

Supporting children and teens for healthy and whole development

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Seattle Tutoring Coalition
Keynote
February 11, 2017

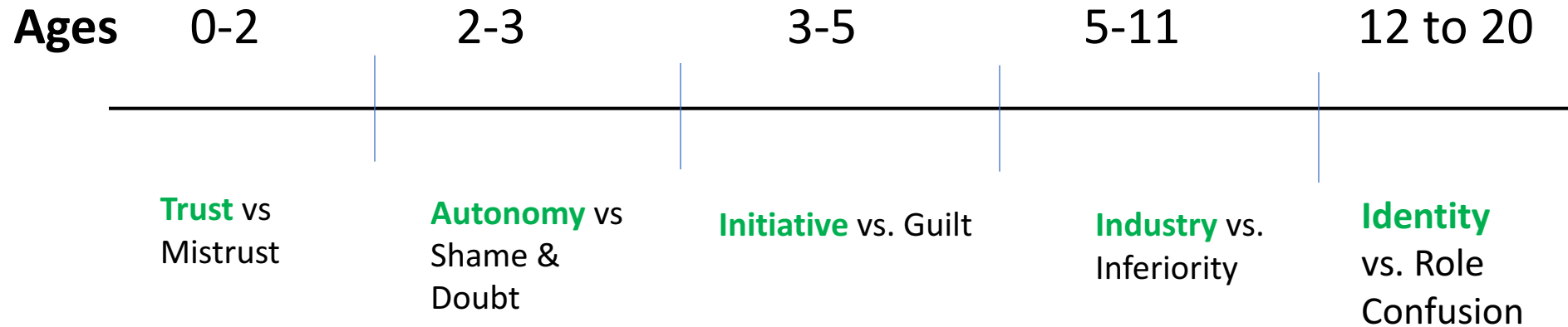


Today we will learn about:

- Child neural, social, and physical development (0 to 10) (11 to 18)
- ACE's and Complex Trauma (disruptors to healthy development)
- Relationships as a protective factor
- Resilience



Childhood Developmental Stages



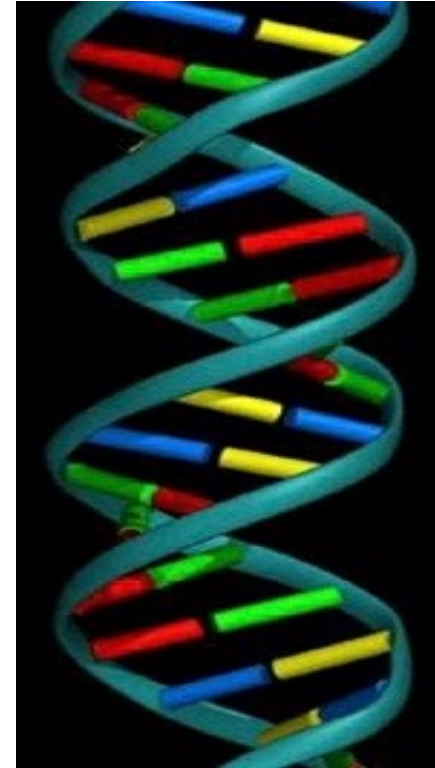
Nature or Nurture

50 / 50

Environment



Epigenetics



Trust vs. Mistrust



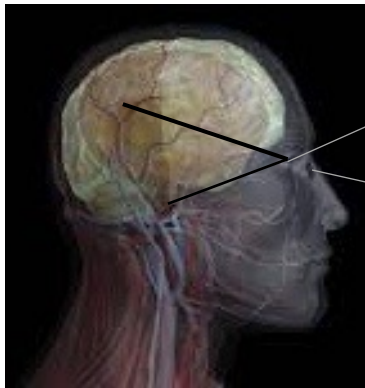
Trust vs. Mistrust (Ages 0 to 2)

These are the years where children are instinctively learning about the world, and whether it is a safe and trusting place **(Trust)**;

