



# **ADVERSE CHILDHOOD EXPERIENCES (ACE)**

# **AND BREAKING THE CYCLE OF HOMELESSNESS**

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Petaluma, CA

# The Committee on the Shelterless (COTS)

- Comprehensive, integrated programming
  - ACE research w/ Heather
  - Using resilience & recovery knowledge
  - Develop a “whole person” approach  
([www.cots-homeless.org](http://www.cots-homeless.org))
- Leadership & culture



## **COTS' Mission**

Our mission is to  
**break the cycle of  
homelessness**

for children, their  
families and  
single adults  
without children  
in their care



# COTS Agency Overview

- 500 individuals at the Mary Isaak Center, 50 adults in Transitional Housing
- 44 families each year in Shared Transitional Housing
- COTS provides 100,000 bednights a year, 110,000 meals, and delivers 700,000 lbs of food to the community

## Family Programs

•**MIC Family Center**  
(35 beds family TH)

•**7 Shared Transitional Homes**  
(60 beds)

•**3 Intention Houses**  
(12 Beds single family transitional housing)

•**Vida Nueva**  
(75 beds PSH)

## Food Programs

•**Petaluma Kitchen**  
(110,000 meals/yr)

•**Food Box Program**  
(700,000 lbs/yr)

## Adult Programs

•**Mary Isaak Center, ES**  
(100 Beds emerg. shelter)

•**4 Shared Transitional Homes** (32 beds)

•**3 Integrity Houses**  
(12 beds PSH)

Integrated Programs

How do we become  
homeless?

# Homelessness, Trauma & Recovery

- ACEs, adult experiences, homelessness
- Risk behaviors as solutions
- People are not the sum of their problems
  - Body/Mind/Spirit
- Leverage strengths & resilience

# The Adverse Childhood Experiences (ACE) Study



## Summary of Findings:

- (ACEs) are very common
- ACEs are strong predictors of adult health risks and disease
- ACEs are implicated in *the 10 leading causes of death in the U.S.!*
- **“I was actually stunned and I wept over what I saw.”** ACEs researcher Rob Anda, M.D.
- Virtually every study shows that ACEs are strong predictors of homelessness (Burt, 2001)

## What are ACEs? (10 categories)

# A dverse C hildhood E xperiences

1. Sexual abuse before age 18
2. Emotional abuse by parent or loved one
3. Physical abuse by parent or loved one
4. Emotional neglect by parent or loved one
5. Physical neglect by parent or loved one
6. Loss /abandonment of or by parent
7. Witnessed abuse of a loved one
8. Drug/alcohol abuse in the household
9. Mental illness in the household
10. Loved one incarcerated

