

# ACES Discussion Panel

Presented by Healthy St. Mary's Partnership's Violence, Injury & Trauma Action Team  
in partnership with St. Mary's College of Maryland

March 27, 2024



# Agenda

1. Panel Introduction
2. Introduction: What are ACEs? (Sarah Winter-Kolbe)
3. Discussion Panel
4. Specific ACEs Topics
5. Tools/Resources
6. Key Points
7. Closing Remarks

# Violence, Injury, & Trauma (VIT) Action Team Co-Chairs



**Taylor Spencer Davis**

Deputy Director at Southern Maryland  
Center for Family Advocacy



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Program Director of VIT Unit at  
St. Mary's County Health Department

# Content Disclaimer

This event contains discussions about adverse childhood experiences and features topics such as violence, abuse, neglect and suicide. Viewer discretion is advised.

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# Introduction: What are ACEs?











Sarah Winter-Kolbe, Program Manager for Care Coordination

St. Mary's County Health Department



# What are Adverse Childhood Experiences (ACEs)

Adverse Childhood Experiences, or ACEs, are potentially traumatic events in childhood (0-17) such as neglect, or experiencing or witnessing violence

| ABUSE  | NEGLECT  | HOUSEHOLD CHALLENGES  |  |
|--|--|---|--|
| <br>Physical  | <br>Physical  | <br>Mental Illness           | <br>Divorce               |
| <br>Emotional | <br>Emotional | <br>Parent Treated Violently | <br>Incarcerated Relative |
| <br>Sexual    |  |   | <br>Substance Abuse       |



Children can also experience ACE's by living or being exposed to an unsafe environment that impacts stability and proper attachment.

Examples of an unsafe environment that does not meet the child's needs can include but are not limited to:

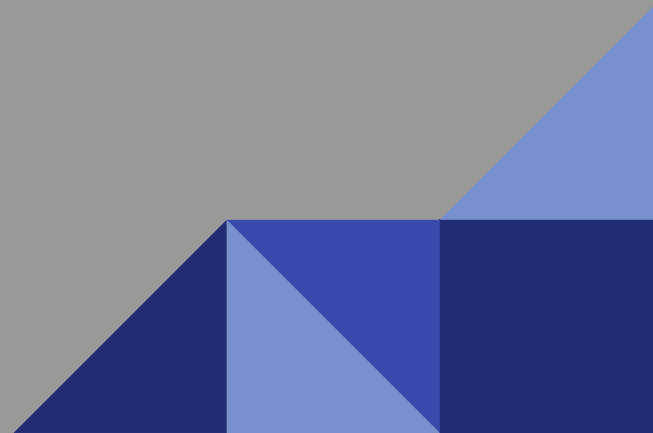
- Not having enough food
- Homelessness
- Discrimination
- Growing up in a home with Mental Health Concerns, Substance Use
- Parental Separation through divorce, incarceration

# Why are ACE's so important to study?

Research has found that they are directly related to:

- Chronic health conditions
  - Cancer
  - Diabetes
  - Heart Disease
- Mental Health
- Substance Use

ACE's also negatively impact:

- Education
  - Job opportunities
  - Earning potential
- 



# How common are ACE's

- According to the CDC, 64% of US adults report at least one type of ACE's by the age of 18.
- 1 in 6 adults reported they had experienced four or more types of ACE's.



Increase the risk of: injury, maternal and child health problems, teen pregnancy, pregnancy complications, fetal death, sexually transmitted infections, sex trafficking, suicide and unstable relationships

Fast Facts: Preventing Adverse Childhood Experiences:

<https://www.cdc.gov/violenceprevention/aces/fastfact.html#print>

# ACEs Discussion Panelists

## **Jameika Butler-Turner**

Executive Director  
Pyramid Healthcare

## **Kimberly Hall**

School Social Worker  
St. Mary's County Public Schools

## **Jodi Gardiner**

Family Support Specialist  
Maryland Coalition of Families

## **Brianne Daly**

Youth Engagement Coordinator  
St. Mary's County Health Department

# Questions to Consider

- What does ACEs look like in your profession?
- What resources can your organization offer?
- What is your experience working with children?



