The Power of Healing Relationships
Building Resilience: Trauma-Informed Training
*It Takes a Village* Conference

February 8, 2018

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Learning Objectives

- Define the ACEs Sciences (epidemiology, neurobiology, toxic stress, epigenetics, resilience) on impact of trauma
- Building trust: with families, with providers, with systems
- Community and Family Engagement: Resilience Building
- Enhance mindfulness coping skills and self-compassion
Define the ACEs Sciences (epidemiology, neurobiology, toxic stress, epigenetics, resilience) on impact of trauma

- Neuroscience: Neuroscience gives us a map of how the brain and body work together.
- Attachment: Clearing attachment wounds and unresolved trauma is a key to growth and healing.
- Trauma: The causes, impacts, and latest methods for the resolution of trauma.
- Mindfulness: Learn how to develop presence, inner peace, and to connect with others.
ACEs Science is the Foundation

**Epidemiology**
- The ACE Study and expanded ACE surveys

**Impact on the Brain**
- The neurobiology of toxic stress caused by ACEs on children’s developing brains

**Impact on the Body**
- The short- and long-term health consequences of toxic stress

**Epigenetics**
- How the effects of ACEs are passed on from generation to generation

**Resilience**
- The brain is plastic and the body wants to heal
What you should know about

ACEs

ACEs Primer (4.59 minutes video) on Vimeo
Many individuals and families have experienced Acute, Chronic, Complex, and/or System-Induced Trauma which create Toxic-Stress and Impact their well-being and capacity to thrive.

ACE Study: Adverse Childhood Experiences
http://www.cdc.gov/violenceprevention/acestudy/about.html
The impact of stress on our brain

Source: Dr. Harry Chugani M.D., Chief, Division of Pediatric Neurology, Director, Positron Emission Tomography (PET) Center, Children’s Hospital of Michigan
Adverse Childhood Experiences
# PTSD at Different Ages

<table>
<thead>
<tr>
<th>Preschool</th>
<th>School-Aged</th>
<th>Adolescence</th>
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<tbody>
<tr>
<td>Regress in functioning</td>
<td>Fears and anxieties</td>
<td>Somatic complaints</td>
</tr>
<tr>
<td></td>
<td>- losing bladder and bowel control</td>
<td>Social problems</td>
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<td></td>
<td>- irritable and crying</td>
<td>- withdrawal or aggression</td>
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<td></td>
<td>- sucking thumbs</td>
<td>- substance abuse</td>
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<td></td>
<td>- fears, separation anxiety</td>
<td>- delinquency</td>
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<tr>
<td></td>
<td>- eating and sleeping problems</td>
<td>Loss of appetite and sleep</td>
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<td>Reenact the trauma through play</td>
<td>School problems</td>
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<tr>
<td></td>
<td></td>
<td>- failure, drop-out</td>
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<td></td>
<td></td>
<td>Suicidal thoughts</td>
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</tbody>
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Insufficient Sleep ≥21 of 30 Days

http://www.healthygen.org/sites/default/files/Workforce%20June%202014%20LI_HealthyGen.pdf
Missed Work ≥30 Days Due to Mental Health

http://www.healthygen.org/sites/default/files/Workforce%20June%202014%20LI_HealthyGen.pdf
ACE Score and Indicators of Impaired Worker Performance

Original ACE Study; Used with Permission: ACE Interface LLC

http://www.healthygen.org/sites/default/files/Workforce%20June%202014%20LI_HealthyGen.pdf
The ACE Score and Difficulty Controlling Anger

Percent who have anger problems (%)

ACE Score

Original ACE Study; Used with Permission: ACE Interface LLC

http://www.healthygen.org/sites/default/files/Workforce%20June%202014%20LI_HealthyGen.pdf
ACEs and Co-Occurring Problems

Health & Social Problems
- Panic Reactions
- Depression
- Anxiety
- Hallucinations
- Sleep Disturbances
- Severe Obesity
- Pain
- Smoking
- Alcoholism
- Illicit Drug Use
- IV Drug Use
- Early Intercourse
- Promiscuity
- Sexual Dissatisfaction
- Amnesia (Childhood)
- Problems with Anger
- Perpetration of Family Violence

