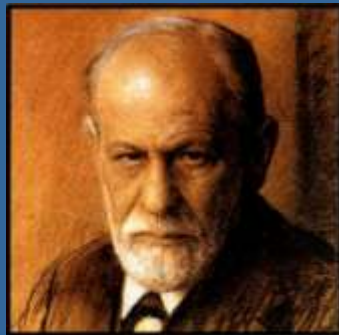




*What is addiction, really? What is
mental illness, really?*

*They are each a sign, a signal, a
symptom of distress. They are each a
language that tells us about a plight
that must be understood.*

Adapted from Alice Miller
“Breaking Down the Wall of Silence”



Reflection

- Is substance abuse/addiction more a disease or more a manifestation of childhood adverse experiences or trauma?

1 2 3 4 5 6 7 8 9 10

- Is “mental illness” more a disease or more a manifestation of childhood adverse experiences or trauma?

1 2 3 4 5 6 7 8 9 10

Adverse Childhood Experiences



Trauma as a Public Health Crisis and Implications for Human Services

Presented by Ann Jennings PhD

www.TheAnnaInstitute.com

The Co-Occurring Collaborative
Serving Maine (CCSME)

Complexities of Trauma Conference

June 9, 2011



This is Anna at age one
and a half



This is Anna years
later – in a mental
institution

What happened?



Anna
Caroline
Jennings
1960 - 1992



The Adverse Childhood Experiences (ACE) Study

- Collaboration between Centers for Disease Control and Prevention (CDC) and Kaiser Permanente HMO in California
- Largest study ever that determined both the prevalence of traumatic life experiences in the first 18 years of life and the impacts on later well-being, social function, health risks, disease burden, health care costs, and life expectancy
- Over 17,000 adult members of Kaiser Permanente HMO participated

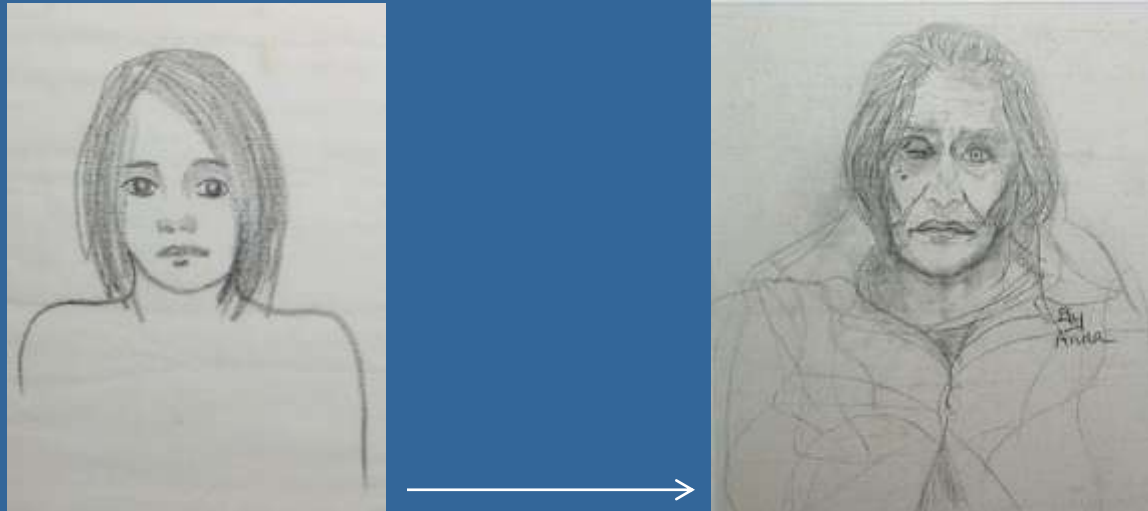


“In my beginning is my end”
TS Eliot *Four Quartets*

HMO Members in ACE Study

- 80% White, including Hispanic
- 10% Black
- 10% Asian
- About 50% men, 50% women
- 74% had attended college
- 62% age 50 or older

ACE Study Findings



- Adverse childhood experiences are common
- Childhood experiences are **powerful** determinants of who we become as adults

Adverse Childhood Experience* ACE Categories (Birth to 18)	Impact of Trauma and Health Risk Behaviors to Ease the Pain	Long-Term Consequences of Unaddressed Trauma (ACEs)
<p><i>Abuse of Child</i></p> <ul style="list-style-type: none"> Emotional abuse Physical abuse Contact Sexual abuse <p><i>Trauma in Child’s Household Environment</i></p> <ul style="list-style-type: none"> Alcohol and/or Drug User Chronically depressed, emotionally disturbed or suicidal household member Mother treated violently Imprisoned household member Not raised by both biological parents (Loss of parent – best by death unless suicide, - Worst by abandonment) <p><i>Neglect of Child</i></p> <ul style="list-style-type: none"> Physical neglect Emotional neglect <p>* Above types of ACEs are the “heavy end” of abuse. *1 type = ACE score of 1</p>	<p><i>Neurobiologic Effects of Trauma</i></p> <ul style="list-style-type: none"> Disrupted neuro-development Difficulty controlling anger-rage Hallucinations Depression - other MH Disorders Panic reactions Anxiety Multiple (6+) somatic problems Sleep problems Impaired memory Flashbacks Dissociation <p><i>Health Risk Behaviors</i></p> <ul style="list-style-type: none"> Smoking Severe obesity Physical inactivity Suicide attempts Alcoholism Drug abuse 50+ sex partners Repetition of original trauma Self Injury Eating disorders Perpetrate interpersonal violence 	<p><i>Disease and Disability</i></p> <ul style="list-style-type: none"> Ischemic heart disease Autoimmune disease Lung Cancer Chronic Obstructive Pulmonary Disease Asthma Liver disease Skeletal fractures Poor self rated health Sexually transmitted disease HIV/AIDS <p><i>Serious Social Problems</i></p> <ul style="list-style-type: none"> Homelessness Prostitution Delinquency, violence, criminal Inability to sustain employment Re-victimization: rape, DV, bullying Compromised ability to parent Negative self and other perceptions and loss of meaning Intergenerational trauma Long-term use of multiple human service systems

Column 1: Types of Adverse Childhood Experiences (Birth to 18)

■ Abuse of Child

- Emotional abuse
- Physical abuse
- Contact sexual abuse

■ Neglect of Child

- Emotional neglect
- Physical neglect

■ Trauma in Child's Household

- Alcohol or drug use
- Depressed, emotionally disturbed or suicidal household member
- Mother treated violently
- Imprisoned household member
- Loss of parent

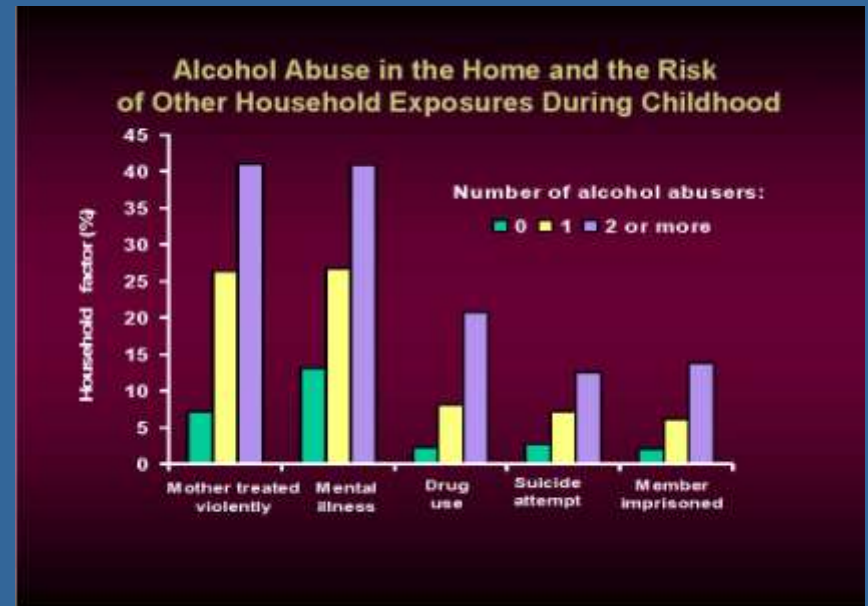
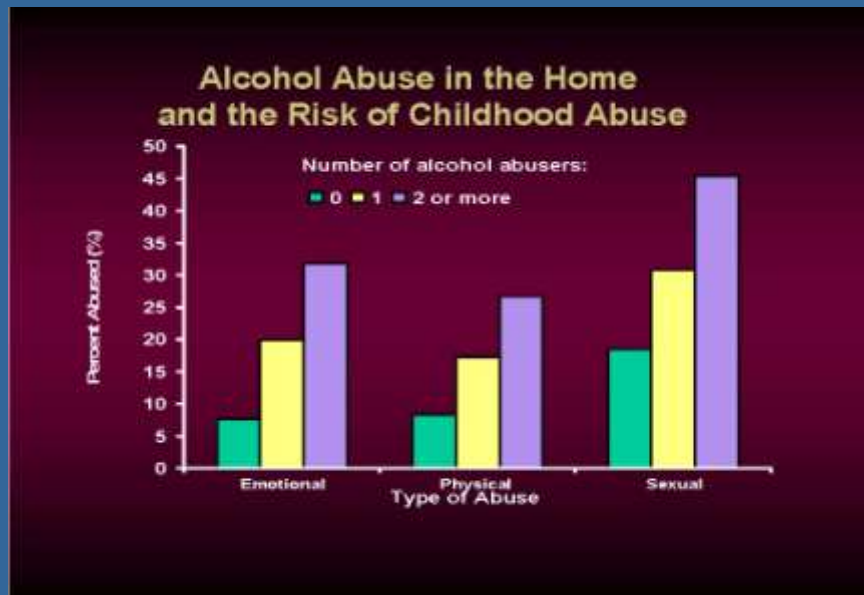
Adverse Childhood Experiences (ACEs) are Common

Of the 17,000 HMO Members:

- More than 1 in 4 grew up with substance abuse, and 2/3rds had at least 1 type of ACE
- 1 in 6 had an ACE Score of 4 or higher
- 25% of women and 17% of men reported sexual abuse as children.
- Women were 50% more likely than men to have an ACE score of 5 or more
- Women had higher scores in all types of ACEs **except** physical abuse and physical neglect which men scored higher in.



