Trauma, Adverse Childhood Experiences, & Their Impacts on the Health and Wellbeing of American Indian and Alaska Native People



Introductions

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Introductions

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Objectives

- Overview of trauma
- ▶ Trauma Response
- Adverse Childhood Experiences
- ► Impacts of ACEs
- ► Indigenous Resilience
- ▶ 49 Days of Ceremony Intervention





An event, or series of events, that causes moderate to severe stress reactions.

Trauma

- ► Single event
- Multiple events
- Often characterized by a sense of extreme fear, helplessness, threat to our safety



Types of trauma

- Acute trauma
- Repetitive trauma
- Complex trauma
- Developmental trauma
- Vicarious trauma
- Cultural, Historical and/or Intergenerational trauma

Why is trauma so important?

- AI/AN children are at 2.5 times greater risk of experiencing trauma
- This trauma can have impacts on our lifelong health



Landmark Study

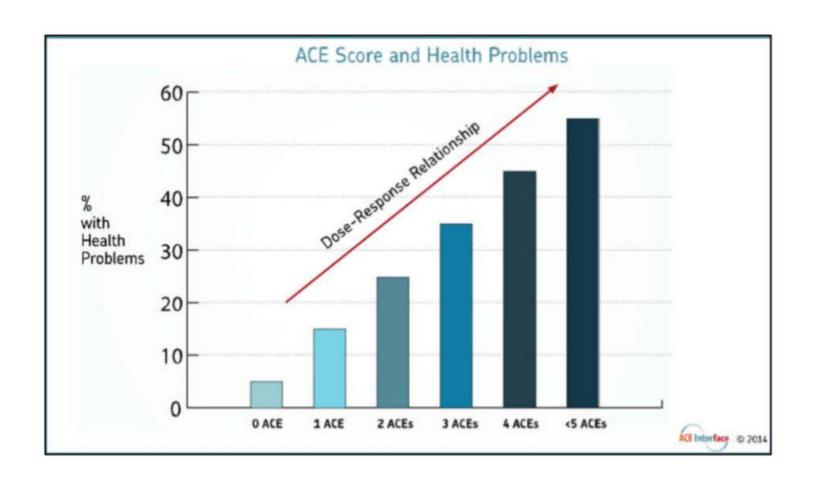
The Division of Violence Prevention at CDC, in partnership with Kaiser Permanente, conducted a study from 1995-97 with 17,000+ participants.

Adverse Childhood Experiences (ACEs) are common:

28% reported physical abuse

21% reported sexual abuse

Dose-Response Relationship with Health Problems



Adverse Childhood Experiences (ACEs)

- ACEs are potentially traumatic events that occur in childhood (0-17 yo) For example:
 - ► Experience violence or abuse
 - Witnessing violence in the home or community
 - Having a family member attempt/die by suicide

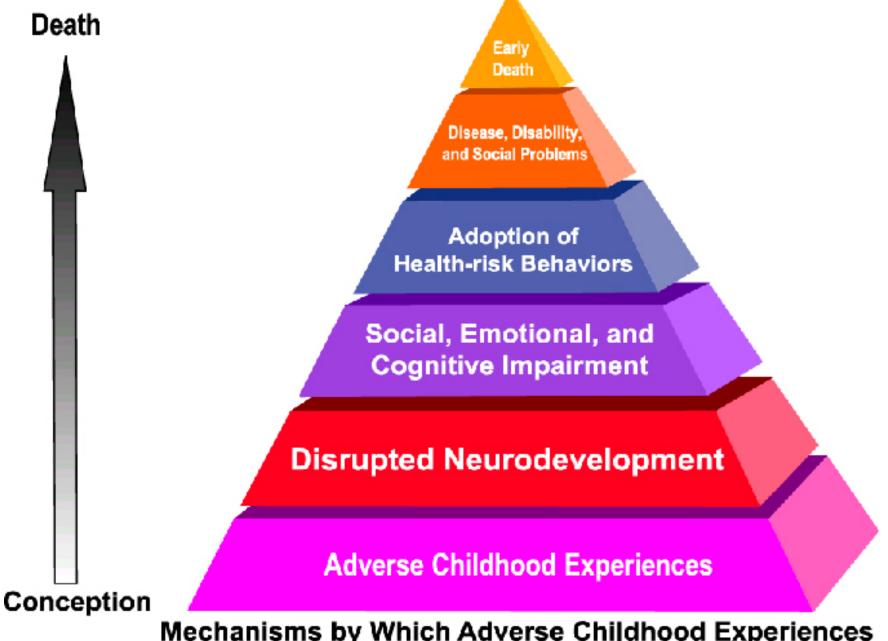
Adverse Childhood Experiences (ACEs)

