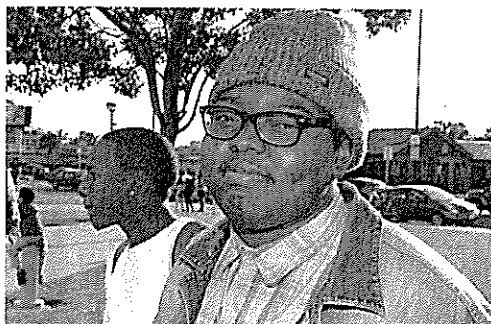


Building Resilience in Our Community

Understanding and Supporting Children & Families with
Adverse Childhood Experiences (ACEs)



Photo: Center for Youth Wellness



Participant's Guide

April 2014

CENTER FOR
YOUTH WELLNESS
health begins with hope

HANDOUT 1: Common Ground (Reflection Activity)



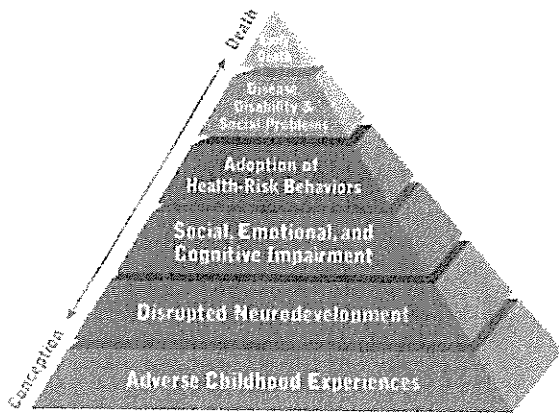
Photo: Used with permission from Microsoft

Think back about someone who impacted your life in a positive way.

What did this person say or do that was positive? How did this event shape how you think about yourself over these many years?

[illegible]

HANDOUT 2: What are Adverse Childhood Experiences (ACEs)?



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

The Adverse Childhood Experiences (ACE) Study is one of the largest investigations ever conducted to assess associations between childhood maltreatment and later-life health and well-being. The study is a collaboration between the Centers for Disease Control and Prevention and Kaiser Permanente's Health Appraisal Clinic in San Diego.

More than 17,000 Health Maintenance Organization (HMO) members undergoing a comprehensive physical examination chose to provide detailed

information about their

childhood experience of abuse, neglect, and family dysfunction. To date, more than 50 scientific articles have been published and more than 100 conference and workshop presentations have been made.

The ACE Study findings suggest that certain experiences are major risk factors for the leading causes of illness and death as well as poor quality of life in the United States. Progress in preventing and recovering from the nation's worst health and social problems is likely to benefit from understanding that many of these problems arise as a consequence of adverse childhood experiences.

Source: Center for Disease Control & Prevention online at: <http://www.cdc.gov/ace/index.htm>

Additional Information:

Centers for Disease Control and Prevention

1600 Clifton Rd
Atlanta, GA 30333

800-CDC-INFO
(800-232-4636)
TTY: (888) 232-6348

New Hours of Operation
8am-8pm ET/Monday-Friday
Closed Holidays

cdcinfo@cdc.gov

Stressors on a Child

1. Recurrent **physical abuse**
2. Recurrent **emotional abuse**
3. Contact **sexual abuse**
4. **Alcohol/ drug abuser** in the household
5. **Incarcerated** household member
6. Someone who is chronically **depressed, institutionalized, or suicidal**
7. Mother treated **violently**
8. **One or no parents** or parents **divorced**
9. Emotional or physical **neglect**