Mean # of Co-Occurring Outcomes

ACE Score
The Centers for Disease Control and Prevention (CDC) listed the ACEs questions as an “Optional Module” for states and territories to administer through the Behavioral Risk Factor Surveillance System (BRFSS) since 2009.
• Building trust: with families, with providers, with systems
Understanding the experience of the abused and neglected child assists us to develop compassion, patience and empathy. It is a key intervention in itself.
Communities and Trauma Informed Care (2 minutes - Dr. Robert Macy)
A Trauma-Informed Care Organization Includes:

Safe, calm and secure environment with supportive care
System wide understanding of trauma prevalence, impact and trauma informed care
Cultural Competence
Consumer voice, choice and self-advocacy
Recovery, consumer-driven and trauma specific services
Healing, hopeful, honest and trusting relationships
ESTRÉS Y EL DESARROLLO TEMPRANO DEL CEREBRO
Entendiendo las experiencias adversas en la infancia (ACE)

¿Qué son las experiencias adversas en la infancia (ACE)?
Las experiencias adversas en la infancia son grutas fuertes de la niñez — a continuación se muestra una lista — que producirán células blancas que, a su vez, pueden dañar el cerebro de un niño. Estas células blancas pueden impedir que un niño aprenda, incluso de manera más serio con niños más pequeños, y puedo generar problemas de salud a largo plazo.

¿Cómo afectan las salud las experiencias adversas en la infancia?
Las experiencias adversas en la infancia pueden incluir:
1. Abuso emocional
2. Abuso físico
3. Abuso sexual
4. Estrés emocional
5. Estrés físico
6. Violencia entre padres
7. Alcoholismo o adicción en el hogar
8. Encarcelamiento en el hogar
9. Separación o divorcio de los padres
10. Perdió un miembro de la familia
11. Inmigración para niño a un adulto
12. Ser herido de violencia fuera del hogar
13. Ser herido del abuso de un humano o animal
14. Raza, sexo o cualquier otra forma de discriminación
15. Encarcelamiento en el hogar
16. Desastres naturales y guerra

La exposición a experiencias adversas en la infancia puede aumentar el riesgo de:
- Enfermedades en la adultez
- Alcoholismo y el abuso de alcohol
- Deprivación
- Consumo de drogas
- Enfermedades del corazón
- Enfermedades del pulmón
- Enfermedades de la piel
- Violencia y agresión
- Enfermedades de la transmisión sexual
- Enfermedades mentales
- Trastornos de la alimentación
- Enfermedades no diagnosticadas

¿Cómo afectan las experiencias adversas en la infancia?
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- Violencia y agresión
- Enfermedades de la transmisión sexual
- Enfermedades mentales
- Trastornos de la alimentación
- Enfermedades no diagnosticadas

La exposición a experiencias adversas en la infancia puede aumentar la frecuencia cardíaca
- Ansiedad
- Abuso emocional
- Abuso físico
- Abuso sexual
- Estrés emocional
- Estrés físico
- Violencia entre padres
- Alcoholismo o adicción en el hogar
- Encarcelamiento en el hogar
- Separación o divorcio de los padres
- Perdió un miembro de la familia
- Inmigración para niño a un adulto
- Ser herido de violencia fuera del hogar
- Ser herido del abuso de un humano o animal
- Raza, sexo o cualquier otra forma de discriminación
- Encarcelamiento en el hogar
- Desastres naturales y guerra

¿Qué es la resiliencia?
La resiliencia es el la capacidad de aprender de experiencias adversas. Al aprender de experiencias adversas, uno puede desarrollar la capacidad de dar un nuevo nombre a una experiencia traumática y darle un propósito. La resiliencia es esencial para una vida saludable. Es la capacidad de superar el trauma y volver a ser un ser humano fuerte y saludable.

¿Qué hace la resiliencia look like?
1. Cobertura revisada para problemas del aprendizaje y el comportamiento
2. Reducción de problemas de salud duraderos
3. Mayor confianza en la autoestima
4. Mayor confianza en la autoestima
5. Mejor salud mental
6. Mejor salud física
7. Mejor salud emocional
8. Mejor salud social
9. Mejor salud escolar
10. Mejor salud laboral

RESOURCES:
ACES 101


Triple P Parenting
www.DelphiParenting.net

Resilience Trumps ACEs
www.accesconnection.com

EDC-Gilmer Advices Childhood: Experiences Study
http://www.edc.gov/WEBSITE/bh183/acs-education-23

Zero to Three Goals for Parenting


The good news is resilience can bring back health and hope!
# 123 CARE
A Trauma-Sensitive Toolkit for Caregivers of Children

