

## July 11, 2019: National Webinar – Understanding ACEs

Pioneering people, organizations and communities that have integrated ACEs science see remarkable results: 98% drop in suicides, schools eliminating suspensions and expulsions, juvenile detention facilities with no violence, Safe Babies Courts that nearly eliminate child abuse, batterers intervention programs that reduce recidivism from 60% to between 6 and zero percent. What is ACEs science? Who's using it? And why does it work? ACEs Connection founder Jane Stevens explains, and also shows how to join the more than 300 communities on ACEsConnection.com that are on the road to improving economic, physical and mental health in their cities, towns, states and nations.

### About the Presenters

**JANE ELLEN STEVENS** is founder and publisher of ACEs Connection, comprising the social network [ACEsConnection.com](https://www.acesconnection.com) and the news site [ACEsTooHigh.com](https://www.acesconnection.com/news). The sites focuses on adverse childhood experiences science, and how people are implementing trauma-informed and resilience-building practices based on that science. The network is supported by funding from the Robert Wood Johnson Foundation, The California Endowment, the Lisa & John Pritzker Family Fund, the George Sarlo Foundation, and Genentech. Stevens has been a health, science and technology journalist for more than 35 years. Her articles have appeared in the Boston Globe, the New York Times, the Washington Post, the Los Angeles Times and National Geographic. She began reporting about the CDC-Kaiser Permanente ACE Study and the other four parts of ACEs science in 2005. She has lived and worked in Kenya and Indonesia, and has been to Antarctica — in the winter — three times on reporting fellowships.

### Resources Referenced During This Presentation

- [ACEs Connection](https://www.acesconnection.com)
- [ACEs Too High](https://www.acesconnection.com/news)
- [The Body Keeps the Score: Brain, Mind, and Body in the Healing of Trauma](#) by Bessel van der Kolk
- TED Talk with Nadine Burke Harris: [How Childhood Trauma Affects Health Across a Lifetime](#)
- [Childhood Disrupted: How Your Biography Becomes Your Biology, and How You Can Heal](#) by Donna Jackson Nakazawa
- [ACEs Science 101](#)
- [Got Your ACE \(and resilience\) Score?](#)

## Welcome to Our Webinar!

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- The presentation will begin promptly at 10:00 a.m. Pacific Time
- If you are experiencing technical difficulties, email [Rylie@allianceforhope.com](mailto:Rylie@allianceforhope.com)
- To LISTEN to the presentation on your phone, dial +1 (415) 655 - 0060
  - Access Code: 630-091-455 or listen on your computer speakers
- Attendees will be muted throughout the presentation
- To send questions to the presenter during presentation:
  - Click on "Questions" in the toolbar (top right corner)
  - Type your comments & send to presenter
- There will be a Q & A session at the end of the presentation.
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## Understanding ACEs

Jane Stevens

July 11, 2019



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Your Host Today:

**Natalia Aguirre**

National Director of the  
Family Justice Center  
Director

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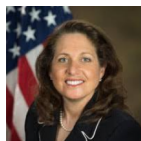


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## Thank You to the Office on Violence Against Women

**Laura Rogers**  
Acting Director

**Kevin Sweeney**  
Program Manager



Thank you for making this training possible!

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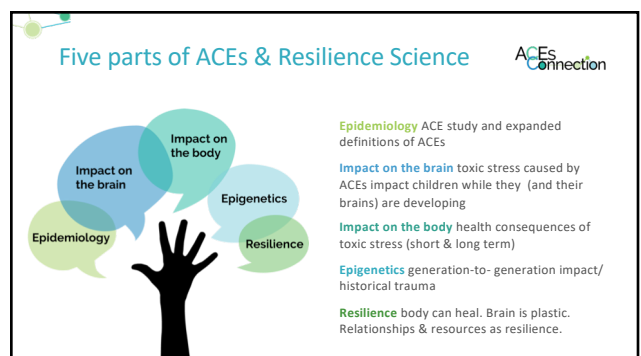
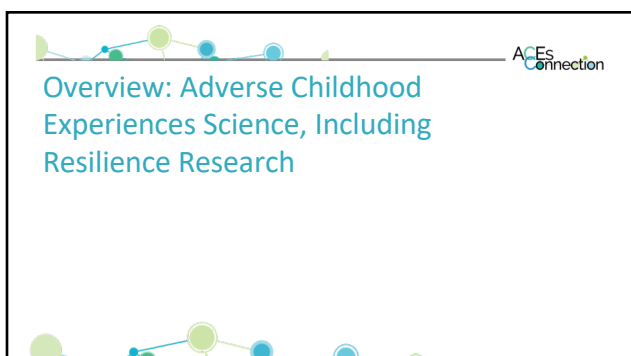
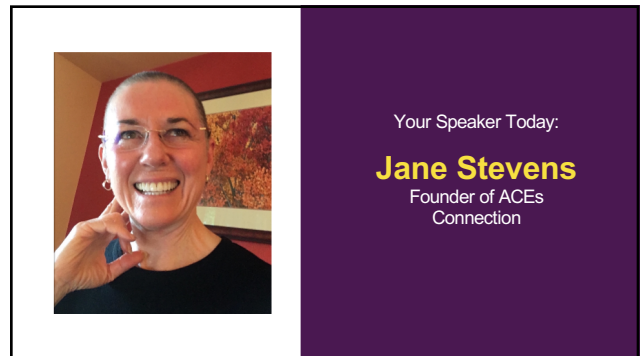


