

Roundtable on the Future of Justice Policy

Examining Violence in the United States: Implications for Justice Policy and Practice

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A Brief Review of a Developmental and Ecological Perspective on the Intergenerational Transmission of Trauma and Violence

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Throughout this article I use the term intergenerational transmission of *trauma and* violence rather than transmission of violence, because it is when the trauma of violence—cultural, economic, and interpersonal violence—in one generation goes unhealed that it is passed down to the next, in one form or another. ¹

Events capable of causing trauma span a wide range of situations including mental, physical, verbal, and sexual abuse, exposure to community and domestic violence, food and housing insecurity, and many other adverse childhood events. Trauma is not the event itself, but the psychological and emotional wounds that persist after the traumatic event has passed. Almost everyone experiences at least one potentially traumatic event, and most of those events, instead of being traumatic, spur the development of new competencies. Stress becomes traumatic when it is accompanied with the loss of physical, psychological, and/or emotional safety in ways that overwhelm an individual's or community's ability to cope. An individual or community becomes traumatized when those psychological and emotional wounds persist without any coping supports, or they are repeatedly exposed to new traumatic experiences without the time to recover from the previous trauma.

The complexity of the intergenerational transmission of trauma and violence is best understood by integrating developmental ecological theories of behavior with research that highlights racial and ethnic inequalities in ecological context. Behavior is developmental and ecological, which means that violent behavior patterns observed in adolescence and young adulthood did not suddenly emerge but were built over time by ecological risk factors (society, community, school, family, and peer) and individual risk factors (psychological and biological vulnerabilities). These risk factors also identify numerous points across the lifecourse for prevention and intervention.

¹ Berlin, L. J., Appleyard, K., & Dodge, K. A. (2011). Intergenerational Continuity In Child Maltreatment: Mediating Mechanisms And Implications For Prevention. *Child Development*, 82(1), 162-176.

Toth, S. L., & Cicchetti, D. (2013). A Developmental Psychopathology Perspective On Child Maltreatment. *Child Maltreatment*, 18(3), 135-139.

² Van der Kolk, B. A. (2015). the Body Keeps The Score: Brain, Mind, and Body In The Healing Of Trauma. Penguin Books.

³ Widom, C. S., & Wilson, H. W. (2015). Intergenerational Transmission Of Violence. In *Violence and Mental Health* (pp. 27-45). Springer, Dordrecht.

⁴ Herrenkohl, T. I., Maguin, E., Hill, K. G., Hawkins, J. D., Abbott, R. D., & Catalano, R. F. (2000). Developmental Risk Factors For Youth Violence. *Journal of Adolescent Health*, 26(3), 176-186.

Especially for population health issues like interpersonal violence, racial and ethnic inequality in ecological context cannot be ignored. Interpersonal violence, homicide in particular, is the third leading cause of death among men ages 15 to 34, but the leading cause of death among Black men in that age range. In 2016, approximately 37 of every 100,000 Black men died from homicide, for White men it was approximately 4 of every 100,000. This gaping disproportionality can only be understood through the lens of the intergenerational transmission of the trauma of the racial and ethnic violence on which the U.S. was founded.

Because the focus of this article is on understanding the development and maintenance of violent behavior patterns for the purpose of identifying points of prevention and intervention, close attention will be paid to using person-centered language that does not conflate exhibiting violent behaviors with being a violent person. There is a meaningful perceptual difference between discussing the behaviors of a violent person versus discussing a person who engaged in violent behaviors, the former is more likely to be associated with immutable characteristics of a person and the latter is more likely to be associated with attempts at understanding social and contextual causes of the behavior.

Developmental Ecological Theories

This brief review highlights four developmental ecological theories that aid our understanding of the intergenerational transmission of trauma and violence. First, social learning theory illustrates how behavior patterns, including violent behavior, are learned and maintained through modeling and reinforcement contingencies in the context of one's previous and current social interactions. When applied to understanding the family environment, children learn violence by experiencing it from their caregivers and/or witnessing it among the adults in their family. Experiencing and witnessing these interactions teaches techniques for violence and teaches approval for the use of violence to manage one's emotional states and interpersonal interactions.

Second, social information processing theories detail how the development of biased perceptions such as the likelihood of attributing hostile intent to other's actions increases the likelihood of exhibiting aggressive behaviors. Children who have a history of experiencing and witnessing violence in their homes, community, and/or at school develop a social information processing bias toward interpreting ambiguous social interactions as threatening, and believe that interpersonal difficulties are best responded to with aggression. Because this tendency toward aggressive responses alienates prosocial peers, these children tend

⁵ Leading Causes of Death (LCOD) in Males and Females, United States https://www.cdc.gov/healthequity/lcod/index.htm

⁶ Langley, M. & Sugarmann, J. (2019). Black Homicide Victimization in the United States: An Analysis of 2016 Homicide Data. The Violence Policy Center. Retrieved from: http://vpc.org/studies/blackhomicide19.pdf

Degruy-Leary, J. (1994). Post-traumatic Slave Syndrome: America's Legacy of Enduring Injury. Caban Productions.

⁸ Bronfenbrenner, U. (1979). The Ecology Of Human Development: Experiments By Nature And Design. Cambridge, MA: Harvard University Press

⁹ Bandura, A. (1973). Aggression: A Social Learning Analysis. Prentice-Hall.

¹⁰ Abbassi, A., & Aslinia, S. D. (2010). Family Violence, Trauma and Social Learning Theory. *Journal of Professional Counseling: Practice, Theory & Research*, 38(1), 16-27.

Dodge, K. A., Bates, J. E., & Pettit, G. S. (1990). Mechanisms In The Cycle Of Violence. *Science*, 250(4988), 1678-1683.
De Castro, B. O., Veerman, J. W., Koops, W., Bosch, J. D., & Monshouwer, H. J. (2002). Hostile Attribution Of Intent And Aggressive Behavior: A Meta-analysis. *Child Development*, 73(3), 916-934.

to have peer groups that are concentrated with other hostile and aggressive individuals, thereby reinforcing violent behavioral patterns. 13

Third, theories of differential genetic susceptibility to context detail how individual differences in genetic sensitivity to one's developmental context increases the likelihood of emotional dysregulation and externalizing behaviors in response to chronic exposure to traumatic stressors. Theoretical and empirical studies of genetic differences in neurobiological responsivity to environmental context helps us understand the large variation in a youth's level of resiliency to growing up in high-risk environments. What must not be overlooked in these theories is that it is the interaction of *nature and nurture*: a child who is vulnerable to developing antisocial behaviors in response to harsh parenting is also primed for developing prosocial behaviors in response to nurturing parenting. Essentially, genetically determined neurobiological susceptibility to the environment is beneficial when the environment is supportive and exceptionally risk-inducing when the environment is deleterious.

