

# HEALING STARTS HERE:

## Addressing Adverse Childhood Experiences (ACEs) in School-Based Health Centers

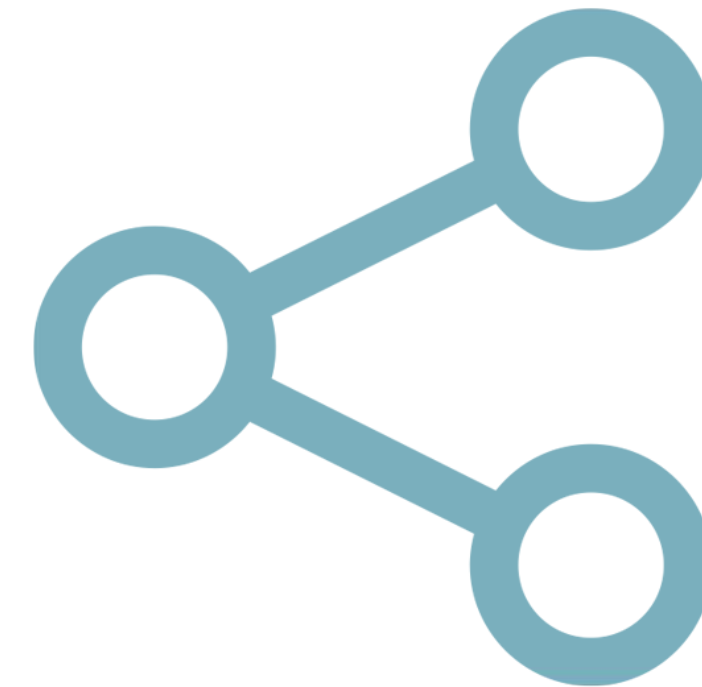




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the number from your webinar  
invitation link



The webinar is being recorded



Supporting materials will be  
shared



# PUTTING HEALTH CARE IN SCHOOLS

The California School-Based Health Alliance is the statewide non-profit organization dedicated to **improving the health & academic success of children & youth by advancing health services in schools.**

Learn more:

 [schoolhealthcenters.org](https://www.schoolhealthcenters.org)





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- ◆ Technical assistance

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Co-Principal Investigator  
UCLA-UCSF ACEs Aware  
Family Resilience Network



