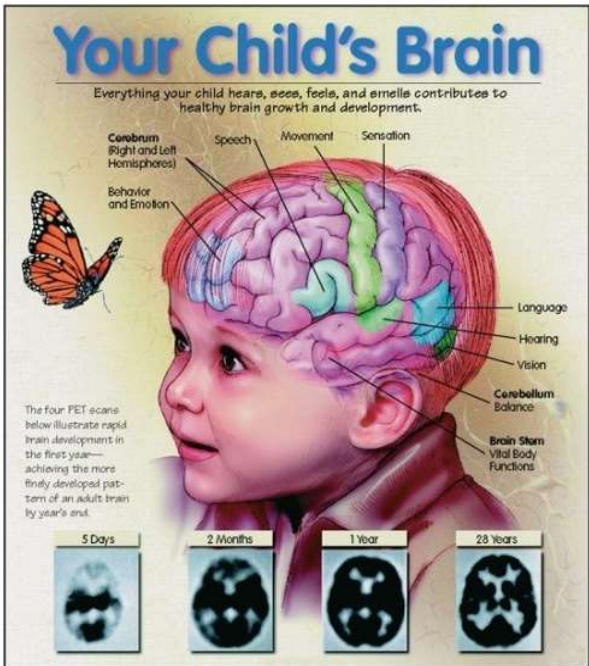
Learning Goals

Content Objectives:

- Participants will understand adverse childhood experiences (ACEs) as a critical public health issue and ACEs impact on brain development, parent engagement, and academic achievement.

Language Objective:

- Participants will discuss strategies to build relationships and change engagement based on an understanding of ACEs, trauma, and toxic stress.



Your Child's Brain

Everything your child hears, sees, feels, and smells contributes to healthy brain growth and development.

Cerebrum (Right and Left Hemispheres)

Speech

Movement

Sensation

Language

Hearing

Vision

Cerebellum (Balance)

Brain Stem (Vital Body Functions)

Behavior and Emotion

The four PET scans below illustrate rapid brain development in the first year—achieving the more finely developed pattern of an adult brain by year's end.

5 Days

2 Months

1 Year

28 Years

Neuroscience

- It is important to have a variety of experiences for a robust neural network.
- Fight, flight, freeze, or appease experiences in episodic or long duration danger cause release of stress chemicals of cortisol and adrenaline.
- Stress can be both positive and negative

Epigenetics

- Epigenetics is the study of biological mechanisms that switch genes on and off; “above the genome” like dynamics on sheet music.
- Environment and experience influence the genetic code.
- Some are permanent, some are inherited
- Possible to pass on both negative and positive experiences
- Stress can affect genes that regulate the brain, immune and hormonal systems.

Child traumatic stress

The physical and emotional response a child has to events that pose a threat to the child or someone important to them.

- When a child experiences trauma, the child may be unable to cope, have feelings of terror and powerlessness, and experience physiological arousal they cannot control.
- A traumatic event can affect the way children view self, the world around them, and their future.
- A child who is traumatized may not be able to trust others, may not feel safe, and may have difficulty handling life changes.

Acute and chronic trauma

Acute trauma is a one-time incident such as:

- An auto accident
- A violent event in the community, such as a shooting
- A natural disaster such as a flood or a hurricane
- A sudden loss of someone the child cares about
- An assault

Chronic trauma occurs when children experience multiple traumatic events.

These events may be varied in circumstances and can have a cumulative effect.

Subsequent traumatic events remind the child of prior trauma and can trigger emotions and thoughts related to that prior trauma.