# Specific ACEs Topics

- ACEs Assessment and Scoring
- Resiliency building
- Support in various settings (home, school, & community)
- Social Media/Bullying



# Key Points to Remember

# ACEs are Preventable, Healthy Childhood is Possible

## Healthy Childhoods Have Benefits Throughout Life

What could happen if we **prevent ACEs**?

Fewer cases of depression, heart disease, and obesity.

**44%**  
reduction

in the number  
of adults with  
depression



**33%**  
reduction

in the number  
of adults  
who smoke



**24-27%**  
reduction

in the number  
of adults with  
respiratory  
problems such  
as asthma and  
COPD



**16%**  
reduction

in the number  
of adults with  
kidney disease



**15%**  
reduction

in the number of  
adults who are  
unemployed



# ACEs Impact Health and Well-being

## ACEs Can Accumulate and Their Effects Last Beyond Childhood

The effects of ACEs can add up over time and affect a person throughout their life.



Children who repeatedly and chronically experience adversity can suffer from **toxic stress**.



Toxic stress happens when the brain endures **repeated stress or danger**, then releases fight or flight hormones like cortisol.



This internal alarm system **increases heart rate and blood pressure** and **damages the digestive and immune systems**.



Toxic stress can disrupt organ, tissue, and brain development. Over time, this can limit a person's ability to process information, make decisions, interact with others, and regulate emotions. **These consequences may follow a person into adulthood.**

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# ACEs Impact Health and Well-being, cont'd

## ACEs Can Echo Across Generations

The consequences of ACEs can **be passed down from one generation to the next** if children don't have protective buffers like...



positive  
childhood  
experiences

OR



a caring  
adult in  
their lives.

Also, when families experience **historical and systemic racism** or living in **poverty for generations**, the effects of ACEs can **add up over time**.



# Tools and Resources



# St. Mary's County Health Department Resources



## Mentoring Connections Program Referral Form

Please email the following information to Brienne Daly at [brienne.daly1@maryland.gov](mailto:brienne.daly1@maryland.gov). For any questions or concerns, please call 301-278-1277 or email [brienne.daly1@maryland.gov](mailto:brienne.daly1@maryland.gov).

The Mentoring Connections Program provides care coordination for at-risk youth who are facing any issues at home, in school, or in the community, including mental health concerns and risky behaviors.

*Services offered include:* individualized care coordination, a resilience screening, education on ACEs, resilience, youth mentoring organizations, and resources for community services.

Services will be offered with a personalized, nonjudgmental and caring service delivery.

*Eligibility:* Youth (7-17) who reside in St. Mary's County.

Date: \_\_\_/\_\_\_/\_\_\_ Referral Source (Name and Organization) \_\_\_\_\_

Name: \_\_\_\_\_ DOB: \_\_\_/\_\_\_/\_\_\_ Age \_\_\_\_\_

Sex: \_\_\_ Pronouns: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Parent's Name: \_\_\_\_\_ Parent's Phone Number: \_\_\_\_\_

Parents Email: \_\_\_\_\_

Race (Please select all that apply): African American/Black      Caucasian/White

Alaskan Native      Unknown      Native American      Hawaiian or other Pacific Islander



Hispanic: Yes or No      Language Barrier: Yes or No      Specify language: \_\_\_\_\_

Reason for referral:

\_\_\_\_\_

Notes (any information you feel is necessary): \_\_\_\_\_

## Adverse Childhood Experience Questionnaire for Adults

California Surgeon General's Clinical Advisory Committee



Our relationships and experiences—even those in childhood—can affect our health and well-being. Difficult childhood experiences are very common. Please tell us whether you have had any of the experiences listed below, as they may be affecting your health today or may affect your health in the future. This information will help you and your provider better understand how to work together to support your health and well-being.

