
SENATE CONCURRENT RESOLUTION

ENCOURAGING THE DEPARTMENT OF EDUCATION, DEPARTMENT OF HEALTH,
DEPARTMENT OF HUMAN SERVICES, DEPARTMENT OF THE ATTORNEY
GENERAL, AND JUDICIARY TO INCORPORATE RESEARCH AND
STRATEGIES REGARDING ADVERSE CHILDHOOD EXPERIENCES INTO
THEIR WORK WITH CHILDREN SUFFERING FROM TRAUMA.

1 WHEREAS, adverse childhood experiences are defined as
2 abuse, neglect, and other traumatic or disruptive events that
3 occur during childhood, causing serious damage to a child's
4 developing brain; and
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6 WHEREAS, adverse childhood experiences cover a broad range
7 of traumatic events, including physical, emotional, and sexual
8 abuse; domestic violence; community and school violence; loss of
9 loved ones through death; severe accidents or life-threatening
10 illnesses; parental incarceration; natural disasters; and acts
11 of terrorism; and
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13 WHEREAS, the Centers for Disease Control and Prevention-
14 Kaiser Permanente Adverse Childhood Experiences Study,
15 "Relationship of Childhood Abuse and Household Dysfunction to
16 Many of the Leading Causes of Death in Adults," is one of the
17 largest investigations on childhood abuse and neglect and
18 lifetime health and well-being and involved a study from 1995 to
19 1997 of over 17,000 Kaiser Permanente members; and
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21 WHEREAS, two-thirds of study participants had at least one
22 adverse childhood experience, and more than one in five had
23 three or more adverse childhood experiences; and
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25 WHEREAS, the study concluded that:
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- 27 (1) Adverse childhood experiences are common but typically
28 unrecognized;



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2 (2) Having one adverse childhood experience means a high
3 probability of having additional adverse childhood
4 experiences;
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6 (3) Adverse childhood experiences are the nation's most
7 basic public-health problem; and
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9 (4) The effects of adverse childhood experiences are
10 cumulative: The more adverse childhood experiences a
11 person had, the greater the risk for problems in
12 behavior; social, mental, and physical health; and
13 learning and academic achievement throughout the
14 person's life; and
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16 WHEREAS, high-risk behaviors linked to adverse childhood
17 experiences include but are not limited to alcoholism and
18 alcohol abuse; abuse of illegal drugs; smoking, including
19 beginning smoking at an early age; having multiple sexual
20 partners; early initiation of sexual activity; rape; risk of
21 domestic violence and sexual assault; social isolation and
22 withdrawal; and poor impulse control; and
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24 WHEREAS, adverse childhood experiences affect a person's
25 social skills over the course of a lifetime, including the
26 ability to form relationships with others; ability to identify
27 with others; ability to adjust and express emotions; ability to
28 meet age-appropriate developmental norms; ability to establish
29 trust in relationships; personality formation, including morals,
30 values, and social conduct; respect for social institutions; and
31 bullying toward peers; and
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33 WHEREAS, adverse childhood experiences can also cause
34 serious mental- and physical-health problems by producing toxic
35 stress, which is the overload of stress hormones, which can
36 cause damage to a person's neurodevelopment, the physical and
37 biological growth of the brain; damage to a person's nervous
38 system and endocrine system; organic disease; heart disease;
39 depression; severe obesity; physical inactivity; suicide;
40 sexually transmitted infections; unintended pregnancies;
41 adolescent pregnancy; fetal death; and early death; and
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1 WHEREAS, adverse childhood experiences impair learning and
2 academic achievement by affecting a person's concentration and
3 ability to absorb new information; by causing poor school
4 performance in terms of lower grades, increased absenteeism, and
5 higher dropout and expulsion rates; and through disruption to
6 the classroom environment by causing a child to be more
7 aggressive, noisier, and less likely to cooperate or relate well
8 with others; and
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10 WHEREAS, adverse childhood experiences create an
11 intergenerational cycle because children exposed to domestic
12 violence are at an increased risk of becoming involved in family
13 violence as adults; children exposed to sexual assault are also
14 at an increased risk of becoming involved in sexual assault as
15 adults; and children exposed to any type of adverse childhood
16 experience are at an increased risk of repeating that same
17 adverse childhood experience as adults; and
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19 WHEREAS, adverse childhood experiences affect not only the
20 victim but also families, neighborhoods, schools, communities;
21 social-service delivery systems, and society at large; and
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23 WHEREAS, the effects of adverse childhood experiences
24 expand beyond the child's personal experiences to the health-
25 care, social-welfare, criminal-justice, and education systems;
26 and
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28 WHEREAS, more public awareness and information are needed
29 to properly identify adverse childhood experiences, and
30 recognition of the effects of adverse childhood experiences is
31 essential for appropriate treatment and care; and
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33 WHEREAS, the negative consequences of adverse childhood
34 experiences are not inevitable: With proper support and
35 interventions from their loved ones and the community, most
36 children are able to overcome traumatic experiences; and
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38 WHEREAS, by establishing strong partnerships and networks
39 with families and consumers and across service systems,
40 childhood trauma can be addressed; and
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1 WHEREAS, the solution to adverse childhood experiences does
2 not rely on the prevention of a particular type of trauma, but
3 rather in providing proper support to children, families,
4 organizations, systems, and communities with the necessary
5 resources to develop resilience, which is the capacity of a
6 dynamic system to adapt to acute stress, trauma, tragedy, or
7 threats; and

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9 WHEREAS, building resilience in young children promotes
10 well-being and positive functioning, which can reverse the
11 accumulated damage from adverse childhood experiences; now,
12 therefore,

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14 BE IT RESOLVED by the Senate of the Twenty-ninth
15 Legislature of the State of Hawaii, Regular Session of 2017, the
16 House of Representatives concurring, that the Department of
17 Education, Department of Health, Department of Human Services,
18 Department of the Attorney General, and Judiciary are encouraged
19 to incorporate research and strategies regarding adverse
20 childhood experiences into their work with children suffering
21 from trauma; and

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23 BE IT FURTHER RESOLVED that no later than 20 days before
24 the convening of the Regular Session of 2018, the Department of
25 the Attorney General, on behalf of each of these agencies, is
26 requested to submit a report to the Legislature on the status of
27 each agency's plans to incorporate research and strategies
28 regarding adverse childhood experiences into each agency's work
29 with children suffering from trauma; and

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31 BE IT FURTHER RESOLVED that certified copies of this
32 Concurrent Resolution be transmitted to the Governor,
33 Chairperson of the Board of Education, Superintendent of
34 Education, Director of Health, Director of Human Services,
35 Attorney General, and Chief Justice of the Hawaii Supreme Court.

