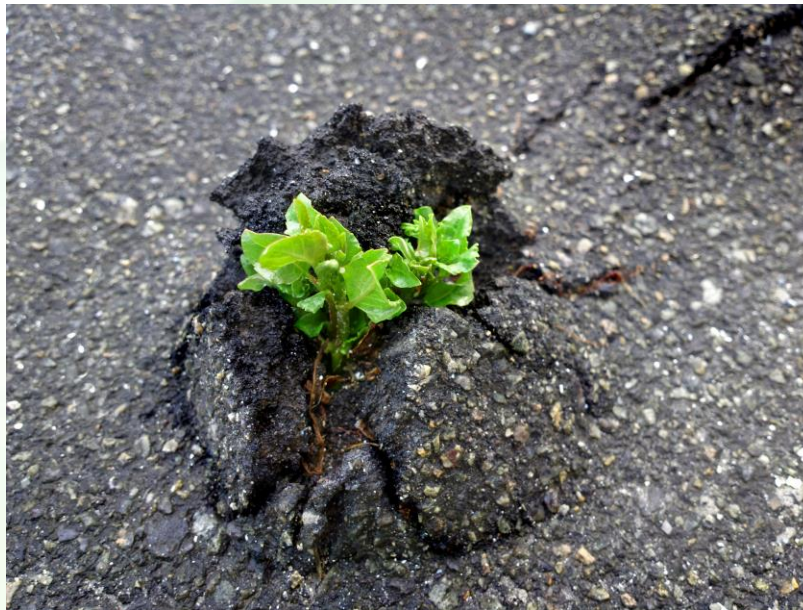# Trauma Past, Trauma Present: Relevance of Trauma to Professionals Working with Victims and Their Families
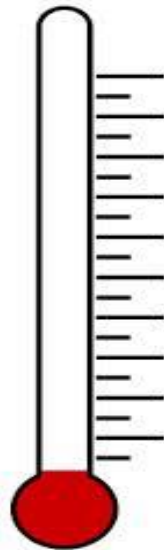

Dr. Allison Sampson-Jackson
LCSW, LICSW, CSOTP
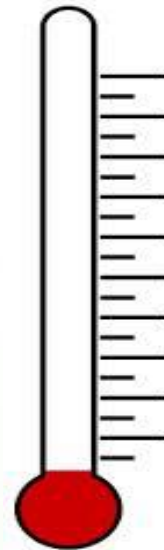Integration Solutions, Inc.

integration
solutions

Engaging the Whole Brain

- **Oscillation every 90 minutes**

0-10   0-10

Before Brain Gym   **After Brain Gym**

http://www.lisaferentz.com

Impact to Right and Left Hemisphere Talk
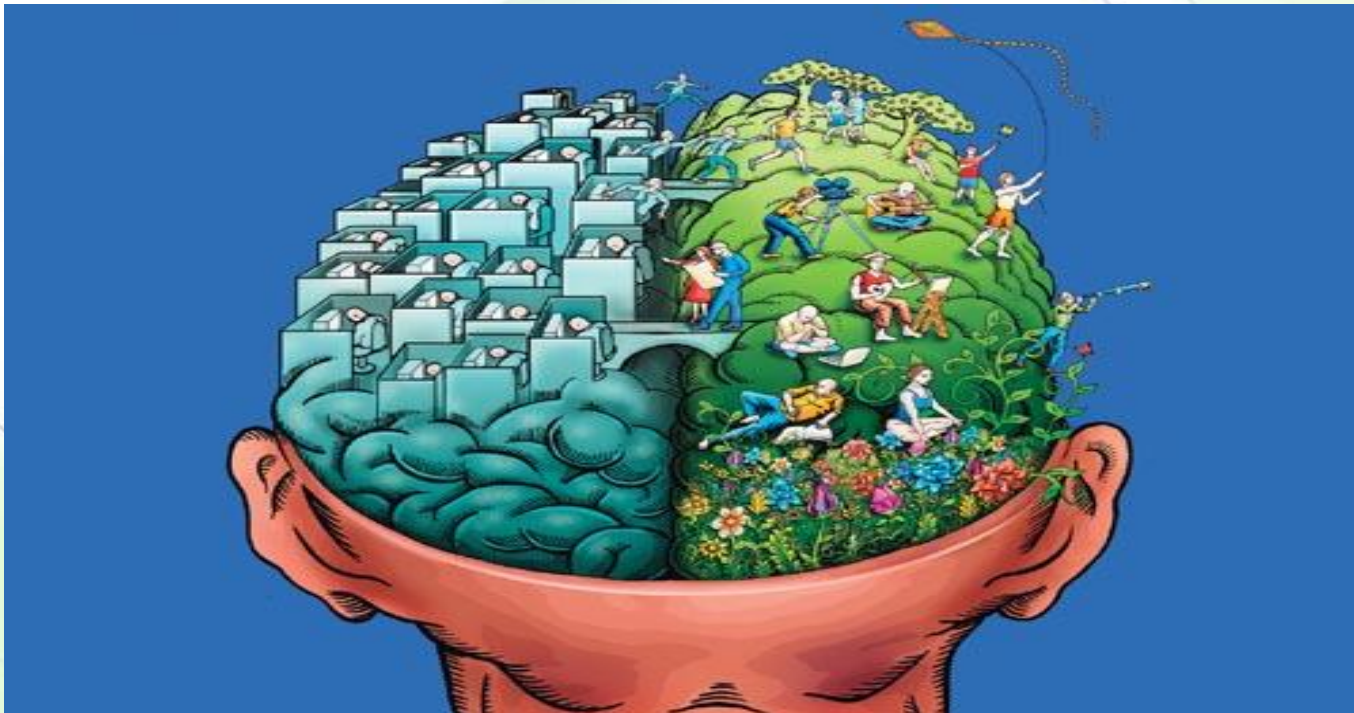
BLUE YELLOW BLACK
RED BLUE ORANGE
GREEN PURPLE RED
BLACK RED ORANGE
GREEN BLUE BLACK
RED PURPLE YELLOW

WHAT IS TRAUMA ?
WHY DOES IT MATTER?

Defining Trauma

Individual trauma results from an **event***, series of events, or set of circumstances that is* **experienced** *by an individual as physically or emotionally harmful or life threatening and that has lasting adverse* **effects** *on the individual's functioning and mental, physical, social, emotional, or spiritual well-being.*

- SAMHSA definition 2014

Exposure to Violence in Childhood

46 million of 76 million children are exposed to violence, crime and abuse each year
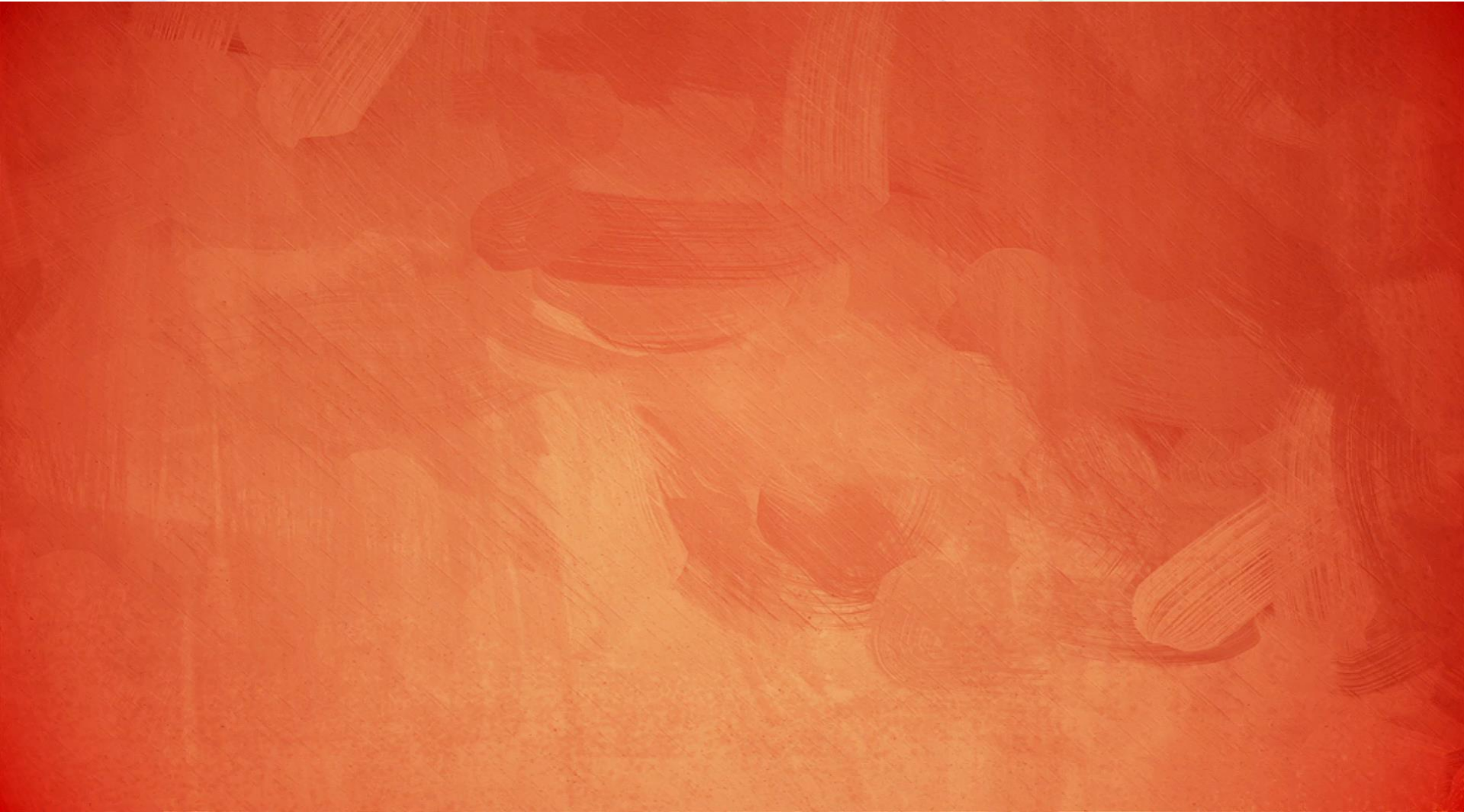
Finkelhor, D., et al. (2010). Trends in childhood violence and abuse exposure: evidence from 2 national surveys. *Archives of Pediatric and Adolescent Medicine, 164*(3), 238–242.

223,400,000

Commentary

Stumbling block to healthy adulthood

317,572,282

ADVERSE CHILDHOOD EXPERIENCES

- Alcoholism and alcohol abuse
- Chronic obstructive pulmonary disease (COPD)
- Depression
- Fetal death
- Health-related quality of life
- Illicit drug use
- Ischemic heart disease (IHD)
- Liver disease
- Risk for intimate partner violence
- Multiple sexual partners
- Sexually transmitted diseases (STDs)
- Smoking
- Suicide attempts
- Unintended pregnancies
- Early initiation of smoking
- Early initiation of sexual activity
- Adolescent pregnancy

Consequences of Lifetime Exposure to Violence and Abuse
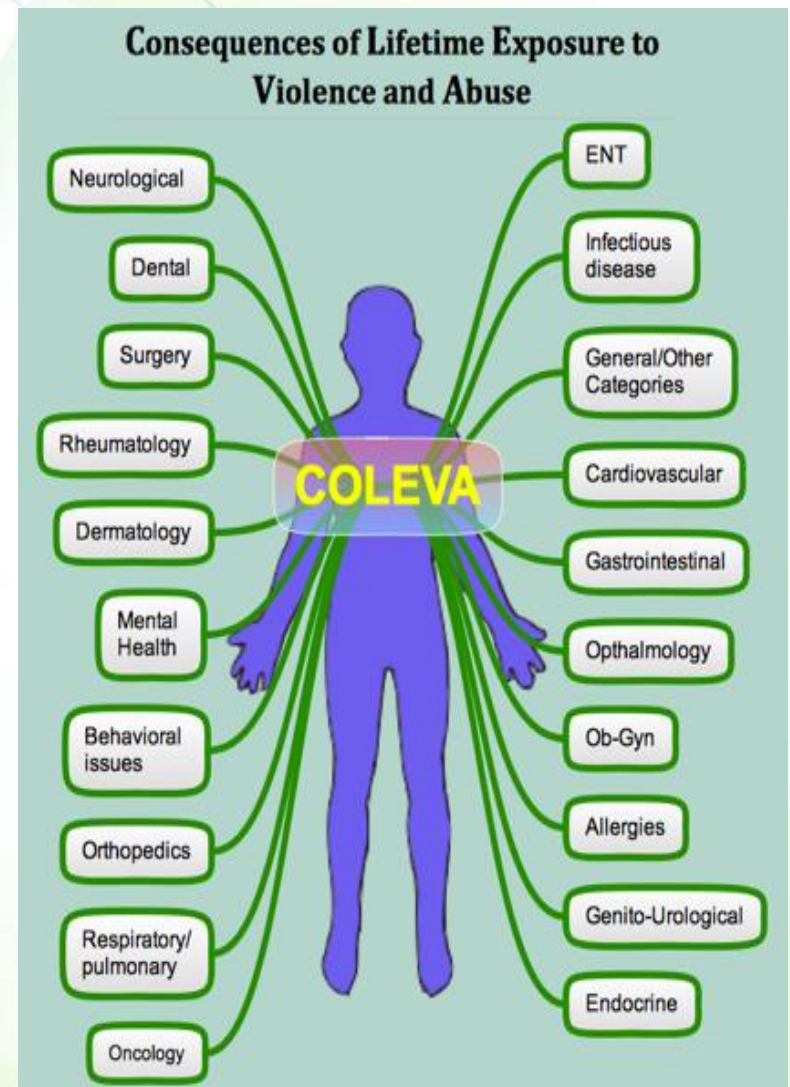
Shift from an ACE Score of 0 to 4 Population Health

