

## new about childhood trauma

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Caption test.

>> Hi, everybody.

We're going to get started in just a minute.

We're working out some technology glitches, so give us a moment and we'll get started very soon.

>> All right.

Good afternoon, everybody.

Thank you so much for joining us today and for your patience in getting started.

My name is Jennifer Rose and I'm a consultant with futures without violence.

The News About Childhood Trauma:

Findings and Implications.

Our webinar today is part of an ongoing series of webinars on childrens exposure on violence.

After registering today, you will receive ongoing emails, notifying you of upcoming webinars.

We have one about every single month.

Our webinar will run into 3:30 eastern time.

You can ask questions or report any technical issues, using the chat function in the left side of your screen.

In just a moment, I'll have Mie give you information about our webinar today.

Before we do that, unfortunately today -- unfortunately today, carmen, who is our program manager with the office of juvenile justice at the united states department of justice is not able to join us.

We do want to take a moment to thank her and the department for all of their support.

I will give you a quick overview.

Attorney general launched this in 2010 to address a crisis.

In 2009, the department of justice study showed that more than 60% children surveyed were exposed to violence in the past year, either directly or indirectly.

Children are more likely to be exposed to violence and crime than adults.

Mie, will you flip the slide?

This initiative is being supported across many agencies, as you can see on the slide in front of us, showing a deep coordination within all of the agencies working on this issue.

Slide change.

We have three main goals of this initiative, to prevent and reduce childrens exposure to violence, to mitigate harmful effects of violence and to spread awareness on how to help.

The depending childhood has several strategies.

There are eight demonstration sites.

These sites have been working and developing and implementing prevention and intervention strategy to meet the needs of all children in our country.

There's a research evaluation component and in December of 2012, a task force report was released on how our nation can and should handle children exposed to violence.

There is a link to that report.

Recommendations will be released very soon.

There's a training and technical assistance strategy led by futures without violence so we can advance our collective understanding.

It's an ambitious undertaking but we need to create solutions.

We invite each out you to find ways within your own communeies communities.

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We thank you all for taking time today to join.

I'm going to hand it over to Mie to give us an update on the technology we have available today.

Mie Fukuda hi, everyone.

Can you hear me Jennifer?

John Reid yes.

Mie Fukuda I'm a program specialist.

I want to welcome you to today's webinar.

If you wish to listen to the presentation over your phone, you may dial 1-866-647-3411 and enter passcode 914571 pound.

This information is on the slide in front of you, but I'll be typing it into the chat box, as well.

Because we have a large -- a large number of attendees today, I really encourage everyone to listen to the webinar through your computer speakers.

But if you cannot, please join us through the phone.

I also want to cover a little bit about the webinar features, and that includes our closed captioning box, which you can see on the bottom of the screen.

Captions will appear in the box.

You can scroll up and down to refer to anything that was said previously.

If you manually scroll up and down, the autoscroll feature will be disabled.

If you click on the auto scroll box on the upper right-hand corner of the box of the closed captioning box, it will auto scroll.

We have a short Q&A question that's dedicated to answering your questions.

Please feel free to type questions throughout the presentation.

And, if you don't see it already, the chat box is located on the right-hand side of your screen and we'll do our very best to answer all questions by the end of the presentation.

If not, we'll reach out to you individually and hopefully answer them offline.

For technical support during the presentation, you can contact me by sending me a private chat message, by clicking on the chat box drop-down menu on the top right corner of the chat box.

There's an option that says, start chat with host.

And that's me, so you can chat with me.

If you have something larger than -- maybe there's something with the system you have a question about, you can contact adobe tech support and their number is listed on the screen.

I'll be typing that information into the chat box as well.

At the end of the webinar, you'll be prompted to answer a very short survey.

We appreciate if you can give us feedback.

A recording of today's webinar and a PDF version will be emailed to every one of you, as well as made available on the website after the presentation and that's all for tech.

Thanks again for joining our presentation and we hope you enjoy it.

Back to you, Jennifer.

John Reid thanks so much, Mie.

All right, everybody.

Let's get started.

It is my pleasure to introduce to you our speaker.

Tonya Manning is a senior media researcher.

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She directs all qualitative and quantitative analysis.

She has led or is leading projects on community, sexual violence, racial justice.

Her research has appeared in the American journal of public health and the journal of child sexual abuse and has presented at meetings, including the center for disease control.

In 2015, was elected to the board of directors.

She holds a bachelor's degree from Washington state university.

It has been a pleasure working with Pamela and I will hand it over to you, Pamela.

Thank you so much.

Professor Manning: Fantastic.

Can Jennifer and Mie hear me?

>> Yes, we can hear you.

>> Yes.

>> Professor Manning: Fantastic.

Wonderful.

Well, good morning or good afternoon, depending on where you are, everyone.

Thank you so much for joining us.

My name is Tonya Manning and I'm here with my colleague, Leeza Arbatman.

We're going to be using the chat box not only to share ideas and thoughts, but also some resources.

I know there's a bit of a time delay on that so if things don't come through or quite the time we'd like, we would also be happy to share all of our resources for you all at the end of this conversation.

I'm really excited to be sharing with you findings and results.

And to discuss some possible implications for the work that you all are doing.