HANDOUT 3: Stress in Youth -- Spotting Potential Signs

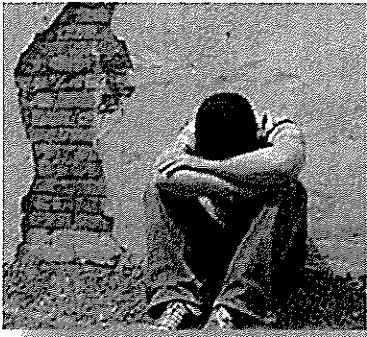
Under 5 Years of Age

- Facial expressions of fear
- Clinging to parent or caregiver
- Whimpering or trembling
- Moving aimlessly
- Becoming immobile
- Returning to behaviors common to being younger
- Thumb-sucking
- Bed-wetting
- Afraid of the dark



Ages 6-11

- Isolate themselves
- Quiet around friends, teachers, family
- Irritable or disruptive
- Outbursts of anger- start fights
- Unable to concentrate
- Refuse to go to school
- Complain of physical problems
- Develop fears- become depressed
- Do poorly with school & homework
- Become filled with guilt

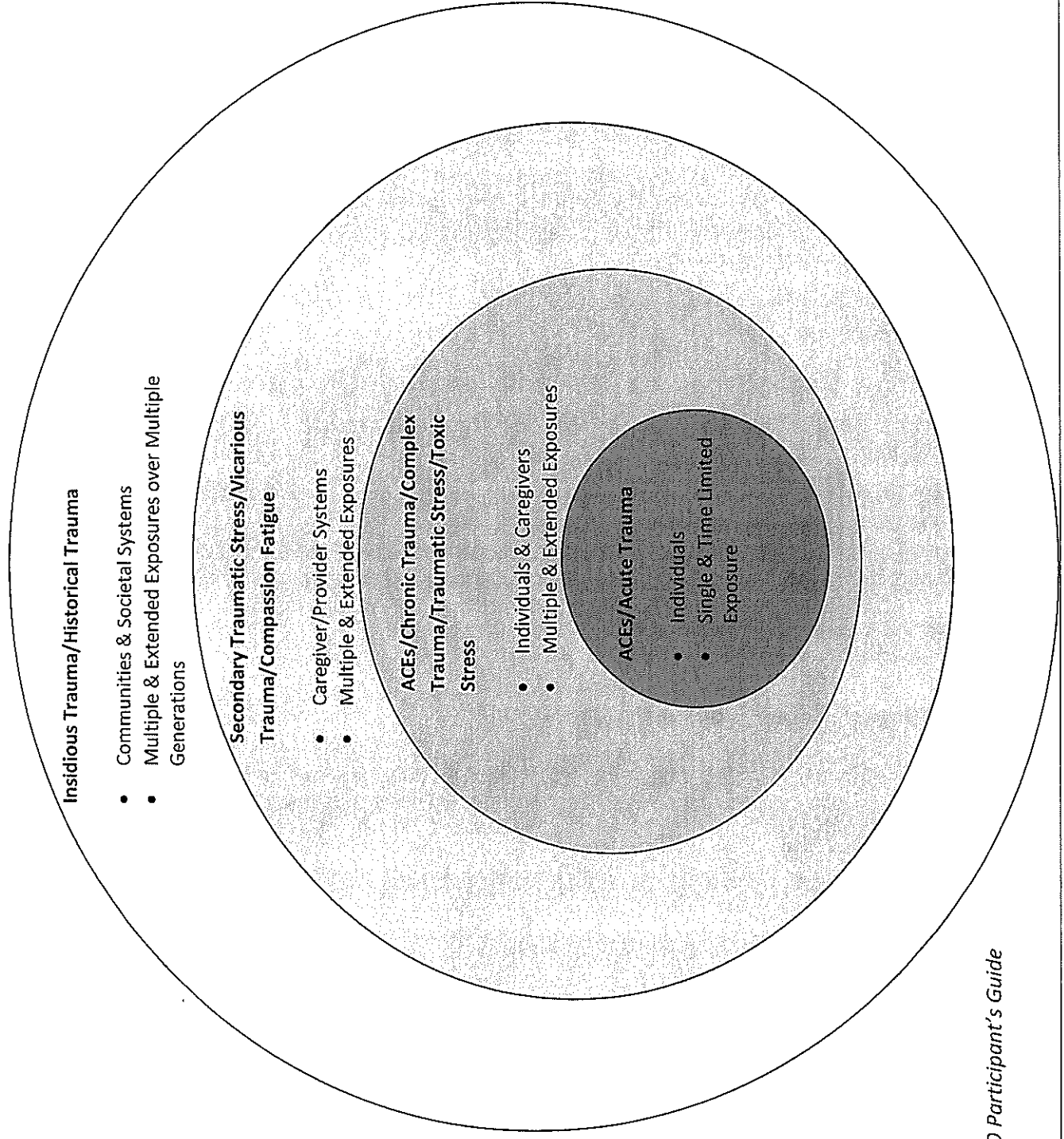


Ages 12-17

- Flashbacks to the event/ trauma
- Avoid reminders of the event/ trauma
- Drug, alcohol, tobacco use/abuse
- Anti-social behavior (*disruptive, disrespectful, destructive*)
- Physical complaints of pain
- Nightmares or other sleep problem
- Isolation or confusion
- Depression, suicidal thoughts, self-injury
- Risk-taking



HANDOUT 4: Spectrum Trauma Grid



HANDOUT 5 Strategies that Build Resiliency in Children

The 7 C's*

**Source: Adapted from A Parent's Guide to Building Resilience in Children and Teens: Giving Your Child Roots and Wings by Kenneth Ginsburg, M.D., MS Ed, FAAP*

Competence

Competence describes the feeling of knowing that you can handle a situation effectively. We can help the development of competence by:

- Helping children focus on individual strengths
- Focusing any identified mistakes on specific incidents
- Empowering children to make decisions
- Being careful that your desire to protect your child doesn't mistakenly send a message that you don't think he or she is competent to handle things
- Recognizing the competencies of siblings individually and avoiding comparisons.

Confidence

A child's belief in his own abilities is derived from competence. Build confidence by:

- Focusing on the best in each child so that he or she can see that, as well
- Clearly expressing the best qualities, such as fairness, integrity, persistence, and kindness
- Recognizing when he or she has done well
- Praising honestly about specific achievements; not diffusing praise that may lack authenticity