- **242% more likely to smoke**
- **222% more likely to become obese**
- **357% more likely to experience depression**
- **443% more likely to use illicit drugs**
- **1133% more likely to use injected drugs**
- **298% more likely to contract an STD**
- **1525% more likely to attempt suicide**
- **555% more likely to develop alcoholism**

POPULATION ATTRIBUTABLE RISK

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.
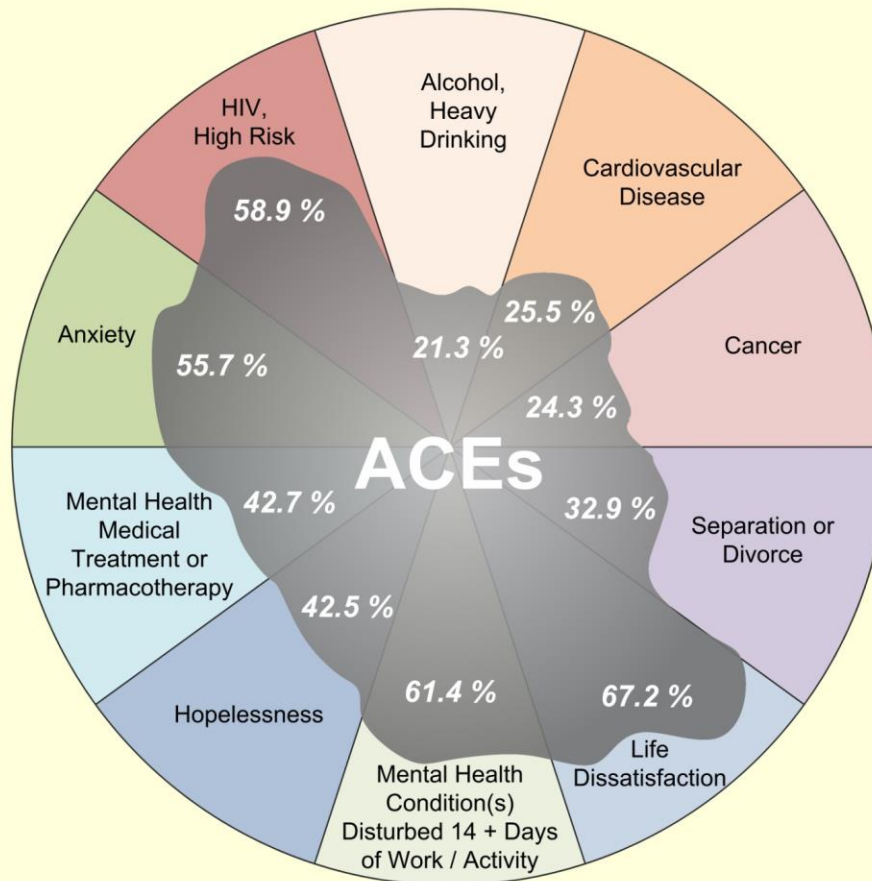
1 year of violence= 124 billion dollars in recovery costs

- The breakdown per child is: $210,012
- $32,648 in childhood health care costs
- $10,530 in adult medical costs
- $144,360 in productivity losses
- $7,728 in child welfare costs
- $6,747 in criminal justice costs
- $7,999 in special education costs

Trauma impacts
learning and academic outcomes

- Decreased IQ and reading ability (Delaney-Black et al., 2003)

- Lower grade-point average (Hurt et al., 2001)

- More days of school absence (Hurt et al., 2001)

- Decreased rates of high school graduation (Grogger, 1997)

- Increased expulsions and suspensions (LAUSD Survey)

Suspension and Expulsion

- Attachment to school and peers is correlated with school success and reduces likelihood of disciplinary involvement

- Suspended students are twice as likely to drop out of school and three times as likely to have contact with the juvenile justice system

Developing Trauma Informed Schools

Marleen Wong, Ph.D. LCSW

Senior Associate Dean and Clinical Professor

University of Southern California

USC School of Social Work

Principal Investigator, USC/LAUSD/RAND/UCLA

Trauma Services Adaptation Center

for Resilience Hope and Wellness in Schools and Communities

National Child Traumatic Stress Network

A Startling Number of Students Are Exposed to Violence
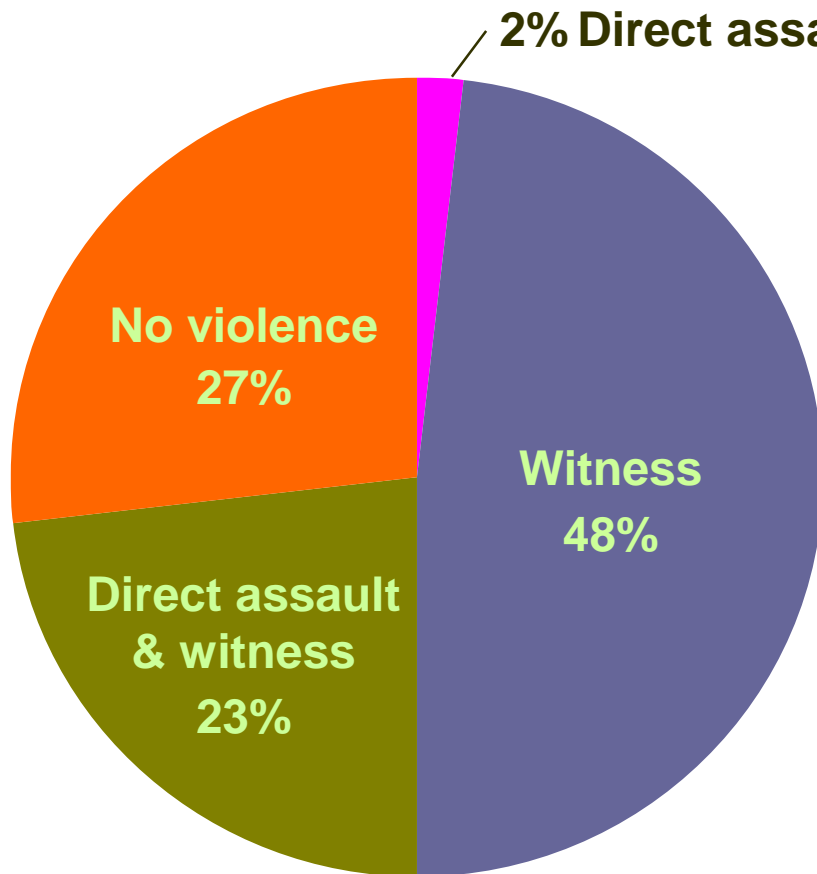
National Survey of Adolescents 1995

- 2% Direct assault
- Witness 48%
- Direct assault & witness 23%
- No violence 27%
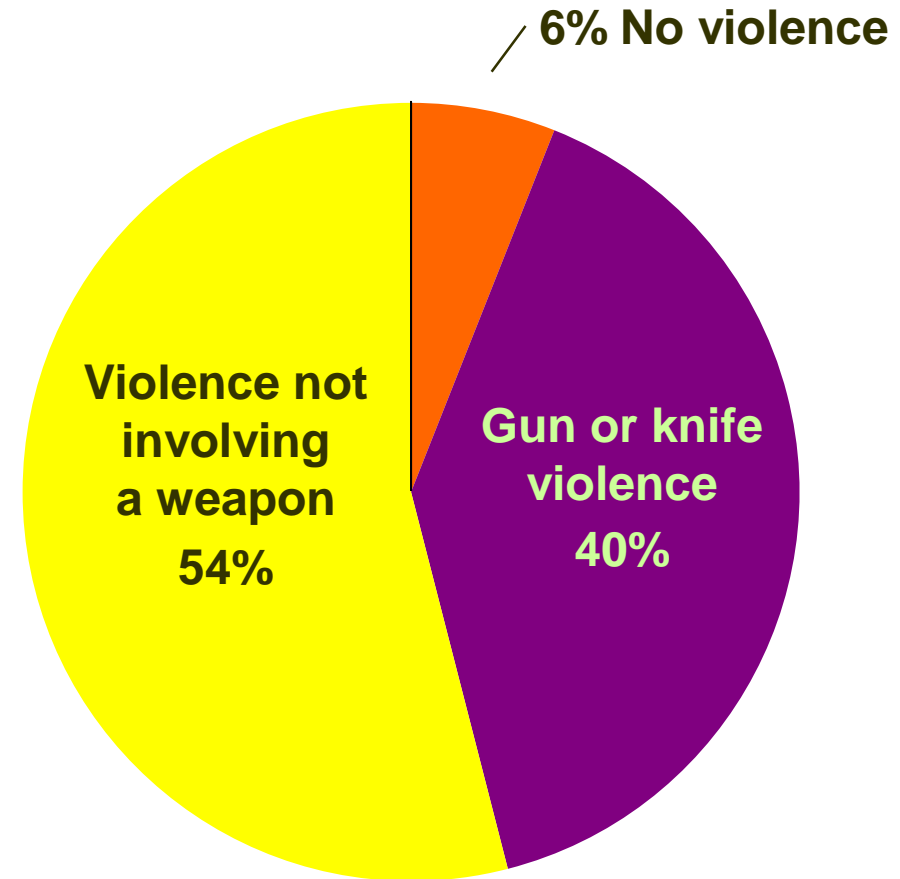
The LA Unified School District 6th-Grade Students, 2004
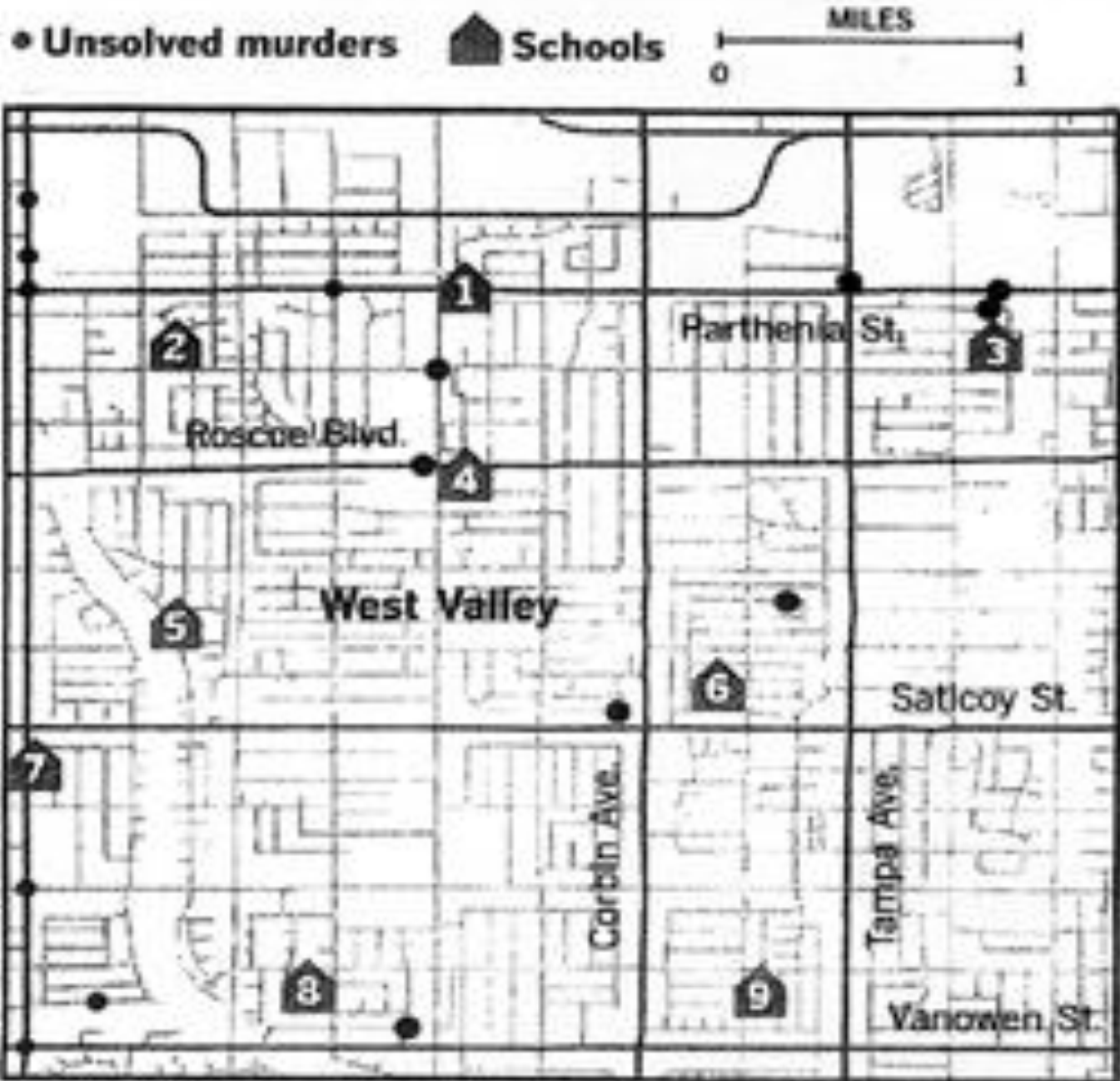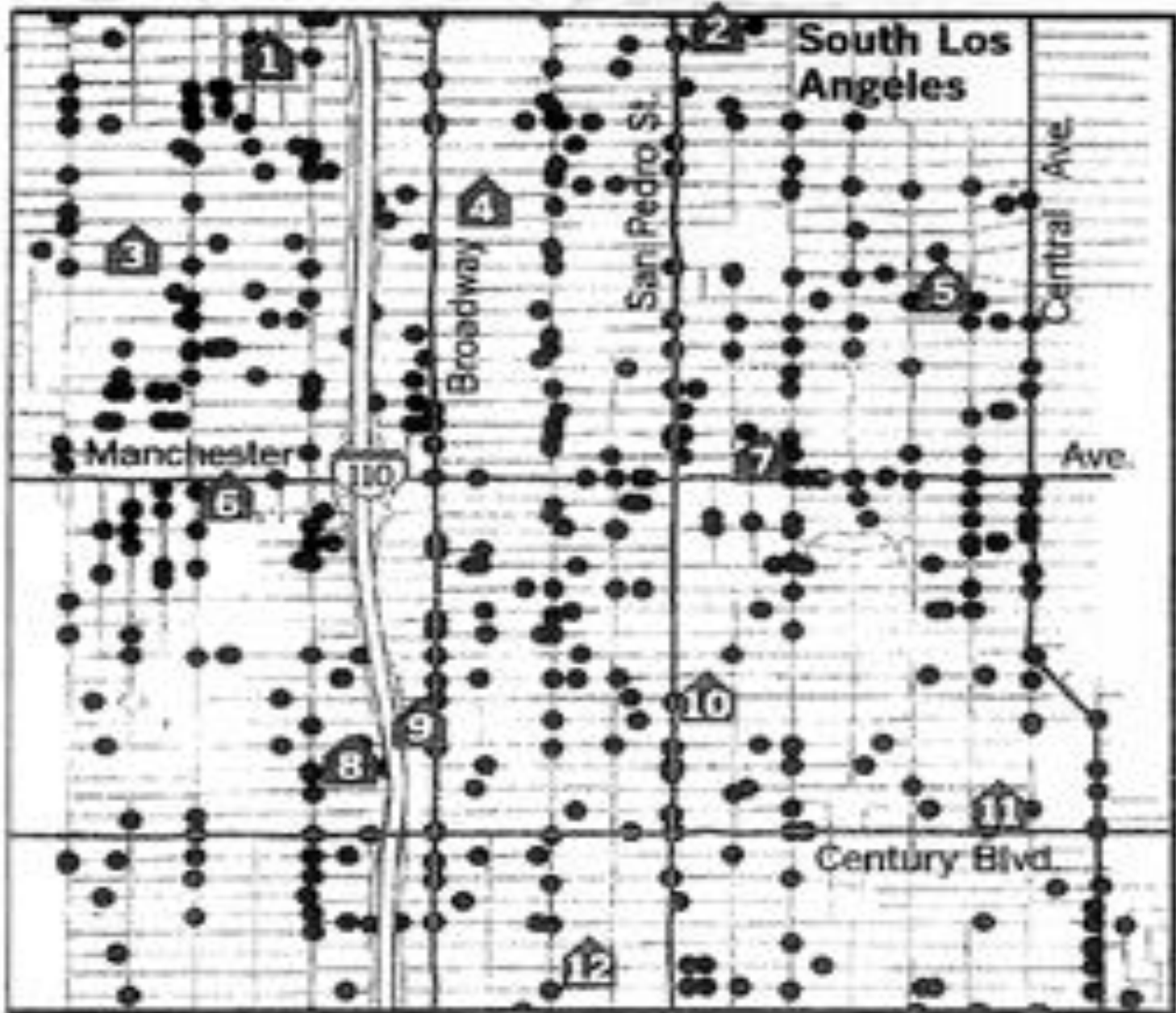
- 6% No violence
- Violence not involving a weapon 54%
- Gun or knife violence 40%