Fourth, the biology of adversity provides concrete evidence that chronic activation of the neurobiological stress response system compromises the biological mechanisms responsible for adaptive coping and management of arousal. The biology of adversity is recent in its application to understanding how exposure to violence changes one's neurobiology, and how those changes then become causal factors in future engagement in violent behaviors. Research on changes in the hypothalamic-pituitary-adrenal axis, glucocorticoid, and neuroendocrine systems in children who have witnessed or experienced abuse suggests that chronic activation of these stress systems in response to traumatic stressors results in: (1) structural brain changes such as myelination and synaptic pruning that aid immediate survival but compromise long-term

¹³ Monahan, K. C., Steinberg, L., & Cauffman, E. (2009). Affiliation with Antisocial Peers, Susceptibility to Peer Influence, and Antisocial Behavior During the Transition to Adulthood. *Developmental Psychology*, 45(6), 1520.

Schwartz, D., & Proctor, L. J. (2000). Community Violence Exposure and Children's Social Adjustment in the School Peer Group: The Mediating Roles of Emotion Regulation and Social Cognition. *Journal of Consulting and Clinical Psychology*, 68(4), 670.

¹⁴ Bakermans-kranenburg, M. J., & Van Ijzendoorn, M. H. (2011). Differential Susceptibility to Rearing Environment Depending on Dopamine-Related Genes: New Evidence and a Meta-Analysis. *Development and Psychopathology*, 23(1), 39-52.

Ellis, B. J., & Boyce, W. T. (2008). Biological Sensitivity to Context. *Current Directions in Psychological Science*, 17(3), 183-187. Obradović, J., Bush, N. R., Stamperdahl, J., Adler, N. E., & Boyce, W. T. (2010). Biological Sensitivity to Context: The Interactive Effects of Stress Reactivity and Family Adversity on Socioemotional Behavior and School Readiness. *Child Development*, 81(1), 270-289.

¹⁵ Ellis, B. J., Boyce, W. T., Belsky, J., Bakermans-Kranenburg, M. J., & Van IJzendoorn, M. H. (2011). Differential Susceptibility to the Environment: An Evolutionary–Neurodevelopmental Theory. *Development and Psychopathology*, 23(1), 7-28.

¹⁶ Kochanska, G., Aksan, N., & Joy, M. E. (2007). Children's Fearfulness as a Moderator of Parenting in Early Socialization: Two Longitudinal Studies. *Developmental Psychology*, 43(1), 222-237.

¹⁷ De Bellis, M. D. (2001). Developmental Traumatology: The Psychobiological Development Of Maltreated Children and its Implications for Research, Treatment, and Policy. *Development and Psychopathology*, *13*(3), 539-564.

Perry, B. D., Pollard, R. A., Blakley, T. L., Baker, W. L., & Vigilante, D. (1995). Childhood Trauma, the Neurobiology of Adaptation, and "Use-dependent" Development of the Brain: How "States" Become "Traits." *Infant Mental Health Journal*, 16(4), 271-291.

health, and (2) functional brain changes such as greater levels of amygdala reactivity to threat. ¹⁸ These neurobiological changes heightens attentional vigilance and bias to threat, and compromise the ability to experience, tolerate, and manage emotional arousal. ¹⁹

Ecological Risk Factors

Many questions about the intergenerational transmission of trauma and violence focus on whether and how abuse and neglect from one's biological family leads to adolescent perpetration of violence, but questions need to begin with examining the nested ecological system that initially places children at risk for abuse and neglect. It is easy to overlook the fact that most of the factors that increase the likelihood that abused and neglected children will develop violent behavior patterns as adolescents are the same factors that increase the likelihood that parents will abuse and neglect their children. The search for direct pathways also runs contrary to consistent evidence from prospective studies, which show that only 20% to 30% of abused and neglected children engage in violent behaviors as adolescents. Essentially, victims of abuse and neglect are at significantly elevated risk for engaging in violent behaviors, *but the overwhelming majority do not develop violent behavioral patterns as adolescents*. Additionally, experiencing neglect appears to be as much of a pathway to adolescent violence as experiencing abuse, which suggests that the pathways are complex and contextual.

The risk and protective factors associated with the nested ecological system in which children live that have been shown to be predictive of violence are the greatest early opportunities of prevention before violent behaviors emerge, and intervention at the earliest sign of violent behaviors.²⁴ This nested set of

¹⁸ Dannlowski, U., Kugel, H., Huber, F., Stuhrmann, A., Redlich, R., Grotegerd, D., et al. (2013). Childhood Maltreatment is Associated with an Automatic Negative Emotion Processing Bias in the Amygdala. *Human Brain Mapping*, 34, 2899-2909.

Siegel, J. P. (2013). Breaking the Links in Intergenerational Violence: An Emotional Regulation Perspective. Family Process, 52(2), 163-178.

¹⁹ Perry, B. D. (2009). Examining Child Maltreatment through a Neurodevelopmental Lens: Clinical Applications of the Neurosequential Model of Therapeutics. *Journal of Loss and Trauma*, 14, 240-255.

²⁰ Schuck, A. M., & Widom, C. S. (2005). Understanding the Role of Neighborhood Context in the Long-term Criminal Consequences of Child Maltreatment. *American Journal of Community Psychology*, *36*(3-4), 207-222.

²¹ Berlin, L. J., Appleyard, K., & Dodge, K. A. (2011). Intergenerational Continuity in Child Maltreatment: Mediating Mechanisms and Implications for Prevention. *Child Development*, 82(1), 162-176.

²² Widom, C. S., & Wilson, H. W. (2015). Intergenerational Transmission of Violence. In *Violence and Mental Health* (pp. 27-45). Springer, Dordrecht.

²³ English, D. J., Widom, C. S., & Brandford, C. (2001). *Childhood Victimization And Delinquency, Adult Criminality, and Violent Criminal Behavior: A Replication and Extension*. National Institute of Justice.

Maxfield, M. G., & Widom, C. S. (1996). The Cycle of Violence: Revisited 6 Years Later. *Archives of Pediatrics & Adolescent Medicine*, 150(4), 390-395.