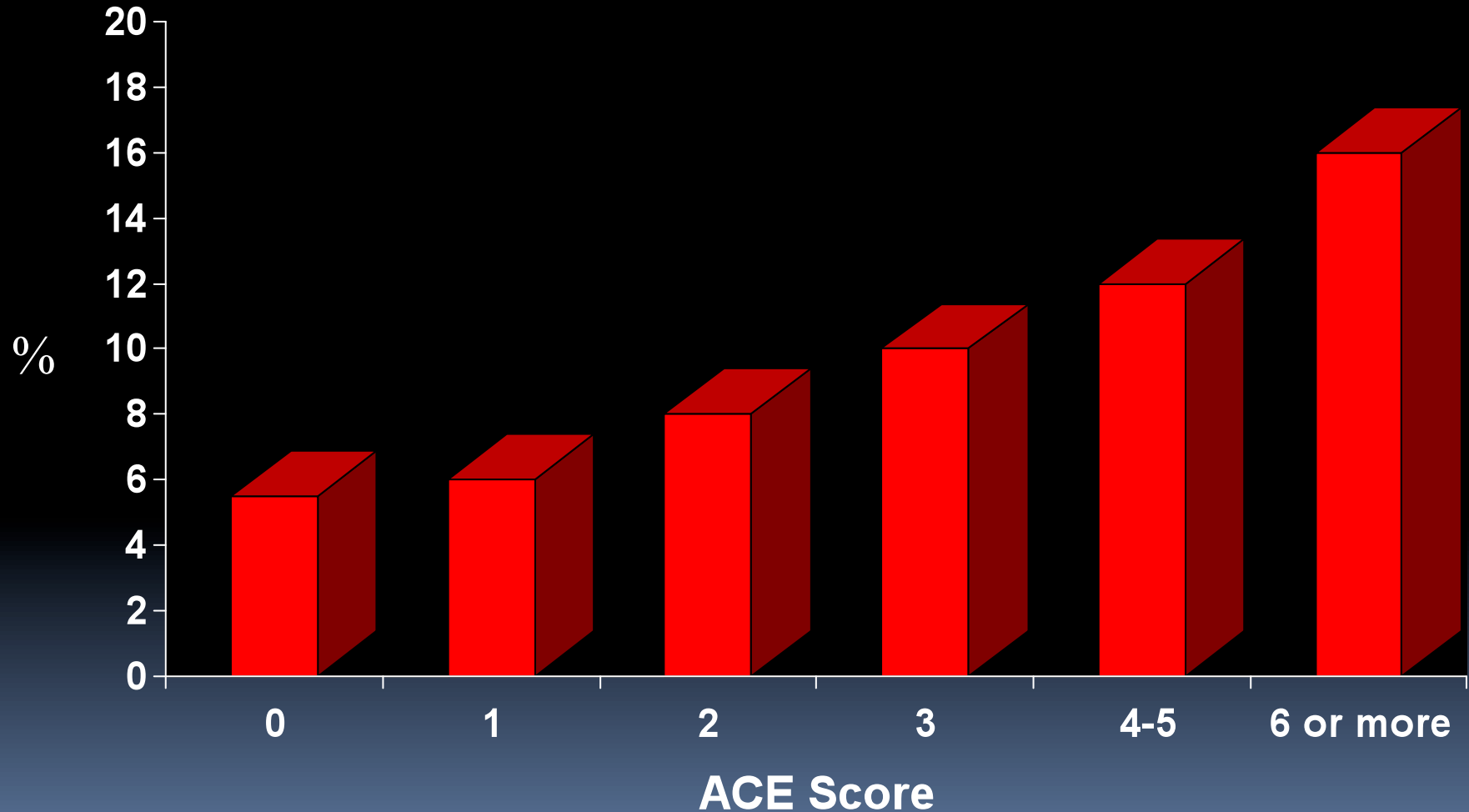


# Adverse Childhood Experiences Score

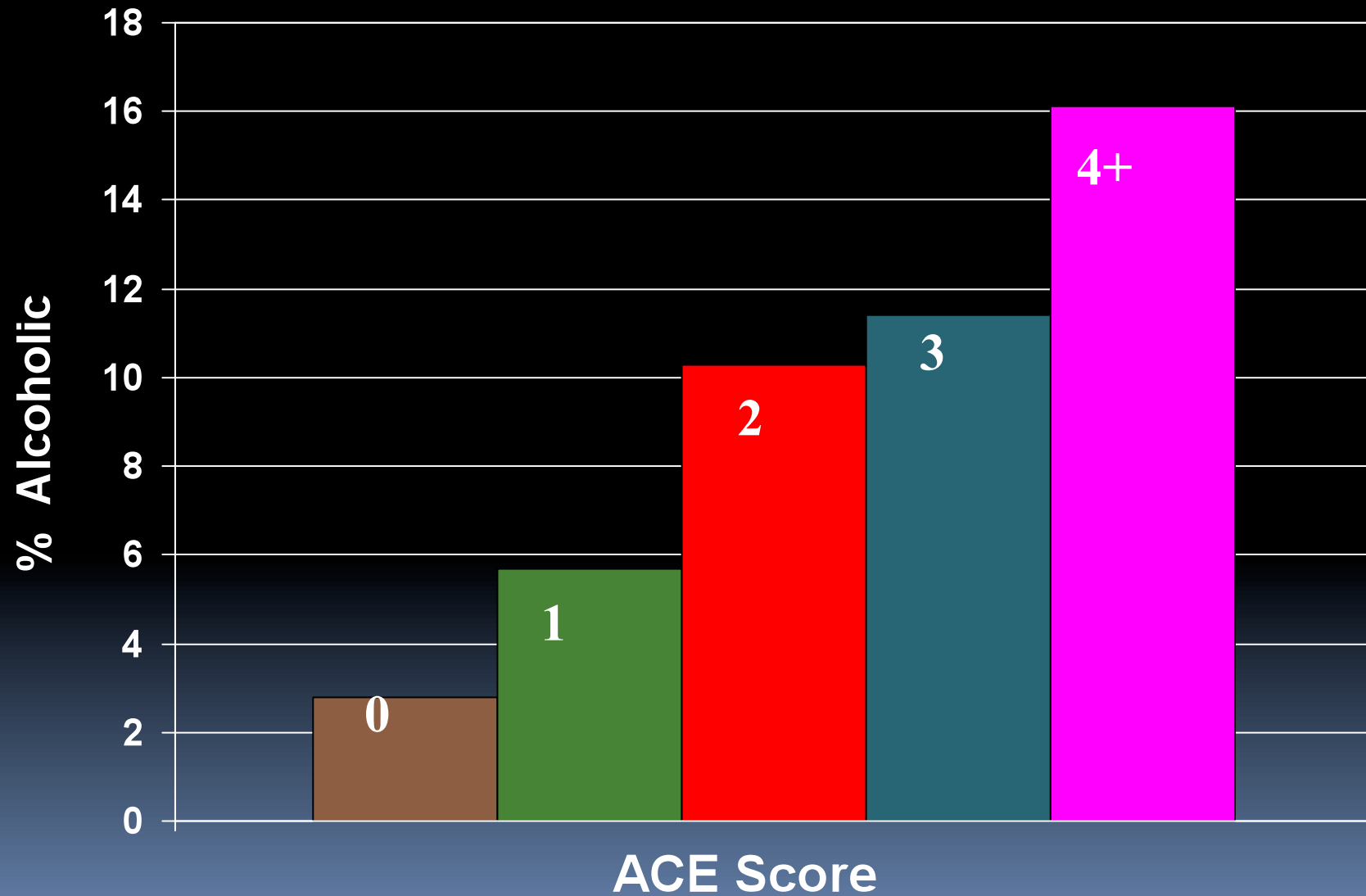
- Original ACE Study
  - More than *half have at least one ACE*
  - > than 25% have 2 – 4 ACE categories
- 1997: ACEs & Homelessness Risk
  - Lack of care + abuse = increase risk by factor of 26
  - Any ACE increased risk by factor of 8
- Current Homeless Respondents
  - > 85% ACE Score of 1 or higher
  - > half (52.4%) ACE Score > than 4