Adverse Childhood Experiences (ACEs) are Highly Interrelated



Slides from Health and Social Impact of Growing UP With Alcohol Abuse and Related ACEs. R Anda

Column 2: Impacts of Childhood Trauma and Health Risks to Ease Pain

■ Neurobiological Impacts

- * Disrupted development
- * Anger—rage
- * Hallucinations
- * Depression/other mental health challenges
- * Panic reactions
- * Anxiety
- * Somatic problems
- * Impaired memory
- * Flashbacks
- * Dissociation

■ Health Risks

- * Smoking
- * Severe obesity
- * Physical inactivity
- * Suicide attempts
- * Alcohol and/or drug abuse
- * 50+ sex partners
- * Repetition of trauma
- * Self injury
- * Eating disorders
- * Violent aggressive behavior

Column 3: Long-Term Consequences of Unaddressed Childhood Trauma

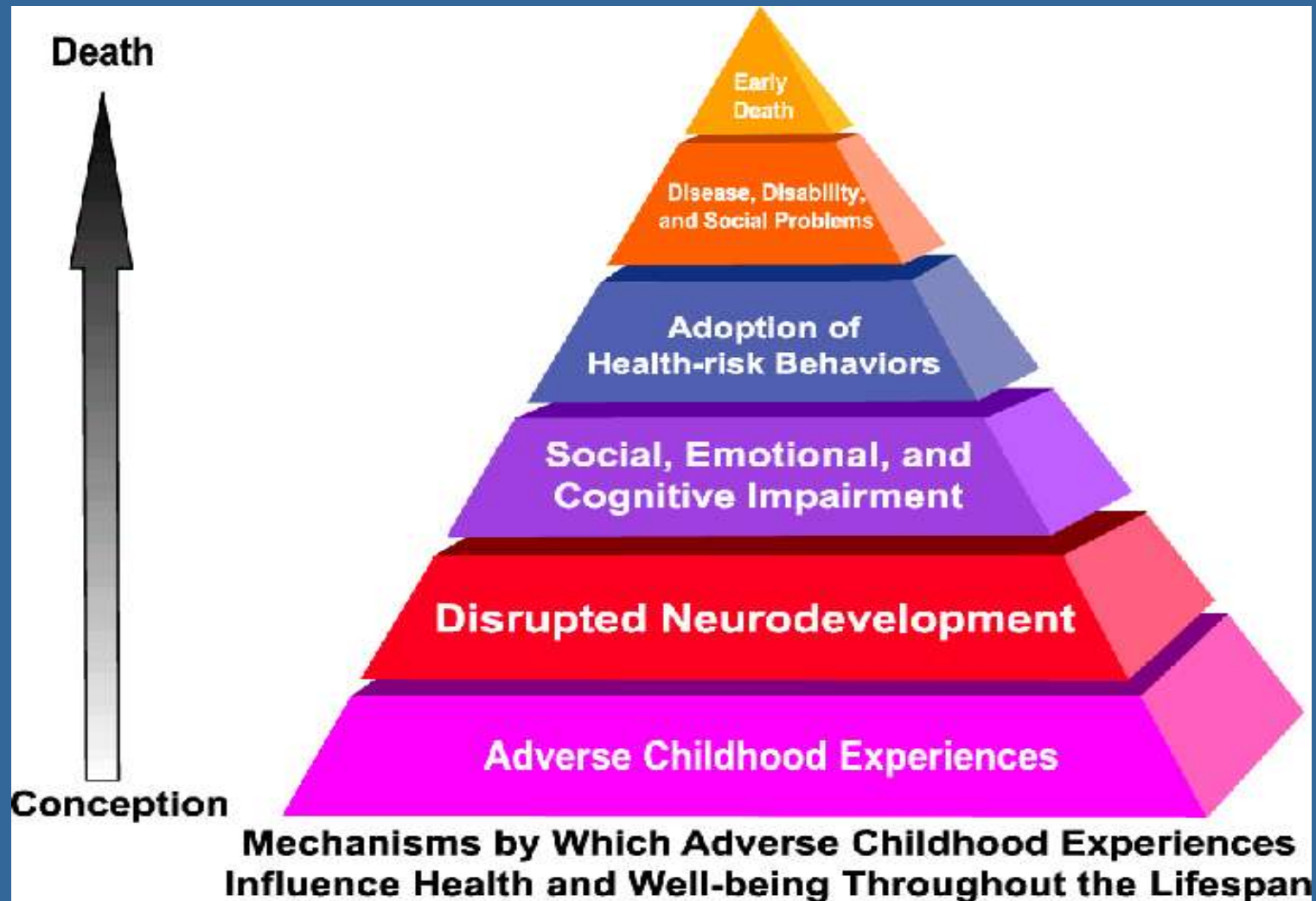
■ Disease and Disability

- * Ischemic heart disease
- * Autoimmune diseases
- * Lung cancer
- * Chronic obstructive pulmonary disease
- * Asthma
- * Liver disease
- * Skeletal fractures
- * Poor self-rated health
- * Sexually transmitted infections
- * HIV/AIDS

■ Social Problems

- * Homelessness
- * Prostitution
- * Delinquency, criminal behavior
- * Inability to sustain employment
- * Re-victimization
- * Less ability to parent
- * Teen and unwanted pregnancy
- * Negative self- and other perception and loss of meaning
- * Intergenerational trauma
- * Involvement in multiple services

Mechanisms by Which ACEs Influence Health and Well-Being Throughout the Lifespan



ACE Scores and Impacts

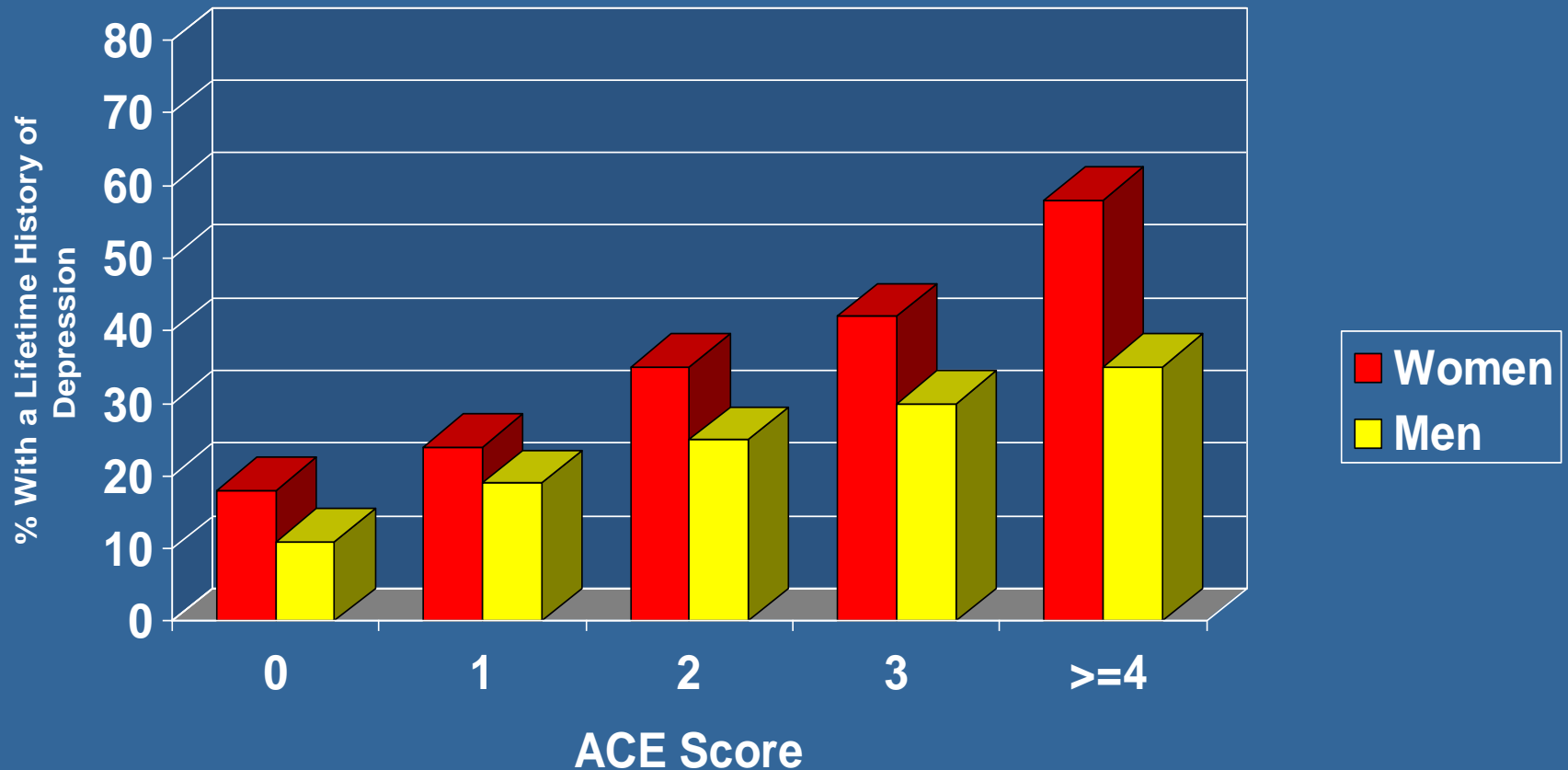
- Emotional pain
- Persistent mental health problems
- Health risks
- Serious social problems
- Chronic and disabling health conditions
- Poor life expectancy

For example:

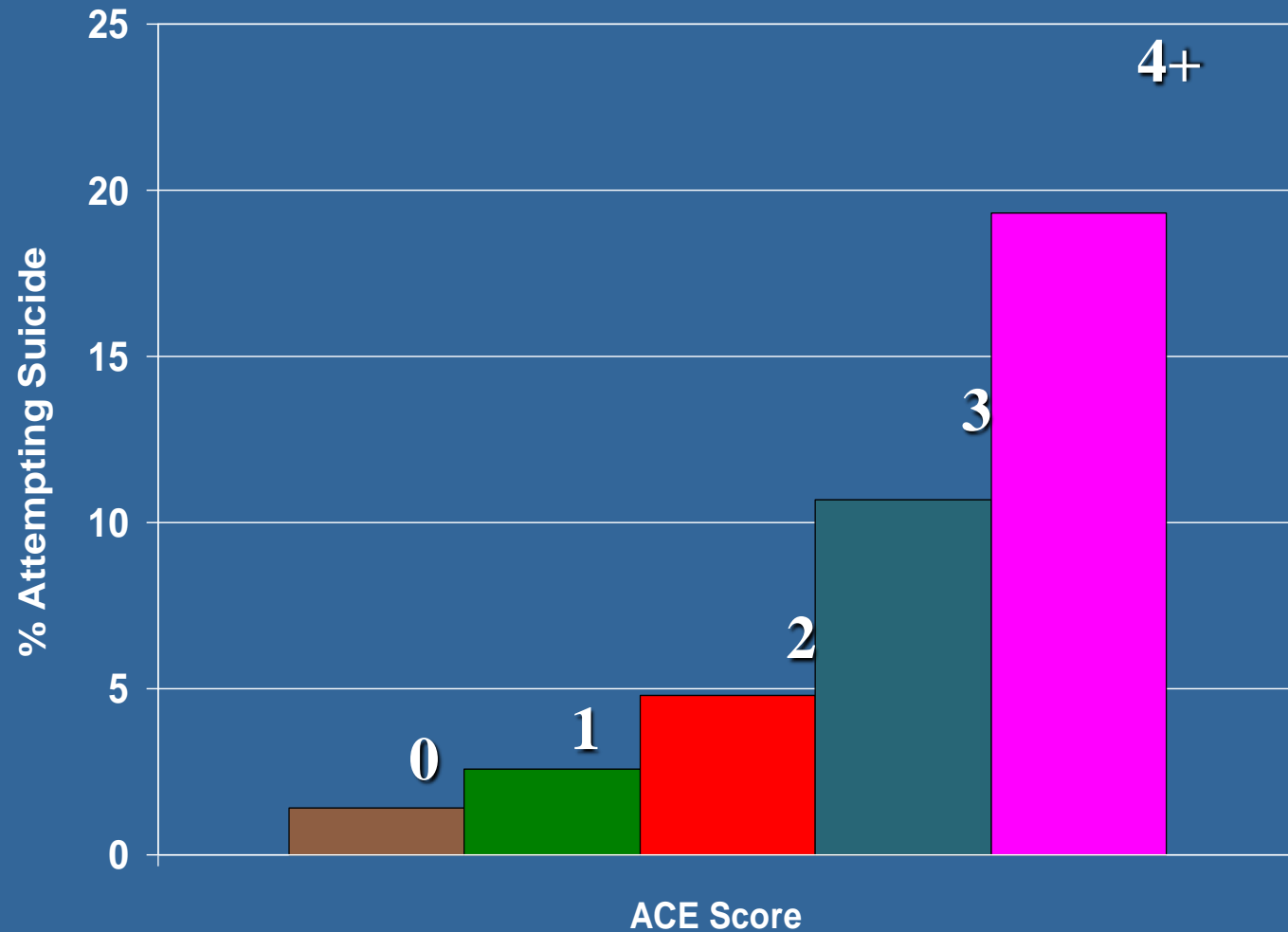
Emotional Pain and Mental Health Problems



Childhood Experiences Underlie Chronic Depression



Childhood Experiences Underlie Suicide



- 2/3rd (67%) of all suicide attempts
- 64% of adult suicide attempts
- 80% of child/adolescent suicide attempts



**Are Attributable to
Childhood Adverse Experiences**

*Women are 3 times as likely as men to attempt suicide
Men are 4 times as likely as women to complete suicide.*

Childhood sexual abuse is strongest most independent risk factor for suicidality

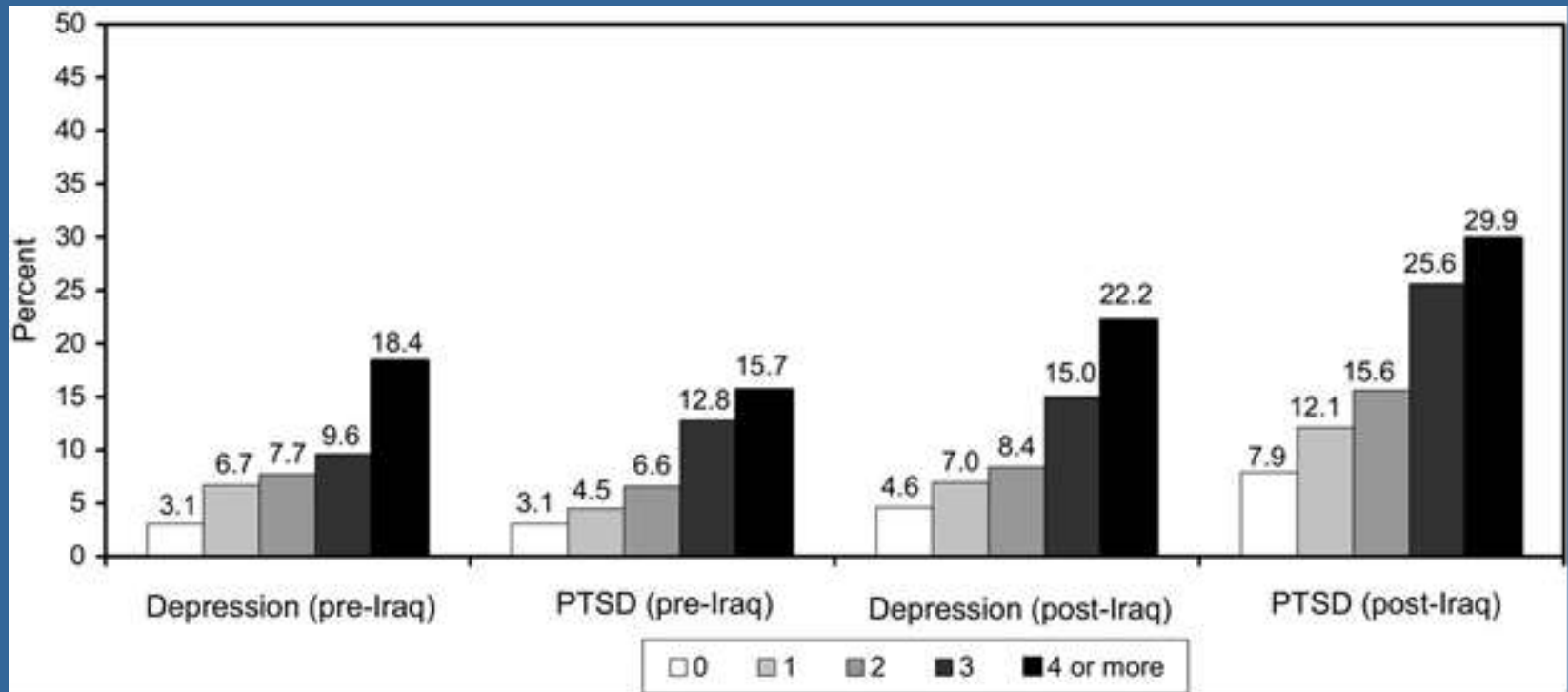
- As many as 42% of girls are sexually abused before age 18
- 79.8% of American Indian Alaskan Native (AIAN) girls experience sexual abuse in early childhood.
- Young AIAN women are over 3 ½ times more likely to commit suicide than females in the general population



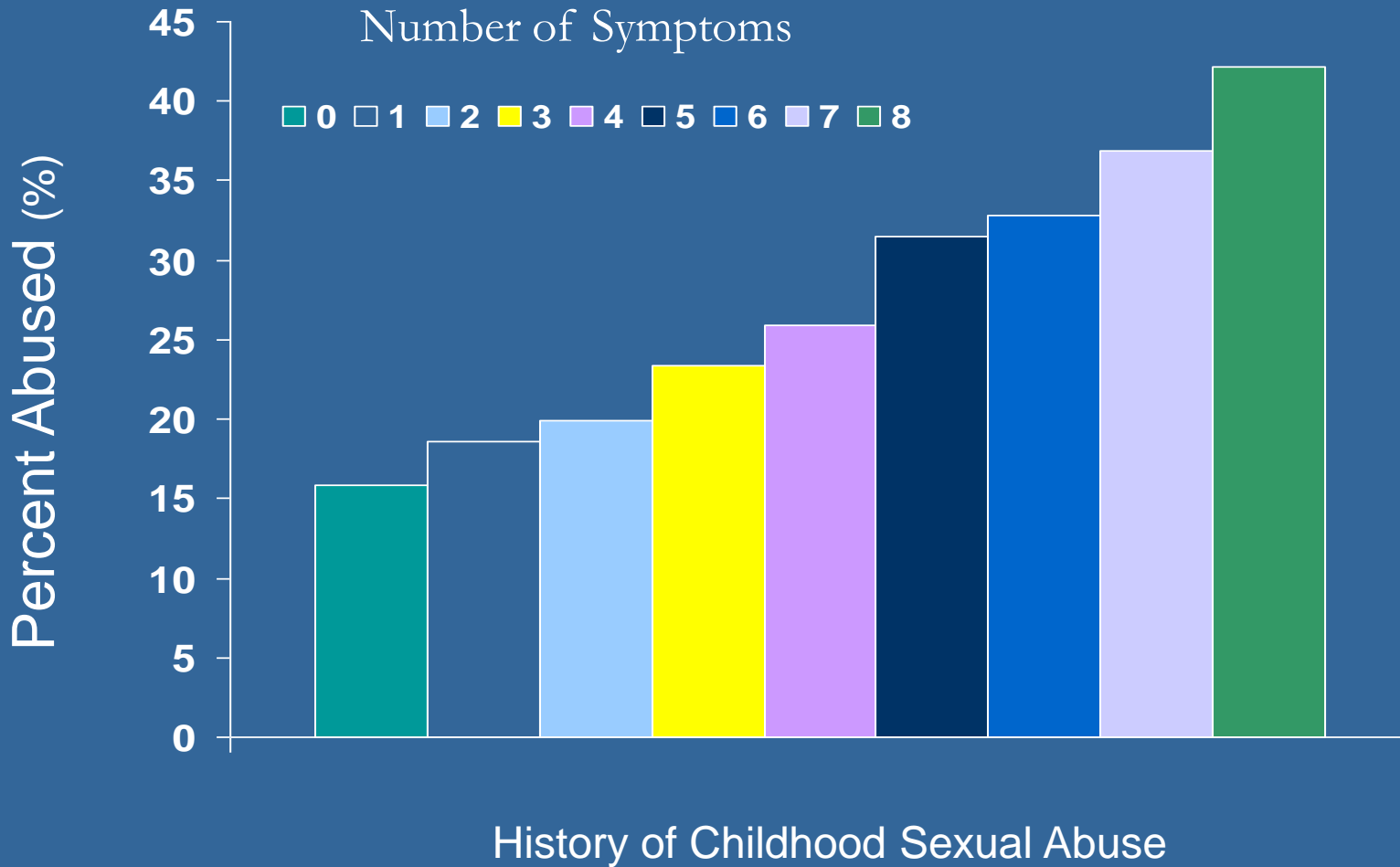


Iraq Combat Veterans

More troops are taking their own lives than are killed in combat.

