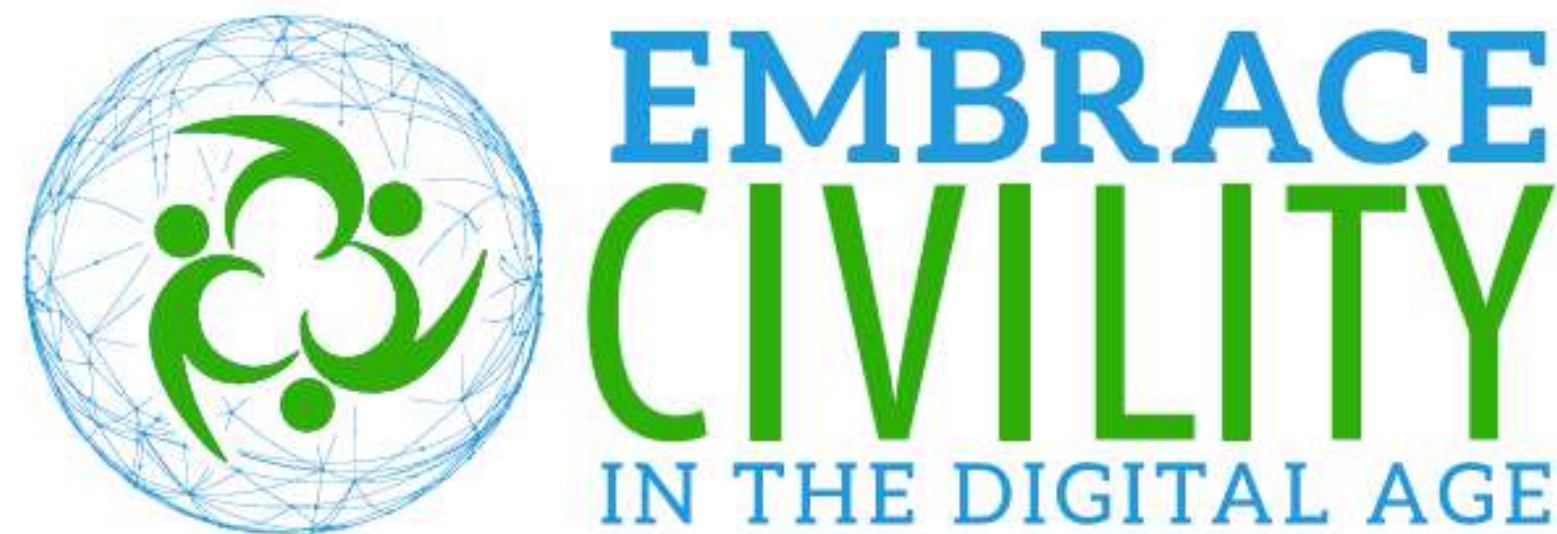


TRAUMA, RESILIENCE, AND EQUITY IN THE AGE OF COVID-19 AND BLACK LIVES MATTER



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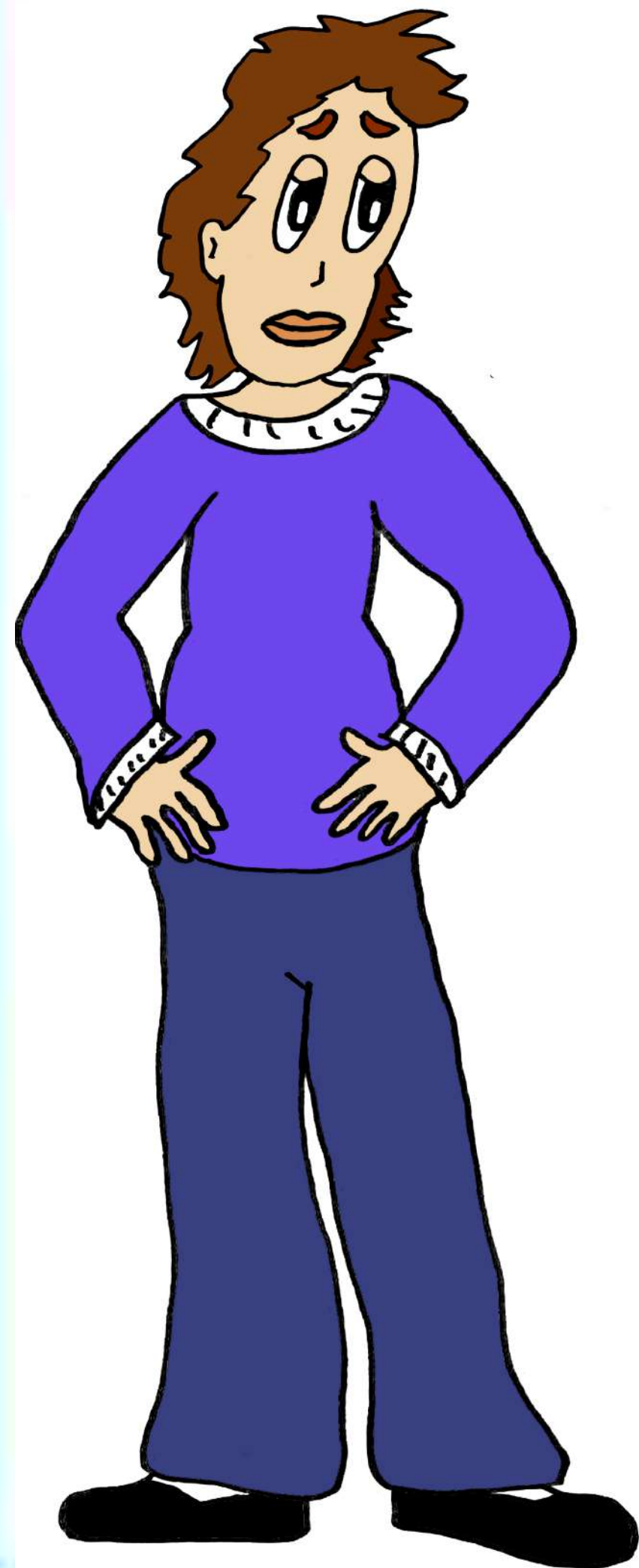
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How Student Experiences of Covid-19 and Black Lives Matter Interface with Trauma

