

About the Illinois ACEs Response Collaborative

The Illinois
ACEs Response
Collaborative

Health & Medicine
POLICY RESEARCH GROUP

Established in 2011, the Illinois ACEs Response Collaborative (the Collaborative) represents a broad range of organizations and agencies committed to expanding and deepening the understanding of the impact of childhood trauma and adverse childhood experiences (ACEs) on the health and well-being of Illinois children, families, and communities. The Collaborative works to develop education, policies, and responses to assist those who have experienced a high level of adversity, while simultaneously developing strategies to reduce the frequency and impact of ACEs as well as the reduction of intergenerational transmission of ACEs. Health & Medicine Policy Research Group, a Chicago-based non-profit with a mission to challenge inequities in health and health care, serves as the lead convener for the Collaborative.

While many groups are working on ACEs in their specific sectors, the Collaborative is unique in that it draws together leadership-level representatives from all of these groups to think broadly and coordinate efforts to effectively move the dial together to prevent and ameliorate childhood adversity as well as build resilience in Illinois. Through this meta-leadership approach, the Collaborative has emerged as an essential group in Illinois and nationally. The Collaborative has:

- Worked successfully with the Illinois Department of Public Health to collect Illinois-specific data about the prevalence of ACEs, a powerful first-step in building the evidence-base to design programs to prevent ACEs.
- Been selected to participate in the Health Federation of Philadelphia and Robert Wood Johnson Foundation's (RWJF's) "Mobilizing Action for Resilient Communities" program—a national learning collaborative working to foster solutions to prevent childhood trauma.
- Initiated the country's first Trauma-Informed Hospital Workgroup to provide training on ACEs, trauma, and resilience for 16+ area health systems.

To date, we have hosted over 2,500 community members at ACE-related events, successfully raising awareness and prompting a desire for change within systems.

Our work is amplified by the reach and expertise of our 60+ member Collaborative and 900+ member engaged audience. Drawing members from diverse sectors—including the faith community, DCFS, restorative justice, education, healthcare, and philanthropy, just to name a few—the Collaborative has emerged as a hub and organizing entity for ACEs work in Illinois. The Collaborative is also connected to national leaders like the Centers for Disease Control and Prevention and RWJF as well as similar organizations in states like Washington and Minnesota that are leaders in ACE policy. Collaborative partners include representatives from:

- The Chicago Department of Public Health's Office of Violence Prevention
- United Way of Metropolitan Chicago
- Loyola University Chicago School of Law
- The University of Illinois
- The Chicago Foundation for Women
- Legal Council for Health Justice
- Region V Office of Women's Health
- Lurie Children's Strengthening Chicago's Youth
- Cook County Health and Hospital System
- American Heart Association
- Illinois Department of Public Health

Selected Policy Recommendations

Policy change at all levels of government and within public agencies, private and public health systems, community organizations, educational systems, social services, philanthropy, and business can prevent and mitigate the impact of ACEs, trauma, and toxic stress to create healthier communities. The following recommendations were developed by the Collaborative in 2016 and reflect an understanding of the impact of ACEs and trauma as well as opportunities for healing which require multiple levels of policy change focusing on individuals, families, communities, organizations, and systems.

In All Areas

- Increase awareness of ACEs and resilience, particularly among policy makers and providers.
- Support federal and state policy that sustains families and communities, such as paid sick time and universal day care.
- Use Behavioral Risk Factor Surveillance System (BRFSS) data and proxies for high ACE scores to focus services in high-need populations and/or geographic areas.
- Utilize an ACE and trauma-informed framework in planning, funding, and implementing services.
- Prevent and address trauma faced by staff in organizations during the course of their work.

Health

- Fund a wide array of family supports especially perinatal, parenting, and early childhood programs, including home visiting, so families can thrive.
- Equip providers and systems with tools to identify, understand, and address ACEs and to develop trauma-sensitive health care systems that support patients and staff.
- Develop innovative plans for use of health care expenditures by institutions and government for promising trauma-specific treatments like neurofeedback, EMDR, and yoga therapy.

Justice

- Justice systems must seek to be procedurally fair.
- All staff in all systems must understand the impact of ACEs and must cooperate and collaborate on solutions.
- Evidence-based identification and understanding of ACEs should be in place at each step of an individual's involvement with the justice system, and staff should respond in trauma-informed ways to address and prevent further trauma and criminal system involvement.

Education

- Rethink discipline and encourage strategies that keep kids in school.
- Support teachers with professional development on trauma-sensitive schools, in-classroom supports, and social emotional learning techniques.
- Prepare youth to be successful in school by building coordinated supports for youth and families starting prenatally and continuing throughout the lifespan.
- Increase parent support and engagement
- Build and support self-regulation skills for school staff and students.
- Change policy to support safe and trauma-sensitive classrooms.

Learn More

For more information about the Collaborative or to get involved, please visit <http://www.hmprg.org> or contact:

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