Working Together Regionally to Accelerate ACEs and Trauma-Informed Strategies
Building Resilience for Population Health
MiHIA Grant, Michigan Health Endowment Fund
Impact of Trauma over the Life Span

Effects of childhood adverse experiences

- neurological
- biological
- psychological
- social
Responses to Stress May Pass from One Generation to the Next

- Biologically predisposed to more physiologic stress
- Brain structures that modulate this stress mature later
- Young children need safe, stable, and nurturing relationships to assist them in regulating their stress
### ACE Types and Prevalence

**Adverse Childhood Experiences ARE COMMON**

<table>
<thead>
<tr>
<th>Household Dysfunction</th>
<th>Neglect</th>
<th>Abuse</th>
</tr>
</thead>
<tbody>
<tr>
<td>Substance Abuse</td>
<td>Emotional (15%)</td>
<td>Emotional (11%)</td>
</tr>
<tr>
<td>Parental Sep/Divorce</td>
<td>Physical (10%)</td>
<td>Physical (28%)</td>
</tr>
<tr>
<td>Mental Illness</td>
<td></td>
<td>Sexual (21%)</td>
</tr>
<tr>
<td>Battered Mothers</td>
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<tr>
<td>Criminal Behavior</td>
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</tbody>
</table>

- **Substance Abuse**: 27%
- **Parental Sep/Divorce**: 23%
- **Mental Illness**: 17%
- **Battered Mothers**: 13%
- **Criminal Behavior**: 6%

**ABUSE**
- Emotional
- Physical

**NEGLECT**
- Emotional
- Physical

**HOUSEHOLD DYSFUNCTION**
- Mental Illness
- Incarcerated Relative
- Mother treated violently
- Substance Abuse

**TOTAL 10 ACEs**
ACEs are Highly Interrelated and More ACEs Predict More Health Problems
ACEs CAN HAVE LASTING EFFECTS ON BEHAVIOR & HEALTH

HOW ACEs AFFECT OUR LIVES

- DEPRESSION
- ALCOHOLISM
- DRUG USE

SUICIDE ATTEMPTS

- CANCER

ACE SCORE

0 1 2 3 4+

BEHAVIORS
- LACK OF PHYSICAL ACTIVITY
- SMOKING
- ALCOHOLISM
- DRUG USE
- MISSED WORK

PHYSICAL & MENTAL HEALTH
- SEVERE OBESITY
- DIABETES
- DEPRESSION
- SUICIDE ATTEMPTS
- STDs
- HEART DISEASE
- CANCER
- STROKE
- COPD
- BROKEN BONES
Prevalence of Individual ACEs (2016)

2.1M
Michiganders (29%) lived with someone with substance abuse

1.9M
Michiganders (27%) reported having parents who were separated or divorced

1.4M
Michiganders (20%) lived with someone with mental illness

1.14 million people were sexually abused one or more times as a child
That’s enough people to fill nearly 11 U of M football stadiums.

ACEs IMPACT ON SOCIETY

7 of the 10 leading causes of death correlate to high ACE scores.

A child with an ACE score of 4 or more is 32 times more likely to have issues at school.

With a score of 6 or more, victims have a 3 times higher risk of heart disease and lung cancer and a 20 years difference in life expectancy.

LIFETIME COSTS OF ACEs:

The CDC estimates that the lifetime cost associated with child maltreatment is:

$124 BILLION

- $3.9 BILLION CRIMINAL JUSTICE
- $4.4 BILLION CHILD WELFARE
- $4.6 BILLION SPECIAL EDUCATION
- $25 BILLION HEALTH CARE
- $83.5 BILLION PRODUCTIVITY LOSS
Michigan ACE Initiative

For more information, visit www.miace.org
CMU Engaged
Statewide & Regionally
Providing
Educational Outreach

Interdisciplinary Center Director and Michigan ACEs Master Trainer, Dr. Alison Arnold talks about building healing communities and building resilience in a newly released Michigan ACEs video.