- Also include child's environment that impacts their sense of safety, stability, and bonding:
 - Substance misuse
 - Mental health problems
 - Instability due to parental separation

Adverse Childhood Experiences (ACEs)

Linked to chronic health problems, mental illness, and substance misuse in adulthood





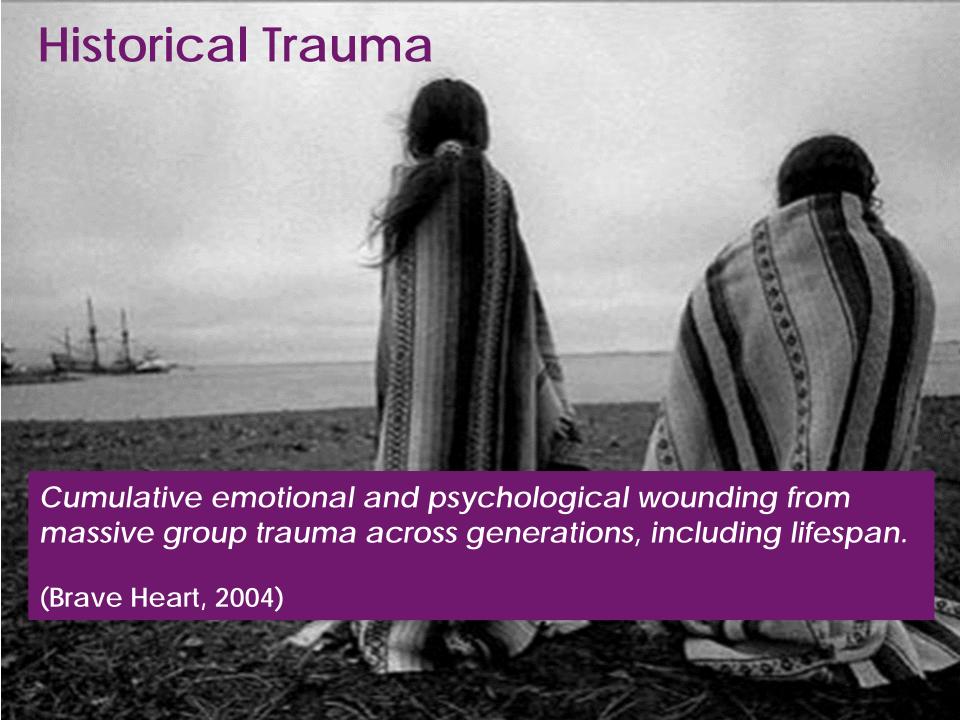
Mechanisms by Which Adverse Childhood Experiences Influence Health and Well-being Throughout the Lifespan

ACEs and Native People

- On average Native people have more ACEs than the general population
- 2011-2012 National Survey of Children's Health, Native kids more likely to experience:
 - ►2+ ACEs (40.3% vs 21.0%)
 - ► 3+ ACEs (26.8% vs 11.5%)
 - ► 4+ ACEs (16.8% vs 6.2%)

Impact of ACEs on Native people

Al/AN children are more likely to experience multiple adverse events as they develop, and Al/AN adults are at higher risk than the general population for developing chronic health problems, including cancer, diabetes, heart disease, depression, anxiety, and substance use disorder.

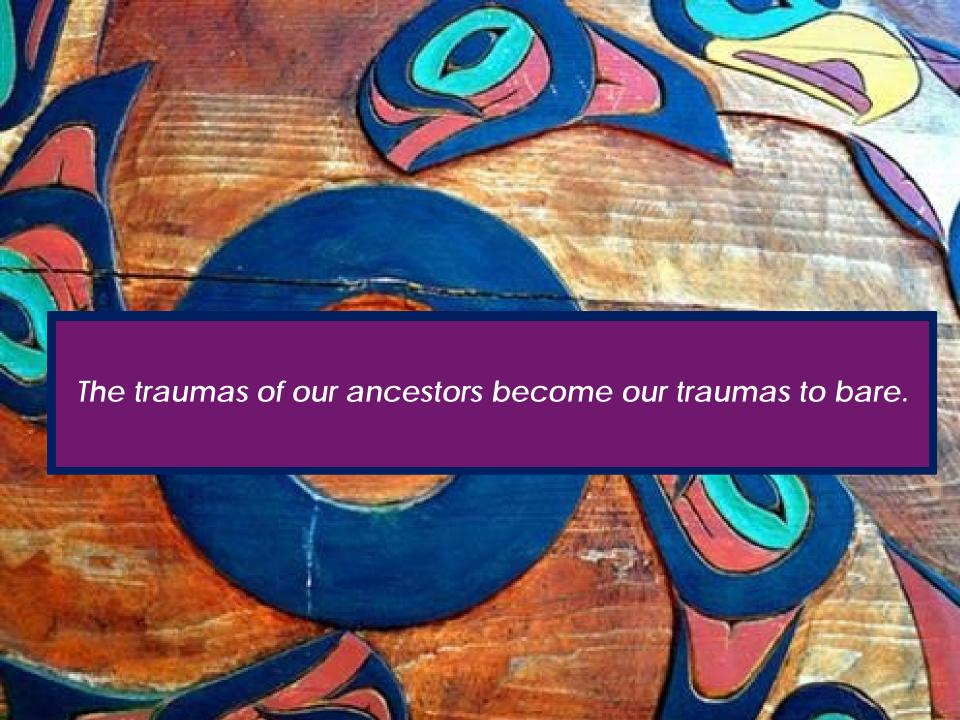


Intergenerational Trauma

- Occurs when responses to trauma are passed down from one generation to the next
- Next generation can display the physical and psychological symptoms of the prior generation

Epigenetics: Our Bodies Remember

- ► Chronic trauma mutates genes
- Mutation results in overactivation of stressresponse system
- Mutation passed down across generations



