

## Regulating the Stress Response for Kids: Practical Tips for Primary Care Providers

California ACEs Aware Initiative

August 26, 2020

### **ACEs Aware Mission**



To change and save lives by helping providers understand the importance of screening for Adverse Childhood Experiences and training providers to respond with trauma-informed care to mitigate the health impacts of toxic stress.



### **Presenters**

#### Dayna Long, MD, FAAP

Attending Physician, Primary Care Co-Director, Center for Child and Community Health UCSF Benioff Children's Hospital Oakland

#### Hilary M. Bowers, MD, FAAP

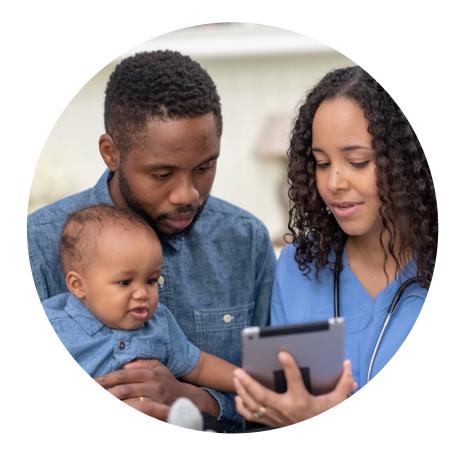
Director of Behavioral and Mental Health Services, Children's Primary Care Medical Group

#### Pradeep Gidwani, MD, MPH, FAAP

Medical Director, Healthy Development Services and First 5 First Steps Home Visiting Services American Academy of Pediatrics, California Chapter 3



### Agenda



- 1. Provide definitions, research, and resources on the clinical response to address toxic stress
- 2. Share Stress Regulation Strategies for Pediatric Patients
- 3. Answer Audience Questions
- 4. Provide Additional ACEs Aware Tools

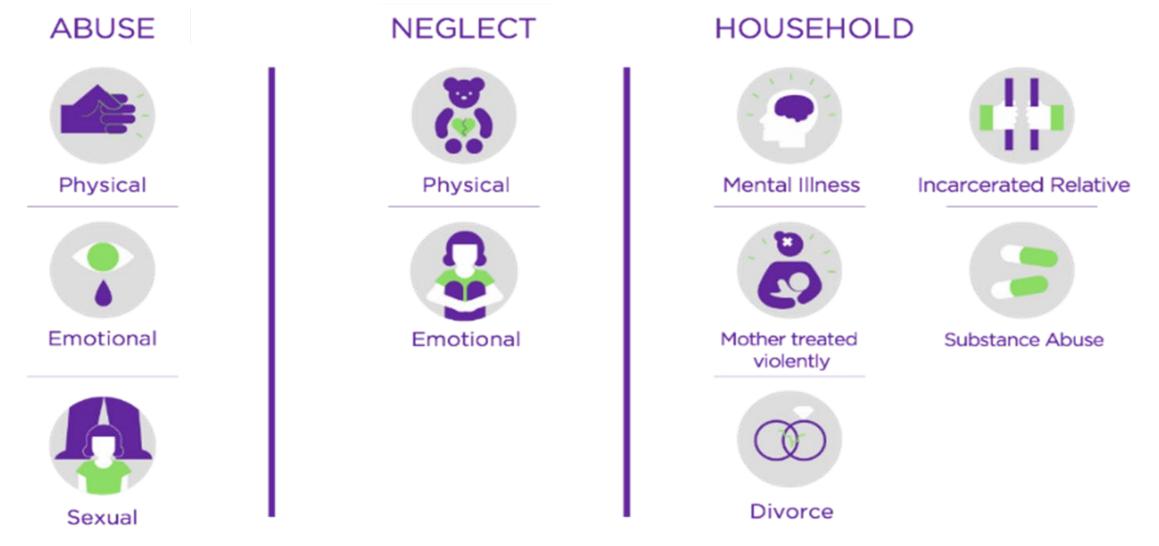




Regulating the Stress Response in Kids: Definitions, Research, and Resources

Dayna Long, MD, FAAP

### **10 Categories of Adverse Childhood Experiences**

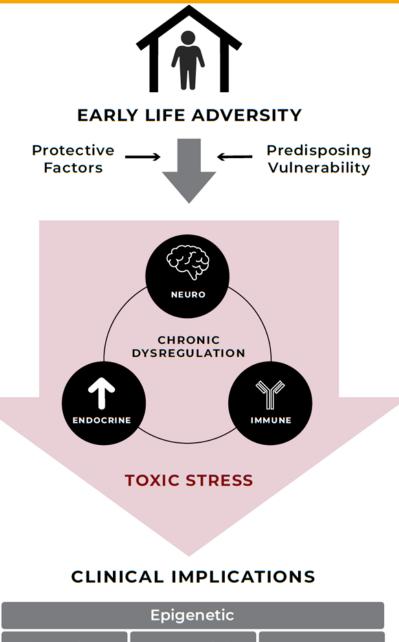


Copyright 2013. Robert Wood Johnson Foundation. Used with permission from the Robert Wood Johnson Foundation.