Lawsuit v. Compton Unified

- Class Action Suit
- Plaintiffs are students in High School
- Filed in Federal Court in May 2015
- Civil Rights Action
- Complaint: No 504 Accommodations for Students with Complex Trauma

Marleen Wong PhD University of Southern California

Impact of being in Child Welfare System for Foster Care Children

- 25% will be incarcerated within first 2 years of aging out of the system
- More than 20% will become homeless
- Only 58% will have a High School Diploma
- Less than 3% will have a college education by age of 25
- Many will re-enter the system as parents
- For children under age of 5, increase likelihood of developmental delays 13-62% compared to 4-10%

1) Conradi, L. (2012) Chadwick Trauma Informed System Project p. 54
2) Leslie et. al. (2005). *Developmental and Behavioral Pediatrics 26*(3), 177-185

ACE SUMMIT in California

TRAUMA'S IMPACT ON THE BRAIN
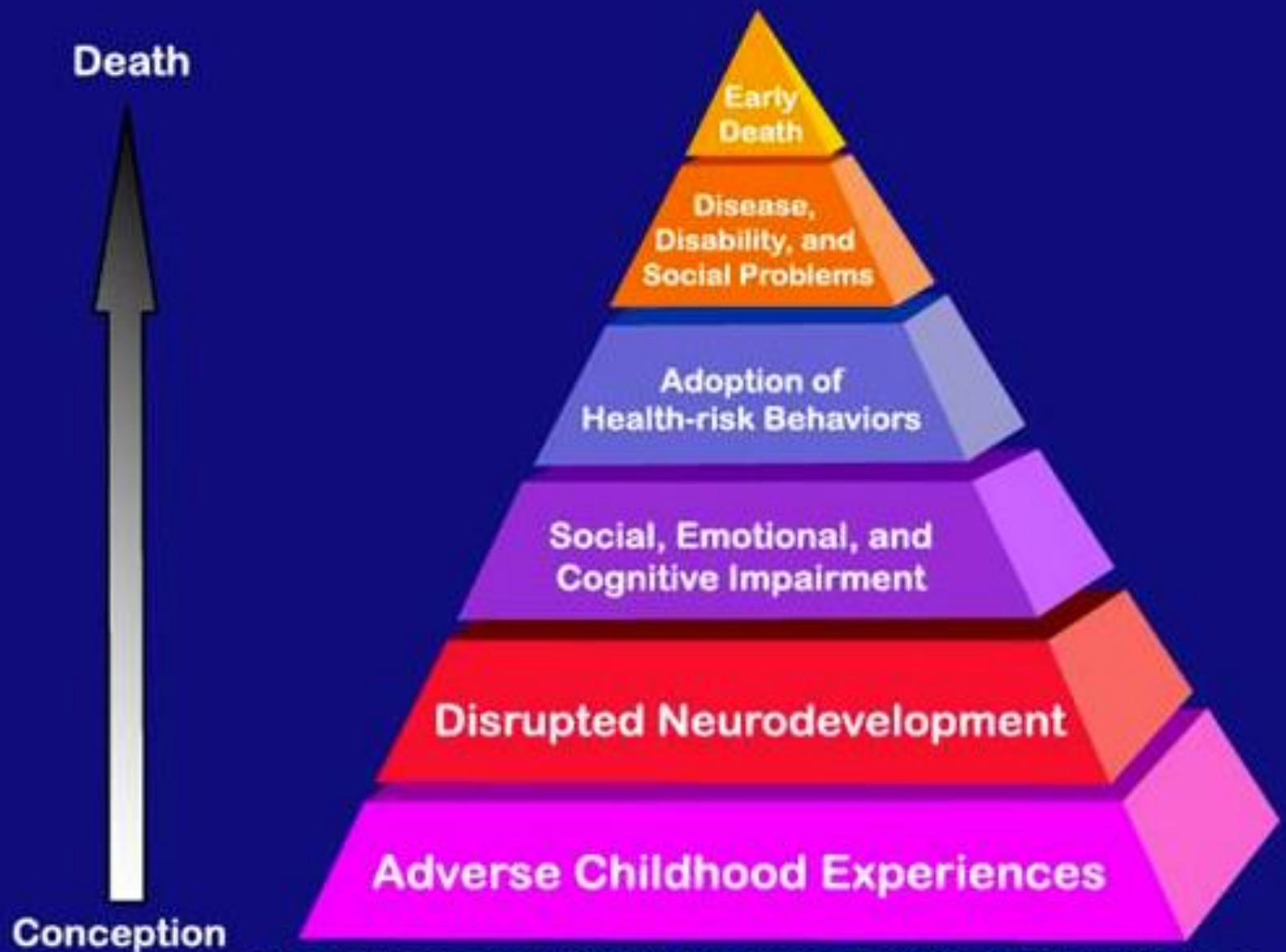
Death

Conception

Early Death

Disease, Disability, and Social Problems

Adoption of Health-risk Behaviors

Social, Emotional, and Cognitive Impairment

Disrupted Neurodevelopment

Adverse Childhood Experiences

Mechanisms by Which Adverse Childhood Experiences Influence Health and Well-being Throughout the Lifespan

Mirror Neurons

A **mirror neuron** is a [neuron](#) that [fires](#) both when an animal acts and when the animal observes the same action performed by another.

Thus, the neuron "mirrors" the behavior of the other, as though the observer were itself acting

Brains mirroring Social Experience

NORMAL

EXTREME NEGLECT

These are the brains of two three-year-old children. The image on the left is from a healthy child while the image on the right is from a Romanian orphan who suffered severe sensory deprivation. The right brain is smaller and has enlarged ventricles – holes in the centre of the brain. It also shows a shrunken cortex – the brain's outer layer.

29

PTSD IS A REAL PHYSICAL INJURY
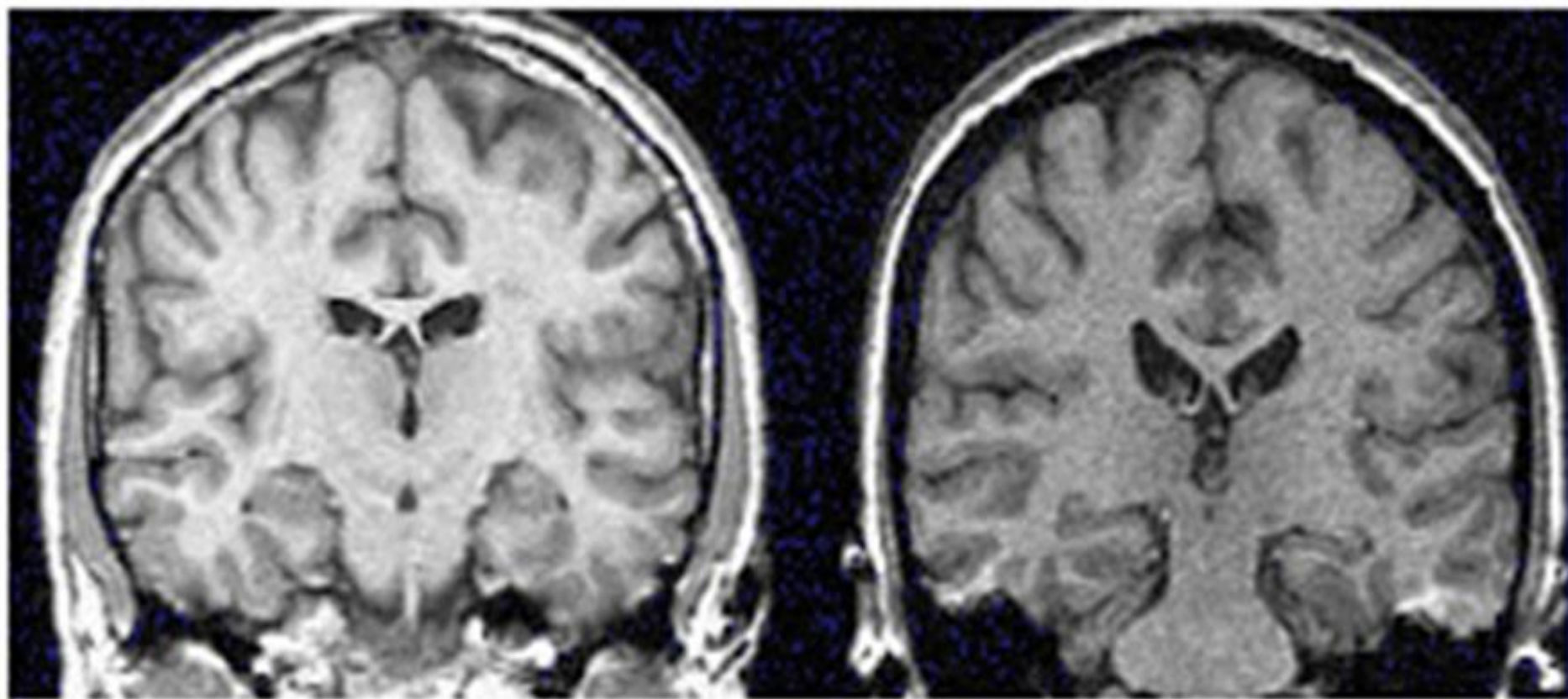
REGULAR

PTSD

NOT A SOCIAL OR POLITICAL OPINION.

