

WESTCHESTER RESILIENCE COALITION

ACEs informed and aligned

The Westchester Resilience Coalition builds awareness of adverse childhood experiences (ACEs) as a public health concern. The Coalition seeks to foster individual, family and community resilience in Westchester County by supporting development of creative responses to the challenge of ACEs.

The vision of the Coalition is that all services in Westchester are informed by and aligned with the science of ACEs and resilience and by an understanding of how protective factors strengthen individuals and communities.

Know more. Go to:

conversations.westchesterlibraries.org

ACES Questionnaire:

Listed below are the questions in the **Adverse Childhood Events** survey. This is a version provided to adults. For each positive answer, record a point. The number of points is your score. <u>Please remember:</u> ACE scores don't tally the positive experiences in early life that can help build resilience and protect a child from the effects of trauma. This is an additional piece of information that may inform your own exploration and lead you to talk to your health care providers and others about what is challenging to you now and what supports you may need.

Prior to your 18th birthday...

- 1. Did a parent or other adult in the household often or very often... Swear at you, insult you, put you down, or humiliate you? or Act in a way that made you afraid that you might be physically hurt?
- 2. Did a parent or other adult in the household often or very often... Push, grab, slap, or throw something at you? or Ever hit you so hard that you had marks or were injured?
- 3. Did an adult or person at least 5 years older than you ever... Touch or fondle you or have you touch their body in a sexual way? or Attempt or actually have oral, anal, or vaginal intercourse with you?
- 4. Did you often or very often feel that ... No one in your family loved you or thought you were important or special? or Your family didn't look out for each other, feel close to each other, or support each other?
- 5. Did you often or very often feel that ... You didn't have enough to eat, had to wear dirty clothes, and had no one to protect you? or Your parents were too drunk or high to take care of you or take you to the doctor if you needed it?
- 6. Were your parents ever separated or divorced?
- 7. Was your mother or stepmother...Often or very often pushed, grabbed, slapped, or had something thrown at her? or Sometimes, often, or very often kicked, bitten, hit with a fist, or hit with something hard? or Ever repeatedly hit over at least a few minutes or threatened with a gun or knife?
- 8. Did you live with anyone who was a problem drinker or alcoholic, or who used street drugs?
- Was a household member depressed or mentally ill, or did a household member attempt suicide?
- 10. Did a household member go to prison?

What's the Score in the Room? In some screenings and discussion, we offer the opportunity for participants to share their ACES score anonymously by following these steps:

- 1. Go to www.menti.com
- 2. Enter Code that you see on the top of the screen.
- 3. Enter your score.
- 4. Click submit.

Resilience Questionnaire:

A group of early childhood service providers, pediatricians, psychologists and health advocates in Southern Kennebec Healthy Start (Augusta, Maine) developed a "Resilience" questionnaire modeled on the ACES questionnaire. It is intended to prompt reflection and conversation on experiences that may have served as protective factors for those with an ACE score of four or more. | Circle the most accurate answer under each statement. Consider how many of these factors you had as a child (were "Definitely" or "Probably" true. How many are still true for you?

1. I believe that my mother loved me when I was little.

Definitely true Probably true Not sure Probably Not True Definitely Not True

2. I believe that my father loved me when I was little.

Definitely true Probably true Not sure Probably Not True Definitely Not True

3. When I was little, other people helped my mother and father take care of me and they seemed to love me.

Definitely true Probably true Not sure Probably Not True Definitely Not True

4. I've heard that when I was an infant someone in my family enjoyed playing with me, and I enjoyed it, too.

Definitely true Probably true Not sure Probably Not True Definitely Not True

5. When I was a child, there were relatives in my family who made me feel better if I was sad or worried.

Definitely true Probably true Not sure Probably Not True Definitely Not True

6. When I was a child, neighbors or my friends' parents seemed to like me.

Definitely true Probably true Not sure Probably Not True Definitely Not True

7. When I was a child, teachers, coaches, youth leaders or ministers were there to help me.

Definitely true Probably true Not sure Probably Not True Definitely Not True

8. Someone in my family cared about how I was doing in school.

Definitely true Probably true Not sure Probably Not True Definitely Not True

9. My family, neighbors and friends talked often about making our lives better.

Definitely true Probably true Not sure Probably Not True Definitely Not True

10. We had rules in our house and were expected to keep them.

Definitely true Probably true Not sure Probably Not True Definitely Not True

11. When I felt really bad, I could almost always find someone I trusted to talk to.

Definitely true Probably true Not sure Probably Not True Definitely Not True

12. As a youth, people noticed that I was capable and could get things done.

Definitely true Probably true Not sure Probably Not True Definitely Not True

13. I was independent and a go-getter.

Definitely true Probably true Not sure Probably Not True Definitely Not True

14. I believed that life is what you make it.

Definitely true Probably true Not sure Probably Not True Definitely Not True



STRESS & EARLY BRAIN DEVELOPMENT

Understanding Adverse Childhood Experiences (ACEs)

What are ACEs?