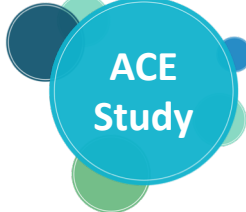
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**ACE Study**

**ACEs Connection**

Join the movement to prevent ACEs,  
heal trauma & build resilience.

ACEs Science | Epidemiology



**Adverse Childhood Experiences Study (ACE Study)**

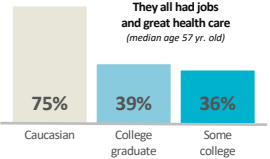
In the 1990s, two doctors **stumbled into** what would become one of the **most significant public health discoveries** of a generation.

Original ACEs Study, published in 1998

**Adverse Childhood Experiences Study (ACE Study)**

Centers for Disease Control and Kaiser Permanente in San Diego, 17,300 adults

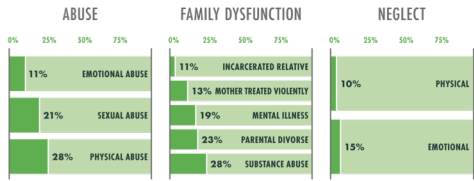
Tracked **health outcomes** based on childhood trauma



Group	Health Outcome
Caucasian	75%
College graduate	39%
Some college	36%

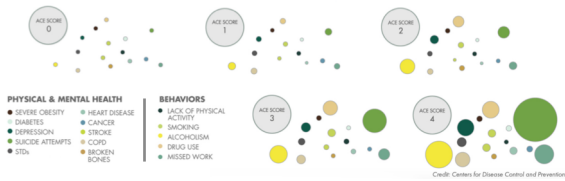
**They all had jobs and great health care (median age 57 yr. old)**

**ACE Study**



Category	Percentage	Sub-category
ABUSE	11%	EMOTIONAL ABUSE
	21%	SEXUAL ABUSE
	28%	PHYSICAL ABUSE
FAMILY DYSFUNCTION	11%	INCARCERATED RELATIVE
	13%	MOTHER TREATED VIOLENTLY
	19%	MENTAL ILLNESS
	23%	PARENTAL DIVORCE
NEGLECT	10%	PHYSICAL
	15%	EMOTIONAL

**ACE Study | Findings**



**PHYSICAL & MENTAL HEALTH**

- SEVERE OBESITY
- DIABETES
- DEPRESSION
- SUICIDE ATTEMPTS
- STDs
- HEART DISEASE
- CANCER
- STROKE
- COPD
- BROKEN BONES