- Not pushing the child to take on more than he or she can realistically handle

Connection

Developing close ties to family and community creates a solid sense of security that helps lead to strong values. Parents can help their child connect with others by:

- Building a sense of physical safety and emotional security within your home
- Allowing the expression of all emotions, so that kids will feel comfortable reaching out during difficult times
- Addressing conflict openly in the family to resolve problems
- Creating a common area where the family can share time (not necessarily TV time)
- Fostering healthy relationships that will reinforce positive messages

HANDOUT 5 Strategies that Build Resiliency in Children - *Continued*

Character

Children need to develop a solid set of morals and values to determine right from wrong and to demonstrate a caring attitude toward others. Teachers can support parents' efforts to strengthen character, start by:

- Demonstrating how behaviors affect others
- Helping the child recognize himself or herself as a caring person
- Demonstrating the importance of community
- Avoiding racist or hateful statements or stereotypes

Contribution

Children need to realize that the world is a better place because they are in it. Understanding the importance of personal contribution can serve as a source of purpose and motivation. Teach children how to contribute by:

- Communicating to children that many people in the world do not have what they need
- Stressing the importance of serving others by modeling generosity
- Creating opportunities for each child to contribute in some specific way

Coping

Learning to cope effectively with stress will help your child be better prepared to overcome life's challenges. Positive coping lessons include:

- Modeling positive coping strategies on a consistent basis
- Guiding the child to develop positive and effective coping strategies
- Realizing that telling him or her to stop the negative behavior will not be effective
- Understanding that many risky behaviors are attempts to alleviate the stress and pain in kids' daily lives
- Not condemning your child for negative behaviors and, potentially, increasing his or her sense of shame