**Instructions:** Below is a list of 10 categories of Adverse Childhood Experiences (ACEs). From the list below, please place a checkmark next to each ACE category that you experienced prior to your 18<sup>th</sup> birthday. Then, please add up the number of categories of ACEs you experienced and put the *total number* at the bottom.

|  |                          |
|--|--------------------------|
| 1. Did you feel that you didn't have enough to eat, had to wear dirty clothes, or had no one to protect or take care of you? | <input type="checkbox"/> |
| 2. Did you lose a parent through divorce, abandonment, death, or other reason?   | <input type="checkbox"/> |
| 3. Did you live with anyone who was depressed, mentally ill, or attempted suicide?   | <input type="checkbox"/> |
| 4. Did you live with anyone who had a problem with drinking or using drugs, including prescription drugs?                    | <input type="checkbox"/> |
| 5. Did your parents or adults in your home ever hit, punch, beat, or threaten to harm each other?                            | <input type="checkbox"/> |
| 6. Did you live with anyone who went to jail or prison?  | <input type="checkbox"/> |
| 7. Did a parent or adult in your home ever swear at you, insult you, or put you down?  | <input type="checkbox"/> |
| 8. Did a parent or adult in your home ever hit, beat, kick, or physically hurt you in any way?                               | <input type="checkbox"/> |
| 9. Did you feel that no one in your family loved you or thought you were special?  | <input type="checkbox"/> |
| 10. Did you experience unwanted sexual contact (such as fondling or oral/anal/vaginal intercourse/penetration)?              | <input type="checkbox"/> |
| <b>Your ACE score is the total number of checked responses</b>   |                          |

Do you believe that these experiences have affected your health?  Not Much  Some  A Lot

Experiences in childhood are just one part of a person's life story.  
There are many ways to heal throughout one's life.

Please let us know if you have questions about privacy or confidentiality.



## Child & Youth Resilience Measure-Revised (CYRM-R)

### CYRM-R

To what extent do the following statements apply to you?

There are no right or wrong answers.

|    |  | No<br>[1] | Sometimes<br>[2] | Yes<br>[3] |
|----|--|-----------|------------------|------------|
| 1  | I get along with people around me  | 1         | 2                | 3          |
| 2  | Getting an education is important to me  | 1         | 2                | 3          |
| 3  | I know how to behave/act in different situations (such as school, home and church)                               | 1         | 2                | 3          |
| 4  | My parent(s)/caregiver(s) really look out for me   | 1         | 2                | 3          |
| 5  | My parent(s)/caregiver(s) know a lot about me (for example, who my friends are, what I like to do)               | 1         | 2                | 3          |
| 6  | If I am hungry, there is enough to eat   | 1         | 2                | 3          |
| 7  | People like to spend time with me  | 1         | 2                | 3          |
| 8  | I talk to my family/caregiver(s) about how I feel (for example when I am hurt or sad)                            | 1         | 2                | 3          |
| 9  | I feel supported by my friends   | 1         | 2                | 3          |
| 10 | I feel that I belong/belonged at my school   | 1         | 2                | 3          |
| 11 | My family/caregiver(s) care about me when times are hard (for example if I am sick or have done something wrong) | 1         | 2                | 3          |
| 12 | My friends care about me when times are hard (for example if I am sick or have done something wrong)             | 1         | 2                | 3          |
| 13 | I am treated fairly in my community  | 1         | 2                | 3          |
| 14 | I have chances to show others that I am growing up and can do things by myself                                   | 1         | 2                | 3          |
| 15 | I feel safe when I am with my family/caregiver(s)  | 1         | 2                | 3          |
| 16 | I have chances to learn things that will be useful when I am older (like cooking, working, and helping others)   | 1         | 2                | 3          |
| 17 | I like the way my family/caregiver(s) celebrates things (like holidays or learning about my culture)             | 1         | 2                | 3          |

For administration instructions and scoring, please refer to the accompanying manual.

When using the measure, please cite the following:

Jefferies, P., McGarrigle, L., & Ungar, M. (2018). The CYRM-R: a Rasch-validated revision of the Child and Youth Resilience Measure. *Journal of Evidence-Informed Social Work*, 1-24. <https://doi.org/10.1080/23761407.2018.1548403>

# SMCHD Mentoring Connections Program



## BACKGROUND



### What are ACEs?

**Adverse Childhood Experiences (ACEs)** are traumatic or emotional disturbances experienced during a child's lifetime before the age of 18 that may increase risk for violence, chronic health problems, mental illness, and substance abuse in adulthood.



### What is resilience?

**Resilience** is the process of adapting well in the face of adversity, trauma, tragedy, threats, or significant sources of stress (the ability to "bounce back").