**BEHAVIORS**

- LACK OF PHYSICAL ACTIVITY
- SMOKING
- ALCOHOLISM
- DRUG USE
- MISSED WORK

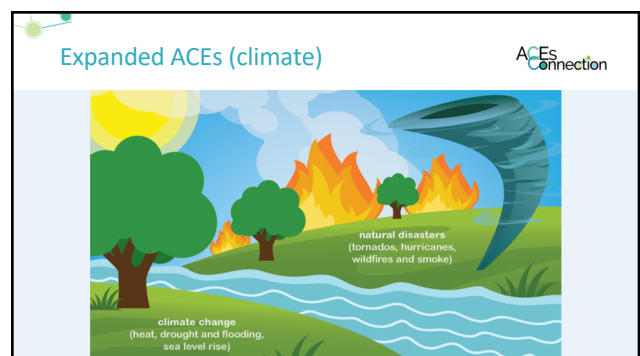
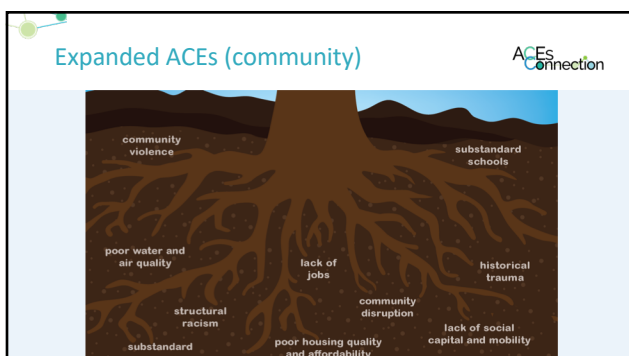
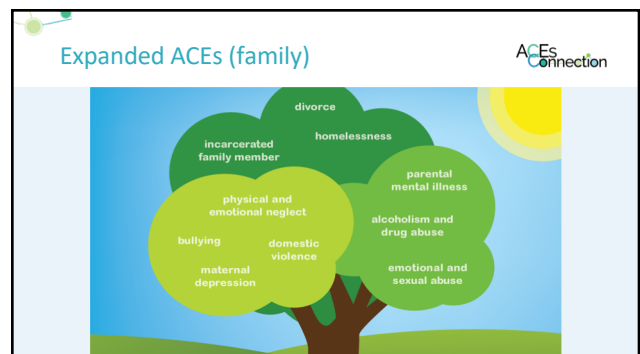
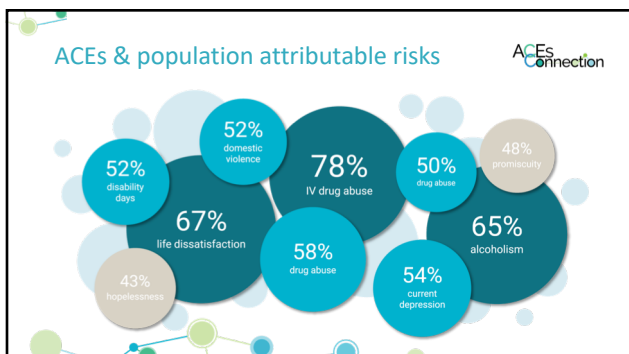
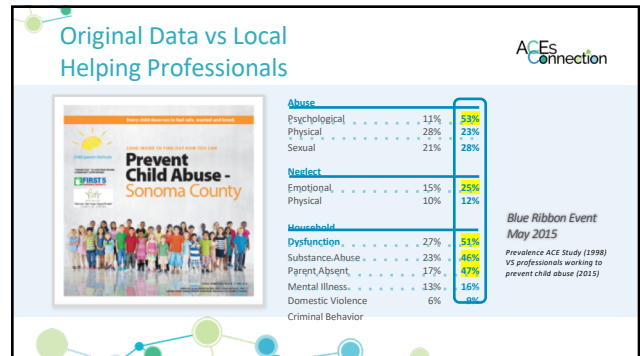
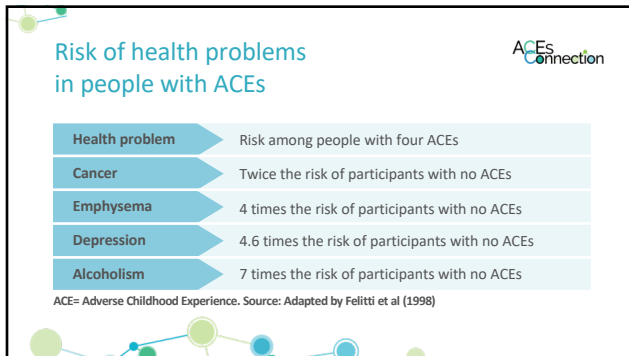
ACE SCORE 0, 1, 2, 3, 4


Credit: Centers for Disease Control and Prevention

**Impact of ACE Score with 4 or more**


Health Behaviors	Mental Health
10.3 times more likely to use injectable drugs	12.2 times more likely to attempt suicide
7.4 times more likely to be an alcoholic	5.13 times more likely to suffer from depression
3.3 times more likely to engage in risky sexual behavior	4.22 times more likely to be diagnosed with dementia
3.23 times more likely to binge drink	
2.93 times more likely to be a current smoker	









## Impacts of toxic stress caused by ACEs





Join the movement to prevent ACEs, heal trauma & build resilience.

## Stress Health

### What's toxic stress?



The biological response to severe and/or repeated adversity absent buffering support from a caring and trusted adult.

## Childhood Trauma & Health Risk


- Babies are not born with fully developed nervous systems
- Exposure to toxic stress causes prolonged activation of stress response mechanisms
- This condition **disrupts the development of the brain and other organs**
- Long-term result is the increase in risk of stress-related disease and cognitive impairment

Source: American Academy of Pediatrics (2014) [Adverse Childhood Experiences and the Lifelong Consequences of Trauma](#)

## Biological mechanisms underlying toxic stress


- Hyperarousal in response to stress, which leads to an excessive release of the hormone cortisol (Bellis et al, 2015)
- Weakened neural connections, resulting in increased levels of fear and anxiety in response to stress; (Bellis et al, 2015)
- Changes in genes via their chemical markers, predisposing to chronic inflammation along with a suppressed immune response (Nakazawa, 2015).




## Effects of Toxic Stress

### Consequences of childhood exposure to ACEs

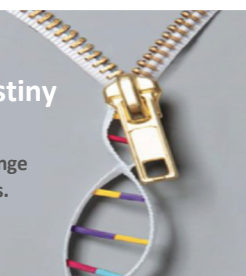


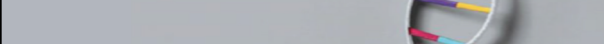



## Effects of Toxic Stress

### Your DNA isn't your destiny

The science of epigenetics reveals how the choices you make can change your genes – and those of your kids.