Handy Model
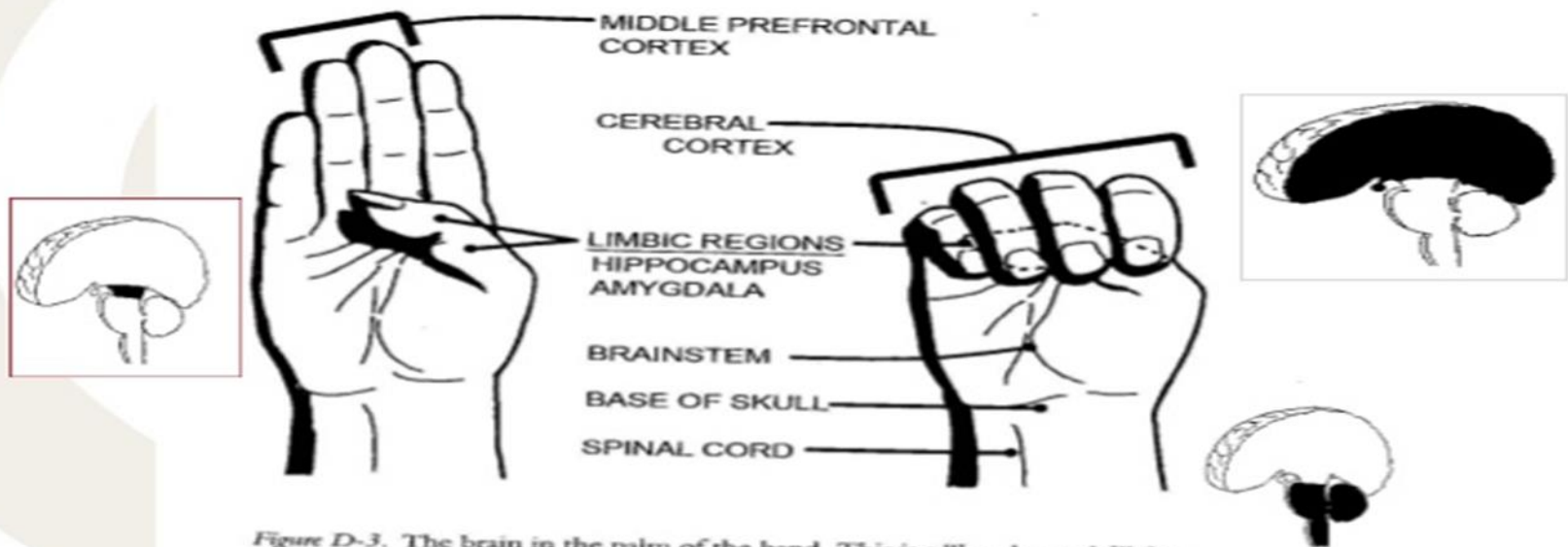
Figure D-3. The brain in the palm of the hand. This is a "handy model" that depicts the major regions of the brain: cerebral cortex in the fingers, limbic area in the thumb, and brainstem in the palm. The spinal cord is represented in the wrist. Please see text for explanation. Copyright © 2012 by Mind Your Brain, Inc. Used with permission by Daniel J. Siegel, M.D., from *The Developing Mind: How Relationships and the Brain Interact to Shape Who We Are* (2012).
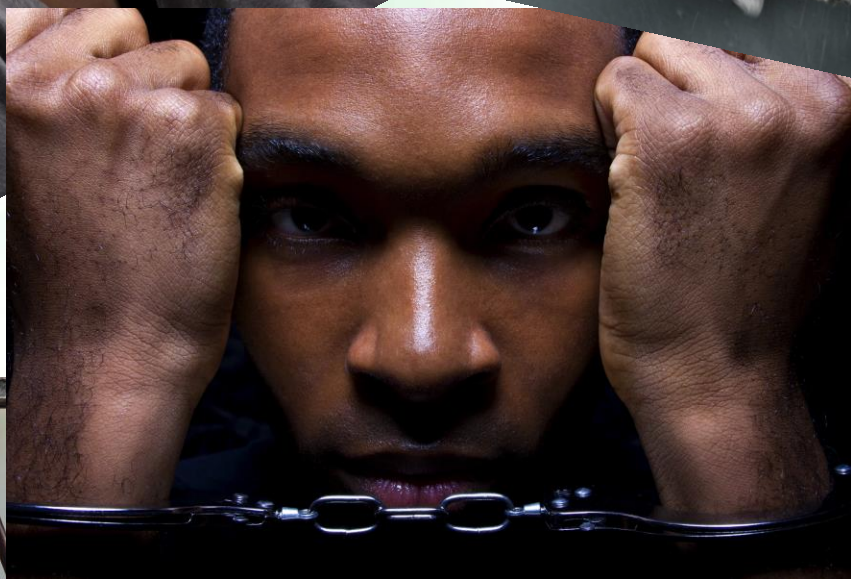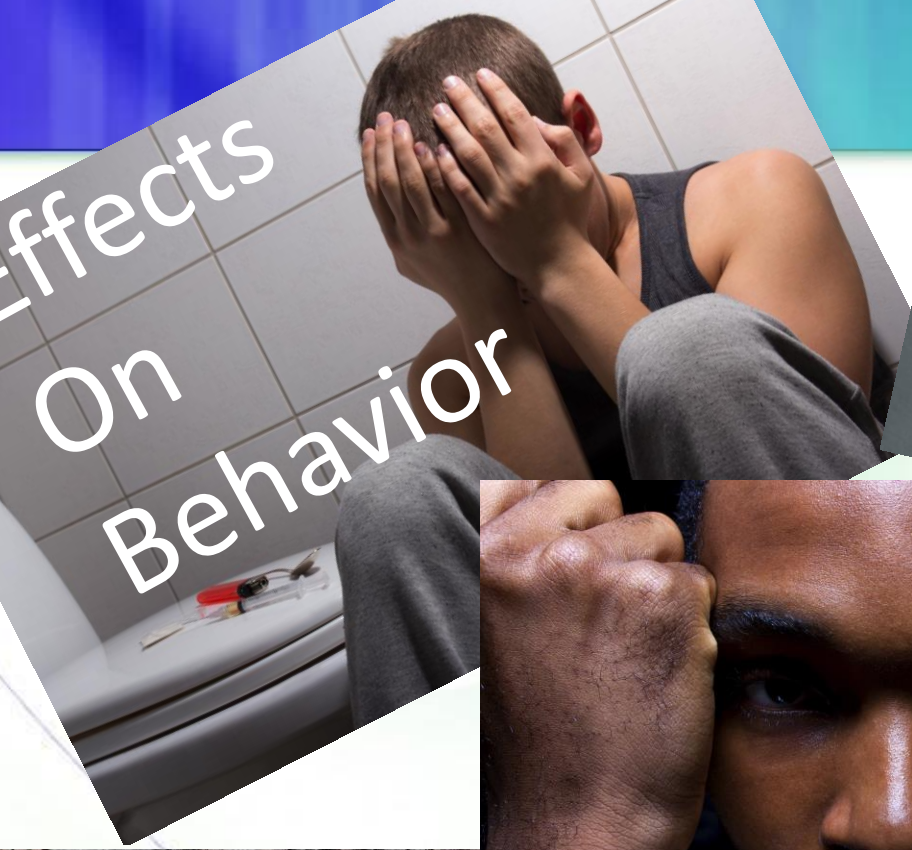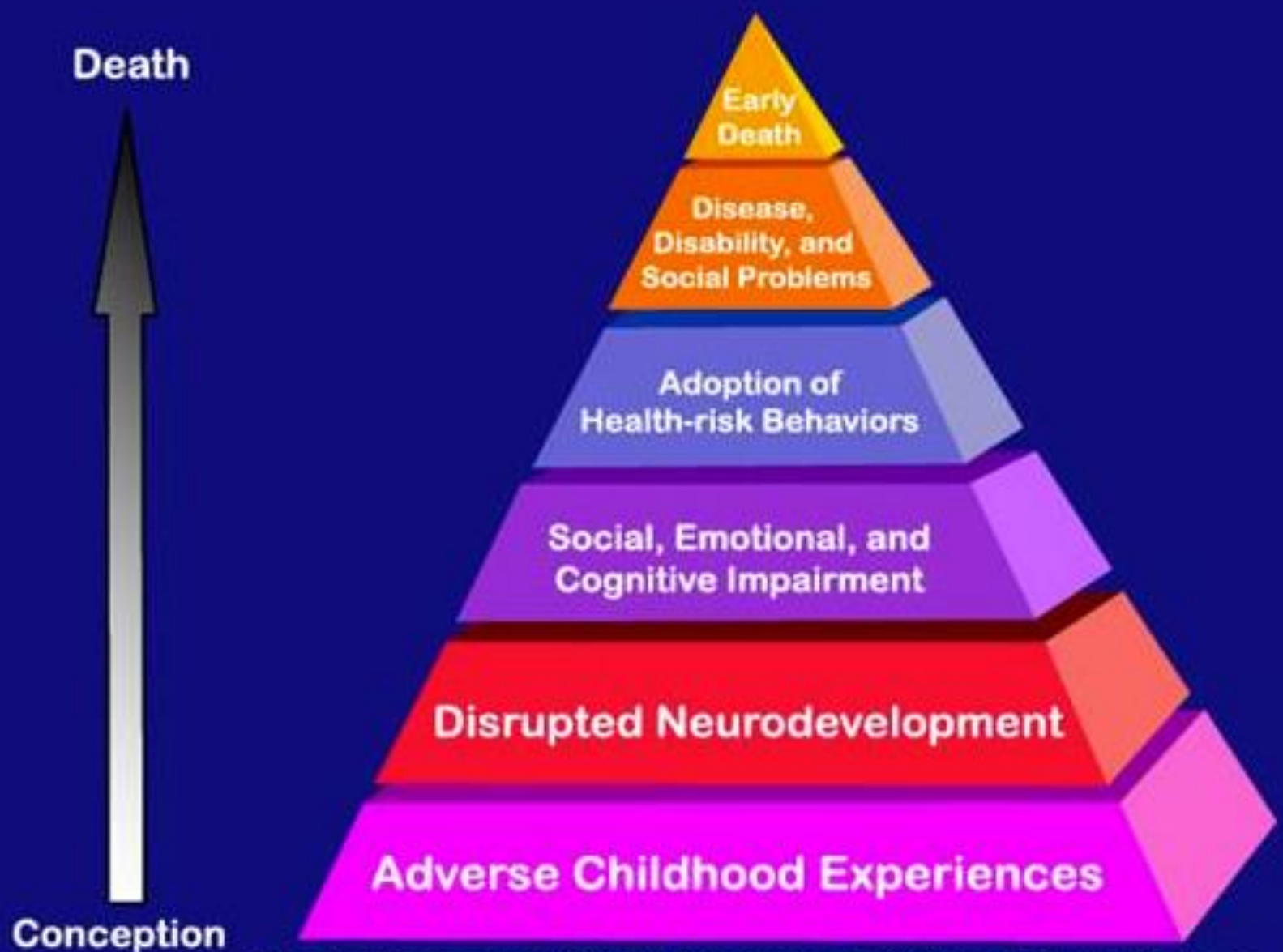
Effects On Behavior

Mechanisms by Which Adverse Childhood Experiences
Influence Health and Well-being Throughout the Lifespan

Respond to the need ....

Not react to the behavior

HOWARD STORY

What is Trauma Informed Care?

Definition of trauma (the three "Es"):
- Event(s)
- Experience of the event(s)
- Effect

Definition of a trauma-informed approach (the four "Rs"):
- Realize
- Recognize
- Respond
- Resist retraumatization

ORIENTATION TO
PHASE ORIENTED TREATMENT

Three Targeted Areas for Building Individual Resilience)

- Positive Self-Identity and Competency
    - Positive Self-Concept
    - Positive Path for Self-Development
- Self-Regulation
    - Feelings Regulation
    - Being "present"
    - Body Regulation
- Co-regulation (Relationships)
    - Secure working model of caring relationship
    - Empathy
    - Interpersonal Effectiveness Skills

Building Coping Skills for Persons with Complex Trauma

Three basic building blocks to success:

Adapted from the research of Dr. Margaret Blaustein

Attachment - feeling connected, loved, valued, a part of family, community, world

Regulation - learning about emotions and feelings and how to express them in a healthy way

Competence - acting rather than reacting, accepting oneself and making good choices

ARC Model

10 Building Blocks

Dev'tal Tasks

Executive Functions · Self Dev't & Identity

Affect Identification · Affect Modulation · Affect Expression

Caregiver Affect Mgmt. · Attunement · Consistent Response · Routines and Rituals
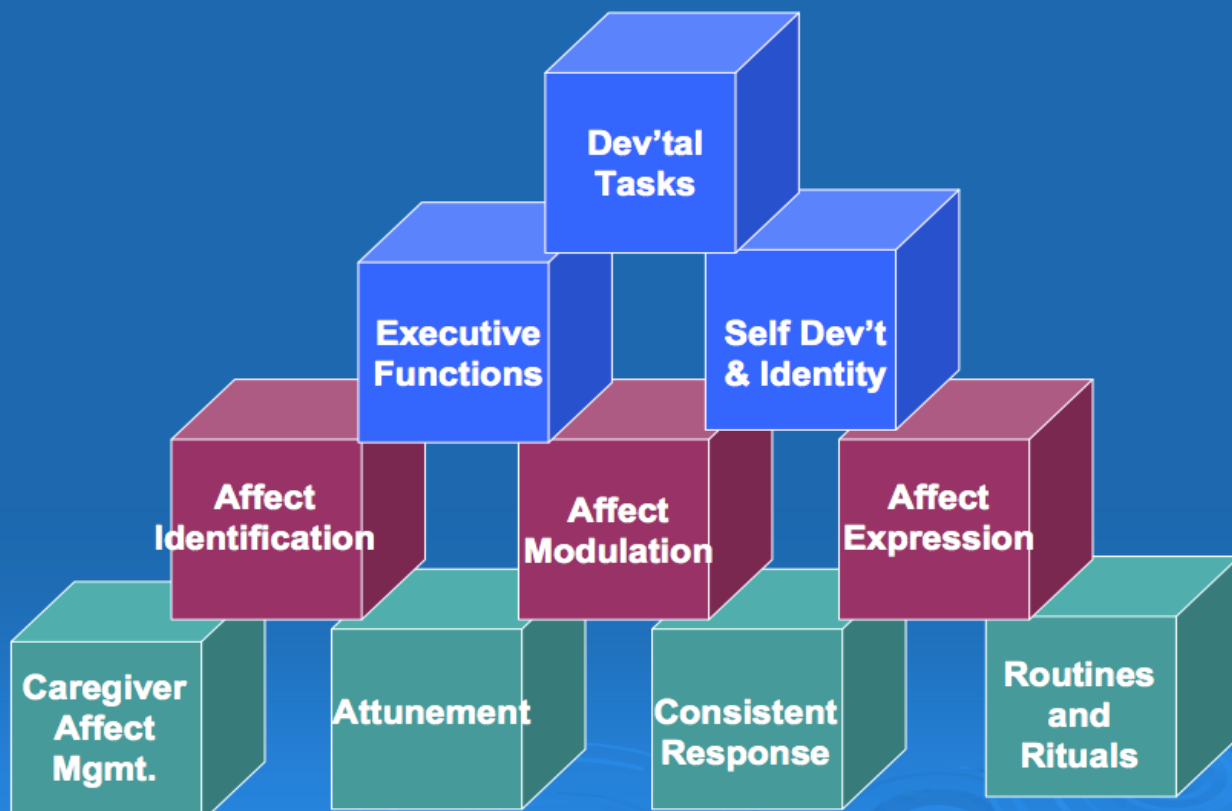
From Blaustein & Kinniburgh (2010) Treating Traumatic Stress in Children and Adolescents

