



# Clearinghouse on Supervised Visitation Phone Conference Agenda



October 16, 2019

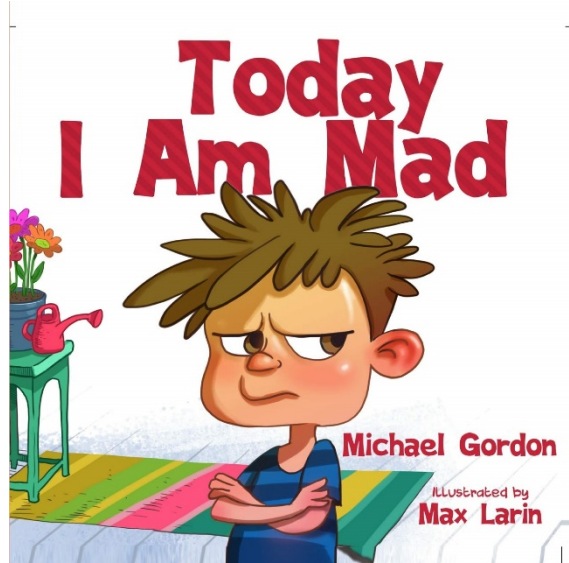
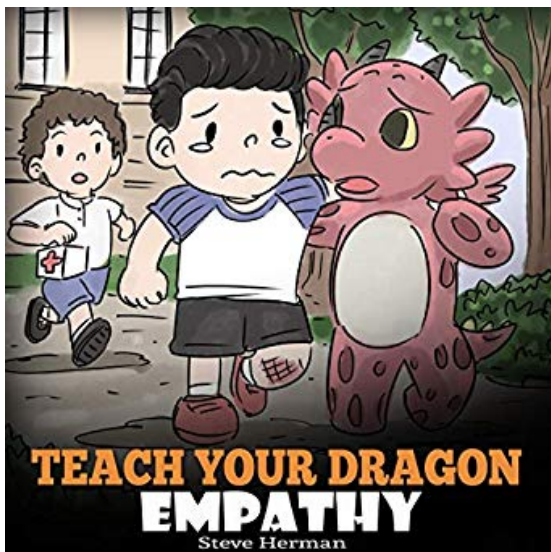
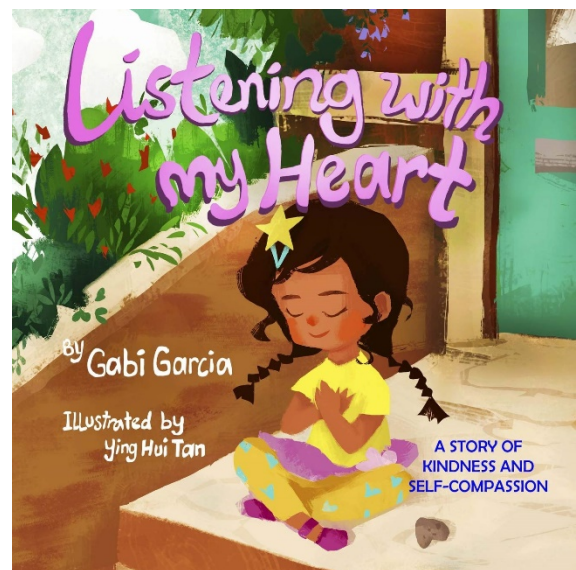
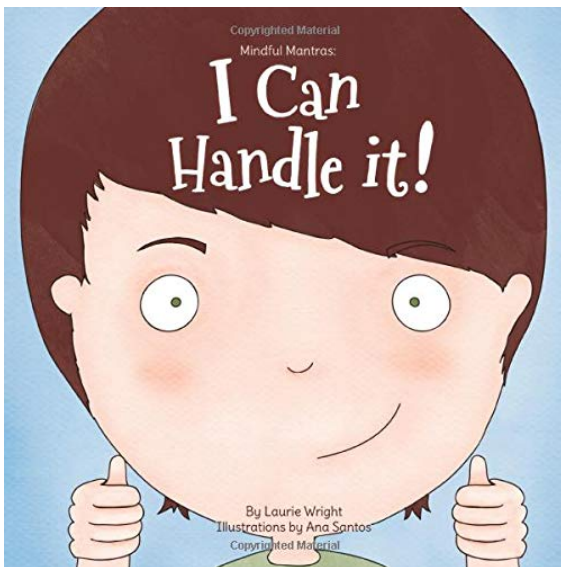
12PM/11CT