Knowing about ACEs changes what people believe about themselves.

- We weren't born bad.
- We weren't responsible for the things that happened to them when they were children.
- We coped appropriately, given that they were offered no other ways – it kept them alive.
- We can change.

Mitigating ACEs/Stress

- Safe and Supportive Relationships
- Exercise
- Adequate Sleep
- Healthy Environments
- Mindfulness
- Nutritious Food
- Mental Health Support

Trauma-Informed Approaches

INTERPERSONAL	ORGANIZATIONS & SYSTEMS
<i>"What happened to you?"</i>	<i>"What has happened to the organization/system and how can we help heal the organization/system?"</i>
<i>"How can we help?"</i>	
Rather than: <i>"What is wrong with you?"</i>	Rather than: <i>"What is wrong with the organization/system?"</i>

Putting Trauma-Informed Principles into Practice

What does a trauma-informed organization look like?

## Communities

ACEs  
Connection



Jim Sporleder  
Principal of Lincoln High School

Lincoln High School in Walla Walla, WA,  
tries a new approach to school discipline  
—suspensions drop 85%

THE FIRST TIME THAT principal Jim Sporleder tried the New Approach to Student Discipline at Lincoln High School in Walla Walla, WA, he was blown away. Because it worked. In fact, it worked so well that he never went back to the Old Approach to Student Discipline. This is how it went down:

## We all swim in the same ACEs ocean

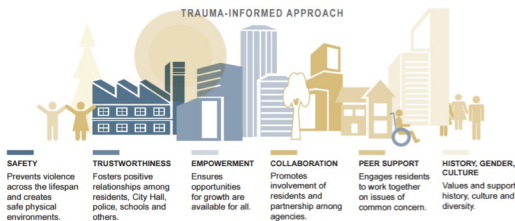
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All organizations must implement trauma-informed, resilience-building practices for themselves...

...especially the organizations that are caring for people  
or directing other people-caring organizations.

## SAMHSA'S 6 PRINCIPLES — of a TRAUMA-INFORMED APPROACH

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## A Trauma-Informed Organization & System...

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- **Realizes** the widespread impact of trauma and understands potential paths for healing;
- **Recognizes** the signs and symptoms of trauma in staff, clients, patients, residents and others involved in the system; and
- **Responds** by fully integrating knowledge about trauma into policies, procedures, practices and settings.
- **Avoids Re-traumatization**

## Practices


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- Hiring and HR practices
- Professional Development
- Staff self care
- Attending to team development and psychological safety

## Overview of ACEs Connection, California Community & Resources

ACEs  
Connection

Are | Join ACEs Connection | We Support Communities | Resources | Portal to ACEs Connection social



## The Social Network for the ACEs Movement.

ACEs Connection, an ever-growing social network, connects those who are implementing trauma-informed and resilience-building practices based on ACEs science. The network's 29,000+ members share their best practices, while inspiring each other to grow the ACEs movement.

[JOIN ACEs CONNECTION](#)



Communities

ACEs Connection

Journalism Site



Social Networking Site



Resource Directory

- ACEs Science and Action
- ACEs Science Books
- ACEs Science for Communities
- ACEs Science for Workshops
- ACEs Science Presentations
- ACEs Science Research
- ACEs Science Videos & Documentaries
- ACEs Science Webinars
- ACEs Science
- Handouts for Parents (ACEs, toxic stress, resilience)
- How the Resource Center Works
- Organizations (ACEs informed)
- Policy & Legislation
- Resilience Strategy
- Spanish Language Resources
- Topic: Education
- Topic: Planning
- Topic: Pediatrics
- Training for Individuals, Organizations, Communities
- Trauma-Informed Guides, Presentations, & Self-Assessment Tools

Blog Posts

[HOW THE RESOURCE CENTER WORKS](#)


### How the Resource Center works

JANE STEVENS (ACES CONNECTION STAFF) · 3/12/19 · 2:15 PM

Welcome to the ACEsConnection.com Resources Center! As of October 2016, we are launching this new version. We think that it's a skeleton of its future self, i.e., we'll be adding more categories and more information to each category. Our goal is to make this useful, but not so chock full of content that you don't know where to start. In other words, we're curating carefully, not cataloguing. A couple of important points about our approach: We believe that any...

Communities

ACEs Connection




**Lincoln High School in Walla Walla, WA, tries a new approach to school discipline —suspensions drop 85%**

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Jim Sporleder  
Principal of Lincoln High School

Communities

ACEs Connection



### Trauma-Responsive Education is Changing School Culture

 BECKY HAAS · 3/30/18 · 8:36 AM

## Communities

**Interest-Based Communities**

Communities organized by discipline / field / sector.

