

MAR 10 2017

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# SENATE CONCURRENT RESOLUTION

ENCOURAGING THE DEPARTMENT OF EDUCATION, DEPARTMENT OF HEALTH,  
DEPARTMENT OF HUMAN SERVICES, DEPARTMENT OF THE ATTORNEY  
GENERAL, AND JUDICIARY TO INCORPORATE RESEARCH AND  
STRATEGIES REGARDING ADVERSE CHILDHOOD EXPERIENCES INTO  
THEIR WORK WITH CHILDREN SUFFERING FROM TRAUMA.

1           WHEREAS, adverse childhood experiences are defined as  
2 abuse, neglect, and other traumatic or disruptive events that  
3 occur during childhood, causing serious damage to a child's  
4 developing brain; and

5  
6           WHEREAS, adverse childhood experiences cover a broad range  
7 of traumatic events, including physical, emotional, and sexual  
8 abuse; domestic violence; community and school violence; loss of  
9 loved ones through death; severe accidents or life-threatening  
10 illnesses; parental incarceration; natural disasters; and acts  
11 of terrorism; and

12  
13           WHEREAS, the Centers for Disease Control and Prevention-  
14 Kaiser Permanente Adverse Childhood Experiences Study,  
15 "Relationship of Childhood Abuse and Household Dysfunction to  
16 Many of the Leading Causes of Death in Adults," is one of the  
17 largest investigations on childhood abuse and neglect and  
18 lifetime health and well-being and involved a study from 1995 to  
19 1997 of over 17,000 Kaiser Permanente members; and

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21           WHEREAS, two-thirds of study participants had at least one  
22 adverse childhood experience, and more than one in five had  
23 three or more adverse childhood experiences; and

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25           WHEREAS, the study concluded that:

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27           (1) Adverse childhood experiences are common but typically  
28 unrecognized;



- 1           (2)   Having one adverse childhood experience means a high  
2           probability of having additional adverse childhood  
3           experiences;
- 4
- 5           (3)   Adverse childhood experiences are the nation's most  
6           basic public-health problem; and
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- 8           (4)   The effects of adverse childhood experiences are  
9           cumulative: The more adverse childhood experiences a  
10          person had, the greater the risk for problems in  
11          behavior; social, mental, and physical health; and  
12          learning and academic achievement throughout the  
13          person's life; and
- 14

15           WHEREAS, high-risk behaviors linked to adverse childhood  
16          experiences include but are not limited to alcoholism and  
17          alcohol abuse; abuse of illegal drugs; smoking, including  
18          beginning smoking at an early age; having multiple sexual  
19          partners; early initiation of sexual activity; rape; risk of  
20          domestic violence and sexual assault; social isolation and  
21          withdrawal; and poor impulse control; and

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23           WHEREAS, adverse childhood experiences affect a person's  
24          social skills over the course of a lifetime, including the  
25          ability to form relationships with others; ability to identify  
26          with others; ability to adjust and express emotions; ability to  
27          meet age-appropriate developmental norms; ability to establish  
28          trust in relationships; personality formation, including morals,  
29          values, and social conduct; respect for social institutions; and  
30          bullying toward peers; and

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32           WHEREAS, adverse childhood experiences can also cause  
33          serious mental- and physical-health problems by producing toxic  
34          stress, which is the overload of stress hormones, which can  
35          cause damage to a person's neurodevelopment, the physical and  
36          biological growth of the brain; damage to a person's nervous  
37          system and endocrine system; organic disease; heart disease;  
38          depression; severe obesity; physical inactivity; suicide;  
39          sexually transmitted infections; unintended pregnancies;  
40          adolescent pregnancy; fetal death; and early death; and



1           WHEREAS, adverse childhood experiences impair learning and  
2 academic achievement by affecting a person's concentration and  
3 ability to absorb new information; by causing poor school  
4 performance in terms of lower grades, increased absenteeism, and  
5 higher dropout and expulsion rates; and through disruption to  
6 the classroom environment by causing a child to be more  
7 aggressive, noisier, and less likely to cooperate or relate well  
8 with others; and  
9

10           WHEREAS, adverse childhood experiences create an  
11 intergenerational cycle because children exposed to domestic  
12 violence are at an increased risk of becoming involved in family  
13 violence as adults; children exposed to sexual assault are also  
14 at an increased risk of becoming involved in sexual assault as  
15 adults; and children exposed to any type of adverse childhood  
16 experience are at an increased risk of repeating that same  
17 adverse childhood experience as adults; and  
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19           WHEREAS, adverse childhood experiences affect not only the  
20 victim but also families, neighborhoods, schools, communities,  
21 social-service delivery systems, and society at large; and  
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23           WHEREAS, the effects of adverse childhood experiences  
24 expand beyond the child's personal experiences to the health-  
25 care, social-welfare, criminal-justice, and education systems;  
26 and  
27

28           WHEREAS, more public awareness and information are needed  
29 to properly identify adverse childhood experiences, and  
30 recognition of the effects of adverse childhood experiences is  
31 essential for appropriate treatment and care; and  
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33           WHEREAS, the negative consequences of adverse childhood  
34 experiences are not inevitable: With proper support and  
35 interventions from their loved ones and the community, most  
36 children are able to overcome traumatic experiences; and  
37

38           WHEREAS, by establishing strong partnerships and networks  
39 with families and consumers and across service systems, we can  
40 collectively address childhood trauma; and



1           WHEREAS, the solution to adverse childhood experiences does  
 2 not rely on the prevention of a particular type of trauma but  
 3 rather in providing proper support to children, families,  
 4 organizations, systems, and communities with the necessary  
 5 resources to develop resilience, which is the capacity of a  
 6 dynamic system to adapt to acute stress, trauma, tragedy, or  
 7 threats; and

8  
 9           WHEREAS, building resilience in young children promotes  
 10 well-being and positive functioning, which can reverse the  
 11 accumulated damage from adverse childhood experiences; now,  
 12 therefore,

13  
 14           BE IT RESOLVED by the Senate of the Twenty-ninth  
 15 Legislature of the State of Hawaii, Regular Session of 2017, the  
 16 House of Representatives concurring, that the Department of  
 17 Education, Department of Health, Department of Human Services,  
 18 Department of the Attorney General, and Judiciary are encouraged  
 19 to incorporate research and strategies regarding adverse  
 20 childhood experiences into their work with children suffering  
 21 from trauma; and

22  
 23           BE IT FURTHER RESOLVED that no later than 20 days before  
 24 the convening of the Regular Session of 2018, each of these  
 25 agencies is requested to submit a report to the Legislature on  
 26 the status of its plans to incorporate research and strategies  
 27 regarding adverse childhood experiences into its work with  
 28 children suffering from trauma; and

29  
 30           BE IT FURTHER RESOLVED that certified copies of this  
 31 Concurrent Resolution be transmitted to the Governor,  
 32 Chairperson of the Board of Education, Superintendent of  
 33 Education, Director of Health, Director of Human Services,  
 34 Attorney General, and Chief Justice of the Hawaii Supreme Court.

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OFFERED BY: \_\_\_\_\_