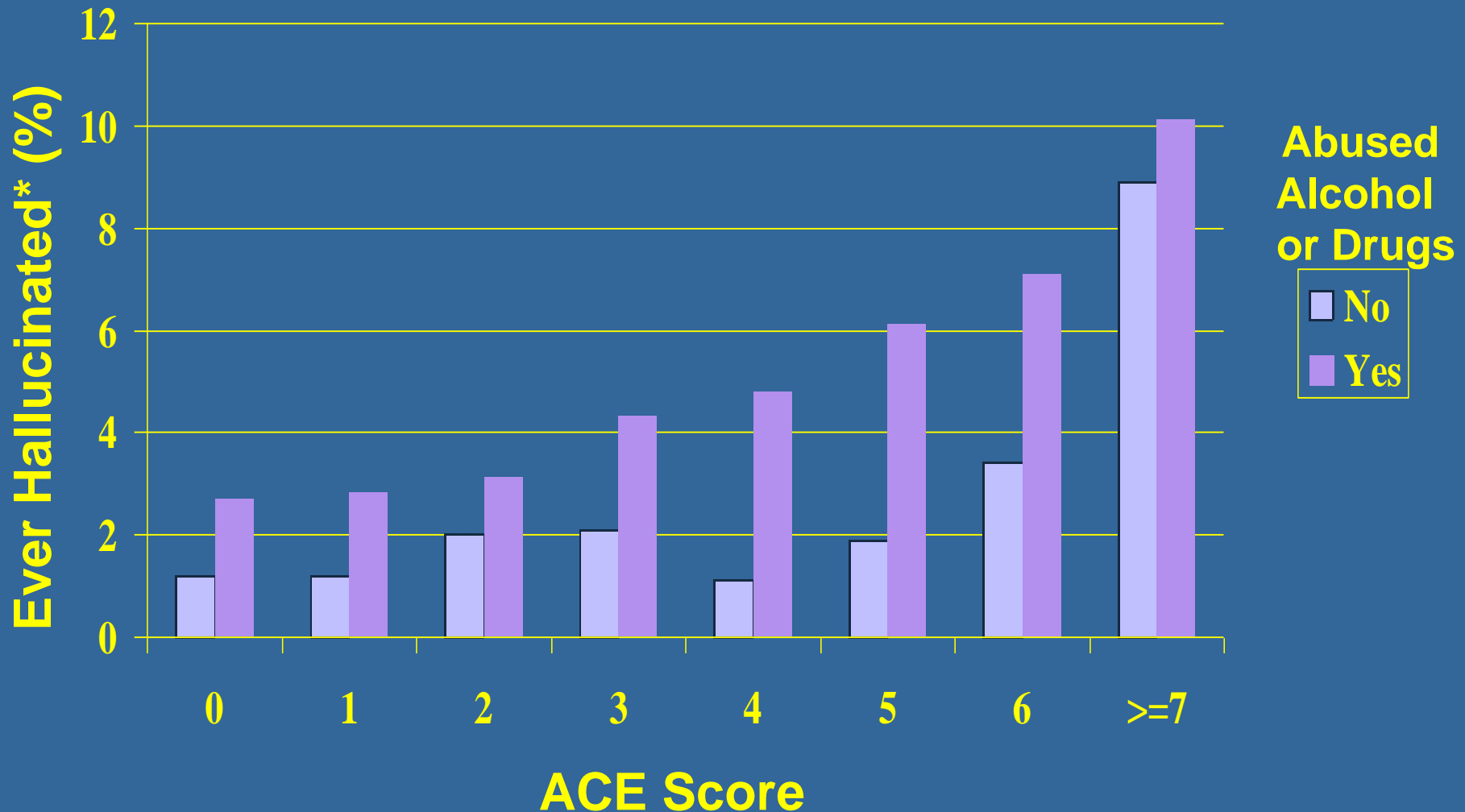


Childhood Sexual Abuse and the Number of Unexplained Symptoms



Are We Misdiagnosing?

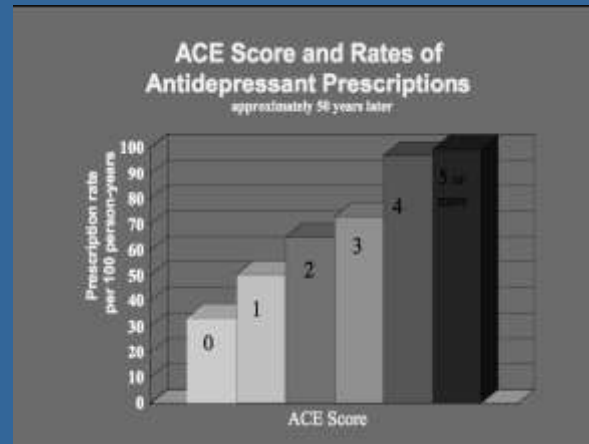
ACE Score and Hallucinations



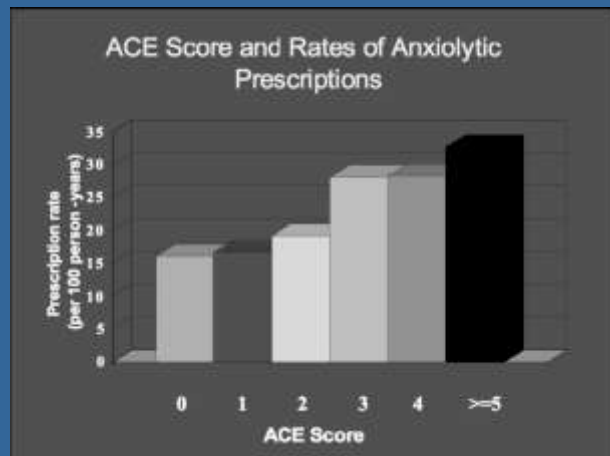
*Adjusted for age, sex, race, and education.

Childhood Experiences Underlie Serious and Persistent Mental Health Problems

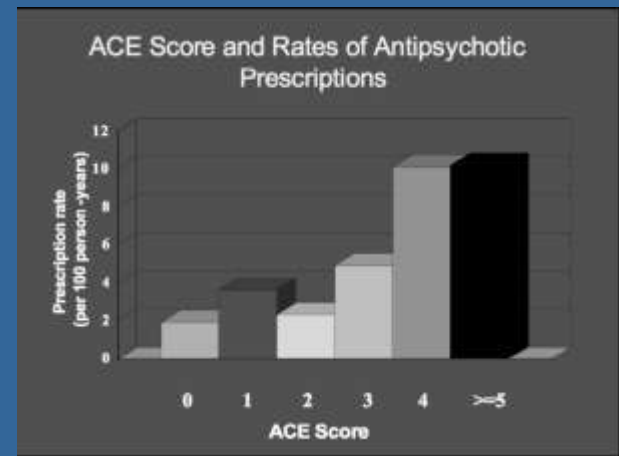
Depression



Anxiety



Psychosis



Shattering of the Self

- Alterations in
 - Affect Regulation
 - Consciousness
 - Self-Perception
 - Perception of perpetrator
 - Relations with others
 - Systems of meaning



Judith Herman, 1992
Trauma and Recovery

The aftermath of violence – from domestic abuse to political terror

Lasting Alterations in Self Perception

The sexual and physical violation of children results in **alterations in self-perception** which are immediate and last throughout the life-span

Judith Herman, 1992

Sense of helplessness, paralysis, captivity,
inadequacy, powerlessness, danger, fear



Continues over the lifespan

Sense of Shame, Guilt, Self-Blame, Being Bad



Continues over the lifespan

Sense of defilement, contamination, spoiled, degraded, debased, despicable, evil



Continues over the lifespan

Sense of complete difference from others, deviance, utter aloneness, isolation, non-human, specialness, unseen, unheard, belief no other person can ever understand



