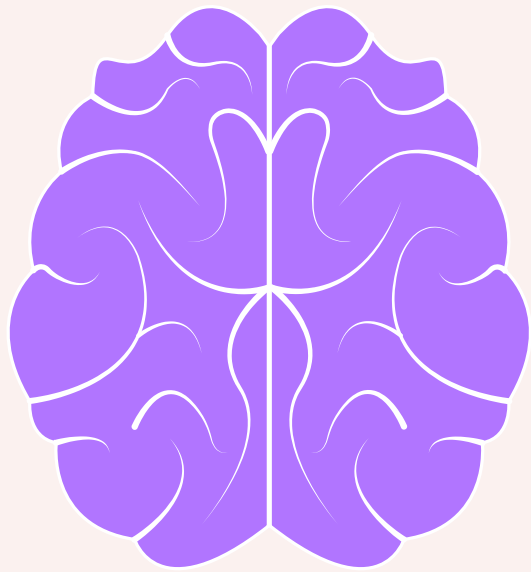




# ACE-ing it: From Toxic Stress to Academic Success

*By: Jamaica Murphy*





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# Objectives

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How ACEs cause toxic stress and social, emotional and behavioral problems

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How toxic stress affects the brain development

3

Learn trauma-informed intervention that can be in the school setting

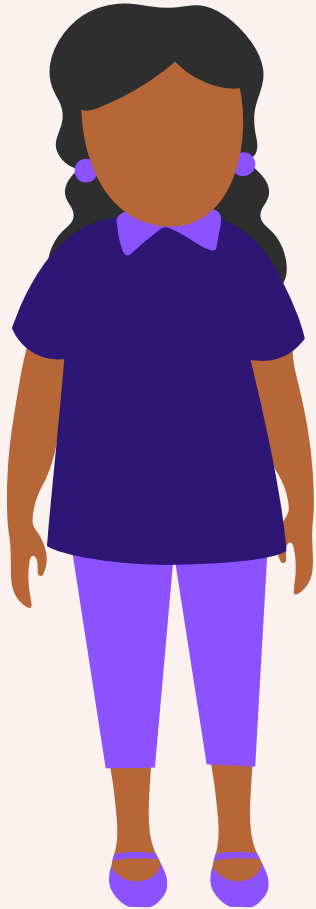


# What Are ACEs

## Adverse Childhood Experiences

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



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# The ACEs Study

The Adverse Childhood Experiences (ACEs) was coined after a landmark investigation study that examined the impact of exposure of childhood adversity on lifetime health conditions. The study of over 17,000 patients found a correlation between high ACE scores and chronic health issues, as well as, social, emotional and behavioral issues.



# The ACE Questions

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 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?

5 10. Did a household member go to prison?



# Toxic Stress



Toxic stress is the extreme, frequent, or extended activation of the stress response, without the buffering presence of a supportive adult. Risk factors for toxic stress in childhood include neglect and abuse, extreme poverty, family violence, substance abuse, and parental mental health problems. Toxic Stress can affect brain architecture and brain chemistry.



We all have normal alarm systems in our brain/body that let us know when we are under threat and mobilize us to fight, flee (flight) or freeze in the face of a threat. When youth experience continuous threats/trauma, the brain/body is put into a chronic state of fear, activating the “survival brain” (mid/lower areas of the brain). This can create an overactive alarm system in the developing brain. A youth’s brain/body that develops within the context of trauma can be more easily triggered into survival brain by “trauma reminders” or “triggers” even when there is no actual threat.





The “survival brain,” causes youth to react as though a “there and then” experience (previous traumatic event) is happening “here and now” (in current reality).

In the brains of traumatized youth, neural pathways associated with fear and survival responses are strongly developed, leaving some children in a state of hyperarousal that causes them to overreact to incidents other children would find nonthreatening.

The amygdala of a traumatized person becomes enlarged. It is enlarged because it is continuously overexcited and overworked. Having experienced trauma once, it senses danger even when there is no danger.

MRIs have shown that the hippocampus shrinks from an over active amygdala.



## Trauma and School

Research shows that when children are exposed to negative experiences like neglect, mental illness in the household, trauma or abuse at a young age, the brain's ability to build circuits that allow different regions of the brain to communicate and process information can be impeded. If those circuits are weak, the development of executive function needed to regulate behavioral control, impulse control, which allow children to focus and follow directions, can be hindered.



