**Not Enough Apologies: Trauma Stories**, a new documentary from Wisconsin Public Television, explores the lasting effects of traumatic experiences on children and adults, and new responses to advocating for and assisting victims. The film takes viewers inside juvenile courtrooms to understand the experiences of children in need of protection and support services.

Viewers learn how adverse childhood experiences can result in changes in the brain, leading to cascading behavioral and mental health problems. Survivors of trauma share their life experiences, paths that often include repeated foster care, treatment center and juvenile prison placements.

And, service providers across the state share how they are working to be responsive to trauma in efforts to change the trajectory for affected children.

Visit [WPT.org/Trauma](http://WPT.org/Trauma) for resources, video and more.
DISCUSSION QUESTIONS:

What surprised you most about the film?

What’s one thing about trauma and its prevalence that struck you while watching?

How did hearing these stories affect you personally?

Discuss the ‘child welfare to prison pipeline’ and the role trauma plays in it.

• **Spark**: “At the onset, very traumatized children who experience all sorts of trauma from removal of home, abuse, neglect. It’s not always clear that they’re able to get the resources and the help they need to process all that pain. So, it starts with emotional outbursts and those emotional outbursts turn into disorderly conducts.”
  – Judge Everett Mitchell, Dane County Circuit Court

Discuss early intervention and informational opportunities and the cycle of entering ‘the system’ for young people.

• **Spark**: “The vast majority of juveniles that are in custody tonight had some kind of child welfare intervention when they were younger, likely where that trauma was experienced.”
  – Rep Evan Goyke, D-Milwaukee

What are some ways communities can come together to provide better awareness of and resources for victims of trauma so it’s recognized early enough for intervention?

• **Spark**: “If we could go back in time maybe and kind of start when these kids were younger and use that model of not, ‘What’s wrong with you?’ but, ‘What’s happened to you?’ If that would have been the mantra of when these, my clients, now who are 12 and 13, were 4 and 5, I don’t think we’d be where we are right now.”
  – Benjamin Gonring, Assistant State Public Defender

Share or discuss reactions to, or personal experiences with, the idea of living as a young person in constant survival mode.

• **Spark**: “A child who’s been traumatized may have that kind of fight, flight, or freeze response. So, the fight are aggressive external behaviors. So, they may be impulsive in class, they may act out, they may approach others and be physical, and it may be outbursts. That’s kind of externalizing. Some of those kids can have the flight, where they withdraw.”
  – Lynn Sheets, M.D., Children’s Hospital of Wisconsin
Not Enough Apologies: Trauma Stories

Discuss the Adverse Childhood Experiences (ACE) test and share any personal experience with your own ACE test, or your own experiences with trauma.

- **Spark:** “Physical and psychological impacts are worse the more ACEs a person has experienced. Ten such adverse experiences are measured to result in a score ranging from low to high. Surveys find that 58% of Wisconsin adults report growing up experiencing at least one ACE. 14% have four or more.” – Tim Grove, Chief Clinical Officer, SaintA

Talk about the severity of impact childhood trauma has on the child, and ultimately society. How does it compare relative to other known causes of trauma?

- **Spark:** “We see kids who have PTSD outcomes or trauma outcomes that are similar to what Vets experience after three tours of duty.” – Tim Grove, Chief Clinical Officer, SaintA
- **Spark:** “The impacts of even extreme neglect can be seen on brain scans.”

The tragic cycle of neglect, abuse, and eventual acting out often ends up involving the child welfare and eventually the juvenile justice system. Discuss this, and focus on ways institutions or communities can play a positive role in intervention.

- **Spark:** “I see this with a lot of kids. It’s like they kind of give up where they just feel like, ‘I’m going to test everybody to see if everybody is gonna give up on me.’ And then, the testing does lead to everybody giving up because it’s very difficult.”
  – Eileen Fredericks, Assistant State Public Defender

Discuss the complexities and challenges of the foster care system. What are some ideas to encourage more foster family interest?