**Amy Blackshaw, MSW**

Behavioral Health Project Director  
California School-Based Health Alliance



# ADVERSE CHILDHOOD EXPERIENCES (ACEs)

## ABUSE



PHYSICAL



EMOTIONAL



SEXUAL

## NEGLECT



PHYSICAL



EMOTIONAL

## HOUSEHOLD CHALLENGES



MENTAL  
ILLNESS



INTIMATE  
PARTNER  
VIOLENCE



PARENTAL  
SEPARATION  
OR DIVORCE



INCARCERATION

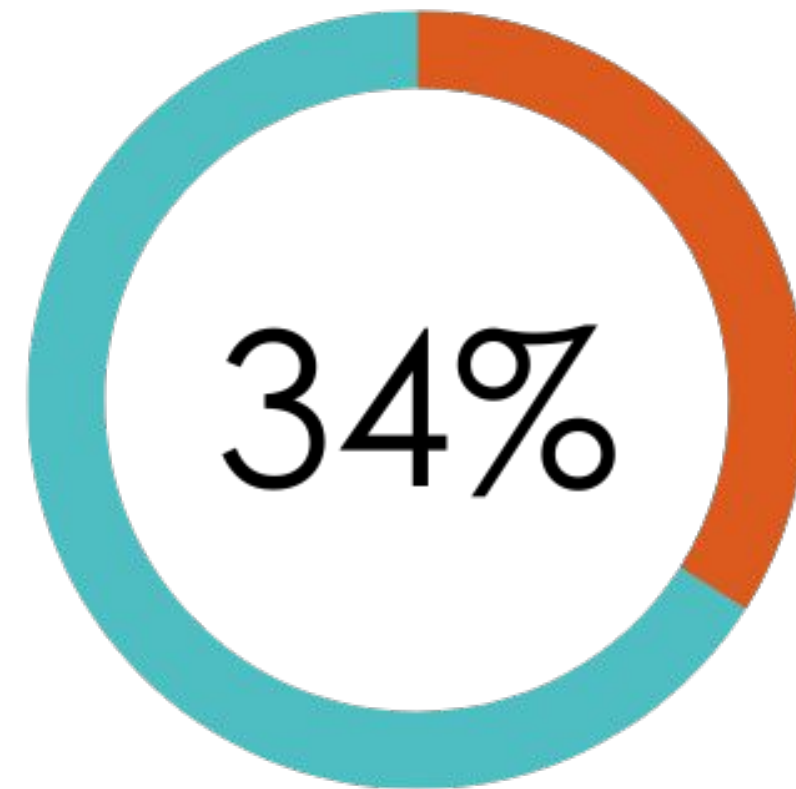


SUBSTANCE  
MISUSE OR  
DEPENDENCE

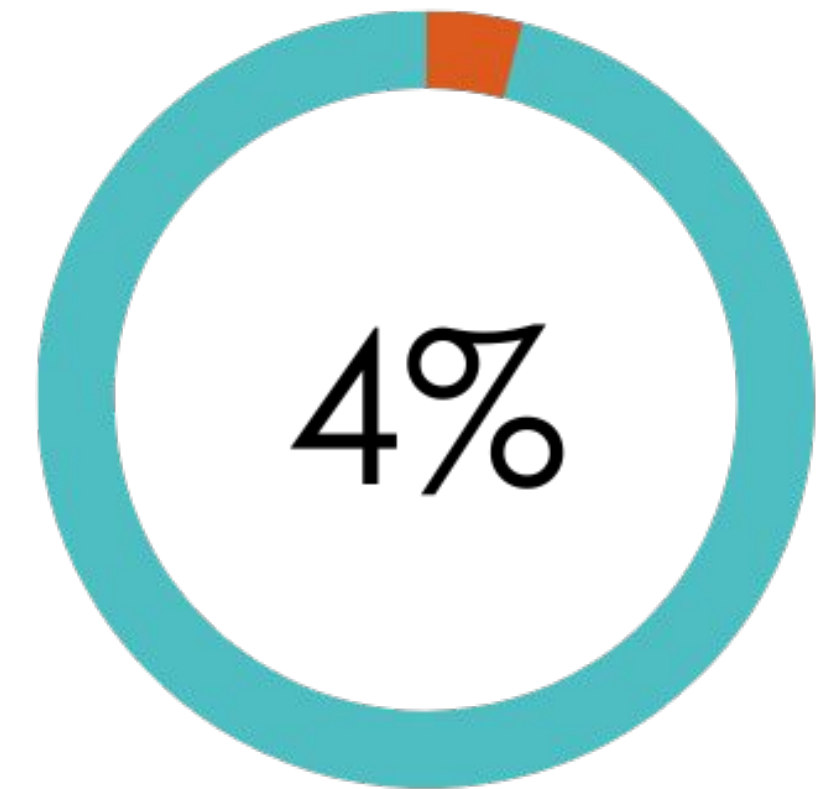


# Prevalence of ACEs among California Youth

California Youth  
(Ages 0-17) Who  
Experienced at  
Least 1 ACE



California Youth  
(Ages 0-17) Who  
Have Experienced  
4 or More ACEs



U.S. Dept. of Health and Human Services, National Survey of Children's Health (Apr. 2023).

<https://www.kidsdata.org/topic/2214/aces-nsch-number/Pie#fmt=2760&loc=2,1&tf=159&ch=1256,1454,1455,1457,1259&pdist=172>



# ACEs Dramatically Increase Risk for 9 of the 10 Leading Causes of Death in U.S.

Leading Causes of Death in the U.S., 2022		Odds Ratios for ≥ 4 ACEs (relative to no ACEs)
1	Heart disease	2.1
2	Cancer	2.3
3	COVID-19	Unknown
4	Unintentional Injuries (injury with fracture)	2.6
5	Stroke	2.0
6	Chronic lower respiratory diseases	3.1
7	Alzheimer’s disease (memory impairment)	4.9
8	Diabetes	1.4
9	Chronic liver disease and cirrhosis (hepatitis or jaundice)	2.4
10	Kidney disease	1.7

Source of causes of death: Xu et al 2022 (CDC)  
Sources of odds ratios: Hughes et al. for 1, 2, 6, 8; Petrucelli et al. for 4, 5, 7; Center for Youth Wellness for 10; Felitti et al. for 9; Merrick et al. for 10.



# ACE-Associated Health Conditions - Pediatrics

- Asthma
  - Allergies
  - Dermatitis and eczema
  - Urticaria
  - Impaired management of chronic disease
  - Unexplained somatic symptoms (nausea, vomiting, dizziness, constipation)
  - Headaches
  - Enuresis: encopresis
  - Overweight and obesity
  - Poor dental health
  - Infections (viral, URIs, LRTIs and pneumonia, ADM, it is, conjunctivitis, intestinal)
  - Sleep disturbances
  - Developmental delay
  - Learning and/or behavior problems
  - Repeating a grade
  - Not completing homework
  - High school absenteeism
  - Not graduating from high school
  - Aggression, physical fighting
  - ADHD
  - Depression, anxiety, conduct behavior disorder
  - Suicidal ideation
  - Suicide attempts
  - Self-harm
  - First use of alcohol at < 14 yrs
  - First use of illicit drugs < 14 yrs
  - Later menarche ( $\geq$  14 yrs)
  - Early sexual initiation (<15-17 yrs)
  - Teenage pregnancy
  - Teenage paternity
-

# Additional Risk Factors for Toxic Stress

**Risk factors for toxic stress include any circumstance, exposure, or condition associated with increased likelihood of development of the toxic stress response.**

In addition to the original 10 ACE categories, which generally occur in the context of the home environment, some of the other risk factors for toxic stress include:

- Community or school violence
- Discrimination
- Housing instability
- Food insecurity
- Separation of a child from their parent or caregiver (foster care, immigration)
- Living with a parent with serious physical illness or disability
- Having a parent or caregiver who died

Source: Bhushan D, Kotz K, McCall J, Wirtz S, Gilgoff R, Dube SR, Powers C, Olson-Morgan J, Galeste M, Patterson K, Harris L, Mills A, Bethell C, Burke Harris N, Office of the California Surgeon General. Roadmap for Resilience: The California Surgeon General's Report on Adverse Childhood Experiences, Toxic Stress, and Health. Office of the California Surgeon General, 2020. DOI: 10.48019/PEAM8812. (p. xxiv)



# Protective Factors

**Protective factors:**  
“intrinsic or extrinsic conditions or attributes that mitigate risk for toxic stress”

## Intrinsic Factors

- Neurologic, endocrine, metabolic, immune, genetic, and epigenetic factors
- Curiosity in learning
- Ability to pay attention
- Ability to regulate emotions

## Extrinsic Factors

- Buffering relationships
- Supportive environments
- Community resources

Sources: Bhushan D, Kotz K, McCall J, Wirtz S, Gilgoff R, Dube SR, Powers C, Olson-Morgan J, Galeste M, Patterson K, Harris L, Mills A, Bethell C, Burke Harris N, Office of the California Surgeon General. Roadmap for Resilience: The California Surgeon General's Report on Adverse Childhood Experiences, Toxic Stress, and Health. Office of the California Surgeon General, 2020. DOI: 10.48019/PEAM8812. See notes for additional sources.

# Impact of experiences on health

The balance of negative experiences (risk factors) and positive supports (protective factors) can influence whether we have positive or negative health outcomes

It isn't just the *number* of negative experiences that matter. The type, duration, severity, perception, and developmental timing of negative experiences influence the impact on health.



Source: The Alberta Family Wellness Initiative <https://www.albertafamilywellness.org/what-we-know/resilience-scale>



# ACEs and Health Disparities

- While ACEs affect all communities, notable differences exist in ACE prevalence and ACE-associated negative health outcomes for people who are:
  - Women;
  - Low-income;
  - LGBTQ;
  - Black, Latinx, Indigenous, and other people of color
- Significant disparities also exist in health outcomes by education, income, race, ethnicity, geography, gender, neighborhood, disability, sexual orientation, and citizenship status.
- Discrimination experienced by these groups, including racism, is also a risk factor for toxic stress.

**Source:** National Academics of Sciences, Engineering, and Medicine. (2019). *Vibrant and healthy kids: Aligning science, practice, and policy to advance health equity*. The National Academics Press. doi:10.17226/25466.