Continues over the lifespan

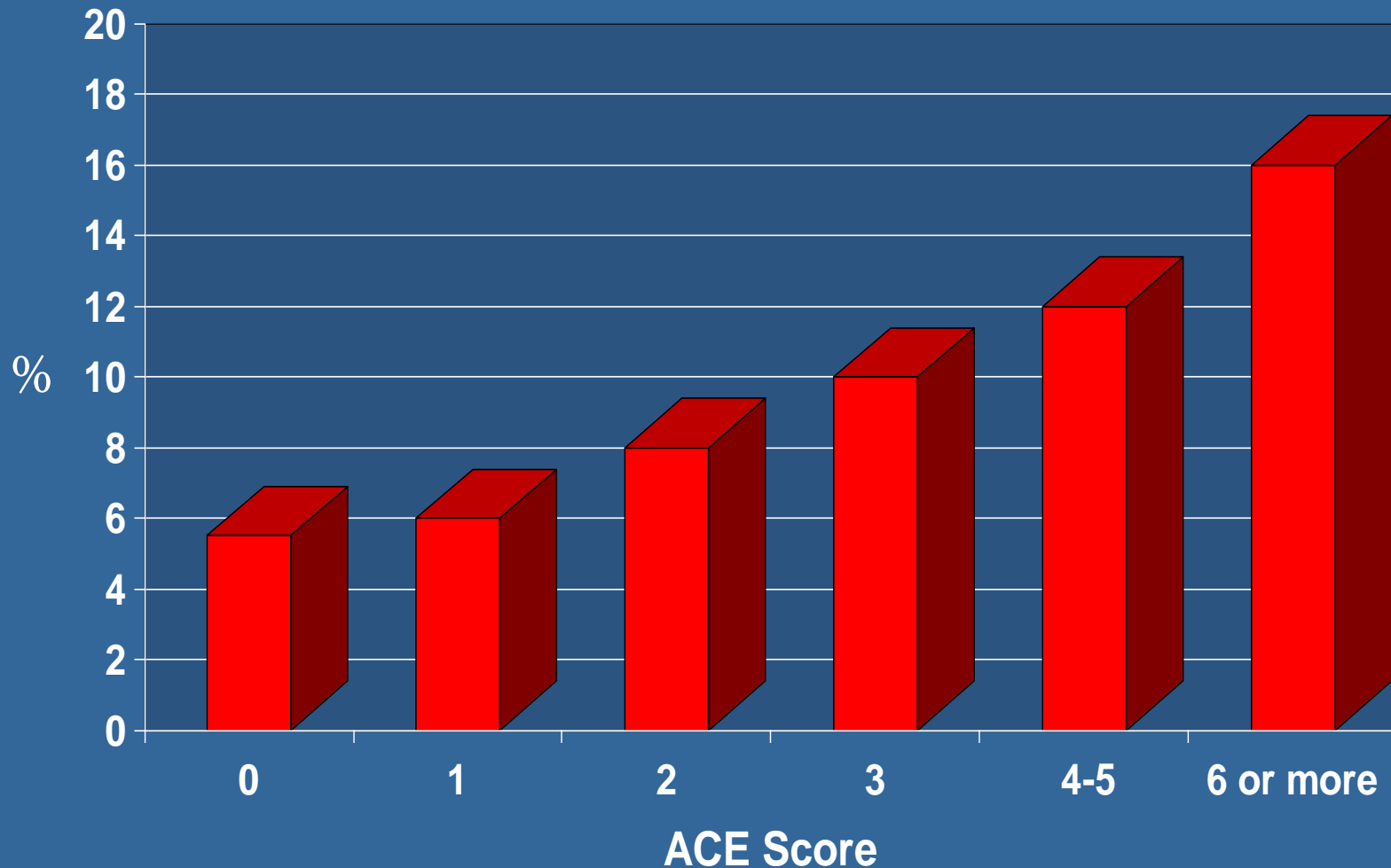
Coping



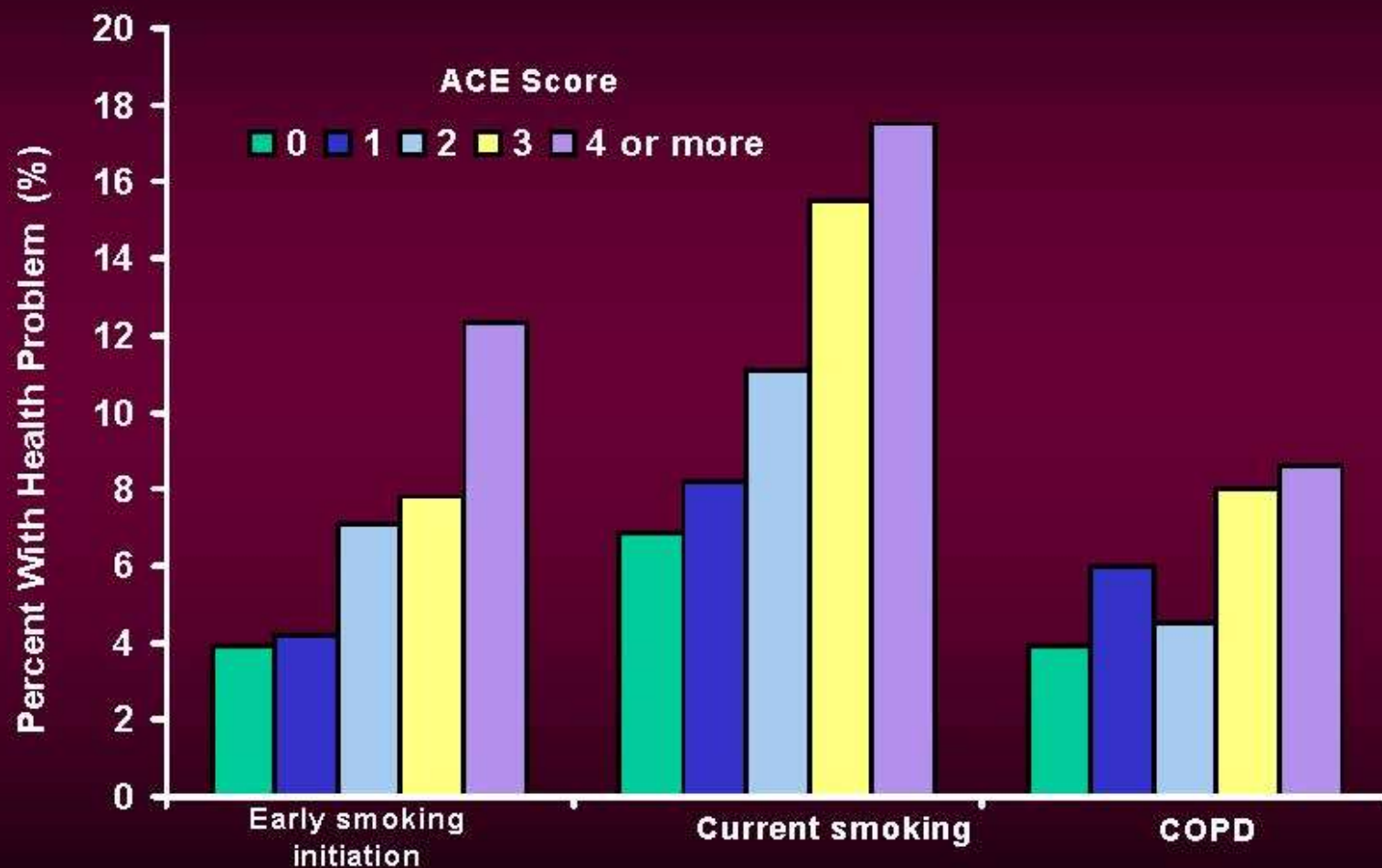
Health Risks



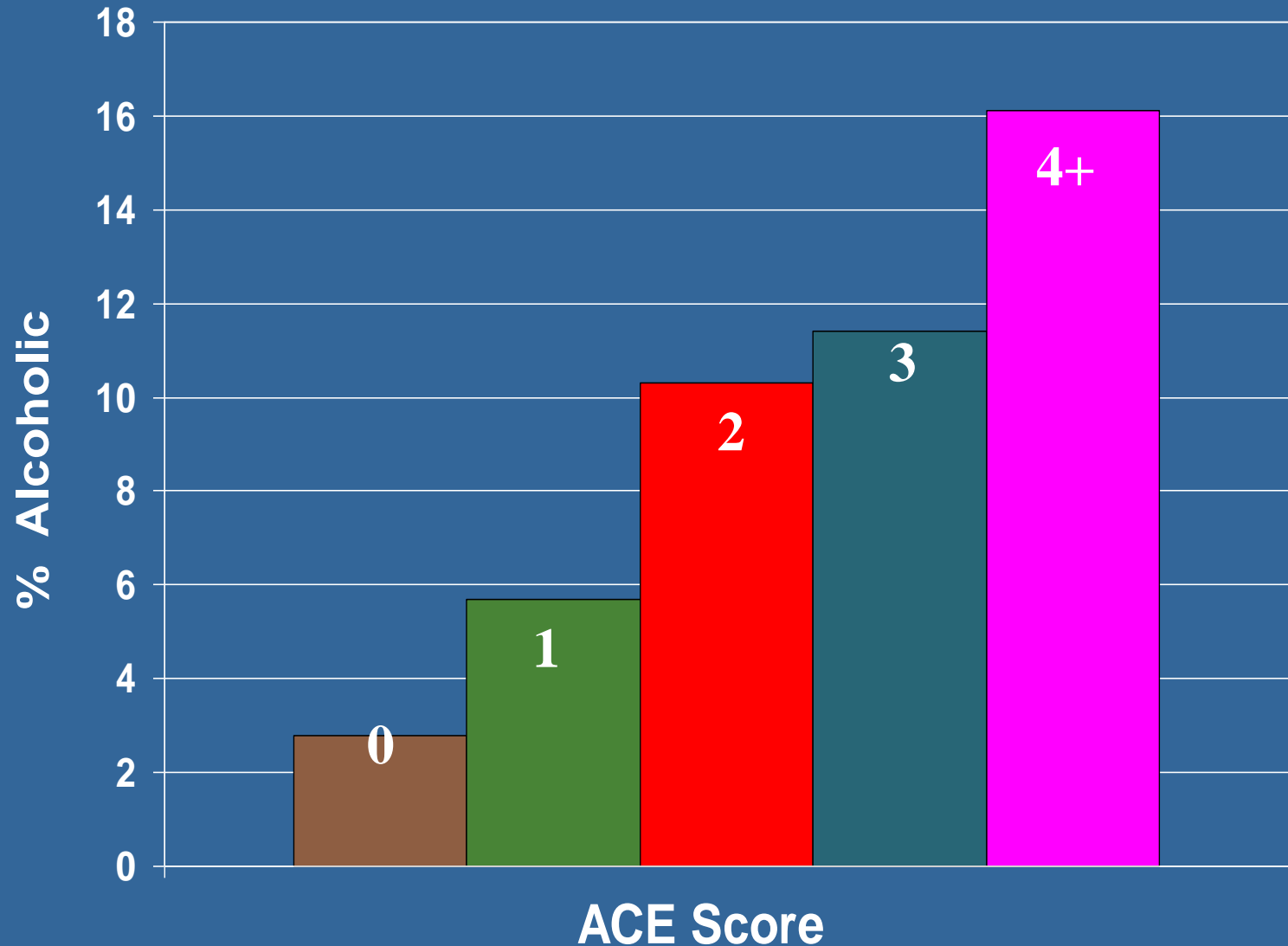
Adverse Childhood Experiences and Current Smoking



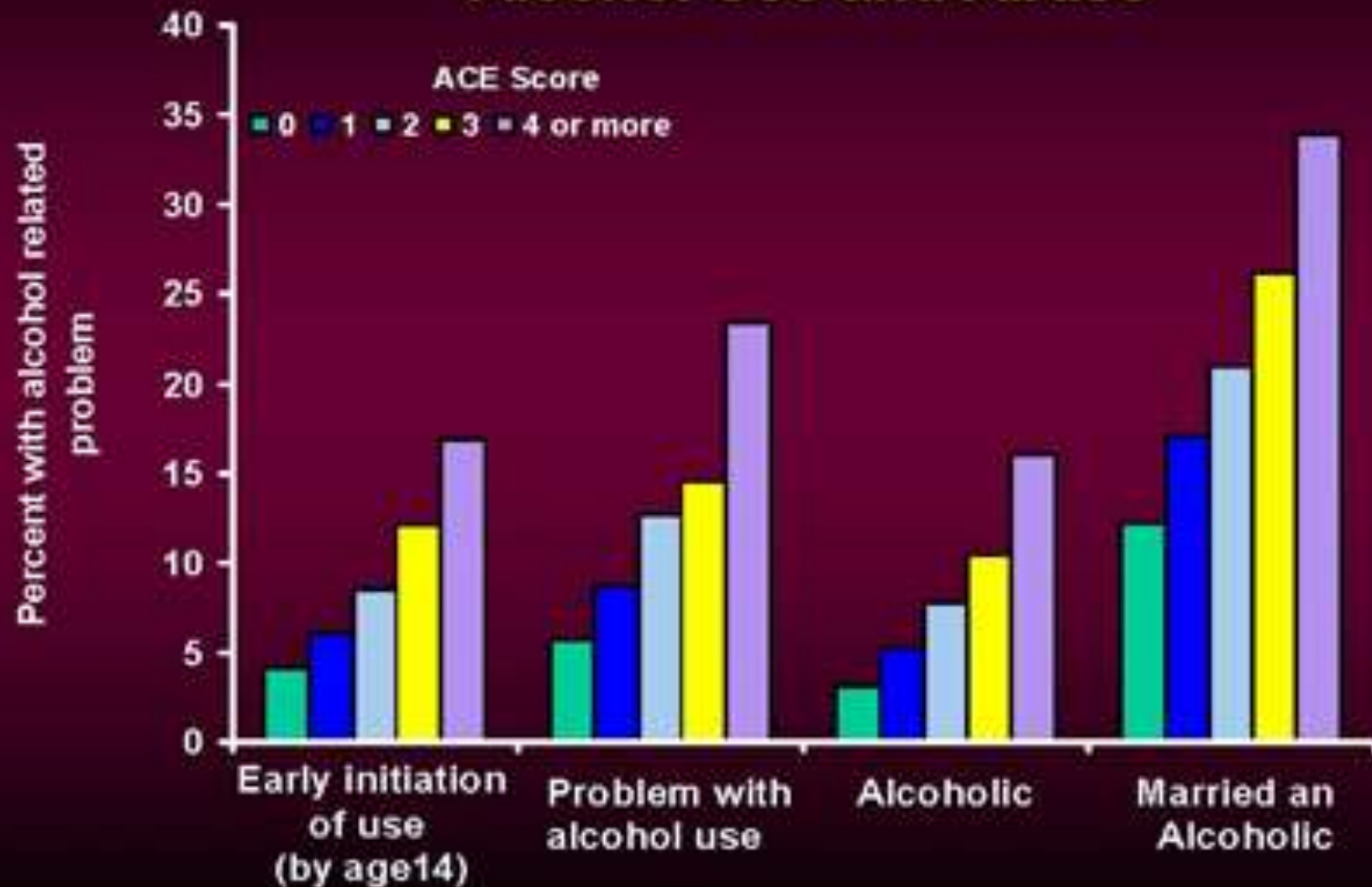
The ACE Score, Smoking, and Lung Disease



