

When ACEs Are High: Adverse Childhood Experiences

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**Why do you need to know about
the impact of trauma on children?**

Learning Objectives

- Understand what trauma is and how it impacts children.
- Learn to respond in ways that will reduce trauma reaction or fear responses and avoid re-traumatization.

We all experience stress...



But we return to a sense of well-being

Positive Stress

The body's normal and healthy response to a tense situation or event.

Example:

First day of school or work

Tolerable Stress

Activation of the body's stress response to a long-lasting or severe situation or event.

Example:

Loss of family member, but with supports in place

Toxic Stress

Prolonged activation of the body's stress response to frequent, intense situations or events.

Example:

Witnessing domestic violence in the home; chronic neglect

What is Trauma?

When a child feels intensely threatened by a situation he or she is involved in or witnesses

Types of Trauma

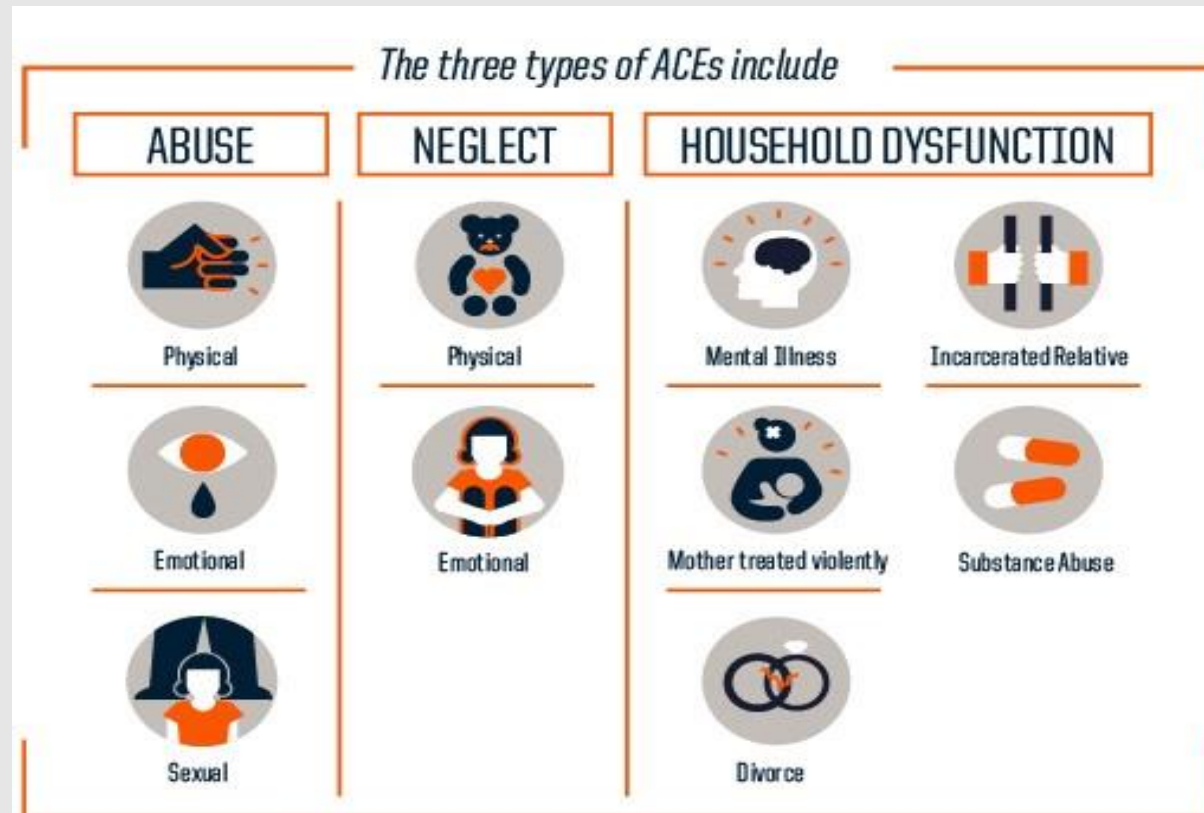
- Specific Time Limited Traumatic Event
 - witnessing crime, surviving a violent attack, living through a natural disaster
 - has specific beginning and end
 - may not change development of the brain or lead to long term effects
- Complex Trauma is Chronic and Pervasive
 - early childhood neglect; ongoing physical, sexual or emotional abuse; living in an environment of domestic violence and substance abuse
 - occurrence is unpredictable and creates a sense of constant danger

Facts:

- Trauma can impact school performance.
- Trauma can impair learning.
- Traumatized children may experience physical and emotional distress.