THE BIOLOGY OF

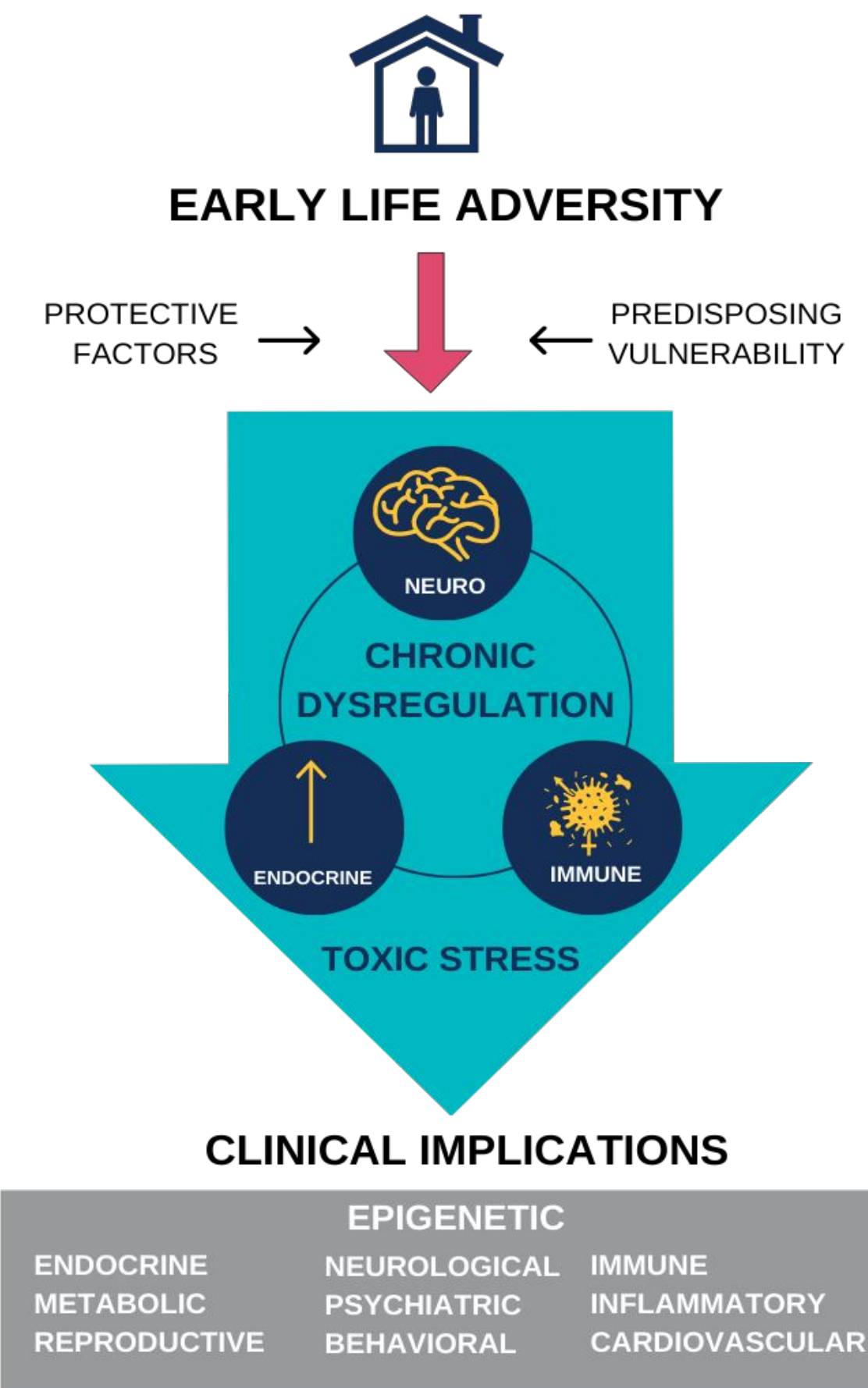
# ADVERSITY

The background is a solid yellow color. Overlaid on this background are faint, stylized silhouettes in a slightly darker yellow shade. These include a snake coiled around a vertical post, a five-pointed star, and a bear standing on all fours.



# The Toxic Stress Response

*“prolonged activation of the stress response systems that can disrupt the development of brain architecture and other organ systems, and increase the risk for stress-related disease and cognitive impairment, well into the adult years...”*



(National Academies of Sciences, Engineering, and Medicine, 2019, Nelson CA, Bhutta ZA, Burke Harris N, Danese A, Samara M., 2020)