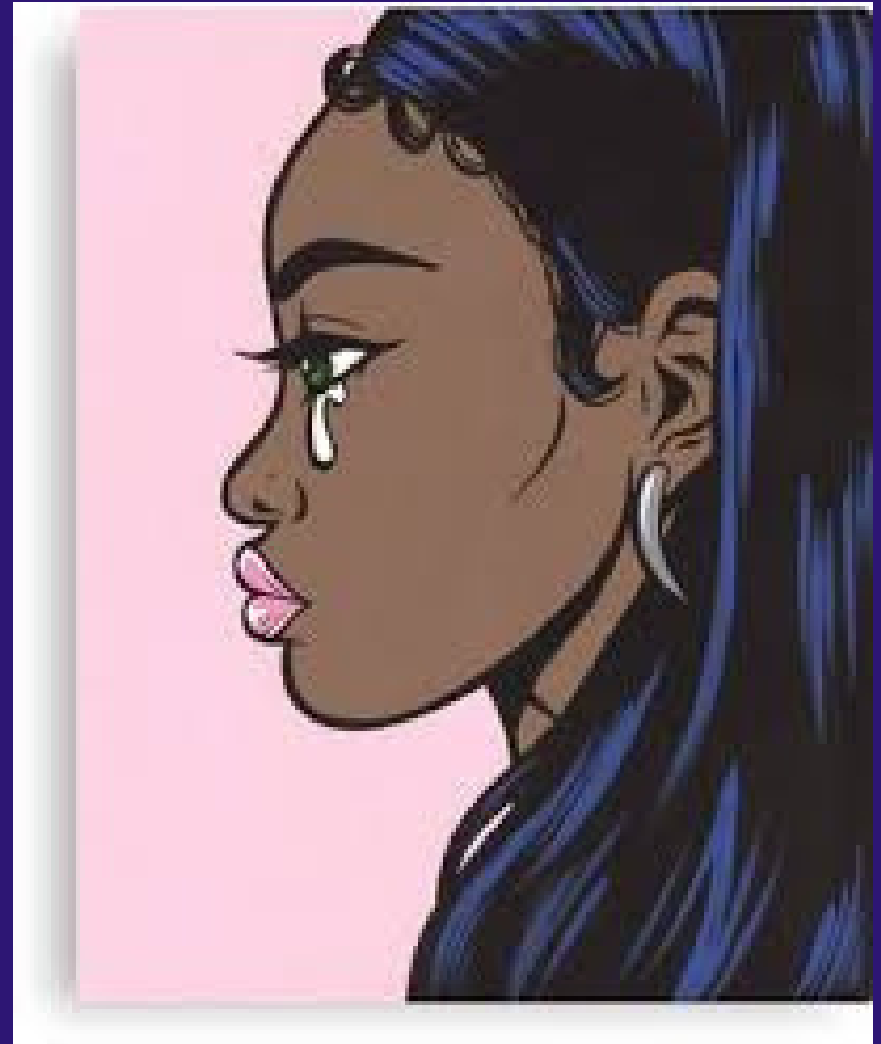


## Manifestations of ACEs and Toxic Stress

- Difficulty trusting others
  - Social isolation
  - Difficulty seeking help
- Hypersensitivity to physical contact
- Increase medical, emotional and mental problems
- Problems with coordination and balance
  - Poor affect regulation
- Problems with academic achievement
  - Oppositional/defiant behaviors
  - Difficulty planning for the future



# Case Study





# How you can promote academic success

- **Connect – Focus on Relationships**
- **Protect – Promote Safety and Trustworthiness**
- **Respect – Engage in Choice and Collaboration**
- **Redirect (Teach and Reinforce) – Encourage Skill- Building and Competence**



# Trauma-Informed Interventions

- 1. Always Empower, Never Disempower: Avoid battles for power with students. Students who have experienced trauma often seek to control their environment to protect themselves, and their behavior will generally deteriorate when they feel more helpless. Classroom discipline is necessary, but should be done in a way that is respectful, consistent, and non-violent.*
- 2. Provide Unconditional Positive Regard: As consistently caring adults, school staff have the opportunity to help students build trust and form relationships. For example, if a student tells you, "I hate you. You're mean," respond with unconditional positive regard by saying "I'm sorry you feel that way. I care about you and hope you'll get your work done."*



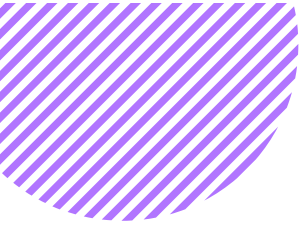
# Trauma-Informed Interventions Continued

3. *Maintain High Expectations: Set and enforce limits in a consistent way. Maintain the same high expectations of a student who has experienced trauma as you do for his/her peers.*
4. *Check Assumptions, Observe, and Question: Trauma can affect any student and can manifest in many different ways. Realize when you are making assumptions, and instead, talk with the and support positive relationships between children and their caregivers.*
5. *Provide Guided Opportunities for Helpful Participation: Model, foster, and support ongoing peer "helping" interactions (e.g., peer tutoring, support groups).*

# Case Study Second Look







**Questions? Comments? Concerns?**