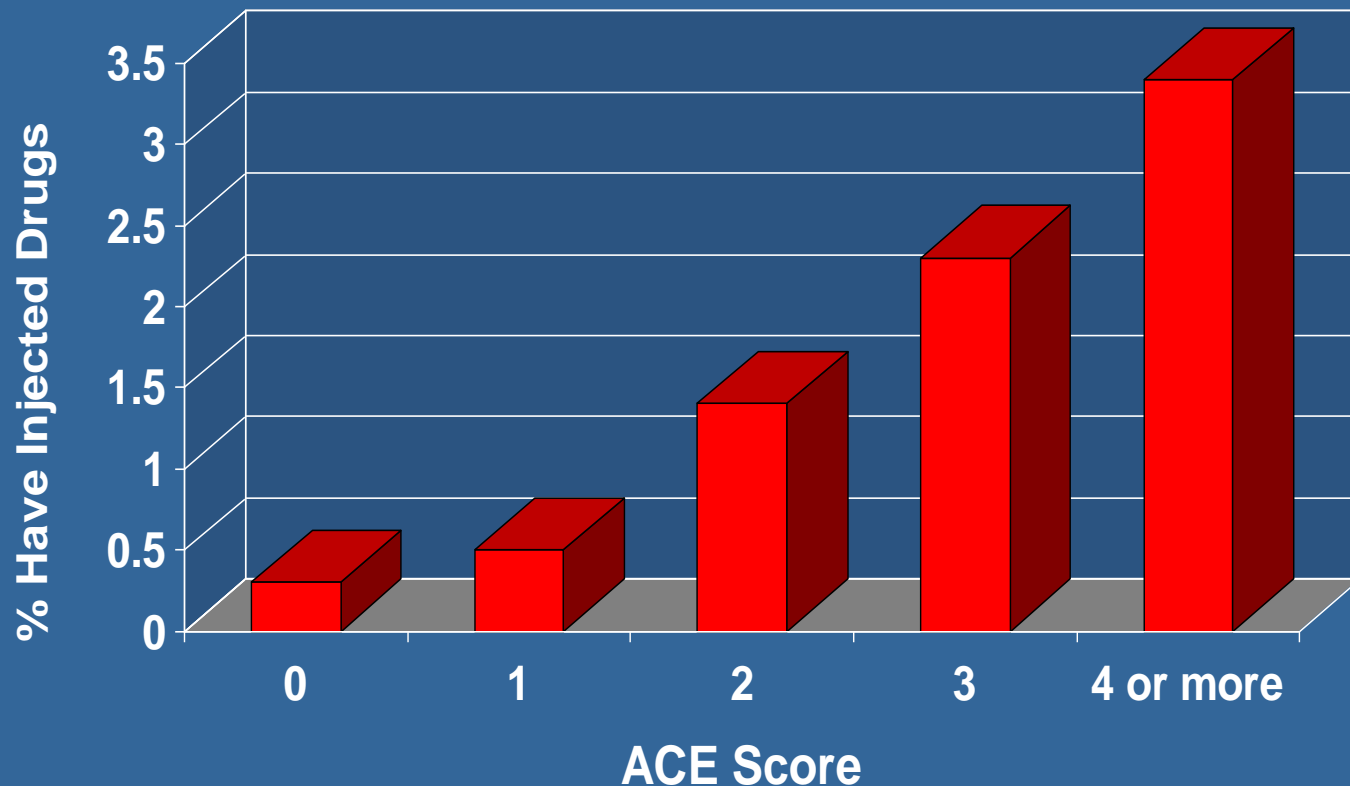
Childhood Experiences and Adult Alcoholism