ACES ARE

NOT

DESTINY



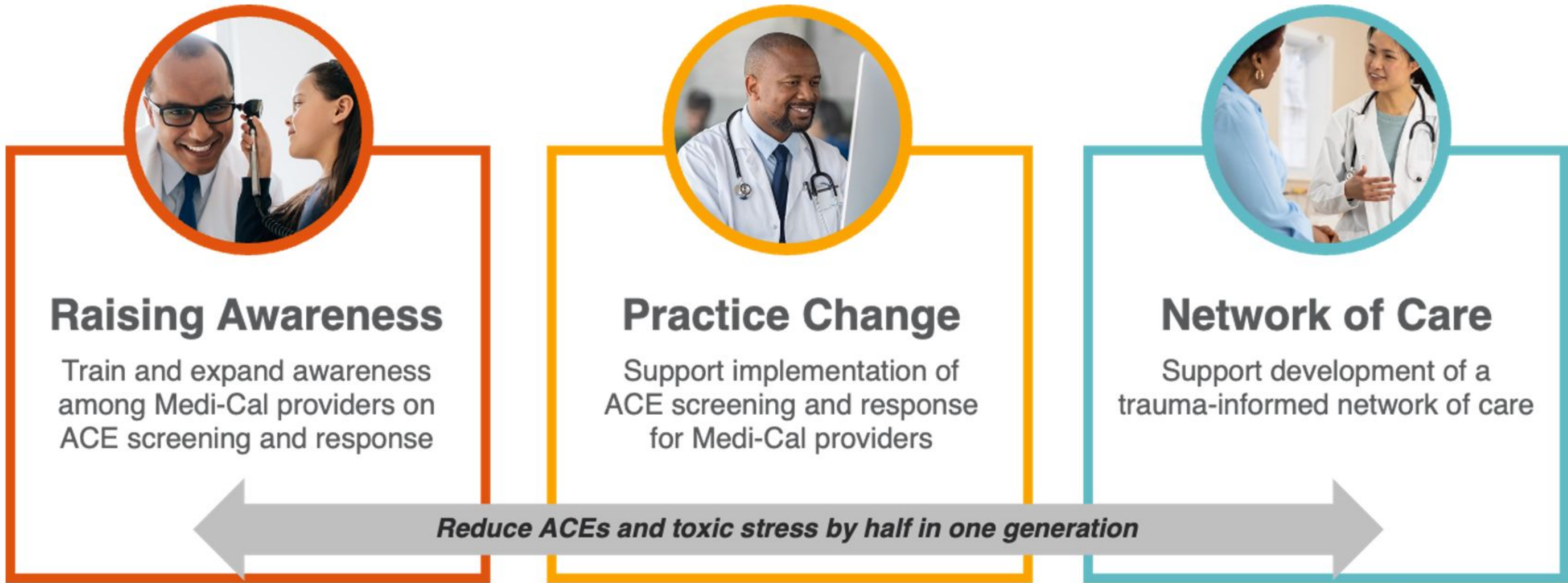
# ACEs Aware Initiative

**First-in-the nation effort to promote early detection and intervention to mitigate the health and societal impacts of Adverse Childhood Experiences(ACEs) and toxic stress.**



- Launched in December 2019 as part of Governor Newsom's California for All initiative
- Funded through the California Department of Health Care Services (DHCS)
- Collaborative effort between DHCS and the Office of the California Surgeon General (CA-OSG)
- In October 2021, DHCS contracted with the UCLA-UCSF ACEs Aware Family Resilience Network (UCAAN) to continue to implement the ACEs Aware initiative, which previously was implemented by Aurrera Health Group

# ACEs Aware Goals and Objectives





# Toxic Stress is a Medical Condition that is Amenable to Treatment

- **Intervention in children and adolescents** can improve neurologic, endocrine, metabolic and immune system development
- **Intervention in children, adolescents, and adults:**
  - Can **improve physical and mental health**, including ACE-Associated Health Conditions
  - May **prevent transmission** of neuro-endocrine-immune-metabolic and genetic regulatory disruptions in offspring.

# ACE Screening Purpose and Elements

## Purpose of ACE screening:

- Determine a patient's clinical risk for toxic stress
- To guide an appropriately tailored treatment and follow-up plan to prevent or mitigate the toxic stress response.

## Elements of ACE screening:

Complete ACE screening involves understanding a patient's:

1. Exposure to adversity as indicated by the ACE score;
2. Clinical manifestations of toxic stress (the presence or absence of ACE-Associated Health Conditions); and
3. Presence of protective factors.

The first two components are used in assessing clinical risk for toxic stress and all three help to guide effective responses.



# How ACE Screening Is Done Matters

- Follow **trauma-informed care** principles, such as establishing trust, safety, and collaborative decision-making.



# Clinical Response to ACE Screening



**Prevent/Address ACEs & Other Stressors**  
(External Events and Environment)



**Treat Toxic Stress Physiology**  
(Internal Biology)



**Improved health**

## Address Stressors

- Partner with individuals and communities to lower the stress load

## Address Internal Stress Responses

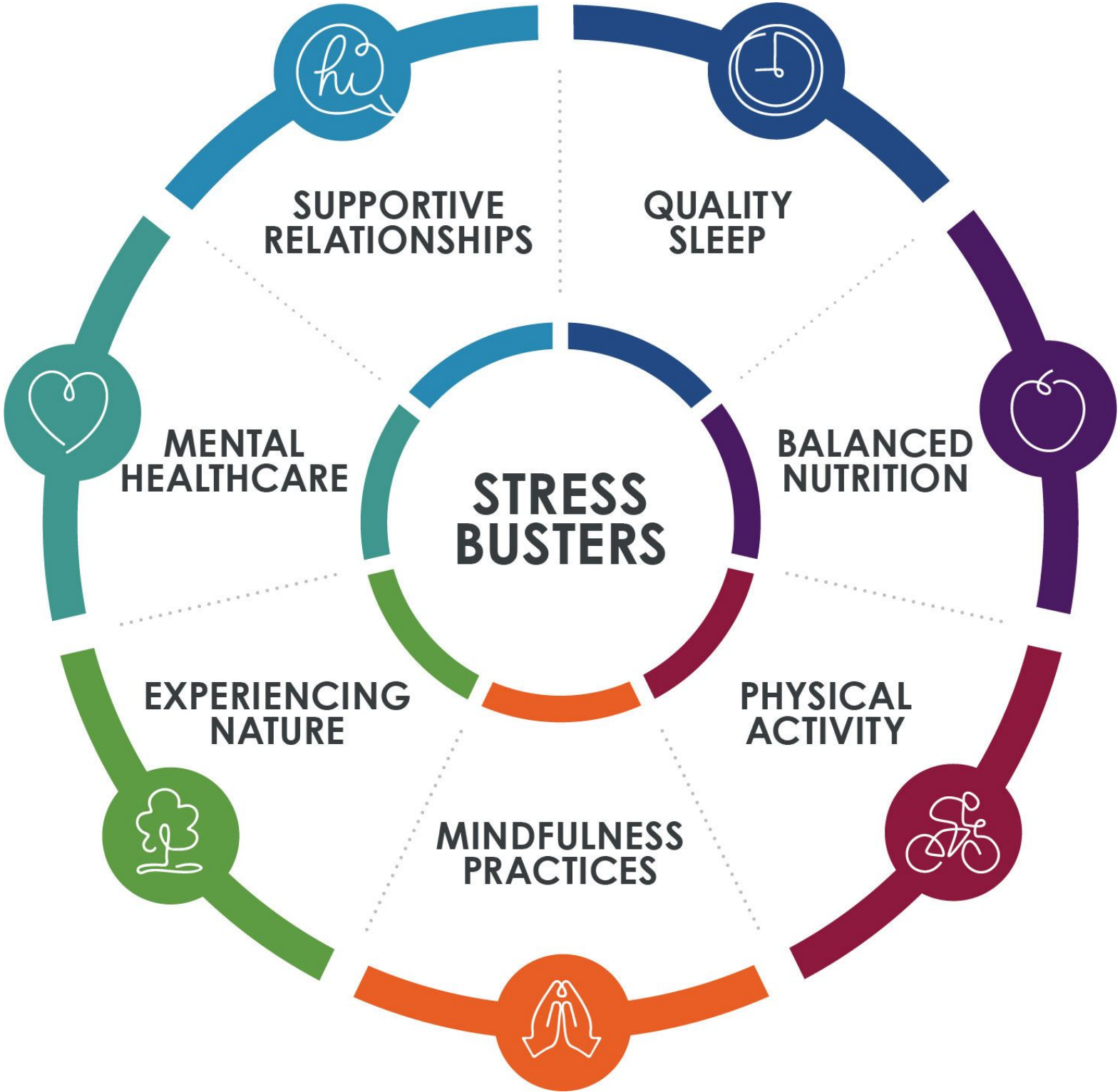
- Skills to calm the stress response in the moment
- Long-term healing strategies and interventions