### **Toxic Stress Response Definition**

Repeated or prolonged activation of a child's stress response, without the buffering protections of trusted, nurturing caregivers and safe, stable environments, leads to long-term changes in the structure and functioning of the developing brain, metabolic, immune, and neuroendocrine responses, and even the way DNA is read and transcribed.

For information on the clinical response to ACEs and toxic stress, visit <u>ACEsAware.org/provider-toolkit</u>





<u>Positive stress</u> Brief increases in heart rate Mild elevations in stress hormones

#### Tolerable stress

Serious, temporary stress responses Buffered by supportive relationships

#### Toxic stress

Prolonged stress response activation Absence of protective relationships

Source: J Shonkoff Harvard University Center on the Developing Child

### **Overview of Clinical Response**

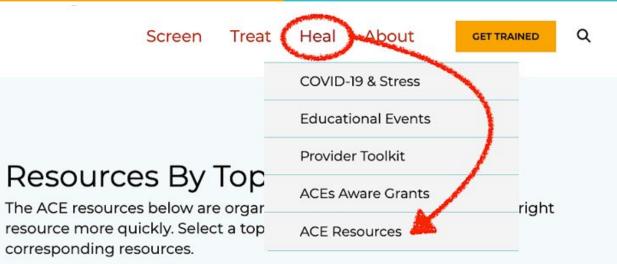
Clinical response to identification of ACEs and increased risk of toxic stress should include:

- 1. Applying principles of trauma-informed care.
- 2. Identification and treatment of ACE-Associated Health Conditions by supplementing usual care with patient education on toxic stress and strategies to regulate the stress response including the Six Stress-Busting Strategies.
- 3. Validation of existing strengths and protective factors
- 4. **Referral to needed patient resources or interventions**, such as educational materials, social work, care coordination or patient navigation, community health workers, as well as the six pillars listed earlier
- 5. Follow up as necessary, using the presenting ACE-Associated Health Condition(s) as indicators of treatment progress

For information on the clinical response to ACEs and toxic stress, visit ACEsAware.org/provider-toolkit







Visit Advanced Search to filter the resources and search by keyword.

#### Resources by Type

Clinical Resources for Adult Providers	Clinical Resources for Pediatric Providers	Organizational Toolkits
Patient/Family Education Handouts	Policy, Research and Advocacy Briefs	

#### Resources by Topic

Resilience-Building Interventions	Science of Toxic Stress	Screening & Clinical Response
Self-Care Tools	Trauma-Informed Systems	

### **Self-Care Tool for Pediatrics**

The full version of the ACEs Aware Self-Care Tool for Pediatrics is available at:

<u>ACEsAware.org/heal/resources/resources-</u> by-topic/self-care-tools/



#### **ACEs Aware Self-Care Tool for Pediatrics**

When a child or teen has experienced significant Adverse Childhood Experiences (ACEs), their body may make more or less hormones than is healthy. This can lead to problems with a child s physical and/or mental health, such as asthma, poor growth, depression, or behavior problems. Safe, stable, and nurturing relationships and environments where children feel safe emotionally and physically can protect children s brains and bodies from the harmful effects of stress. You can help your child be healthier by managing your own stress response and helping your child do the same. Healthy nutrition, regular exercise, restful sleep, practicing mindfulness, building social connections, and getting mental health support can help to decrease stress hormones and prevent health problems. Here are some goals your family can set together to support your child s health. [Check the goals that you are picking for yourself and your family!]

- □ Healthy relationships. We ve set a goal of...
  - □ Using respectful communication even when we are upset or angry
  - $\hfill\square$  Spending more high-quality time together as a family, such as:
    - Having regular family meals together
    - Having regular no electronics" time for us to talk and/or play together
    - □ Talking, reading, and/or singing together every day
  - Making time to see friends to create a healthy support system for myself and our family
  - Connecting regularly with members of our community to build social connections
  - Asking for help if a relationship or environment feels physically or emotionally unsafe



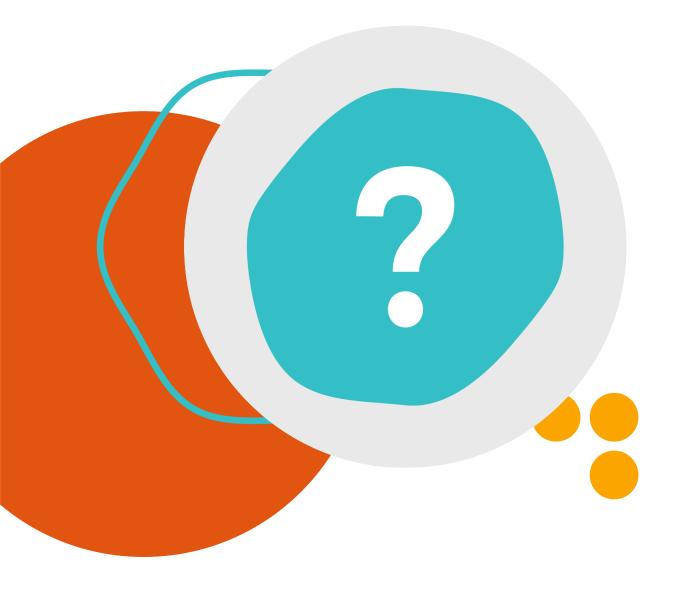
### Communicating Stress Regulation Strategies

