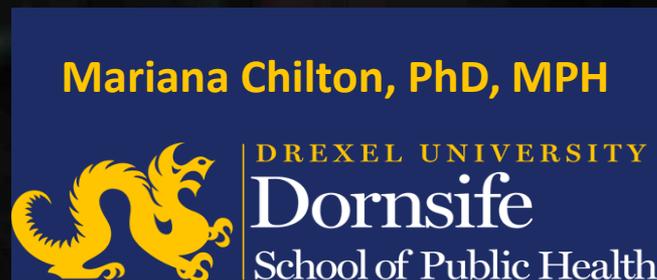
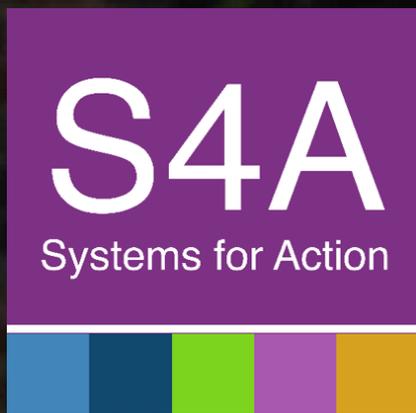


Triumphs, Wounds, and Bruises: A Retrospective on Systems for Action Research for Food Security



S4A Research-in-Progress Webinar | February 12, 2025

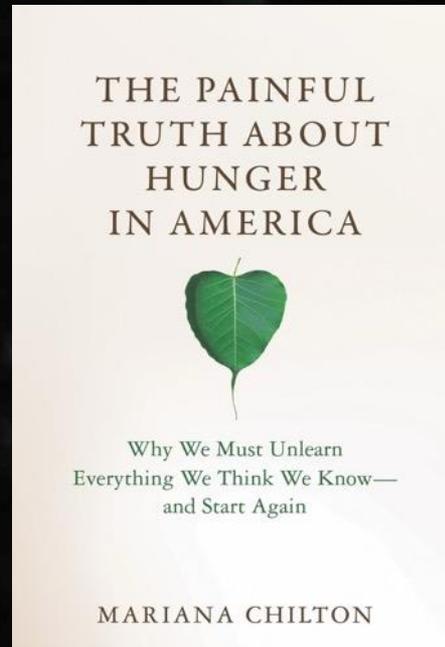


Honoring relationships



Overview

1. Background on trauma and Systems: TANF & Medicaid
2. The Building Wealth and Health Network
3. Outcomes
4. The Painful Truth





DREXEL UNIVERSITY

Center for

Hunger-Free Communities

1995-2000



2004



2005-2019, → present



Witnesses to Hunger

2008-2019, → present



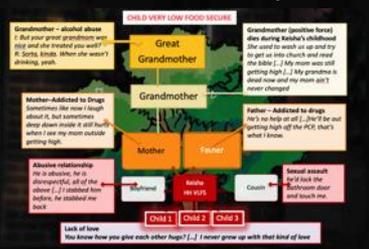
2002-2004

Food Pantry Research
Qualitative / Reciprocal



2011-2013

Childhood Stress Study
Qualitative / Reciprocal



2014 → present



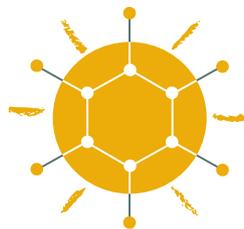
My Power. My Money.