I'm going to start with a brief overview of news and communications framing to give us some grounding and orient us and talk about our study findings.

Throughout, I'm going to be asking questions and making this as interactive as possible, given the format.

I hope we'll be able to share feedback and thoughts, real-world experiences, I'll be putting up questions for you to answer in the chat box.

I really relish and welcome your thoughts and feedback because those thoughts and insights help to make our work relevant to you.

At the end of this, we'll have a formal question and answer session.

Before I go any further, I need to thank all the people -- or at least some of the people -- whose involvement made this work possible, Mary Lou Fulton, Jane Stevens and the staff of the network.

The staff of prevention institution, Rachel Davis and Annie lyle.

My colleagues, current and former, Laura and alisha.

For those of you who are unfamiliar with our work, I want to introduce this.

Berkeley study group is a public health organization.

We research what the news says or doesn't say.

We explore questions like, who's part of the story?

Whose perspectives are left out?

We provide consultation for community groups and public health advocates.

We want to use the power of the media to advance support for the policies we want to see.

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That training and strategic planning is formed by our research and real-world findings.

We provide professional education for journalists, equipping them with the tools or questions they need to ask to tell the kinds of stories we want to see.

I've been monitoring this chat box and there's a lot of us in this space.

I really wanted to give a little bit of a sense of the role and work of those in the space with us today.

I wanted to ask, who, here, regularly communicates with the media on behalf of your organization?

Or, perhaps advises those who do work with the media on behalf of your organization?

Type your answers into that chat box in the lower right-hand corner.

All right.

I think we might be having a bit of a chat delay, but that's okay.

And, Leeza has included a couple of things, a link to some resources that can help clarify our work.

Anybody who wants to share, if their work connects them with the media or the people who do work with the media, I'd love to hear from you to give a sense of who's in the space.

I know we're on a little bit of a time delay, so that's okay.

All right, I'm seeing a few people who do.

That's wonderful.

It's really, really helpful for us to be able to get a sense of who works with the media and who has real-world experience.

Your insights and guidance is so valuable and so important.

You may be thinking to yourself, wondering now, why we are so focused on the media and the news.

Bsmg is a public health organization.

We're concerned with how to build and how to maintain healthy environments for everyone.

One of the best ways to change environments, we believe, is by changing the policies that shape those in environments.

We know we need to access the policy makers and leaders.

To access policy makers, we need to pay attention to and be part of what they're paying attention to and that's the news.

To give a little grounding in what the news is and why it matters, I'm loving seeing all of these folks from the communication sides of the things, by the way.

Again, to orient us to the way we think about and talk about the news, we news the sets the public agenda but it also selects what general public and leaders are talking about.

What stories are left off of that agenda?

There is the debate, the way media presents issues and what they think about it when they don't have personal experience with that issue.

What solutions appear on the public agenda.

What we talk about that's acceptable or unacceptable.

It news doesn't only reach us, it reaches opinion leaders, from school board, up to Barack Obama.

The way to learn about current issues, learn what issues are important to the people who vote for them and what solutions are deemed acceptable or unacceptable to the public.

So, a little bit or a lot of experience with the news.

I what concerns you about news coverage of childhood trauma?

When you see news about your work and the topic that concerns you, what are things that concern you about it?

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And in terms of your own work, what's worked well in communicating with your work about the media or what hasn't worked?

Again, please feel free to use that chat box in the lower right-hand corner.

It's a great space to share on what concerns you or what you have done to shift or improve that narrative.

Any thoughts?

Still got that time delay a little bit, but I see lots of people typing.

Again, any thoughts people want to share about their concerns or what has been difficult about communicating to the media about the childhood trauma work that you do.

Well, we'll come back to this question because a lot of times when I present information and work and data and resources to people -- there we go, we got some more typing -- we hear a lot of feedback about concerns about, for instance, the focus on problems rather than solutions or the absence of people who really experienced childhood trauma in the coverage.

We're going to touch on all of those points, and others, as we think through what the media says and what it could say.

Now, I want to pivot to talking about news framing so they'll be framework about the way we analyze the news.

When we think about the news, we often think in terms -- we often think in terms of news frames.

Excuse me, I'm sorry.

We're having a minor technical glitch here.

News frames.

Who are the most common kinds of frames -- here we go.

On the time delay, unfortunately, I want to lift up some of the great things I'm seeing in the text box, things like trauma and drama.

The lack of training, there's a misunderstanding, overDRAUMatization.

It doesn't have to mean exposure to violence.

Victim blaming.

I knew this was a group with a lot of thoughts on the news.

Technology lag a little bit so I'll be sure to try to be elevating some of these great comments I'm seeing coming in.

I want build off of some of the comments that people have made about what's concerning them in the news.

as I said, I'm going to revisit this concept of news framing a little bit because I think that'll help give context to the work we do in the analysis.

When we talk about the news, we often talk about news frames.

Two of the most are portraits and landscape.

So, portraits -- there we go.

Portraits are stories that focus narrowly on an individual or an incident.

These stories tell us a lot about a particular individual or a particular incident and the person or event portrayed.

The majority of news stories are framed like portraits.

I'm seeing references to that in the chat box, very tight focus on one individual or one story.

Landscape stories, on the other hand, those might include an individual or an event but they also

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show more of the environment around that person or event, the systems and structures that surround them that may factor into what's happening.