Other sources of stress

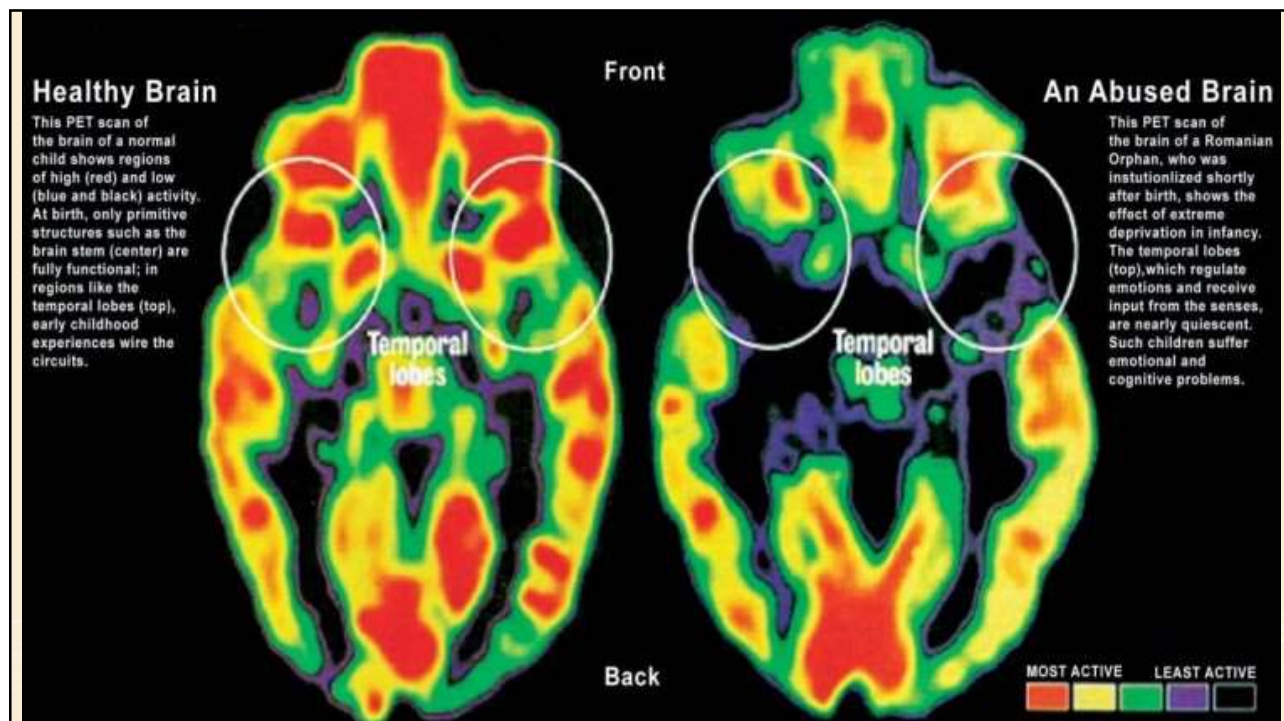
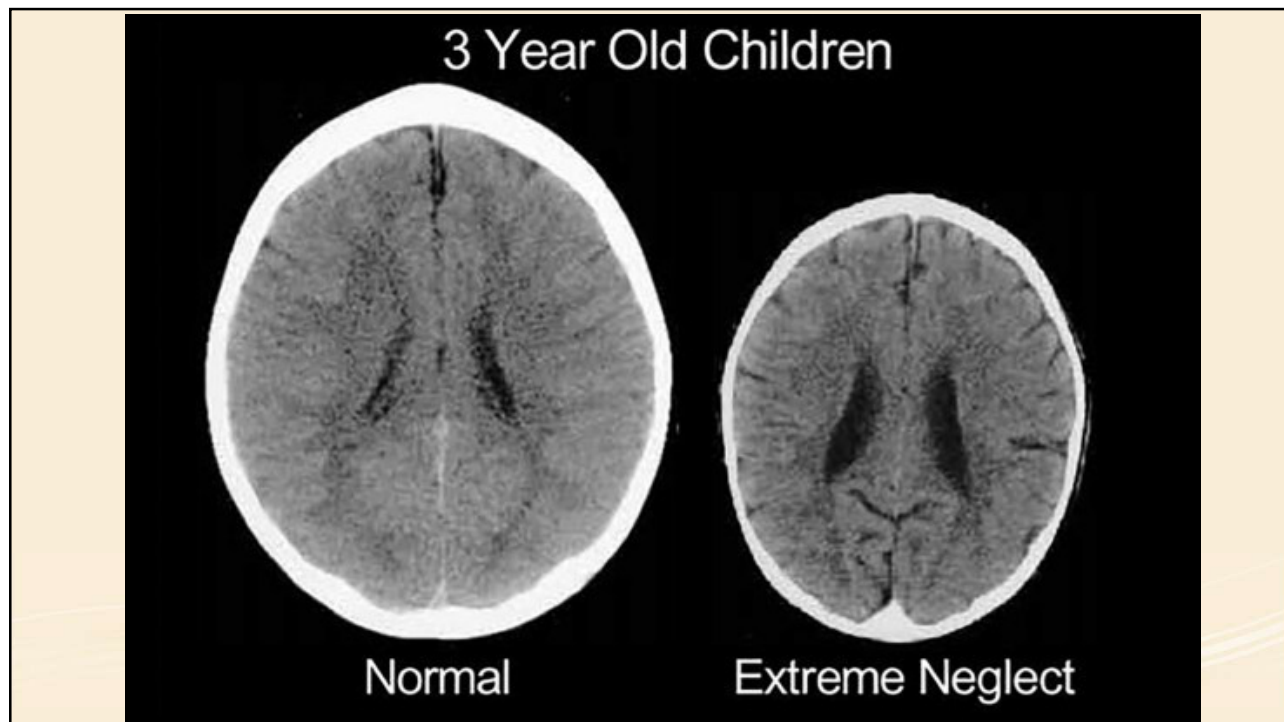
- Poverty
- Discrimination
- Separations from caregivers and family members
- Frequent placements or moving around often
- Problems at school
- Immigration issues