## Discussion

1. Welcome and Announcements – Everyone is invited!
2. Program narratives are DUE NOW!
  - Book Give-Away!
3. Check the listings on the website to ensure your program information is up to date and correct for the quarterly report. If you need to add or change anything email Lyndi Bradley at [lbradley2@fsu.edu](mailto:lbradley2@fsu.edu)
4. Questions from Directors
5. Summary of Preventing ACEs from the CDC
6. New Research on Domestic Violence
7. National Bully Prevention Month
8. Breathing for Relaxation Videos
9. Ways to Say “Thank You”
10. Ways to Say “I’m sorry”
11. “Dads are Superheroes” Poster in Spanish

# Giveaway

**Program Narratives are DUE!!!! Programs that submit their narratives by this Friday, close of business, will be entered into a drawing for some books. There are FOUR books, so FOUR chances to win!**



# Summary of Preventing Adverse Childhood Experiences (ACEs): Leveraging the Best Available Evidence

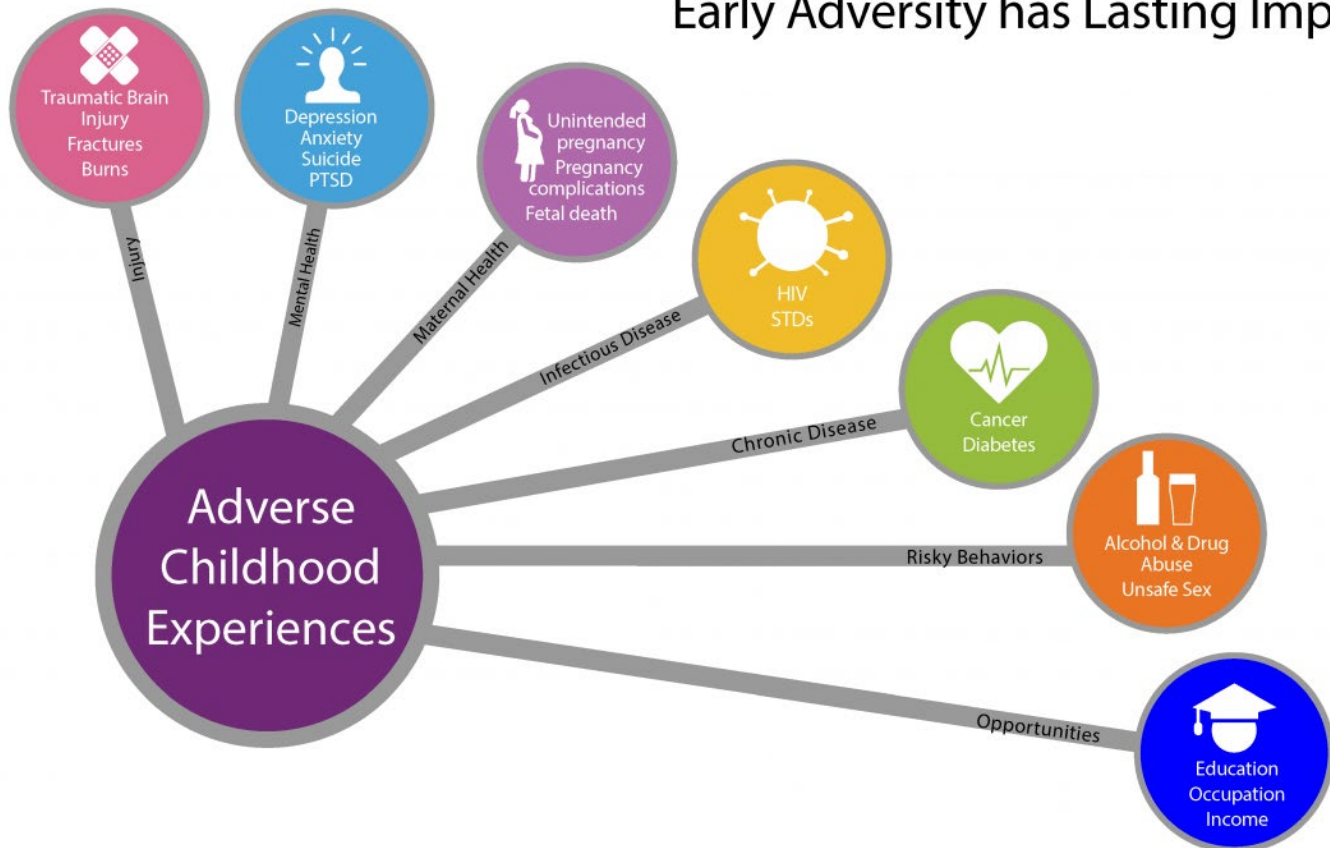
From the CDC 2019



## What are Adverse Childhood Experiences?

Adverse Childhood Experiences, or ACEs, are potentially traumatic events that occur in childhood (0-17 years) such as experiencing violence, abuse or neglect, witnessing violence in the home; and having a family member attempt or die by suicide. Traumatic events in childhood can be emotionally painful or distressing and can have effects that persist for years. Many factors, such as the nature, frequency, and seriousness of the traumatic event, prior history of trauma, and available family and community supports, can shape a child's response to trauma.

## Early Adversity has Lasting Impacts



## **Preventing ACEs is a priority for CDC**

An estimated 62% of adults surveyed across 23 states reported that they had experienced one ACE during childhood, and nearly one-quarter reported that they had experienced three or more ACEs. ACEs can have negative, lasting effects on health, wellbeing, and opportunity. This exposure can disrupt healthy brain development, affect social development, compromise immune systems, and can lead to substance misuse and other unhealthy coping behaviors. ACEs can have lasting effects on health (obesity, diabetes, depression, suicide attempts, STDs, heart disease, cancer stroke, COPD, broken bones), behaviors (smoking, alcoholism, drug use), and life potential (graduation rates, academic achievement, lost time from work).

