CONNECTIONS MATTER IN EARLY EDUCATION

An early care and education professional's guide to toxic stress

TOXIC STRESS

Stress operates along a continuum. Experiencing some stress is a normal and essential part of healthy development. It helps our minds and bodies develop a healthy response. However, when a child experiences stress in powerful, frequent, prolonged, and unpredictable doses, that level of stress can be detrimental to their development and life-long health. Traumatic or toxic stress is an experience that supersedes normal, every-day stressors; toxic stress can stem from domestic violence, child abuse, neglect, or other disruptions to a family. Adverse Childhood Experiences, or ACEs, are examples of traumatic stress that are now commonly acknowledged to be a major determinant of physical and mental health outcomes.

TOXIC STRESS IN EARLY CHILDHOOD

Studies show that by the time children enter preschool, one in four has experienced a traumatic event; in some high-risk populations, that number is even higher. If, at a young age, a child cannot predict where, when, or how much stress they will experience at any given time, their brains and bodies can become hardwired to react more quickly and with a heightened fight, flight, or freeze response. Their hearts can race even in their sleep, and they may not be able to control their body's response to even low levels of stress. Young children who have been exposed to toxic stress may demonstrate symptoms such as missing key developmental milestones, hyper activity or apathy, difficulty sleeping, or increased complaints of physical symptoms like stomach aches. Some children may not exhibit any symptoms until they are school-age or even adults. Later symptoms can manifest in many ways such as difficulty concentrating or poor health.

According to census data from 2008-2010, approximately 75.6% of Iowa children under age 6 live in households where their single parent or both parents are in the workforce. Most of these children spend a large portion of their day in child care, either in a home or center setting. Thus, early care and education professionals touch the lives of many children and parents in Iowa.

10 TYPES OF STUDIED CHILDHOOD EXPERIENCES

ABUSE

- 1 Physical
- 2 Psychological
- 3 Sexual

NEGLECT

- 4 Physical
- 5 Psychological

HOUSEHOLD DYSFUNCTION

- 6 Substance abuse
- 7 Parent with mental illness
- 8 Incarcerated parent
- 9 Divorce
- 10 Domestic violence

CHILDREN WHO EXPERIENCE TRAUMA MAY:





Be confused by what is dangerous



Miss developmental milestones



Fear separation from familiar people or places

By recognizing possible risk factors in families, developing positive coping mechanisms with caregivers, and helping families connect to resources in their communities, early care and education professionals can help eliminate a child's exposure to traumatic stress outright or greatly minimize the possibility of long-term, negative outcomes.

This work is especially crucial because of what we now know about the importance of early childhood mental health. The last three decades have produced significant research linking positive relationships, environments, and experiences in early childhood with brain development, physical health, and social, emotional and behavioral wellbeing across the lifespan. This growing field of research and practice emphasizes early childhood as the most important time to foster healthy mental and physical child development through positive relationships and interactions with caregivers both in and outside the home.

SUCCESSFUL MODELS

The Orchard Place Child Guidance Center's mental health consultation provides specialized child mental health awareness and education to parents, educators, child care professionals and others who care for children in Polk, Dallas, and Warren counties. This effort is funded by United Way of Central Iowa. Its overarching goal is to have a positive impact on the mental health of staff, children, and families served in their child care centers. This effort promotes a positive work environment for staff; provides education to staff; offers individualized mental health assistance to children and families; helps promote supportive, low-stress learning environments for children on-site; and links the services provided in the child care setting to services within the community that strengthen the whole family.

The Head Start Trauma Smart program developed out of the Crittenton Children's Center in Kansas is a model showing positive outcomes for Head Start programs. Through this model, professionals in Head Start work to build an environment where all of the adults in a child's life work together to help a child enter kindergarten prepared to succeed socially and academically. The model is a multi-generational community approach whereby caregivers, teachers, and all school staff are trained through a trauma lens and are prepared to help children cope with stress. Children and staff are also taught strategies for self-care to build personal and collective resilience.

FIND YOUR CONNECTION

Early care and education professionals equipped with an understanding of the impact of toxic stress can make profound progress not only in mitigating outcomes but also in preventing exposure to toxic stress by supporting families of young children. Here are some responses to consider:

- **Encourage a trauma-informed environment in your setting.** By becoming trauma-informed and supporting a trauma-informed environment in your organization or home, you can help create a safer, more stable and nurturing environment for the children and families with whom you work.
- 2 **Educate your peers.** Educate all levels of your organization including administration and on-theground staff about the impact of toxic stress on both children and adults.
- **Focus on a whole-family approach and integrate with other services in the community.** Seek opportunities in your community to support children as well as their caregivers. Partners could include health centers, family centers, violence prevention organizations, parent engagement groups, and faith-based groups.

Find more information and a list of references at www.iowaaces360.org. To learn more about the Connections Matter community effort, visit www.connectionsmatter.org.





REFERENCES

Child and Family Policy Center. (2015). ACEs in Iowa: State patterns and policy implications [Report]. Des Moines, IA.

Child Care in America. (2012). 2012 State Fact Sheet. Arlington, VA: Child Care Aware of America.

- Felitti, V. J., Anda, R. F., Nordenberg, D., Williamson, D. F., Spitz, A. M., Edwards, V., . . . Marks, J. S. (1998). Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults - The adverse childhood experiences (ACE) study. American Journal of Preventive Medicine, 14(4), 245-258.
- Gudmunson, C. G., Ryherd, L. M., Bougher, K., Downey, J. C., & Zhang, D. (2013). Adverse childhood experiences in Iowa: A new way of understanding lifelong health.
- Head Start Trauma Smart. (2014). Retrieved August 1, 2015 from: http://traumasmart.org/.
- Iowa Association for Infant and Early Childhood Mental Health. (2015). Retrieved July 15, 2015 from: http://promotingmentalhealthiowa.org/.
- Orchard Place. (2015). Retrieved August 4, 2015 from: http://www.orchardplace.org/.
- Zero to Three. (2015). Retrieved July 18, 2015 from: http://www.zerotothree.org/.