2016-2019



EAT CAFÉ



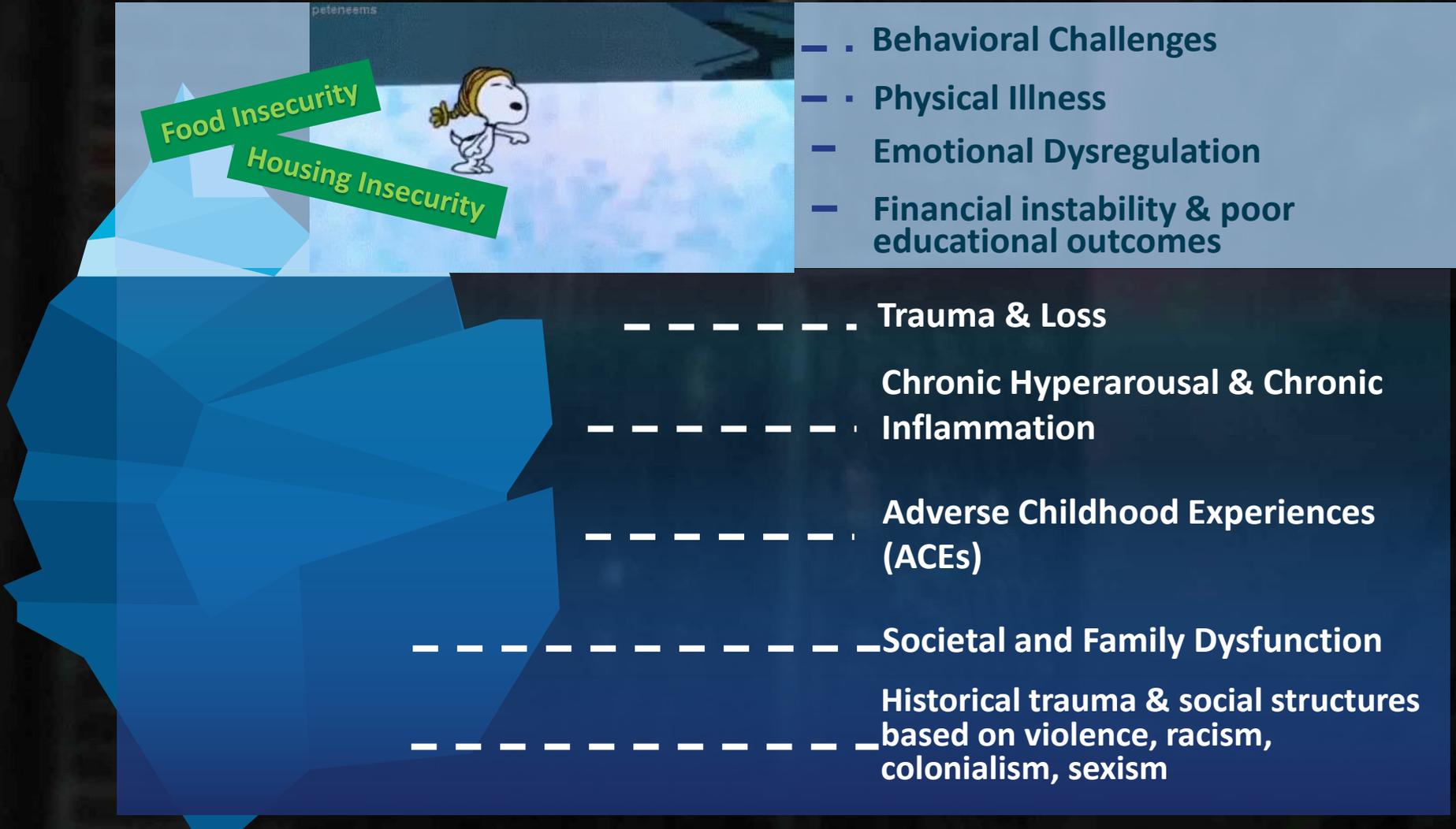
solutions based on science and the human experience





Root Causes of Hunger = Trauma & Violence

What's visible | What's underneath



Trauma

Toxic Stress (kids)

- Overwhelming relentless stress for young children without adequate support to overcome it
- Homelessness / poverty
- Adverse Childhood Experiences

Traumatic Stress (adults)

- Internal and external factors insufficient to cope with external threat
- Central nervous system overwhelmed
- Helplessness



Witnesses
to Hunger

Trauma

An emotional, cognitive, physical, spiritual, and relational response to a terrible event (or events) such as an accident, rape or natural disaster

Enslavement and colonization create traumatic conditions (to include torture, starvation, imprisonment, etc.)