COVID-19 AMPLIFYING FACTORS



Illness or death of family or friends

Loss of structure and routine

Social isolation and loneliness

Loss of trust in our state and federal political institutions

Inequities in healthcare

Economic hardships

School disruption

Food or housing insecurity

Increases in domestic violence

Media Influence

Distress of caregivers

Increases in parental alcohol and drug abuse

Unable to participate in favorite activities

Loss of trust in adult ability to ensure safety

COVID-19 AMPLIFYING FACTORS

Prolonged adverse event

Lots of
uncertainty

Seemingly
unending

Rapid emergence of
super spreader events

Much remains unknown
or what was thought to
be accurate changes

Massive disruption
happened quickly

Universal impact
on activities

Political and
social disharmony

Universal
global impact

Unable to
access normal
sources of
support

Lack of consistently
reliable information

Resistance to
protection measures



RACIAL MINORITIES – SYSTEMIC TRAUMA

African-American

Native American

Latinx

Never-ending racism

Historic poverty

Police violence

Unequal funding of schools

Health challenges
– associated with
poverty and ACEs

Housing
discrimination

School to prison
pipeline

Racially biased tests

Unconscious bias

Job discrimination

Systemic
imprisonment

Limitations on
educational advancement

Discriminatory
harassment

White supremacy

Unequal sentencing

Discriminatory
school discipline

IMPACT OF COVID-19 ON DISADVANTAGED

Considered "essential workers" – forced to work in unsafe conditions

No social power to protest against unsafe conditions

Shaming and blaming of their community by media, institutions, government

Higher death rates

Urban density increases risks

Multi-generational housing raising risk for family members

Loss of elders

Food insecurity

Less access to medical care

Increased unemployment

Homelessness

Financial insecurity

Reliance on unsafe public transportation

No financial reserves

Evictions

Lack of water on reservations

IMPACT OF BLM ESPECIALLY ON BLACKS

Constant anxiety
and fear – 24/7

Not sleeping or eating

Intense feelings of
anger and despair

Memories of past bad
experiences coming to
present attention

Remembering
distressing stories
and lessons from
parents and others

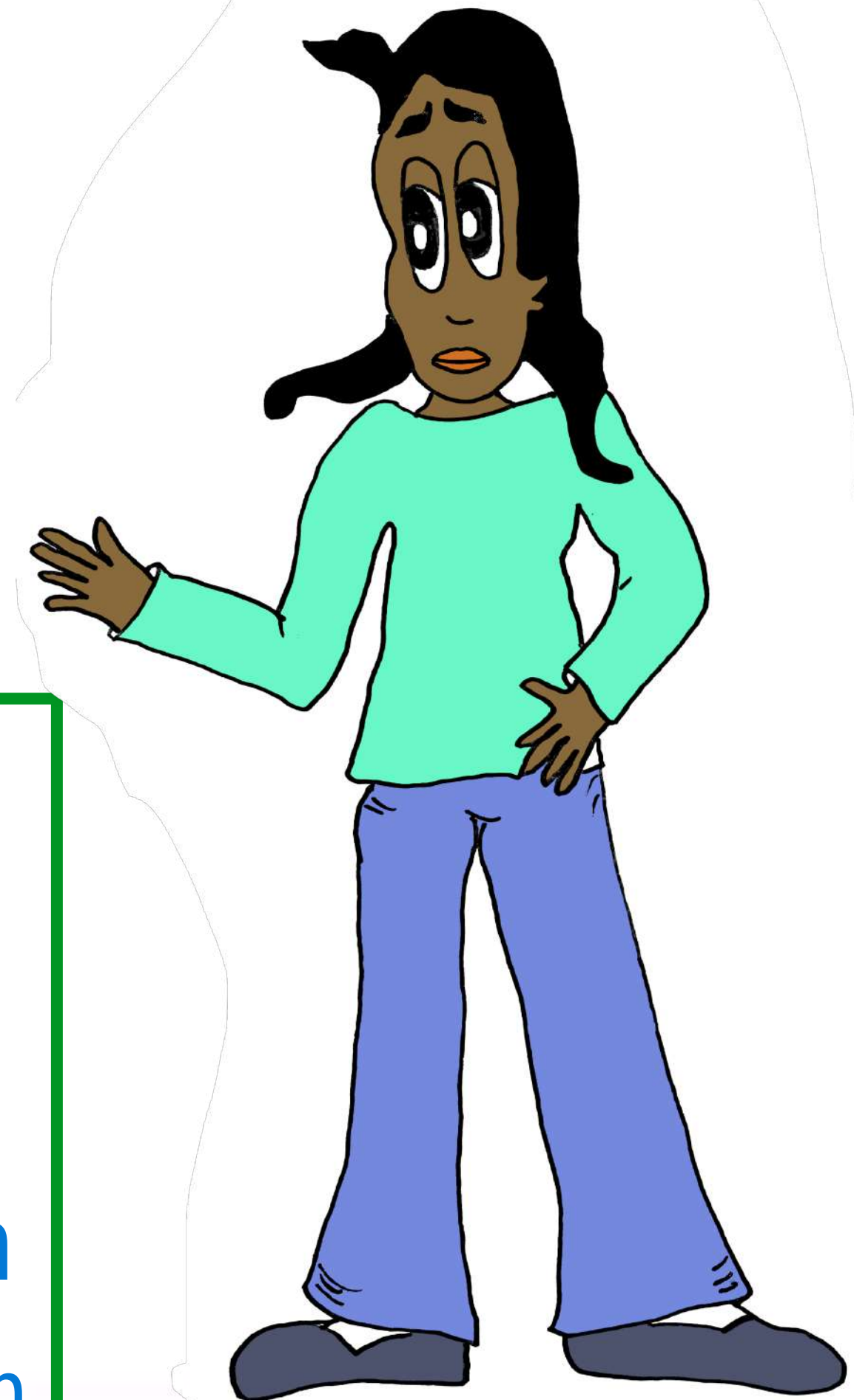
Not leaving their
house because they
don't want to die

Fear of attack in
public places

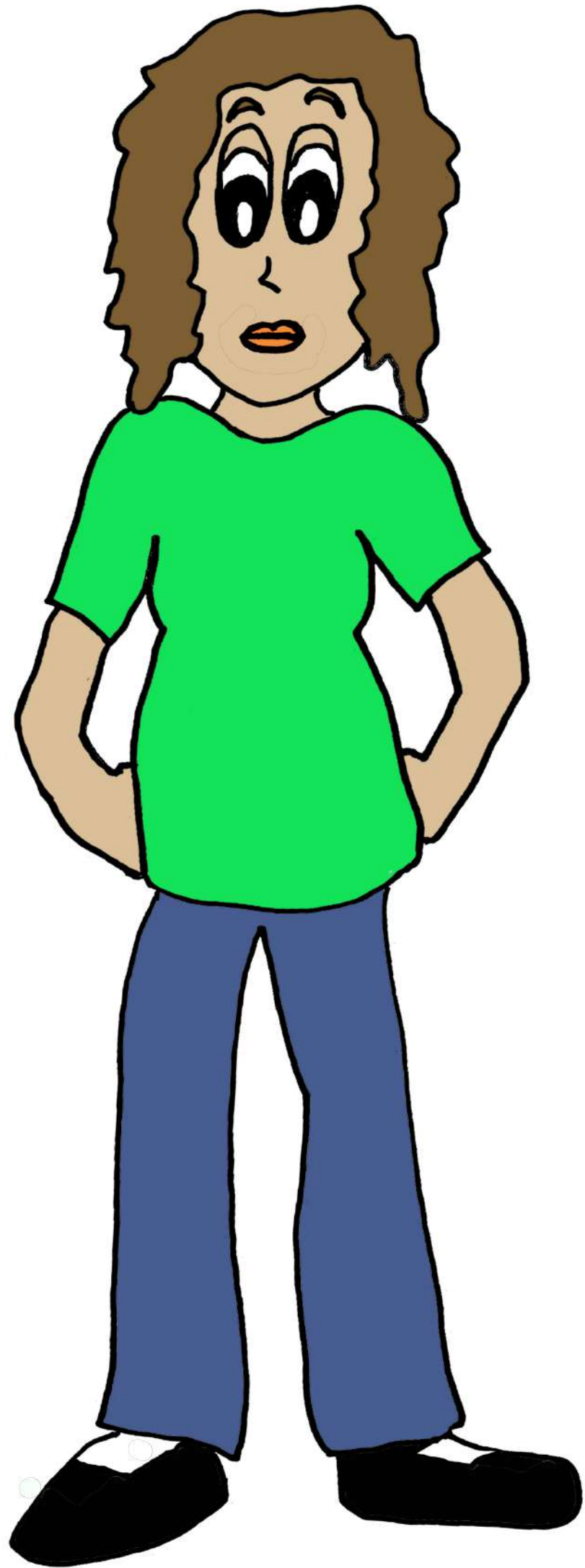
Aware everyone is
watching them

Intense fear
of police

Fear someone will
shoot them, run
them over, or call
the police on them
– who will kill them



EARLIER EVIDENCE OF INCREASED RISK



PREVALENCE OF CHILDHOOD TRAUMA

Groups at increased risk of exposure to trauma:

- Youth of color ages 12 to 19
- African American youth living in urban, low-income communities
- American Indian/Alaska Native (AI/AN) children and youth
- Children and youth with disabilities
- Refugees
- Children and youth who are homeless and living in poverty
- LGBTQ children and youth



Trauma-Sensitive Schools
TRAINING PACKAGE

UNDERSTAND • BUILD • LEAD

INTERFACE BETWEEN COVID-19 AND ACEs



The more ACEs, the greater the risk of obesity, diabetes, heart disease, stroke, COPD

People with pre-existing conditions of obesity, diabetes, heart disease, stroke, COPD are at higher risk of death from Covid-19

Disadvantaged racial minorities experience many ACEs

Disadvantaged racial minorities have a much higher death risk from Covid-19

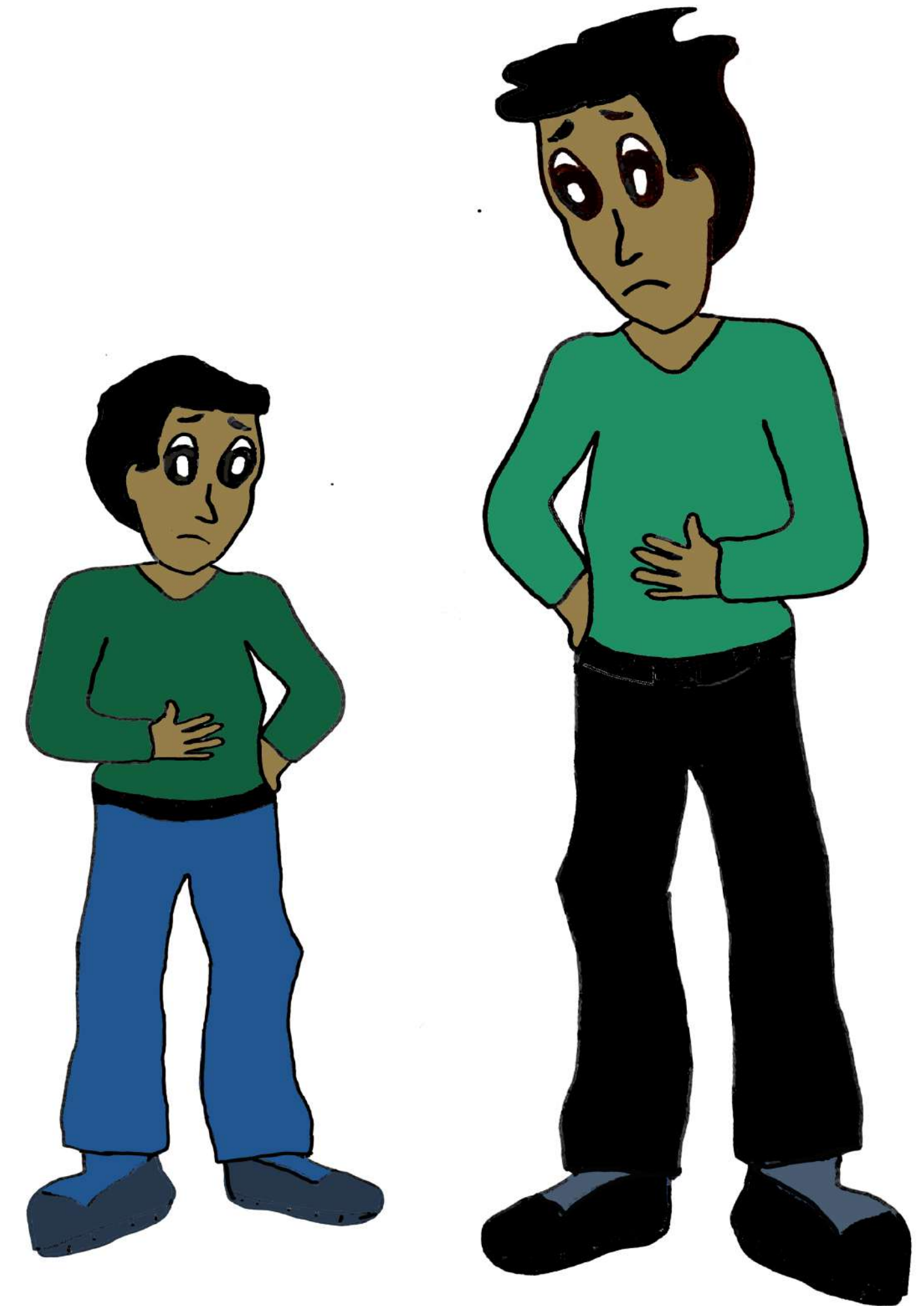
Absent from the news, is the potential harmful impact that trauma has had on the health of racial minorities, which likely has increased risk

TRANSGENERATIONAL RACIAL TRAUMA

Children of trauma survivors have higher levels of evidence of the experience of trauma, even if they did not experience trauma in their lifetime

Expanding field of study

Populations being studied include survivors of the Holocaust, the Khmer Rouge killings in Cambodia and the Rwandan genocide, the displacement of American/Canadian indigenous people and the enslavement of African-Americans – and mice



HOLOCAUST FAMILIES

Four Types of Parents

Victim

Difficulty moving on from original trauma

Avoider

Numb, emotionally detached, intolerant of weakness, silent

Fighter

Continuing to engage in the battle

Survivor

Have moved beyond the trauma

Four Characteristics of Offspring

Overly Protective

Of parents

Controlling

High need for control

Obsessed

With original trauma stories

Dependent

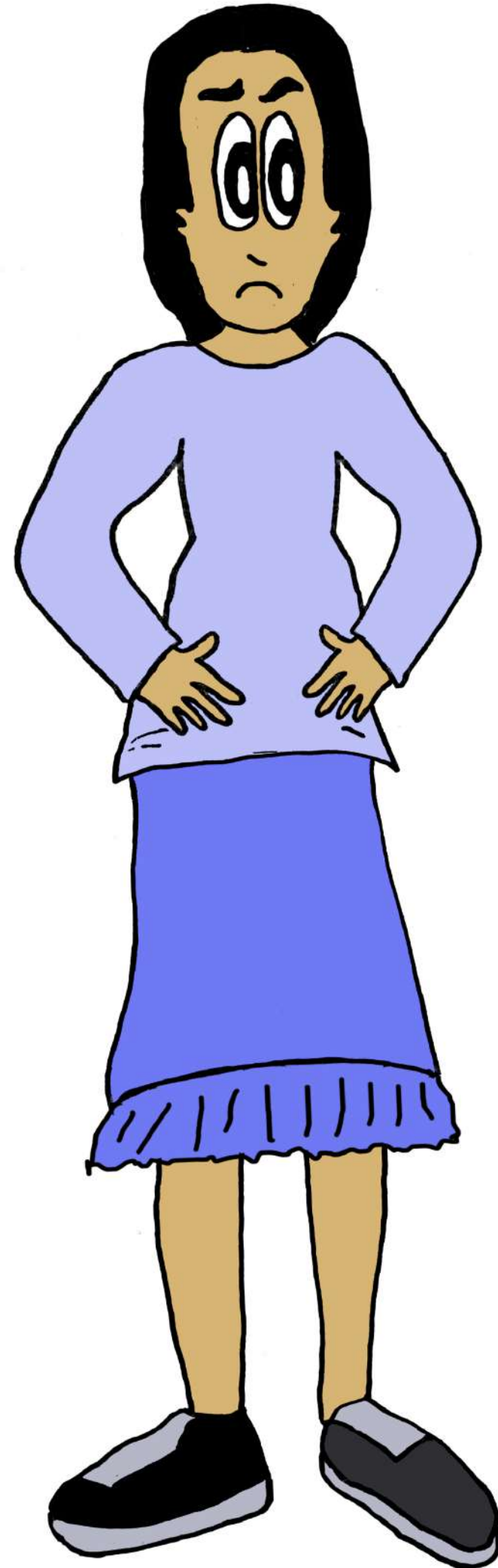
Immature dependency

NATIVE AMERICAN & AFRICAN AMERICAN

Native Americans