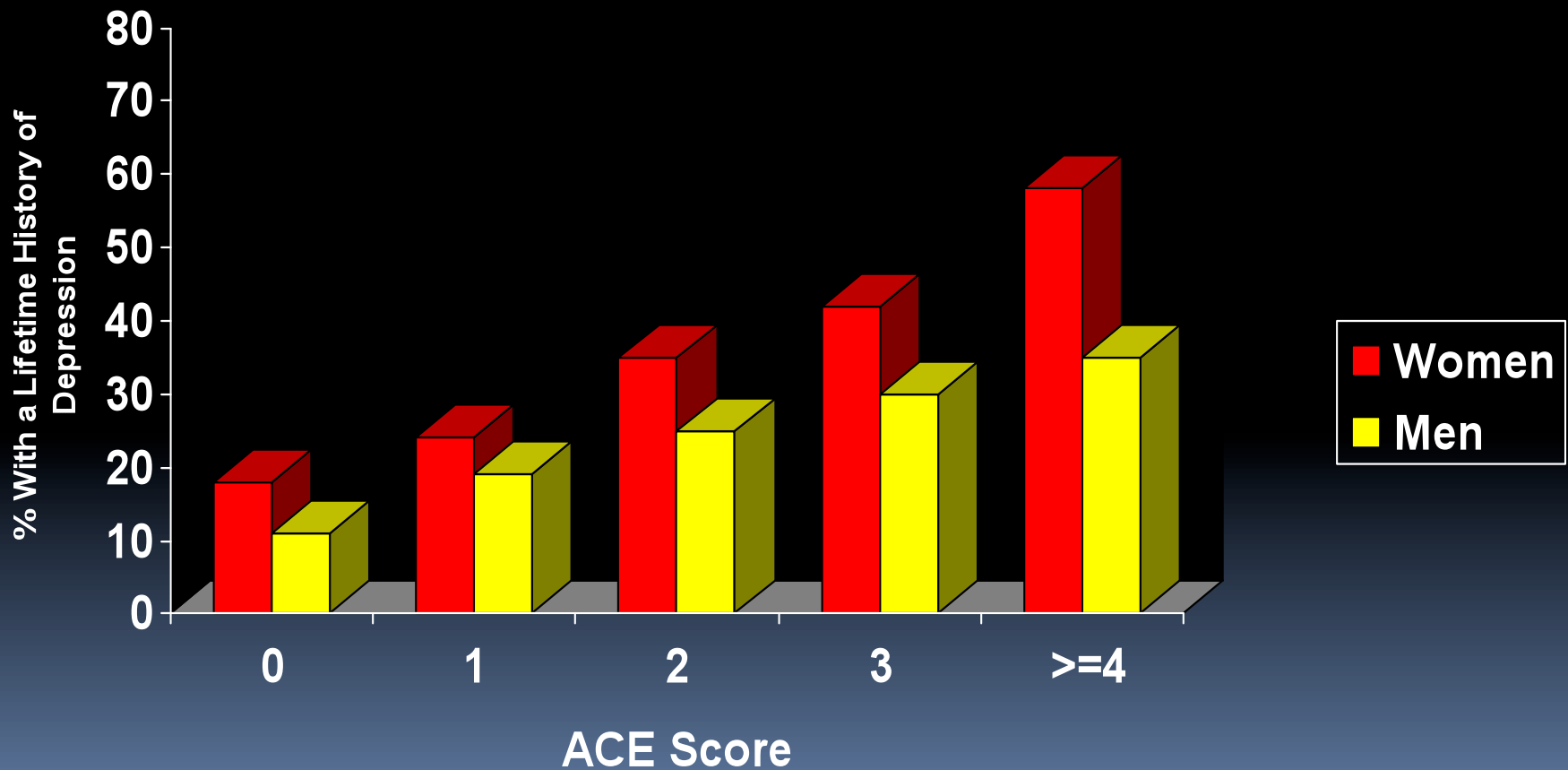
# Adverse Childhood Experiences vs. Current Smoking