Building Resilience: Healing Communities
Ripple Effect of Opioid Epidemic
ACEs and Trauma

- Magnitude of ripple effect of this epidemic on children, families, communities and society is devastating:
- 8 million children live in a household where at least one parent has a substance use disorder
- 49 percent of all US opioids overdose deaths in 2015 were young adults from the ages of 25-44 in the prime of adulthood (parents / workers).
- Triple the rate of babies born with Neo-Abstinence-System

Source: United Hospital Fund
# A Comparison of Trauma Profiles Among Individuals with Prescription Opioid, Nicotine or Cocaine Dependence

[https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3681508/](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3681508/)

<table>
<thead>
<tr>
<th></th>
<th>Nicotine</th>
<th>Cocaine</th>
<th>Rx Opiates</th>
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</thead>
<tbody>
<tr>
<td>Experienced Trauma</td>
<td>95%</td>
<td>96%</td>
<td>100%</td>
</tr>
<tr>
<td>Childhood Trauma</td>
<td>71%</td>
<td>60%</td>
<td>90%</td>
</tr>
<tr>
<td>Sexual Trauma</td>
<td>16%</td>
<td>22%</td>
<td>34%</td>
</tr>
<tr>
<td>Age of First Trauma</td>
<td>13.3</td>
<td>16.4</td>
<td>9.5</td>
</tr>
<tr>
<td># of Traumatic Events</td>
<td>5.5</td>
<td>6.6</td>
<td>7.73</td>
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</tbody>
</table>
ACEs Impacts on Communities
Addressing ACEs: An Upstream Approach

There is a shared commitment to focus on upstream factors that impact shared risk factors.

Use of the ACEs data has been a catalyst for building capacity and connections among public health, human services, corrections, education systems as well as other state & local initiatives.
SAMHSA’s 6 Principles of a Trauma-Informed Approach

**SAFETY**
Prevents violence across the lifespan and creates safe physical environments.

**TRUSTWORTHINESS**
Fosters positive relationships among residents, City Hall, police, schools and others.

**EMPOWERMENT**
Ensures opportunities for growth are available for all.

**COLLABORATION**
Promotes involvement of residents and partnership among agencies.

**PEER SUPPORT**
Engages residents to work together on issues of common concern.

**HISTORY, GENDER, CULTURE**
Values and supports history, culture and diversity.
Aligning Work Plans

- MiHIA RCHIP / RCHNA
- CMDHD CHIP
- CMRRHN HRSA
Trauma-Informed Initiatives are Underway!
CMRRHN HRSA Planning Grant 2019-20

• **Objective 2.** Plan for the development of trauma informed systems and resilient communities

• Increased trauma informed program development planning capacity measured by number of member organizations and representatives and others participating Trauma Informed Workgroup planning activities

• Program plan to develop systems capacity to provide integrated trauma informed treatment, care, and programming specific to individual needs
The Michigan Health Improvement Alliance (MiHIA) has been awarded a 2019 Community Health Impact grant by the Michigan Health Endowment Fund (MHEF) to address Adverse Childhood Experiences (ACEs) and to catalyze efforts on building communities of resilience across the region.

Adverse Childhood Experiences (ACEs) refer to traumatic and extremely stressful events and their ongoing harmful effects on children’s physical growth and development. According to the Centers for Disease Control and Prevention, ACEs have been linked to risky health behaviors, chronic health conditions, low life potential, and early death. Having a positive impact on the survivors can have a positive impact on chronic health conditions, improve maternal and infant health, and lower substance use/abuse rates and suicide rates. Childhood experiences (both positive and negative) have a tremendous impact on future violence victimization and perpetration, and lifelong health and opportunity. As the number of ACEs increases, so does the risk for these outcomes. In the United States, it’s estimated that almost half of children have experienced at least one ACE and 25% have experienced two or more. The wide-ranging health and social consequences of ACEs underscore the importance of preventing them before they happen.

ACEs/trauma-informed objectives will enhance regional ACEs-trauma responsive strategies by focusing on: building awareness and connections; leveraging education and training; and spreading evidence-based and informed interventions.