## Improve

- Health and Wellbeing
- Opportunity
- Equity

**Source:** Gilgoff R, Schwartz T, Owen M, Bhushan D, Burke Harris N. Opportunities to Treat Toxic Stress. *Pediatrics*. 2023 Jan 1;151(1):e2021055591.

# Evidenced-Based Buffering Interventions

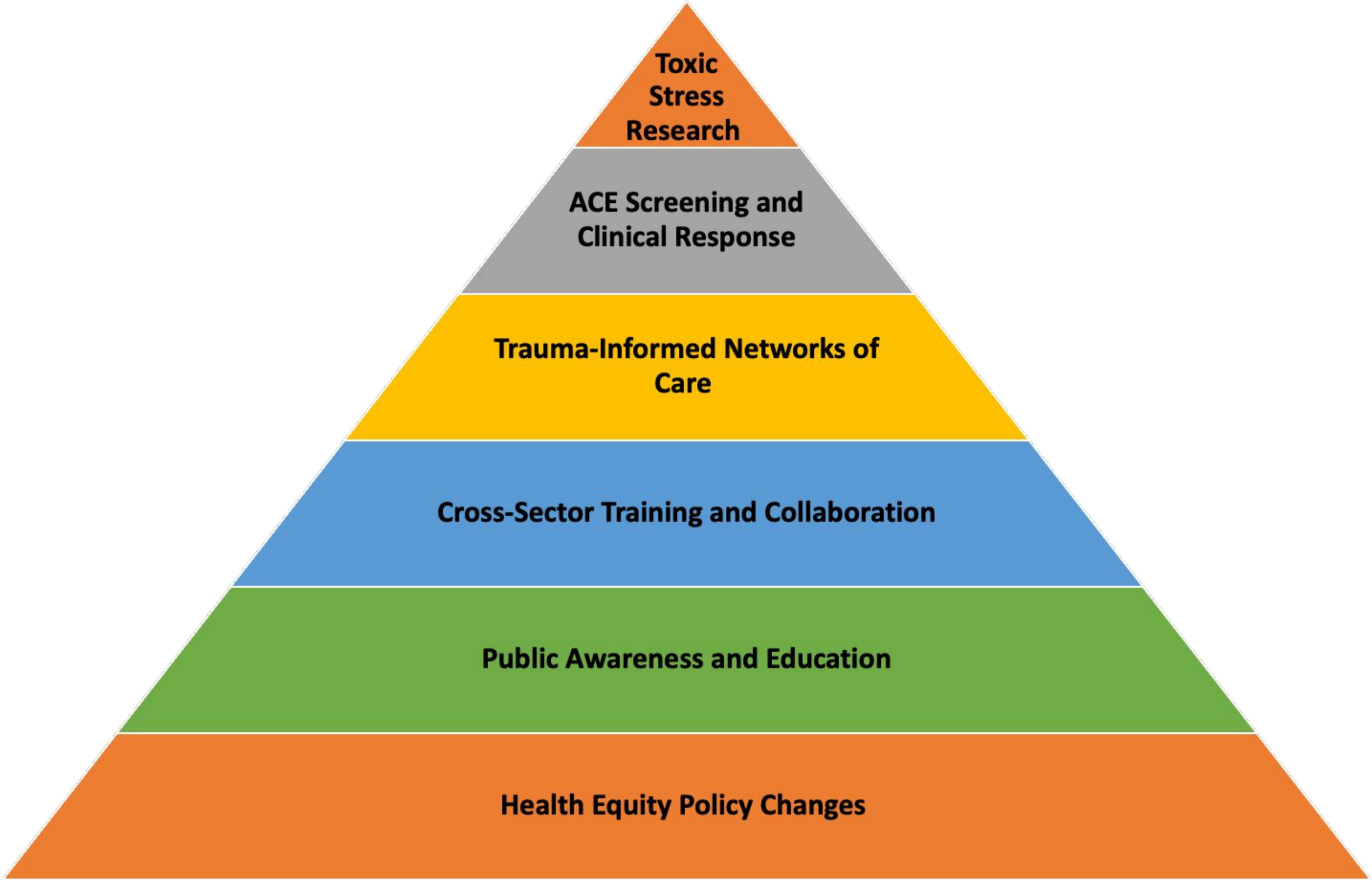




# No Single Sector or Category of Prevention is Sufficient Alone



# California's Coordinated Public Health Approach



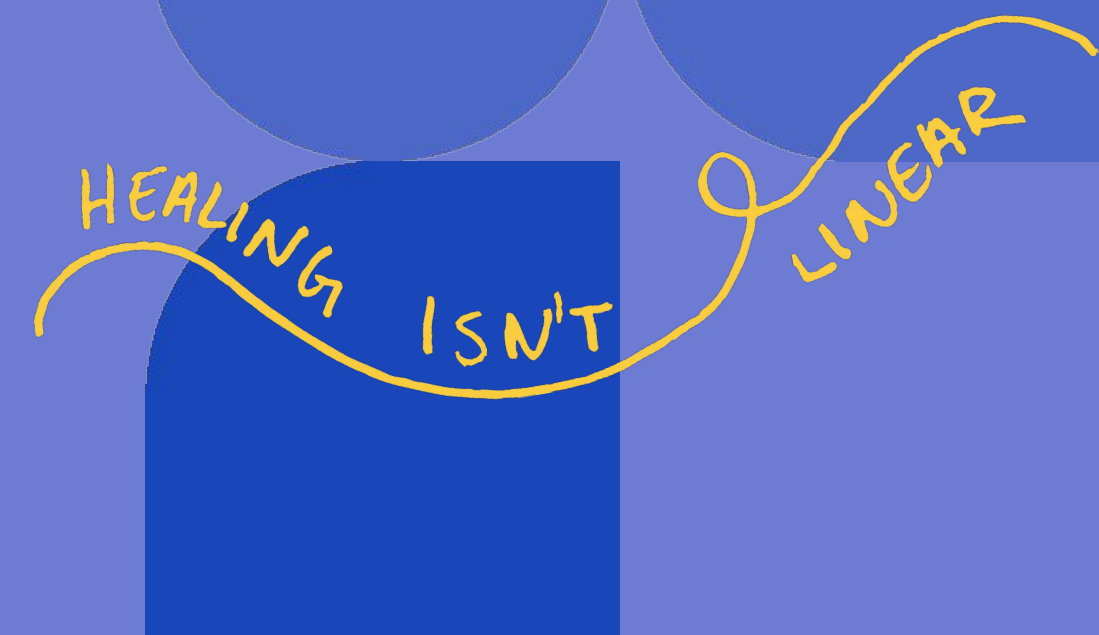
# *Live Beyond*

## Campaign Overview



OFFICE OF THE  
CALIFORNIA  
SURGEON  
GENERAL

*October 2024*





# Youth and young adult advisory informing development



Baani Sabharwal



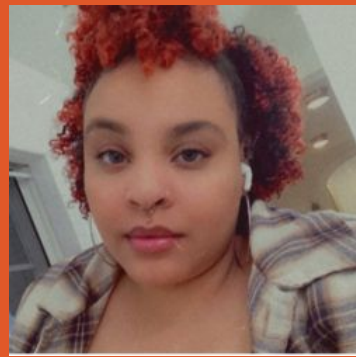
Celeste Walley



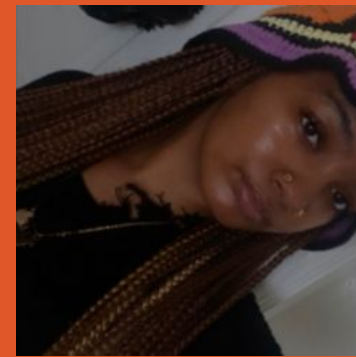
Celina Inzunza



Christian Jeff Yu Menguito



CiCi Williams



Elita Jasmine Young



Jose Cruz



Josue (Swey) Pineda



Julio Sagastume



Laura Avila



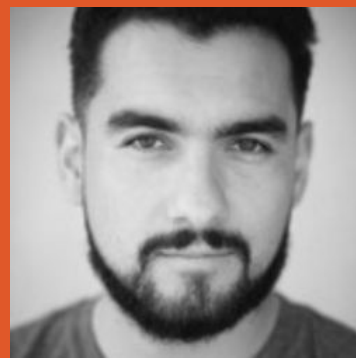
Luis Wualdemar Tun Orozco



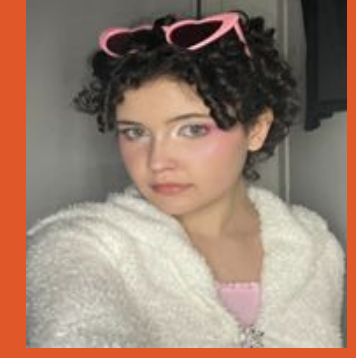
Jada Imani Carter