**Geographic Communities**

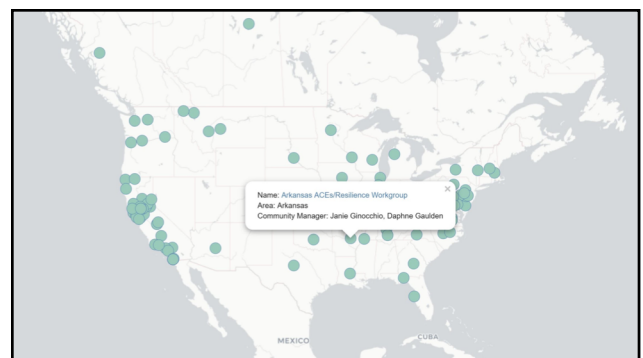
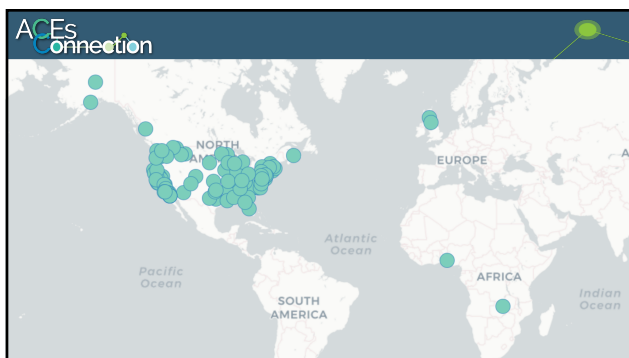
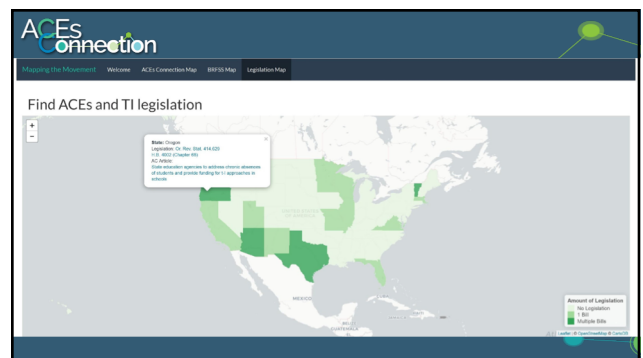
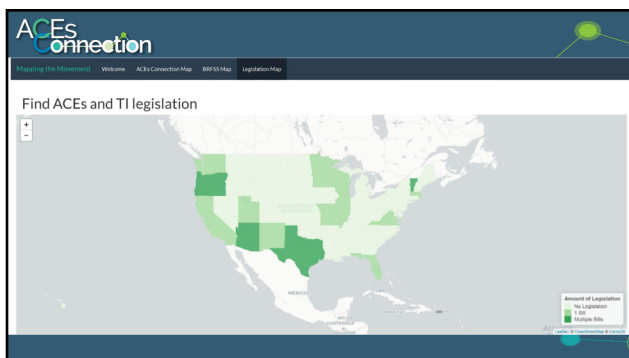
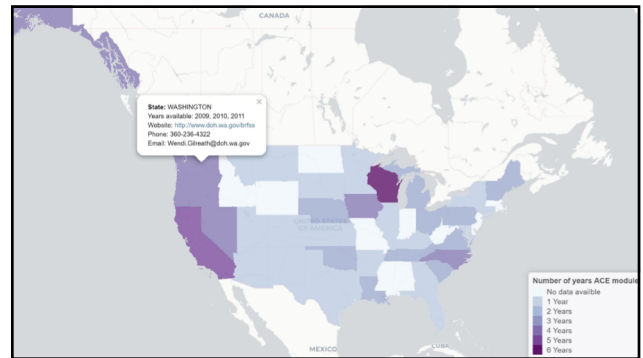
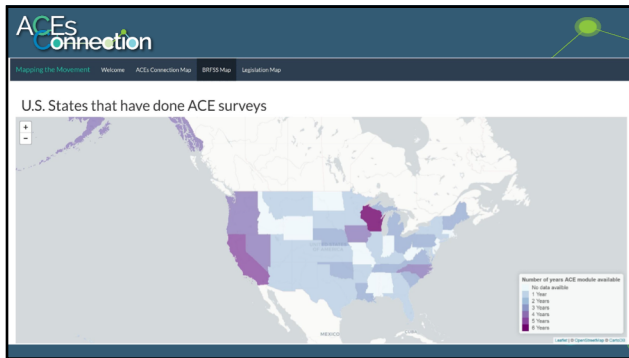
Communities organized within specific geographic area such as a neighborhood, city, county, region, state, or nation.

## Communities

## Resilient Sacramento [CA]

## Presentation Tracker Demo









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Tipping Point:

When change becomes unstoppable

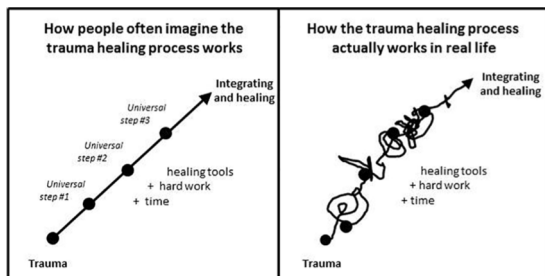
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- There's only us.
- Real change = Systems change.
- Collaboration + Inclusion.
- ACEs are universal.
- ACEs knowledge must be universal.