ACEs are significant childhood traumas as identified below which can result in actual changes in brain development. These changes may affect a child's learning ability, social skills, and can result in long-tem health problems. The Centers for Disease Control and Prevention (CDC) views ACEs as one of the major health issues in the 21st century.

Adverse Childhood Experiences can include:

- 1. Emotional abuse
- 2. Physical abuse
- 3. Sexual abuse
- 4. Emotional neglect
- 5. Physical neglect
- 6. Mother treated violently
- 7. Household substance abuse
- 8. Household mental illness
- 9. Parental separation or divorce
- 10. Incarcerated household member

Exposure to childhood ACEs can increase the risk of:

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

How do ACEs affect health?

Through stress. Frequent or prolonged exposure to ACEs can create toxic stress which can damage the developing brain of a child and affect overall health.



A **Survival Mode Response** is one that increases heart rate, blood pressure, breathing and muscle tension. When a child is in survival mode, self-protection is their priority. In other words:

"I can't hear you, I can't respond to you, I am just trying to be safe."

The good news is resilience brings hope!



What is Resilience?

Resilience is the ability to adjust (or bounce back) when bad things happen. Research shows resilience helps reduce the effects of ACEs. Protective factors are internal and external resources that help us to build our resilience.

Resilience trumps ACEs!

Parents, teachers and caregivers can help children by:

- Gaining an understanding of ACEs
- · Creating environments where children feel safe emotionally and physically
- · Helping children identify feelings and manage emotions
- Creating protective factors at home, schools and in communities

What are protective factors?

1. Parental resilience

Increasing parents' ability to problem-solve and build relationships with their child and others

2. Nurturing and attachment

Listening and responding to a child in a supportive way and discovering and paying attention to the child's physical and emotional needs

3. Social connections

Having family, friends or neighbors who are supportive and willing to help or listen when needed

4. Concrete supports

Having their child's basic needs met, such as housing, food, clothing and health care

Knowledge of parenting and child development

Increasing parents' knowledge of their child's development and appropriate expectations for their child's behavior

Social and emotional competence of children

Helping their child to interact positively with others, manage emotions and communicate feelings

Resources:

Parent Help 123 www.parenthelp123.org 1-800-322-2588

Resilience Trumps ACEs www.resiliencetrumpsaces.org

Washington Information Network www.win211.org 1-877-211-WASH (9274)

CDC Adverse Childhood Experiences (ACE) Study www.cdc.gov/ace/about.htm



Miss Kendra's list is a teaching tool used in some settings to empower children to understand that they have rights as individuals—including the right to feel happy and safe. It provides an opportunity for dialog with adults and other children about behaviors that support individuals and communities.



Miss Kendra's List (For Elementary)

No child should be punched or kicked.

No child should be left alone for a long time.

No child should be hungry for a long time.

No child should be bullied or told they are no good.

No child should be touched in their private parts.

No child should be scared by gun violence at home or in school.

No child should have to see other people hurt each other.

BECAUSE

It makes a child not care about school.

It makes a child feel sad or scared or lonely.

It makes a child feel angry and want to fight too much.

It makes a child feel like not trying hard or giving up.

It makes a child worry a lot about their family.

This Is What Miss Kendra Says.... What Do You Say?

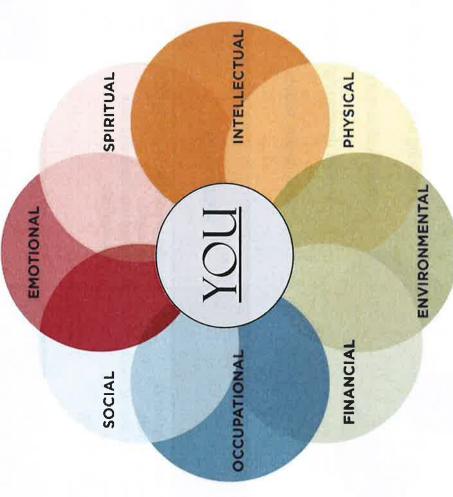
For more information go to http://www.traumainformedschools.org/

Resilience and Wellness

Wellness is being in good physical and mental health. Resilience is an outgrowth of wellness in your whole being.

can also benefit your mental health, and vice versa. It is important to make healthy choices for both your physical and mental well-being. Wellness Because mental health and physical health are linked, problems in one area can impact the other. At the same time, improving your physical health is not the absence of illness or stress; you can still strive for wellness even if you are experiencing these challenges in your life.

One way of thinking about wellness is as a whole composed of eight parts or dimensions.



The eight dimensions of wellness are:

Emotional—Coping effectively with life and creating satisfying relationships

Environmental—Good health by placing yourself in pleasant, stimulating environments that support wellbeing.

Financial—Satisfaction with current and future financial situations.