Our bodies are designed to remember danger

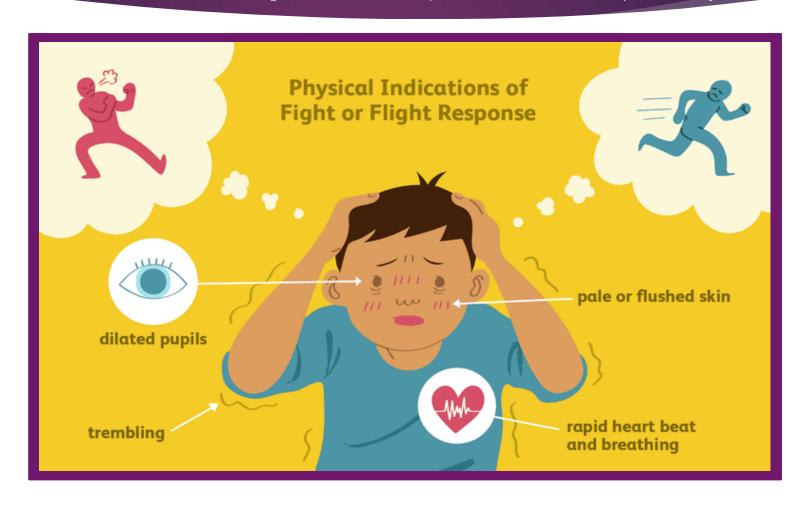


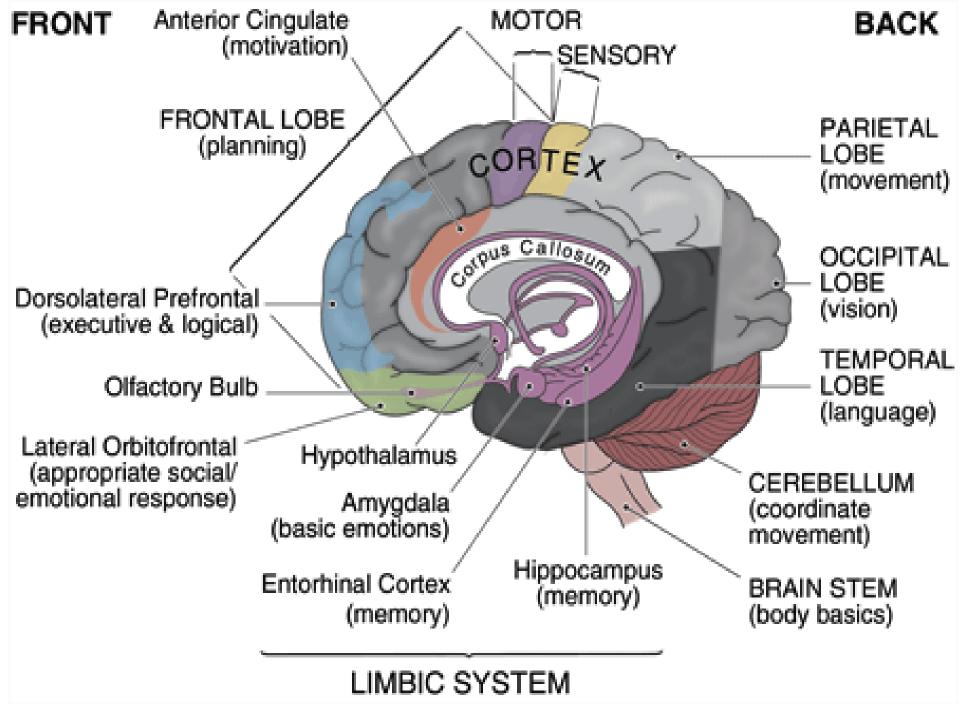
Each of us begins to maintain a database of threats in the environment.

ANCIENT SURVIVAL RESPONSES TO LIFE THREATENING CIRCUMSTANCES

 Bracha, H. (2004). Freeze, flight, fight, fright, faint: Adaptationist perspectives on the acute stress response system. CNS Spectrums, 9(9), 679-685.

Stanton, S. (2016), "Intuition: A Silver Lining for Clinicians with Complex Trauma". Dissertations. https://surface.syr.edu/etd/615





Initial Reactions to Trauma

- exhaustion,
- confusion
- sadness
- anxiety
- agitation
- numbness
- dissociation
- confusion
- physical arousal
- and blunted affect.

Most **responses** are normal in that they affect most survivors and are socially acceptable, psychologically effective, and self-limited.

Center for Substance Abuse Treatment, issuing body, publisher. (2014). *Trauma-Informed care in behavioral health services:* A treatment improvement protocol. (Treatment improvement protocol (TIP) series; 57). Rockville, MD: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Substance Abuse Treatment.

Cognitions and Trauma

- Cognitive errors
- Excessive or inappropriate guilt
- Idealization
- Trauma-induced hallucinations or delusions
- Intrusive thoughts and memories



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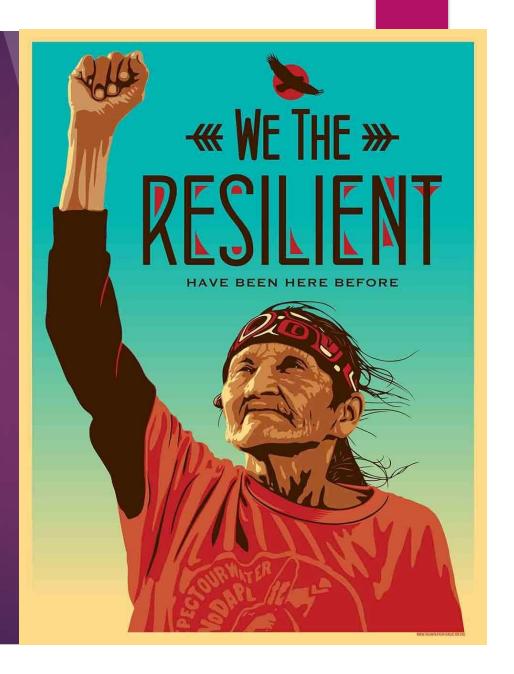


Protective Factors for AI/AN People

- Participating in cultural traditions
- Practicing traditional knowledge about health
- Connecting to community
- ► Interdependence



IF TRAUMA IMPACTS THE EPIGENETIC TRANSFER OF TRAUMA, CULTURE AND CONNECTION CAN MITIGATE THESE AFFECTS. IF WE WANT TO PREVENT **HEALTH DISPARITIES WE NEED TO FOCUS MORE** ON STRESS, TRAUMA, AND POVERTY WHILE **PROVIDING INTERVENTION OPTIONS** THAT ARE GROUNDED **ON TRADITIONAL INDIGENOUS** KNOWLEDGE.