The ACE Score... Alcohol Use and Abuse

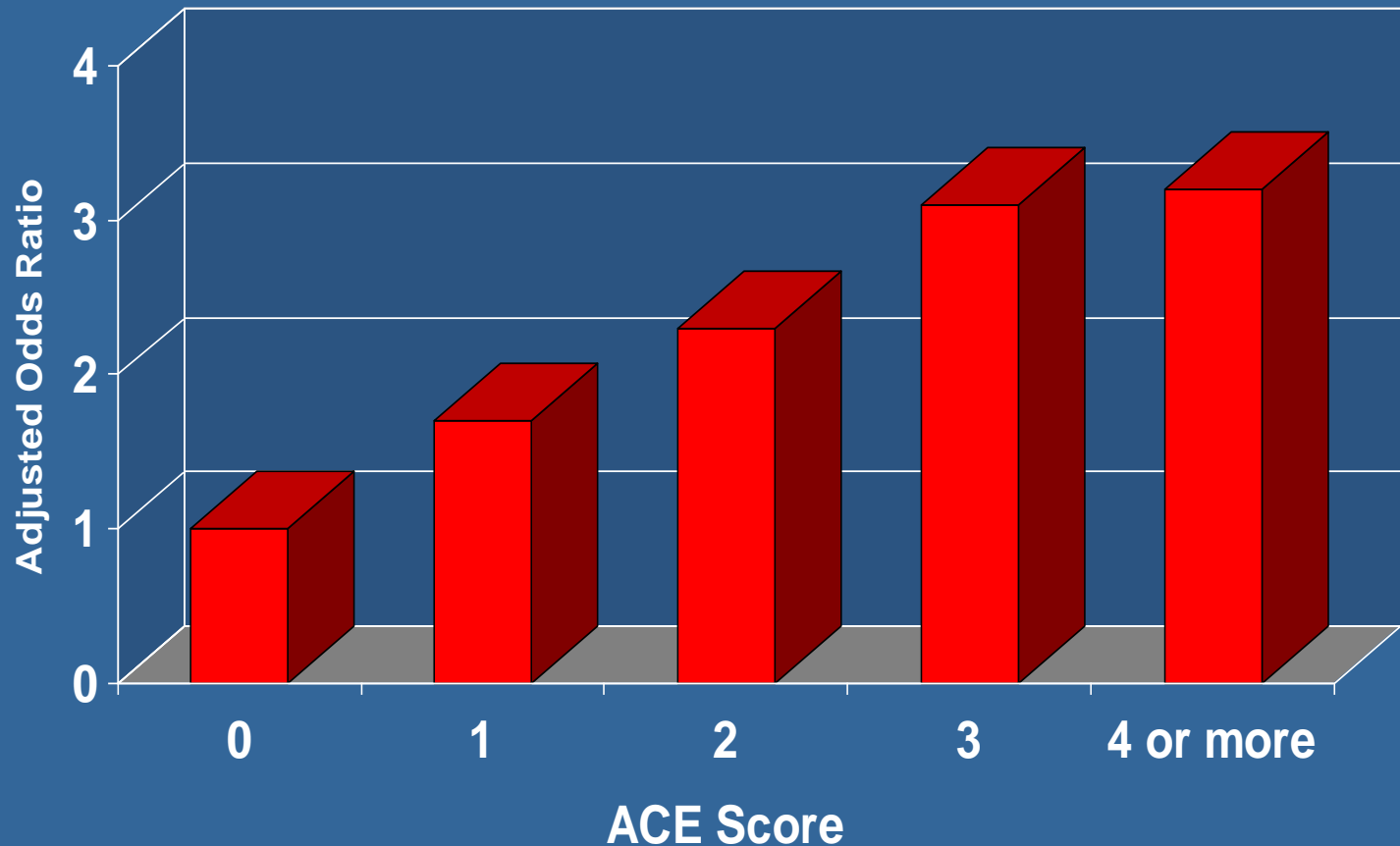


ACE Score and Intravenous Drug Use

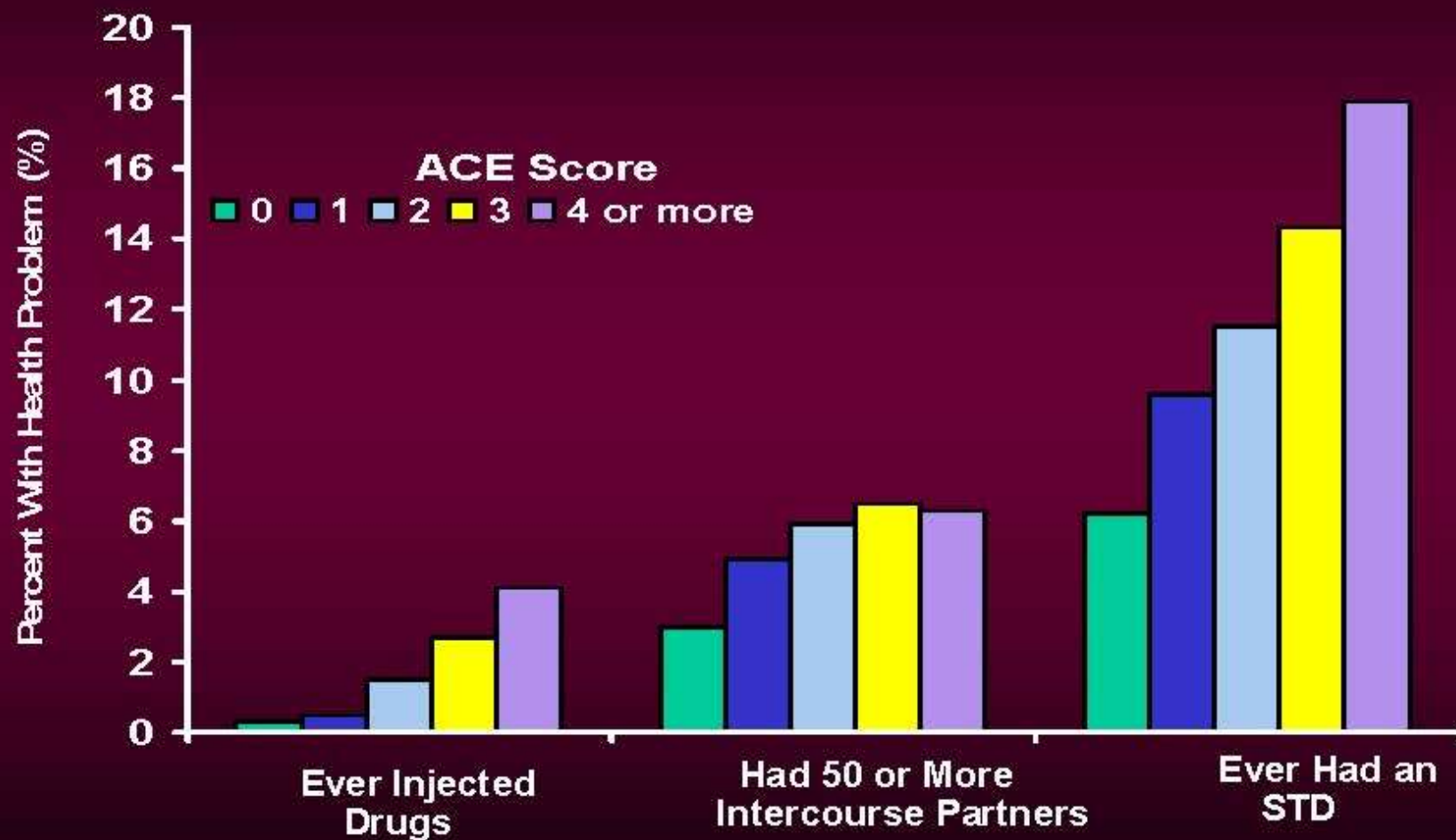


N = 8,022 **p<0.001**

Adverse Childhood Experiences and Likelihood of > 50 Sexual Partners



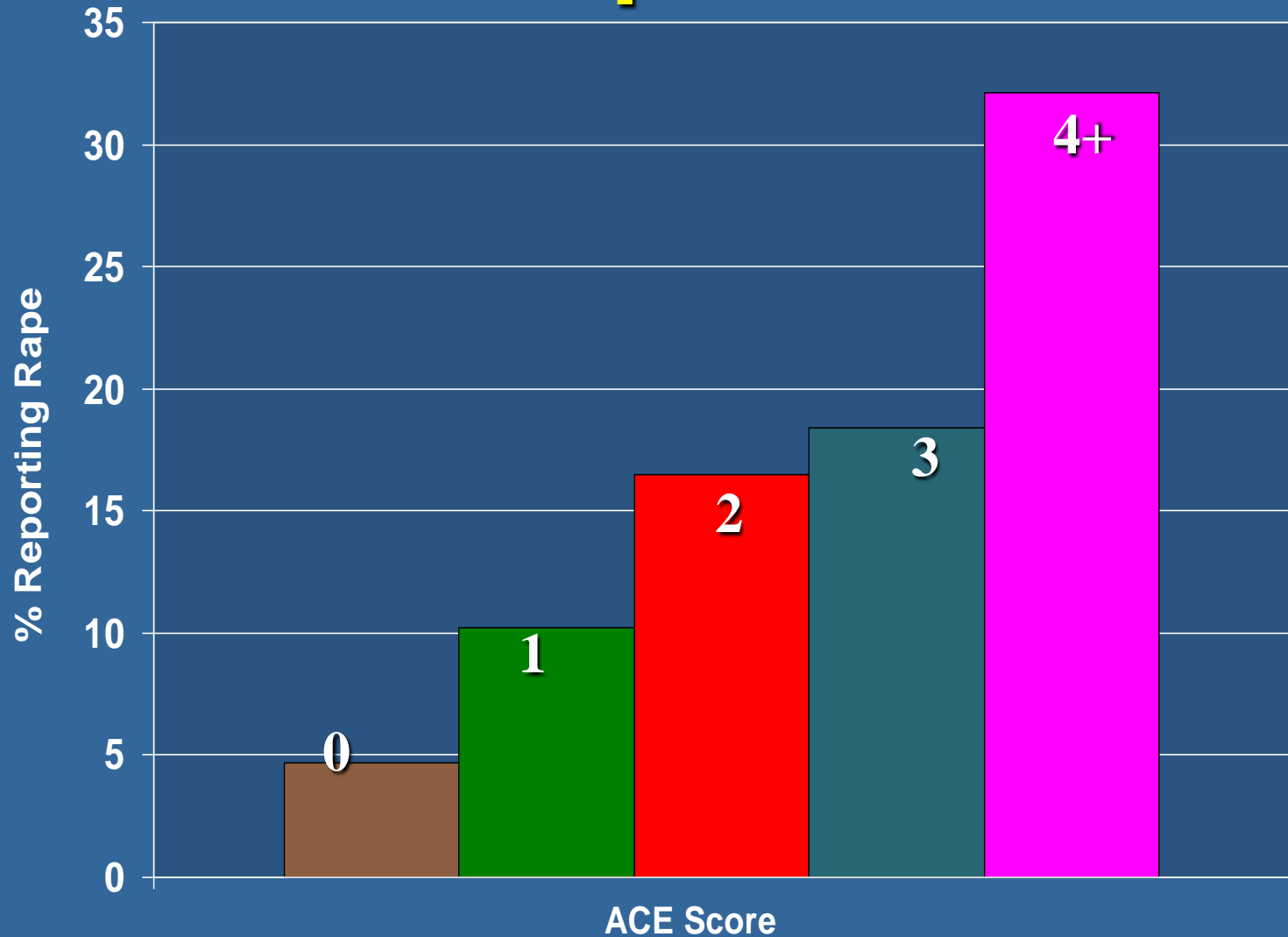
ACE Score and HIV Risks



Serious Social Problems

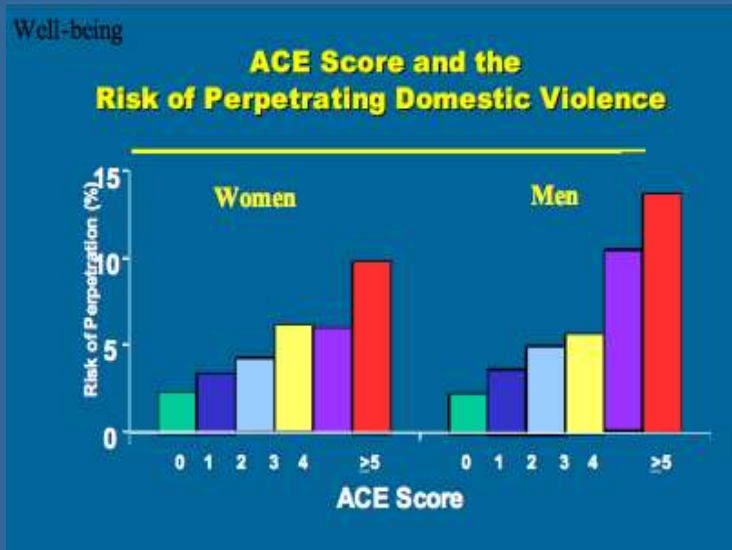


Childhood Experiences Underlie Rape



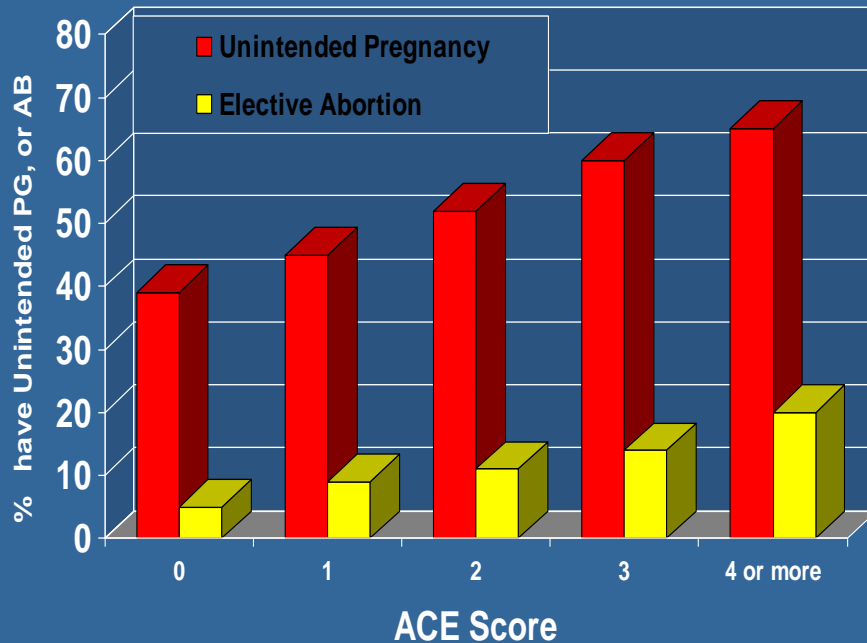
ACEs Underlie Domestic Violence

Women with ACE Score of 4+ are 500% more likely to become victims of domestic violence.



Both men and women are more likely to become perpetrators of domestic violence

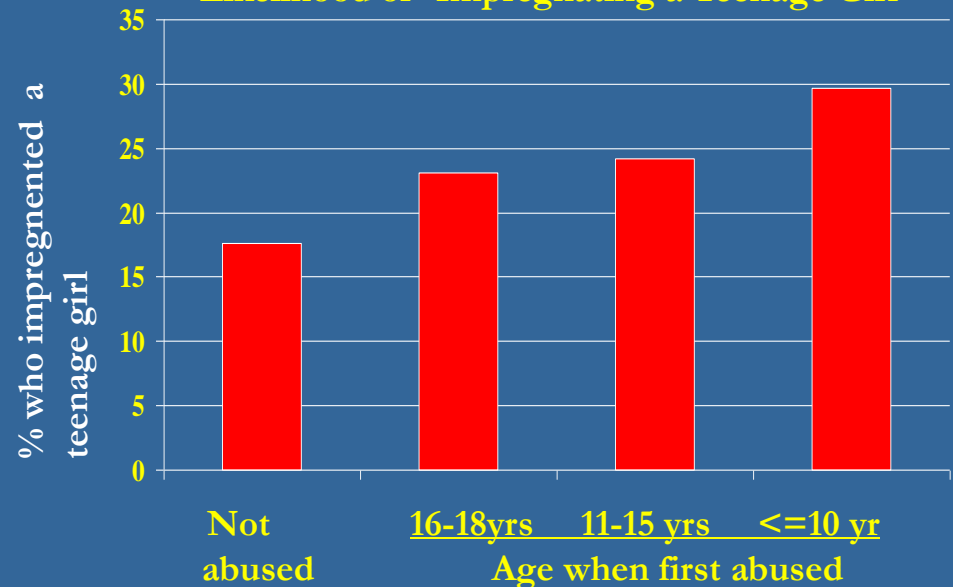
ACE score and unintended pregnancy or elective abortion



