

# How compassion can triumph over toxic childhood trauma

April 5 2018, by Sheri Madigan, Nicole Racine And Suzanne Tough



Credit: AI-generated image (disclaimer)

In a recent piece on the television show *60 Minutes*, Oprah Winfrey discussed <u>childhood trauma</u> —shining a public spotlight on the lasting effects of abuse and adversity in childhood. Oprah herself is a survivor of childhood abuse.



Adverse childhood <u>experiences</u>, commonly called ACEs, include witnessing verbal or physical conflict between parents and having a parent with a mental illness or substance-abuse issue. They also include parent separation, divorce and incarceration and the experience of neglect or abuse (sexual, physical or emotional) as a child.

ACEs are common. Approximately <u>60 per cent of the general population</u> report experiencing at least one before the age of 18. More than eight per cent of the population report experiencing four or more ACEs.

Research has consistently found that the more adverse childhood experiences a person has, the greater their risk for later <u>health problems</u>.

Our <u>research group</u> investigates how ACEs affect women's physical and psychological health in pregnancy. We study how adversities are "inherited" or <u>passed from parent to child</u>, as well as how the risks of ACEs in pregnant women can be reduced.

Our latest finding suggests that when mothers who have experienced <u>ACEs feel supported by the people around them, their risk of having</u> <u>pregnancy complications is substantially reduced</u>. In essence, feeling supported by friends and family can counteract the negative effects of having ACEs.

#### From liver disease to early death

Adverse childhood experiences increase the risks of many health challenges later in life. These include mental health problems like <u>depression</u>, <u>alcohol and drug abuse and suicide attempts</u>.

They also include health risk behaviours, such as <u>smoking</u>, <u>sexually</u> <u>transmitted diseases</u> and <u>obesity</u>, as well as diseases like <u>heart</u>, <u>lung and</u> <u>liver disease</u>.



For example, an individual who has experienced four or more ACEs is <u>four times more likely to experience a mental health problem</u> than someone who has not.

People with <u>a high number of ACEs may even be at risk for early death</u>.

### Toxic stress and the body

When children are exposed to abuse and <u>adversity</u>, they experience heightened levels of stress without a strong support system to help them through these difficult experiences. This is <u>often referred to as "toxic</u> <u>stress."</u>

This stress is different from the tolerable types of stress that can help with development —such as learning to make new friends, going to a new school or taking a test.

Experiencing high levels of <u>toxic stress</u> during abusive or traumatic experiences can alter how our brain and body process future experiences and stressful events. Toxic stress impacts how we think and learn.

How does this happen? Toxic stress can cause excessive "wear and tear" on the body. It primes our system to be hyper-sensitive to stressors. This wear and tear builds up over time and can lead to both physical and mental health problems throughout our life.

When adults become parents, the effects that ACEs have had on their own body, mind and behaviour can influence how they experience their pregnancy and their pregnancy health. It can affect how they are able to interact with, and care for, their children.

## **Babies with developmental delays**



In our work, we've shown that <u>mothers who experience a higher number</u> <u>of ACEs are more likely to have gestational diabetes and hypertension</u>.

They are also more likely to deliver a baby who is born too small or too soon or needs intensive care.

Even if the baby is born full term, children born to mothers with ACEs are at risk of developmental delay. For each additional maternal ACE, there is an <u>18 per cent increase in the risk</u> that their child will be identified as delayed.

Ultimately, we have found that the effects of adversity can be passed down from one generation to the next.

However, with the right supports in place, our work also reveals that mothers can show remarkable resilience to adversity.

## **Compassion is protective**

What helps promote resilience in the face of stress and adversity? How do we help families triumph over past experiences?

For some, even just being aware of how past adversities and traumas can impact their current functioning, including physical and <u>mental health</u>, is an important first step. This can start the road to recovery. Some people may benefit from additional counselling and professional support to launch them into a brighter future.

For others, it's the compassionate response they receive when they talk to someone about their early experiences.

Oprah Winfrey and others have wisely encouraged people to replace saying "what's wrong with you?" with "what happened to you?" —to



allow for a more compassionate and understanding approach to individual experiences, including trauma and adversity.

Oprah describes her main protective factor from adversity as school, and pinpoints certain teachers who encouraged her intellectually and creatively. School and caring teachers helped her to feel valued and gave her a sense of belonging, helping heal the emotional wounds of abuse.

#### How to foster resilience

Supportive relationships are indeed a key ingredient for change. Support from friends, family, spouses or neighbours can boost the quality and security of life for people.

Community supports also matter. For example, our work suggests that when women participate in low-cost community programs and recreation, such as story time at the library, and <u>when they can be</u> encouraged to develop or engage in social support networks, their children do better.

Investing in families with young children makes financial sense too. Strategies that <u>help new parents develop supports and parenting skills</u> <u>have a particularly high return on investment</u> —improving outcomes for parents, children and their families and avoiding later, higher-cost interventions.

Whether we have been affected by ACEs or not, we can all play a role in fostering resilience by being the buffering support to our friends, family members and neighbours.

Using <u>a trauma-informed approach to patient care</u>, health professionals can also play a central role simply by supporting and listening to patients burdened by childhood adversity.



The silver lining is that ACEs don't define who we are or who we can become.

With supports, people who have endured ACEs can achieve emotional and physical well-being. It is compelling to realize that many people struggling with past adversity can identify support from teachers, neighbours, spouses and friends as instrumental in overcoming their adversities.

Each and every one of us can help make a difference in someone's life.

Individuals are encouraged to speak to a physician or <u>health</u> care professional if they have concerns about how their adverse experiences might be impacting their functioning. For helpful resources and information on the science of early adversity visit The <u>Alberta Family</u> <u>Wellness Initiative</u> or Harvard University's <u>Center on the Developing</u> <u>Child</u>.

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