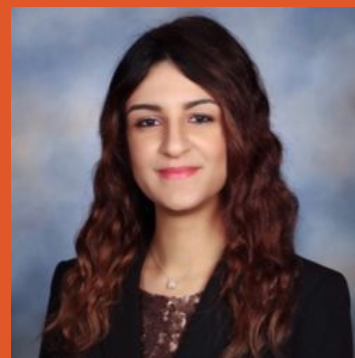
Nancy Martinez Urieta



Ronaldo (Ronnie) Villeda



Juniper Brown



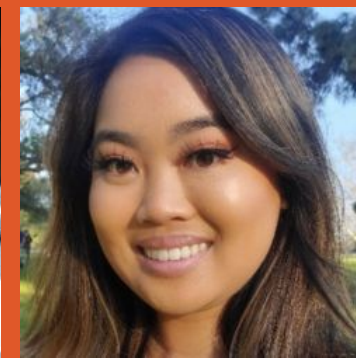
Setareh Harsamizadeh Tehrani



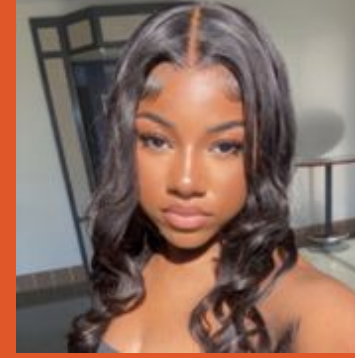
Shae Dellamaggiore



Shamar Knox



Sharon Tang



Zen'ayah (Zee) Finley

- 19% self-identify as non-binary/gender non-conforming
- 14% AAPI
- 33% Hispanic/Latinx
- 24% Black/African American
- 10% White
- 4% mixed identities, inclusive of Native American/Alaskan Native and Middle Eastern

**Representation from:**  
Alameda, Fresno, Imperial, Los Angeles, Madera, Orange, Sacramento, San Joaquin, San Diego, San Francisco, Santa Barbara, Stanislaus, and Ventura Counties



# Campaign Creative



*Live beyond*  
**Adverse Childhood Experiences (ACEs)**

There's healing ahead at [livebeyondCA.org](https://livebeyondCA.org)





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Funded under contract #2022-238-OSG.

**There's *healing* ahead.**

Find your way forward from childhood trauma.