Adverse Childhood Experiences

The degree of trauma is commonly gauged in terms of ACEs.



What we know about ACEs

- The higher the number of ACEs in a child's background, the more likely they will have long-term effects from these traumas.
- ACEs can have a profound impact on academic skill acquisition and emotional and behavioral functioning.
- Children with higher ACEs are more likely to drop out of school, have difficulty holding a job, end up in prison, have drug and alcohol problems and have fewer meaningful relationships.
- Exposure to significant trauma in childhood leads to a higher likelihood of developing risk factors for heart disease in early adulthood, hypertension, obesity and diabetes.

How common is it?

26% of children in the U.S. witness or experience a traumatic event before they turn 4 years old.

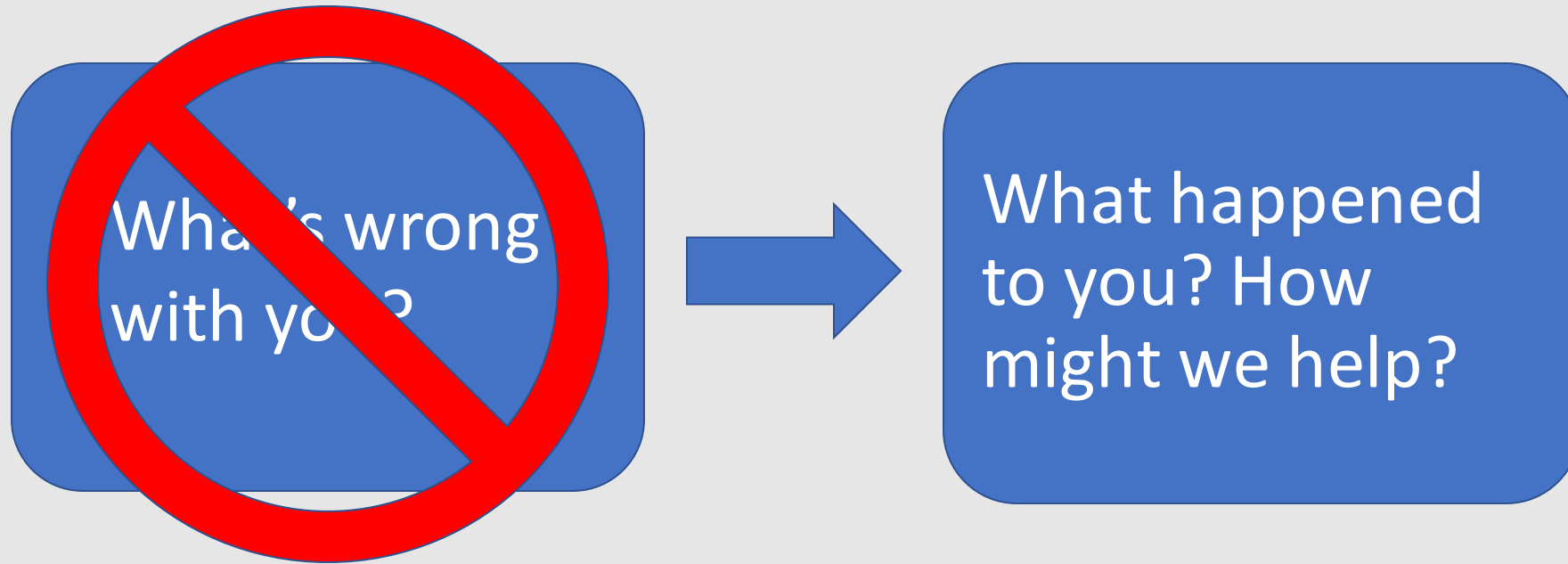
14% of children have experienced abuse by a caregiver.

60% of adults say they experienced abuse or other traumatic family events in their own childhoods.

11% of girls ages 14 to 17 reported experiencing sexual assault or abuse during the past year.

41% of youth under 18 reported experiencing a physical assault in the last year.