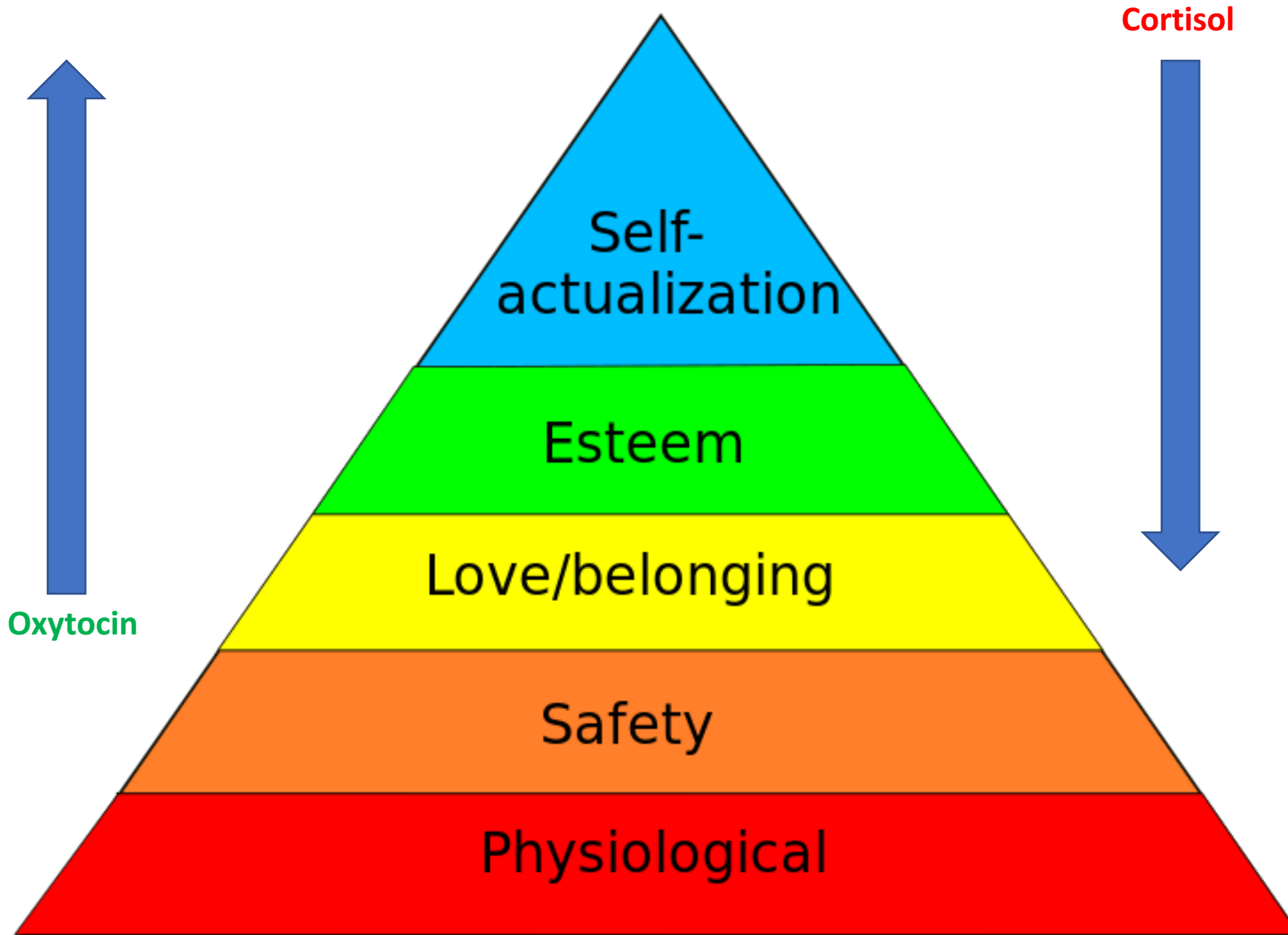
or if the world is a place where their needs do not get met **(Mistrust)**.



Relationships & Resiliency



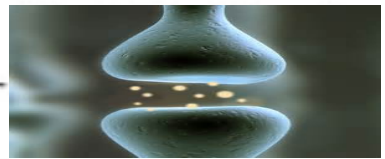
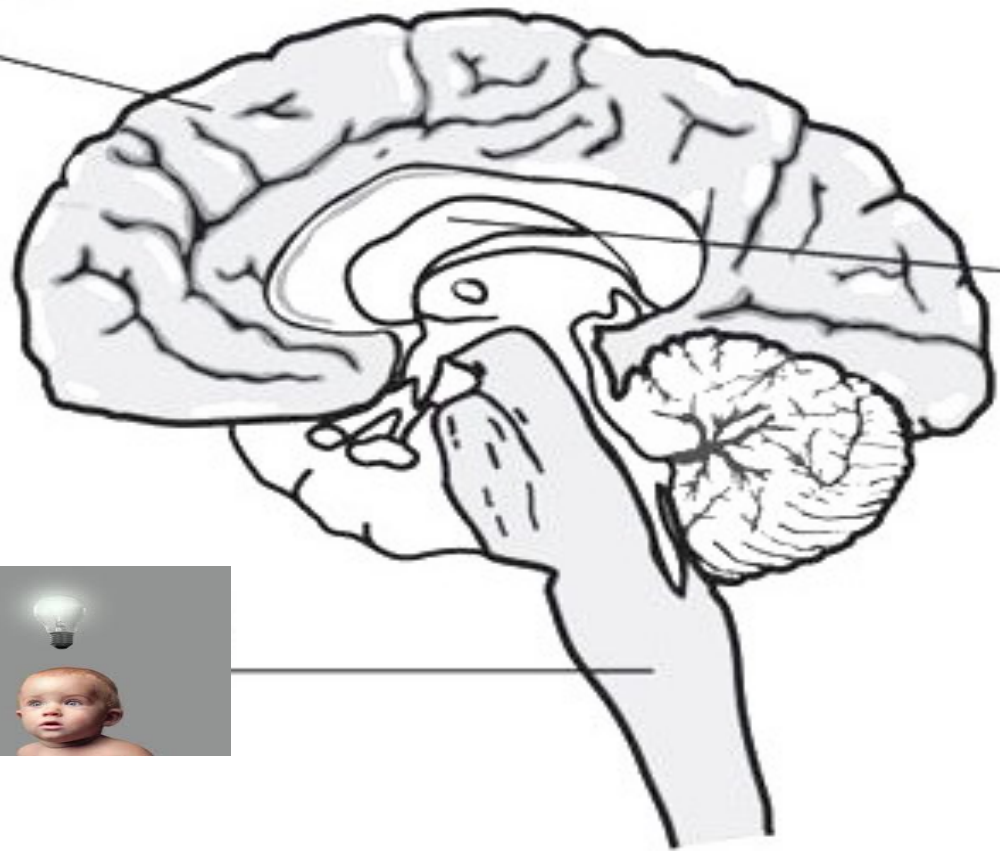
Am I safe, are my caregivers reliable, does someone love me?