[livebeyondCA.org](https://livebeyondCA.org)

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*Live beyond*  
**Adverse Childhood Experiences (ACEs)**

There's healing ahead  
at [livebeyondCA.org](https://livebeyondCA.org)

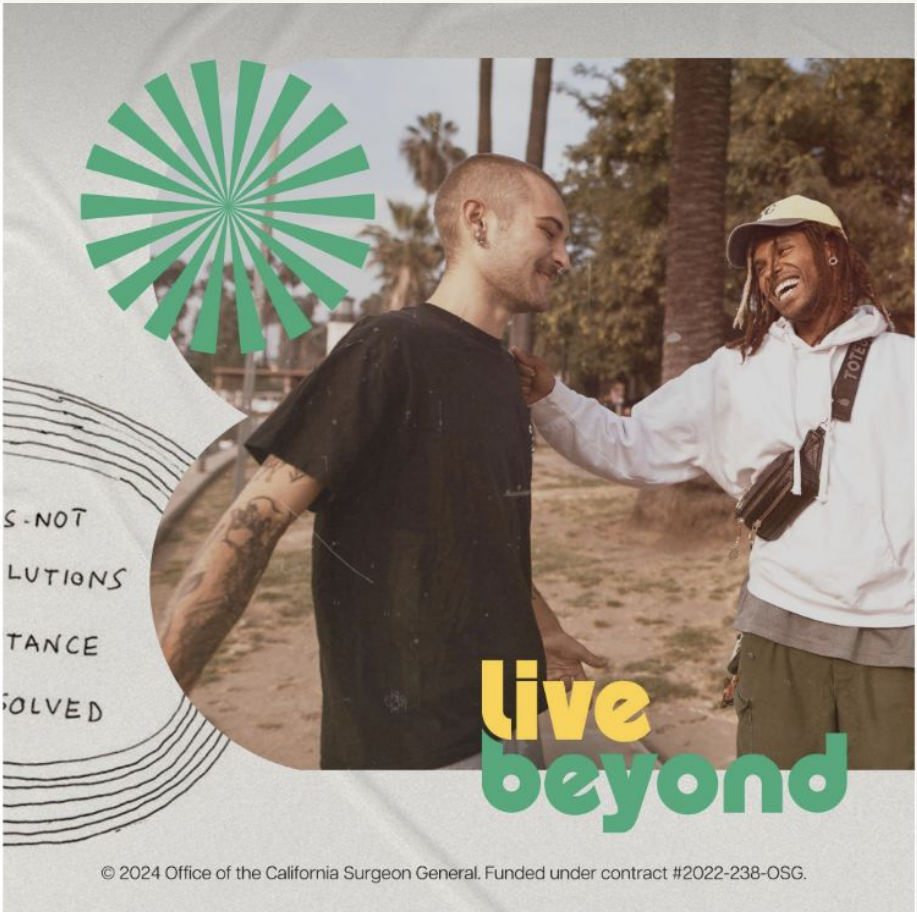
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**THERE'S HEALING AHEAD** [livebeyondCA.org](https://livebeyondCA.org)





*live beyond*

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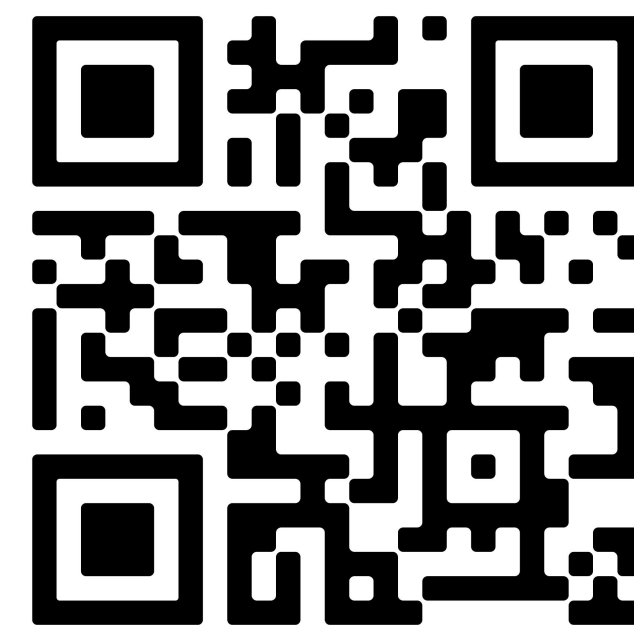
# Safe Spaces

Foundations of Trauma-Informed  
Practice for Educational & Care Settings



Take the  
training today!

Scan the QR Code



[training.acesaware.org](https://training.acesaware.org)



# No Single Sector or Category of Prevention is Sufficient Alone



# Training: Becoming ACEs Aware Certified



Take the training at:  
[training.acesaware.org/aa/detail?id=500](https://training.acesaware.org/aa/detail?id=500)

- Qualified Medi-Cal providers are eligible for a \$29 payment for qualifying Adverse Childhood Experiences (ACE) screenings for pediatric and adult patients (up to age 65) with full scope Medi-Cal.
- The training offers 2.0 Continuing Education credits and 2.0 Maintenance of Certification credits upon completion.
- Providers who intend to receive Medi-Cal payment for ACE screenings must complete the training and provide their National Provider Identifier (NPI) information as part of the training evaluation.
- Certified clinicians are encouraged to join the [ACEs Aware Clinician Directory](#).

# ACEs Aware Learning Center



## There's more to explore on the ACEs Aware Learning Center:

- The *Becoming ACEs Aware in California* online training, entitles eligible Medi-Cal providers to be reimbursed for ACE screening.
- Training on evidence-based toxic stress mitigation strategies (Stress Busters).
- Live and on-demand training webinars that are free and provide continuing education credit.
- Easy access to certificates and continuing education credits.

[training.acesaware.org](https://training.acesaware.org)



# Resources for the Clinical Response to ACE Screening

**STRESS BUSTERS**

## Stress Busters: Seven Ways to Manage Stress

We all have stress in our lives, but did you know that using strategies to manage stress, or prevent it in the first place, can help us live healthier and longer lives?

Stress Busters are seven ways you can manage your day-to-day stress as well as counter toxic stress from Adverse Childhood Experiences. All Stress Busters have been shown to improve brain health and immune function and balance stress hormones. See which ones might work best for you and the people you care about.

Check out Stress Buster tips and strategies in our new patient handouts, and find additional resources on the individual Stress Buster webpages listed below.

[READ THE STRESS BUSTERS OVERVIEW HANDOUT](#)

More information and resources on the seven Stress Buster strategies:

SUPPORTIVE RELATIONSHIPS

QUALITY SLEEP

BALANCED NUTRITION

PHYSICAL ACTIVITY

MINDFULNESS PRACTICES

EXPERIENCING NATURE

MENTAL HEALTHCARE

Go to [acesaware.org/managestress](https://acesaware.org/managestress) to find:

- Patient handouts
- Online course for providers
- Short videos
- Crisis and safety resources
- And more!