SKILL BUILDING

Think: lack of skill not intentional misbehavior

Think: building missing skills not shaming for lack of skills

Think: nurture not criticize

Think: teach not blame

Think: discipline not punishment

Attachment Skills (Connection)

Skill One
Caregiver Self Monitoring

- Caregiver Education about Trauma
- Building Caregiver Self-Monitoring Skills
- Building Affect Management Skills
- Enhancing Supports

Adapted from Blaustein & Kinniburgh (2010) Treating Traumatic Stress in Children and Adolescent

The needs of the adults and caregivers of the youth …
are often no different

They are often trauma survivors too

IT'S ABOUT PARENTS TOO!

SHARE WITH FRIENDS
LEARN MORE
LIKE

REDUCE STRESS!
Simple Steps for Parents

Tough times that you had as a child can affect you as an adult in unexpected ways. Feeling stressed out or sad most of the time and having panic attacks as well as using alcohol, drugs, tobacco or over-eating to cope can be reactions to what happened when you were a child.

Parenting takes a lot of energy and focus. If you are feeling tired, overwhelmed or are struggling with memories from your childhood, it can be more difficult to understand your children's behaviors and needs. If you don't feel safe, it is harder to help your children feel safe. When stressed, parents may use forms of discipline that don't work. Spanking and hitting children can cause them to act out and be more aggressive.

If you had hard times during your childhood, it's important to know *it's not your fault*. It's not about *what's wrong with you*, it's about understanding *what happened to you*. Understanding how things that happened during your childhood connect to how you feel now is an important part of healing and can prevent other problems for you and your kids. Recognizing things that you keep doing but want to change, and then finding healthier ways to manage that stress can help you to feel better and to be the kind of parent that you want to be. Parents also need people to talk to who will listen and be there for them.

STOP WHAT YOU'RE DOING FOR A FEW MINUTES and take some deep breaths until you feel calmer. It can be hard to remember what helps when things are really stressful. Check out "Tactical Breather Trainer," a free cell phone App that uses pictures and talks you through deep breathing or go to www.childdevelopmentinfo.com and search for "52 proven ways to reduce stress".

TRY TO IDENTIFY THINGS THAT ARE ESPECIALLY STRESSFUL (for example, toilet training or talking with your teen about dating and sex) and see if someone else can help with or do that task.

TALK WITH A TRUSTED FRIEND, neighbor or family member about what's going on.

FIND A PARENTING SUPPORT GROUP to connect with other parents. Connect with other parents online at www.nationalparenthelpline.org/articlesblogs/nph-blog or ask an expert online at www.parenting.org.

Advice for parents, other caregivers and youth on how to manage anxiety.

albertafamilywellness.org
Videos and resources about how children's brains develop.

Tactical Breather Trainer App
Scan to Download the Tactical Breather App in the App Store

If you don't own a smartphone, links to all of these websites are available online at: www.instituteforsafefamilies.org

All forms of child abuse (physical, sexual and emotional) and neglect are very stressful for children. Living in homes where adults are hurting or threatening one another is also harmful for children. Information about helping families when there has been abuse, neglect or other trauma can be found at www.nctsn.org/resources/audiences/parents-caregivers. For information about how to recognize child maltreatment and prevention tips for parents go to www.preventchildabuse.org. You can call these help lines 24 hours a day:

Child Help: 1-800-4A-CHILD (422-4453)
Domestic Violence Hotline: 1-800-799-SAFE (7233)
Treatment Referral: 1 800 662-HELP (4357)

TOUGH TIMES

SHARE WITH FRIENDS
LEARN MORE
LIKE

nsvrc.org
Sexual abuse prevention resource for parents.

preventchildabuse.org
Information on healthy development of children and how to prevent abuse before it ever happens.

The following questions ask about some of the problems that many families experience that can be stressful for children. These questions are adapted from a study called ACES, which stands for Adverse Childhood Experiences. Please answer the questions below about things that you and your child(ren) may have experienced.

Did you (before you were 18 years old) or your child live with someone who:	YOU		YOUR CHILD(REN)	
Was depressed, mentally ill or suicidal?	YES	NO	YES	NO
Served time in jail or prison?	YES	NO	YES	NO
Was a problem drinker or an alcoholic?	YES	NO	YES	NO
Used illegal street drugs or abused prescription medications?	YES	NO	YES	NO

Did you (before you were 18 years old) or has your child had any of these things happen:				
Had a parent or guardian who died?	YES	NO	YES	NO
Heard or saw someone being stabbed or shot?	YES	NO	YES	NO
Placed in foster care?	YES	NO	YES	NO
Bullied by other children?	YES	NO	YES	NO
Treated badly or unfairly because of something about you such as your race, sexual orientation, place of birth, disability, etc.?	YES	NO	YES	NO
Punished or disciplined by being slapped, hit or spanked?	YES	NO	YES	NO
Punished or disciplined by being hit with a belt, paddle, brush or other object?	YES	NO	YES	NO

If you answered yes to any of the questions above, consider talking with your health care provider about how these experiences may have affected you and/or your child(ren).

Skill Two :Attunement

- Reading Children Cue's
- Responding Appropriately
  - Respond to the need, not the behavior

- Education about Trauma Triggers
- "Becoming a Feelings Detective"
- Reflective Listening Skills

Adapted from Blaustein & Kinniburgh (2010) Treating Traumatic Stress in Children and Adolescent

READING CUES

Attunement Games

- Snap, Clap, Stomp Games
- Mirroring each others hands
- "Yes" "And" Game
- Mirroring back sounds (drumbeats, guitar notes, etc.)

Triggers and Trigger Mapping

Incredible 5 point scale (Buron & Curtis, 2012)
- 1-5 rating
- Looks Like
- Feels Like
- Safe People can help me by ….

Practice !!

Reflective Listening Practice

Reflective Listening Principles

- Listening before speaking
- Deal with personal specifics, not impersonal generalities
- Decipher the emotions behind the words, to create a better understanding of the message
- Restate and clarify how you understand the message
- Understand the speaker's frame of reference and avoid responding based only on your own perception
- Respond with acceptance and empathy

From http://cultureofempathy.com
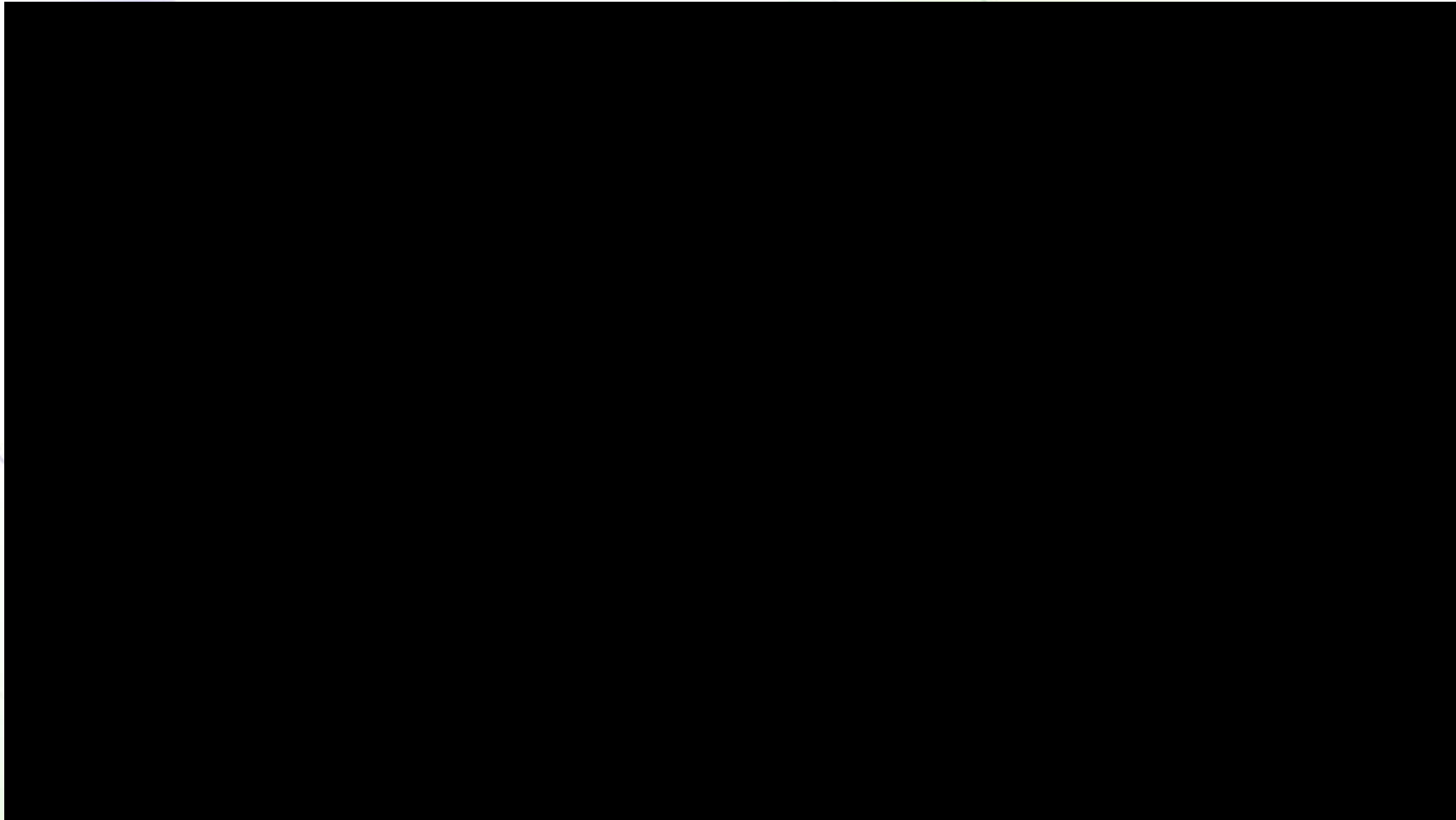
EMPATHIC COMMUNICATION

REGULATION SKILLS

Skill 3: Self Regulation

Affect Expression

- Sharing emotional experiences
- Building Block of Relationship Building
- Trauma – blocks willingness to be vulnerable
- Children need help with:
    - Identifying safe communication resources
    - "pick your moment"
    - Effective non-verbal communication (space boundaries, tone of voice, eye contact)
    - Effective verbal communication ("I" statements)
    - Building self-expression strategies

Adapted from Blaustein & Kinniburgh (2010) Treating Traumatic Stress in Children and Adolescent

Mindfulness

- Practicing Mindfulness Activities
  - One thing exercise
  - Somatic experiences
            (Observe, describe, participate)
  - Wise Mind
            (breathing, self reflection)
  - Bi lateral movements
  - Mystery Game of Mindfulness