Emotional Brain to Thinking Brain

Neocortex
Higher-order thinking

Trillions of synapses strengthened and fused by experiences



Identity vs. Role Confusion Ages (11 – 18)

- Big jump in brain growth, similar to the one that occurs in the first year of life.
- Teens are most vulnerable during this time as they figure out who they are and who they will become.
 - **(Teenage Angst)**
 - **(The Terrible Twos / Part II)**



Our own experience in the world!



Trust vs. Mistrust



Consistency vs. Inconsistency

David Lewis 2017

Adverse Childhood Experiences

Growing up (prior to age 18) in household with:

Abuse

- Recurrent physical abuse
- Recurrent emotional abuse
- Sexual abuse

Neglect

- Emotional or Physical neglect



Adverse Childhood Experience Study

Largest Study of its Kind

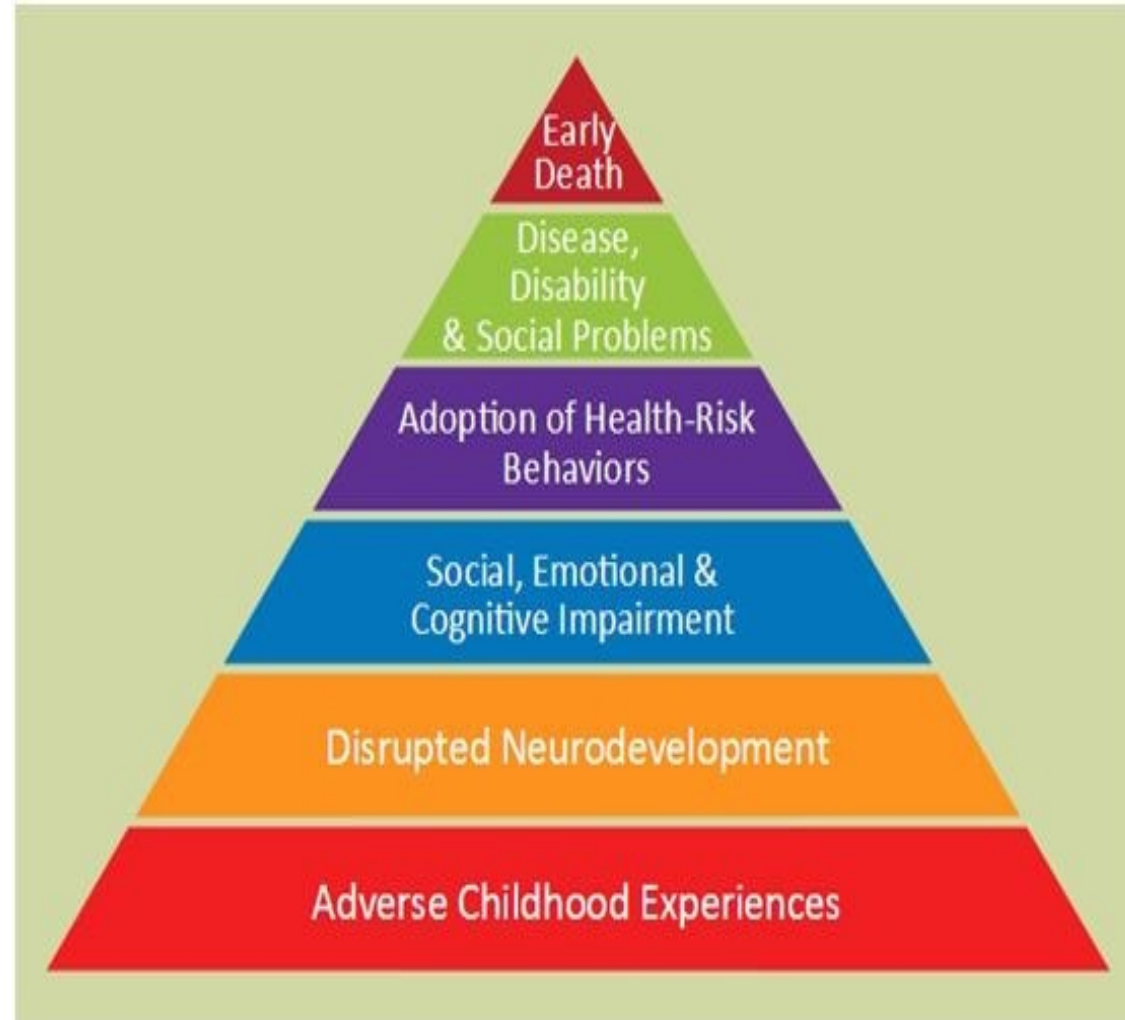
Over 17,000 participants

Both Retrospective and
Prospective

Over 100 Peer-Reviewed
Journal Articles

Shifting the Paradigm

Helps Us Understand
Drivers of Population
Health and Wellbeing



10 Ace Categories Measured

1). Physical Abuse

2). Sexual Abuse

3). Verbal/Emotional Abuse

4). Physical Neglect

5). Emotional Neglect

6). Depressed or mentally ill family member

7). Caregiver in prison or incarcerated

8). Caregiver addicted to alcohol or other substance

9). Witnessing abuse in the home

10). Loss of a parent

Lifelong Impacts



Stress
Ages
1 - 3



Abuse
Ages
4 - 12



Abuse
Ages
13 - 18

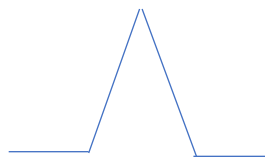


Symptoms
Ages
20 - 25

Traumas

Simple Trauma

- One time victim of a crime
- Car Accident
- House fire
- Earthquake
- Physical Injury



Biological Response

Complex Trauma

- Ongoing physical abuse
- Emotional Neglect
- Sexual Abuse
- Domestic Violence
- Familial substance abuse
- Placement Disruptions



What does it mean to be trauma informed?

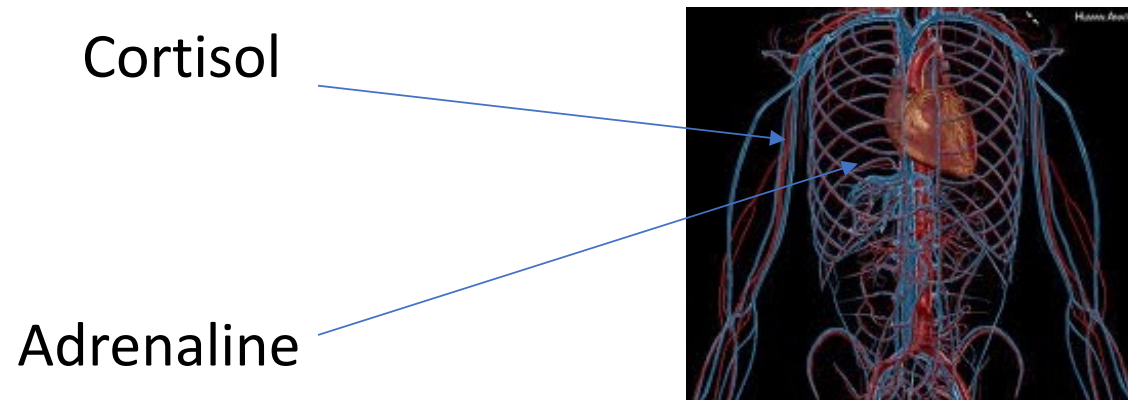
- How an organization or community thinks about, and responds to people impacted by trauma
- The whole community understands the prevalence and impact of trauma and ACE's.

A trauma-informed approach asks:

“What happened to you?” instead of **“What’s wrong with you?”**

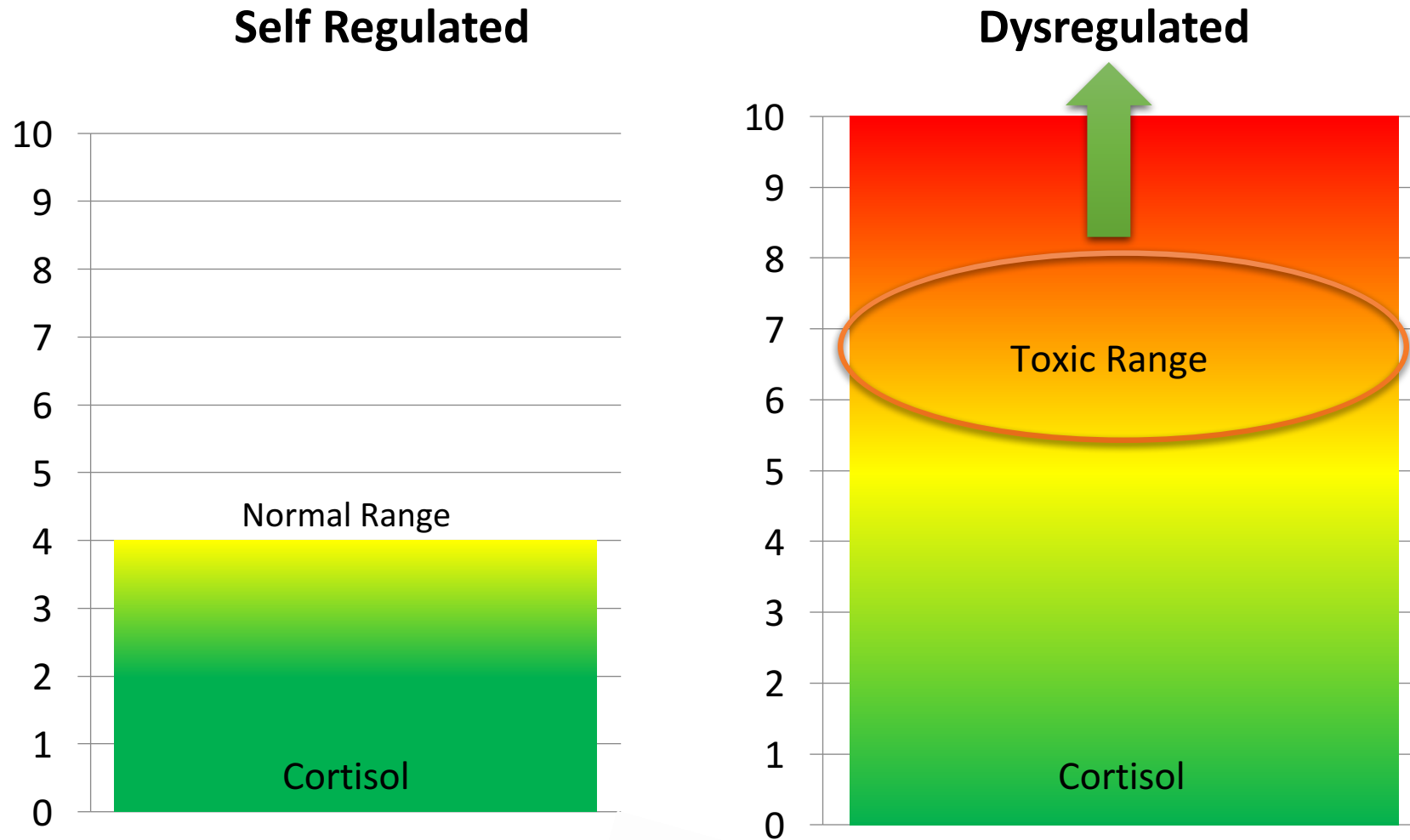
Toxic Stress

- Stress is the body's normal response to challenging events or environments. Positive stress is part of growing up.
 - Stress Increases amount of stress hormones in the body,
 - Stress hormones return to normal levels quickly. (20 minutes)
- Too much stress = toxic stress = occurs when a child is overloaded.