MiHIA will stimulate the application of trauma-informed approaches to enhance current and emerging initiatives aimed at addressing adversity, toxic stress and ACEs-related health risks. Building capacity across the 14-county region to serve approximately 160,000 residents across both rural and urban areas will build resilience by helping to connect families and communities, build safe and supportive environments, help children to flourish, and generally improve population health.

MiHIA, acting as the backbone organization will connect and synthesize diverse coalition across the region with resources, professional development, and consultative support to accelerate and share approaches for preventing and addressing trauma and ACEs and promoting resilience. The initiative will facilitate a support structure that will engage stakeholders across the region to catalyze positive health outcomes for individual communities.
MiHIA Building Resilience To Improve Population Health

ACTION PLAN

• Build a regional ACEs and Trauma-Informed Strategy Map
• Secure options for ACES content for ongoing professional continuing education for practicing professionals
• Conduct two ACES summits in 2019 and 2020
• Connect existing educational program opportunities for shared PD and Continuing Ed. collaborations
• Provide five Michigan ACE Community Champion Training sessions in the Great Lakes Bay Region (GLBR)
• Expand and implement a Call to Action Speaker Circuit initiative
• Develop communications for raising awareness for the general public
• Develop communications for raising awareness in the school districts (for parents and staff)
• Convene a learning network for sharing information and collaboration opportunities
• Implement qualitative data gathering and sensemaking processes
• Provide stakeholder and funder input opportunities regarding ongoing projects
• Create a project evaluation plan to ensure success and strategy
• Continue to develop a diversified financing strategy to support trauma-informed service delivery
Partners for Better Health

Comprehensive ACES and Trauma-Informed Practice Strategy

By Bill Babcock, President

INSIGHTFORMATION INC.
Strategy for ACEs and Trauma-Responsive Practices

**ASSET & CAPACITY DEVELOPMENT Objectives**

- Increase Babies Born Healthy in Nurturing Homes
- Enhance Early Brain Development in Infants & Toddlers
- Increase Participation in Quality Early Childhood Care & Education
- Improve MCH Healthcare Services for Disadvantaged Populations
- Expand Programming for Healthy Families
- Minimize Exposure to Environmental Toxins

**STRATEGY Objectives**

- Start Healthy
  - Increase Babies Born Healthy in Nurturing Homes
  - Enhance Early Brain Development in Infants & Toddlers
  - Increase Participation in Quality Early Childhood Care & Education
  - Improve MCH Healthcare Services for Disadvantaged Populations
  - Expand Programming for Healthy Families
  - Minimize Exposure to Environmental Toxins

- Minimize Early Trauma & Toxic Stress
  - Minimize Exposure to ACEs & Trauma
  - Increase Protective Factors
  - Improve the Foster Care System
  - Improve Mental Health & Social Supports for Parents
  - Improve Housing, Food & Economic Security of Households
  - Systematically Address All Types of Racism

- Understand & Address Trauma
  - Expand Trauma-Informed Practices in All Sectors
  - Expand & Improve Trauma Assessment & Screening
  - Increase Professional & Workforce Training on ACEs/TIP
  - Proactively Address Vicarious Traumatization & Compassion Fatigue
  - Build Broad Community Awareness & Support for Addressing ACEs & Adopting TRPs

- Strengthen Lifelong Resilience
  - Improve Positive Youth Development
  - Expand Family Mental Health Programs
  - Expand & Enhance Mentoring by Caring Adults
  - Improve Neighborhood Connections
  - Enhance Referral Systems & Collaboration
  - Build Resilience in Communities
  - Adopt Key Policies

**OUTCOME Objectives**

- Start Healthy
- Minimize Early Trauma & Toxic Stress
- Understand & Address Trauma
- Strengthen Lifelong Resilience

**Policy & System Change**

- Enhance Referral Systems & Collaboration
- Build Resilience in Communities
- Adopt Key Policies
Increase Babies Born Healthy in Nurturing Homes

- Reduce Unwanted Pregnancies
  - Improve Access to Birth Control (Esp. LARCs)
  - Expand Pre-Conception Planning & Education