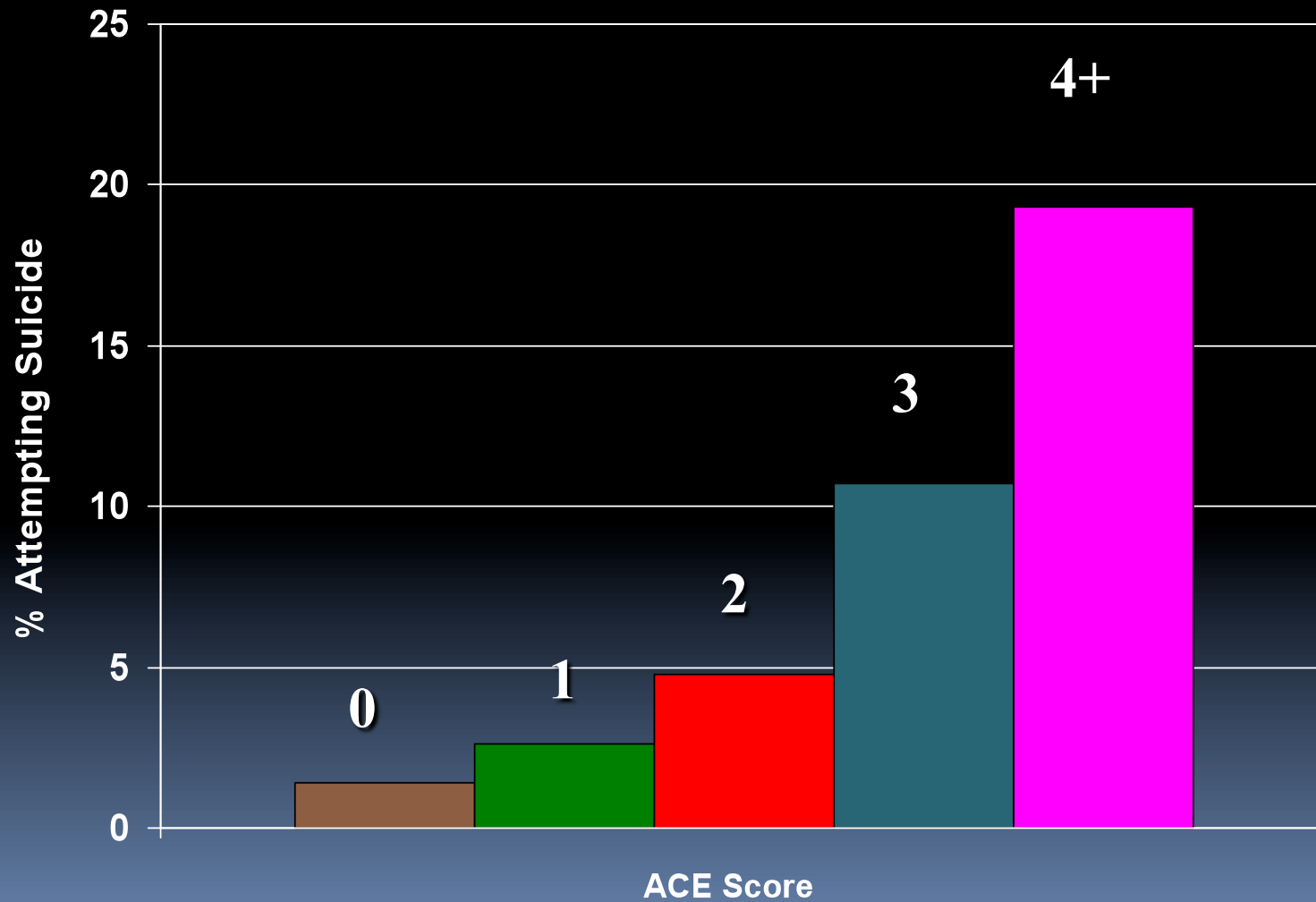
# Childhood Experiences vs. Adult Alcoholism