Far fewer stories in our news landscape are framed as landscapes.

What's going on here?

I'm having a little bit of a tech problem here.

>> We're experiencing a lot of technical difficulties.

I think it's because so many people are trying to log on at the same time.

I really apologize.

Let me try to get the powerpoint back up.

Sorry about this.

Professor Manning: In the mean time, let's revisit some of the great comments coming up in the comments.

This is a fantastic comment, a misunderstanding about what trauma was.

There's already kind of a misunderstanding about what the issue is and why it matters.

There's a focus on punishment, rather than resilience or life enhancing.

Are we back?

Wonderful.

I do apologize for these technical problems.

When we're talking about news framing, we're talking about portraits that focus on one individual or incident or these landscape stories that are much more rare but give us more context and vision.

Why do we care so much about news framing?

Well, what we know is that the way stories are framed affects how audiences, those news consumers, the general public, all the way up to policy makers, how they perceive things should be done.

We know those portrait frames, those tight, narrow focused stories are -- dominate the coverage and when people see those stories, those portraits, they generally believe the solution to whatever problem is being portrayed is more about personal responsibility.

Better parenting, better choices.

These stories can keep us from seeing the broader picture of those other solutions, those more environmental solutions to be in place to make everyone healthy and safe.

When we say landscape stories, those stories that bring in systems and structures -- I think we're having another technical problem -- when consumers see those landscape stories, they see the problem depicted whether it's domestic violence, car crashes, whatever it is.

They see the role, government, business, schools play in not only in causing problems but the role they could play in the solving those problems.

Unfortunately, though, those landscape stories -- those landscape stories are much less frequent in the news than are the portrait stories that reinforce personal responsibility.

Now we have a basic idea about what news framing is and why it matters.

Now let's pivot to the news analysis of trauma in the news, how it's portrayed and the implications.

With many of the things we research, our question we asked ourselves was, if people only understood about adverse childhood experiences from the news, what would they know?

What wouldn't they know?

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And what are the opportunities to change that knowledge?

What could they know?

I'm going to introduce our two research questions that we posed, one of which explored how adverse childhood experiences appear in news coverage.

Again, it's the only way people understood is from the news coverage because it shapes a lot of people's understanding.

Our second question explored opportunities to connect stories to childhood trauma.

I'll talk about that study, which is rather unusual, in a moment.

Now, I am a big methods fan, I will say.

Excuse me.

But, I will try very hard to be brief.

We conducted an ethnographic contents analysis.

We took a scientifically selected sample of coverage from around the country that talked about adverse childhood experiences that was published between 2008 and 2013.

Sometimes we were asked why we started looking at coverage in 2008.

We had a lot of deep conversation with people who shared with us that that was really the time that they felt news coverage started to take off.

We looked at national and state level and online news equivalence.

We know that despite the changing media landscape, traditional and news outlets are setting the agenda for other areas.

I just want to say one quick word about why we looked at the phrase, adverse childhood experiences.

We know that childhood trauma is broader than adverse childhood experiences.

During our interviews with leaders in the field, we heard that adverse childhood experiences is a concept that people are really beginning to coalesce around.

If people are going to talk about it in the context of ACEs, we wanted to talk about how it appears in the coverage.

We had interviews with people who were leaders in this work.

We achieved intercoding reliability which is fancy way of saying we conducted a test.

That was pretty brief for me, as much as I love methods.

what we found.

Well, the first thing I want to say is that news coverage about adverse childhood experiences has increased steadily since 2008.

You'll see here in fact that we've expanded the analysis up through 2014 and 2015.

We start to see a really significant rise starting around 2011.

For a lot of reasons, maybe there was a high-profile article in the New Yorker that year.

This is a very significant increase, but the coverage of childhood trauma and adverse childhood experiences is pretty minimal.

This is the New York times chronicle tool, how it appears compared to breast cancer.

There scale is 600 or more articles a year, the breast cancer stories.

You know, I often say to my staff, this isn't a limitation, it is an opportunity.

What's worth noting is back in the 1940s 'S AND 1950'S, IT WASN'T HAPPENING.

DEDICATED ADVOCATES AND PRACTITIONERS WORKED HARD TO CHANGE THAT CONVERSATION.

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IT'S AN OP -- any questions, at this point?

All right.

I know we're still dealing with that tech delay.

I'm seeing fantastic commentary happening and I want to thank Leeza Arbatman for sharing resources in the chat box and I want to reiterate for folks just joining that all the slides will be available at the end of this webinar, as will the resources we're sharing.

Another things, childhood experiences.

Adverse childhood experiences tends to be driven by events or initiatives.

When adverse childhood experiences are in the news, it's because an advocate or practitioner is making news.

Usually by sharing data, hosting a training, giving a presentation, inviting a speaker, something to make adverse childhood experiences relative to their community.

Newss coverage about adverse childhood experiences often discuss a solution, which stands in contrast because news coverage tend to folks on problems.

We did find that it focused on treating pre-existing trauma rather than preventing trauma before it happened.

A lot of the solutions we did see were referenced to therapy for survivors of trauma and that finding made us wonder.

I'd like to put this to this group -- I promise I'll leave time to talk.

Talking about preventing trauma challenging?