How many of these might our families experience?

We remember trauma less in words and more with our feelings and our bodies.

(van der Kolk and Finkelhor, 1995)

The brain may not remember but the body does.

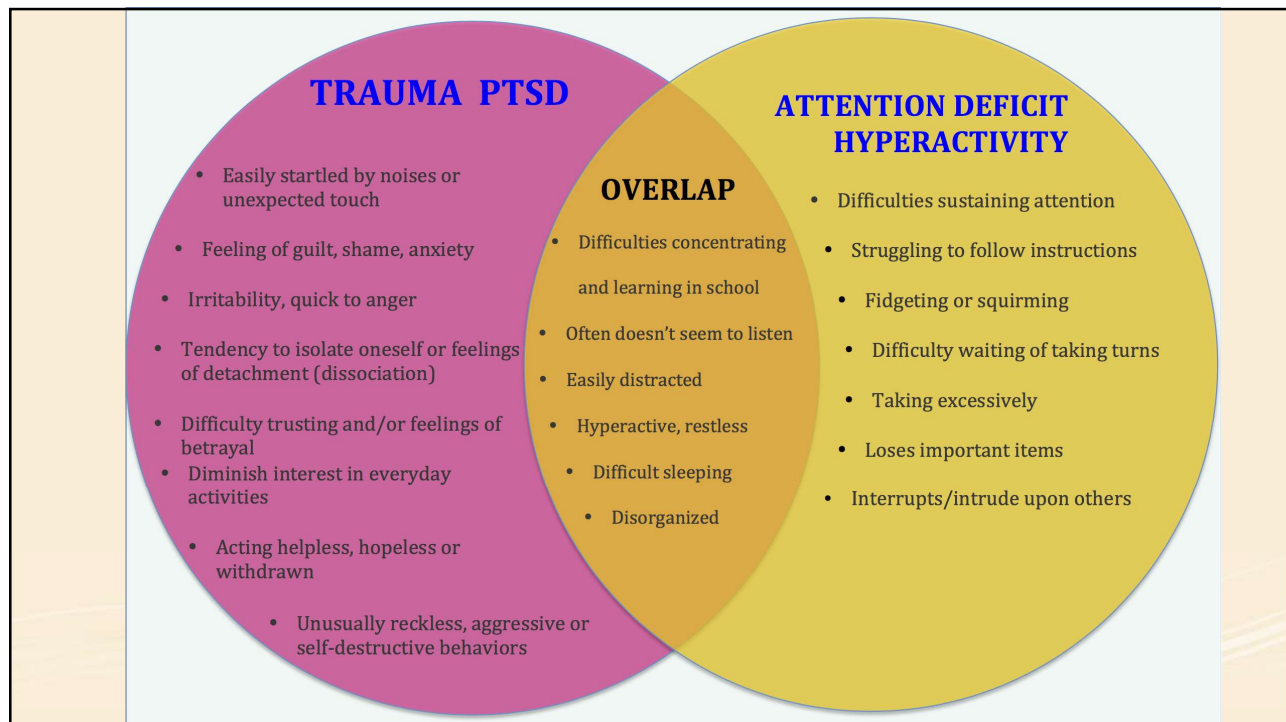


Post Traumatic Stress Disorder (PTSD) in children

- The child re-experiences the trauma (typically through flashbacks and nightmares)