- **Spark:** “State Representative Pat Snyder worked on 11 legislative foster care bills signed into law in 2018. Including provisions increasing incentive funding to retain foster homes and encourage permanent homes. He says the need is high for more placements.”

Discuss the use of residential care for youth when foster and family care are no longer options. How does the group feel about these care centers often being far from home? How do we balance the proximity to home with safety?

- **Spark:** “From 2018 into 2019, Wisconsin placed more than 100 juveniles in out-of-state residential care centers in 17 states, placed there because the children have such high treatment needs they can’t be maintained in their own communities with existing services.”
- **Spark:** “Sending children out of state is a last resort. But even in the home community, the kinds of transitions children in foster care can experience layers trauma on top of trauma according to those who’ve lived it.”
- **Spark:** In many cases of abuse it’s the family or caregiver doing the abusing, resulting in court-ordered “removal.”
What are some ways we can shift the conversation toward trauma-informed care? How can communities and organizations help?

- **Spark:** “Trauma-informed care expert Elizabeth Hudson says this so-called ‘switching the lens’ results in a perspective shift allowing teachers or caregivers to recognize why a child might be acting out or shutting down.”

- **Spark:** “One of the big shifts in perspective is being able to see the behavior as a communication.” – *Elizabeth Hudson, M.S.W., Trauma Informed Care Expert*

Talk about the idea of safety and trust as it relates to trauma-informed care and trauma recovery.

- **Spark:** “Research shows the number one factor for children who develop resilience is having at least one stable and committed relationship with a caring adult.”

- **Spark:** “The trauma informed care model emphasizes physical, psychological and emotional safety.”

Discuss more innovative ways of addressing trauma in the home and intervention practices.

- **Spark:** “Building that trust with them as far as just taking time, you know, figuring out what it is that they could use help with. You know, not shaming or blaming them. Obviously, I don’t think anybody wakes up in the morning and says, ‘I want to hurt my child.’ And so, really identifying that we know that they love their kids and that they just need help in this situation and trying to find a way to partner with them.” – *Alisha Haase, Waupaca County Health and Human Services*

- **Spark:** “Waupaca County was able to save costs by not placing children in expensive treatment centers. The shift allowed for more staff and less turnover. It meant hiring in-home parenting aides to help families learn and heal. With that number one goal being to keep families together because experts acknowledge repeated out-of-home placements result in new traumas.”

Talk about the impact of trauma on learning, and the role of schools in identifying trauma and working with trauma-informed care models. How critical is it that schools and districts are trained to work with students with adverse childhood experiences?

- **Spark:** “Ten years ago Wendell Waukau set out to address factors like adverse childhood experiences that he believes result in the Menominee Indian School District having some of the lowest student achievement rankings in the state.”

- **Spark:** “We’re finding out that kids from trauma when they come into schools they have walls up because they have trust issues sometimes and so we need to build those relationships first, before any learning can take place.” – *Ryan Coffey, Menominee Indian School District*

- **Spark:** “For students in all grades who need additional help, the health center is right on school district grounds staffed by behavioral health professionals.”
Discuss your views on the approach of the ‘Healthy Infant Court’ in Milwaukee, and the approach of balancing access to resources, education and legal intervention.

- **Spark:** “The judges are equipped with expert training to learn about infant mental health and signs of toxic stress in babies.”

- **Spark:** “These Milwaukee County judges are getting at root causes and starting early.”

- **Spark:** “Babies are the largest population of those that are removed from parents in our system, both locally, statewide and nationally and mostly for neglect.”
  – Judge Mary Triggiano, Milwaukee County Circuit Court

What other ideas did the film inspire in you?

How many among you will go home and take the ACE Test?

There are some great resources at [WPT.org/Trauma](http://WPT.org/Trauma) curated by our clinical partners, along with a link to an ACE Test and some in-depth explorations of this broad subject by our partners at WisContext.org.

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