Why or why not?

Talking about prevention of a lot of issues can be difficult so we were curious as to what your experiences have been.

I'm keeping an eye out on that chat box.

I'm seeing people reporting they're having technical difficulties so I want to reiterate that we will make the slides and all resources available at the end of this webinar.

Again, anybody who wants to share their experiences, talking about trauma, whether or not that's challenging -- I like this, nope.

What's your secret?

There's -- I'm seeing some references.

There's some crisis-driven aspects so it's difficult to get funding and it's hard to talk about it.

Such an important point of the importance of putting it on the agenda.

Lack of material around prevention.

So many factors involved.

So many things that can cause trauma so there's no one quick solution.

That's a great point.

When you're talking about prevention, sometimes it means going so far upstream, if you will, that we end up talking about foundational things and it's hard to connect for funders or participants with that issues.

Some people have no idea what we're talking about and then they get interested.

There's a notion that talking about events will increase the number of incidents that surround on reporting issues on suicide.

Talking about trauma might talk about child rearing and disciplining.

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A great point that speaks to challenges that speak to those family frames.

Challenge when people don't think trauma is happening.

The importance of getting trauma on the agenda.

A big and very difficult thing to address in their entirety.

We're seeing fantastic comments -- you all are clearly doing this work and thinking about this work every day.

One of the recurrent themes I'm seeing coming up is people don't know that trauma is a problem or they don't know that solutions and prevention are even possible.

As I've been reiterating and as I'm excited to share with you all, it is about thinking about trauma and making it part of the public conversation.

Make it part of that agenda.

I'm seeing some fantastic commentary.

I'm going to move on to the next slide, but I want folks to feel free to continue sharing these thoughts and insight.

I'm loving some of the language here I'm seeing, too, in capsulating it where it is inevitable or fear of system.

Fear of systems and fear of government or systemic issues coming up in this election year, as well.

All right.

So, let's return to thinking a little bit about some of the other findings of our study, as they relate to prevention and addressing trauma and the general character of trauma in the news.

The news about adverse childhood experiences, rarely addresses resilience.

We heard again and again that people want resilience to appear in news and media coverage whenever ACEs or childhood trauma do.

They want prevention -- they want resilience and trauma to be linked in the public mind.

But what we found, though, is when adverse childhood experiences appear in the news, resilience, et cetera, very seldom appear.

So perhaps to speak to that larger question, if people learned about ACEs from the news, what would they know or what wouldn't they know?

It's possible that people wouldn't know about resilience or how to build it or that building it is possible.

Finally, we found that the news about adverse childhood experiences tends to be dominated by health and mental health professional.

What does that look like in practice?

Well, this chart shows some of the key speakers who appeared in that coverage.

We found health and mental health professionals, clinicians, researchers, advocates from nonprofit organizations.

This pattern is contrast with the coverage we've seen of other issues, like community violence prevention.

News coverage tends to be dominated.

They're third on the list and very seldom appear.

A question does come up.

Think about this, what speakers are not part of the public conversation?

About childhood trauma and what to do about it?

Well, for instance, we can see that school representatives are very often absent from that coverage.

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We'll come back to the concerns about the implications of what the absent speakers could mean for talking about prevention and solutions in a second.

First, I'd like to let folks continue to unfold this powerful conversation in the chat box and to add to that, I'd like to ask folks if there's anything that surprised us about your findings or anything you'd like to learn more about?

I'm going to revisit here the comment box and some of the great comments I'm seeing about challenges that people are experiencing in terms of talking about prevention and childhood trauma and things that surprised you or you'd like to learn more about with respect to the findings I'm sharing today.

I'm surprised that government was so low on the list -- let me zoom out here so I can read the full comment.

Thank you, all, for your patience with us.

I want more info.

Great, we are excited to share it with you.

After we share this presentation.

We will be making these slides available, as well as the resources.

How do national nonprofit advocacy organizations fit in?

We put them in the broader category of health and mental healthcare providers, I think it's a nuance that needs to be teased out more and certainly is a rich area for discussion.

People are interested in learning more about the direct issue between CEESHGS ESHGS ces s RR, we didn't see a lot about ACEs that has a huge impact.

How does the community fit into the messaging?

That's a great question.

One of the things I wasn't able to share today, but is worth commenting on is that we did an assessment of how conversations about responsibility appear in the coverage.

So, who's held responsible for addressing community -- for addressing adverse childhood experience and childhood trauma?

What we found, we often see --

what we saw here was conversation about it's up to all of us.

It's on us, as a community, to come together around childhood trauma.

So, that was a really, really interesting dialog.

Again, it's all coming from one particular sector and I saw someone say if the public doesn't share in that conversation, it's going to stay sector-specific.

It's important to think about how we can broaden that conversation and bring that community focus and community responsibility to the foreground.

There is a need for prevention.

This is a fantastic point.

Some of the challenges and the barriers we need to overcome and what it'll take to make it easier to talk about prevention.

I'm surprised that schools are kind of absent.

That's a great point of something we're going to be talking about in the second part of this study where we look at education coverage.

There's so much shame and self-blame and parental blame.

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That was a recurrent theme we saw some up in some of the coverage is the idea that parents are ultimately to blame for childhood trauma.