- The child will avoid stimuli associated with the trauma
- The child may disengage from their emotions (may lose interest in things they used to like to do)
- The child may have physical symptoms for no medical reason (stomach aches, headaches, etc)
- The child may be more hypervigilant (startle easily)

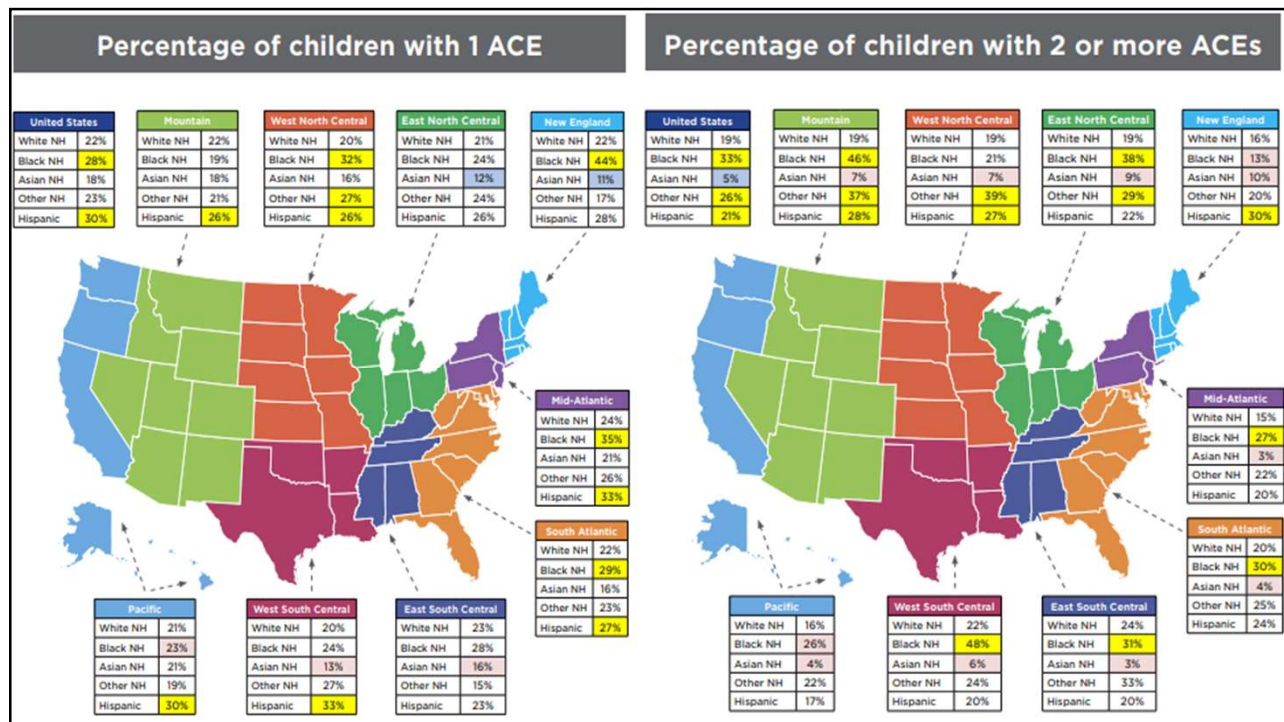
What are ACEs and why do they matter?