Control

Children who realize that they can control the outcomes of their decisions are more likely to realize that they have the ability to bounce back. The child's understanding that he or she can make a difference further promotes competence and confidence. You can try to empower a child by:

- Helping the child to understand that life's events are not purely random and that most things that happen are the result of another individual's choices and actions
- Learning that discipline is about teaching, not punishing or controlling; using discipline to help the child to understand that his actions produce certain consequences

There is no simple answer to guarantee resilience in every situation. But we can challenge ourselves to help our children develop the ability to negotiate their own challenges and to be more resilient, more capable, and happier.

HANDOUT 6 Center for Youth Wellness

Changing Outcomes for Urban Children and Youth

Ideas for Coping Tools:

1) Deep Breathing:

- Pretend you are climbing a mountain. On the way up, inhale through the nose for a count of four deep breaths and on the way down exhale through the mouth for a count of five deep breaths. Practice for several rounds.
- Have children place their hand on their stomach and pretend it is a balloon. While breathing in, the balloon should inflate with air and when breathing out, the balloon should deflate.
- Blowing bubbles or pretending to blow out a candle can be used with younger children.

2) Progressive Muscle Relaxation

- Tense muscles throughout the body and practice releasing. The following script can be used in any variation you'd like:

Pretend you are digging your toes into the mud as deep as you can. Hold for five seconds, then relax. Repeat, this time letting the muscles relax more slowly. Next, stretch your legs out straight in front of you. Hold them up for five seconds, then let them drop. Repeat, dropping the legs more slowly this time around. Suck your stomach muscles in as far as you can go, trying to make the belly button stick to the spine. Hold for five seconds, then relax. Repeat, this time relaxing the muscles more slowly. Pretend you're holding the chains of a swing, extend your elbows back to feel your shoulder muscles tighten. Hold for five seconds and relax. Repeat, this time relaxing the muscles more slowly. Stretch your arms as high as they can go and spread out your fingers. You should feel your shoulder and back muscles tighten. Hold for five seconds then relax. Repeat, this time relaxing more slowly. Pretend you're holding a lemon in each hand. Squeeze as tight as you can then relax. Repeat again, this time relaxing more slowly. Smile as wide as you can to feel your jaw tighten. Hold for five seconds then relax. Wiggle your mouth to loosen your jaw. Repeat again. Pretend you have a fly on your nose. Wiggle your nose to get the fly off. Repeat.

3) Safe place

- Have child imagine a place that makes him/her feel safe as if they're there in the moment in as much detail as possible. Guiding prompts could be: What does the place look like? Who's there with you? What does it feel like?
- Alternatively, can have the child draw the place, write about it, or describe it to you if they wish.

4) Traffic light/Feeling thermometer/Feelings chart

-These can be used to help the child express his/her feelings and level of intensity. With the traffic light, green means that the child is feeling great. Yellow is the warning sign that the child is starting to feel upset. Red symbolizes feeling out of control/exploding. The goal is to get the child to recognize the yellow light to be able to use some coping tools to not get to red.

-The feeling thermometer uses numbers to signify different levels of feeling. A "1" corresponds to feeling great. A "2-3" means being a little bothered. A "4-5" means that things are becoming difficult. A "10" means being extremely upset, at the point of losing control.

-There are feelings charts with pictures of faces depicting different emotions that can be used to check-in with the child. This might be a good way to start and end the day. To help children develop greater awareness of emotions, can also have them draw their feelings or play charades to act out different emotions.

5) Positive thoughts

-Draw two columns one with a plus sign, the other with a negative sign. Using an event that was upsetting to the child, have him/her list all the negative thoughts associated with the event (e.g. Event-doing poorly on a test; negative thought-"I'm dumb"). In the plus column, have the child practice coming up with as many positive thoughts (i.e. "But I got an A last week.") as possible to counter the negative ones. The idea is to have at least one more positive thought than negative.

