



#### **Trauma**

Trauma was identified across the region as an underlying core issue affecting health and well-being of community members. Individuals and groups who have experienced trauma see increased risk of disease and death. <sup>43</sup> This is an overarching core issue, which must be considered in all programs to adequately address the other core issues.

# **What's Being Done**

HCWC members are supporting this core issue through:

- Trauma-informed care
- Working to address trauma in schools
- Providing community trainings on adverse childhood experiences (ACEs) and resiliency
- Continued attention to the ways in which regulation can be triggering

## Stress and Trauma as Determinants of Health

Experiences of toxic stress<sup>44</sup> and trauma over the course of life can hinder every aspect of health and wellbeing. The barriers to health and equity begin early in life and build into adulthood, and are tied to systemic, institutional, cultural, and social factors.<sup>45</sup> People who experience more adverse life events are at high risk for chronic conditions, housing insecurity, mental health concerns, and substance use disorders overall.<sup>43</sup> Additionally, childhood experiences of trauma, discrimination, racism, and biases produce a cycle of difficult circumstances—financial, social, psychological—that is difficult to break.<sup>46</sup>

### **Adverse Childhood Experiences**

Trauma and toxic stress experienced in childhood have long-lasting effects into adulthood. ACEs include all types of abuse or neglect, and other potentially traumatic experiences that happen to a person before age 18. ACEs correlate directly with poorer health outcomes including substance abuse, STIs, suicide attempts, and chronic diseases (such as heart disease).<sup>47</sup>

People with high ACE scores experience greater levels of physical, sexual and verbal abuse throughout their life.<sup>48</sup> They are more likely to experience economic insecurity (i.e., having to go without needed food, clothing, transportation, and stable housing); higher rates of homelessness; and partner abuse.<sup>49</sup>

ACEs are tied to systemic, institutional, cultural, and social factors.<sup>50</sup>

 Many reports suggested that more studies should focus on life-course theory (see Glossary for definition) to examine how trauma, life experiences, and stressors influence health and well-being over time.<sup>51,52,53</sup>

#### Historical, Generational Trauma

Trauma experienced throughout one's life can also be tied to historical trauma. Many generations of people from communities marginalized by the dominant culture have been subjected to long-term mistreatment and abuse, which correlates with a higher disease burden and greater health disparities. 54 When generations of families experience significant trauma and toxic stress, this can cause poorer health in future generations due to actual genetic changes and the ongoing stress of their social environments. 55

For many, the opportunity to access appropriate, safe, and culturally relevant health care; education; food; and employment requires relying on institutions that historically have not been a safe space for communities of color, the LGBTQ+ community, women, and survivors of abuse. Community members expressed this during listening sessions and wanted to see more efforts to competently address underlying trauma, life experiences, and stressors that influence health and well-being.

As with Social Determinants Of Health, it should be noted that while experiences of stress and trauma in childhood and adulthood can influence health outcomes, the impact of adverse life experiences can be mitigated by resilience, community support, policies, and resources.

 Trauma-informed policies, health care, and resources can better help to address these issues and can serve as a protective factors to toxic stress and trauma's impact on health.<sup>56</sup>