Violence Prevention & Response: Promoting Wellness across the Lifespan

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Workshop Objectives:

• 1.) Outline the importance of provider services across the lifespan in developing violence prevention, intervention & response.

• 2.) Fully describe the rationale, approach and metrics used by CHA to coordinate and expand violence prevention & response efforts.

• 3.) Prepare participants to evaluate services from a long-term wellness perspective
Exposure
“Violence has many causes, including frustration, exposure to violent media, violence in the home or neighborhood and a tendency to see other people’s actions as hostile even when they're not. Certain situations also increase the risk of aggression, such as drinking, insults and other provocations and environmental factors like heat and overcrowding.”
Exposure

- Individual
- Family
- Community
  - Geographical (neighborhood, country, etc.)
- Virtually
  - Shared identity, experience
- Organizationally
  - Place of work, learning, worship
Exposure

- Direct
- Witness

- Report: learn of exposure of a close loved one

- Exposure to aversive details
  - Repeated or extreme
    - Does not apply to exposure through electronic media, television, movies, or pictures - unless work related.
Violent Events vs. Trauma

**Violence**
- Domestic violence
- Child abuse
- Elder abuse
- Abuse of a disabled adult
- Sexual violence
- War
- Bullying
- Community violence
- Human trafficking
- Suicide
- Incarceration

**Trauma**
- Attachment
  - Boundaries
- Intrusion
  - Dissociation
  - Distress
  - Recurrent memories/dreams
- Arousal
  - Physiological
  - Psychological
- Avoidance
  - Internal
  - External
- Negative alterations in cognitions & mood
...exposure to an event...

...and the response...

Support, understanding, EMPATHY

OR

Avoidance, overlooking of the impact, misunderstanding
“...individuals can be re-traumatized by the very individuals whose intent is to be helpful.”

(SAMHSA, 2012)
“Trauma responses are normal reactions to abnormal events.”
Framework for Understanding

• ACEs
  • Neurological Development
  • Risk Factors

• CHA
  • Rationale
  • Approach
  • Metrics

• Evaluation
Adverse Childhood Experiences (ACEs)

- Adverse Childhood Experiences (ACE)
  - “traumatic experiences that can have profound impact on a child’s development and a lasting effect on their health throughout their lifetime. There are a total of ten recognized ACEs, falling into three categories- abuse, neglect, and household dysfunction.”
ACE Questions

- Prior to your 18th birthday:
  - 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?
    If Yes, enter 1

- 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?
  If Yes, enter 1

- 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?
  If Yes, enter 1

- 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? 
  If Yes, enter 1

- Did you often or very 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?
  If Yes, enter 1

- Was a biological parent ever lost to you through divorce, abandonment, or other reason?
  If Yes, enter 1

- 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?
  If Yes, enter 1

- Did you live with anyone who was a problem drinker or alcoholic, or who used street drugs?
  If Yes, enter 1

- Was a household member depressed or mentally ill, or did a household member attempt suicide?
  If Yes, enter 1

- Did a household member go to prison?
  If Yes, enter 1

- Now add up your “Yes” answers: __ This is your ACE Score
IMPACT

Mechanisms by Which Adverse Childhood Experiences Influence Health and Well-being Throughout the Lifespan
“Bottom up” Development
Brain Development

- https://youtu.be/VNNsN9lJkws

- Adolescent brain development continues well into a person’s 20’s.
  - (Johnson, Blum, Giedd, 2010)
Let’s talk about youth…

- Prevention starts at – 9 months.

- FY 2014: There were 26,785 indicated child abuse victims in Illinois (DCFS).
  - As much as 70% of child abuse goes unreported.

- Child abuse or child sexual abuse are individual risk factors for gang membership (Howell and Egley, 2005)
  - Family child abuse and neglect, parental drug use, criminal behavior and low income are risk factors for gang membership (Fleisher 2003)

- “Being a victim of physical or psychological abuse (consistently one of the strongest predictors of perpetration” of DV), (CDC)

- Parental history of child maltreatment, substance abuse, mental health issues, family dissolution and violence, community violence and concentrated neighborhood disadvantage are risk factors for perpetration of child abuse (CDC)
Cycle of Violence

• “Youth aged 15-24 make up only 15% of the population, but account for more than 40% of its homicide victims.” (Mayor’s Office of Public Safety, 2014)