6) Give the child a choice when possible. E.g. taking an exam in class or in another room

7) Constructive questioning: Cannot be answered yes/no and engages the child in the communication process. For example:

-“Can you tell me what happened to make you so upset?”

-“How can I help you right now?”

8) Positive communication

-Make eye contact. Eliminate distractions. Listen with closed mouth. Let students know they've been heard. Ask the right questions. Express your own feelings. Admit when you don't know something.

9) Questions phrased as a statement: allows student option of responding, just listening, or giving a non-verbal response. For example:

-“Looks like you're having a tough day.”

HANDOUT 6 Center for Youth Wellness- *Continued*

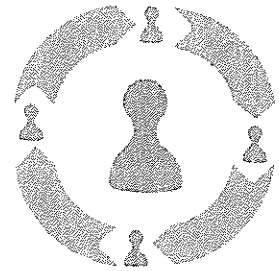
-“Students can get upset when they’re having a tough time at home.”

10) Other ideas:

- Journal writing: can either use a specific topic or do free writing
- Art: drawing, clay, finger paints, puppets with younger children to help emotional expression
- Exercise: e.g. stretching, yoga, have child take a break by running a few laps on playground
- Music: e.g. softly playing music in the background, singing, dance
- Quiet time or meditation

11) Your favorites

HANDOUT 7: Rethinking Your Own Organization



FOR DISCUSSION:

Knowing what you now know...

- How could you rethink and reorganize the way you deliver services?
- What changes (big or small) could be made within your organization to support the child with ACEs?
- What is ONE change you could make, within your role that addresses the way you deliver services?

Resources*

More on the ACEs Study

Center for Disease Control & Prevention (CDC)
Adverse Childhood Experience Study
Includes major findings, statistics, and publications.

Online: www.cdc.gov/ace/

ACE Study Information Site

Information from the original researchers with FAQs and materials for download.

Online: <http://acestudy.org>

The National Child Traumatic Stress Network (NCTSN) @ UCLA
11150 W. Olympic Blvd., Suite 650
Los Angeles, CA 90064
Tel. 310- 235-2633

This network was established to improve access to care, treatment, and services for traumatized children and adolescents exposed to traumatic events. Provides information about various types of trauma and information for referrals:

Online: www.nctsn.org/

Center on the Developing Child at Harvard University

Multimedia and journal articles for reference.

Online: <http://developingchild.harvard.edu/>

For CBO Staff

CPMC Bayview Child Health Center
1335 Evans Avenue
San Francisco, CA 94124
Tel. 415-600-1990

Services for children from birth to age 18 , including:

Pediatrics (health exams and sick visits, physicals for sports or school, immunizations, asthma management, hearing and vision screenings, developmental checks)

Nutritionist (health education, weight management)

Case managers... to connect you to free and low cost services ex: child care; health insurance enrollment , school counseling / IEPs , parenting education, housing assistance , food and utility assistance , legal assistance.

American Academy of Pediatrics
141 Northwest Point Boulevard
Elk Grove Village, IL 60007
Tel: 1-800-433-9016 (toll-free)

Provides information and resources that support the physical, mental, and social health and well-being of all infants, children, adolescents, and young adults.

Online: www.aap.org

For Parents

Lucile Packard Children's Hospital
725 Welch Road
Palo Alto, CA 94304
Tel. 650- 497-8000

Referral Center- Provides information on how to access our physicians and services.

Patient Services- Services to education for patients and families to support their social and emotional well-being.

San Francisco District Attorney Administration, Criminal Division, Victim Services, and Bureau of Investigations
Hall of Justice
850 Bryant Street, Room 322
San Francisco, CA 94103
Tel. 415- 553-1751

Explore Online

Center for Youth Wellness- Research
<http://www.centerforyouthwellness.org/what-we-are-doing/research/>

Video List

<http://www.centerforyouthwellness.org/news/videos/>