²⁴ Fowler, P. J., Tompsett, C. J., Braciszewski, J. M., Jacques-Tiura, A. J., & Baltes, B. B. (2009). Community violence: A Meta-analysis on the Effect Of Exposure And Mental Health Outcomes Of Children And Adolescents. *Development and Psychopathology*, *21*(1), 227-259.

Schuck, A. M., & Widom, C. S. (2005). Understanding the Role Of Neighborhood Context In The Long-term Criminal Consequences of Child Maltreatment. *American Journal of Community Psychology*, *36*(3-4), 207-222.

Widom, C. S., & Wilson, H. W. (2015). Intergenerational Transmission of Violence. In *Violence and Mental Health* (pp. 27-45). Springer, Dordrecht.

ecological contexts begins with formal and informal social policies that shape all other ecological contexts. Formal and informal social policies are large determinants of who gets access to what resources and the extent to which there is a network of preventative social supports. The second ecological context is the community and the opportunities and constraints afforded by the community in which the family resides, as well as the ability to escape high-risk communities. Community contexts have a large effect on exacerbating or mitigating both likelihood of exposure to abuse and neglect and the extent to which abuse and neglect will lead to antisocial adolescent behavior. The third ecological context is the schools to which children have access, this is often considered part of the community but is important to highlight separately when considering child and adolescent outcomes. Schools are societally sanctioned and funded contexts that can either reinforce existing oppressions and be sites of re-traumatization, or provide safe contexts and opportunities for vulnerable children to break intergenerational family trauma and broader oppressions. The fourth ecological context is the immediate and extended family caregiving environment in which the child is developing. Although, this nested set of ecological contexts ends with the child's direct exposure to abuse and neglect at home, what the ecological perspective highlights is the importance of understanding how each ecological context contributes to children's experiences and outcomes.

The intergenerational transmission of trauma and violence is determined by the accumulation of risk factors across one's lifecourse, coupled with the lack of protective factors. This accumulation of exposure to violence and other traumatic experiences is more than additive, it has an exponential relationship to the likelihood of poor developmental outcomes. The effects of exposure to violent, traumatic, and adverse life experiences are also not independent from each other. For example, the effect of exposure to chronic housing and food insecurity and chronic community violence are particularly damaging for the emotional and behavioral development of children who are also growing up in homes with "impaired caregiving system[s]." Especially for children, trauma occurs when high levels of toxic stress are experienced "in the absence of the buffering protection of a supportive adult relationship." Supportive caregivers are pivotal in determining whether potentially traumatic experiences will be tolerable or traumatic.

²⁵ Margolin, G., & Gordis, E. B. (2000). The Effects of Family and Community Violence on Children. *Annual Review Of Psychology*, *51*(1), 445-479.

Osofsky, J. D. (1999). The Impact of Violence on Children. The Future of Children, 33-49.

²⁶ Appleyard, K., Egeland, B., van Dulmen, M. H., & Alan Sroufe, L. (2005). When More is Not Better: The Role of Cumulative Risk in Child Behavior Outcomes. *Journal of Child Psychology and Psychiatry*, 46(3), 235-245.

Nikulina, V., Widom, C. S., & Czaja, S. (2011). The Role of Childhood Neglect and Childhood Poverty in Predicting Mental Health, Academic Achievement and Crime in Adulthood. *American Journal of Community Psychology*, 48(3-4), 309-321.

Stattin, H., & Magnusson, D. (1996). Antisocial Development: A Holistic Approach. *Development and Psychopathology*, 8(4), 617-645.

²⁷ Blaustein, M., & Kinniburgh, K. (2007). Intervening Beyond the Child: The Intertwining Nature of Attachment and Trauma. *British Psychological Society Briefing Paper*, 26, 48-53.

Kiser, L. J. (2007). Protecting Children from the Dangers of Urban Poverty. Clinical Psychology Review, 27(2), 211-225.

²⁸ Shonkoff, J. P., Garner, A. S., Siegel, B. S., Dobbins, M. I., Earls, M. F., McGuinn, L., ... & Committee on Early Childhood, Adoption, and Dependent Care. (2012). The Lifelong Effects of Early Childhood Adversity and Toxic Stress. *Pediatrics*, 129(1), e232-e246.; p. e246.

The inconvenient truth is that children who experience abuse and neglect early in their childhood are significantly more likely to experience poly-victimization—subsequent victimization and trauma throughout their lifecourse. Poly-victimization creates diverging developmental trajectories: some children's developmental trajectories are repeatedly negatively affected by needing to recover from traumatic life experiences, and other children's developmental trajectories are advantaged by having to only cope with a limited number of traumatic events that are discrete from their otherwise developmentally supportive environment. Who experiences these divergent development trajectories is not racially and ethnically neutral, Black and brown children have a significantly higher likelihood of experiencing chronic trauma without coping supports, and White children have a significantly higher likelihood of experiencing a limited number of traumatic events coupled with coping supports.

Individual Risk Factors

There are many individual risk factors, this brief review will focus on two stress vulnerability pathways: genetic neurobiological sensitivity to ecological context and compromised neurobiological functioning as a result of trauma. As discussed in the theoretical review above, neurobiological sensitivity to ecological context theories posit that some children are more sensitive to both the helpful and harmful aspects of the contexts in which they live. In developmentally adverse home and community environments, sensitive children's exaggerated neurobiological stress arousal systems result in maladaptive cognitive, emotional, and behavioral coping, that over time culminates in being placed at high risk for developing anxious, impulsive, and externalizing behavioral patterns.

The individual risk factor of compromised neurobiological functioning of the stress response system that is initially caused by chronic exposure to traumatic stressors, and then becomes biologically embedded as an individual risk factor for perpetration of violence is based on theory and evidence regarding the biology of adversity, discussed above. Several researchers have established a replicable set of neurobiological cascades that begin with chronic exposure to traumatic stressors and end with biologically embedded vulnerability to

²⁹ Finkelhor, D., Ormrod, R. K., & Turner, H. A. (2007). Poly-victimization: A Neglected Component in Child Victimization. *Child Abuse & Neglect*, 31(1), 7-26.

Widom, C. S. (1999). Posttraumatic Stress Disorder in Abused and Neglected Children Grown Up. *American Journal Of Psychiatry*, 156(8), 1223-1229.

Voisin, D. R., & Elsaesser, C. M. (2013). Pathways from Polyvictimization to Youth Problem Behaviors: The Critical Role of School Engagement. *International Journal of Higher Education*, 2(4), 15-30. Article from Developmental Trauma Meeting.

³⁰ Roberts, A. L., Gilman, S. E., Breslau, J., Breslau, N., & Koenen, K. C. (2011). Race/Ethnic Differences In Exposure to Traumatic Events, Development of Post-traumatic Stress Disorder, and Treatment-seeking for Post-traumatic Stress Disorder in the United States. *Psychological Medicine*, *41*(1), 71-83.

³¹ Boyce, W. T., Sokolowski, M. B., & Robinson, G. E. (2012). Toward a New Biology Of Social Adversity. *Proceedings of the National Academy of Sciences*, 109(Supplement 2), 17143-17148.

³² Boyce, W. T., & Ellis, B. J. (2005). Biological Sensitivity to Context: I. An Evolutionary–developmental Theory of the Origins and Functions of Stress Reactivity. *Development and Psychopathology*, 17(2), 271-301.

Obradović, J., Bush, N. R., Stamperdahl, J., Adler, N. E., & Boyce, W. T. (2010). Biological Sensitivity to Context: The Interactive Effects of Stress Reactivity and Family Adversity on Socioemotional Behavior and School Readiness. *Child Development*, 81(1), 270-289.

behavioral dysregulation. ³³ Violent behaviors can become a neurobiologically triggered impulsive reaction to emotional agitation that is engaged before the rational decision-making areas of the brain can process the experience and suppress action. Because our neurobiological systems are continuously developing in response to input, children who have been neurobiologically "changed" in response to their developing environment can be supported in "re-setting" their neurobiological stress response systems to enable more adaptive coping. ³⁴

Historical Trauma

The intergenerational transmission of historical trauma is essential to understanding contemporary racial and ethnic group differences in both victimization and perpetration of violence. Historical trauma includes three successive phases: (1) dominant group perpetrating mass traumas on a subgroup in the population, resulting in cultural, familial, societal, and economic devastation, (2) the initial generations that directly experience these traumas develop negative biological, cultural, psychological, and behavioral symptoms; (3) the unhealed traumas are conveyed to successive generations through a host of societal, contextual, interpersonal, and biological processes.

One highly relevant example of the intergenerational transmission of historical trauma, given the critical role of the family caregiving environment in adolescent outcomes, is the extent to which Black children are not raised by their biological parents, children for whom abuse and neglect does not necessarily cease once placed into another home. In 2016, approximately 23% of children in foster care were Black but they made up only 14% of the child population; in comparison, 44% of children in foster care were White and they made up 50% of the child population. This racial and ethnic disparity is directly due to the ways

³³ Shonkoff, J. P., Garner, A. S., Siegel, B. S., Dobbins, M. I., Earls, M. F., McGuinn, L., ... & Committee on Early Childhood, Adoption, and Dependent Care. (2012). The Lifelong Effects of Early Childhood Adversity and Toxic Stress. *Pediatrics*, 129(1), e232-e246.;

³⁴ Perry, B.D. & Dobson, C. (2013). The Neurosequential Model (NMT) in Maltreated Children. In (J. Ford & C. Courtois, Eds) *Treating Complex Traumatic Stress Disorders in Children and Adolescents*, pp 249-260. Guilford Press, New York

³⁵ Brown-Rice, K. (2013). Examining the Theory of Historical Trauma Among Native Americans. *Professional Counselor*, 3(3).

Conching, A. K. S., & Thayer, Z. (2019). Biological Pathways for Historical Trauma to Affect Health: A Conceptual Model Focusing on Epigenetic Modifications. *Social Science & Medicine*, 230, 74-82.

Sotero, M. M. (2006). A Conceptual Model of Historical Trauma: Implications for Public Health Practice and Research. *Journal of Health Disparities Research and Practice*, 1(1), 93–108.

Whitbeck, L. B., Adams, G. W., Hoyt, D. R., & Chen, X. (2004). Conceptualizing and Measuring Historical Trauma Among American Indian People. *American Journal of Community Psychology*, 33(3-4), 119-130.

³⁶ Courtney, M. E., & Terao, S. (2005). Emotional and Behavioral Problems of Foster Youth: Early Findings of a Longitudinal Study. In H. E. Fitzgerald, R. Zucker, & K. Freeark (Eds.), *The Crisis in Youth Mental Health: Critical Issues and Effective Programs* (pp. 105-129). Westport, CT: Praeger Publishers.

³⁷ Kids Count Data Center (2019). Children in Foster Care by Race and Hispanic Origin in the United State. The Annie E. Casey Foundation. Retrieved from:

Kids Count Data Center (2019) Child population by race and Hispanic origin in the United States. Annie E. Casey Foundation. Retrieved from:

that slavery created and necessitated insecure parent-child attachment that has been passed down through generations. ³⁸ And, the ways that Jim Crow, segregation, mass incarceration, and other social policies have made it disproportionately difficult for Black and brown families to create the conditions that are conducive of supportive parenting.

Intervening Across the Lifecourse

Only by integrating a range of developmental theories and understanding the ecological context can something as complex as violent patterns of behavior be understood, especially if the goal is identifying points of prevention and intervention. See Humauyn and Scott (2015), and Mihalic et al., (2001) for reviews of developmentally based interventions for preventing and reducing violent behavior in children and adolescents. These reviews point to several time-periods and contexts across an individual's lifecourse, from the prenatal period to late adolescence, for intervening with evidence-based interventions that decrease the likelihood that children placed at risk will develop violent behavioral patterns as adolescents. A few examples of those time-periods and categories of intervention are listed below.

Pre-Natal Months

- There are numerous known targets for prevention long before children are placed at risk for abuse and neglect. This includes parents need for healing from of their own abuse and neglect to ensure they have the psychological and emotional capacities to engage in supportive parenting, as well as ensuring they have the socioeconomic and community resources that are associated with reducing the likelihood of abuse and neglect.

Post-Natal Months

- Prevention efforts can continue immediately after birth for families with known risk factors that can be delivered through proven home visiting interventions that target parent-infant attachment and parent-infant stress regulation.

 $\frac{\text{https://datacenter.kidscount.org/data/tables/103-child-population-by-race\#detailed/1/any/false/37,871,870,573,869,3}{6,868,867,133,38/68,69,67,12,70,66,71,72/423,424}$

³⁸ Siegel, J. P. (2013). Breaking the Links in Intergenerational Violence: An Emotional Regulation Perspective. *Family Process*, 52(2), 163-178.

³⁹ Ceballo, R., & McLoyd, V. C. (2002). Social Support and Parenting in Poor, Dangerous Neighborhoods. *Child Development*, 73(4), 1310-1321.

McLoyd, V. C. (1990). The Impact of Economic Hardship on Black Families and Children: Psychological Distress, Parenting, and Socioemotional Development. *Child Development*, 61(2), 311-346.

⁴⁰ Humayun, S., & Scott, S. (2015). Evidence-based Interventions for Violent Behavior in Children and Adolescents. In *Violence and Mental Health* (pp. 391-419).

Mihalic, S. F., & Irwin, K. (2003). Blueprints for violence prevention: From Research to Real-world Settings—Factors Influencing the Successful Replication of Model Programs. *Youth Violence and Juvenile Justice*, 1(4), 307-329.

Mihalic, S., Irwin, K., Elliott, D., Fagan, A., & Hansen, D. (2001). Blueprints for Violence Prevention. *Juvenile Justice Bulletin*, 1-15.

Early Childhood

- For children who have experienced abuse and neglect, parent training programs can be delivered for the parents and foster parents to ensure that children's home environments improve, and any initial learning of violent behaviors are mitigated. Effective interventions can be delivered in as few as 10-12 weeks.

School Going Years

- The school-going years are an opportune time for direct teaching of social and emotional skills, and problem-solving and decision-making skills that have been shown to reduce the likelihood that children who have experienced abuse and neglect will be rejected by prosocial peers. This peer rejection increases the likelihood that abused and neglected children's social interactions will be concentrated with children exhibiting aggressive and deviant behaviors, which escalates and reinforces those behaviors.
- The school-going years are also the best opportunity for accessing children placed at risk and delivering counselling sessions to help them cope with the mental health effects of abuse, neglect, and other traumatic stressors.

First Contact with Juvenile Justice System

- During early adolescence, if the goal of the juvenile justice system is desistance, the focus should be on anything but detention; implementing evidence-based interventions such as community supervision and apprenticeship diversion programs, coupled with interventions targeting psychological and emotional health, and adaptive coping skills.

Gang Members or Child "Soldiers"

The issue of continued trauma throughout one's development *should be* particularly salient for how we think about and respond to children and youth involved in gangs; however, it is often dismissed as immaterial. Gang membership peaks between the ages of 14 and 15 and is disproportionately high among Black and Latinx youth coping with trauma and adversity. These are the ages when adult social control is low *and* youth decision-making capacities are still developing. Additionally, planful decision-making among the youth placed at highest risk for gang membership is likely delayed because of the known effects of abuse and neglect on cognitive and emotional development.

⁴¹ Egley Jr, A., & Howell, J. C. (2012). Highlights of the 2010 National Youth Gang Survey. Juvenile Justice Fact Sheet. Office of Juvenile Justice And Delinquency Prevention.

Esbensen, F. A., & Carson, D. C. (2012). Who are the Gangsters? An Examination of the Age, Race/Ethnicity, Sex, and Immigration Status of Self-reported Gang Members in a Seven-city Study of American Youth. *Journal of Contemporary Criminal Justice*, 28(4), 465-481.

Thornberry, T. P., Krohn, M. D., Lizotte, A. J., Tobin, K., & Smith, C. A. (2003). *Gangs and Delinquency in Developmental Perspective*. Cambridge University Press.

⁴² Dannlowski, U., Kugel, H., Huber, F., Stuhrmann, A., Redlich, R., Grotegerd, D., Et Al. (2013). Childhood Maltreatment is Associated with an Automatic Negative Emotion Processing Bias in the Amygdala. *Human Brain Mapping*, 34, 2899–2909.

There are three parts to the connection between trauma and gang involvement: precursor traumatic experiences that increase the likelihood of gang involvement, exposure to traumatic violence during the period of gang involvement, and lingering trauma that is a consequence of both the precursors and gang involvement.

Traumatic precursors that have been associated with an increased likelihood of gang membership among youth growing up in adverse environments:

- Physical and sexual victimization at home and/or in the community
- Post-traumatic dissociation and emotional numbing
- Poverty and associated housing and food insecurity
- Self-medicating through substance abuse

Traumatic experiences during a youth's gang-involved years:

- Violent victimization by own and rival gang members
- Direct witnessing of traumatic violence
- Perpetration induced trauma from feeling compelled/forced to commit violent acts that violate one's personal moral code

Traumatic consequences that can persist after desisting in gang involvement:

- Biased perception of the world as dangerous and threatening
- Depression, general anxiety, and annihilation anxiety
- Self-medicating through substance abuse
- Inability to engage in adaptive coping that increases the likelihood of housing and food insecurity

In the U.S. we tend to sweep aside the connections between trauma and gang membership, think of children and youth involved in gangs as criminals, and react to their behaviors based on that criminal status. However, when similar precursors and outcomes are observed among children and youth recruited into

Perry, B. D., Pollard, R. A., Blakley, T. L., Baker, W. L., & Vigilante, D. (1995). Childhood Trauma, the Neurobiology of Adaptation, and "Use-dependent" Development of the Brain: How "States" Become "Traits." *Infant Mental Health Journal*, 16(4), 271-291. Siegel, J. P. (2013). Breaking the Links in Intergenerational Violence: An Emotional Regulation Perspective. *Family Process*, 52(2), 163-178.

⁴³ Fowler, P. J., Tompsett, C. J., Braciszewski, J. M., Jacques-tiura, A. J., & Baltes, B. B. (2009). Community Violence: A Meta-analysis on the Effect of Exposure and Mental Health Outcomes of Children and Adolescents. *Development and Psychopathology*, *21*(1), 227-259.

Kerig, P. K., Wainryb, C., Twali, M. S., & Chaplo, S. D. (2013). America's Child Soldiers: Toward a Research Agenda for Studying Gang-involved Youth in the United States. *Journal of Aggression, Maltreatment & Trauma*, 22(7), 773-795.

Kerig, P. K., Chaplo, S. D., Bennett, D. C., & Modrowski, C. A. (2016). "Harm as Harm" Gang Membership, Perpetration Trauma, and Posttraumatic Stress Symptoms among Youth in the Juvenile Justice System. *Criminal Justice and Behavior*, 43(5), 635-652.