- Healthy Pregnancy
  - Minimize Substance Use/Abuse among Pregnant Women
  - Increase Access and Participation in Pre-natal Care

- Minimize Substance Use/Abuse among Pregnant Women
  - Increase Access to Mental & Behavioral Health for Expectant Parents

- Improve MCH Healthcare Services for Disadvantaged Populations

- Improve Housing, Food & Economic Security of Households
  - Expand Programming for Healthy Families

Increase Babies Born Healthy

- Increase x with b
- Increase x for y
**ASSET & CAPACITY DEVELOPMENT Objectives**

- Increase Professional & Workforce Training on ACEs/TIP
- Expand & Improve Trauma Assessment & Screening
- Improve Organizational Assessments on Maturity w/ TIPs
- Implement Practices that Minimize Implicit Bias, Stigma & Re-traumatization
- Proactively Address Vicarious Traumatization & Compassion Fatigue

**STRATEGY Objectives**

- Expand Trauma-Informed Educational Practices (Trauma-Responsive Schools)
- Expand Trauma-Informed Businesses / Employers
- Expand Trauma-Informed Faith Communities
- Expand Trauma-Informed Out of School Time Programs
- Expand Trauma-Informed Law Enforcement
- Expand Trauma-Informed Courts & Corrections
- Expand Trauma-Informed Social Services
- Expand Trauma-Informed Foster Care System
- Expand Trauma-Informed Medical Care
- Expand Trauma-Informed Mental Health Care
- Expand Trauma-Informed Public Health
- Expand Trauma-Informed Philanthropy

**Increase x with b**

**Increase x for y**
**ASSET & CAPACITY DEVELOPMENT Objectives**

**STRAIGHT Objectives**

**Leadership Support for TI Practices**
- Strengthen District Leadership Support for Adopting TI Practices
- Strengthen School Building Leadership Support for TI Practices (Principals)
- Establish a Trauma Advisory Board
- Build Broad Community Awareness & Support for Addressing ACEs & Adopting TRPs

**Professional Development**
- Improve Teacher Training on ACEs & TI Practices
- Enhance Administrative Staff Training on ACEs & TI Practices
- Enhance Specialty Professionals Training on ACEs & TI Practices
- Proactively Address Compassion Fatigue and Vicarious Trauma Among School Staff

**Policies & Practices**
- Expand Use of Trauma-Informed Curriculum
- Adopt Environmental Changes to Support a Positive Learning Environment
- Curriculum Designed around Self-awareness for Trauma-Impacted Students
- Expand & Enhance Appropriate Screening in Schools
- Increase Teaching of Socio-Emotional Learning (SEL)
- Adopt Best Practices for Discipline

**Interventions**
- Improve and Expand Mental Health Resources and Services
- Increase the Adoption of Promising Interventions: Mindfulness, Psychological First Aid, CBITS, SPARCS
- Engage Parents in Trauma Informed Practices
- Engage Parents in Trauma Informed Practices
- Engage Parents in Trauma Informed Practices

**Textual Content**

- Increase x with b
- Increase x for y
Next Steps and Timelines

2019-2020 MiHIA Plan:

- Michigan ACEs Community Champion Trainings
- Two Summits
- Speakers Circuit
EXPERIENCE

RELATIONSHIPS

ENVIRONMENT
Building Resilience to Take down the Pair of ACEs

- Adverse *Childhood* Experiences
- Adverse *Community* Environments

“The 4th Vital Sign”

1) Respiration  2) Heart Rate  3) Blood pressure
4) **Relationships**

Having two or more people who give concrete help when needed
Spanning Boundaries – Cross-Cutting Collaborations

- Community and State ACEs & Resilience Initiatives
  - School districts – TSS, Handle With Care
  - Community-based Service Providers
  - Hospitals, Community Health Outreach
  - Behavioral Health / Treatment, Counseling
  - Public Health, Child Welfare, Courts
  - Higher Education

- Opportunities to Catalyze Cross-systems Collaboration
  - Community Medicine
  - Integrated Practice & Education SEL Models
  - Workforce Development