## **What can be done to prevent ACEs?**

ACEs and their associated harms are preventable. Creating and sustaining safe, stable, nurturing relationships and environments for all children and families can prevent ACEs and help all children reach their full health and life potential.

## **Strengthen Economic Supports for Families**

Policies that strengthen household financial security (e.g., tax credits, childcare subsidies, and other forms of temporary assistance) and family-friendly work policies, such as paid leave and flexible and consistent work schedules, can prevent ACEs by increasing economic stability and family income, increasing maternal employment, and improving parents' ability to meet children's basic needs and obtain high-quality childcare. These types of policies can also prevent ACEs by reducing parental stress and depression and by protecting families from losing income to care for a sick child or family member. Strengthening economic supports for families is a multi-generation strategy that addresses the needs of parents and children so that both can succeed and achieve lifelong health and well-being.

## **Promote Social Norms that Protect Against Violence and Adversity**

Norms are group-level beliefs and expectations about how members of the group should behave. Public education campaigns are one way to shift social norms and reframe the way people think and talk about ACEs, and who is responsible for preventing them. They can help shift the narrative away from individual responsibility to one that engages the community and draws upon multiple solutions to protective factors by enhancing connectedness and reducing the stigma around seeking help with parenting or for substance misuse, depression, or suicidal thoughts. Legislative approaches to reduce corporal punishment can help establish norms around safer, more effective discipline strategies to reduce the harms of harsh physical punishment, particularly if paired with public education campaigns. Bystander approaches and efforts to mobilize men and boys as allies in prevention can be used to change social norms in ways that support healthy relationship behaviors. Such approaches work by fostering healthy norms around gender, masculinity, and violence to spread these social norms through peer networks. They also work by teaching young people skills to safely intervene when they see behavior that puts others at risk and reinforcing social norms that reduce their own risk for future perpetration.