There are questions to ask about what kind of conversations open up or closes off when we talk about solutions.

I was surprised that victims are second on the list.

That was a pleasant surprise for us, as well.

People who are really directly impacted by the problems are left out of that conversation, that dialogue.

Fantastic and really interesting point.

I wanted to call that out because some of the work we're doing, like with the rise center, is really focused on thinking about the media, as a traumatizing agent and what some of those ramifications and repercussions could be.

I see here that Leeza's going to be sharing a link to the rise center.

We'd welcome conversation and opportunities to connect with you all around what that looks like.

The state board of education needs to led them and perhaps districts will follow.

Surveyed children on exposure.

Lausd is actually also generating news coverage or is present in news coverage in childhood trauma as it relates to education.

I see conversations about parental blame.

Media retraumatizes young children.

Such an important point.

I'm excited to see these issues are being reflected.

I certainly hope they'll be an opportunity for folks to connect and share.

Cross systems training.

How can we bring in some of those sectors and systems that are left out of that conversation?

Elevate their role.

And then we're also seeing importance conversations about how schools are overwhelmed and some of the systems may be left out because they're overwhelmed and because it's one more thing to be part of that's a real challenge.

This is a fantastic conversation.

I'm so excited to see people sharing and providing these insights and resources.

We're seeing so much conversation around the schools piece and that larger system piece that I want to take an opportunity to pivot to our second research question where we started to explore some of those sectors that have a role to play that might not be part of the conversation.

What we can do to get them there.

Thank you, Leeza, for sharing that resource about the rise center.

Our second research question, we are -- our second research question asks where could childhood trauma or resiliency appear in news about business, education and healthcare?

We know that comprehensive strategies to prevent and address ACEs, they require many other sectors.

The larger social context, that broader world in which childhood trauma exists and all the people that are impacted by it, it could be explained in crime and violence but in business news and healthcare news or any sector that we know have a role to play that we have been talking about in the chat box.

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The connection between these sectors, between the education sector, business sector, et cetera, might not be visible in childhood trauma and in the news.

Knowing what we know about the news and how important we know that it be visible and part of our conversation, we can infer that if those connections between sectors and trauma aren't visible, the fact that they -- these different sectors have a really important role to play in addressing ACEs, they might be hard for people to understand as a long-term solution to trauma.

Basically, the news about childhood trauma we were concerned might limit our solutions, it might obscure connections between trauma and all the sectors implicated.

As a step in developing tools, make those connections more visible and elevate them to the agenda, we wanted to look at what's out there now.

We included opportunities from education, healthcare with childhood trauma.

We know they're all impacted and have a role to play in addressing childhood trauma.

We know that trauma interferes with employee productivity and retention and health outcomes and we also know that because healthcare speakers regularly appear in the news, we were interested in diving deeper to see how it connects with childhood trauma and what to do about it.

Some really new methodology for us.

One way to think about it is with an exercise that they do in trainings.

That exercise is called the every time exercise where we ask experts in the field, like you all, to think about the stories they'd want to see connected with their issue.

Try that now.

So, using the chat box, can you give us a sense of every time there's a story about, blank, it should connect with childhood trauma or resiliency.

What are stories, in your ideal world, that would draw people and stakeholders in?

Any thoughts?

Here we go, community violence, emotional learning, homelessness.

Donald Trump, love that.

African American.

Violence.

Criminal justice system.

Drug abuse.

Gang violence.

Every time there's a story about drug abuse, it should mention childhood trauma or resiliency.

Second, everytime there's a story about Donald Trump, it should mention childhood trauma or resiliency.

Every time there's a story about the education gap, it should mention childhood trauma or resiliency.

I'm seeing sexual violence, about chronic diseases, fantastic point.

That definitely brings in the healthcare sector.

Every time there's a story about foster care or teenage pregnancy or global warming.

Fantastic and really interesting point.

About bullying or government funding.

About culture and family discipline and early childhood education.

About parent.

Human trafficking.

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This is a fantastic list.

This is such a rich conversation and so indicative of how many connections there are between all these different issues and trauma and resiliency.

You folks are all the experts but how do we make those connections visible to all that need to understand that?

Let's think about the extent and the extent to which we know those exist are reflected in the news media and what opportunities there might be to make it more visible to people who aren't as deeply entrenched?

Keep these suggestions rolling in.

I see another teenage pregnancy, I see social media.

I see gun violence.

Crimes and criminal justice, incarceration rates, education and training.

It's important to notice how many of these issues connect with not only in education and healthcare sectors, but also the business sectors, things like poverty and wealth.

Things that are connected with the business sector as well as others.

Mentoring, parenting, disability and mental illness.

You guys are on fire.

Again, you know how much I love methods, but I will really try to keep this brief.

We did a slightly different method here.

We did a contents analysis to identify all the stories that mentioned or were related to adverse childhood experiences or childhood trauma.

We focused on this.

We would love to go bigger.

We took a scientific study of these.

To determine what themes about childhood trauma, a reader might expect to see in the news, we looked at the public health literature.

We had deep conversations with people who work in adverse childhood experiences, who work in the business sector and healthcare and education sectors.

We asked, what stories do you see in the news and how could those connect with the work you do or the work you know is implicated in childhood trauma?