Ready to respond

Good Stress vs. Toxic Stress



Self Regulated

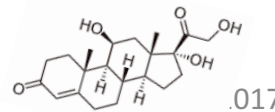
Dysregulated

Normal Range

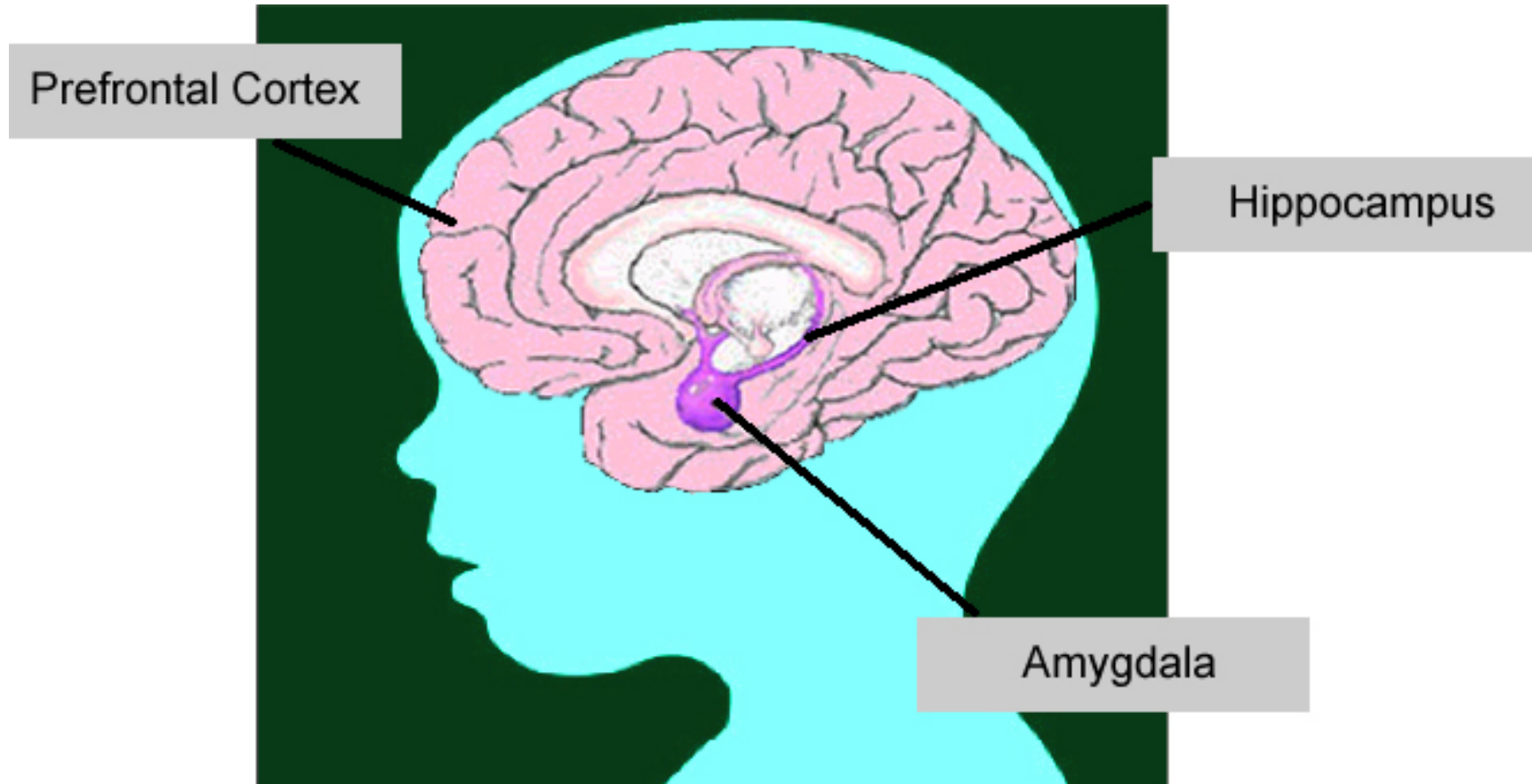
Toxic Range

Cortisol

Cortisol



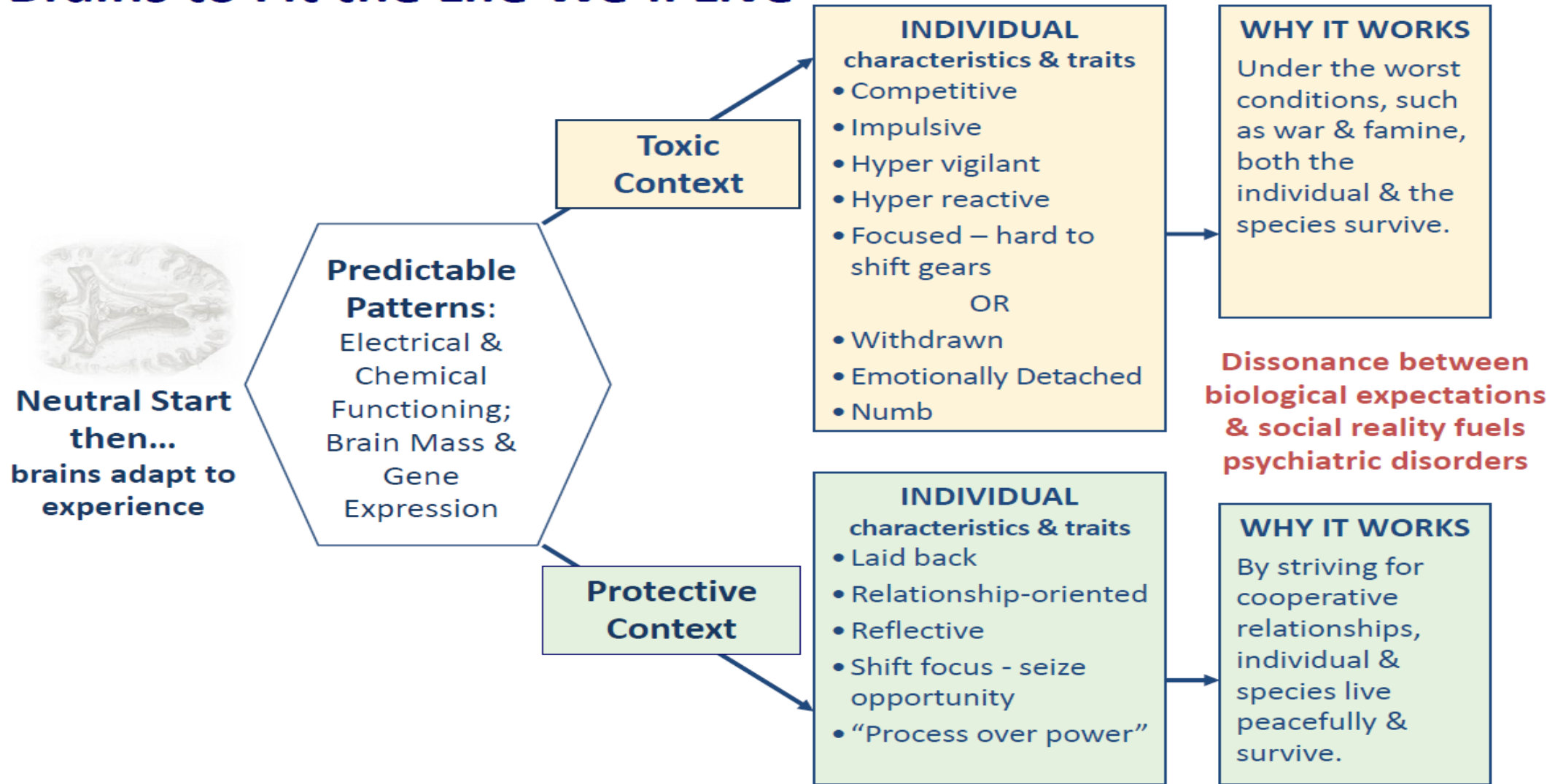
Unconscious Physiological Response



Causes of Toxic Stress

- **Generations of Inadequate parenting**
- **Transience / Poverty**
- **Learning Disabilities**
- **Homelessness**
- **Unemployment in family**
- **Poor Nutrition/Hunger**
- **Lack of healthcare**
- **Chronic medical conditions**
- **Witness to a death**
- **Anti Social Peer Groups**
- **Experience of Racism**
- **Ongoing Worry and Anxiety**
- **Emotional Abuse**
- **History of suicide in family**
- **Mental Health of family member**
- **Teen Pregnancy**
- **Multiple changes in caregivers**
- **Loss of parent contact for any reason**
- **Birth defects (FAS)**
- **Imprisonment of Family Member**