A trauma-informed lens shifts our question



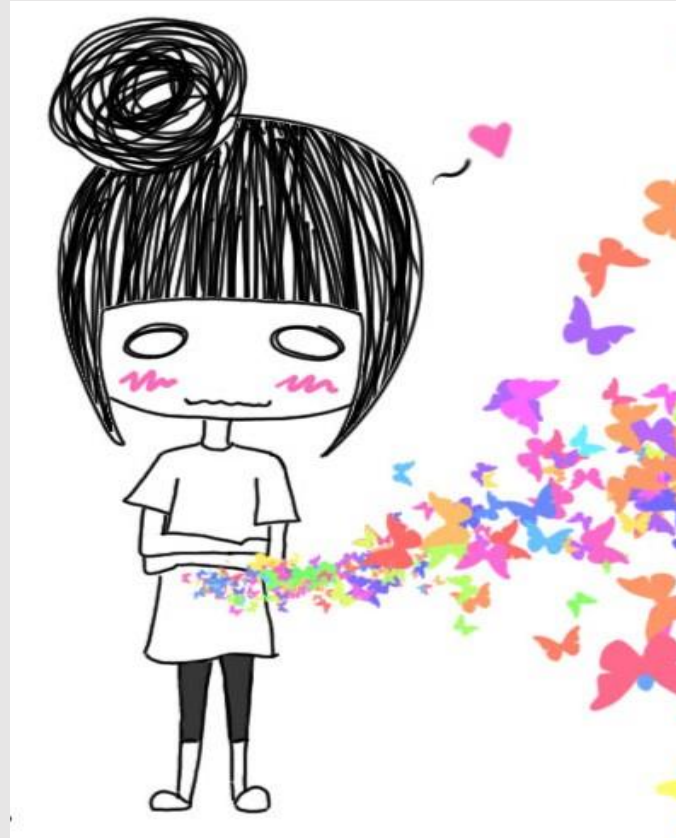
Turn & Talk: How might this change our perspective and the ways we interact with children?

Trauma and chronic stress change the way
our bodies and brains react to the world.

How do the memories get triggered?



**External Sensory
Information**

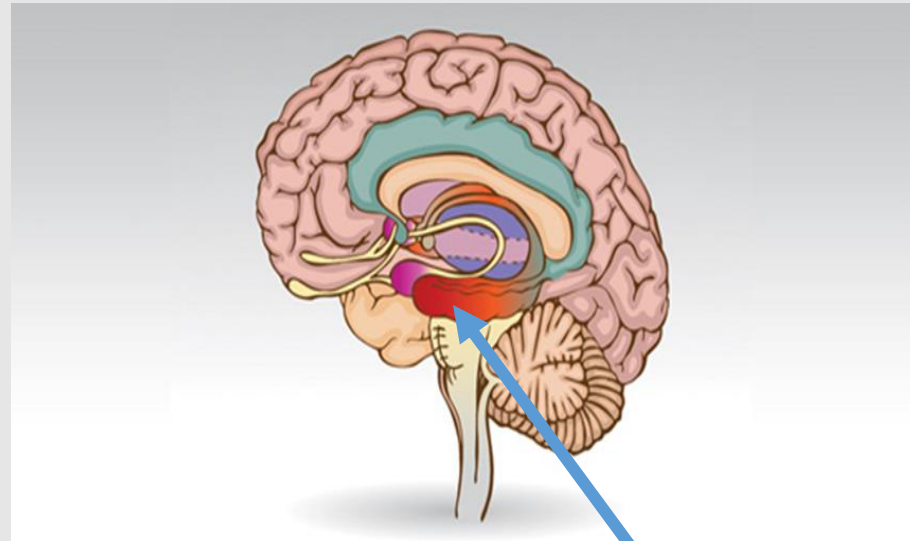


**Internal Sensory
Information**

Potential Triggers

- Loud, chaotic environments
- Odors
- Physical touch
- Confinement
- Uncertainty about expectations
- Change in routine
- Situations involving authority figures and limit setting
- Hand or body gestures that appear threatening
- Witnessing aggressive behavior
- Emergency vehicles and police or fire personnel
- Feelings such as anger, sadness or fear in response to common school conflicts

What happens in the brain?