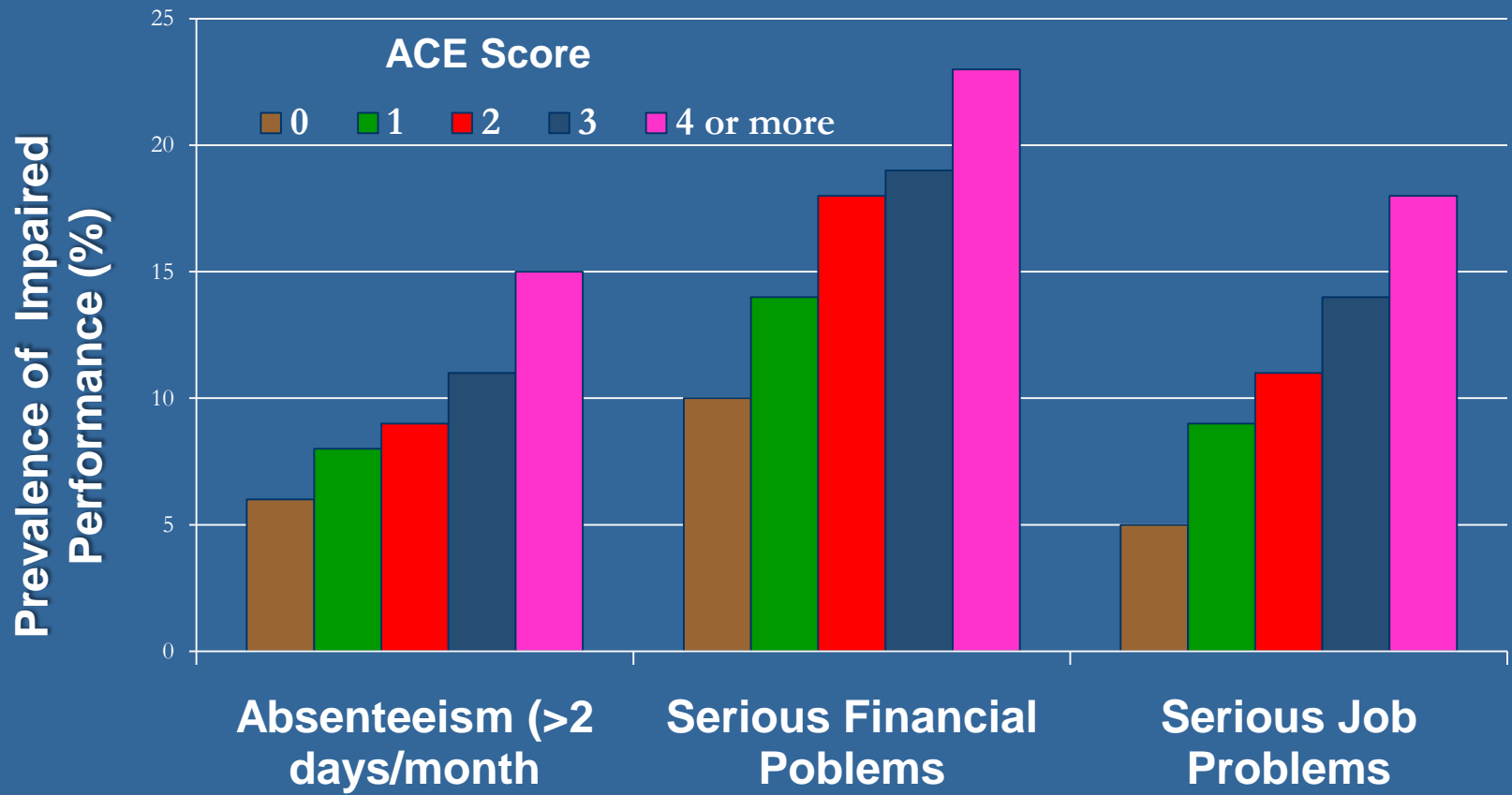
Sexually abused male children & teenage pregnancies

ACEs & Unwanted Pregnancy or Elective Abortion

Sexual Abuse of Male Children and Their Likelihood of Impregnating a Teenage Girl



ACE Score and Indicators of Impaired Worker Performance



Adverse childhood experiences are risk factors for adult homelessness

- A neglected child is 13 times and a physically abused child is 16 times more likely to ever experience homelessness as adult.
- Male and female children who suffer both neglect and physical or sexual abuse are 26 times as likely than those who haven't – to become homeless during their adult lives.
- 79 – 90% homeless families headed by women: 92% suffer physical and/or sexual violence – 43% were sexually abused as children.
- 97% of all homeless seriously mentally ill women have histories of physical and sexual abuse. 87% were abused both as adults and as children



Childhood Trauma and Adult Violence

- Although not all abused children grow up to be abusers, there is strong correlation that those who are seriously abused become the most violent members of society.
 - Of juveniles sentenced to death each suffered severe repeated physical and sexual abuse in childhood.
 - 83.8% of convicted killers suffered severe physical and emotional abuse and 32.2% were sexually violated as children.
 - Girls and women considered dangerously violent are 2-7 times more likely than female controls to have been exposed to childhood violence.
 - Children from violent homes 24 times more likely to commit sexual assault than their counterparts from non-violent homes.

Adult Disease and Disability



Higher ACE Score Results in Significant Rises in Chronic Health Conditions:

- Ischemic heart disease
- Autoimmune diseases
- Lung cancer
- Chronic obstructive pulmonary disease
- Liver disease
- Skeletal fractures
- Sexually transmitted infections
- HIV/AIDS



Likelihood of heart disease was increased in all categories of ACE Score, *independent of all risk factors*:

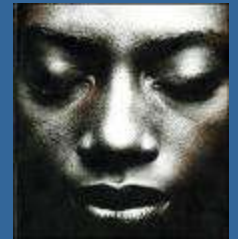
■ Emotional abuse	1.7x
■ Physical abuse	1.5x
■ Sexual abuse	1.4x
■ Domestic violence	1.4x
■ Substance abuse	1.3x
■ Mental illness	1.4x
■ Household criminal	1.7x
■ Emotional neglect	1.3x
■ Physical neglect	1.4x

Higher ACE Score Results in Significantly Poorer Life Expectancy

- On average, adults with a high ACE score had double the risk for early death compared with adults who had not endured ACEs.
- On average, children exposed to 6 or more ACEs died at age 60, whereas children without ACEs died at age 79.



There are Many Faces of Trauma



Childhood Trauma and Violence: A Public Health Crisis

- **Prevention:** Public Education
- **Early Identification and Intervention**
- **Effective Trauma Treatment:**
Healing Relationships and Environments

Understanding Resilience

- People respond differently
 - Survive and thrive (PTG)
 - Recover on their own
 - Persistent symptoms
 - Effects are indirect or delayed
- Characteristics
 - Common, not rare
 - Co-exists with symptoms
- Protective Factors
 - Social supports
 - Meaning
 - Resiliency skills



Prevention



The First Relationship

- Preventing childhood abuse and neglect may be one of the most important things we can do to improve our nation's health and mental health
- Preventing violence could result in huge financial savings across all health and human services
- We now have a scientific model that can do for public health and mental health what the germ theory did for medicine

Adapted from AK Blanch

Youth Resilience: Intervening Early

- **Affect regulation (managing emotions)**
 - One of last functions to develop in brain
 - Affected by trauma
 - Lack leads to risky behaviors and acting out
 - Families & communities provide external support
- **Effective prevention programs for youth exist**
- **Mechanisms**
 - Caregivers learn to support, not re-traumatize
 - Youth learn social and emotional skills of affect regulation



Adapted from AK Blanch

Effective trauma-informed and trauma-specific treatment

- Models for Developing Trauma-Informed Behavioral Health Systems and Trauma-Specific Services. 2008 Update

SAMHSA/CMHS National Center for Trauma Informed Care

- Download from www.TheAnnaInstitute.com

The Shattered Self Can Heal

Trauma Informed Environments Support Self-Care, Self-Healing and Healing Relationships



- Deep listening
- Inventory self-healing
- Connect with culture
- Humor, friendship, & physical exercise
- Choice, collaboration, empowerment, safety and trustworthiness

Adapted from AK Blanch

A Vision for the Future

- Everyone in our society holds the welfare of children as a sacred trust and duty where “the rights of children are respected, their welfare is protected, their lives are free from fear and want, and they grow up in peace.”
– Kofi A. Annan
- Our government, institutions, communities, services and fiscal structures support primary prevention, beginning with trauma-informed, nurturing, non-stressed parenting and caregiving.
- Child abuse and neglect become so rare that the Diagnostic and Statistical Manual of Mental Disorders (DSM) IV (or V) shrinks to the size of a pamphlet in two generations and the prisons empty.
Statement attributed to John Briere, C. Valentine (2002)

Resources

- **ACE Study website.** www.cdc.gov/nccdphp/ace The Centers for Disease Control and Prevention reports on the Adverse Childhood Experiences (ACE) Study and findings.
- **The ACE Response website.** www.aceresponse.org Information on prevention of ACEs and ACE consequences through current ACE informed programs, policies, direct practice and community development. Connects policymakers and leaders to ACE-informed policies and cost-savings studies.
- **The Anna Institute website.** www.theannainstitute.com ACE Study Section contains over **50 full PDF articles** on study findings, and ACE related documents including ACE questionnaires. ACE powerpoint slides with notes are available for use with professionals and public audiences.
- **State Public Systems Coalition on Trauma Listserve** for those in public service committed to addressing trauma. Email SPSCOT@gwi.net for information on history, purpose, membership.
- **Models for Developing Trauma-Informed Behavioral Health Systems and Trauma- Specific Services.** www.theannainsstitute.com

Reflection

- Is substance abuse/addiction more a disease or more a manifestation of childhood adverse experiences or trauma?

1 2 3 4 5 6 7 8 9 10

- Is “mental illness” more a disease or more a manifestation of childhood adverse experiences or trauma?

1 2 3 4 5 6 7 8 9 10



Thank You

www.TheAnnaInstitute.Org

Presentation Artwork

- All artwork in this presentation was **created by Anna Caroline Jennings**. Although she had no formal training, her work is stark, sophisticated and haunting. It has been exhibited at conferences across the country.
- Through her paintings and drawings she vividly and poignantly expresses her abuse at the hands of perpetrators and within the mental health system.
- Her work and story are displayed on the website: www.TheAnnaInstitute.com

Speaker Contact Information

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207-594-7392

Speaker Biography—Ann Jennings, Ph.D.

Ann Jennings, Ph.D., has been involved for more than 27 years in raising public awareness and influencing fundamental change in how service systems view and treat people with histories of unaddressed childhood trauma. Personal experience underscores her conviction that prevention of and early intervention in childhood trauma is core to reducing human tragedy and creating compassionate and effective human services.

As Director of the Maine Office of Trauma Services for eight years, she initiated projects bringing trauma-informed trainings and services to numerous agencies throughout the state. She consults nationally, is the keynote speaker and presenter at national and state conferences, and has authored numerous publications.

Dr. Jennings is founder and Executive Director of The Anna Institute, a non-profit organization dedicated to speaking truth about childhood trauma, and providing trauma-informed resources for professional, community, and survivor use. For more information, visit: <http://www.TheAnnaInstitute.com>.