### What is youth mentoring?

**Youth mentoring** pairs youth with a volunteer from the community with the goal of fostering a relationship that will contribute to the young person's growth opportunities, skill development, and academic success.



### How are they related?

**Relationships with caring adults**, in addition to parents or caregivers, can influence young people's behavioral choices and reduce their risk for involvement in crime, violence, alcohol/other substance use, and high-risk sexual behavior. Through positive interpersonal relationships and learning activities, youth can also develop broad and healthy life goals, improve their school engagement and skills, establish networks and have experiences that improve their future schooling and employment opportunities. These connections and experiences contribute to enhanced academic performance and prevent involvement in crime and violence.

## ABOUT THE PROGRAM



### What do we do?

We screen youth for resilience before connecting to a youth mentoring program. Based on the screenings, we link the youth with an organization and mentor that best suits the needs, personality, and history of the youth. 6 weeks after entering the mentoring program, we screen the youth again for resilience.



### Who is eligible?

Youth (7-17) who reside in St. Mary's County



### What organizations could my child be linked with?

- The COVE
- Stella's Girls
- Divine by Design
- New Perception
- Building Bridges
- Gift 2 Uplift
- Basketball 4 Lyfe
- Tri-County Youth Services Bureau
- Knowledge Boxing (*cost associated*)
- *And many more!*



# Understanding ACEs

ACEs (Adverse Childhood Experiences) are serious childhood traumas that can result in toxic stress. Prolonged exposure to ACEs can create toxic stress, which can damage the developing brain and body of children and affect overall health. Toxic stress may prevent a child from learning or playing in a healthy way with other children, and can cause long-term health problems.

Lowers tolerance for stress, which can result in behaviors such as fighting, checking out or defiance.

Increases difficulty in making friends and maintaining relationships.

Increases stress hormones which affect the body's ability to fight infection.

May cause lasting health problems.



Increases problems with learning and memory.

**I can't hear you!  
I can't respond to you!  
I am just trying to be safe!**

Reduces the ability to respond, learn, or figure things out, which can result in problems in school.

## Exposure to childhood ACEs can increase the risk of:

- Adolescent pregnancy
- Alcohol and drug abuse
- Asthma
- Depression
- Heart disease
- Intimate partner violence
- Liver disease
- Sexually-transmitted disease
- Smoking
- Suicide

## ACEs (Adverse Childhood Experiences) can include:

- Abuse: Emotional / physical / sexual
- Bullying / violence of / by another child, sibling, or adult
- Homelessness
- Household: Substance abuse / mental illness / domestic violence / incarceration / parental abandonment, divorce, loss
- Involvement in child welfare system
- Medical trauma
- Natural disasters and war
- Neglect: Emotional / physical
- Racism, sexism, or any other form of discrimination
- Violence in community

## ! SURVIVAL MODE RESPONSE

Toxic stress increases a child's heart rate, blood pressure, breathing and muscle tension. Their thinking brain is knocked off-line. Self-protection is their priority.

Parents and caregivers can help. **Turn over to learn about resilience.**



Help children identify, express and manage emotions.



Create safe physical and emotional environments. (home, school, community, systems).



Understand, prevent and respond to ACEs.



*"...One of the biggest myths that we have to bust is that if you have experienced childhood adversity, there's nothing we can do about it."*

— Nadine Burke Harris, MD, MPH, FAAP, Surgeon General of California

## What is resilience?

Research shows that if caregivers provide a safe environment for children and teach them how to be resilient, that helps reduce the effects of ACEs.

## What does resilience look like?

Having resilient parents and caregivers who know how to solve problems, have healthy relationships with other adults, and build healthy relationships with children.

## Building attachment and nurturing relationships:

Adults who listen and respond patiently to a child in a supportive way, and pay attention to a child's physical and emotional needs.

## Building social connections.

Having family, friends, neighbors, community members who support, help and listen to children.

## Meeting basic needs:

Provide children with safe housing, nutritious food, appropriate clothing, and access to health care and good education, when possible. Make sure children get enough sleep, rest, and play.

## Learning about parenting, caregiving and how children grow:

Understand how caregivers can help children grow in a healthy way, and what to expect from children as they grow.

