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. Please remember: 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?
9. 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.

For more information on the topic of Resilience and the Adverse Childhood Events, go to conversations.westchesterlibraries.org
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?

<table>
<thead>
<tr>
<th>Statement</th>
<th>Definitely true</th>
<th>Probably true</th>
<th>Not sure</th>
<th>Probably Not True</th>
<th>Definitely Not True</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. I believe that my mother loved me when I was little.</td>
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<td>2. I believe that my father loved me when I was little.</td>
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<td>3. When I was little, other people helped my mother and father take care of me and they seemed to love me.</td>
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<td>4. I've heard that when I was an infant someone in my family enjoyed playing with me, and I enjoyed it, too.</td>
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<tr>
<td>5. When I was a child, there were relatives in my family who made me feel better if I was sad or worried.</td>
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<tr>
<td>6. When I was a child, neighbors or my friends' parents seemed to like me.</td>
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<td>7. When I was a child, teachers, coaches, youth leaders or ministers were there to help me.</td>
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<td>8. Someone in my family cared about how I was doing in school.</td>
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<td>9. My family, neighbors and friends talked often about making our lives better.</td>
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<tr>
<td>10. We had rules in our house and were expected to keep them.</td>
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<tr>
<td>11. When I felt really bad, I could almost always find someone I trusted to talk to.</td>
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<td>12. As a youth, people noticed that I was capable and could get things done.</td>
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<td>13. I was independent and a go-getter.</td>
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<tr>
<td>14. I believed that life is what you make it.</td>
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</tbody>
</table>

For more information on the topic of Resilience and the Adverse Childhood Events, go to conversations.westchesterlibraries.org
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-term 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

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.

- Reduces ability to respond, learn, or process effectively which can result in problems in school
- Lower tolerance for stress can result in behaviors such as aggression, checking out, and defiance
- May have difficulty making friends and maintaining relationships
- Problems with learning and memory can be permanent
- May cause lasting health problems
- Increases stress hormones which affects the body’s ability to fight infection

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

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

5. **Knowledge of parenting and child development**
   Increasing parents’ knowledge of their child’s development and appropriate expectations for their child’s behavior

6. **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.resilencetrumpsaces.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.trauminformedschools.org/
Resilience and Wellness

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

Because mental health and physical health are linked, problems in one area can impact the other. At the same time, improving your physical health 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 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 well-being.
- **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](https://www.samhsa.gov/wellness)
Actions for Resilience and Wellness

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

<table>
<thead>
<tr>
<th>EMOTIONAL</th>
<th>SPIRITUAL</th>
<th>INTELLECTUAL</th>
<th>PHYSICAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Take a deep breath</td>
<td>Try to understand your beliefs &amp; values</td>
<td>Stay curious &amp; engaged in learning new things</td>
<td>Exercise</td>
</tr>
<tr>
<td>Sit in the park</td>
<td>Spend time exploring your spiritual life</td>
<td>Read for pleasure</td>
<td>Eat well-balanced meals</td>
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<tr>
<td>Play your favorite music</td>
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<td>Join a club that will build upon your interests</td>
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<tr>
<td>Take a nap</td>
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<tr>
<td>Hug someone</td>
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<tr>
<td>Smile</td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ENVIRONMENTAL</th>
<th>FINANCIAL</th>
<th>OCCUPATIONAL</th>
<th>SOCIAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>De-clutter your room</td>
<td>Plan for future financial health</td>
<td>Be mentally present when you are working</td>
<td>Have a strong social network</td>
</tr>
<tr>
<td>Recycle</td>
<td>Plan for large purchases</td>
<td>If you are able to, avoid working in toxic</td>
<td>Mentor or give guidance to someone</td>
</tr>
<tr>
<td>Volunteer to clean up the</td>
<td>Look for sales/clip coupons</td>
<td>environments</td>
<td>else</td>
</tr>
<tr>
<td>environment</td>
<td></td>
<td></td>
<td>Write a thank you letter to someone</td>
</tr>
</tbody>
</table>
<pre><code>                                                                                   | who helped you in the past                |
</code></pre>

August 2018
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
Spinning, rocking, prayer wheel, rosary, fidget spinner, tapping
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
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

Compiled by Andrew Bell, Ph.D.
1. Before this event, how familiar were you with the subject of ACEs?

1 (not at all) 2 3 4 5 6 7 8 9 10 (extremely)

2. How likely are you to share what you learned today with others in your community?

1 (not at all) 2 3 4 5 6 7 8 9 10 (extremely)

3. How likely are you to discuss this information with your doctor or other healthcare provider?

1 (not at all) 2 3 4 5 6 7 8 9 10 (extremely)

4. How interested are you in learning more about strategies to build Resilience - for yourself and your community?

1 (not at all) 2 3 4 5 6 7 8 9 10 (extremely)

5. Are there any organizations that were not mentioned at this event that you think we should connect with to share information about ACEs and Resilience?

6. If you would like to receive updates on this topic from the Resilience Coalition, please provide your email address.