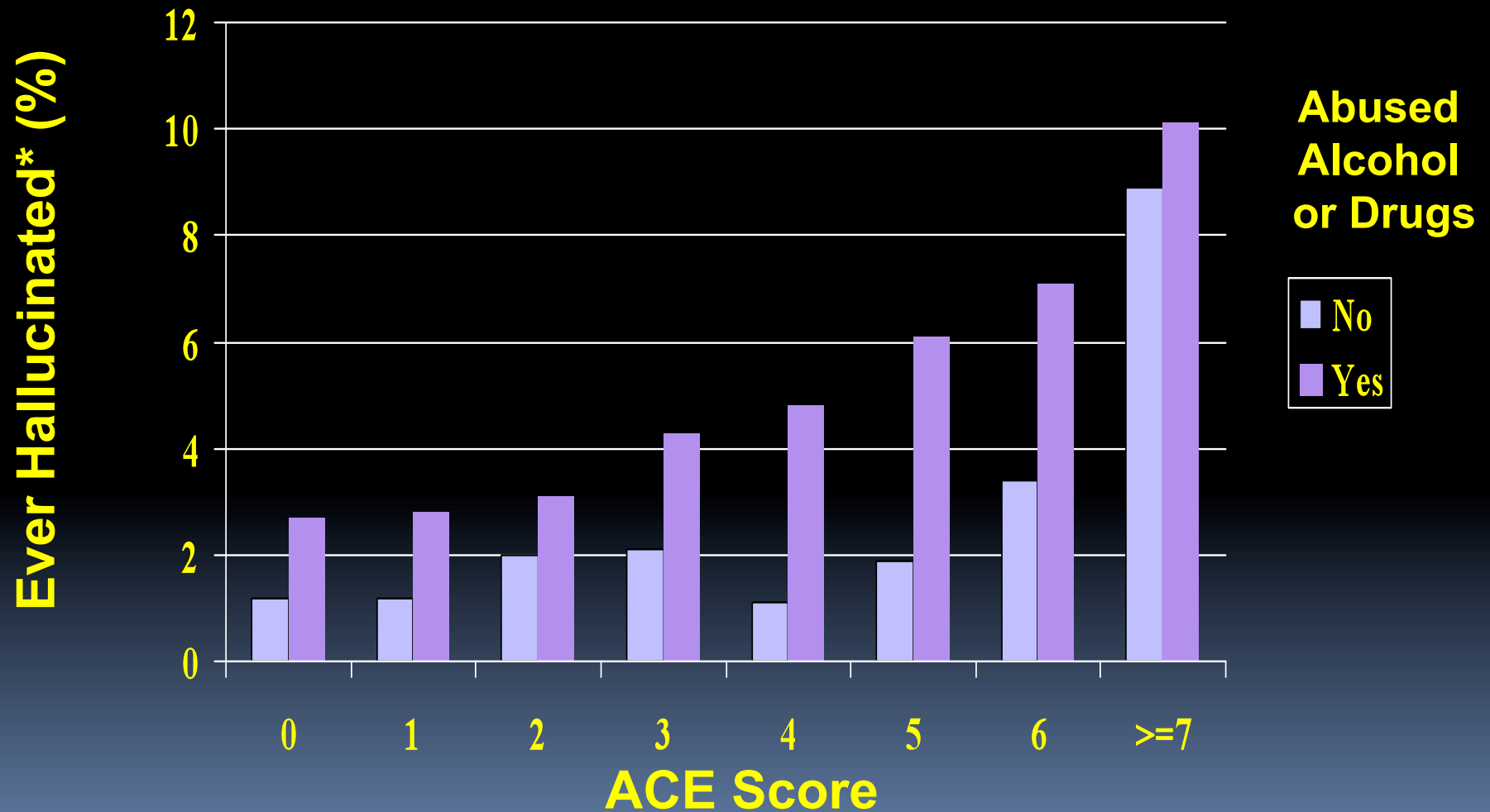
# Childhood Experiences Underlie Chronic Depression