Competency
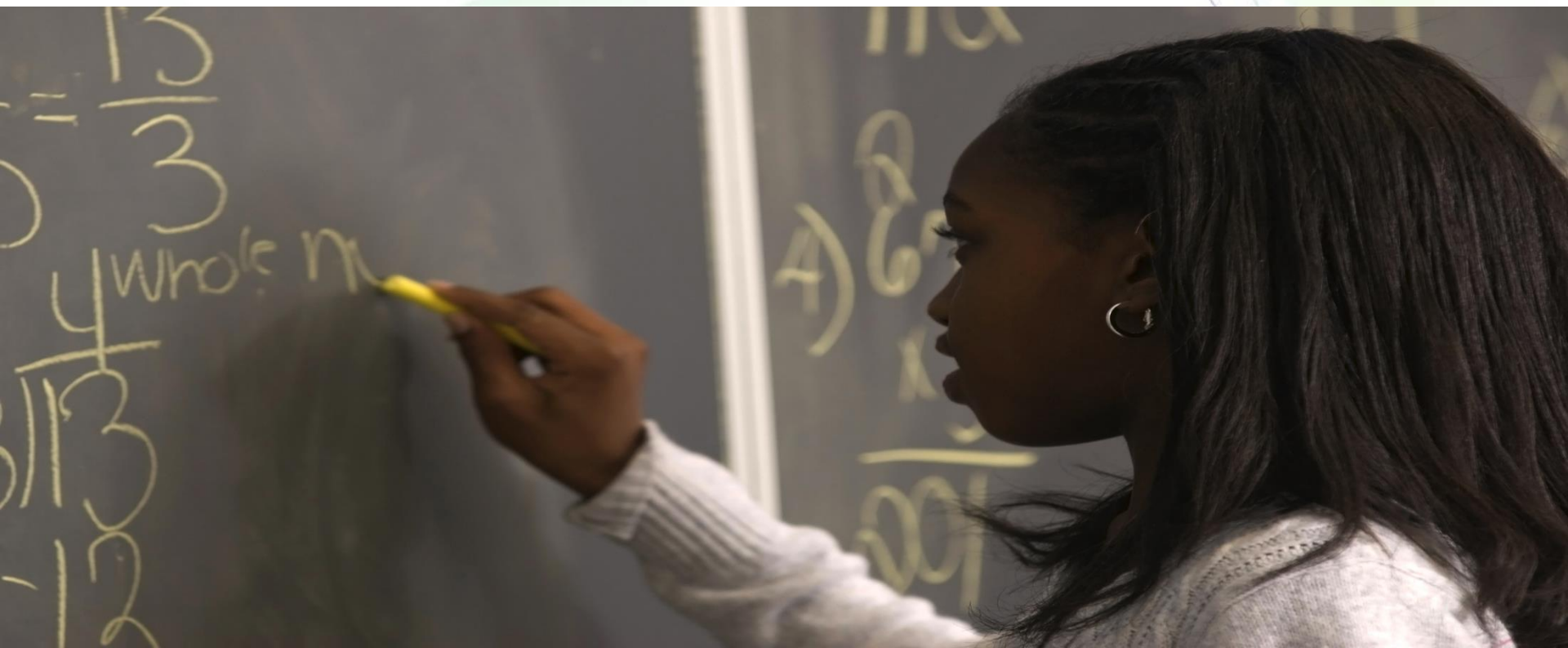
What is Competency?

- Mastery and Success across life domains
  - Social Connections
  - Community Involvement
  - Academic Engagement

- Building Resiliency
  - www.resiliencetrumpsaces.org

  - Resilience Games

Adapted from Blaustein & Kinniburgh (2010) Treating Traumatic Stress in Children and Adolescen

Skill One: Competency

- **Executive Functions**
  - PFC (prefrontal cortex)
  - Accessing upstairs brain
    - Delay responses
    - Anticipate consequences
    - Evaluate outcomes
    - Make a decision
  - Build Problem Solving Skills
  - Acting vs Reacting
  - Awareness of Choice

Adapted from Blaustein & Kinniburgh (2010) Treating Traumatic Stress in Children and Adolescent

Skill 2 : Competency

Self Development and Identity

- Seeing a sense of future
- Developing
  - Unique self
  - Positive Self
  - Coherent Self (before and after trauma)
  - Future Self

Adapted from Blaustein & Kinniburgh (2010) Treating Traumatic Stress in Children and Adolescent

Shame, Vulnerability and the Power of Connection
DR. BRENE BROWN'S WORK

Defining Shame

- Guilt = I did something bad
- Shame = I am bad
- Embarrassment = Fleeting, can laugh about it later
- Humiliation = "I didn't deserve that"

Brené Brown. Daring Greatly: How the Courage to Be Vulnerable Transforms the Way We Live, Love, Parent, and Lead. Gotham Books, 2012. (287 pages)

12 Categories of Shame

- Appearance and body image
- Money and work
- Motherhood/fatherhood
- Family
- Parenting
- Mental and physical health
- Addiction
- Sex
- Aging
- Religion
- Surviving trauma
- Being stereotyped or labeled

Brené Brown. Daring Greatly: How the Courage to Be Vulnerable Transforms the Way We Live, Love, Parent, and Lead. Gotham Books, 2012. (287 pages)

WHAT IS SHAME AND WHY IS IT SO HARD TO TALK ABOUT IT?

1. We all have it. Shame is universal and one of the most primitive human emotions that we experience.

2. We're all afraid to talk about shame.

3. The less we talk about shame, the more control it has over our lives

    ...shame is the fear of disconnection (68)

Brené Brown. *Daring Greatly: How the Courage to Be Vulnerable Transforms the Way We Live, Love, Parent, and Lead.* Gotham Books, 2012. (287 pages)

Man in Arena Speech

"It is not the critic who counts; not the man who points out how the strong man stumbles, or where the doer of deeds could have done them better. The **credit belongs to the man who is actually in the arena**, whose face is marred by dust and sweat and blood; who strives valiantly; who errs, who comes short again and again, because there is no effort without error and shortcoming; but who does actually strive to do the deeds; who knows great enthusiasms, the great devotions; who spends himself in a worthy cause; who at the best knows in the end the triumph of high achievement, and who at the worst, if he fails, at least fails while daring greatly, so that his place shall never be with those cold and timid souls who neither know victory nor defeat."

THE MAN IN THE ARENA

Excerpt from the speech "Citizenship In Republic" delivered at the Sorbonne, in Paris, France on 23 April, 1910

Shame Resilience

1. Recognizing Shame and Understanding Its Triggers. Shame is biology and biography.
Can you physically recognize when you're in the grips of shame, feel your way through it, and figure out what messages and expectations triggered it?

2. Practicing Critical Awareness.
Can you reality-check the messages and expectations that are driving your shame? Are they realistic? Attainable? Are they what you want to be or what you think others need/want from you?
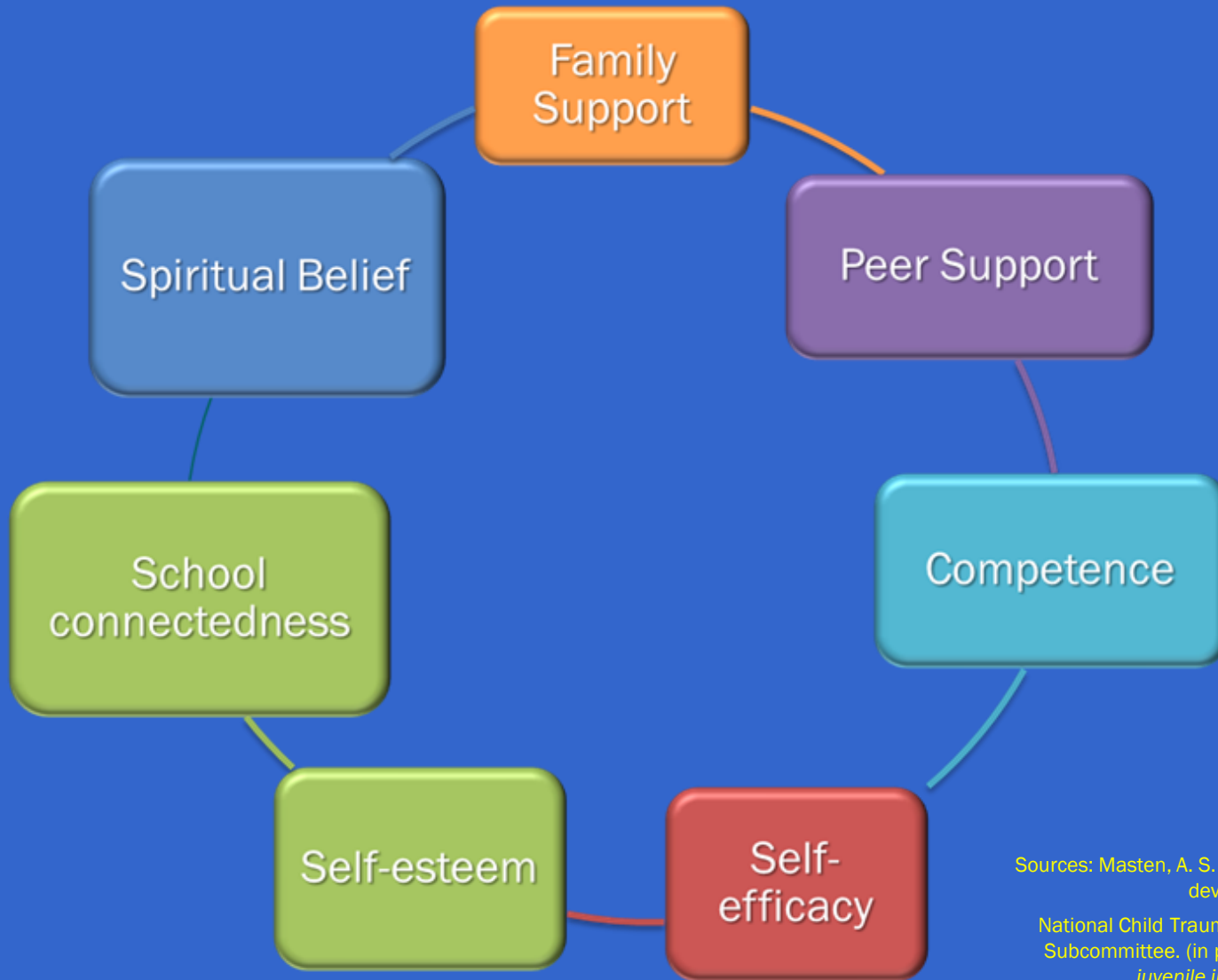
3. Reaching Out.
Are you owning and sharing your story? We can't experience empathy if we're not connecting.

4. Speaking Shame.
Are you talking about how you feel and asking for what you need when you feel shame?

Brené Brown. Daring Greatly: How the Courage to Be Vulnerable Transforms the Way We Live, Love, Parent, and Lead. Gotham Books, 2012. (287 pages)

Factors that Enhance Resilience

Family Support

Peer Support

Spiritual Belief

Competence

School connectedness

Self-esteem

Self-efficacy

Sources: Masten, A. S. (2001). Ordinary magic: Resilience processes in development. *American Psychologist, 56*, 227-238.

National Child Traumatic Stress Network, Juvenile Justice Treatment Subcommittee. (in preparation). *Think trauma: A training for staff in juvenile justice residential settings.* Will be available from http://www.nctsnet.org/resources/topics/juvenile-justice-system

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Trauma Informed Child and Family Service System (NCTSN)

A trauma-informed child- and family-service system is one in which all parties involved recognize and respond to the impact of traumatic stress on those who have contact with the system including children, caregivers, and service providers. Programs and agencies within such a system infuse and sustain trauma awareness, knowledge, and skills into their organizational cultures, practices, and policies. They act in collaboration with all those who are involved with the child, using the best available science, to facilitate and support the recovery and resiliency of the child and family.

NCTSN
The National Child
Traumatic Stress Network

Cal SWEC

CiMH
Helping You Make the Difference

CFPIC

Rady Children's
San Diego
Chadwick Center
for Children & Families

Trauma Informed Child and Family Service System (NCTSN)

A service system with a trauma-informed perspective is one in which programs, agencies, and service providers:

(1) routinely screen for trauma exposure and related symptoms;

(2) use culturally appropriate evidence-based assessment and treatment for traumatic stress and associated mental health symptoms;

(3) make resources available to children, families, and providers on trauma exposure, its impact, and treatment;

(4) engage in efforts to strengthen the resilience and protective factors of children and families impacted by and vulnerable to trauma;

(5) address parent and caregiver trauma and its impact on the family system;

(6) emphasize continuity of care and collaboration across child-service systems; and

(7) maintain an environment of care for staff that addresses, minimizes, and treats secondary traumatic stress, and that increases staff resilience.

NCTSN
The National Child
Traumatic Stress Network

Cal SWEC

CiMH
Helping You Make the Difference

CFPIC

Rady Children's
San Diego
Chadwick Center
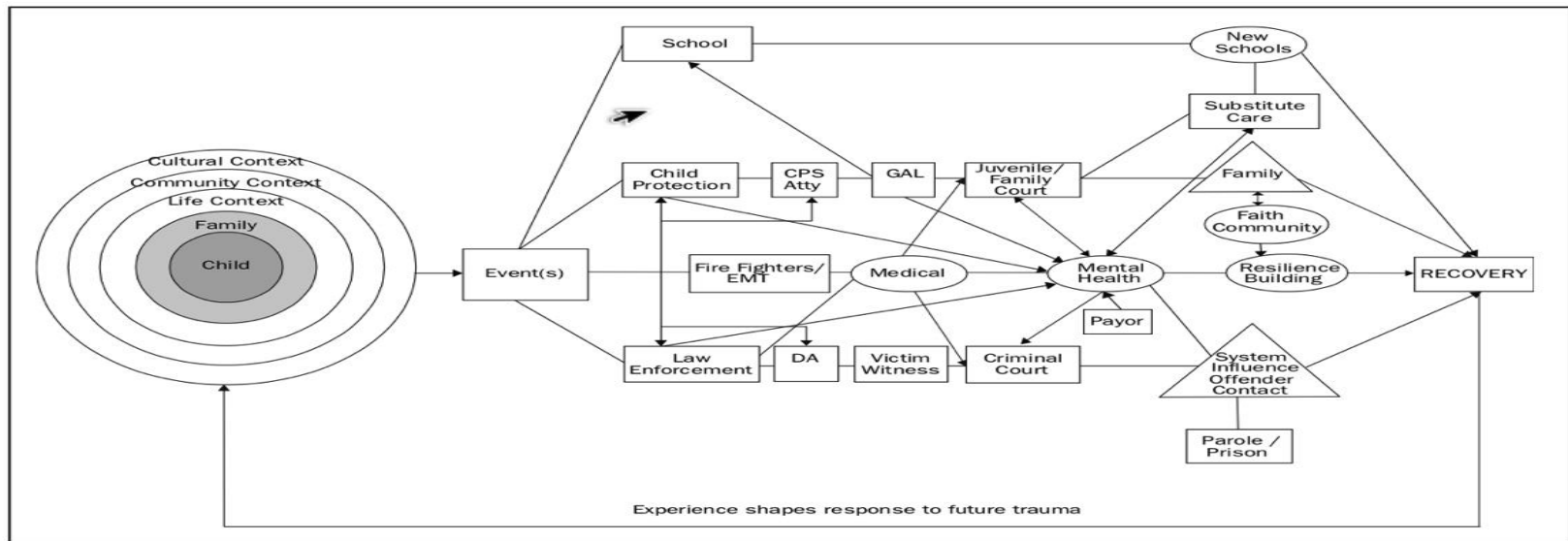for Children & Families

RESIST RE-TRAUMATIZATION

Helping "Henry"

Child Welfare System
Juvenile Justice System
School System
Mental Health System
Court System Professionals
Eligibility/Benefit Programs
Housing
Health Departments
Parks and Recreation

Faith Based Community
Residential Facilities
Resource Parents
First Responders
(Police & Fire Fighters)
Medical Community and
Primary Care
Child Advocacy Agencies

Helping Henry and His Family Navigate to Recovery

Module 4, Activity 4B

Emotional Chain of Custody

Child Welfare Trauma Training Toolkit: Emotional Chain of Custody | March 2008
The National Child Traumatic Stress Network
www.NCTSN.org

1

Coordinate services with other agencies.