Do not despair!!!

Mate, G. (2009)

- Our brains are resilient
- Some circuits develop throughout our lives
- May do so even in the case of persistent and chronic SUD
- Be patient with science, we are continuing to learn about this complex issue and how to intervene



Using Info About Biology and Trauma To Your Advantage

- Frame reexperiencing the event(s), hyperarousal, sleep disturbances, and other physical symptoms as physiological reactions to extreme stress.
- Communicate that treatment and other wellness activities can improve both psychological and physiological symptoms (e.g., therapy, meditation, exercise, yoga).
- You may need to refer certain clients to a psychiatrist who can evaluate them and, if warranted, prescribe psycho-tropic medication to address severe symptoms.

Using Info About Biology and Trauma To Your Advantage

Discuss traumatic stress symptoms and their physiological components.

Explain links between traumatic stress symptoms and substance use disorders, if appropriate.

Normalize trauma symptoms. For example, explain to clients that their symptoms are not a sign of weakness, a character flaw, being damaged, or going crazy.

What Works

- Fluent in many treatment theories and models
- Client centered/counselor driven
- Focus on strengths and protective factors
- Able to develop trusting therapeutic relationships
- Work within their area of expertise
- Culture as prevention



Resilient Responses to Trauma

- Increased bonding with family and community.
- Redefined or increased sense of purpose and meaning.
- Increased commitment to a personal mission.
- Revised priorities.
- Increased charitable giving and volunteerism.
- Connection to culture



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49 Days of Ceremony

- Community-based intervention for American Indian and Alaska Native people to mitigate the effects of early adversity
- Utilizes experiential learning
- Focus on:
 - Preparation
 - Journey
 - Reflection/prayer

49 Days of Ceremony Our Team

Inter-generational and inter-tribal group of individuals representing youth, middle age, and elders





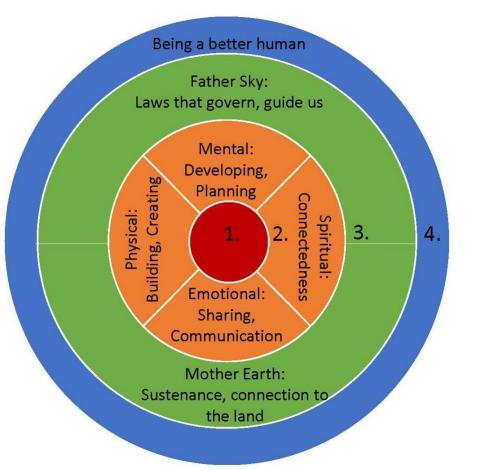
49 Days of Ceremony Draft Framework

7 Aspects of Being Human:

- **▶** Emotional
- Mental
- Spiritual
- ▶ Mother Earth
- ▶ Father Sky
- **▶** Volition



49 Days of Ceremony Draft Framework



- 1. Volition
- 2. CommUnity
- 3. Environment
- 4. Humanity

49 Days of Ceremony Our Process

- Goal: Create an experiential learning tool that heals Native peoples' trauma
- Develop lessons around 7 aspects of being a whole human that include insights from the:
 - Preparation
 - ▶ Journey
 - ▶ Reflection/prayer
- Pilot test the curriculum with 3 communities in AK and the Pacific NW (talking circles, surveys)



Suggested Resources

Adverse Childhood Experiences Study:

https://www.cdc.gov/violenceprevention/childabuseandneglect/acestudy/index.html

Mate, G. (2009). In the realm of the hungry ghosts: Close encounters with addiction. Berkeley, CA: North Atlantic Books.

Prochaska, J. O., & DiClemente, C. C. (1983). Stages and processes of self-change of smoking: Toward an integrative model of change. Journal of Consulting and Clinical Psychology, 51(3), 390-395.

Brave Heart Yellow Horse, M. (2004). The historical trauma response among Natives and its relationship to substance abuse: A Lakota illustration. In E. Nebelkopf & M. Phillips (Eds.), Healing and mental health for Native Americans: Speaking in red. (pp. 7-18). Walnut Creek: Alta Mira Press. Also in Journal of Psychoactive Drugs, 35(1), 7-13.

Contact Us

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