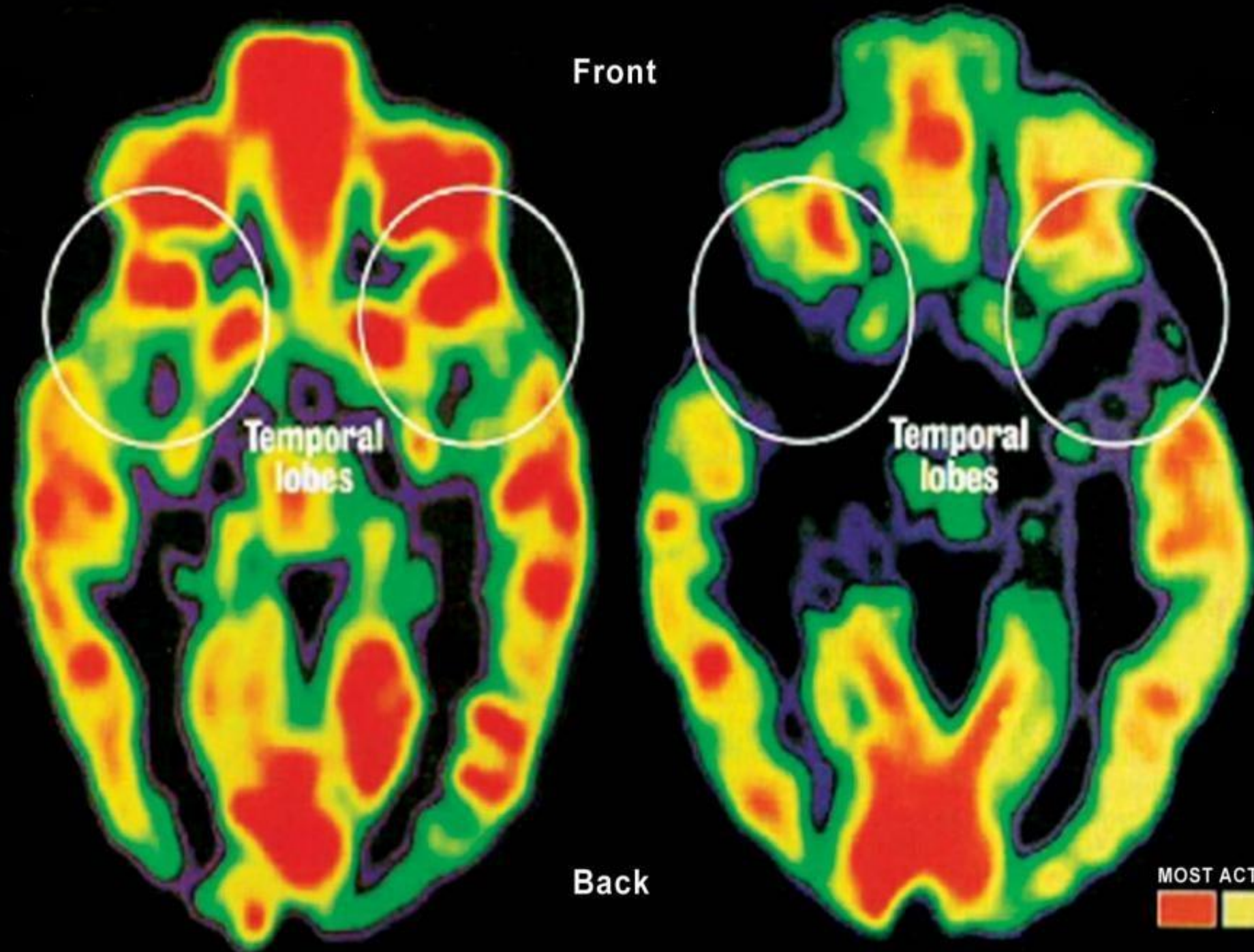


Survival
responses:

Flight
Fight
Freeze

Primitive survival brain

Survival Response	Related Behaviors
Fight	Verbal attacks, swearing, aggression assaultive behavior, defiance, aggressive stance, clenched fists & teeth
Flight	running away, refusing to talk, avoidance, hiding, substance use
Freeze	Appearing unresponsive or numb, unable to interact, disconnected



How does trauma affect children?

- Irritability
- Difficulty staying calm
- Lack of understanding of other people's intentions
- Live in a state of hypervigilance
- Feel no sense of safety; detect danger even when none exists
- Easily overwhelmed and act in extreme ways
- Difficulty connecting with others
- Unable to accurately read social cues
- Isolation or sadness

Behavior is communication

Behavior is the traumatized child's way of communicating.

They will not use talk, reason or logic.

Behavior is a symbol for what a child is experiencing – terror, worry, insecurity, anger, guilt, shame, unworthy.



There is good news...