ACEs  
Connection

ACEs is a Social Justice Issue

Parents have the right to know the most powerful determinant of their children's future health, safety and productivity.






Become trauma-informed in a day!  
(Not a chance!!)

Start with ACEs science.


Start with YOU!



### Resources

- **ACEsConnection.com** – A social network for people who are implementing – or thinking about implementing – trauma-informed and resilience-building practices based on ACEs research.
- **ACEsTooHigh.com** – A news site for the general public. It covers research about ACEs and how people, organizations, agencies and communities are implementing trauma-informed, resilience-building practices based on ACEs research.
- **The CDC-Kaiser Permanent ACE Study** – The official ACE Study site, provided by the CDC.
- **The Center on the Developing Child at Harvard University** – Here, take a deep dive into a site rich with reports, tools and videos about the neurobiology of toxic stress and resilience.
- **SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach** – Introduces a concept of trauma and offers a framework for how an organization, system, or service sector can become trauma-informed. Includes a definition of trauma (the three "E's"), a definition of a trauma-informed approach (the four "R's"), 6 key principles, and 10 implementation domains.
- **Building Community Resilience Collaborative** – a national collaborative and network that seeks to improve the health of children, families and communities by fostering engagement between grassroots community services and public and private systems)
- **Strategies 2.0's Building Community Resilience Toolkit**
- **Prevention Institute's Adverse Community Experiences and Resilience**
- **Community Resilience Model** – The primary focus of this skills-based, stabilization program is to reset the natural balance of the nervous system.

# Questions?



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*Save the Date*  
May 19-21, 2020  
Pre-Conference on May 18



*Living a Legacy of* **HOPE**

20<sup>th</sup> Annual International Family Justice Center Conference  
in Downtown San Diego, California



**REGISTER NOW!**  
**10<sup>th</sup> Annual Leadership Summit**  
September 24-26, 2019

**OKC**  
Oklahoma City, OK



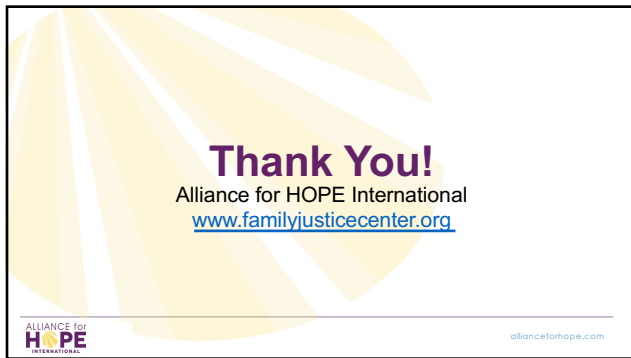
### Upcoming Webinar: Intersection of Faith and Domestic Violence



**Oliver Williams**  
August 20<sup>th</sup>  
10:00 – 11:30 am PST



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## Understanding ACEs Webinar Questions

**Q: What would be a recommendation for convincing a resistant principal that being trauma sensitive is about a child's education?**

**A:** Convincing leaders is an interesting thing because you cannot move an organization along without that buy-in. Even with evidence, some leaders turn a deaf ear to the data. Interest-based communities are resources for you, because you can go to the ACEs in Education community on [ACESConnection.com](https://www.acesconnection.com) and ask if there is a principal like your principal or a school in your area that has used ACEs and can talk to your principal. Those who are not bought-in to ACEs are more likely to listen to another leader at their same level than they are to listen to their staff. If employee pressure doesn't work, peer pressure usually works.

Besides having the leader buy-in to this, you have all the other staff who are educated and bought into ACEs (teachers, admin, bus drivers, nurses, cafeteria staff, etc.) so that all staff can incorporate ACEs into their days. Wonderful stories come out of this. A bus driver that heard about this said, "I get it. I'm the first person a child sees that day. What if I am miserable and grumpy and I start the kid's day that way? But what happens to that child's day if I am friendly and ask how they are doing?" Staff awareness helps in all areas of the school.

RESOURCES: [5-minute ACEs primer](https://www.acesconnection.com/5-minute-aces-primer) on [ACESConnection.com](https://www.acesconnection.com). Go to the [video section](https://www.acesconnection.com/video-section) on [ACESConnection.com](https://www.acesconnection.com), or look at [ACEs Science 101](https://www.acesconnection.com/aces-science-101). Watch [Nadine Burke Harris' TED Talk](https://www.acesconnection.com/nadine-burke-harris-ted-talk).