• “Up to 45% of victims who are shot or stabbed are reinjured during the 5 years following the first injury and 20% are dead within those five years.” (Mayor’s Office of Public Safety, 2014)

• “Children who have an ACE score of 3 are more than twice as likely to be suspended from school, six times more likely to experiences behavioral problems, five times more likely to have severe attendance issues.” (Washington State University)

• “Once a youth is in the juvenile justice system, there is an 80% chance he or she will recidivate and return to custody.” (Mayor’s Office of Public Safety, 2014)
<table>
<thead>
<tr>
<th>Area of function or dysfunction studied</th>
<th>Demonstrated neurobiological defects from early trauma</th>
<th>ACE study finding</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anxiety, panic, depressed affect, hallucinations, and substance abuse</td>
<td>Repeated stress &amp; childhood trauma – hippocampus, amygdala &amp; medial prefrontal cortex atrophy and dysfunction that mediate anxiety &amp; mood problems</td>
<td>Unexplained panic, depression, anxiety, hallucinations &amp; alcohol &amp; other drug problems</td>
</tr>
<tr>
<td>Smoking alcoholism, illicit drug use, injected drug use</td>
<td>Repeated stress &amp; childhood trauma – increased locus coeruleus &amp; norepinephrine activity, decreased by heroin &amp; alcohol</td>
<td>Increased smoking, alcohol and other drug use</td>
</tr>
<tr>
<td>Early intercourse, promiscuity, sexual dissatisfaction, perpetration of intimate partner violence</td>
<td>Repeated stress &amp; childhood trauma – amygdala defects; role in sexual &amp; aggressive behavior and deficits in oxytocin with impaired pair bonding</td>
<td>Risky sexual behavior, anger control, risk for aggression against intimate partners</td>
</tr>
<tr>
<td>Memory storage &amp; retrieval</td>
<td>Hippocampus role in memory storage and retrieval; hippocampal &amp; amygdala size reduction in childhood trauma; deficits in memory function</td>
<td>Impaired memory of childhood and number age periods affected increases as the ACE score increases</td>
</tr>
<tr>
<td>Body weight and obesity</td>
<td>Repeated stress &amp; distress, via glucocorticoid pathways, leads to increased intra-abdominal &amp; other fat deposits</td>
<td>Increased obesity</td>
</tr>
<tr>
<td>Sleep, multiple somatic symptoms, high perceived stress</td>
<td>Repeated stress &amp; distress, via several pathways, leads to increase in other physical problems</td>
<td>Increased somatic symptoms and disorders, including sleep problems</td>
</tr>
<tr>
<td>Co-morbidity/Trauma spectrum disorders</td>
<td>Multiple brain and nervous system structure and function defects, including monoamine neurotransmitter systems</td>
<td>The graded relationship of the ACE score to psychiatric and physical symptoms or disorders, including multiple co-occurring problems (comorbidity)</td>
</tr>
</tbody>
</table>
"Research shows that, even under stressful conditions, supportive, responsive relationships with caring adults as early in life as possible can prevent or reverse the damaging effects of toxic stress."

(ACE IL Response Collaborative)
In other words...

- If you are in the business of providing services to human beings, your outcomes are impacted by exposure to violence & other adverse experiences.

***The same applies to staff members.***
Chicago Housing Authority

- A New Lens: Integration of Trauma-Informed Principles
  - Resident Services

- Engagement in City-wide Initiatives

- Promoting Health & Wellness across the Lifespan

- Prevention & Response
  - Intergenerational Transmission
  - Supportive Services
  - Response to Critical Incidents
Not everyone can be an expert...but not everyone needs to be.

• “A trauma-informed approach to services acknowledges the prevalence and impact of trauma and attempts to create a sense of safety for all participants.