# Childhood Experiences Underlie Suicide

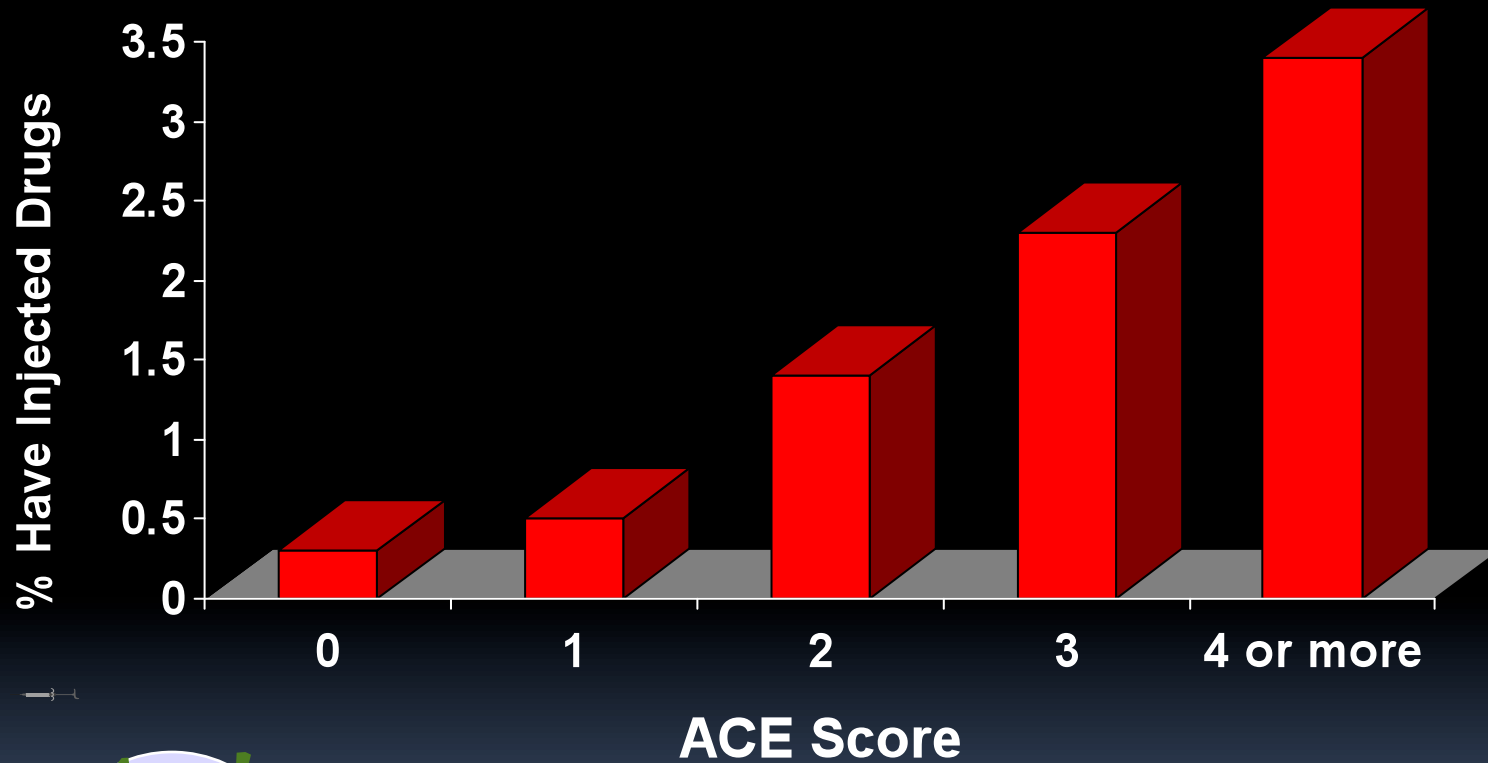


# ACE Score and Hallucinations



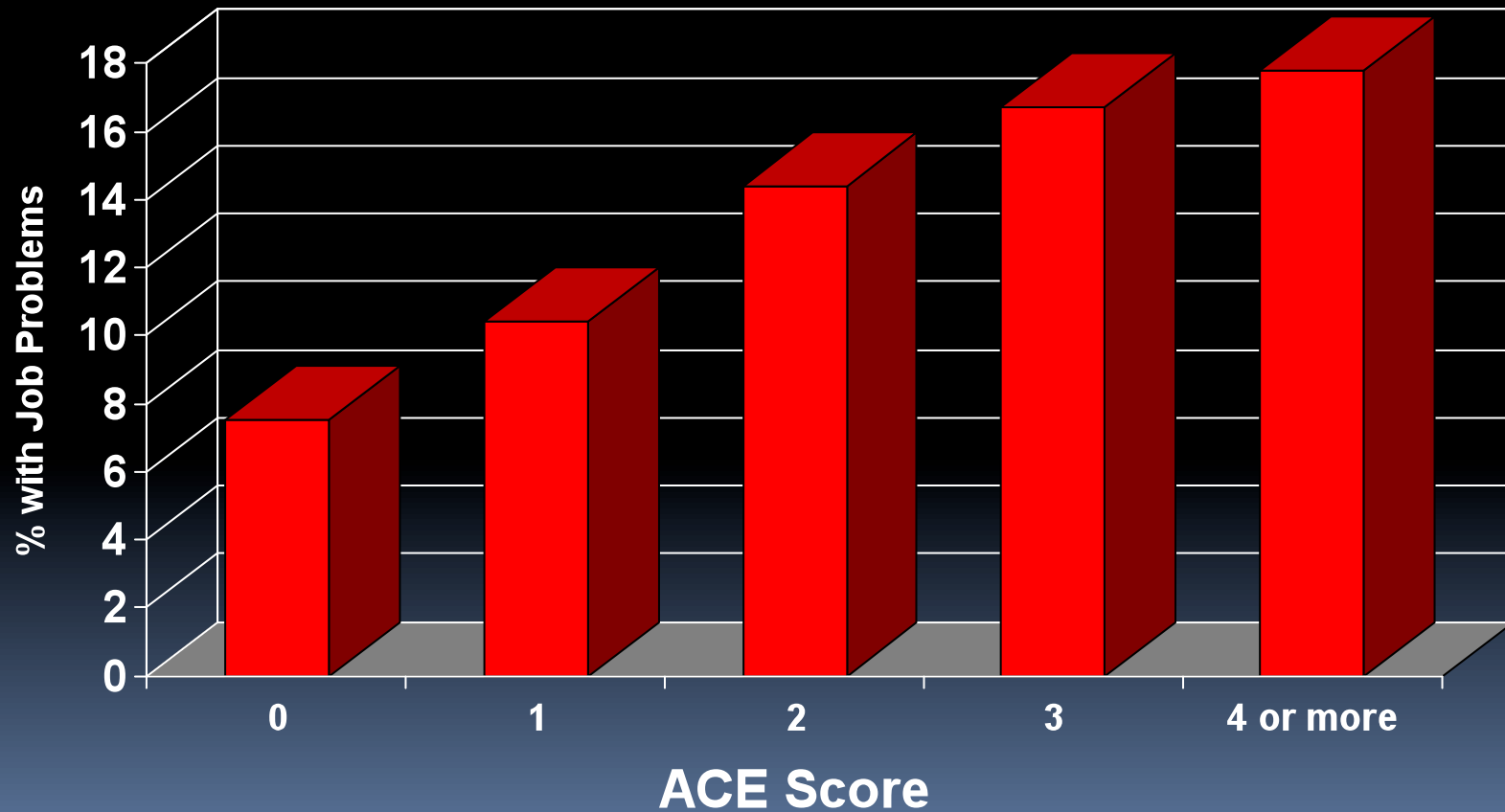
\*Adjusted for age, sex, race, and education.