**Q: Should you use the ACEs form as a self-report or a conversation with the individual — I worry about re-traumatizing with just the ACE questions/score?**

**A:** If this is in an organizational setting, you can find a good example in [a story I wrote about how Wisconsin agencies integrated ACEs science](https://www.acesconnection.com/story-i-wrote-about-how-wisconsin-agencies-integrated-aces-science). If agency heads are all bought in, they have to figure out how to integrate it

into their organizations. The mistake some made at first was giving everyone the ACEs survey. They learned that they need to educate everyone on ACEs science first. When they start the education, they say that this may trigger some people and that's ok, because it is part of growing. But if you are having problems, we have a counselor here who can help you and talk with you about that. There are ways to make people feel safe as they are exploring this information. Then, later, if you do an anonymous survey, it will show the entire group's ACEs and resilience scores, and when you do it that way, it is a shared experience. First, they learn about ACEs science and then they are ready to learn a bit more. Then when they do this group ACE survey, they don't feel so alone.

Because this is very personal, a lot of people will immediately go to what has happened in their own lives. They will hear some of the presentation, but then they will tune out and process how it applies to their own childhood. It is important to keep educating people on ACEs, because people's understanding will increase each time. Dr. (Vincent) Felitti says the same thing every time, and yet I hear something new every time.

The main points are: Don't drop the bomb on people right away. Let them learn about it, talk about it, and then do the ACE score anonymously. Then talk about it some more.

**Q: How would you incorporate ACEs into a Teen Court Program that works with youth 10-17? Some youth are volunteers and some are court ordered to participate. How do you use ACEs in Juvenile Justice/Delinquency?**

**A:** San Diego Youth Services is a great example. They started with educating themselves, changed their own organization and then branched out to the people they serve. As a result, they designed a youth facility that was a drop-in place as well as a rehab and shelter/group home. After they were educated about ACEs science, they asked the kids how they wanted the facility to operate. They got rid of hundreds of rules because they realized that if people understand what the purpose of the facility is, it will

run more smoothly with very few rules. The secret to working in facilities that serve kids is to give kids a voice in that, no matter where they are. That's common for every organization, regardless of the age group.

For juvenile facilities, the one in San Diego was designed to be trauma-informed from the ground up: give kids a voice, give them space to act out safely when they are triggered, and show them how to do it differently next time. When you understand the incredible trauma that these kids have gone through, it is not surprising that they won't get it the first time — that is critical. Healing will not happen until kids feel safe. That goes for homeless people as well. I did a presentation for some law students, and one of the students said that people at the homeless shelter weren't opening up to her right away. And I reminded her that people have had so much trauma that they won't open up to anyone. It takes time to build that trust before they will open up.

RESOURCES: There is quite a bit going on in different communities. For judges, there are now 20 judges in Florida that have started early childhood courts. There has been a lot of movement in drug courts around this:

- [Trauma-informed judges take gentler approach, administer problem-solving justice to stop cycle of ACEs](#)
- [Battling meth: A rural Montana county starts drug court to reverse surge of kids in foster care](#)
- [Trauma-informed courts can help the vulnerable](#)
- [In Safe Babies Courts, 99% of kids don't suffer more abuse – but less than 1% of U.S. family courts are Safe Babies Courts](#)

**Q: How would you incorporate ACEs in Emergency Rooms?**

**A:** There is a doctor named [Dave McCollum who is a pioneer](#) in this area. He is now retired, but when people came into the ER and he could not figure out what was wrong with them, he would ask if he could share some knowledge he had that applies to things we cannot figure out in medicine. Over and over again he would get people who came in on a stretcher and

then would walk out, after he had been an open ear to listen to what had happened to them in their childhood. Again, it is creating space to listen and acknowledge that makes a lot of difference in ways we don't always think it would. Creating the space to talk and hold space and acknowledge what people have been through that can be incredibly healing.

**Q: Can you recommend how to engage an organization that is multi-faceted and talks a lot about being trauma-informed but still practices differently?**

**A:** We have a bunch of different types of evaluation approaches and that's one of them. It's in our [Resources section under self-assessment tools](#). Also, [Trauma-Informed Oregon](#) has a state collaborative with a lot of information as well. The other thing we'll be rolling out is a community resilience tracker and one part of that is a milestones tracker. We looked at all the organizations across sectors that started making changes in their organizations. We identified 11 different milestones that organizations need to pass and integrate to become trauma-informed. Organizations become trauma-informed differently because what works for a school won't work for law enforcement, a church, etc. But these milestones work for all of those. We'll have those up and running so communities can measure what they're doing.

The third point I would make — there's a three-year transition to the point where an organization can say they're trauma informed. Any school you talk with that has made that transition will tell you that they're just beginning. Once you make the switch into integrating this knowledge and practices it widens your scope of what we need to do more of. It's at least three years for most organizations and probably longer depending on the size of the organization. When Wisconsin started it was a two-year program but they increased it when they realized after the first year that it needed to be a lot longer if they were going to make the progress they wanted to make.



**Q: Are there any Canadian Centers using ACEs?**

**A:** There are and they should be on the [Mapping the Movement map](#) that you can access from the ACEsConnection.com home page. There's some in eastern Canada, some in western Canada, and some in central Canada. In Canada, the [Alberta Family Wellness Initiative](#) has done remarkable work and they have a great module for learning about brain science in relation to toxic stress. They've done a tremendous amount of work in their own community as well as teaching about brain science around the world.

