



# The Impact of Toxic Stress on the Young Child

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Presented by: DC Department of Behavioral Health, Prevention and Early Intervention Programs, Healthy Futures



# Learning Objectives

- To understand
  - The importance of the birth to three period of development
  - The definition of toxic stress and trauma
  - The impact of toxic stress on young children
  - The signs and symptoms of trauma for infants and toddlers
  - Steps to support teachers, caregivers, and young children who are impacted by trauma



# The Still Face Experiment

- <https://www.youtube.com/watch?v=apzXGEbZht0>



# Relationships are Central

National Scientific Council on the Developing Child, Harvard University, 2009

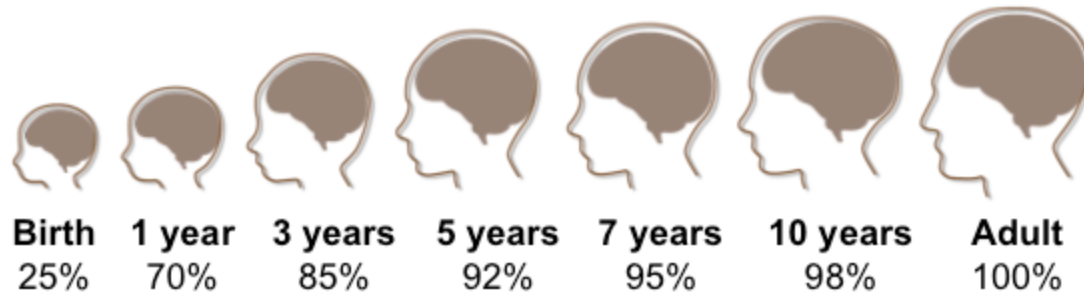
- The “active ingredients” of the environment’s influence on healthy human development
- Early experiences – building blocks for later success
- All learning occurs within the context of relationships





# Early Brain Development

From the Institute for Learning & Brain Sciences at the University of Washington



- 85% of brain development occurs during the first 3 years of life
- Experiences prepare children's brains for learning (plasticity)

# Stress

From Horen & Hunter 2014



- Stress:
  - Is a physical, mental, or emotional response to events that causes bodily or mental tension
  - Comes from a situation or a thought that makes you feel frustrated, nervous, anxious, sad, or angry
  - Can be a good thing
  - Can also be harmful





# Types of Stress

[http://developingchild.harvard.edu/key\\_concepts/toxic\\_stress\\_response/](http://developingchild.harvard.edu/key_concepts/toxic_stress_response/)



Type	Impact on Body	Example
<b>Positive</b>	Essential part of development, brief heart rate increases, mildly elevated stress hormones	Transitioning to a new caregiver, receiving immunization
<b>Tolerable</b>	Body's alert system activated, brain and body recover if time limited and buffered by relationships	Loss of a loved one, natural disaster, injury such as a car accident
<b>Toxic</b>	Frequent and prolonged exposure to adverse stress, disrupts brain development and organs, increased health risks and learning impairment	Physical and emotional abuse, chronic neglect, exposure to violence, caregiver mental illness or substance abuse, severe poverty

# Brain & Toxic Stress



Positive  
Stimulation

Negative  
Stimulation

## Stressors

- Extreme poverty
- Exposure to severe maternal depression
- Parental substance abuse
- Chronic child abuse and neglect
- Repeated exposure to violence in the community or within the family.





# Trauma Defined

From Hertel, Hull, Johnson, 2011

- The Greek word “trauma” means an injury or wound.
- Trauma is not an event but a response to an experience in which the individual’s response has been compromised (both mind and body).
- Enduring Consequences:



“Bruises Fade but the Memories Last Forever.”

# Types of Trauma

From Horen & Hunter 2014



- **Child based: chronic illness, special needs.**
- **Family based: child abuse & neglect, domestic violence, parental loss or death, mental illness, substance abuse.**
- **Community based: extreme poverty, homelessness, community violence, terrorism, war.**
- **Natural disasters: earthquakes, volcanos, hurricanes, tornados.**



# Knowing the Signs & Symptoms





# Signs and Symptoms of Trauma in Infants and Toddlers

- Eating & Sleeping disturbance
- Clingy/separation anxiety
- Irritable/difficult to soothe
- Developmental regression
- Language delay
- General fearfulness/new fears,
- Easily startled
- Difficulty engaging in social interactions through gestures, smiling, cooing
- Persistent self-soothing behaviors, for example, head banging
- Aggression (toddlers)