  • Minimizing perceived threats
  • Training staff to be welcoming, non-judgmental
  • Modifying physical environment”

SAMHSA, 2013
Trauma-Informed Principles

- Safety
- Trustworthiness and Transparency
- Peer Support
- Collaboration and Mutuality
- Empowerment, Voice & Choice
- Cultural, Historical, & Gender Issues

(National Center for Trauma-Informed Care, SAMSHA)
Trauma-Informed Principles

- Supported by:
  - Policy
  - Program
  - Procedures
  - Practices

(Proactive? Or Reactive?)
City-wide Initiatives

- Mayor’s Commission for a Safer Chicago
  - Health & Healing *
  - Safe Spaces & Activities *
  - Creating Restorative School Communities *
  - Youth Employment *
  - Safety & Justice *

- Healthy Chicago 2.0
  - Behavioral Health
  - Community Development

- ACE Illinois Response Collaborative
FamilyWorks (CHA’s system-wide case coordination program)

Summer Programming
  - Summer Youth Employment Program (Work experience for youth age 16-24)
  - Learn & Earn (Academic enhancement & career exploration for youth age 13-15)

Victim Assistance Program (CHA’s response to residents’ experience of violence)

Linkage to Additional Supports
  - Assistant Director, Clinical Services
  - FamilyWorks, Clinical Services
Wellness Across the Lifespan

*** Examples of CHA programs across the lifespan.
Evaluation

- Evidence-based practices
- Short-term metrics
  - Quarterly Performance
  - Annual Performance
- Long-term measurements
  - Impact Areas
Exploring Broad Implementation

• Impact Areas
  • Increase Stability & Quality of Life
  • Develop Academic Achievement
  • Increase Earning Power
  • Increase Economic Independence

• Customer Service Standards

• Metrics

• Monitoring Trends
  • Training
Prevention & Response

- Intergenerational Transmission
- Supportive Services
- Response to Critical Incidents
  - Emergency Response Plans
  - Communication
  - Continuity
COMMUNITY RISK FACTORS

- Diminished economic opportunities
- High concentrations of poor residents
- High level of transiency
- High level of family disruption
- Low levels of community participation
- Socially disorganized neighborhoods
Inequity

- Geographical area
  - Access to resources
    - Food
    - Medical
    - Schools
    - Transportation
    - Economic Opportunity

- Geographical location
  - Disparities
    - Financial
    - Racial
    - Gender
To prevent violence, we MUST reduce risk factors and eliminate inequity.
CHA Works to Address Inequity...

- Meet basic needs & support the community
  - Community Resources
  - Safe, Stable Housing
  - Jobs
  - Healthcare
  - Economic Opportunity
  - Community Safety
  - Educational Opportunity
Promoting Staff Wellness

- Promoting Physical Activity
  - Gym, incentives
  - Bike lock-up
  - Incentives through Insurance

- Promoting Appropriate Training Opportunities
  - Brown Bag Lunches
  - Contracted Agencies
  - Distribution of Information

- Promoting Best Practices
Self-Care

- Prevention is the best approach.

- Once you *need* it – it is not just about wellness, it is about recovery.
Self-care

- Boundaries
- Be mindful of how you relax.
- Know your (own) triggers… (& ACEs).
- Put yourself first.
- If it doesn't make you feel stronger, better, healthier… it’s not self-care.
- Allow it to look different on different days.
"Self-care is not selfish.

You cannot serve from an empty vessel."

Eleanor Brown
Thank you!

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References

• Centers for Disease Control and Prevention (CDC). Adverse Childhood Experiences (ACE) Study. Available at http://www.cdc.gov/ace/


References


References


References


Online Resources


• National Forum on Youth Violence Prevention
  • http://youth.gov/youth-topics/preventing-youth-violence/about-national-forum


• Adverse Childhood Experiences
  • http://acestoohigh.com/
  • http://www.coleva.net/COLEVA-Main-2-2-2011-v2.html

• Healthy Chicago 2.0
Oneline Resources

• CDC
  • http://www.cdc.gov/ViolencePrevention/intimatepartnerviolence/riskprotectivefactors.html
  • http://www.cdc.gov/violenceprevention/childmaltreatment/riskprotectivefactors.html
  • http://www.cdc.gov/violenceprevention/childmaltreatment/consequences.html

• DCFS

• Domestic Violence Data
  • http://www.domesticviolenceresearch.org/pages/12_page_findings.htm

• National Center for Trauma-Informed Care (NCTIC)
  • http://www.samhsa.gov/nctic
Online Resources

• Youth Online (Youth Risk Behavior Surveillance System – YRBS)
  http://www.nccd.cdc.gov/youthonline

• City of Chicago Data Portal
  https://data.cityofchicago.org

• City-Data.com. Crime rate in Chicago, IL. Retrieved on April 18, 2015 at: