National research has demonstrated that experiencing traumatic events before age 18 can create dangerous levels of stress, which impacts healthy brain development if there is no intervention or support. As youth get older, exposure to trauma can increase the likelihood they will engage in risky behaviors and have more incidents of poor physical and mental health outcomes in adulthood. An accumulation of these adverse childhood experiences (ACEs) compounds these risks.

**Trauma Exposure in Monroe County**

In 2015, the Monroe County Office of Mental Health partnered with the Department of Public Health and local school districts to include 11 ACE questions in the Youth Risk and Behaviors Survey (YRBS). This groundbreaking initiative provided a detailed analysis of the prevalence of ACEs in our community and the relationship between an accumulation of ACEs and high-risk behaviors. It illustrated the clear and unequivocal correlations between risk for lower academic performance as well as concerning health, mental health, and behavioral outcomes such as depression, suicidal ideation and attempt, substance use, and violence. This analysis further underscored the need for continued expansion of trauma-responsive practices across the entire service system for both young people and adults.

**Kasserian Ingera – And How Are the Children?**

“Kasserian Ingera” (which translates to “and how are the children?”), is the traditional greeting passed between Masai warriors in Africa. This everyday greeting shows the high value they place on their children’s well-being – as a reflection of the well-being of their entire society. Even warriors without children of their own use the greeting, and when life is good, warriors respond back with, “All the children are well.” This concept provides a perfect backdrop to some exciting work taking place in the Rochester area – **From ACEs to Assets: Growing Resilience in Monroe County**

- 64% of students in Monroe County reported experiencing one or more traumatic events.
- Nearly 40% report experiencing 2+ ACEs (the accepted threshold, based on national data, for targeted intervention and support).
- Youth with 2+ ACEs are:
  - 9 times more likely to report having attempted suicide;
  - 5 times more likely to report having felt sad for 2+ weeks within a 12-month period; and are
  - 4 times more likely to have come to school under the influence than are youth with <2 ACEs.

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1. Physical abuse
2. Emotional abuse
3. Sexual abuse
4. Community violence
5. Poverty
6. Mental Illness in home
7. Addiction within home
8. A family member incarcerated
9. Not living with both parents
10. Violence among adults at home
11. Lack of support within family

**In Monroe County, 11 ACE Indicators Have Been Examined**

- 36% (608) No ACEs Flags
- 14% (234) 1 ACEs Flags
- 9% (154) 2 ACEs Flags
- 15% (254) 3 ACEs Flags
- 27% (452) 4 or More ACEs

**Data Source:** YRBS/ACEs survey for Monroe County, NY (n=1704)

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1 Adverse childhood experiences (ACEs) are stressful or traumatic events, including abuse and neglect. They may also include household dysfunction such as witnessing domestic violence or growing up with family members who have substance use disorders. ACEs are strongly related to the development and prevalence of a wide range of health problems throughout a person’s lifespan, including those associated with substance misuse.
Resilience Trumps ACEs

In 2017, the Monroe County YRBS/ACEs initiative expanded this important work to include indicators of resilience. This provides an unprecedented opportunity to look at the role that increasing resilience plays in reducing risk for all young people. *While this data illustrates the significant level of exposure to trauma in our region, the analyses also show that we can mediate the impact of this exposure by concentrating on those interventions that build resilience in young people.* Specifically, young people were asked the degree to which they had support from their parents, non-parental adults, school, and community. The findings demonstrate that caring adults make a difference and mitigate risk for all youth including those with ACEs. For example, when youth have at least one non-parental adult support, the risk for substance use, as indicated by being under the influence at school; suicide ideation; and depression all decline. In addition, when youth feel they matter to their community, risk for suicide ideation and depression decline.

Everyone Has a Role to Play

By focusing our efforts on what all adults can do to build resiliency in youth, we minimize risks and help all youth thrive – even in the face of trauma. Simple actions like acknowledging a young person by name, asking questions about their interests and talents, and compassionately listening forms the foundation for building genuine relationships with trusting adults. While we may focus on the professionals who work with youth like educators, counselors, pediatricians, etc., *there is a role for every adult in our community* to play in increasing the health and well-being in youth. We can all help young people understand that they matter to us, that we care, and that they are valuable beyond measure.

Creating a Culture of Health

Creating a culture of health begins with addressing the experiences of young people and minimizing the impact of barriers to wellness such as Adverse Childhood Experiences, social disparities, and systemic silos. Whether we consider the experiences of Monroe County youth or the health of adults, the results are undeniable. Trauma and adversity have a lasting impact on both our personal health and the overall health of our community. Most importantly, the data point to the opportunity that each of us has to minimize these risks and improve outcomes in areas of physical and mental health, education, productivity, and relationships.

To learn more, please visit the [CCSI website](http://www.ccsi.org) or contact Dr. Elizabeth Meeker at [emeeker@ccsi.org](mailto:emeeker@ccsi.org)