Miller, J., & Decker, S. H. (2001). Young Women and Gang Violence: Gender, Street Offending, and Violent Victimization in Gangs. Justice Quarterly, 18(1), 115-140.

armed resistance groups in other countries, we call them child soldiers, and respond to them based on that victimization status. ⁴⁴ Researchers suggest that this difference in perception is partly due to the belief that gang membership is motivated by individual factors such as financial gain, social status, and social inclusion. ⁴⁵ In contrast, the belief that gang membership will provide protection from victimization is one of the primary reasons children and youth become involved in gangs. ⁴⁶

The perception of child soldiers as victims and youth gang members as criminals is associated with dramatic differences in approaches to the re-integration as child soldiers versus youth gang members into "civilian life." There is a clear understanding that if child soldiers are to be successfully rehabilitated there needs to be large scale disarmament to demilitarize the environment and create a sense of safety, psychosocial interventions to successfully reintegrate them into family and community life, and mental health interventions to aid them in coping with the lingering symptoms of post-traumatic stress disorder. Little is done to aid former youth gang members. As Kerig and colleagues (2013) note, "for youth growing up in violent and gun-ridden inner-city environments, giving up gang life might seem to be the equivalent of being individually disarmed in a still-heavily militarized zone."

The American criminal justice system insists on ignoring the ways that an individual's behavior is learned and maintained by the ecological context in which the individual lives, and is especially blind to racial and ethnic differences in ecological context. Below, is an incomplete accounting of racial and ethnic differences in the ecological factors that create and maintain racial and ethnic disparities in the likelihood that an adolescent will engage in violent behaviors.

⁴⁴ Kerig, P. K., Chaplo, S. D., Bennett, D. C., & Modrowski, C. A. (2016). "Harm as Harm" Gang Membership, Perpetration Trauma, and Posttraumatic Stress Symptoms Among Youth in the Juvenile Justice System. *Criminal Justice and Behavior*, 43(5), 635-652.

Kerig, P. K., Wainryb, C., Twali, M. S., & Chaplo, S. D. (2013). America's Child Soldiers: Toward a Research Agenda for Studying Gang-involved Youth in the United States. *Journal of Aggression, Maltreatment & Trauma*, 22(7), 773-795.

⁴⁵ Quénivet, N., & Shah-Davis, S. (2013). Youth and Violence: Drawing Parallels between Child Soldiers and Youth in Gangs. Centre for Legal Research (No. 4). Working Paper.

⁴⁶ Howell, J. C., & Egley Jr, A. (2005). Moving Risk Factors into Developmental Theories of Gang Membership. *Youth Violence And Juvenile Justice*, *3*(4), 334-354.

Raby, C., & Jones, F. (2016). Identifying Risks for Male Street Gang Affiliation: A Systematic Review and Narrative Synthesis. *The Journal of Forensic Psychiatry & Psychology*, 27(5), 601-644.

Rich, J. A., & Grey, C. M. (2005). Pathways to Recurrent Trauma among Young Black Men: Traumatic Stress, Substance Use, and the "Code Of The Street." *American Journal of Public Health*, 95(5), 816-824.

⁴⁷ Kerig, P. K., Wainryb, C., Twali, M. S., & Chaplo, S. D. (2013). America's Child Soldiers: Toward a Research Agenda for Studying Gang-involved Youth in the United States. *Journal of Aggression, Maltreatment & Trauma*, 22(7), 773-795

⁴⁸Kerig, P. K., Wainryb, C., Twali, M. S., & Chaplo, S. D. (2013). America's child soldiers: Toward a Research Agenda for Studying Gang-involved Youth in the United States. *Journal of Aggression, Maltreatment & Trauma*, 22(7), 786.

⁴⁹ Degruy-leary, J. (1994). Post-traumatic Slave Syndrome: America's Legacy of Enduring Injury. Caban Productions.

Menzies, P. (2010). Intergenerational Trauma from a Mental Health Perspective. Native Social Work Journal, 7, 63-85.

Berlin, L. J., Appleyard, K., & Dodge, K. A. (2011). Intergenerational Continuity in Child Maltreatment: Mediating Mechanisms and Implications for Prevention. *Child Development*, 82(1), 162-176.

Historical and Contemporary Social Policies and Practices

- Colonization, slavery, Jim Crow
- Housing segregation, economic discrimination, disproportionate incarceration
- Popularization of negative stereotypes through mainstream media
- Disrupted cultural transmission of history and heritage

Community

- Exposure to daily neighborhood activities and social interactions that increase risk
- Experiencing and/or witnessing chronic violence and assault
- Unconcealed alcohol and drug abuse
- Low levels of social capital and social cohesion
- Quality of public institutions, from school to healthcare, that promote healthy development, and buffer against abuse and neglect at home

School

- High concentration of socioeconomically disadvantaged peers
- Lower per-pupil spending and less experienced teachers
- Increased behavioral sanctioning with harsh and exclusionary discipline
- Lower levels of safety at school

Family

- Poverty and associated housing and food insecurity
- Alcohol and other substance abuse
- Parental incarceration
- Low or lack of emotional bonding among family members
- Chronic or episodic family violence
- Child abuse and neglect

American society has, by decision and default, largely deferred paying the costs of supporting children who have experienced child abuse and neglect until those abused and neglected children enter the juvenile and eventually the adult criminal justice system. A national estimate of the cost to incarcerate youth is about \$401 per day, and that is just the direct cost of confinement; the broader juvenile justice system costs, and dollar value of the collateral individual and social costs that result from victimization and harms experienced during confinement are much higher. In contrast, evaluations routinely show positive financial

⁵⁰ Justice Policy Institute. (2015). Factsheet: The Tip of the Iceberg: What Taxpayers Pay to Incarcerate Youth. Washington, D.C.: Justice Policy Institute.

http://www.justicepolicy.org/uploads/justicepolicy/documents/factsheet costs of confinement.pdf

Petteruti, A., Schindler, M., & Ziedenberg, J. (2014). Stickershock: Calculating The Full Price Tag for Youth Incarceration, Justice Policy Institute. https://nicic.gov/sticker-shock-calculating-full-price-tag-youth-incarceration

returns to investing in preventative interventions.⁵¹ However, the current system of family, community, and school interventions repeatedly fails most children placed at risk during the years when prevention and intervention would be most effective, and instead pours money and resources into punishing them when they become perpetrators: "aggression, substance abuse, and other symptoms targeted as problematic behaviors by the legal system are often coping strategies to increase safety and security in individuals with histories of trauma."

Eliminating State Sponsored Re-Traumatization

As noted above, one factor that is associated with whether abused and neglected children will go on to develop violent behavioral patterns is the extent to which they experience continued victimization and other traumatic stressors throughout childhood and adolescence; this includes the extent to which they experience state sponsored/institutional re-traumatization. Re-traumatization occurs in educational settings when schools use punitive and coercive sanctions rather than supportive interventions when students exhibit behavioral dysregulation that is the direct result of their inability to cope with traumatic life experiences. This does not absolve communities and families from the responsibility of contributing to the healthy development of children, but schools must be resourced and organized in ways that enable them to meet children where they are.

According to the National Survey of Children's Exposure to Violence, about four million children in the U.S. are exposed to violence each year, and about half of those children experience lasting trauma. National studies estimate that over 70% of children in need of mental health treatment do not receive services, and this is especially true of economically disadvantaged children. Because of the self-regulation demands, schools are one of the primary places where children's mental health challenges become detectable, and schools have, by default, become mental health assessment and service delivery institutions. However, without a model for meeting this need, when poor mental health is displayed in the form of challenging

⁵¹ Greenwood, P. (2008). Prevention and Intervention Programs for Juvenile Offenders. *The Future of Children*, 185-210. Mihalic, S., Irwin, K., Elliott, D., Fagan, A., & Hansen, D. (2001). Blueprints for Violence Prevention. *Juvenile Justice Bulletin*, 1-15.

National Juvenile Justice Network (2004). Top Sheet: Community-Based Supervision: Increased Public Safety, Decreased Expenditures. Washington, D.D.: National Juvenile Justice Network http://www.nijn.org/uploads/digital-library/NJJN-YAP CBA-costs Nov2014 FINAL2.pdf

⁵² Pressley, J., & Smith, R. (2017). No Ordinary Life: Complex Narratives Of Trauma And Resilience In Under-resourced Communities. *journal Of Aggression, Maltreatment & Trauma*, 26(2), 137-154.; P. 139

⁵³ Voisin, D. R., & Elsaesser, C. M. (2013). Pathways From Polyvictimization To Youth Problem Behaviors: The Critical Role Of School Engagement. *International Journal Of Higher Education*, *2*(4), 15-30.

⁵⁴ Garmezy, N. (1991). Resiliency And Vulnerability To Adverse Developmental Outcomes Associated With Poverty. *American Behavioral Scientist*, 34(4), 416-430.

⁵⁵ Society for Research in Child Development. (2009). healthy Development: A Summit On Young Children's Mental Health. Partnering With Communication Scientists, Collaborating Across Disciplines And Leveraging Impact To Promote Children's Mental Health. Washington, Dc.

⁵⁶ Leek-Openshaw, L. (2011). School-based Support Group For Traumatized Students. *Schools Psychology International*, *32*(2), 163-178.

classroom behaviors they are responded to with practices that re-traumatize and decrease rather than create the likelihood of school success. ⁵⁷

Traditional Practices Re-Traumatize the Most Vulnerable Students

Exposure to assault and gun violence is an ever-present threat in too many economically disadvantaged and mostly minority neighborhoods, and in the wake of youth shootings and homicides are traumatized siblings, friends, and peers. Predictably, many of these children arrive to school with varying levels of dysregulation. However, very few enter schools that teach them how to regulate the complex cognitive, emotional, and behavioral dysregulation caused by trauma. Many schools instead respond with punitive and exclusionary discipline when these students are unable to meet behavioral expectations.

Punitive and exclusionary discipline are often thought of as consequences that will motivate behavior change; however, they have been proven ineffective, largely because they do not "teach" new behavioral competencies and have collateral damages. They increase the likelihood of academic failure, grade retention, and dropping out, as students often miss important educational opportunities and are stigmatized by staff and peers. Furthermore, such discipline affects all students in the building not only the students who receive it. Schools with higher levels of punitive and exclusionary discipline have a more negative school climate that can harm the educational experiences of students not exhibiting behavioral challenges.

Given the many negative effects of exclusionary discipline, it is particularly disturbing that it is not being used as intended, which is for behaviors that threaten the safety of peers and staff and is primarily used for insubordination and disrespect. Additionally, Black and Latinx students, particularly Black students, are subject to greater exclusionary punishments than their White peers even though evidence shows that Black students do not misbehave at higher rates. By disproportionately punishing Black and brown students, school disciplinary systems compound existing societal oppressions. Many researchers and policy makers

⁵⁷ McInerney, M., & McKlindon, A. (2014). Unlocking the Door to Learning: Trauma-informed Classrooms & Transformational Schools. *Education Law Center*, 1-24.

Overstreet, S., & Chafouleas, S. M. (2016). Trauma-informed Schools: Introduction to the Special Issue. *School Mental Health*, 8(1), 1-6.

⁵⁸ Sharkey, P. (2010). The Acute Effect of Local Homicides on Children's Cognitive Performance. *Proceedings of the National Academy of Sciences*, 107(26), 11733-11738.

⁵⁹ Skiba, R. J., & Peterson, R. L. (2000). School Discipline at a Crossroads: From Zero Tolerance to Early Response. *Exceptional Children*, 66(3), 335-346.

⁶⁰ Perry, B. L., & Morris, E. W. (2014). Suspending Progress: Collateral Consequences of Exclusionary Punishment in Public Schools. *American Sociological Review*, 79(6), 1067-1087.

⁶¹ Steinberg, M. P., & Lacoe, J. (2017). What Do We Know About School Discipline Reform? *Education Next*, 17(1), 44-52.

⁶² Skiba, R. J., Horner, R. H., Chung, C. G., Rausch, M. K., May, S. L., & Tobin, T. (2011). Race Is Not Neutral: A National Investigation of African American and Latino Disproportionality in School Discipline. *School Psychology Review*, 40(1), 85.

Welch, K., & Payne, A. A. (2010). Racial Threat and Punitive School Discipline. Social Problems, 57(1), 25-48.

conclude that punitive and exclusionary discipline are "disproportionately severe and uniquely far-reaching" for Black and Latinx students.

Although the emphasis on zero-tolerance policies has faded, what remains is a culture of control that manifests as the presence of police officers in the school, criminalization of misbehavior, metal detectors, locker and bag searches, and strict uniform requirements. These authoritarian social control practices are primarily in schools attended by urban students of color, and work against their developing a strong sense of school belonging because they foster antagonistic relationships between and among students and staff, and incite emotional distress and lowered self-esteem.

Research shows that when police are in schools, student misbehavior becomes criminalized because discipline problems that were previously handled by school staff are delegated to the school police officer. This creates a pathway from the school to the juvenile justice system, rather than a pathway that directs students exhibiting dysregulated behaviors to the social and emotional health counselor and then integrated back into the classroom.

Essentially, because chronic exposure to traumatic stressors compromises children's abilities to regulate their emotions and behaviors, they often react to even the smallest classroom frustrations with defiant, escalating, or avoidant behaviors. Unfortunately, students exhibiting these dysregulated behaviors are often responded to with punitive and exclusionary discipline rather than with trauma responsive discipline. Trauma responsive discipline focuses on building students capacities to inhibit undesired behaviors and replace them with desired behaviors. Because school success is one of the primary pathways of escaping historical marginalization, traumatized children are often locked in an intergenerational cycle of continued poverty, violence, and victimization, which perpetuates trauma into the next generation.

Trauma Responsive Schools

Trauma responsive schools intentionally build resilience—the capacity to engage in adaptive coping that enables one to be functional in the short- and long-term despite acute or chronic experiences of trauma and adversity. Schools can intervene on two elements that are important for effective violence prevention:

⁶³ Fabelo, T., Thompson, M. D., Plotkin, M., Carmichael, D., Marchbanks, M. P., & Booth, E. A. (2011). *Breaking Schools'* Rules: A Statewide Study of How School Discipline Relates to Students' Success and Juvenile Justice Involvement. New York: Council of State Governments Justice Center.

Sussman, A. (2011). Learning in Lockdown: School Police, Race, and the Limits of Law. UCLA Law Review, 59, 788.

⁶⁴ Welch, K., & Payne, A. A. (2010). Racial Threat and Punitive School Discipline. Social Problems, 57(1), 25-48.

⁶⁵ Theriot, M. T. (2009). School Resource Officers and the Criminalization of Student Behavior. *Journal of Criminal Justice*, 37(3), 280-287.

⁶⁶ Rabinowitz, J. (2006). Leaving Homeroom in Handcuffs: Why an Over-reliance on Law Enforcement to Ensure School Safety is Detrimental to Children. *Cardozo Public Law, Policy, and Ethics Journal*, 4, 153-194.

⁶⁷ Ridgard, T. J., Laracy, S. D., DuPaul, G. J., Shapiro, E. S., & Power, T. J. (2015). Trauma-Informed Care in Schools: A Social Justice Imperative. *Communique*, 44(2), 1-12.

Skiba, R., & Sprague, J. (2008). Safety Without Suspensions. Educational leadership. P. 38-43.

⁶⁸ Chafouleas, S. M., Johnson, A. H., Overstreet, S., & Santos, N. M. (2016). Toward a Blueprint for Trauma-informed Service Delivery in Schools. *School Mental Health*, 8(1), 144-162.

(1) decreased exposure to risk factors such as limiting exposure to community violence and contact with antisocial peers by increasing attendance and sense of school belonging, and (2) increased exposure to protective factors such as strengthening emotional and behavioral regulation and intentional development of planful decision-making through the provision of psychological and emotional health interventions. Even though schools do not have the resources to fully meet students' needs for individual therapy or small-group counselling, by engaging in school-wide classroom-based trauma responsive educational practices, trauma responsive schools can play a significant role in violence prevention.

Schools, our largest state sponsored socializing agent, must change if they are to be transformative in the lives of children coping with abuse and neglect at home, and violence in their neighborhoods. In addition to utilizing positive behavioral interventions and supports, trauma responsive schools: (1) teach educators about the neurobiological effects of trauma because it supports educators in understanding and depersonalizing students behavioral response patterns; (2) work to mitigate the secondary traumatic stress and compassion fatigue that negatively affects educators' ability to engage in co-regulation with traumatized students; (3) utilize mindfulness practices for educators and students to directly reduce the dysregulation associated with trauma and secondary traumatic stress; (4) build educators' knowledge and proficiency with relationship-building actions associated with building, maintaining, and repairing relationships with dysregulated students; (5) build educators' capacity to utilize classroom-based emotional processing activities such as journaling and un-graded expressive writing with prompts that focus on the factors that studies have correlated with post-traumatic growth; and (6) build educators' capacity to recognize the signs and symptoms of emotional dysregulation, then intervene with pedagogical actions that help students recognize and name their internal emotional states, and build self-regulatory skills.

Discussion

This article focused on traumas that are passed from one generation to the next and from one victim to another victim via interpersonal violence—one individual or group of individuals doing harm to another. This means that *relational damage is created that can only be healed through relational repair*. Once we understand that the behaviors of adolescents who are violent offenders were developed and are maintained through the accumulation of interpersonal traumas it becomes clear that *the criminal justice system, a system designed to inflict relational harm by removing the individual from their family and community, cannot be the primary source of intervention.*

As American society is waking up to the need to hold police officers and the criminal justice system accountable for their roles in state sponsored violence, we must similarly hold our educational system accountable for state sponsored re-traumatization of students. Because of their access to and time with

Mendelson, T., Tandon, S. D., O'Brennan, L., Leaf, P. J., & Ialongo, N. S. (2015). Brief Report: Moving Prevention into Schools: The Impact of a Trauma-informed School-based Intervention. *Journal of Adolescence*, 43, 142-147.

⁶⁹ Humayun, S., & Scott, S. (2015). Evidence-based Interventions for Violent Behavior in Children and Adolescents. In *Violence and Mental Health* (pp. 391-419). Springer, Dordrecht.

Zakszeski, B. N., Ventresco, N. E., & Jaffe, A. R. (2017). Promoting Resilience through Trauma-focused Practices: A Critical Review of School-based Implementation. *School Mental Health*, *9*(4), 310-321.

children, schools are uniquely positioned to provide students placed at risk for developing violent behavioral patterns with preventative and rehabilitative interventions. Public schools have over fifteen thousand hours with our children from kindergarten to 12th grade, and how those hours are used will have a significant effect on breaking versus reinforcing the intergenerational transmission of trauma and violence.

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⁷⁰ Ginsburg, G. S., Becker, K. D., Kingery, J. N., & Nichols, T. (2008). Transporting CBT for Childhood Anxiety Disorders into Inner-city School-based Mental Health Clinics. *Cognitive and Behavioral Practice*, 15(2), 148-158. Storch, E. A., & Crisp, H. L. (2004). Introduction: Taking It to the Schools—Transporting Empirically Supported Treatments for Childhood Psychopathology to the School Setting. *Clinical Child and Family Psychology Review*, 7(4), 191-193.