New neural pathways can be created with the help of safe and caring adults.

Self-regulation skills must be taught and modeled.

No, it isn't easy..



Put on your own oxygen mask first!

Adults must stay aware of their own emotional state.

Remember to check your own reactions

Calm can be as contagious as fear.

Model the behavior you want. Your physiology impacts their physiology.

Keep a calm and relaxed posture. Slow down your body movements.

Slow down your speech and pause between sentences.

Allow space.

Avoid holding eye contact or making the student look at you.

Maintain a neutral and “soft” facial expression.

Remember

Reactions

Communication breakdown

- 55% is body language
- 38% is tone of voice
- 7% is the words we use

Calm d

Mod

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Slow

Allow

Avoid ho

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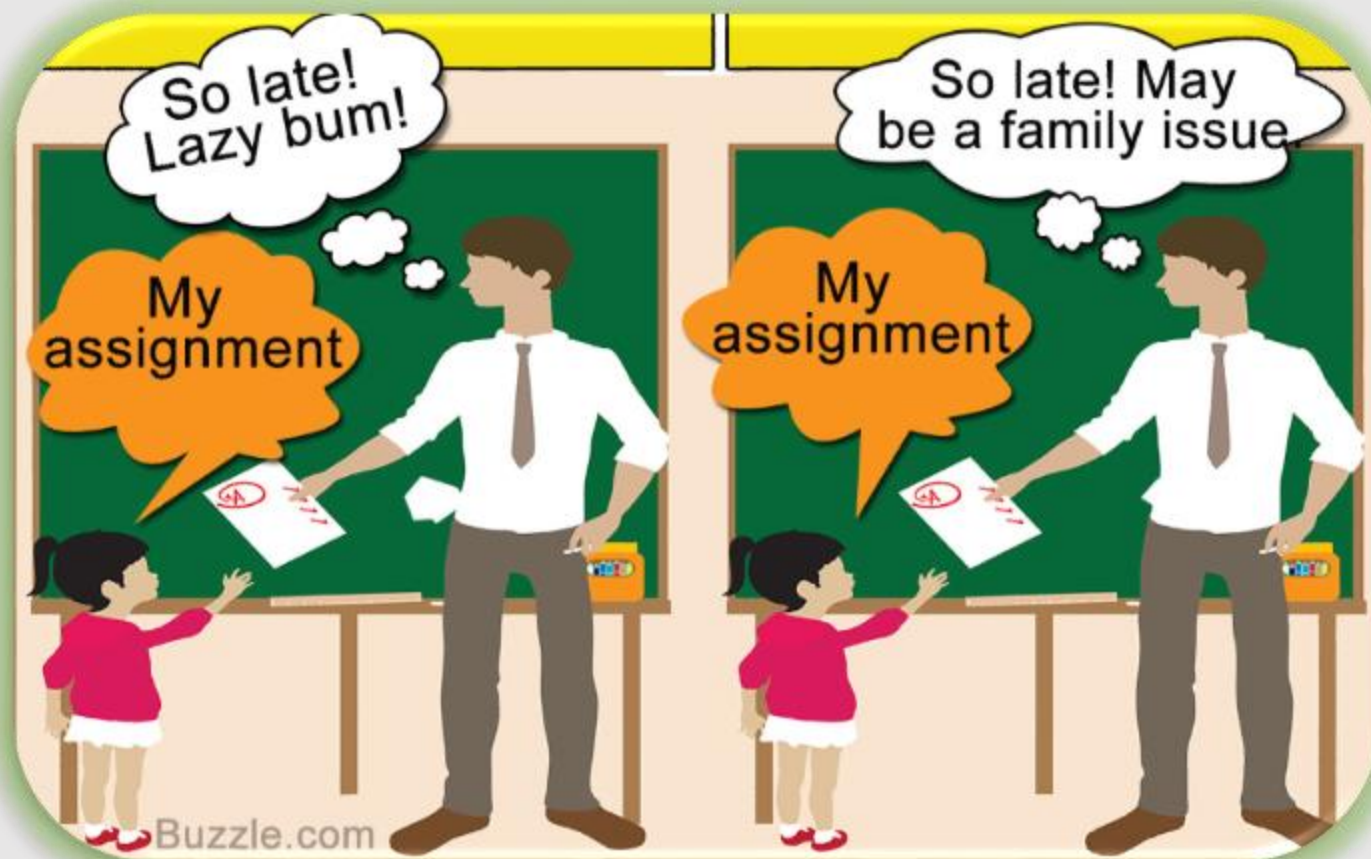
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Attribution



How we **characterize behavior** in large part determines how we **respond** to the behavior.