# ACE Score vs. Intravenous Drug Use

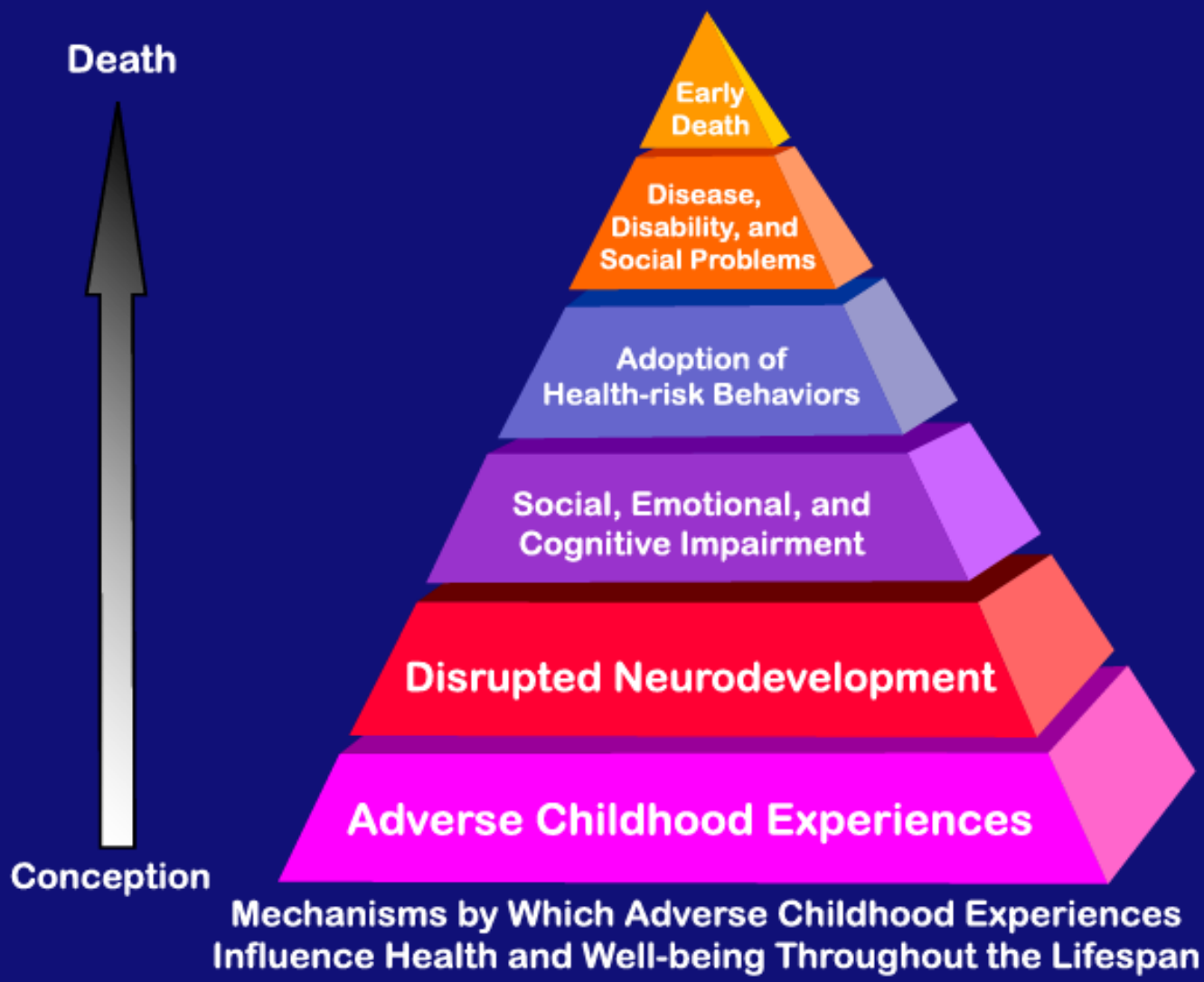


**N = 8,022**    **p < 0.001**

# ACE Score vs. Serious Job Problems







# Causes of Homelessness



**OK,  
SO WHAT CAN WE DO  
ABOUT IT?**

# Know what you can and can't do

- For most providers, long-term therapy for clients is not an option
- More effective to work with *behaviors* that result from ACES
- You can shift *culture* to change behavior!