Brains to Fit the Life We'll Live



Diagnostic Criteria

ADHD / ADD

- Impulsive
- Trouble staying focused
- Easily distracted
- Difficulty with memory
- Difficulty following instructions
- Trouble planning ahead and finishing projects

Complex Trauma/ Anxiety

- Impulsive
- Difficulty focusing
- Anxious and fearful
- Memory problems
- Poor Skill Development
- Act out in school situations
- Act withdrawn
- Develop learning Disabilities

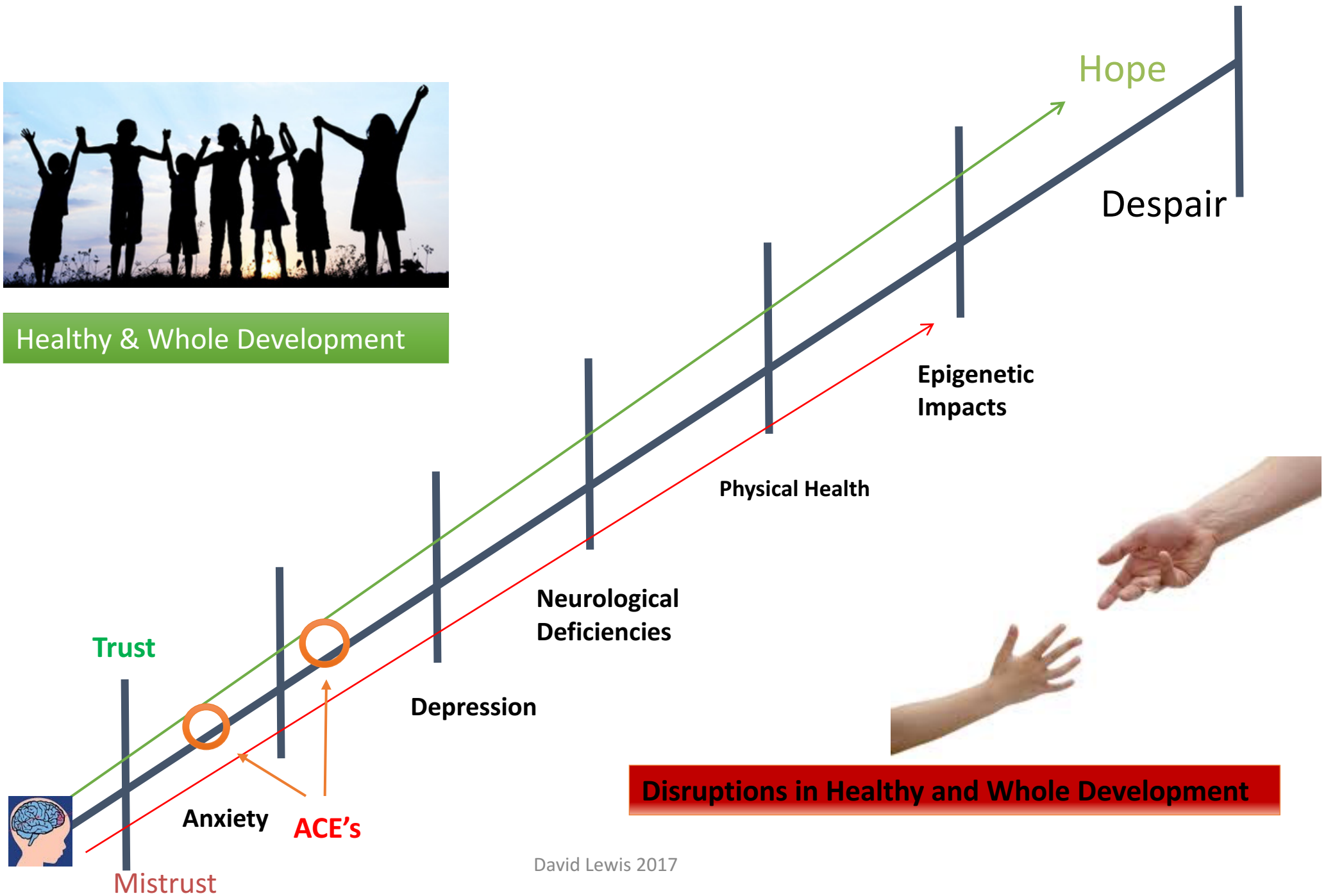
Counterbalance To Trauma

Resilience: positive adaptation within the context of significant adversity.





Healthy & Whole Development



Disruptions in Healthy and Whole Development

Resilience

Instead of children having beliefs of why they can't, they need messages that inform them that they can.

This can help them identify who they are and what they can do.



ARC Model – the 3 most important factors for all children.



Attachment- Strong parent child relationship or relationship with another caring adult.

Self Regulation- Ability to manage emotions and behaviors in healthy ways.