## Building social and emotional skills:

Help children interact in a healthy way with others, manage emotions, communicate their feelings and needs, and rebound after loss and pain.

## Resources:

National Parent Helpline  
1-855-4A PARENT  
(1-855-427-2736)

Number Story  
ACES Too High

PACES Connection  
Resource Center  
Parenting with PACES



# Building Resilience Through Practice

## ACEs lead to health consequences in adults

Adverse Childhood Experiences (ACEs) are emotional and physical disturbances that happen in a youth's lifetime that can potentially lead to harmful long-lasting effects. ACEs can result in mental, physical, social, and emotional consequences.<sup>1</sup>

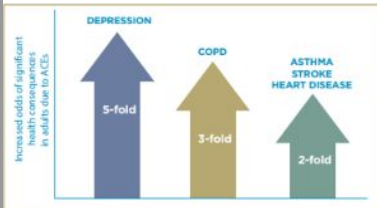


Figure 1: A History of ACEs leads to significant health outcomes in adults<sup>2</sup>

## ACEs are common

In 2018, 64.5% of St. Mary's County residents, who participated in the BRFS-5, stated that they had experienced at least 1 Childhood Adversity. Out of that 64.5% over 29% of those residents stated that they experienced at least 3 or more. The ACEs Study (Dr. Anda/CDC) showed a correlation between high ACEs scores and risk-taking behaviors (drinking, smoking, STD, sexual partners) and negative health outcomes (cancer, COPD, diabetes, asthma) later in life.

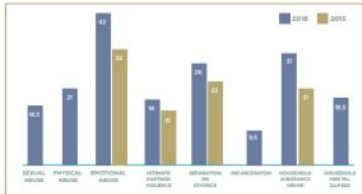


Figure 2: Comparison of 2015 and 2018 BRFS-5 ACEs findings

## Build support for patients with ACEs

Building a trauma-informed practice encompasses more than the one on one patient-clinician relationship.

Figure 3: Five elements can aid a clinic or practice in providing trauma-informed care.<sup>3</sup>

Figure adapted from Machtinger EL, Davis KB, Kimberg LS, et al. From Treatment to Healing: Inquiry and Response to Recent and Past Trauma in Adult Health Care. *Women's Health Issues*. 2019;29(2):97-102



For more information, please visit [smchd.org/aces](http://smchd.org/aces), [cdc.gov/violenceprevention/aces](http://cdc.gov/violenceprevention/aces), or [apa.org/topics/resilience](http://apa.org/topics/resilience)

# Begin the conversation about ACEs with patients.

You don't have to be a therapist to be therapeutic. Listen, reflect, and acknowledge the patient's needs.

Trauma-informed care starts with the patient in front of you. By offering support and creating personal interactions, providers can teach ways to build resilience and positive coping mechanisms.<sup>4</sup>

- Ask about impact of ACEs on life and health
  - Keep questions broad and related to overall health today to encourage sharing.
    - Example question: Have you had any life experiences that you feel have impacted your health and well-being? How has that experience(s) affected you?
  - Ask the questions face-to-face (either virtually or in person), avoiding reliance on questionnaires to extract responses.
  - Remember that sharing the details of an ACE can be traumatic.
- Listen
  - Listening can be one of the most important services clinicians can give their patients
    - Allow the patient to share whatever they feel comfortable disclosing
    - Express gratitude and understanding that the process of sharing an ACE is difficult
    - Focus on what the patient is saying they need, rather than how to fix a specific problem
    - Keep the questions to a minimum while a patient is sharing their story.
- Understand the patient's strengths
  - Keep to understand the patient's strength and resources
    - What are you proud of?
    - What are your strengths
    - Can you tell me about your support system?
    - Do you have any cultural, religious, and spiritual practices are important to you?
  - Use reflection or teach-back methods
- Support & follow-up
  - Focus on the supports for which the patient expressed the greatest need
    - What are ways or things we can do to make you feel safe?
    - Would you like me to help you find support from others who have been through what you have been through?
  - Provide links to services and resources whenever possible.
  - Establish a plan to reconnect to follow-up on referrals or services.
  - Share relevant information with members of the healthcare team when possible.