**Q: I wanted to know if this method can work on the elder community. Working with the elderly, I know they retain their long-term memory, and some continue to relive their trauma. Is there any help for this group?**

**A:** There is an organization in Albany, NY, called [Senior Hope](#) that has done this with older patients. The thing is about people in their geriatric years: they probably have ACEs if they're having problems, especially if they're addicted to anything. Same approach for everyone else — education, not adhering to what you should be doing. If geriatric patients haven't had their ACEs addressed and have a lot of ACEs and few resilience factors they're likely to have more issues. Not only physical but social, etc. I think the best thing any organization can do to start this is look at this new knowledge and see how it affects their lives. This particular organization when they started integrating ACEs didn't want to tell people about ACEs and wanted to get their score as part of a survey. I think that's not the way to go. People say "What if they get sad or start crying?", but who better to be with if you're with a (ACEs-science informed) counselor when you learn about ACEs? And people say "What if they get triggered?" but anything can trigger you. Sound, smell, etc. You learn to deal with that. But what better place to be triggered than a safe place so someone can help you understand where the trigger comes from and how to deal with it better.

**Q: In the research you mentioned, 43% of people had hopelessness — are any people in the ACEs movement looking at measuring increase in hope?**

**A:** I can only guess what I would think based on the thousands of interactions I have had since 2004. Those four parts I mentioned in the webinar — I wasn't born bad, what happened to me as a child I had no control over, the way I coped was appropriate, and I can change — that opens the door to hope. I would love to see some more research about that.

**Natalia:** I would encourage folks to dive into our HOPE research around ACEs and HOPE. Through Camp HOPE we have been providing kids with support and then measured their hope, and we have seen a statistically significant increase. I would love to see the ACEs community start to use that language as well.

**Q: How can we incorporate this science into family courts that tend to prioritize parent-child relationships over safety from domestic violence?**

**A:** It's not one or the other. The [Safe Babies Courts approach](#) is a good model that helps the entire family, even the extended family. You can find out more in this [webinar about Florida's Early Childhood Courts](#). And here's a link to information about the [Florida Early Childhood Courts](#).

**Q: What are some ways that FJCs and other DV/SA providers can use ACEs to improve service delivery?**

**A:** First start with the organizations' staff and system. Educate all staff about ACEs science, and integrate trauma-informed practices for the organization. Then, address how this new knowledge changes service delivery, including how you educate clients and bring them into the decision-making process of organizations.

**Q: Do you have any research on the states that have done the research? Are there any trends or something that stands out?**

**A:** If you are referring to ACEs research in states, you can look at the States ACEs Action site on ACEsConnection.com for a [list of and links to all the 43 states](#) ACE surveys. Here's a link to the [ACEs Research](#) section in our [Resources section](#), as well as a link to [ACE surveys](#).

**Q: Who do you think has the most comprehensive legislation around ACEs?**

**A:** No one state yet. States are approaching this in different ways. For example, Pennsylvania just passed some exemplary ACEs in education legislation, and California legislated ACEs screening. You can find more information in the [State ACEs Action site](#) on ACEsConnection.com, as well as on the legislation layer in [Mapping the Movement](#) on ACEsConnection.com.

**Q: Can you tell us what the juvenile diversion program in Philadelphia was doing with ACEs? (i.e. Are they simply screening? Are there other components that are integrated into this program?)**

**A:** Here's a [link to a presentation from the National ACEs Conference](#) that includes the presentation about what Philadelphia did. Look for Kevin Bethel's presentation, but you can also learn more about Florida's Early Childhood Courts from Mimi Graham, and how ACEs science is integrated in a trauma-informed approach that Plymouth County, MA, is integrating in a project organized by the district attorney's office, law enforcement, and rehab clinics.

**Q: How can ACEs interface with efforts to address racial achievement gaps? And what would/could it look like to deliver this information in a professional development training?**

**A:** If you're referring to K-12 education, any school that's integrating trauma-informed practices **based on ACEs science** is doing this, because the school recognizes that racism is an ACE. Go to the [ACEs in Education](#) on ACEsConnection.com community for more resources and to look at programs that work with schools in urban areas, such as [Turnaround for Children](#).

**Q: Are Judges, DAs, Probation, Police, and Defense Attorneys being trained on ACEs?**

**A:** Yes. Do a search on ACEsConnection.com for any of those terms, and you'll find relevant articles.



## **Certificate of Participation**

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**Jane Stevens**

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A handwritten signature in black ink, appearing to read "Casey Gwinn".

**Casey Gwinn, J.D.**  
Co-Founder and President  
Alliance for HOPE, International

**July 11, 2019**

A handwritten signature in black ink, appearing to read "Gael Strack".

**Gael Strack, J.D.**  
Co-Founder and CEO Alliance  
for HOPE, International