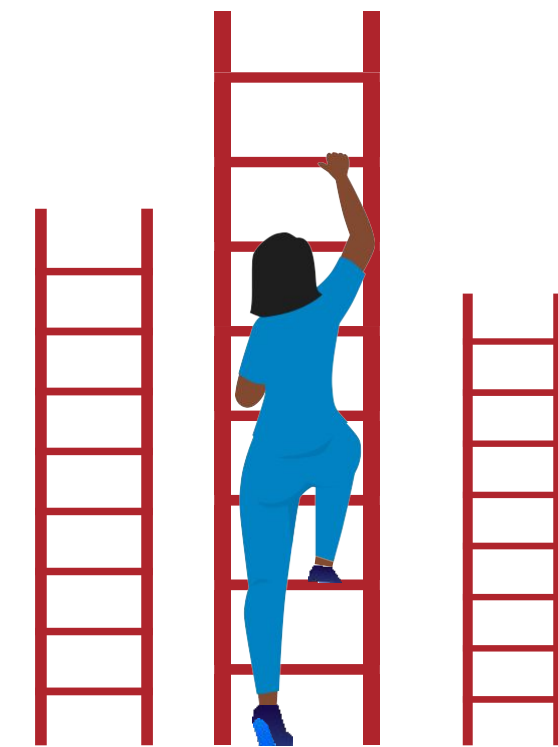
# Thank You

Questions@ACEsAware.org

# SCHOOL-BASED HEALTH CENTERS AND ACE SCREENING



**OPPORTUNITIES**



**CHALLENGES**



# SCHOOL-BASED HEALTH CENTERS AND ACE SCREENING

## Accessibility:

- ◆ Located where students spend most of their time

## Integrated Care:

- ◆ Multidisciplinary teams offer comprehensive care

## Trusted Source of Care:

- ◆ Strong trust between students, families, and school staff

## Care Coordination:

- ◆ Seamless collaboration with schools via MTSS





# BENEFITS

## Convenient Access:

- ◆ Eliminates barriers like transportation and cost

## Multidisciplinary Teams:

- ◆ Collaboration between health and school staff

## Stronger Relationship:

- ◆ School environment fosters trust with students

## Trauma-Informed Care:

- ◆ Existing framework for addressing ACEs and toxic stress

## Financial Sustainability:

- ◆ ACE screening provides additional revenue



# SBHC IMPACT ON YOUTH MENTAL HEALTH

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70%–80% of children and adolescents who receive mental health services, access the services in school.



Youth are 6 times more likely to complete evidence-based treatment in a school setting vs a community based setting.

- ◆ School-based settings provide mental health professionals easy access to educators, who report both increased abilities to respond appropriately to students in psychological distress and better relationships with students.
- ◆ Higher quality relationships with adults for youth has been linked to reduced mental health distress and a protective factor against suicide.



# ACE SCREENING IN SBHCS - A TRAUMA-INFORMED APPROACH



**More than just a questionnaire:  
a trauma-informed environment**



**Emphasizes safety, trust, universal education, support, collaboration, empowerment**



**SBHCs well-suited to meet these needs through ongoing care and tailored services**

# CHALLENGES

## Limited Resources:

- ◆ Shortage of behavioral health providers and community resources

## Managing High ACE Scores:

- ◆ Concerns about stigma and system involvement

## Screening Fatigue:

- ◆ Integrating ACE screening without overwhelming staff

## Time Constraints:

- ◆ Balancing billable visits with comprehensive care

## Organizational Buy-In:

- ◆ Securing support from lead agencies





# AN INVITATION

- ◆ Opportunity to integrate ACE screening in SBHCs
- ◆ CSHA and UCAAN launching ACEs Aware Learning Community for SBHCs
- ◆ Grants of up to \$10,000 available
- ◆ Webinars, collaborate learning, and individualized technical assistance offered

## Overview





# FREE RESOURCES AVAILABLE



[www.schoolhealthcenters.org/  
our-work/](http://www.schoolhealthcenters.org/our-work/)

The cover of the "From Vision to Reality" toolkit. It features the California School-Based Health Alliance logo at the top, followed by the title "FROM VISION TO REALITY: How to Build a School Health Center from the Ground Up" in white text on a red background.

## VISION TO REALITY

From Vision to Reality, our toolkit on starting a school-based health center (SBHC), is a comprehensive resource for anyone seeking to expand health services for students.

The cover of the "Planning a School-Based Health Center: Key Steps" overview. It features the California School-Based Health Alliance logo at the top, followed by the title "Planning a School-Based Health Center: Key Steps" in white text on a red background. Below the title is a photograph of a group of people, including children and adults, working together to plant a tree in a field.

## KEY STEPS TO PLANNING

The first steps of establishing a new school-based health and wellness center can feel daunting. Our Key Steps to Planning overview outlines the high-level activities to get started.

An icon consisting of a blue square with a white checklist and a pencil, and a yellow school building with a red cross on its roof.

## BEST PRACTICES CHECKLIST

The Best Practices Checklist is designed to help school-based health and wellness center staff identify areas where they can strengthen their practices and improve the quality and sustainability of services.

# ACE Screening In School-Based Health Centers

## The Role of School-Based Health Centers in the ACEs Aware Initiative:

Current Practices and Recommendations



advancing  
health  
equity **etr.**



# QUESTIONS?



# UPCOMING CSHA WEBINARS

## My Voice Saves Lives: Engaging Young People as TUPE Peer Educators

- Wednesday, October 9th 2024, 1:00 - 2:00 PM Pacific
- [Registration Link](#)

## The Triangulum of Cannabis, Tobacco, and E-cigarette Use: Its Effects on Physical Health, Addiction, and Mental Health, and How You Can Best Help

- Wednesday, November 6th 2024, 10:00 - 11:00 AM Pacific
- [Registration Link](#)

## Wellness Coaches and SBHCs

- November 21, 2024, 2:00 -3:00 PM



# STAY CONNECTED

 [schoolhealthcenters.org](https://schoolhealthcenters.org)

 [info@schoolhealthcenters.org](mailto:info@schoolhealthcenters.org)

 [sbh4ca](https://twitter.com/sbh4ca)

 [sbh4ca](https://www.instagram.com/sbh4ca)

Gracias

謝謝

Thank you

Cảm ơn

Salamat

Amy Blackshaw, Behavioral Health Project Director



[ablackshaw@schoolhealthcenters.org](mailto:ablackshaw@schoolhealthcenters.org)