Intellectual—Recognizing creative abilities and finding ways to expand knowledge and skills

Occupational—Enrichment and satisfaction from one's work

Physical—Recognizing the need for physical activity, healthy foods, and sleep

Social—Developing a sense of connection, belonging, and a well-developed support system

Spiritual—Expanding a sense of purpose and meaning in life

For more information on this topic go to https://www.samhsa.gov/wellness



Actions for Resilience and Wellness

to start developing healthy habits that can have a positive impact on your physical make wellness a part of your everyday life. Wellness strategies are practical ways Learning about the Eight Dimensions of Wellness can help you choose how to and mental health.

EMOTIONAL	SPIRITUAL	INTELLECTUAL	PHYSICAL
 Take a deep breath Sit in the park Play your favorite music Take a nap Hug someone Smile 	 Try to understand your beliefs & values Spend time exploring your spiritual life 	 Stay curious & engaged in learning new things Read for pleasure Join a club that will build upon your interests 	 Exercise Eat well-balanced meals
ENVIRONMENTAL	FINANCIAL	OCCUPATIONAL	SOCIAL
De-clutter your room Recycle Volunteer to clean up the environment	 Plan for future financial health Plan for large purchases Look for sales/clip coupons 	 Be mentally present when you are working If you are able to, avoid working in toxic environments 	 Have a strong social network Mentor or give guidance to someone else Write a thank you letter to someone who helped you in the past

Hacking Your Vagus Nerve Some Simple Ways to Shift into States of Social Engagement, Safety and Self-Regulation

Breathing

Exhale slowly to calm down, create resistance with lips and tongue to enhance the effect Breathe in and out deeply and slowly to engage Heart Rate Variability (calm alertness) Imagine directing your breath to different parts of body as you breathe in Blow bubbles – practice slow exhalations to get them bigger

Posture and Gesture

Wonder Woman Pose, Victory Pose, Welcoming Pose – counteracts helplessness, despair, shame Curl forward in chair when exhaling; expand and open up core when inhaling Try doing the opposite (breathe in when collapsing, breathe out when inhaling) Balancing exercises and activities involving fluid movement Dance (combines gesture, posture, gait, serve and return, co-regulation with others).

Somatic and Visceral Sensations

Deep pressure
Hugging, holding hands
Imagine you have roots anchoring your feet to the ground, strings holding your arms to the sky
Body scan for tension, try tensing and relaxing different parts
Try to detect your pulse in different parts of body
Mindful eating – attend to taste, smell, texture, swallowing

Sound

Humming and chanting – there's a direct nerve from larynx to the heart's pacemaker Positive self-talk (preferably out loud) Vary the cadence, tone, rate, pitch, volume, phrasing of your voice – note how it makes you feel

Spinning, rocking, prayer wheel, rosary, fidget spinner, tapping

Vary the cadence, tone, rate, pitch, volume, phrasing of your voice – note how it makes you feel
Try speaking in long slow sentences with a pause at the end (sometimes used for stage fright)
Listen to music, attend to different instruments, timbres, harmonies, dissonance, and variations
Focus attention on far away sounds then attend to sounds progressively closer, ending with those in
your body

Play music, preferably in sync with other people

Face and Head

Smile, tilt your head, exercise facial muscles
Run an ice cube down your face, splash cold water, or chill briefly in a bowl of ice
Widen your eye sockets – it helps you hear better
Move your eyes as if they were hands on the face of a clock, clockwise and counterclockwise

Co-Regulation and Play

Toss a ball, do activities that involve serve-and-return, call-and response, variations on a theme. Play games (rules create safe parameters for co-regulation, competition can incorporate fight/flight) Practice meaningful shared rituals, create your own rituals, celebrations, marking events or transitions Expressive Arts: music, drumming, dance, drama, improvisation, poetry, murals Play: Experiment and improvise – Generate patterns, synchronize, then switch it up Tell, be moved by, and create new stories with others.

What do these "neural exercises" have in common?

They induce good stress and "tolerance" through controllable, predictable, and patterned activities. They strengthen and extend the capacity to shift into states of safety, regulation, and connectedness

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1. Before th	is event, h	now familia	r were you	with the s	ubject of A	CEs?			
1 (not at all)	2	3	4	5	6	7	8	9	10 (extremely)
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2. How likely	y are you	to share w	hat you lea	arned today	y with othe	rs in your c	ommunity?	?	
1 (not at all)	2	3	4	5	6	7	8	9	10 (extremely)
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3. How likely	y are you	to discuss	this inform	ation with	your docto	r or other h	ealthcare p	orovider?	
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4. How inter community?1 (not at all)		in in learni	ng more a	bout strate	egies to bui 6				
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5. Are there to share info					ed at this e	vent that yo	ou think we	should c	onnect with
6. If you wou address.	uld like to	receive up	dates on th	nis topic fro	om the Res	ilience Coa	alition, plea	se provid	e your email

Resilience Screening and Discussion - Community Conversation Feedback

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