

A direct correlation exists between childhood trauma and academic performance. According to child psychologist Hilit Kletter and her study on Adverse Childhood Experiences, there are three main hallmarks of a rough upbringing including abuse, neglect, and household dysfunction.

Abuse can be physical, emotional, or sexual in nature while neglect can be physical or emotional. Examples of household dysfunction include mental illness, an incarcerated relative, substance abuse, divorce, or a mother experiencing domestic violence. Children who suffer abuse, neglect, or household dysfunction exhibit signs of distress behaviorally, mentally, and physically, leading to increased health risks.

Behavioral indicators of trauma include lack of physical and/or social activity, missed work, smoking, drinking, or drug use. Physical indicators include severe obesity, diabetes, heart disease, cancer, stroke, COPD, and broken bones. Mental health indicators include depression, STDs from promiscuity, and suicide attempts.

Whether you grow up in an extended family with alcoholism where your grandmother and great uncle scream obscenities at each other 24/7, witnessing your mother being beaten by your father or stepfather, finding a deceased body at your kitchen table, living in a gang zone, the victim of sexual assault, being raised by your sick, elderly grandmother because your mother died of AIDS and your father is in prison, or simply a child of neglect, you are a child survivor of trauma. PTSD causes severe cognitive and emotional imbalances making it difficult or impossible to cope with simple activities. As such, children often exhibit poor academic performance and even severe attendance and behavioral issues. However, as vulnerable as children are because their brains are still developing, they are teachable and able to rewire their psyches to combat trauma and achieve success despite adversities.

With incidents of bullying, mental health issues such as severe depression, suicide, and incidents of violence in our schools compiled with the severe childhood trauma children experience at home, it is nearly impossible for a child to focus on anything else. It is imperative school personnel and parents be trained to identify the factors for Adverse Childhood Experiences and Trauma as they have a responsibility to educate the whole child.

Once it is determined whether a child's home environment consists of (1) an adult swearing at or degrading them, (2) making them fear or experience physical harm, (3) sexual molestation, assault, or rape, (4) a feeling they are not loved or important to their family or their family showed no emotions toward one another, (5) their parents were unable to care for them properly so they often had to wear dirty clothes and didn't have enough to eat, (6) their parents were divorced or separated, (7) witnessing his/her mother being physically abused, (8) alcoholism or drug abuse, (9) mental illness or suicide attempts, and (10) a family member in prison, we can begin to empower those child survivors of trauma to deal with their inequities through the Collaborative for Academic, Social, and Emotional Learning Curriculum.

The Social and Emotional Learning five core competencies of self-awareness, self-management, social awareness, relationship skills, and responsible decision-making are imperative because they teach trauma survivors to be able to (1) develop healthy identities, (2) manage emotions, (3)

achieve personal and collective goals, (4) feel and show empathy for others, (5) establish and maintain supportive relationships, and (6) make responsible and caring decisions.

It is essential to screen children for Adverse Childhood Experiences so parents, healthcare professionals, and school personnel can share strategies for early detection, prevention, and intervention to (1) prevent and reduce the accumulation of exposures to adversity and the risk for negative health outcomes, and (2) improve clinical assessment for and treatment of childhood health conditions.

According to the 2019 Youth Risk Behavior Survey Report, DC public schools have experienced a general decline in alcohol and substance use, school violence, and the rate of students having sex and with multiple partners. While DC has seen these areas of growth, they have also seen areas of great concern. The LBG community reported a 27.5% increase in substance use. They also reported an increase among middle school students who go hungry, leaving their physical activity and academic performance to suffer; this rose to 59.3%, the Black, Hispanic/Latinx, and Multiracial communities at highest risk at nearly 80%. There has also been an increase within the LGB and transgender communities of contemplating and attempting suicide with alarming rates among middle school girls, with 38% among students identifying as Black or Hispanic/Latinx and the highest rate of 50% among Multiracial females. While less students report having sex, there is a rise in middle school boys, 12% of the male population, aged 11 and above reporting having sex, and 33.5% of high school females are engaged in oral sex. There are also less students using condoms to protect themselves against disease. While there is a decline in school violence, more students report feeling unsafe. Specifically, 33.9% of Black high school students feel unsafe versus 13.7% of their White peers and 25.3% of their Hispanic/Latinx peers.