# Trauma in Preschoolers

From Horen & Hunter 2014



- Avoidant, anxious, clingy
- General fearfulness/new fears
- Helplessness, passive
- Restless, impulsive, hyperactive
- Physical symptoms (headache, etc.)
- Inattention, difficulty problem solving
- Irritability
- Aggressive and/ or sexualized behavior
- Sadness
- Developmental regression
- Poor peer relationships and social problems (controlling/over permissive)





# Children in DC

2012 Data from Children's Defense Fund, 2014



- **Child Population**

- Young children under age 6 = 40,254

- **Poverty**

- 1 in 4 (26.5 percent or 28,623) of DC's young children considered poor

- 3 in 5 (60%) of these poor children were extremely poor

- **Special Risks**

- 2,141 children were abused or neglected (19.6 out of 1,000 children)

- 1,550 District of Columbia children in foster care.



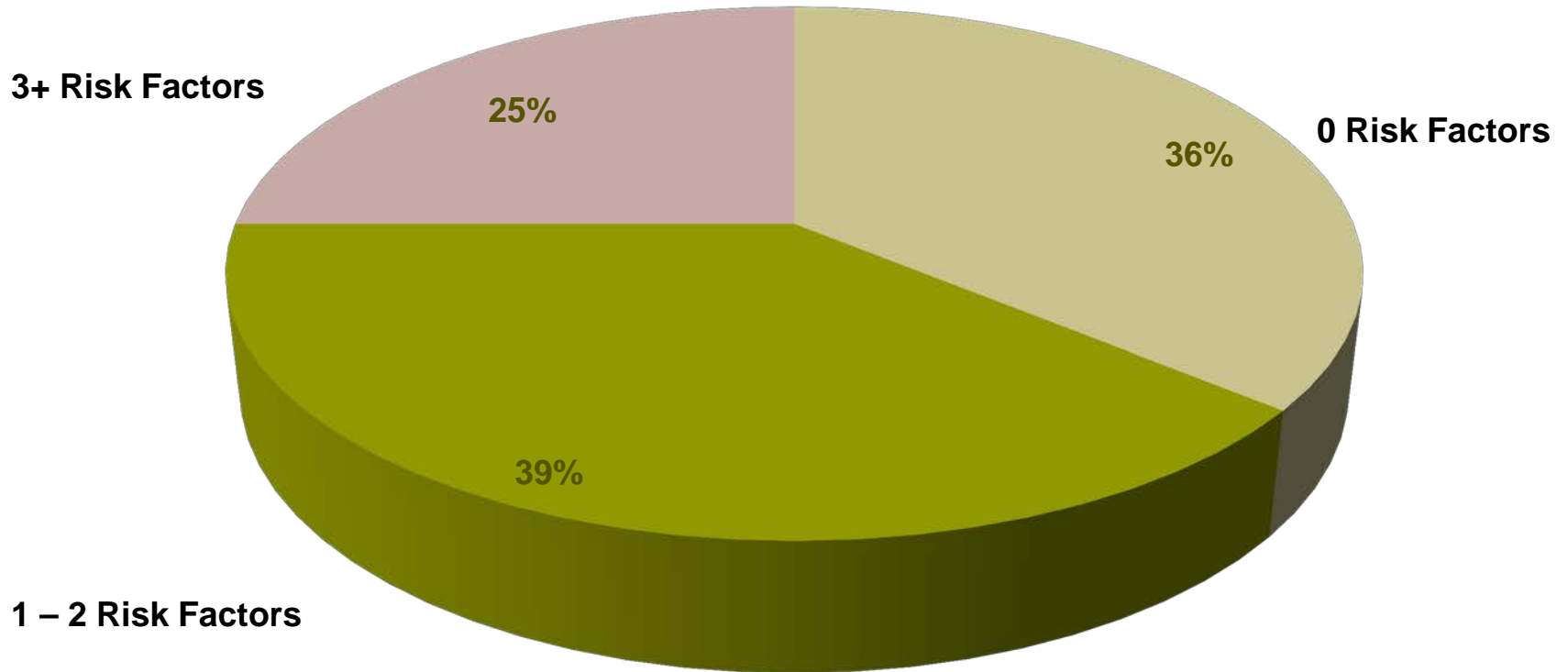


# Risks and Children



## Multiple Risk Factors for DC Young Children

■ 1 ■ 2 ■ 3



2012 Data from National Center for Children in Poverty, DC Early Childhood Profile

# Adverse Childhood Experiences – Adults



17,421 adult members of Kaiser HMO surveyed about:

1. Child physical abuse
2. Child sexual abuse
3. Child emotional abuse
4. Child Neglect
5. Mentally ill, depressed, or suicidal person in the home
6. Drug addicted or alcoholic family member
7. Witnessing domestic violence against the mother
8. Loss of a parent to death or abandonment, including abandonment by parental divorce
9. Incarceration of any family member.