- Traumatized children and their families are often involved with multiple service systems.

- Cross-system collaboration enables all helping professionals to see the child as a whole person, thus preventing potentially competing priorities and messages.

- Service providers should try to develop common protocols and frameworks for documenting trauma history, exchanging information, coordinating assessments, and planning and delivering care.
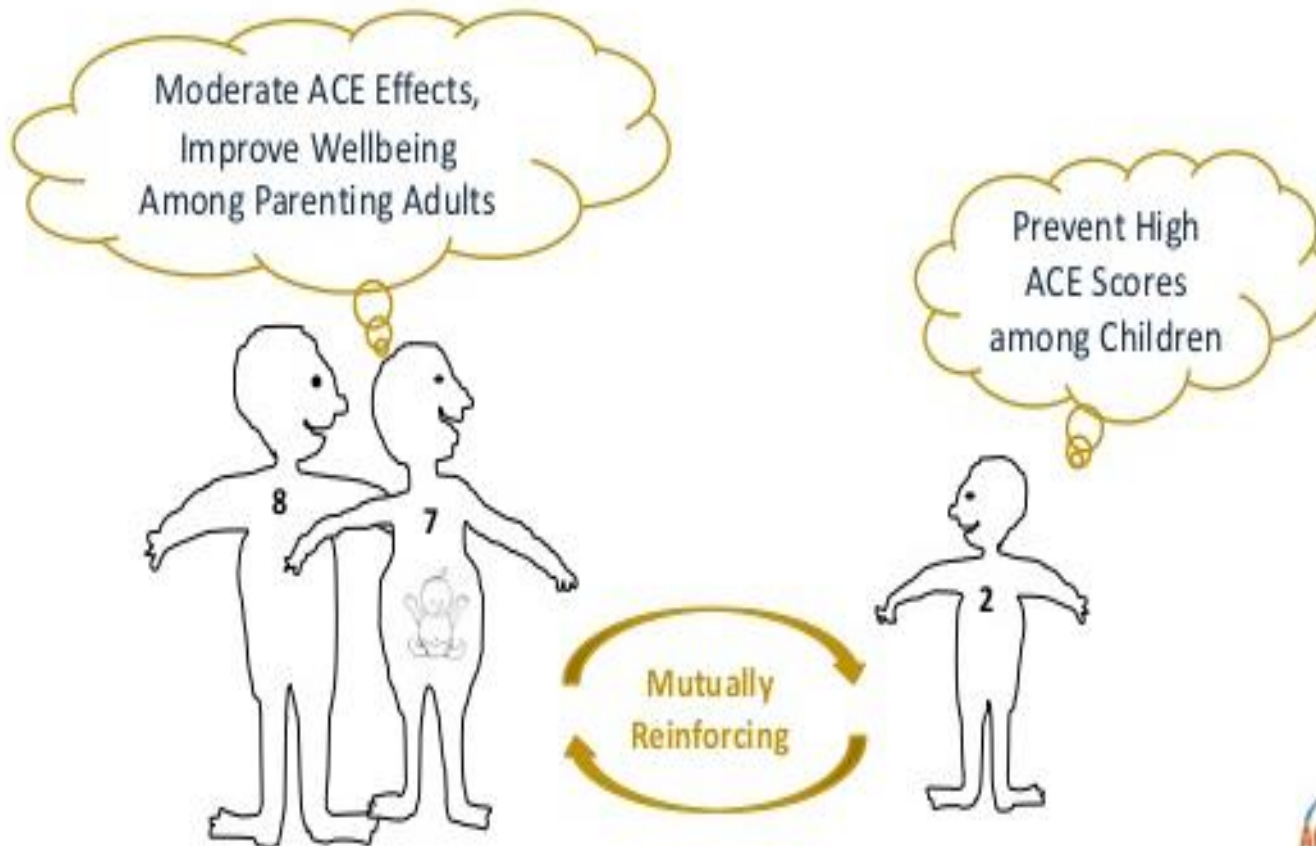
Provide support and guidance to the child's family and caregivers.

- Children experience their world in the context of family relationships.

- Research has demonstrated that support from their caregivers is a key factor influencing children's psychological recovery from traumatic events.

- Resource families have some of the most challenging and emotionally draining roles in the entire child welfare system.

- Providing support and guidance to the child's family and caregivers is a part of federal outcomes (CFSR goals).

NCTSN

The National Child
Traumatic Stress Network

Cal SWEC

CiMH
Helping You Make the Difference

?

Rady
Children's
San Diego

Chadwick Center
for Children & Families

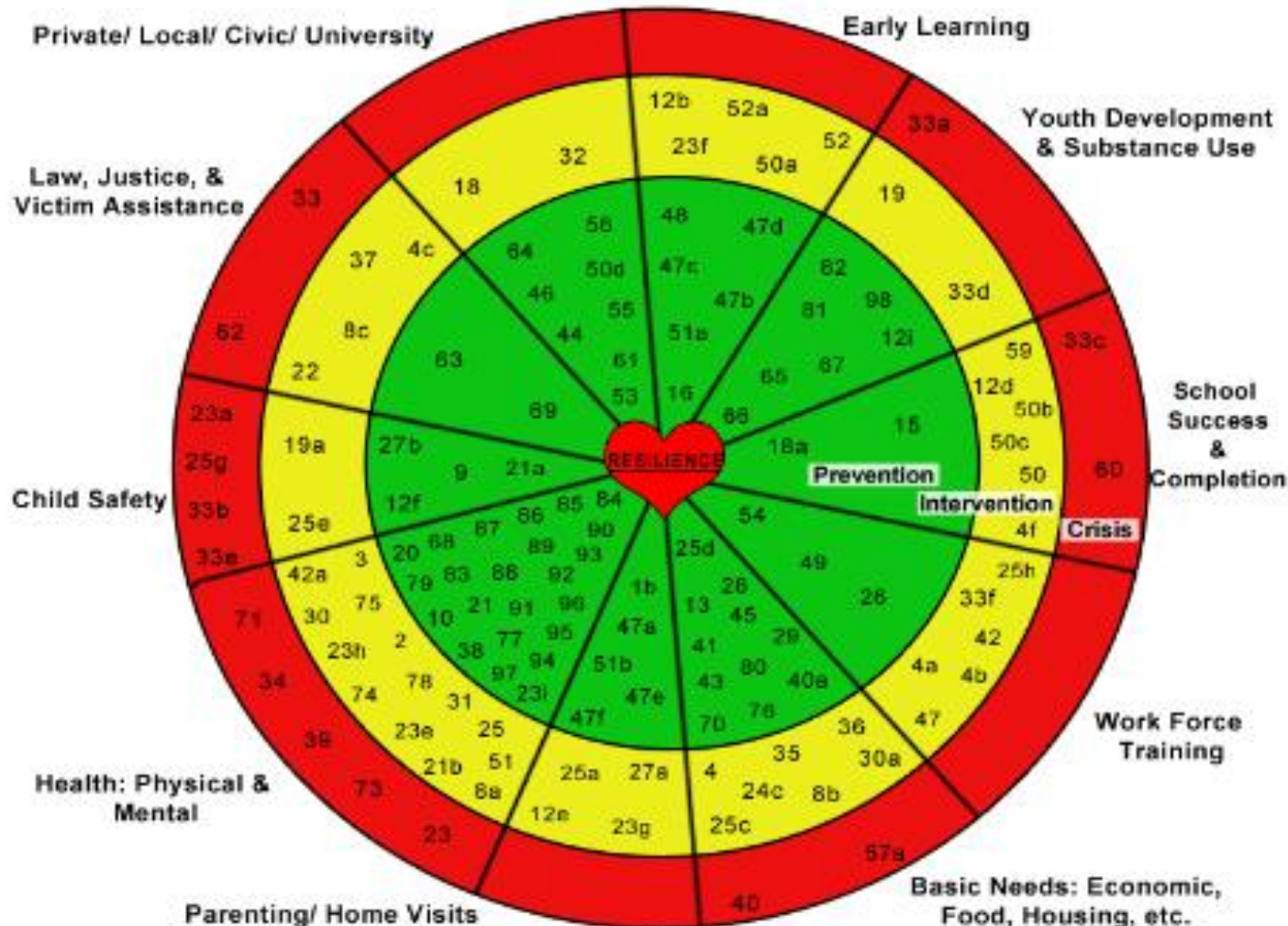# States Collecting ACEs Data 2009 - 2015

Source: CDC National Center for Injury Prevention & Control
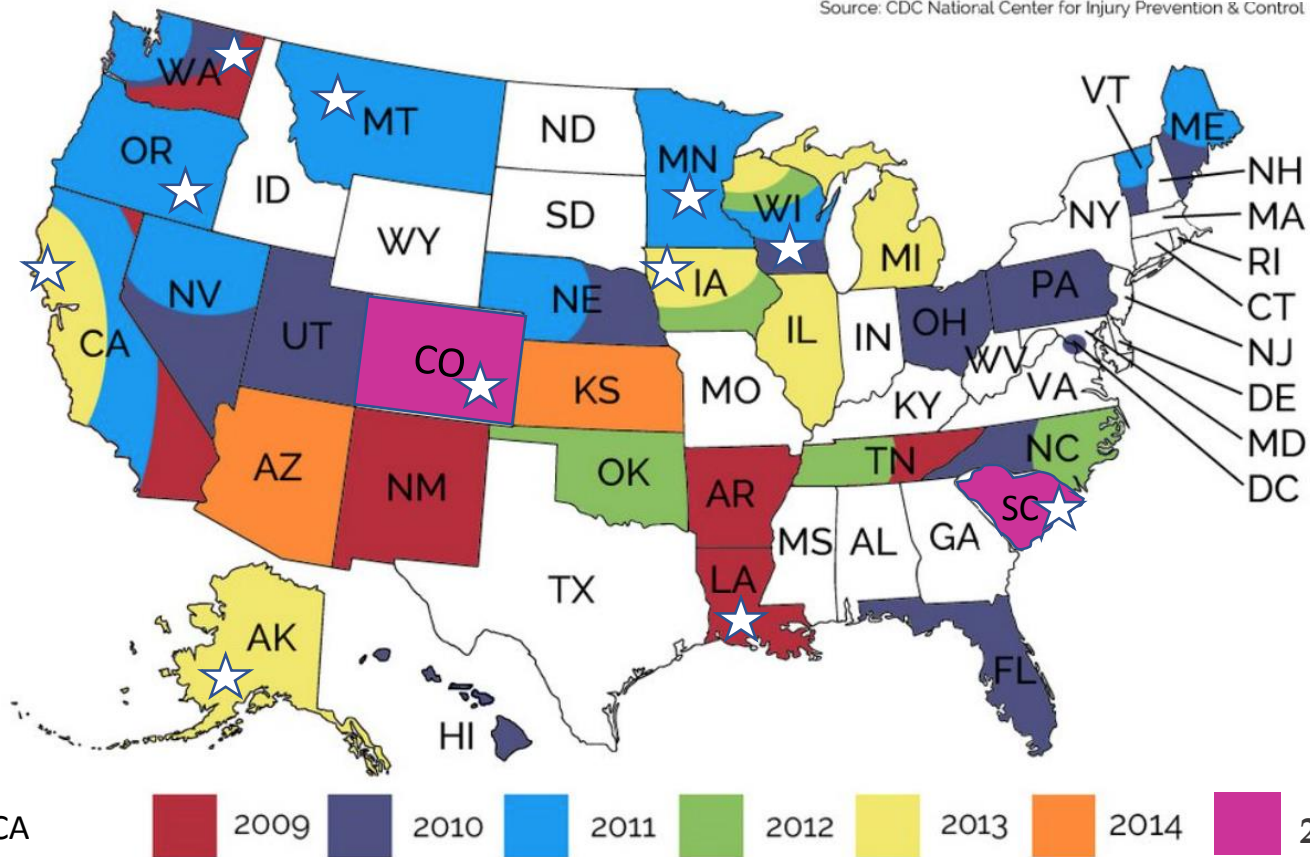
ACE Interface
Master Trainers
Active in 2016
Minnesota
Wisconsin
Alaska
South Carolina
Louisiana
Washington
East Iowa
Colorado
Oregon
Indiana
Sonoma County, CA