*long version*

Childhood trauma directly effects academic performance. According to Hilit Kletter's study on Adverse Childhood Experiences, the main hallmarks include physical, emotional, or sexual abuse, physical or emotional neglect, and household dysfunction such as mental illness, substance abuse, or domestic violence. Children who suffer these hallmarks exhibit signs of behavioral, mental, and physical distress, leading to increased health risks.

Whether you grow up in an extended family where your grandmother and great uncle scream obscenities 24/7, witnessing your mother being beaten, finding a deceased body, living in a gang zone, or being raised by your grandmother because your mother died of AIDS, you're a trauma survivor. PTSD causes severe cognitive and emotional imbalances making it near impossible to cope with simple activities. Children exhibit poor academic performance, attendance, and behavioral issues. Though vulnerable, children's brains are still developing and can be taught to combat trauma and achieve success.

With incidents of bullying, school violence, and mental health issues compiled with severe trauma at home, it is nearly impossible for a child to focus on academics. It is imperative school personnel and parents be trained to identify ACE factors so they can educate the whole child. Screening children for early detection, prevention, and intervention is essential to (1) prevent and reduce the accumulation of exposures to adversity and the risk for negative health outcomes, and (2) improve clinical assessment for and treatment of childhood health conditions.

Once it is determined whether a child's home environment causes trauma via witnessing or experiencing physical or emotional harm, neglect, or exposure to mental health and substance abuse, <https://americanspcc.org/take-the-aces-quiz/>, we can begin to empower them to deal with inequities through the Collaborative for Academic, Social, and Emotional Learning Curriculum and the core competencies of self-awareness, self-management, social awareness, relationship skills, and responsible decision-making. These competencies are imperative because they teach trauma survivors to be able to (1) develop healthy identities, (2) manage emotions, (3) achieve personal goals, (4) feel and show empathy for others, (5) establish and maintain supportive relationships, and (6) make responsible and caring decisions.

According to the 2019 Youth Risk Behavior Survey, DC public schools experienced a decline in alcohol and substance use, school violence, and the rate of students having sex and with multiple partners. While DC saw these areas of growth, they also saw areas of great concern. The LBG community reported an increase in substance use, students going hungry, and contemplating or attempting suicide, especially among Black, Hispanic/Latinx, and Multiracial middle school girls. While less students are having sex, middle school boys report starting younger, and more students are not using condoms. There is less school violence, but more Black high school students feel unsafe.

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Adverse Childhood Experiences, abuse, neglect, and household dysfunction, directly effects academic performance. Those who suffer trauma exhibit signs of behavioral, mental, and physical distress. PTSD causes severe cognitive/emotional imbalances; it's impossible to cope with simple tasks or focus on school and poor academic performance, attendance, and behavioral issues are evident. Screening is essential to prevent and further reduce increased health risks.

Once the ACE Assessment confirms, we can empower children through social and emotional learning with the CASEL Framework, teaching healthy identities, goal setting, and empathy.

The 2019 Youth Risk Behavior Survey reports DC schools experienced a decline in alcohol and substance use, school violence, and the rate of students having sex and using condoms. However, the LBG community reported an increase in substance use, going hungry, and issues surrounding suicide. There is a rise in Black high school males feeling unsafe.

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Adverse Childhood Experiences (abuse, neglect, household dysfunction) lead to behavioral, mental, and physical distress. Survivors can't focus on tasks; they have poor academic performance. We empower them through Social & Emotional Learning.

The 2019 Youth Risk Behavior Survey reports DC schools saw a decline in substance use, school violence, and sexual activity among students. LBG and Black communities report increases in feeling unsafe, food insecurity, and issues around suicide.

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