Studies to those who were forced to attend "Indian Schools"

Children and grandchildren are more likely to report psychological distress and suicide attempts and to have learning difficulties and problems in school



African American

Less directly studied

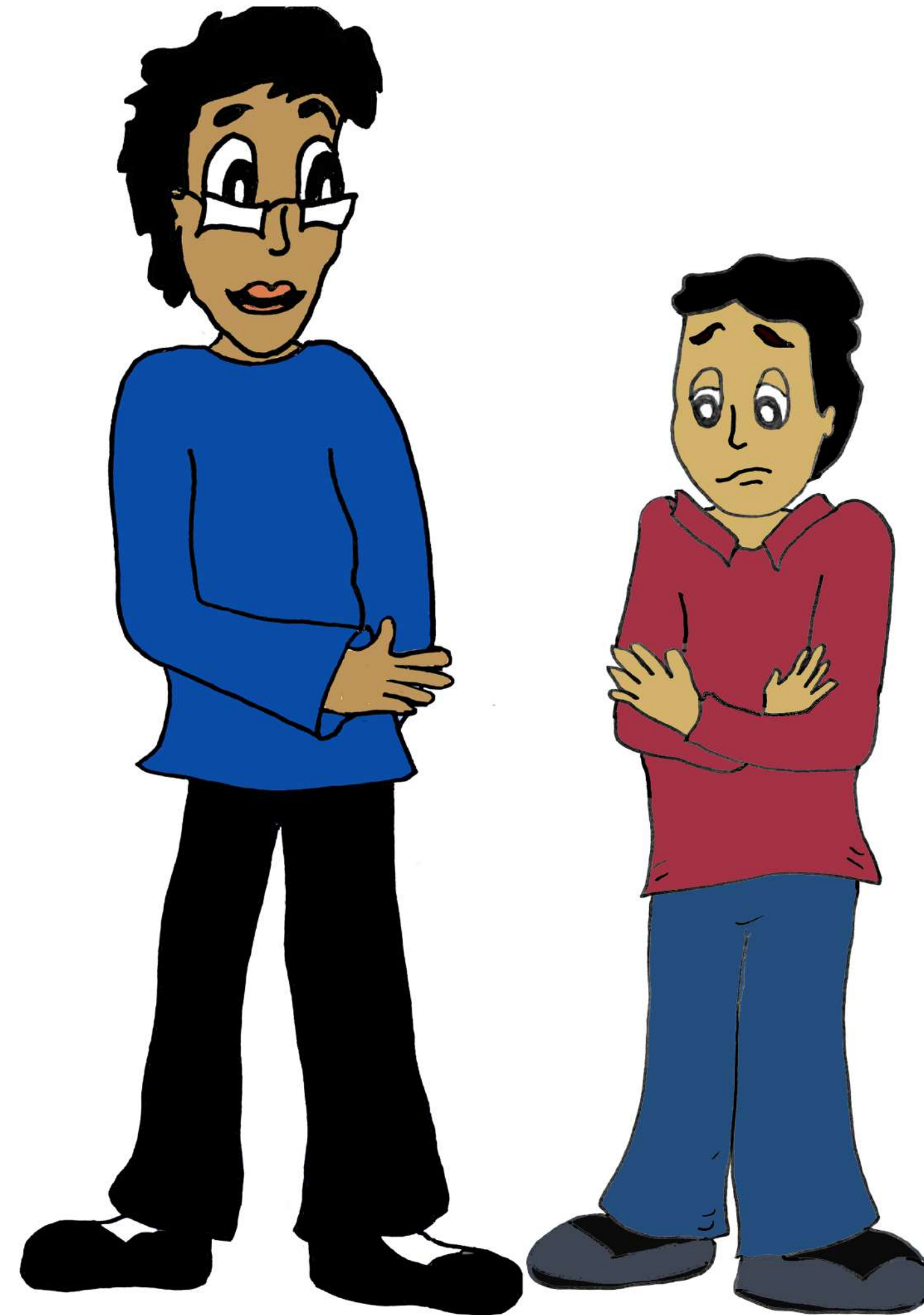
African American students who report high rates of perceived discrimination also had higher levels of uncontrollable hyperarousal, feelings of alienation, worries about future negative events and perceiving others as dangerous