Legend: 2009 | 2010 | 2011 | 2012 | 2013 | 2014 | 2015

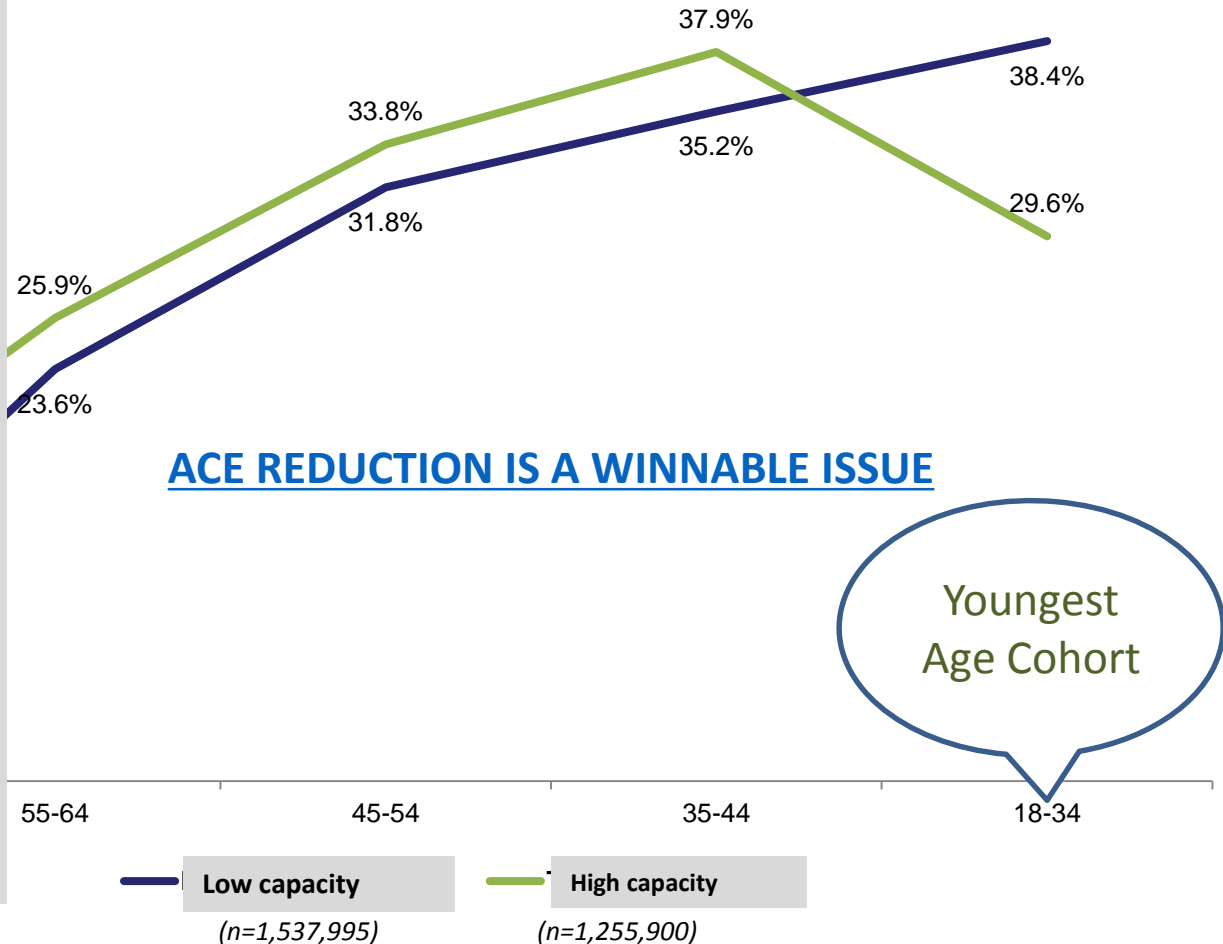# Walla Walla organizations that build resilience

Washington

- Funded Community Networks showed significant improvement in Severity Index
  - Out of home placement
  - Loss of parental rights
  - Child hospitalization rates for accident and injury
  - High School Drop Out
  - Juvenile Suicide Attempts
  - Juvenile arrests for alcohol, drugs, and violent crime
  - Juvenile offenders
  - Teen births
  - Low birth weights
  - No third trimester maternity care
  - Infant mortality
  - Fourth grade performance on standardized testing

High Capacity Communities
Reduce Percent of Young Adults With ≥ 3 ACEs

POSITIVE ACE TREND MEANS REDUCED CASES:

Category	Cases
Lack of Social Support	1888
Limited Activity (due to disability)	5767
Asthma	2128
Cancer	2828
Heart Disease	1004
Missed work due to MI	1065
Mental Illness (MI)	3845
HIV	1264
Binge Drinking	3727
Smoking	10874

Line chart data:

Age	Low capacity	High capacity
55-64	23.6%	25.9%
45-54	31.8%	33.8%
35-44	35.2%	37.9%
18-34	38.4%	29.6%

ACE REDUCTION IS A WINNABLE ISSUE

Youngest Age Cohort

— Low capacity (n=1,537,995)
— High capacity (n=1,255,900)

NEAR SCIENCE

- Neuroscience

- Epigenetics

- Adverse Childhood Experiences

- Resilience

http://www.healthygen.org/resources/nearhome-toolkit

http://www.healthygen.org/resources/laura-porter-keynote-address-near-science-wa-state-resilience-findings

NEAR: What Help actually Helps ?

- Support: Feeling socially and emotionally supported and hopeful
  - Social Emotional Competence Building
  - Hope and a Sense of Future

- Help: Having two or more people who give concrete help when needed
  - Concrete Supports (not Facebook Friends)

- Community Reciprocity: Watching our for children, intervening when they are in trouble, and doing favors for one another
  - Primary network of protection in your community
  - People you see each day and see you

- Social Bridging: Reaching Outside one's immediate circle of friends to recruit help for someone inside that circle
  - Asking for help
  - Trusting Systems and People outside your circle to respond and be safe

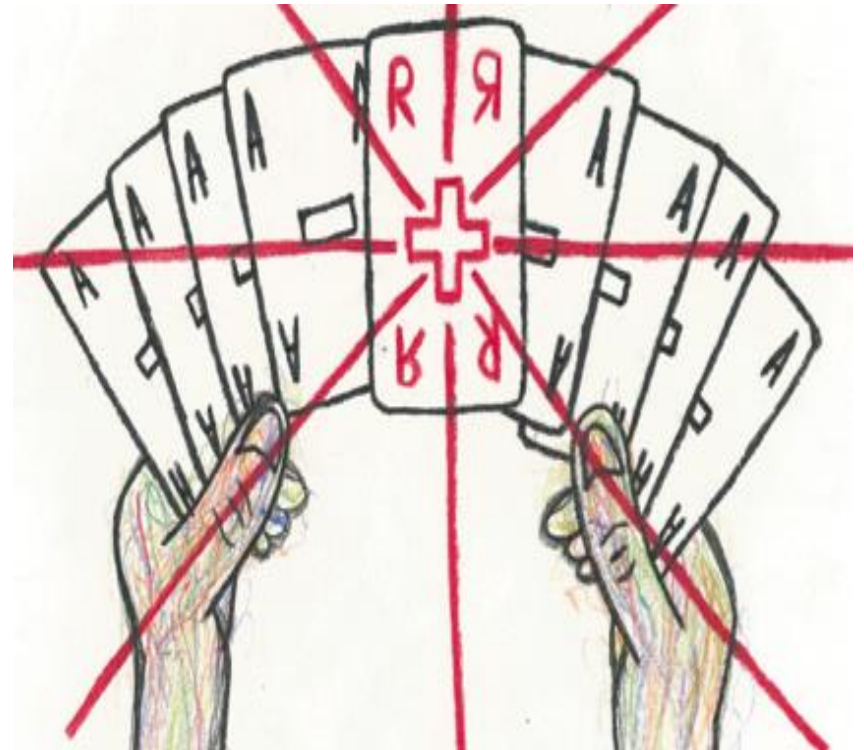http://www.healthygen.org/resources/laura-porter-keynote-address-near-science-wa-state-resilience-findings

Adding Context, Stress Proliferation, & Moderators (+/-) to ACE Influence on Lifespan Health and Functioning
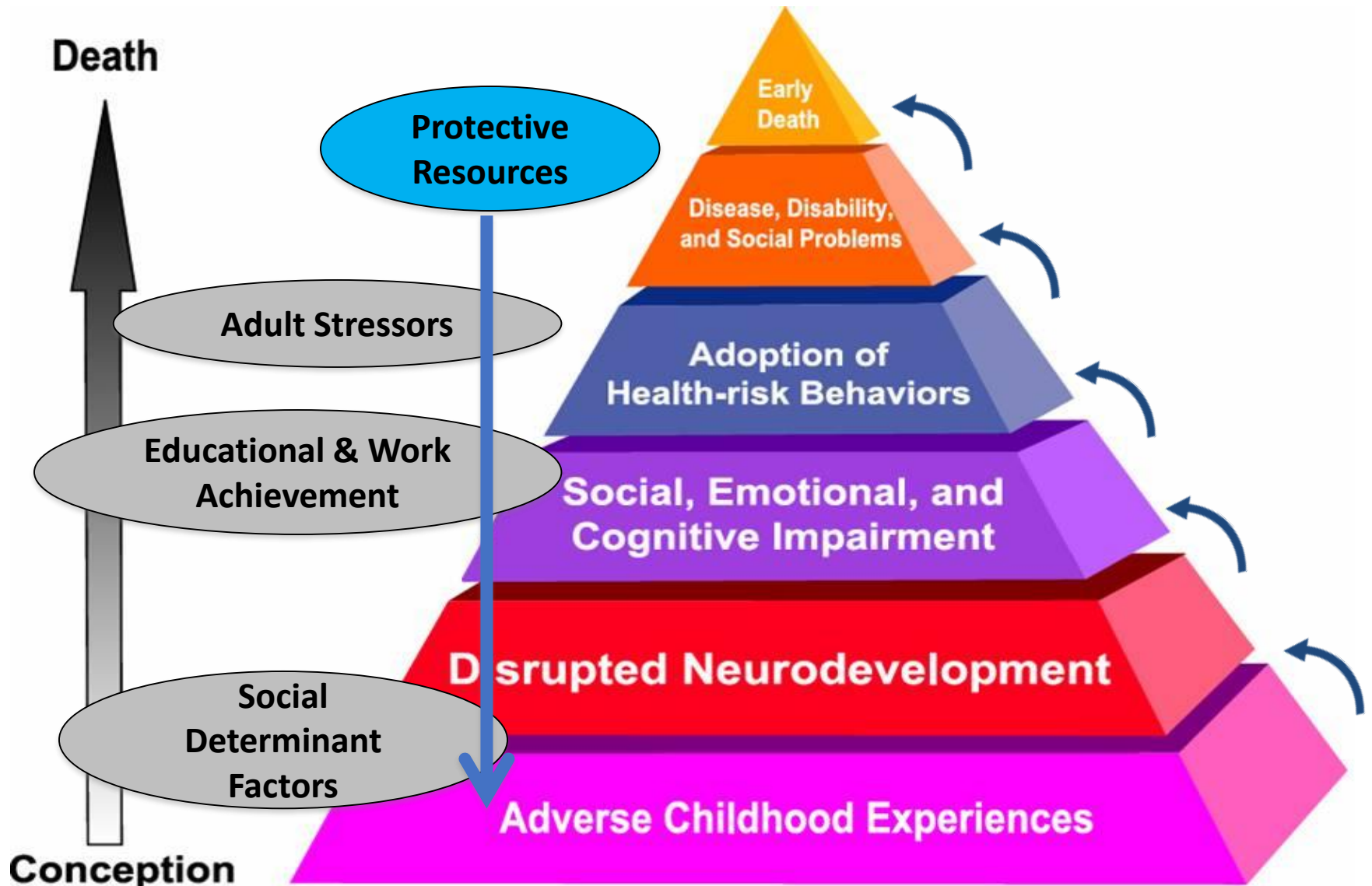
Be a **F.O.R.S.E.** in your community

Image by Lincoln High student Brendon Gilman

Focus
On
Resilience &
Social-**E**motional

Implications & Future Directions

- Reduction of ACEs within linked lives context of parents and children
  - Better assessment of factors that serve as <u>mechanisms</u> of stress proliferation, coping and support erosion, disability and health outcomes: Macro, Meso, Micro
  - More data on children's well-being within parental trajectories
  - Main directions of Interventions should be on:
    - Strengthening "adaptive parental function"
    - Interrupting stress proliferation and stress embodiment
    - Resilience cannot thrive at any one level alone: Individual, family, community, structural needed

Paula S. Nurius, University of Washington
Illustrating NEAR-Related Findings from Surveillance
Population Data:
Building Partnership Complementarity

Resources

- http://gucchdtacenter.georgetown.edu/TraumaInformedCare/index.html
- https://www.youtube.com/watch?v=3axcjT_zo58
- https://www.youtube.com/watch?v=-HG8H4n2j9I
- https://www.ted.com/talks/nadine_burke_harris_how_childhood_trauma_affects_health_across_a_lifetime?language=en

Thank You

Dr. Allison Sampson-Jackson, LCSW, LICSW, CSOTP

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