## AGE

<table>
<thead>
<tr>
<th>0-1 yr</th>
<th>1-3 yrs</th>
<th>3-5 yrs</th>
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<tbody>
<tr>
<td><strong>TRIGGERING EVENT</strong></td>
<td>Unexpected changes in routines or caregivers</td>
<td>Unexpected changes in routine or transitions</td>
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<tr>
<td></td>
<td>Local, unexpected noises</td>
<td>Stranger</td>
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<tr>
<td></td>
<td>Strong emotions (often anger)</td>
<td>Crowds, disorder, and chaotic environments</td>
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<tr>
<td><strong>DEVELOPMENTALLY-APPROPRIATE BEHAVIOR</strong></td>
<td>Startle, but is able to self-soothe (cues hands, suck)</td>
<td>Story, but is able to be comforted by caregivers</td>
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<tr>
<td><strong>FLIGHT</strong></td>
<td>Excessive sleeping with difficulty arousing</td>
<td>Cry incoherently, caregiver may be unable to soothe</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Avoid eye contact</td>
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<tr>
<td></td>
<td></td>
<td>Crawl or move away</td>
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<tr>
<td><strong>FREEZE</strong></td>
<td>Pull-looking face and eyes</td>
<td>Look away (disengage)</td>
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<tr>
<td></td>
<td></td>
<td>Sleep a lot</td>
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### What is the Need Behind the Behavior?

- Nap time, which can lead to tantrums or aggression
- Fear of strangers
- Engage in parallel play rather than group play
- Easily excited about their world
- Easy to engage but can be shy
- Easily frustrated, which can lead to tantrums or aggression
- Curious about strangers
- Watchful when they perceive adult anger
- Need comfort items
- Avoid eye contact
- Crawl or move away
- Pull & push away
- Look away (disengage)
- Sleep a lot
- Unresponsive, does not appear to hear or understand
- Difficulty with learning activities

### TRIGGER: an event or situation that results in negative and/or disturbing feelings – feelings of being frightened or unsafe.

- Nap time, which can lead to tantrums or aggression
- Curious about strangers
- Watchful when they perceive adult anger
- Need comfort items
- Avoid eye contact
- Crawl or move away
- Pull & push away
- Look away (disengage)
- Sleep a lot
- Unresponsive, does not appear to hear or understand
- Difficulty with learning activities

### Suggestions for Trauma-Sensitive Care

- Provide consistent routines
- Provide consistent caregivers
- Allow comfort items (blanket, stuffed animals)
- Be physically and emotionally available through challenging feelings / behaviors
- Verbalize sympathy
- Help identify and label feelings
- Minimize power / control and focus on collaboration with the child
- Encourage movement and exercise
- Teach them to slow their breathing games like breathing in and out, breathing in the small of their back
- Allow extra time for children to prepare for transitions
- Allow children to take breaks from activities as needed
- Give children verbal warnings 5-10 minutes prior to transitions
- Allow comfort items (blankets, stuffed animals)
- Slow sensitivity to children’s cues

### Triggering Event: something that triggers a person or makes them feel threatened

- Nap time, which can lead to tantrums or aggression
- Curious about strangers
- Watchful when they perceive adult anger
- Need comfort items

### Freeze: something that triggers a person to move away from the person thought to be a threat

- Nap time, which can lead to tantrums or aggression
- Curious about strangers
- Watchful when they perceive adult anger
- Need comfort items

### Fight: something that triggers a person to move toward the person thought to be a threat

- Nap time, which can lead to tantrums or aggression
- Curious about strangers
- Watchful when they perceive adult anger
- Need comfort items

### Flight: something that triggers a person to move away from the person thought to be a threat

- Nap time, which can lead to tantrums or aggression
- Curious about strangers
- Watchful when they perceive adult anger
- Need comfort items

## Additional Resources

- [Parenting with ACEs Toolkit](http://www.acesconnection.com/g/Parenting-with-ACEs/clip/123-care-a-trauma-sensitive-toolkit-for-caregivers-of-children-wa-2016)

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Non Trauma Informed:
- Power over
- You can’t change
- Judging
- People need fixing first
- Operate from the dominant culture
- People are out to get you
- Right/wrong
- Helping
- “You’re crazy!”
- Compliance/obedience
- Need-to-know basis for info
- Presenting issue
- “Us and them”
- Labels, pathology
- Fear-based
- I’m here to fix you
- Didactic
- People make bad choices
- Behavior viewed as problem
- What’s wrong with you?
- Blame/shame
- Goal is to do things the ‘right’ way
- Prescriptive
- People are bad
- Consider only research and evidence