Attribution Theory



- The attempt to understand the behavior of others by attributing causation to **feelings, beliefs, intentions, personality or situations**
- **Reactions** are determined by the **assignment of cause** to the behavior more than by the behavior

Fundamental Attribution Error

- Assigning the **incorrect** cause to behavior
 - Attribution: The student is mean and doesn't like authority figures.
 - Fact: The student is depressed and socially isolated.

Reframing our thoughts on behavior

We think

- “The child arrives late every time—he is so careless.”
- “She is always shouting out—she is so rude!”
- “He never pays attention in class—he is so scatterbrained.”
- “She never participates—that child is so defiant.”

In reality

- “I have three siblings I had to get ready before I could leave.”
- “There’s a new baby at home; no one pays attention to me.”
- “I’m hungry because I haven’t eaten breakfast.”
- “I’m self-conscious about what other kids will think.”

Reflection

- How could your assignment of attribution change your response?
- Could making an attribution error harm your relationship with children in your care?
- Is it harmful to assume that a child's behavior could be the result of trauma?

Case example

Ben, a 5th grader, arrived after the group got started and he knew he was late. As soon as he entered the room, he was asked why he didn't have his uniform on. This was not the first time he had failed to wear his uniform, so he was told to sit outside of the group and was unable to participate as a consequence. Later, some kids were rough housing and accidentally pumped into Ben. As one of the kids went to apologize, Ben punched him in the stomach. The leader yelled at Ben to stop and he began to scream and kick over chairs. Ben was told he would not be allowed to attend anymore and his mother was called to inform her of the incident.

What can be done in your setting?

- Create a calm and predictable environment
- Prepare everyone for transitions
- Have back-up strategies for when children get overwhelmed
- Create a quiet place in the setting
- Give opportunities to take a sensory break or step away from the group
- Create opportunities for children to show kindness to each other
- Identify and reduce triggers within your group
- Take stretch breaks and practice breathing exercises

Restorative Practices

Restorative discipline practices that value an instructive opportunity and a sense of positive connection have been found to be more effective than punitive practices.

- Develop community
- Manage conflict and tensions by repairing harm and building relationships
- Informal
 - Using affective statements and/or questions in the moment
- Formal
 - Group or circle
 - Conference

Trauma Sensitive Strategies

- Validate the child's feelings (even if they do not appear rational)
- Listen to what the child is saying
- Provide choices in the moment
- Use encouraging statements and positive reinforcement
- Provide a space for the child to calm down
- Avoid arguing with the child
- Minimize public confrontation
- Avoid threatening punishment in the moment

Foster Connections with children

- Use children's names often
- Make a point to say hello to children who seem to have little or no connections
- Offer new experiences for children by providing them a voice and opportunities to help others

Promote Play and Brain Breaks

- Rest, movement, and socialization helps children perform better cognitively
- Dance Breaks
 - <https://www.youtube.com/user/TheLearningStation>
 - <https://www.gonoodle.com/>
- Simons Says
- Social Games
 - Find someone in the class who . . .
 - Have students line up in order of . . .

Collaborate with Families

- Create a welcoming environment for families
- Set the expectation that families are involved
- Communicate via phone or in-person that you care about the child and that family involvement is important
- Normalize their feelings
- Empower the family by asking for their assistance

Time in versus Time Out

- Help the child return to a calm and engaged state by reestablishing connections—not removing the child from the environment
- Have the child near you
- Acknowledge to the child that it is ok to have the feelings but not ok to hurt themselves or others or be disrespectful
- Calmly tell them “I want to help you calm down”
- After the student is calm, address misbehavior and identify one or two strategies for next time—deep breathing, taking a break—and move on
- Revisit when calm and practice strategy

S

Slow down, soften voice, facial expression, posture and body language

T

Take a step back and breathe

E

Make an **E**mpathy statement

P

Ppractice skills that settle or move to release energy

S

Stay connected to the child

Core Principles

1. Understand trauma and it's impact
2. Believe that healing happens in relationships
3. Ensure emotional and physical safety
4. View students holistically
5. Support choice, control and empowerment for students
6. Strive for cultural competence
7. Use a collaborative approach