



# Resilience ★ Rebound ★ Recovery

## Trumping ACES

The solution to the devastating impact of trauma on children (ACES) is the development of resiliency. Scientific data uniformly demonstrate that resiliency in children can be **recovered** with treatment, programs and services -- **and can be increased**. Providers focus on building resiliency as the foundation of their work. Here are examples of outcomes that have been achieved for children with dangerously high ACE scores. These are organizations throughout Oregon, which provide an array of programs for children.



Fiona entered Hand in Hand with evidence of suspected sexual abuse and possible fetal alcohol effects and/or syndrome. She had been neglected and was exposed to drug activity and domestic violence while in the care of her biological family. She was referred to Morrison with a limited ability to attach, high anxiety, unsafe impulsivity, self-harm, aggression and sexualized behavior.

At Hand in Hand Day Treatment program, Fiona emerged as a sweet, playful and caring six year old girl who is having a big year. She now demonstrates a strong capacity to process information and her experiences by drawing, thematic play, and the use of verbal processing. Fiona learned coping skills and asks for help with them by name. She is creative and enjoys coloring, creating gifts for friends, and gardening. She recently graduated from the program and was adopted into a loving family.

- Morrison Child & Family Services, Portland OR

### Residential Mental Health Programs

**\*Average ACE Score: 6.0**

- 92% of youth have no involvement with the police or courts after 6 months of treatment
- 96% of youth have major improvements in behavior
- 94% of children placed in Residential Treatment discharged to a lower level of care
- 75% of youth had improvements in relationship skills and the ability to attach and bond

### Addiction and Recovery Programs

**\*Average ACE Score: 5.4**

- 18.6% lower recidivism rate than Oregon average
- 75% of youth who enter addiction programs see a reduction in substance use
- Clients have shown statistically significant improvements on the Asocial Index and Social Maladjustment scales. These two scales are purported to be the best measure of proneness to delinquency and adult criminal behavior (Jesness, 1996).

\* Average ACE Scores based on 2014 Oregon Alliance of Children's Programs ACES Study in which surveys from 783 children were submitted.

### Outpatient Mental Health Programs

**\*Average ACE Score: 6.5**

- 79% of children are maintained safely in their homes, estimated to be 819 children avoiding foster care, for an estimated savings of \$7,137,602.
- 89% of youth discharge at a lower level of care
- 84% of youth have significantly improved their ACORN scores (evaluation that measures treatment effectiveness and satisfaction)
- 79% reduction in high-risk behaviors
- Treatment completion rates are higher than the National average of 43.7%
- 99.5% of children did not experience a disruption from their placement



A client came to Teen Court heading down the wrong path. She was going to parties, drinking, and her chronic absenteeism led to failing classes. It was evident that if she continued down this path she would not graduate from high school. She received a citation for Minor in Possession of Alcohol and her case was referred to Teen Court.

Teen Court gives youth the opportunity to take responsibility for their actions and learn from their mistakes. As part of her consequences with Teen Court she had to go through Drug and Alcohol counseling.

As a result, she is now drug and alcohol free, earns A's and B's in school, is one of Teen Court's best volunteers, and is discussing future plans to go to college. She has come full circle – she is a leader and makes Teen Court a priority. She is truly a role model and has great leadership skills.

- The Next Door, Inc., Hood River, OR

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## Trumping ACES

### Child Welfare Programs

**\*Average ACE Score: 6.0**

- 50% more likely to attend school after leaving the program
- Two times more likely to show academic improvement
- Three times less likely to participate in risky behavior
- 83% of clients discharge at a lower level of care



Raised by his drug-addicted mother, Peter was accustomed to lying and criminal mischief-making when the juvenile justice system sent him to Looking Glass. Initially, he rebelled against the highly structured environment, but with time, the treatment program helped him focus his determination.

Today, Peter has a part-time job and plans on joining the Navy after he earns his high school diploma this year.

- *Looking Glass Youth and Family Services, Eugene, OR*

### Runaway and Homeless Youth Programs

**\*Average ACE Score: 5.4**

- 100% of youth participate in job skills trainings
- 90% of youth in the transitional living program are attending school, have graduated, or have earned a GED at time of exit
- 63% of youth were reunited with their family after accessing emergency shelter
- 84% of youth complete their family counseling plan upon exit from services
- 100% of youth in the transitional living program access medical & dental services

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“I’m thankful for you, my helping family. If it wasn’t for you, no one would have ever wanted me.”

Tommy, age 6 (Therapeutic Foster Care)

- *Morrison Child & Family Services, Portland, OR*

### Therapeutic Foster & Proctor Care Programs

**\*Average ACE Score: 6.3**

- 64% of youth discharged to a lower level of care
- 5% higher attendance in school than the Oregon average
- Less than 5% of youth return to Foster Care within three months of discharge

### Behavioral Rehabilitation Services Programs

**\*Average ACE Score: 5.5**

- 2.3 grade level average gains in Reading, Math, and Writing
- 0% recidivism for sexual offending behaviors – tracked since 2010
- 57% of children are reunited with family at program completion
- 90% of youth have reduced psychiatric inventory CAPI scores (evaluation that measures High Risk Behaviors in Children and Adolescents)
- 17% lower recidivism rate than Oregon average

We first started serving L when her parents were battling their way through a rough divorce. After the divorce, and some residential treatment for depression, L began living with her father. A few months later he kicked her out and L came back to Jackson Street for an extended stay.

L entered Jackson Street Transitional Living Program where she found the stable environment she needs to focus on her personal goals and become more self-sufficient. While living at the shelter, L has: studied for her GED, begun attending our Independent Living Skills Workshops, learned a great deal about cooking and nutrition, and has received medical and dental care. She sent for a copy of her birth certificate, and got her Oregon ID card from the DMV.

L is endeavoring to repair family relationships, and she’s planning to move to her mother’s home. L remains focused on her future, and will continue to work with our staff in Outreach Services after she leaves.



- *Jackson Street Youth Shelter, Inc.,*