- Adverse Childhood Experiences (ACEs) refer to ten specific categories of exposures grouped into 3 types: abuse, neglect and household dysfunction such as parental substance abuse or mental illness.
- Exposure without a positive buffer, such as a nurturing parent or caregiver, can lead to a Toxic Stress Response in children, which can, in turn, lead to health problems like asthma, poor growth and frequent infections, as well as learning difficulties and behavioral issues.



Child Trends February 2018 Research Brief

- **Economic hardship** and **divorce or separation of a parent or guardian** are the most common ACEs reported nationally, and in all states.
- Just under half (45 percent) of children in the United States have experienced at least one ACE. One in ten children nationally has experienced three or more ACEs, placing them in a category of especially high risk.
- In Texas 49 percent of children have experienced at least one ACE. One in four children have experienced one ACE and one in eight have experienced three or more ACEs.



Video:

How does toxic stress affect the developing brain and other aspects of behavior?



Is it possible for a child's developing brain and overall health to recover?

Yes...The key is RESILIENCE!

- Having resilient parents who know how to solve problems
- Building attachment and nurturing relationships
- Building social connections
- Meeting basic needs
- Learning about parenting and how children grow
- Building social and emotional connections

*Community & Family Services Division at the
Spokane (WA) Regional Health District*

Our approach to engagement changes

“What is wrong with you?” to

“What happened to you?”

A child's or parent's behavior may be indicative of:

- Coping mechanisms
- Survival techniques
- Resiliency

What *can* Be Done About ACES?

These wide-ranging health and social consequences underscore the importance of preventing ACES before they happen. **Safe, stable, and nurturing relationships and environments** (SSNREs) can have a positive impact on a broad range of health problems and on the development of skills that will help children reach their full potential. Strategies that address the needs of children and their families include:

Voluntary home visiting programs can help families by strengthening maternal parenting practices, the quality of the child's home environment, and children's development.
Example: Nurse-Family Partnership



Home visiting to pregnant women and families with newborns



Parenting training programs



Intimate partner violence prevention



Social support for parents



Parent support programs for teens and teen pregnancy prevention programs



Mental illness and substance abuse treatment



High quality child care



Sufficient income support for lower income families



Building Relationships and Beyond

You can make the difference in framing the conversation to create and nurture self-healing communities!

Family Involvement vs. Family Engagement

Involve: “to enfold or envelope”

Engage: “to come together and interlock”

Engagement: Actively participating in something enjoyable; often leads to the development of skills and talents, building capacity in parents!

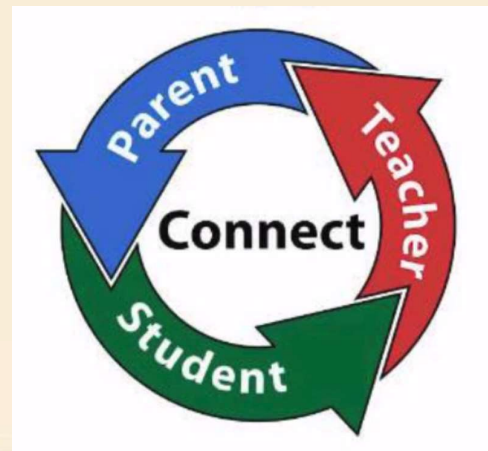
“A school striving for family involvement often leads with its mouth—identifying projects, needs, and goals and then telling parents how they can contribute. **A school striving for family engagement, on the other hand, tends to lead with its ears—listening to what families think, dream, and worry about. The goal of family engagement is not to serve clients but to gain partners.**”