THE ROLE OF STORIES

Our stress is
unique to us

We share stories of
our lived experiences

To help our loved ones
when they encounter
the dangerous world



This may lead to
general distrust
of those outside
the group and
in-group
insularity

TRANSMISSION MECHANISMS

Two Main Transmissions

Impact on Parenting

Fear-based survival messages

"Don't ask for help"

"It is dangerous to show weakness"

The messages parents of color provide to their children related to the dangers of and surviving an encounter with the police

Epigenetics – The Science of Gene Expression

Nature – DNA is permanent

Nurture – How genes are expressed can change

Children of trauma survivors show changes in genes associated with traumatic distress and depression

APPLYING WHAT WE KNOW

The 12 Core Concepts

**Concepts for Understanding Traumatic
Stress Responses in Children and Families**

NCTSN



To the concerns of Covid-19 and racial minorities

Traumatic experiences are inherently complex

General Factors

- Type of experience and exposure
- Prior trauma
- Developmental level

Covid-19 Factors

- Universal
- Profound disruption of lower income families
- Social isolation
- No end in sight

Racial Minority Factors

- Centuries of trauma impacting multiple generations
- Lower income and social power
- Long unsuccessful history of striving to stop harm
- All being triggered by BLM

Trauma occurs within a broad context that includes children's personal characteristics, life experiences, and current circumstances

General Factors

- Intrinsic factors of temperament, prior exposure
- Extrinsic factors of family, community, and culture

Covid-19 Factors

- No prior experience
- Children have been isolated, but now some and their families are being placed at increased risk by returning to school

Racial Minority Factors

- Community-wide trauma of many for generations
- Children are born into situations of toxic stress
- Killing of blacks by police keeps happening

Traumatic events often generate secondary adversities, life changes, and distressing reminders in children's daily lives

General Factors

- Secondary adversities include family separation, financial loss, relocation
- Reminders of adversity and loss

Covid-19 Factors

- What may be considered "secondary adversities" are all factors of the overall traumatic experience
- Putting on a mask is reminder of risk

Racial Minority Factors

- Community-wide secondary adversities associated with poverty, fear of police, anticipation of discrimination
- BLM is a reminder

Children can exhibit a wide range of reactions to trauma and loss

General Factors

- Wide range of post trauma reactions that vary in nature, onset, intensity, frequency, and duration
- Impacted by protective factors

Covid-19 Factors

- Reactions to trauma likely highly related to family stability, illness, risks to family members, level of infection in region

Racial Minority Factors

- Transgenerational trauma can also lead to a wide range of outcomes, including those who remain in a state of traumatic distress to those who are pursuing or have found paths out of such distress

Danger and safety are core concerns in the lives of traumatized children

General Factors

- Experience of adversity can undermine child's sense of protection and safety
- Ensuring safety is critically important

Covid-19 Factors

- As communities reopen, and some schools reopen, children's feeling of safety will vary depending on many factors

Racial Minority Factors

- Many racial minority children may actually not know what it feels like to feel totally safe when at school or in public
- The danger racial minorities face is the core issue being addressed by BLM