We know that unaddressed childhood trauma can hinder academic achievement so test scores could use that knowledge to talk about the affects of untreated trauma.

We read the stories from these different papers and connecting and seeing how they connected, if at all, with these different themes.

And we coded each article that we saw for not only whether or not it explicitly mentioned trauma, but whether it had any of these themes that could connect with trauma.

Continuing the example from earlier, if an article reported on test scores explicitly connected to childhood trauma, we would note that.

If it didn't, we would say, it talks about education achievement and the drop out rate -- I'm looking at the comments on the side.

So, it could potentially talk about trauma, but maybe it doesn't.

I know this is a bit of a complex methodology.

I'm not able to do it full justice here as much I was like it -- I would love to.

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Thank you for the folks who said it seemed interesting, that just made my day.

The resources that Leeza's sharing go into depth about our research.

I would love to share and talk with any of you afterward about a little more of the nitty-gritty of what we did and what informed that work because I'm sure that everyone here could share ideas and could strengthen this.

I'll be sharing my contact information, as well, at the end of this.

Very, very happy to continue this conversation with folks offline or in another venue.

How did trauma appear in education news?

We know that childhood trauma is deeply implicated in education.

We found a few links.

To whoever mentioned lausd and their assessment and important work on trauma, I wanted to call this out.

This is a story about undocumented minors coming into California and L.A. schools and the article said, district officials have warned schools to be prepared for students who may be afraid to enroll or who could experience separation anxiety and grief.

That is the only thing we saw connected to childhood trauma and its impact to education.

We saw a ton.

There was a number of fantastic opportunities to connect stories about business, education and healthcare with childhood trauma.

This is a complex slide, so I'm going to try to talk through --  
oops, sorry.

I want to say a little bit more about what we found and the implication.

So, what you can see here is that even if there aren't stories that help people make those connections between their work and childhood trauma, there's a lot of opportunities for advocates to help them make those connections.

As we're moving forward about how to develop tools and resources, we begin by looking at the stories and connections we saw and dividing them in groups.

The opportunities we saw can be divided into this first square, stories about how prior childhood trauma affects people who are part of a sector, teachers/students.

What are the stories about that that the news could lift up and make visible?

A potential story could connect -- in the business sector -- with a story about workplace culture because many people might bring their past trauma to their employer.

A second group of stories that we saw are stories about how that sector, the education, business or healthcare, could address or help heal that prior trauma that people bring with them.

An education story that could connect is about teacher training programs or trauma-informed schools. How schools or other sectors working to build trauma-informed spaces or create trauma-sensitive spaces for people who come in with a lot of trauma already.

A third set of stories that could connect are stories about how that sector, be it the business sector, the health care sector, could reinforce or traumatize people.

A story about burnout among healthcare workers or bullying in schools and reactions on how it might be traumatizing to youngsters might appear in this box.

Finally, we see stories that could connect to childhood trauma about prevention.

Stories about mental health services in a community and how to address trauma and future incidents.

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After-school care, wrap-around services could connect how to prevent future trauma and build their resiliency.

What could this look like practical?

It took a lot to write notes to help you get through it.

Let's take a look at some concrete examples of the kinds of articles we saw and do some thinking.

I'm seeing great ideas about stories about business supports preventing trauma through employee assistance programs.

Definitely might fall into how that sector could address prior trauma experienced by stakeholders or equipping people with resiliency-building tools.

Fantastic example.

All right, so let's take a look at some concrete instances of stories we saw and ways they could connect.

For example, one story from the education sector of the Contra Costa Times read, the 2-year-old brother of one student and, cousin of another, was shot.

It makes it harder to know what motivates each child.

many of them have bigger things than math to take care of.

We know what those bigger things are, but this is a great opportunity to think through how to make those connections more explicit.

How to list what the bigger things are and what schools are doing to help students take care of them.

Opportunity to connect in the business section comes here from a story about Starbucks.

Starbucks is changing its scheduling policies to give baristas more stability and consistency, following a New York times report about the havoc of created in a young mother's life by having to work unpredictable shifts.

This could potential protect against future trauma for their children.

There are opportunities, perhaps in unexpected places, where it could be more visible.

Finally, opportunity to connect in the healthcare sector.

Here, we saw -- in the dialog about healthcare, is so much about funding and many conversations about, including articles like this that some people on the left and right is about patient treatment.

The last resort occurred in 2011, when a young man was sentenced to 15 years in prison after an arson fire.

It occurred last September when a young mother drowned her 5-year-old, after her sister failed to convince Davis police that the mother needed help.

I hope that anybody that needs self-care with do so after this article.

In the -- some of the resources that Leeza is sharing, we include examples of articles like this and specific, concrete before and after on what it could take to make the connection between the existing stories and the conversations that we want to see.

In a moment, we'll talk through a few key ways that we can help reporters tell the stories that we want to see.

But for right now, I want to return to our fantastic conversation that we're having in the text box.

How could you imagine a story about trauma or resilience appearing in different sections of news, metro, sports, arts and entertainment.

I saw great conversations earlier about sports, things like head trauma and how it's important to broaden the conversation about what trauma actually means.

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What are some other ways you could see connecting or building news that connects existing news with trauma-informed care and trauma-informed work?

Great story.

I'm seeing some things about education and education curriculum.