## **Ensure a Strong Start for Children**

A child's relationship with others inside and outside the family plays a role in healthy brain development, as well as in the development of physical, emotional, social, behavioral, and intellectual capacities. Parents may struggle to provide the care and nurturing necessary for children to develop these capacities and thrive for several reasons, including health, substance misuse, mental health, financial issues, or access to resources or support. Early childhood home visitation can prevent ACEs by providing information, caregiver support, and training about child health, development, and care to families in their homes to build a safe, stable, nurturing, and supportive home environment. High-quality childcare and preschool enrichment programs with family engagement help children build a strong foundation for future learning and opportunity by improving their physical, social, emotional and cognitive development, language and literacy skills, and school readiness. These approaches also help by strengthening connections between home and school environments and can be especially beneficial to economically disadvantaged children who may not have educational resources at home or the support to help them learn and thrive.

## **Teach Skills**

Skill-based learning is an important part of a comprehensive approach to preventing ACEs. There are several approaches to teach skills. Social-emotional learning approaches (also referred to as universal school-based programs when delivered to all students in a particular classroom, grade, or school) are widely used across the United States to enhance interpersonal skills. This includes skills related to communication, problem-solving, alcohol and drug resistance, conflict management, empathy, coping, and emotional awareness and regulation. Safe dating and healthy relationship skill programs address similar skills within the context of dating and intimate partner relationships to promote caring, respectful, and non-violent relationships. Parenting skills and family relationship approaches cover developmentally appropriate expectations for child behavior; teach behavior management, monitoring, and problem-solving skills; safe and effective discipline; healthy relationship behaviors; and work with parents to enhance parent-child communication and ways to support children and youth.

## **Connect Youth to Caring Adults and Activities**

Relationships with caring adults who are positive role models can prevent ACEs and improve future outcomes for young people. Caring adults could include teachers, coaches, extended family members, neighbors, or community volunteers. Mentoring and after-school programs are ways to connect to other caring adults and activities. Mentoring programs pair youth with an adult volunteer to foster a relationship that will contribute to the young person's growth opportunities, skill development, academic success, and future schooling and employment outcomes. Mentoring programs may be delivered in a school or community setting and to youth of all ages, from early childhood through adolescence.

## **Intervene to Lessen Immediate and Long-term Harms**

Children and youth with ACE exposures may show signs of behavioral and mental health challenges. There are many approaches to lessen the immediate and long-term harms of ACE exposures. Enhanced primary care may be used to identify and address ACE exposures with

brief screening assessments and referral to intervention services and supports. For children and adult survivors of violence, victim-centered services can be both lifesaving and helpful in reducing the harms of violence. Treatment to lessen the harms of ACEs may be used to address depression, fear, and anxiety, post-traumatic stress disorder (PTSD), problems adjusting to school, work, or daily life, and other symptoms of distress. Treatment to prevent problem behavior and future involvement in violence is another approach to mitigate consequences. This includes therapeutic interventions and other supports to address the social, emotional, and behavioral risks associated with ACE exposures. Finally, family-centered treatment approaches for substance use disorders may be used to simultaneously address substance misuse by parents and the needs of their children with this ACE exposure. Programs may be delivered in residential or outpatient settings.

### **Sector Involvement**

Public health can play an important and unique role in preventing ACEs. Public health agencies, which typically place prevention at the forefront of efforts and work to create broad population-level impact, can bring critical leadership and resources to bear on this problem. Public health agencies are also well positioned to collect and disseminate data, implement preventive measures, evaluate programs, and track progress. Although public health can be a leader in preventing ACEs, the strategies and approaches outlined here cannot be accomplished by the public health sector alone.

### **Monitoring and Evaluation**

Monitoring and evaluation are necessary components of the public health approach to prevention. Timely and reliable data are essential for monitoring the extent of the problem, determining how best to utilize resources, and evaluating the impact of prevention efforts. Surveillance data can help researchers and practitioners track changes in the burden and consequences of ACEs. No matter the data source, it is important that routine and ongoing monitoring align with the work of multiple federal, state-level, and local partners and agencies to achieve a more comprehensive understanding of ACE exposures, their consequences, and effective prevention efforts in this area.

### **Conclusion**

ACEs are a serious public health problem with far-reaching consequences across the lifespan. The strategies outlined here, drawn from the CDC Technical Packages to Prevent Violence, are intended to change norms, environments, and behaviors in ways that can prevent ACEs from happening in the first place as well as to lessen the immediate and long-term harms of ACEs. The hope is that multiple sectors, such as public health, health care, education, public safety, justice, social services, and business, will use this information as a guide and join CDC in efforts to prevent ACEs.