The image features a dark background with a blue gradient at the bottom. It contains several geometric elements: a dark green square in the upper left, a large dark green circle in the upper right, a cluster of three overlapping bright green circles in the lower left, and a cluster of three dark green circles in the lower right. The text is centered in the middle of the image.

**Promoting Resilience,  
Recovery, and Transformation**

"...everything can be taken from a man but one thing: the last of the human freedoms -- to choose one's attitude in any given set of circumstances, to choose one's own way."

- Victor Frankl

# COTS' Organizational Development

- “ACE-informed” programming
  - ACE awareness in agency culture
  - ACE-informed vs. trauma-informed
  - Mobilization of resilience, recovery & transformation
- Staff engagement
  - Best practices
  - Articulation of values & principles
  - Connection, Hope, Intention, Integrity
  - The Four Agreements
- Leadership sets an example

# Resilience & Recovery

- Resiliency research (Frankl)

- Individual & community support each other
- a personal connection with someone who believes in him/her
- a sense that others have high expectations of him/her
- Growth = Challenge + Support
- opportunities to make choices – find purpose

- Recovery

- Identity, attitude, values, goals are all strengthened and shaped by resilience



# Culture & workforce

- Compassionate culture
  - Personal development of staff with ACE scores
  - Therapeutic community for clients recovering from ACEs (and other trauma)
  - Staff builds relationships and models behavior
  - Self care needed – Empathy is risky!
  - Prevention of vicarious traumatization
    - Rest, renewal, development
    - Builds staff resilience!

# Policies in support of culture

- Health & safety prioritized
  - Creates a welcoming environment
- No use drug & alcohol policy
  - Random and for cause testing for all
- Clear rules & expectations
  - Extends into the community – mirrors community values

# COTS' ACE Response

## Supporting the "I" space

INTERIOR SUBJECTIVE

- More positive **Explicatory Narrative**
- **Intention, plans and goals**, using motivational interviewing
- New **coping skills** for anger, stress and grief
- **Meditation**
- **Yoga Nidra / Chi Gung** (At Home Within offered with IONS)
- **Recovery** from psychological component of addictions
- **Relapse prevention** skills building

• **Life skills:**

Rent Right, Work Right

Kids First

Money Smart

INDIVIDUAL

I IT  
WE ITS

# ACE-informed Programming

## Supporting the “IT” space

- Meet **basic needs** (Maslow’s Hierarchy)
- Work with the body in support of **healing** through on-site clinics
  - Medical
  - Dental
  - Trauma (Somatic Experiencing; volunteers)
  - Acupuncture (volunteers)
- **AA/NA** recovery from physical aspects of addiction

EXTERIOR OBJECTIVE

I  
IT  
WE ITS

INDIVIDUAL

# ACE-informed Programming

Supporting the “WE” space

I | IT

WE

ITS

INTERIOR SUBJECTIVE

- Therapeutic and learning communities
- Culture of recovery and transformation
- Connection with faith communities
- Peer support groups
- Mentoring from senior program participants
- Working in groups, classes and workshops on common goals
- Reconnection with community through community service

COLLECTIVE

# ACE-informed Programming

Supporting the “ITS” space

I | IT

WE | ITS

• **Policies and procedures** support program culture

- **Rules of Decorum**
- **Intake** procedure and requirements
- **Drug / alcohol testing**

• **Shelter Management System** to manage the programs and participants' data

• **Case management wiki** supports service delivery and collaboration among service providers

COLLECTIVE

EXTERIOR OBJECTIVE

# HEARTS trump ACEs

- **H**ealthy
- **E**nvironments
- **A**nd
- **R**elationships
- **T**hat
- **S**upport



Promotes individuals' strength and resiliency, preventing and intervening with ACEs – happens mostly in the LL and LR quadrants

## Results of ACE Informed Programs

ACE knowledge + Program Development  
+ Culture = Results!

- In 2004 – 2005, COTS housed .01% (8 of 646) single adults with the same # of staff in drop-in center and winter shelter programs
- In 2008 – 2009, 48% (283 of 590) unduplicated individuals were successfully housed in transitional or permanent housing with ACEs informed programming at the Mary Isaak Center.



# Questions?