| Trauma-specific interventions   | General interventions  |
|---|--|
| <ul style="list-style-type: none"> <li>Individual or group therapies</li> <li>Somatic interventions (Mindfulness, yoga, acupuncture)</li> <li>Medications for symptoms (insomnia, anxiety, depression)</li> </ul> | <ul style="list-style-type: none"> <li>Support groups or behavioral counseling for risk behaviors (substance use)</li> <li>Mindfulness-based stress reduction, yoga, or art-based therapies</li> <li>Practices that build connection, comfort, and meaning (faith/spiritually, exercise, caring for people or pets, nature, work)</li> </ul> |

- Document
  - Provide a summary of relevant information to the care team
    - Ask them, "How would you like me to document what you have shared with me?"

### References:

1. Substance Abuse and Mental Health Services Administration. SAMHSA's concept of trauma and guidance for a trauma-informed approach. Rockville, MD: U.S. Department of Health and Human Services; 2014. 2. Merrick MT, Ford DC, Ports KA, et al. Vital Signs: Estimated Proportion of Adult Health Problems Attributable to Adverse Childhood Experiences and Implications for Prevention - 25 States, 2015-2017. *MMWR Morb Mortal Wkly Rep*. 2019;68(44):999-1005. 3. Machtinger EL, Davis KB, Kimberg LS, et al. From Treatment to Healing: Inquiry and Response to Recent and Past Trauma in Adult Health Care. *Women's Health Issues*. 2019;29(2):97-102. 4. Levy-Carrick NC, Lewis-O'Connor A, Rittenberg E, Manosivas K, Stoklosa HM, Silberweig DA. Promoting Health Equity Through Trauma-Informed Care: Critical Role for Physicians in Policy and Program Development. *Fam Community Health*. 2019;42(2):104-108.

# 3 Realms of ACEs

Adverse childhood and community experiences (ACEs) can occur in the household, the community, or in the environment and cause toxic stress. Left unaddressed, toxic stress from ACEs harms children and families, organizations, systems and communities, and reduces the ability of individuals and entities to respond to stressful events with resiliency. Research has shown that there are many ways to reduce and heal from toxic stress and build healthy, caring communities.



Thanks to Building Community Resilience Collaborative and Networks and the International Transformational Resilience Coalition for inspiration and guidance. Please visit [ACESConnection.com](https://www.acesconnection.com) to learn more about the science of ACEs and join the movement to prevent ACEs, heal trauma and build resilience.





## SEEKING SERENITY WOMEN'S SUPPORT GROUP

THURSDAYS @ 1 PM  
21625 Great Mills Road  
in Lexington Park

Free snacks, coffee, and  
giveaways!

Led by women with  
lived experience.



SCAN ME



The Seeking Serenity Women's Support group provides a safe, nonjudgmental space for women who have survived trauma and have mental health or substance use conditions, though all women are welcome to join for:

- Group discussion on a variety of wellness topics
- Activities to enhance self-awareness and empowerment
- Tools and resources to build healthy coping skills
- Women supporting women through shared experiences
- A personalized Wellness Recovery Action Plan

### TOGETHER WE ARE STRONGER

Join us! If you have any questions,  
call us at (301) 862-1680

# Male Empowerment Network

BE THE MAN YOU WERE MEANT TO BE!

THURSDAYS @ 2:30 PM

FREE  
SNACKS &  
COFFEE



SCAN ME



The Male Empowerment Network (M.E.N.) is a Men's Support Group that provides a safe space by promoting trust, openness, fellowship, and collaboration within the group. This group helps men develop a sense of understanding and compassion that they can use in their everyday lives.

This group uses the *8 Dimensions of Wellness Model* to facilitate emotional, spiritual, social, and intellectual growth in the individual.

Join M.E.N. at:  
21625 Great Mills Road  
Lexington Park, MD 20653  
Questions? Call Zurie! "Z"  
at: (301) 481-9174





# Closing Remarks



## Healthy childhoods start now.

Working together, we can help create neighborhoods, communities, and a world in which every child can thrive.

**Learn how you can help!**

[vetoviolence.cdc.gov/apps/aces-training](https://vetoviolence.cdc.gov/apps/aces-training)



# Communications

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