### **Strengthen economic supports to families**

- Strengthening household financial security
- Family-friendly work policies



### **Change social norms to support parents and positive parenting**

- Public engagement and enhancement campaigns
- Legislative approaches to reduce corporal punishment



### **Provide quality care and education early in life**

- Preschool enrichment with family engagement
- Improved quality of child care through licensing and accreditation



### **Enhance parenting skills to promote healthy child development**

- Early childhood home visitation
- Parenting skill and family relationship approaches



### **Intervene to lessen harms and prevent future risk**

- Enhanced primary care
- Behavioral parent training programs
- Treatment to lessen harms of abuse and neglect exposure
- Treatment to prevent problem behavior and later involvement in violence

## New Research on Domestic Violence



### **Beyond “Witnessing”: Children’s Experiences of Coercive Control in Domestic Violence and Abuse**

This journal addresses the **stereotype** that children who come from homes where domestic abuse was prevalent are “witnesses,” or “collateral damage,” rather than actual victims. It acknowledges the fact those children who have lived through domestic violence too face an **increased risk for mental, physical, and educational damage**. It addresses the issue of domestic violence from all angles by including the children’s’ perspective of the situation rather than solely the abused parent. By having the children construct spatial emotional mappings of their homes and by individually interviewing each of them, it became apparent that they **become accustomed to living as if they were the ones physically abused; for instance, many of the children shaded areas of the home where did not feel safe, and when asked why certain areas or times of the day felt safer they responded by saying that it was because that was where/ when the abuser was less likely to be**. The age range of children interviewed varied from 8-18 years old and each of them, despite the age difference, showed signs of long-term psychological abuse. Shifting the view of children as “witnesses” to “victims” will improve the type of help they receive for their trauma.

Alexander, J. H., Callaghan, J. E. M., Fellin, L. C., & Sixsmith, J. (2018). Beyond “witnessing”: Children’s experiences of coercive control in domestic violence and abuse. *Journal of Interpersonal Violence, 33*, 1551-1581. doi: 10.1177/0886260515618946

### **The Sociology of Gaslighting**

This article introduces the term “gaslighting” as a form of domestic violence since it psychologically abuses a partner, mainly women, by relying on the female stereotype that women are “crazy” and therefore are exaggerating the abuse they experience. Because there is no physical harm, abusers can get away with gaslighting without having any real suspicion occur. **Abusers distort the mentality of their partner by making them feel inadequate and culpable. One of the abusers pushed their partner down the stairs and stated that they had to do that because their partner was acting crazy while another abuser held their partner underwater to “calm them down.” Usually, victims of gaslighting tend to be women because society portrays women as being more emotional and, therefore, exaggerating their situation,**



siding with the male's actions. Although this term is somewhat new, the United Kingdom made gaslighting illegal in 2015 and has charged more 300 people for this act.

Sweet, L. P. (2019). The sociology of gaslighting. *American Sociological Review*, 1-25. doi: 10.1177/0003122419874843

### **Risk for Revictimization of Intimate Partner Violence by Multiple Partners: a Systematic Review**

This study addresses the factors that may cause certain women to be more vulnerable to repeated victimization compared to those who have only experienced Intimate Partner Violence (IPV) once. Factors and similarities that were found in various women who have experienced IPV by multiple partners were found to have childhood trauma, mental illnesses, or substance abuse. Women who were more prone to be in relationships where domestic violence is prevalent have experienced or witnessed domestic and sexual abuse as a child, either occurring to themselves or their mothers and, therefore, may be accustomed to lifelong victimization. Comparing women who have only been in one abusive relationship to those who have been abused by multiple partners, those who have been repeatedly abused showed signs of PTSD, personality disorders, and depression. Women who had a history of substance abuse and alcoholism were more vulnerable to being repeatedly abused by their partners, despite entering new relationships. This shows that women who face domestic violence by multiple partners require specialized resources to overcome future abusive relationships due to underlying childhood traumas, mental disorders, and substance abuse factors that other victims who have only been abused once, may not have.