I see about athletes sharing stories and spot lights to talk about childhood trauma.

Fantastic.

Reaching out to well-known people who are willing to share stories, great arts and entertainment piece.

Movies like paper tiger.

We hosted a that movie.

Stories on environmental issues.

I saw references to how climate change should be connected with childhood trauma.

We see a ton of stories about climate change right now.

The resilience of paper tiger.

Highlight domestic violence.

Adult mental health services and conversations about the adult ram factions of childhood trauma that perhaps we see in healthcare and mental healthcare.

Violence in the hands of athletes.

I remember a really -- not an athlete, but some really interesting coverage that emerged around Chris brown and his experiences, as a victim of child sexual abuse.

The war and the return of soldiers and the shift in hiring social workers.

Great way to connect with international policies.

Stories about religion, in the aftermath of the movie, spot light, and the conversations about what they're doing.

Local stories that hit closer to home.

Fantastic point.

There's so much great stuff here.

I hate to move on.

I do want to talk about some of the recommendations -- some of our preliminary recommendations which are elevated in the documents Leeza has shared.

Based on our findings, we developed a couple of preliminary recommendations that we think can help practitioners, people who are doing the work, connect with reporters and give them the resources to tell the stories we want to see.

First, it is important to monitor the news.

They could be missing opportunities to shape the public and policies agenda.

We can only know what those opportunities are if we monitor the news.

What the existing stories are, what the opportunities to respond are or holidays, commemorative events, the 10th anniversary of child abuse cases, that was one that came up recently, et cetera, to create their own news.

I'm going to talk a little bit more about the building relationships with journalists and pitching news in a moment.

I want to say increasing the capacity of advocates and practitioners to connect with sectors.

There's a lot of opportunities for people who are steeped in this work to connect business and

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education and healthcare stories with child trauma prevention and bring that into the news coverage. Since people in those sectors, especially business sector, education and healthcare as well may not see themselves as part of childhood trauma conversations, it will be important to forge relationships well the to develop shared goals.

And to help people who are already doing the work to address trauma.

People who are already in those rooms to build and maintain those connections.

The training and capacity building could be an important step in reaching out to and connecting with people in other sectors.

Learning about the work happening there and how it could sustain, elevate and support childhood prevention and trauma work.

That training, that reaching out, that connection can shape the work and raise the profile of adverse childhood experiences as a preventable problem that every community and every one in every community, including unexpected partners have a stake.

I want to revisit these two middle points here with more concrete information about building relationships with journalists and expanding the range of childhood trauma.

Advocates can create news that expands the range of stories about other childhood experiences.

The problems is not understood just as this, but as a preventable public health problem.

You can create community events and find newsworthy ways and how to keep it from happening.

What does news worthy mean?

Leeza's going to be sharing a tool that describes the elements of newsworthiness.

We saw some references to things like local stories.

What is the relevance of ACEs and childhood trauma in your community?

Is there an anniversary we could talk about?

The anniversary of a bill passage or the founding of a service or new research or data, new reports or photo journalism from a community center that could be the source of a breakthrough?

We saw some conversations about celebrities and how sometimes high-profile people sharing their experiences can be an important way to get the news to pay attention.

There's so many things that make a story newsworthy and how to pitch a story that a reporter or editor want to pay attention to, to give you a chance to bring childhood trauma to the public agenda and bring solutions.

I also want to talk about building reporter relationships.

We know that reporters ultimately have the opportunity to tell those stories.

Journalists can expand childhood trauma and the impact of it, but that's going to require guidance from advocates to help reporters connect the dots between their stories, childhood trauma and the impact of childhood trauma.

We know that journalists can include and will include prevention information and intervention information and stories about childhood trauma but only if advocates and practitioners are in their head.

It's important to make your organization, the resources you have to share, the work you are doing known to journalists because if people that are steeped in this work and are attuned to the nuances of childhood trauma and why it matters and what to do about it to reporters, they have somewhere to go when they have a story that touches on childhood trauma.

Otherwise, we know journalists are going to go back to their traditional context.

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Keep an eye on [bmsg.org](http://bmsg.org) for additional tools and resources we're going to release about how to connect with reporters and build those relationships.

Here are a few key ideas.

Like, identify the outlets that reach your target and monitor the sources regularly to figure out who's writing about your issues.

You can connect with reporters through social media or give feedback.

They hear a lot about the work they don't like.

They rarely hear about the work they do that's good.

It's good to anticipate a reporter's needs, having resources, other people to go to.

Pitching news worthy stories.

And finally, as I said, when you become that reliable source, the reporters feel they can go to you to tell stories that are different.

To tell stories that address the many facets of childhood trauma and how to address.

I'm seeing some great resources here.

Things like create a list of knowledgeable organizations and names and numbers and expertise.

Fantastic advice.

Before we pivot to the question and answer session, although there's been a lot of great commentary in the chat box, I wanted to ask if anyone has any thoughts about how you want to change the news, who do you need to collaborate with?

This information is so important to us and can help us continue to shape and think about the resources we develop to make them as meaningful and helpful.

Any thoughts that people want to share in the chat box about what they want to do?

What would be helpful in terms of collaboration or who might be a trusted resource that they'd like to go to or something they've done already.

I know there are a lot of people in this space doing incredible communications work.