Ferlazzo & Hammond, 2009

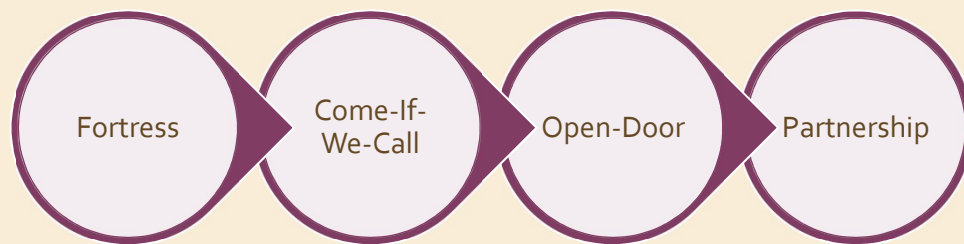
Family Involvement



Family Engagement



Four Types of Schools



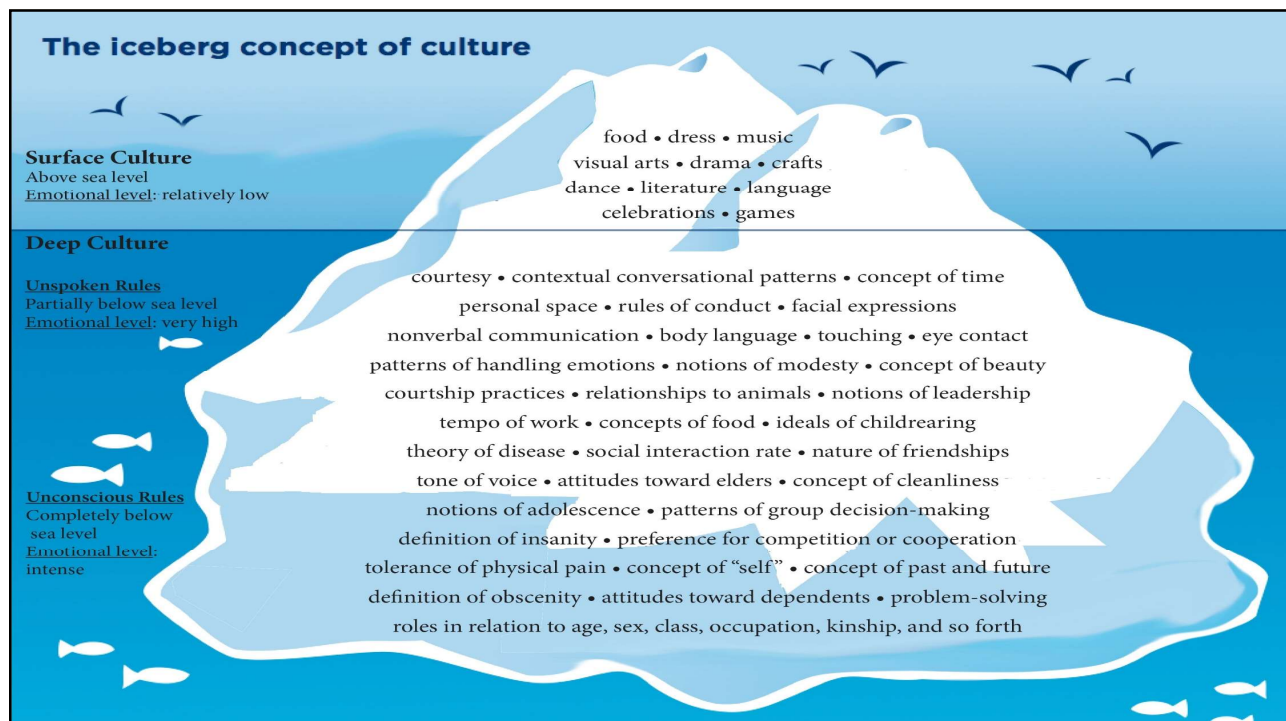
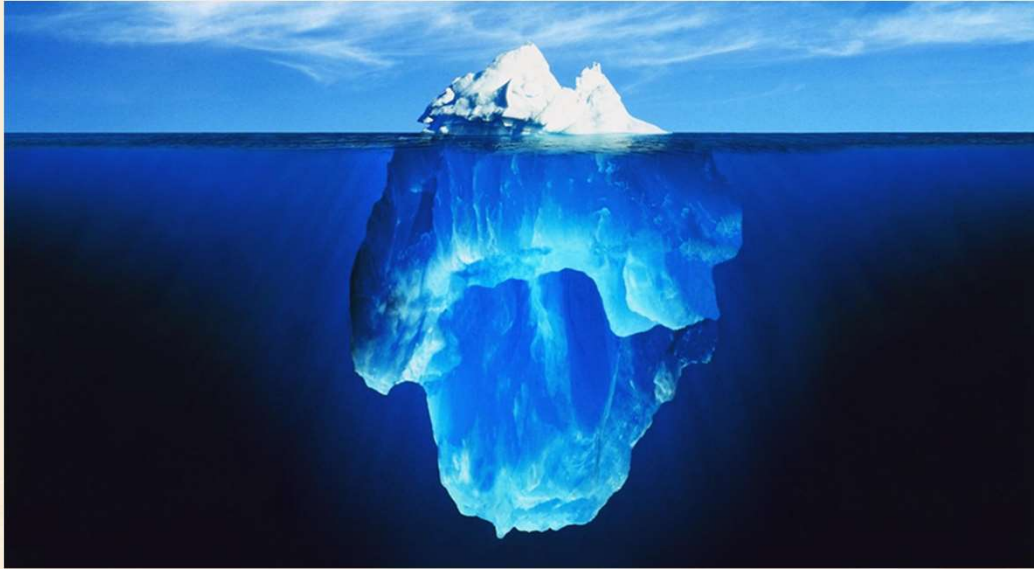
One in every four children in Texas live in poverty.