Hilary M. Bowers, MD, FAAP



### Communicating Stress Regulation Strategies

Pradeep Gidwani, MD, MPH, FAAP



# Questions & Answers

### **ACEs Aware Provider Training**

### 1. Get trained at <u>www.ACEsAware.org/training</u>

- Free, 2-hour online course that offers CME and MOC credits
- Includes information on:
  - Medi-Cal policies and requirements
  - Science of ACEs and toxic stress
  - How to screen for ACEs
  - How to implement trauma-informed care

## 2. Fill out a form to self-attest to completing the training at www.Medi-Cal.ca.gov/TSTA/TSTAattest.aspx

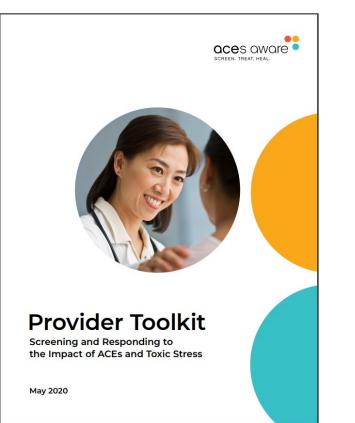
 List of Medi-Cal provider types eligible to receive payment at <u>www.ACEsAware.org/eligible-providers/</u>







### **ACEs Aware Provider Toolkit**



The <u>Provider Toolkit</u> provides comprehensive information on the ACEs Aware initiative

ACEsAware.org/provider-toolkit

#### **ACEs Aware Initiative**

<u>Cover Letter from Dr. Nadine Burke</u> <u>Harris & Dr. Karen Mark</u>

ACEs Aware Initiative: Overview

The Science of ACEs & Toxic Stress

#### **Screen: Training and Payment**

Screening Tools Overview

<u>Suggested Clinical Workflows for</u> <u>Screening</u>

#### Medi-Cal Certification & Payment



#### **Treat: Clinical Practice**

Trauma-Informed Care Overview

Clinical Response to ACEs & Toxic Stress

#### Heal: Resources and Support

Patient Tools & Informational Handouts

<u>References</u>

### **Upcoming Webinars**



### **Register for Webinars and Find Webinar Recordings at:**

www.ACEsAware.org/educational-events





## **Questions?** Contact Us



Info@ACEsAware.org

f 💿 in 🕑 D

### References

- o Burke Harris N. The Deepest Well: Healing the Long-Term Effects of Childhood Adversity. Boston: Houghton Mifflin Harcourt, 2018.
- Ungar M. Practitioner Review: Diagnosing childhood resilience a systemic approach to the diagnosis of adaptation in adverse social and physical ecologies. Journal of Child Psychology and Psychiatry 2015; 56: 4–17. DOI: 10.1111/jcpp.12306.
- Traub F, Boynton-Jarrett R. Modifiable resilience factors to childhood adversity for clinical pediatric practice. Pediatrics 2017; 139: e20162569. DOI: 10.1542/peds.2016-2569.
- Purewal Boparai SK, Au V, Koita K, et al. Ameliorating the biological impacts of childhood adversity: A review of intervention programs. Child Abuse & Neglect 2018; 81: 82–105. DOI: 10.1016/j.chiabu.2018.04.014.
- Bethell C, Gombojav N, Solloway M, Wissow L. Adverse Childhood Experiences, Resilience and Mindfulness-Based Approaches. Child and Adolescent Psychiatric Clinics of North America 2016; 25: 139–56. DOI: 10.1016/j.chc.2015.12.001.
- Bethell CD, Gombojav N, Whitaker RC. Family Resilience And Connection Promote Flourishing Among US Children, Even Amid Adversity. Health Affairs 2019; 38: 729–37. DOI: 10.1377/hlthaff.2018.05425.
- Bellis MA, Hughes K, Ford K, et al. Adverse childhood experiences and sources of childhood resilience: a retrospective study of their combined relationships with child health and educational attendance. BMC Public Health 2018; 18. DOI: 10.1186/s12889-018-5699-8.
- Sege RD, Harper Browne C. Responding to ACEs with HOPE: Health Outcomes from Positive Experiences. Academic Pediatrics 2017; 17: S79–85. DOI: 10.1016/j.acap.2017.03.007.