Anybody?

Educate communication leaders.

Credible, verifiable data about childhood trauma available at a moment's notice.

So important.

Superintendent.

Talking through with parents, so that's a very important point of collaboration.

Parents have an important resource and collaboration, including in the media and the conversation.

There's conversations here happening about social marketing and media conversations and universal learning for all adults.

Sorry for the folks who weren't here earlier, all the resources that we've shared, as well as the slides and recording will be made available afterward.

Normalized treatment, not trauma experience.

That's a great point.

Bringing the solutions focus to the media conversations, perhaps through creating news that's not only focused on the trauma, but how to address it.

Partners with universities, colleges, great ideas for partners.

Mental health professionals.

Let's see.

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Trauma-informed training.

So, raising the profile of trauma-informed training so perhaps one day when I'm doing key word searches, the word, trauma-informed, is spiking.

you can see from this dialog, there's so much -- there's so many actors with a role to play in really building and strengthening.

So, I want to make sure to leave at least 10 minutes for questions.

If you'd like to learn more, Leeza's shared a link for this, this is ours.

It's available at [bmsg.org](http://bmsg.org) and Leeza has also shared the link to it.

You'll find, in this webinar and on our website, other resources, including tools to help you pitch newsworthy stories or react to story that's are in the news and many, many others that can help change that conversation.

Before we go to the question and answer, I want to thank you also much for being here with me today.

I feel like I've gotten to interact with so many of you through this chat box and so thrilled to be part of this work and so honored to be in the presence of people making it possible.

Thank you so much and please feel free to send me any questions you might have.

Any questions?

Anything coming through in the chat box that anybody wants to share?

Resources on brain development and trauma?

I would -- we don't necessarily have a lot of that, but I know that futures without violence and others are doing groundbreaking and important work around social marketing campaign.

How often is data updated on [bmsg.org](http://bmsg.org)?

We will update the trauma materials this summer.

If you follow us on social media or subscribe to our newsletter, you can stay attuned to the work we're doing.

You can sign up for our regular news digest, which on a daily basis, collects childhood trauma, domestic and sexual violence, et cetera and how to create and react to news.

Useful resources or links on educating others on trauma, trauma-induced care.

I suggest connecting with the ACEs connection network, as well as the center for youth wellness.

Let's see.

For those who are curious, I'm seeing folks signing in, all the data -- all the slides and materials from this will be made available afterward and my contact information is available on the screen.

Please feel free to reach out to me via email.

I'd love to connect to folks about what we did and what we could still do.

I see also, I want to lift up that people have been talking about [traumasmart.org](http://traumasmart.org) and the amazing brain and others.

There are fantastic resources in this chat box that might help with the ACEs and training questions that have come up.

Any other -- any other questions?

So, I'm seeing, again, in terms of resources on brain development and trauma and training on ACEs and what to do with the results.

Some of the places that I've suggested and that I think are available and that comment Rs are suggesting are the national childhood stress, the center for youth wellness, [traumasmart.org](http://traumasmart.org), "Futures

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Without Violence" has great resources, as well.

We hope you'll continue to connect with bmgs.org about how to connect with reporters on and additional information about trauma in the news and what it means.

I see one question, how do you see youth taking a lead on reaching out to media?

That's a great question.

We continue to work with our trainers and partners on.

I linked earlier -- Leeza's linked earlier to the rise center, we're doing work in considering and thinking through youth engagement in media and thinking about trauma and media together.

We've seen youth do incredible jobs with engaging with media around teen dating violence that we know are traumatizing, structural and raiseism and we are seeing that social media is a great resource for connecting people and allowing them to feel empowered about the conversation.

And again, if you want to contact me afterward, I'm happy to connect you to our training staff who can speak to what they have seen out in the field to equip them with the tools to talk about trauma.

Anything else?

Thank you, all, somuch today for such a great engaging webinar.

It's been so, so fun and so powerful talking with you all.

Hearing your fantastic ideas and getting to be in some small way, part of the work that you do.

Do I think the restorative justice in schools compliments having trauma-informed schools?

I think that's a fantastic question.

I'm sure there are folks in this space who do work on restorative justice or trama-informed care who would be very, very equipped to answer.

Any thoughts on how restorative justice compliments trauma-informed schools?

And, Norma, again, if you would like to -- Norma, who asked that question, if you like to reach out, I can see and I can connect you with anybody who's doing that work and who might be able to speak more directly to the practical implements.

Any final questions or thoughts?

>> Jennifer, Mie, do you have anything final to ask?

>> It looks like there's no more questions.

I want to thank you, Pamela, so much for such a fantastic webinar and rolling with the technology and challenges Professor Manning: Thank you for being here and thank you for doing the work you do.

>> Thank you so much, everyone.

And thanks for the flexibility around the tech issues.

I apologize for the folks who couldn't log in.

Everyone will receive an email from me with the recording, the materials that were shared and a copy of the powerpoint slides and I will also upload that on to our website and I'll include the link in my email as well.

as you can see, there's a link that will take you to the survey that we have.

We would love to hear from you.

It'll only take a couple of minutes, so I'd appreciate if you could take the survey.

But otherwise, I hope everyone has a wonderful day and thank you so much for joining us.

Bye-bye.

>> Bye.