What should you know about your families to be effective?

- Know why they are not involved
- Home life structure
- Culture
- Empathy for situation
- History of parent/child trauma
- How to establish a relationship without crossing boundaries

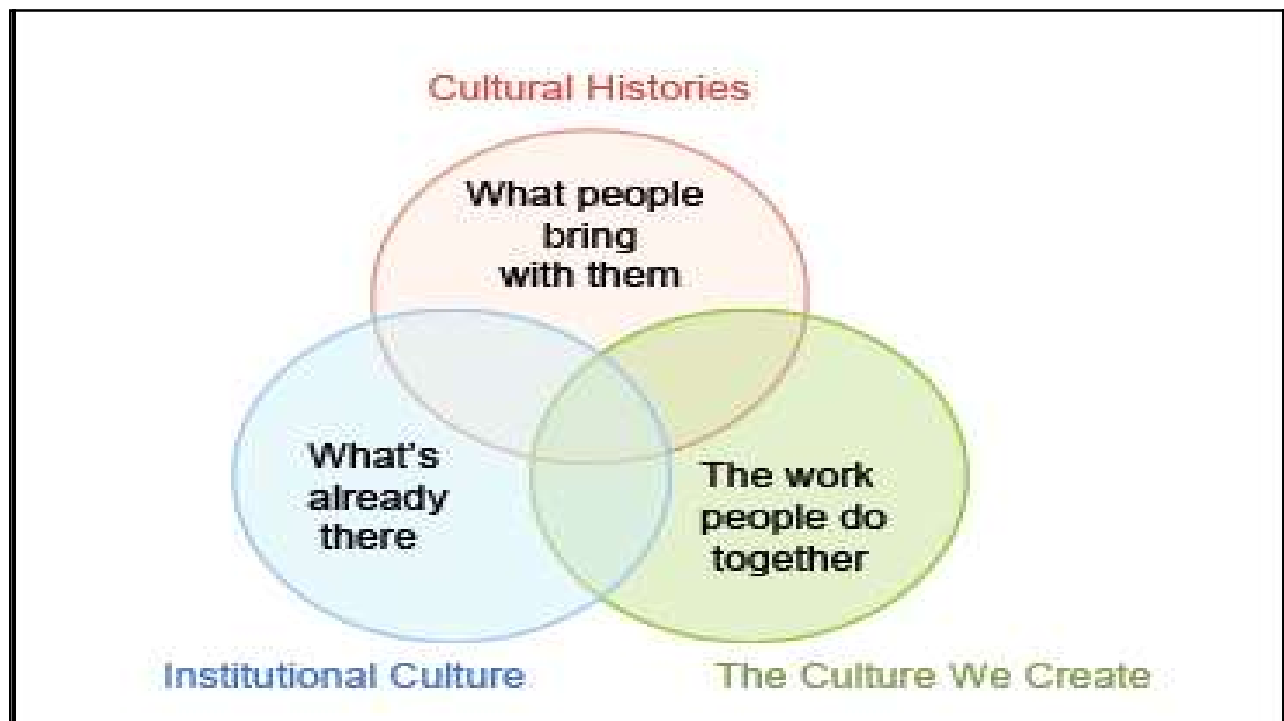
Source: State of Texas Children, 2016

The Iceberg Concept of Culture



Culture and trauma

- How the family and child communicate
- How the family responds to the trauma (shame, guilt, blame, denial, acceptance)
- Any stress or vulnerability the child and/or family is experiencing because of their culture (discrimination, stereotyping, poverty, less access to resources)
- How the child and family feel about interventions regarding the trauma



(what people bring with them)		(what's already there)	
Home Culture		vs	School Culture
Improvisation			Standardization
Multi-Tasking			Single Task
Relationships			Task Completion
Storytelling			Print Literacy
Direct Command			Indirect Command
Where culture mismatch resides and assumptions arise			



How might being ACEs informed impact your interactions with parents/children/staff/colleagues?





**Fighting
ACEs
Community
Empowerment
Summit**

Save the Date!

Thursday, October 4, 2018

9:00 AM – 4:00 PM

Grace Church – 5214 Stone Lake Drive

For more information: www.eccwf.org click on FACES

The Early Childhood Coalition of the Greater Wichita County Area invites you to join us in the fight against Adverse Childhood Experiences! We are excited to bring in Laura Porter, an expert in working with communities on this topic, for the big event! We need people and organizations who serve families and children in our community to step forward and help us create a community plan to decrease vulnerabilities of our children! Please be a part of this exciting event by attending!

Event sponsors and steering committee lists are available on the coalition website listed above!

Powerful partnerships result in...

- positive benefits for educational engagement, work habits, task orientation, social skills, and academic achievement.
- long-term outcomes in social-emotional competence.
- increased trust between parents and teachers, as well as increased parent commitment to helping their children with academics.
- higher academic achievement.
- completion of high school.



NCSEAM Communication Module

Compassion Fatigue: Trauma experienced by those who help others

Symptoms of compassion fatigue

- Irritability
- Apathy
- Loss of Motivation
- Fatigue
- Overwhelmed
- Loss of interest in things you enjoy
- Intrusive thoughts (especially about work)

Tips to avoid compassion fatigue

- Maintain a work/life balance
- Eat healthy
- Exercise
- Maintain a good support system
- Don't be afraid to feel emotions
- Never be afraid to laugh

“Mutual caring relationships require kindness and patience, tolerance, optimism, joy in the other’s achievements, confidence in oneself, and the ability to give without undue thought of gain.”

Fred Rogers



Ready to advocate against toxic stress?

Be inspired to cultivate relationships to combat the effects of ACEs!



Thank you!

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Sources and Resources

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[Resilience: The Biology of Stress & The Science of Hope](https://kpjrfilms.co/resilience/) (2016) Documentary
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Sacks, Vanessa and Murphey, David (2018). *The prevalence of adverse childhood experiences, nationally, by state, and by race/ethnicity*. Child Trends Research Brief.

Texas Department of Family and Protective Services Trauma Informed Care Training
http://www.dfps.state.tx.us/Training/Trauma_Informed_Care/