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SENATE RESOLUTION

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WHEREAS, Building an Illinois that can thrive now and in the future requires a steady commitment to supporting the physical, mental, and emotional well-being of all of the State's residents; and

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WHEREAS, Equitable strategies are needed to ensure that all residents have the supports at home and in their communities that build a well-being, buffer against negative experiences, foster resilience, and make it possible to thrive; and

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WHEREAS, Trauma, which may include adverse childhood experiences and other experiences across the life-course, disrupts health and well-being, making it more difficult for people to reach their potential and participate fully in their communities; and

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WHEREAS, The landmark Adverse Childhood Experiences (ACEs) Study identified a profound connection between poor health during a person's adulthood and ACEs, which include physical, emotional, and sexual abuse, physical and emotional neglect, and household stressors such as domestic violence, separation or divorce involving household members, substance abuse, untreated mental illness, or incarceration of a household

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1 member; and

2 WHEREAS, ACEs studies have also found a strong correlation
3 between the number of ACEs and a person's risk for health and
4 social outcomes that include cancer, cardiovascular disease,
5 diabetes, smoking, substance abuse, depression, obesity,
6 unplanned pregnancies, low birth weight, suicide attempts,
7 workplace absenteeism, unemployment, lower educational
8 achievement, and lower wages; and

9 WHEREAS, Individuals with six or more ACEs are at risk, on
10 average, to live 20 years less than those individuals with
11 zero ACEs; and

12 WHEREAS, Findings from the Illinois 2017 Behavioral Risk
13 Factor Surveillance Survey (BRFSS) Illinois ACEs Response
14 Collaborative found that almost 60% of non-institutionalized
15 adults in Illinois say they had at least one ACE; this number
16 equates to almost five million Illinois residents;
17 approximately 16% of Illinois adults reported four or more
18 ACEs; and

19 WHEREAS, BRFSS data also showed that approximately 20% of
20 African American adults in Illinois report four or more ACEs,
21 compared to 15% of white residents; and

1 WHEREAS, ACEs are not the only potentially traumatic
2 experiences that can influence health across the lifespan;
3 extensive research demonstrates that community experiences
4 such as gun violence, lack of educational or economic
5 opportunities, poor or unaffordable housing, and lack of
6 community cohesion can have the same detrimental effects on
7 later health outcomes in individuals as ACEs; and

8 WHEREAS, These adverse community experiences are the
9 result of historical traumas, such as slavery and genocides,
10 and subsequent systemic inequities and oppression, such as
11 racism; racism, which can include power inequalities,
12 prejudices, stereotypes, discrimination, beliefs, and a
13 systemic lack of access to essential supports including
14 healthcare, has been directly linked to reduced physical and
15 mental health in communities and individuals; and

16 WHEREAS, As a result of these historical traumas and
17 subsequent systemic inequities, Black and Latinx residents in
18 Illinois are more likely to live in neighborhoods with
19 restricted access to essential resources such as education and
20 economic opportunities, healthy food choices, safe and
21 affordable housing, and behavioral and physical healthcare;
22 like adverse childhood experience, these have all been linked
23 to health and social outcomes that include reduced life
24 expectancy, higher rates of infant and maternal mortality,

1 high rates of asthma, higher rates of lead poisoning, and
2 higher vulnerabilities to public health pandemics, including
3 COVID-19; and

4 WHEREAS, These health inequities have been compounded and
5 exacerbated by the COVID-19 pandemic, which has
6 disproportionately affected Black and Latinx communities in
7 Illinois; Black and Latinx residents are more likely to
8 contract and more likely to die from the disease than white
9 residents; Black and Latinx Americans are also significantly
10 more likely to have COVID-19 be a "major threat to their
11 general health and well-being" than the overall population;
12 and

13 WHEREAS, COVID-19 has exacerbated burnout, and its
14 associated conditions such as secondary trauma and compassion
15 fatigue have affected those in the health care, education,
16 human service, and other community supporting workforces; and

17 WHEREAS, Immigrant and refugee populations have been under
18 the additional strain of stigmatizing rhetoric and an
19 immigration system that fosters fear, mistrust, isolation, and
20 injustice; and

21 WHEREAS, Robust research demonstrates that positive
22 supports and experiences, such as stable and nurturing

1 relationships and equitable access to food, housing, health
2 care, financial resources, and other fundamentals of lifelong
3 health and well-being can buffer against the effects of
4 adversity and build resilience; and

5 WHEREAS, Resilience, the capacity to adapt and thrive in
6 the face of adversity through strengths-based methods, can be
7 built in individuals throughout the lifespan through
8 trauma-informed, healing-centered care principles and
9 practices such as trustworthiness and reliability,
10 establishing physical and emotional safety, and providing
11 opportunities for empowered decision-making; and

12 WHEREAS, Trauma-informed, healing-centered care is not a
13 therapy or an intervention but is a principle-based, culture
14 change process aimed at recognizing strengths and resiliency
15 as well as helping people who have experienced trauma heal;
16 and

17 WHEREAS, Implementing trauma-informed policies and
18 practices mitigates the effects of workforce burnout, improves
19 provider well-being, and leads to better outcomes for
20 patients, students, and people engaged in human service and
21 other community-supporting organizations; and

22 WHEREAS, Healthy and thriving communities are also

1 fostered through these same trauma-informed, healing-centered,
2 resilience-building principles; and

3 WHEREAS, It has been shown to be cost effective and
4 sustainable to build programs and policies that foster
5 positive experiences and are dedicated to the prevention and
6 mitigation of traumatic experiences and their potential
7 effects on physical and mental well-being and health,
8 particularly in childhood; and

9 WHEREAS, This can be seen in allocated resources, as well
10 as the creation of policies that acknowledge trauma and its
11 effects on the health of individuals and communities, and how
12 historical and contemporary systemic oppression may lead to
13 potentially traumatic events such as adverse childhood
14 experiences and adverse community experiences; and

15 WHEREAS, Applying a trauma-informed and healing-centered
16 framework to the development and implementation of public
17 policies has the potential to create sustainable, scalable
18 change; and

19 WHEREAS, The State of Illinois has previously recognized
20 the impact of ACEs on its residents' health and how
21 trauma-informed, healing-centered principles, policies, and
22 practices can prevent and mitigate the adverse health outcomes

1 associated with trauma, such as Trauma-Informed Awareness Day
2 in 2019, 2020, and 2021, the passage of the Children of
3 Incarcerated Parents Bill of Rights, and the creation of the
4 Whole Child Task Force introduced by the Illinois Legislative
5 Black Caucus, as well as local resolutions recognizing
6 Trauma-Informed Awareness Day in communities such as Winnebago
7 County and the City of Chicago; and

8 WHEREAS, These same trauma-informed, healing-centered
9 principles, policies, and practices must also recognize the
10 detrimental effect that systemic oppressions such as racism
11 can have on the health of individuals and communities and how
12 these are, in fact, traumatic experiences with the same
13 potential adverse health outcomes as ACEs; and

14 WHEREAS, The COVID-19 pandemic has made these systemic
15 inequities more apparent and impactful, and a comprehensive
16 response must recognize the role of racism and other
17 oppressions in contraction of the disease, patient outcomes,
18 and vaccine and treatment distribution; and

19 WHEREAS, The State's commitment to the support of a
20 trauma-informed Illinois must be expanded to include
21 recognition of the role that systemic policies and oppression
22 have played in the creation and impact of trauma and
23 communities; and

1 WHEREAS, This recognition must include a racially-just and
2 healing-centered approach with an acknowledgment of the
3 additional potential burden of trauma faced by Black and
4 Latinx residents in Illinois and the United States; and

5 WHEREAS, The inclusion of recognizing the issue of
6 systemic oppression and its impact on the creation of
7 historical, community, and individual trauma will allow for a
8 more thorough and effective response to reduce and eliminate
9 health disparities in Illinois; and

10 WHEREAS, A trauma-informed, healing-centered Illinois can
11 work to dismantle these systemic inequities and address the
12 effects of racism and poverty, while working to prevent
13 continued disparities; and

14 WHEREAS, This expanded definition of a trauma-informed,
15 healing-centered Illinois enhances the ability of individuals
16 and communities to adapt, cope, and thrive, including during
17 difficult times, supporting the physical and mental well-being
18 of everyone in Illinois; therefore, be it

19 RESOLVED, BY THE SENATE OF THE ONE HUNDRED SECOND GENERAL
20 ASSEMBLY OF THE STATE OF ILLINOIS, that we declare May 25, 2022
21 as Trauma-Informed Awareness Day in the State of Illinois to

1 highlight the impact of trauma and the importance of
2 prevention of adversity and fostering individual and community
3 resilience through trauma-informed, healing-centered care; and
4 be it further

5 RESOLVED, That we encourage members of the General
6 Assembly and their staff to incorporate trauma-informed
7 principles, such as safety, trustworthiness, collaboration,
8 strengths-based approaches, and social justice, into the
9 policymaking process; and be it further

10 RESOLVED, That we encourage all officers, agencies, and
11 employees of the State of Illinois whose responsibilities
12 include individuals throughout the life course and
13 communities, including the Office of the Governor, the State
14 Board of Education, the Department of Human Services, the
15 Department of Children and Family Services, the Department of
16 Public Health, the Department of Juvenile Justice, and
17 Department of Corrections to become informed regarding
18 well-documented, short-term, long-term, and
19 multi-generational impacts of adverse childhood experiences,
20 toxic stress, systemic racism, and other potentially traumatic
21 experiences for children, adults, and communities and to
22 become aware of and implement evidence-based and
23 racially-just, trauma-informed, healing-centered care
24 practices, tools, and interventions that promote positive

1 experiences and racial justice to build resilience in
2 individuals and communities so that they will be able to
3 maximize their well-being and thrive.