Adverse Childhood Experiences & Trauma Informed Environments

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Executive Director of the Adler Institute on Public Safety & Social Justice
• Clinical and Community Psychology
• Delinquency & Violence Prevention
• Evaluation, Creating Best Practices
• Training Outreach Workers Psychological First Aid & Communication Skills to Stop Shooting
• People most affected by trauma are most likely to perpetrate and fall victim to violence.

• If we want to stop the cycle of violence, we need to do what we know works.

• Meaningful human connection, investment in human potential, being a part of a community

Hurt People Hurt People
EARLY CHILDHOOD
HIPPOCAMPUS
CONTROLS EMOTIONAL REACTIONS, CONSTRUCTS VERBAL & SPATIAL MEMORY
SENSITIVE TO ALL FORMS OF MALTREATMENT IN FIRST 2-3 YEARS OF LIFE, ESPECIALLY SEXUAL ABUSE

ADAPTATION
*EMOTIONALLY REACTIVE – BRAIN’S BRAKING MECHANISM FAILS
*POOR REGULATION OF BEHAVIOR
*DIFFICULTY WITH VERBAL & SPATIAL MEMORY
*NET VOLUME LOSS BECOMES EVIDENT IN 20S.

MIDDLE CHILDHOOD
CORPUS COLLOSUM
INTEGRATES HEMISPHERES & FACILITIES INCLUDING LANGUAGE DEV., MATH ABILITY, AND PROCESSING SOCIAL CUES SUCH AS FACIAL EXPRESSIONS
SENSITIVE TO NEGLECT IN INFANCY SEX ABUSE AT AGES ~9&10

ADOLESCENCE – THE CORTEX
CENTER FOR THINKING & JUDGEMENT, EXECUTIVE FUNCTION, LONG TERM MEMORY, & VISION SENSITIVE TO WITNESSING VIOLENCE, AND SEX ABUSE
ADAPTATION
*POOR EXECUTIVE FUNCTION * IMPULSIVENESS
*DIMINISHED ABSTRACT REASONING * DIMINISHED HOPE * LIMITING FIELD OF VISION

TR ÀMA IS HARD-WIRED INTO BIOLOGY

Laura Porter, 2011
• The ACE Study is ongoing collaborative research between the Centers for Disease Control and Prevention in Atlanta, GA, and Kaiser Permanente in San Diego, CA.

• Data from over 17k participants reveals staggering proof of the health, social, and economic risks that result from childhood trauma.
  
  Vincent Felitti, M.D., 2012

What is The ACE Study?
A HISTORY OF THE FOLLOWING BY AGE 18:

- Physical, Emotional, or Sexual Abuse
- Physical or Emotional Neglect
- Mental Illness
- Prison
- Domestic Violence
- Divorce or Parental Loss
- Substance Abuse

What ACEs Were Measured?
## Prevalence Percentiles of Adverse Childhood Experiences

### Abuse, by Category
- Psychological (by parents) 11%
- Physical (by parents) 28%
- Sexual (anyone) 22%

### Neglect, by Category
- Emotional 15%
- Physical 10%

### Household Dysfunction, by Category
- Alcoholism or drug use in home 27%
- Loss of biological parent < age 18 23%
- Depression or mental illness in home 17%
- Mother treated violently 13%
- Imprisoned household member 5%

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Vincent Felitti, M.D., 2012
• 2/3 experience at least one category of ACEs

• If any one ACE is present, there is an 87% chance at least one other category of ACE is present, and a 50% chance that there will be 3 or more.

• WOMEN ARE 50% MORE LIKELY TO HAVE A SCORE OF >5.

Vincent Felitti, M.D., 2012
People with 6 ACES die, on average, 20 years sooner than those with zero.
OLDER CHILDREN – WA High School Sophomores and Seniors

Population
Average:
43% have 3 or more ACEs
as compared with
26% of WA Adults

Washington School Classroom (30 Students)
Adverse Childhood Experiences (ACEs)

6 students with no ACE
5 students with 1 ACE
6 students with 2 ACEs
3 students with 3 ACEs
7 students with 4 or 5 ACEs
3 students with 6 or more ACEs

58% (17) students with no exposure to physical abuse or adult to adult violence
29% (9) of students exposed to physical abuse or adult to adult violence
13% (4) of students exposed to physical abuse and adult to adult violence
ACE Score & Child Suicide

Vincent Felitti, M.D., 2012
Childhood Experiences Underlie Chronic Depression

Vincent Felitti, M.D., 2012
ACE Score & Perpetration
Domestic Violence

Robert Anda, M.D., 2012
BEHAVIORAL HEALTH

Current Smoking

Risk for HIV

Laura Porter, 2012
A large portion of many health, safety and prosperity conditions is attributable to Adverse Childhood Experience.

ACE reduction reliably predicts a decrease in all of these conditions simultaneously.
How can the Y integrate this information?

- **Understanding**
  - The meaning and impact of the ACEs study
  - The importance of providing a trauma informed environment (TIE)

- **Policies**
  - Review Y policies
  - Is there room to incorporate the ACEs and TIE knowledge into the Y fabric

- **Discipline**
  - Incorporate discipline practices that improve safety and a sense of responsibility and interconnectedness between all Y community members

- **Referrals**
  - Does the Y have the right referral information in place to use as ACEs are presented, and do staff feel comfortable working with families to make referrals?

- **Family Communications**
  - Sharing this information with Y families to help prevent and respond to ACEs
Ways the Y can promote resilience for the walking wounded:

• A trustworthy person that a child can talk to about their true situation and feelings

• Understand the importance of reframing the situation for a child describing or explaining their ACEs situation (e.g. a 9 year old is not responsible for their parent’s drinking behavior)

• Helping children and their families to have hope

The Y can ensure their programming allows for Y staff flexibility to assess and respond by:

• Shifting conversations from “What’s wrong with you?” to “What happened to you?”

• Being sensitive to ACEs and trauma and how common it is

• Flexibility and knowledge to understand how to meet the needs of all people

Promoting Resilience