Traumatic experiences affect the family and broader caregiving systems

General Factors

- The ability of caregiving systems, including families, schools, and communities, to provide support is important for effective intervention

Covid-19 Factors

- Shared trauma – the family and caregiving systems, including schools, are all experiencing this trauma together

Racial Minority Factors

- The extended family has experienced the trauma
- Schools have not effectively address underlying concerns associated with racism

Protective and promotive factors can reduce the adverse impact of trauma

General Factors

- Protective factors buffer the adverse effects of trauma
- Promotive factors enhance child's positive adjustment
- Level of protective and promotive factors varies

Covid-19 Factors

- More stable families can provide protective and promotive factors
- Less stable families and those directly impacted by loss likely cannot

Racial Minority Factors

- More stable families can provide protective and promotive factors
- Less stable families cannot

Trauma and posttrauma adversities can strongly influence development

General Factors

- Trauma profoundly influence children's acquisition of developmental competencies, and their capacity to achieve milestones in cognitive functioning, emotional regulation, and interpersonal relationships

Covid-19 Factors

- Insight into how the Covid-19 trauma has impacted children will unfold in the future

Racial Minority Factors

- Clear evidence of the profound harm to the development of racial minority children associated with the transgenerational trauma experienced by their families

Developmental neurobiology underlies children's reactions to traumatic experiences

General Factors

- Significant trauma can lead to neurobiological disturbances
- Past trauma that has resulted in neurobiological disturbances can impact response to current

Covid-19 Factors

- The neurobiological impact on children experiencing Covid-19 will likely be impacted by their stage of development, past trauma, and family circumstances

Racial Minority Factors

- Racial minority children are born into families experiencing racism
- Their neurobiological development has already been impacted and will continue to be impacted

Culture is closely interwoven with traumatic experiences, response, and recovery

General Factors

- Culture can affect the meaning that a child or family attributes to adversity, how they respond, and their expectations regarding self, others, and social institutions

Covid-19 Factors

- Racial minorities and those living in poverty are at profoundly higher risk of serious illness, death, unemployment, and all other challenges

Racial Minority Factors

- The culture of racial minority families is interwoven with their traumatic racism experiences

Challenges to the social contract, including legal and ethical issues, affect trauma response and recovery

General Factors

- Traumatic experiences often constitute a major violation of expectations of the child and family regarding the roles and responsibilities of key social institutions

Covid-19 Factors

- In the US, key social institutions in many states have acted in a way to increase the trauma
- All social institutions have been profoundly challenged

Racial Minority Factors

- Racial minority families have a centuries long history of key social institutions acting against them or not fully supporting them

Working with trauma-exposed children can evoke distress in providers that makes it more difficult for them to provide good care

General Factors

- Educators and mental health providers face personal challenges when they assist children and families
- Self care is essential

Covid-19 Factors

- Educators and mental health providers are now also experiencing trauma

Racial Minorities Factors

- Educators and mental health providers who are not racial minorities may have challenges understanding the depth of trauma experienced by people of color

LIFE & STYLE

How 'The Talk' Is Evolving Inside Black Families Amid Protests

Some parents are bringing younger children into coming-of-age conversations about racism and violence—and supplementing that with advice on how to take action to change it



Black parents have always faced decisions about how and when to introduce children to the tough realities that come with being Black in America. Videos of the killing of Black men, and the protests and social unrest driven by the images, has forced some parents to begin discussions earlier than they wanted.

“The only way we can fully protect ourselves is through the cameras on our phones,” Mr. Johnson says he advises other Black parents. “That’s the only way we get a shot at justice.”

Several Black parents said in interviews that their family conversations over the past few months are not about accepting the status quo with racism but how to get involved and take action to change it.

Evidence of Post
Traumatic Growth

Empowerment

Commitment to
Social Justice

SCHOOL BASED RACISM

African-American

Native American

Latinx

Never-ending racism

Police violence

Unequal funding of schools

Unconscious bias

School to prison
pipeline

Racially biased tests

Discriminatory
harassment

White
supremacy

Discriminatory
school discipline

Limitations on
educational advancement

IS IT POSSIBLE ...

To effectively implement Trauma Informed Practices in schools without effectively stopping the practices of schools that inflict trauma on students?

REFLECTION QUESTIONS

Please consider these questions

- What are the ways you can use this insight to improve on what you are currently doing?
- What barriers are present or what additional supports would be helpful for you to do so?
- What are the ways you think your school could use this insight to improve on what your school is currently doing?