Bjørkly, S., Vatnar, S. K. B., & Ørke, E. C. (2018). Risk for revictimization of intimate partner violence by multiple partners: A systematic review. *Journal of Family Violence*, 33, 325-339. doi: 10.1007/s10896-018-9952-9

## National Bullying Prevention Month



October is National Bullying Prevention Month. Below are some definitions of bullying and resources available in Florida and nationally.

### What is Bullying?

Bullying can be defined as a harmful pattern of repeated acts of aggression towards others. Bullying tends to happen in school but can happen outside the classroom, such as online, on the bus, or in the playground. Bullies usually pick on their peers who are more vulnerable than they are. The two pillars of bullying is an imbalance of power and repetition. Over time, bullying can have long-lasting harmful effects on both the victim and the perpetrator.

There are three kinds of bullying: verbal, social, and physical bullying.

Verbal bullying consists of saying or writing mean things. This includes teasing, name-calling, taunting, threatening, and inappropriate sexual comments. Social bullying is when a bully hurts someone's reputation or relationships with others. This includes influencing others not to be friends with that person, spreading rumors, embarrassing someone, or leaving someone out of a social situation on purpose. Both verbal and social bullying can also happen online. Lastly, physical bullying is when someone hurts someone's body or belongings. This includes physical acts of violence, such as hitting, kicking, punching, pinching, spitting, and tripping/pushing. It can also include breaking others' belongings and making mean hand gestures.

### National Resources

- [Pacer's National Bullying Prevention Center](#)
  - Phone: 952.838.9000 or 800.537.2237
  - Email: [bullying411@pacer.org](mailto:bullying411@pacer.org)

- [Because of You](#)
  - Hotlines:
    - TEXT: 741741
    - CALL: 1-855-201-2121

- [Stopbullying.gov](#)

- [The BULLY Project](#)

- Phone: 212.725.1220
- Email: [Info@thebullyproject.com](mailto:Info@thebullyproject.com)

- [Stomp Out Bullying](#)

- Phone: 877-602-8559

### **Florida Resources**

- [Dance Out Bullying](#)

- Phone: (413) 407-0362
- Email: [Danceoutbullying@gmail.com](mailto:Danceoutbullying@gmail.com)

- [Act 4 Change](#)

- Phone: 407.317.3200

- [See Something, Say Something \(Flagler County\)](#)

- Report an incident

- [Bullying Complaint Report Form](#)

- Pasco County

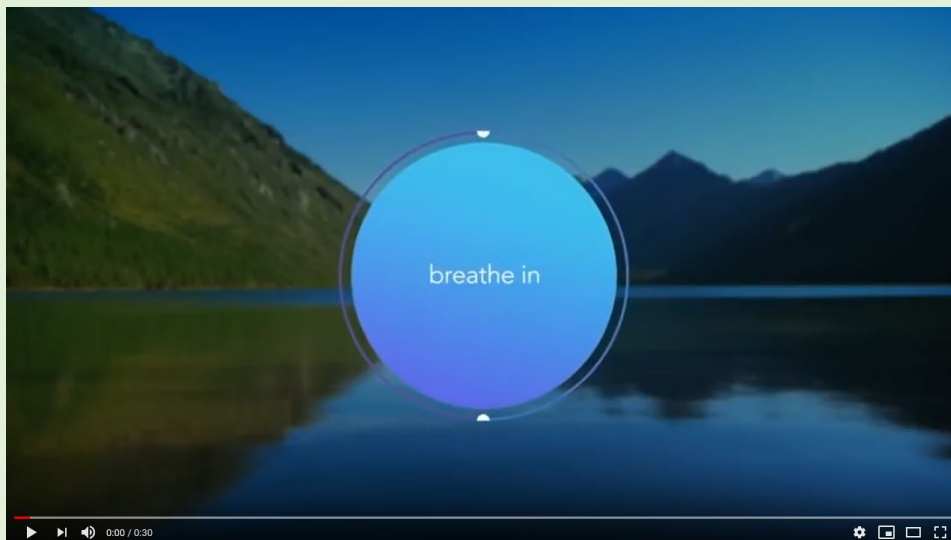
## Breathing for Relaxation Videos

Below are a few more videos you can use to practice your Breathing for Relaxation. In these videos, you will match your breath to the shape expanding and shrinking. Click on the links below to view the videos, or search the videos by the name provided.