Trauma Informed Care:
- Power with
- Your brain is ‘plastic’
- Observing
- People need safety first
- Cultural humility
- People can live up to the trust you give them
- Multiple viewpoints
- Learning
- “It makes sense”
- Empowerment/collaboration
- Transparency and predictability
- Whole person and history
- We’re all in this together
- Behavior as communication
- Empathy-based
- Support healing
- Participatory
- People who feel unsafe do unsafe things
- Behavior viewed as solution
- What happened to you?
- Respect
- Goal is to connect
- Choice
- People are doing the best they can
- Consider also lived experience
Questions for audience (Pair Share)

- What does it feel like to be trauma-informed in a very difficult experience?

- How can families and providers continue to learn with each other?
• Community and Family Engagement: Resilience Building
All Roads Lead to Resilience

ROAD TO Concrete Support in Times of Need

ROAD TO Social Connections

ROAD TO Parental Resilience

ROAD TO Social & Emotional Competence

ROAD TO Knowledge of Parenting & Child Development

Happy Family
Compassionate Communication*

- Relax
- Stay Present
- Cultivate inner silence
- Increase positivity
- Reflect on your deepest values
- Access a pleasant memory
- Observe nonverbal cues
- Express appreciation
- Speak warmly
- Speak slowly
- Speak briefly
- Listen Deeply

*Words Can Change Your Brain by Newberg & Waldman
www.circle-space.org/2014/04/25/circle-keeping-restorative-justice-brain-science-connections/
How Resilience Is Built (2 minutes - Harvard Center for Developing Child)
Resilience is the process of adapting well in the face of adversity, trauma, tragedy, threats or significant sources of stress. It means “bouncing back” from difficult experiences.

Resilience through socio-ecological model

Self-Efficacy (Individual)

(Microsystem & Exosystem)

Image: beyondblue.org.au
● Enhance mindfulness coping skills and self-compassion
Self-Compassion versus Compassion Fatigue

The Three Elements of Self-Compassion
1. SELF-KINDNESS
2. COMMON HUMANITY
3. MINDFULNESS

Relaxing Music to Beautiful Nature
22 Things to Put in Your 'Self-Soothing' Kit (themighty.com)

"A blank journal and a pen. Sometimes the best thing to do when you feel anxious, depressed, hopeless — or simply nothing at all — is to write. The act of writing forces you focus (always a good thing when you're trying to calm your heart) and organize your thoughts into coherent sentences. Pouring your worries onto paper keeps them from continually rattling around in your head and instead gives you a place from which to view them objectively." — Sydney W.
Mindfulness Practice: Desk Chair Meditation (10 minutes - mindful.org)

http://www.acesconnection.com/clip/mindfulness-practice-desk-chair-meditation-10-minutes-mindful-org
How To Meditate with Noise: A 3-Minute Practice for Anywhere (mindful.org)
Facilitating Your Mindfulness Practice

Use these questions to facilitate your mindfulness practice:

1. What do I need in the moment to support positive thinking?
2. What self-care practices will help me to be best prepared to care for those I serve?
3. How can I balance my needs with the needs of those I serve?
4. How can I maintain an open and appreciative stance when interacting with colleagues and clients?
5. What helps me to genuinely connect to the people I serve as they share their concerns and thoughts?
Resources

- **ACEs 101** – FAQs about adverse childhood experiences research with links to reports, stories and videos.

- **Got Your ACE Score?** – Do your ACE score and your resilience score, and find out more about the consequences of each.

- **ACEsTooHigh.com** – A news site for the general public. It covers research about ACEs and how people, organizations, agencies and communities are implementing trauma-informed, resilience-building practices based on ACEs research.

- **ACEsConnection.com** – A social network for people who are implementing – or thinking about implementing – trauma-informed and resilience-building practices based on ACEs research.

- **The CDC-Kaiser Permanente ACE Study** – The official ACE Study site, provided by the CDC.

- **The Center on the Developing Child at Harvard University** – Here, take a deep dive into a site rich with reports, tools and videos about the neurobiology of toxic stress and resilience.

- **SAMHSA’s Concept of Trauma and Guidance for a Trauma-Informed Approach** -- Introduces a concept of trauma and offers a framework for how an organization, system, or service sector can become trauma-informed. Includes a definition of trauma (the three "E's"), a definition of a trauma-informed approach (the four "R's"), 6 key principles, and 10 implementation domains.