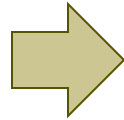
Fellitti et al., 1998

# Impact of ACE Scores



## ACE Survey Questions

- Child physical abuse
- Child sexual abuse
- Child emotional abuse
- Child Neglect
- Mentally ill, depressed, or suicidal person in the home
- Drug addicted or alcoholic family member
- Witnessing domestic violence against the mother
- Loss or incarceration of parent



## Negative Life Outcomes

- Alcoholism & Illicit Drug use
- Smoking
- Chronic Heart, Liver, and Lung Disease
- Depression
- Suicide Attempts
- High Risk Sexual Activity
- Sexually Transmitted Diseases
- Unintended Pregnancy
- Domestic Violence

# ACE Scores



<u>ACE score</u>	<u>Prevalence</u>
0	36%
1	26%
2	16%
3	9.5%
4 or more	12.5%



- **More than half** (almost 2/3) have at least one ACE
- **1 in 8** have 4 or more ACEs
- Average teacher will see **2-3** children with an ACE score of **4 or more each day**

# Experiences Are Key



**Life is 10% what happens to you and 90% how you react.**

Steven Covey





# Perspective Break



We worry about what a child will become tomorrow, yet we forget that he is someone today. ~Stacia Tauscher







# How Teachers Can Support



# Relationship Building



Teachers have the ‘power’ to reach young children and teach them new skills. They have the ability to build and form relationships and attachments; to empower children and make them feel secure. Teachers have the ability to create new chapters in a child’s life.



Hertel, Hull, Johnson, 2011

# How Teachers Can Help



- Create peaceful caregiving environments
- Create predictable schedules, transitions, and routines
- Clearly and simply state what you expect the child to do
- Establish and nurture positive relationships with families
- Praise and “delight in” the child, especially for positive behavior
- Give space for a child’s telling about or discussing their “story”



## Most Importantly – Use Self Care

- Children need adults who are physically and emotionally available to them and can be supportive





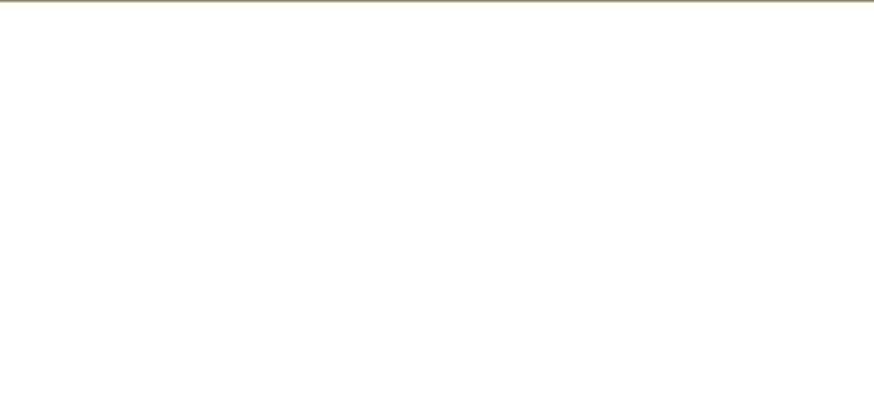
# Teacher Self-Care

<http://www.ecmhc.org/relaxation.htm>



- Eat a well- balanced diet, drink plenty of water
- Plan out healthy snacks and lunches
- Sleep well
- Exercise: any activity that you find enjoyable
- Create time each day to decompress
- Talk with friends, peers, co-workers
- Write in a journal
- Pair enjoyable activities or tasks with less enjoyable
- Reward yourself for a job well done

# Healthy Futures Video and Success Story







# Case of Angel

(Gan, 2015 –SMHP)



- Maternal history of substance abuse
- Toxic stressors in the 1st two years of life
  - Homelessness, neglect, malnourishment
  - Removed by child protection before age two
- Placed with committed foster family
- Enrolled in a quality child development center

# Angel Part II



- **Challenges**

- Attaching and forming relationships
- Difficulty separating and with transitions
- Regulating and focusing in center setting
- Low feelings of self worth

- **Pathway to Resilience**

- Consistency in caregiving and center setting
- Involvement of early childhood mental health consultation
- Participation of foster family in parental support and education groups
- Referral and linkage to play therapy resources (community and later in school setting)



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# Questions & Reflections