Cognitive skills/Competencies

- Good cognitive skills and strengths in other areas
- Small successes lead to resilience

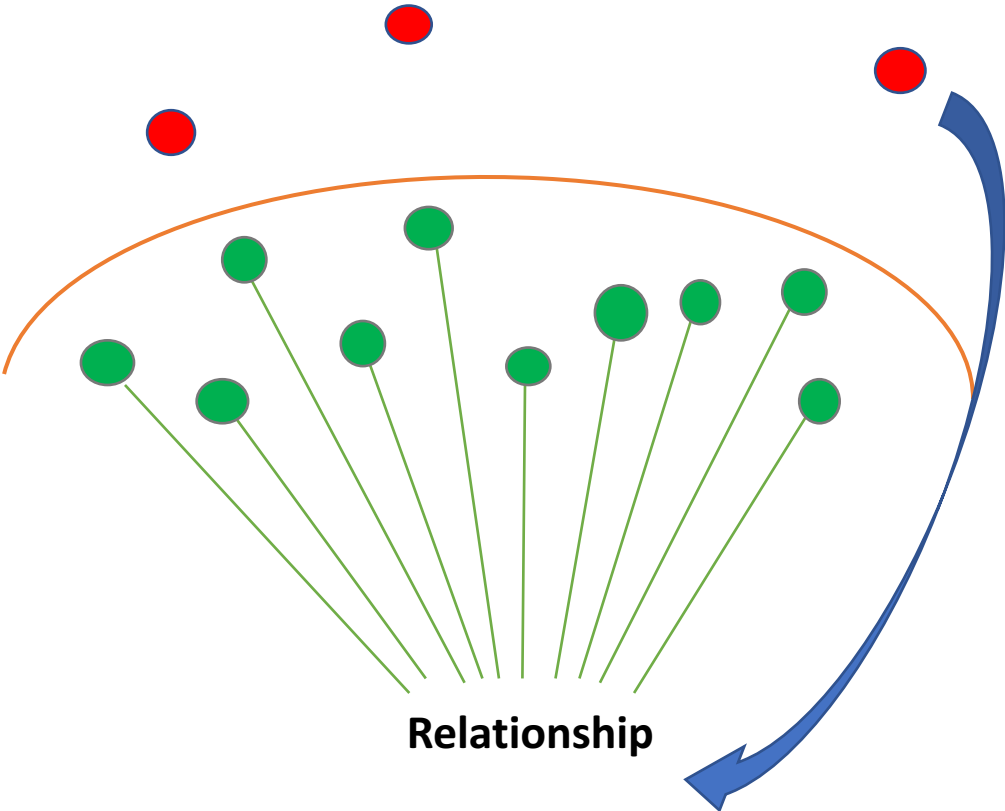


High Expectations with Support

- With clear and set expectations the child/student has a goal to aim for that is predictable.
 - This provides you an opportunity to name a success for a child
 - Provides an opportunity for them to feel successful (**esteem building**)
- When the child meets the expectation, they develop a positive sense of accomplishment and positive sense of self.
- Without High Expectations, we remove the opportunity for an increase in esteem, and/or the experiencing of an authentic success
- Children develop independent skills
- Giving children support “a boost” is appropriate.
- Too much support does not allow growth.



Relationships / High Expectations



Students = ● ●

Relationship, Consistency, Predictability

School-based program provides a beacon of light for struggling adolescent

That first day at a new school is difficult for anyone, especially if you are a problem starting classes weeks after everyone else. Every guideline before a major, every classroom an uninviting cavern. The routines and pace of life are well-different. And, importantly, you don't know anyone. Finding in and the tentative process of making new friends can be a most encouraging experience.

Just as Juliette Martinez, a sweet, soft-spoken 7th grader with a chronic lack. Then a 12-year-old transferring from a school in Auburn to Seattle's And Meador Middle School in October 2011. Juliette admits that the experience was overwhelming. With more than 300 students and faculty, it was understandable.

"I was new here to Seattle and no one understood me," she says. "I was feeling a little shy."

But Katie Pearl, assistant principal at the school, trusted her instincts and felt there was more going on than simple sheepishness. She believed, in fact, that despite first day jitters, Juliette was struggling with possibly greater challenges, something turbulent beneath the surface.

"I have learned a lot working with Sound Mental Health about 'red flags,'" she notes, in reference to her first meeting with Juliette. "The teacher about warning signs and what to look for regarding problem areas."

Over the past six years, Meador Middle School has worked with Sound Mental Health (SMH) through a school-based mental health program funded by the generous support of the Hamilton Family Foundation to bring care to the storm of adolescent life, helping students just like Juliette.

Therapeutic school program embeds an SMH care coordinator on site at each school. The program, a prevention-focused collaboration between SMH, the Seattle Public Schools, Seattle Children's Hospital/University of Washington and

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In conclusion



- Understanding child development is beneficial for anyone interacting and working with Children.
- Positive, trusting, and consistent relationships are vital
- The effects of ACE's & TOXIC stress are physiologically damaging.
- The effects of ACE's and TOXIC stress are reversible (the earlier, the better).
- Average school day hours **vs.** home awake hours provide a window for caring adults to impact and reverse the effect of ACE's.

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