### [5 Minute Meditative Breathing Exercise |For Reducing Stress & Relieving Anxiety](#)



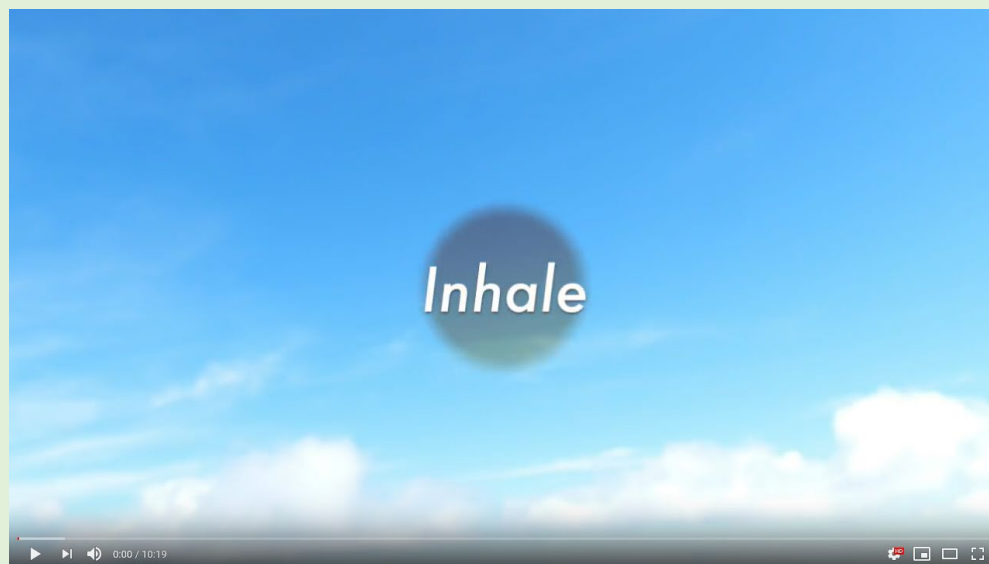
### [Calm Breathe Bubble | Breathing Exercise](#)



[Breathing aid - To help calm you down~ =\] \[Anxiety\] \[Panic attack\] \[Calming\] \[Soothing\]](#)



[Stop Anxiety|4-7-8 Calm Breathing Guide](#)



[5 Minute Breathing Exercise](#)



# Thankful

*In preparing for Thanksgiving, here are several ways to say thank you...*



**I really appreciate it!**



**I'm so grateful!**



**You're too kind!**



**I can't thank you**



**You're an angel!**



**Thank you!**



**You're the best!**



**Thanks a million!**



**You're a life saver!**



**This means a lot to me!**



**I'm am very thankful!**



**Thanks a bunch!**



**I couldn't have done it  
without your help!**



**Thanks a lot!**

# SORRY



*We all make mistakes sometimes...  
Here are some ways to say I'm sorry*



✚ That was wrong of me...

✚ I take full responsibility...

✚ I owe you an apology...

✚ Sorry about that...

✚ I'd like to apologize...

✚ How thoughtless of me...

✚ I shouldn't have...

✚ I made a mistake...

✚ Please accept my apology...

✚ Please forgive me for...

✚ I'm sorry for...

✚ I did not mean to hurt you...

✚ What can I do to make it

✚ I hope you can forgive me...

right?



# ¡LOS PAPÁS SON SUPERHÉROES!

Cuando...

...Leen a sus hijos

...Enseñan honestidad y responsabilidad

...Respetan al otro padre

...Aman a sus hijos incondicionalmente

...Disfrutan del tiempo con sus hijos

...Planean para el futuro de sus hijos

...Apoyan a sus hijos

...Ayudan con la tarea



El Centro de información sobre Visitas Supervisadas- Instituto de Estudios de Violencia Familiar

<http://familyvio.csw.fsu.edu>



Contact the Clearinghouse at  
850-644-1715