Individual / across lifespan

- Rape
- Intimate partner violence
- Physical abuse
- Sexual abuse
- Bullying
- Community Violence
- Complex trauma
- Disasters
- Sex trafficking
- Terrorism and Violence
- Traumatic grief

Historical / Intergenerational

- **Historical Trauma**
 - “Cumulative psychological and emotional wounding across generations... [emanating] from massive group trauma”
Historical unresolved grief accompanies the trauma
 - *(definition from Dr. Maria Yellow Horse Braveheart)*
- **Intergenerational trauma**
 - Ways in which trauma experienced in one generation affects the health and well-being of descendants of future generations
- **Collective Trauma**
 - Cataclysmic event that shatters the basic fabric of society
 - Loss of life and crisis of meaning

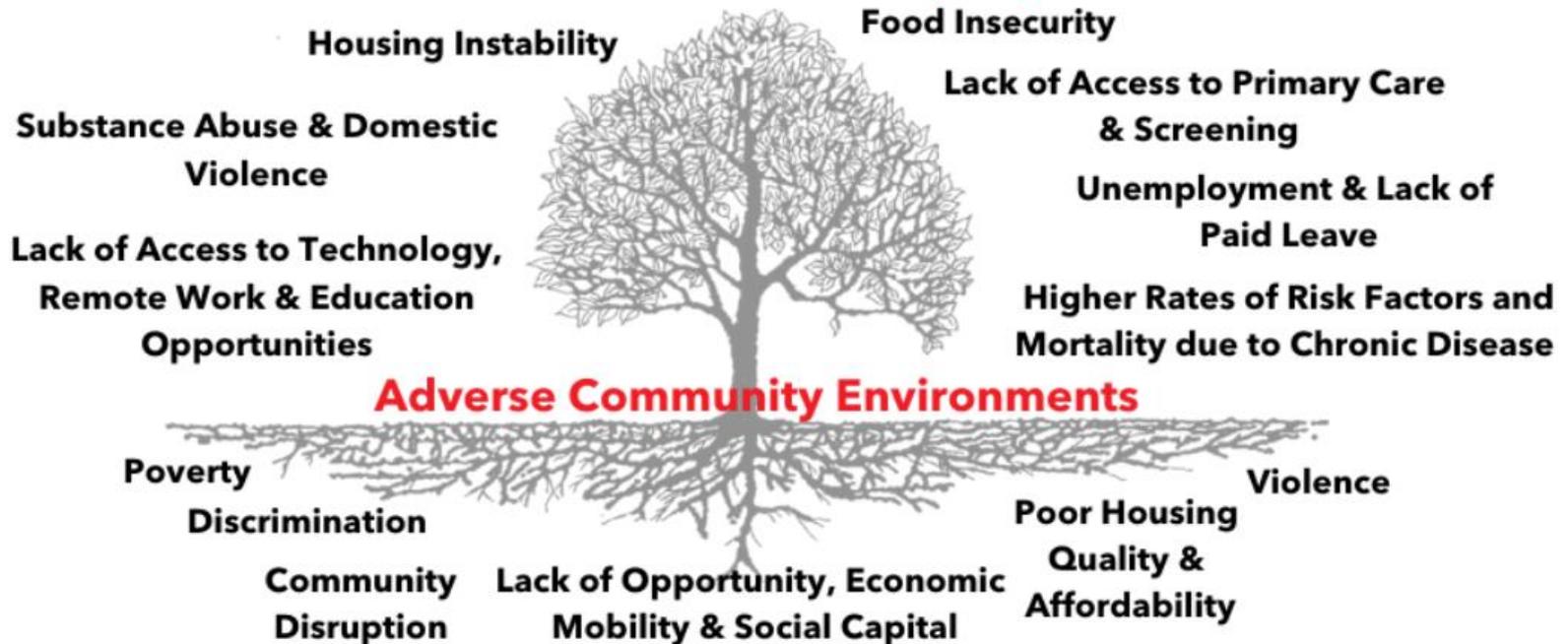
Racial trauma

Mental & emotional injury caused by racial bias and ethnic discrimination, racism, and hate crimes

Individual & collective trauma are fractals of each other

The Pair of ACES

COVID-19 Adverse Community Experiences



Ellis, W., Dietz, W. (2017) A New Framework for Addressing Adverse Childhood and Community Experiences: The Building Community Resilience (BCR) Model. *Academic Pediatrics*. 17 (2017) pp. S86-93. DOI Information: 10.1016/j.acap.2016.12.011

Parallel Process in Organizations

two or more systems have significant relationships, they develop similar feelings, behaviors, thoughts

- Lack of emotional management
- Communications failures
- Important topics become undiscussable
- Organization stops learning from itself
- Organizational amnesia
- Repeated failures
- Loss of democracy
- Loss of complexity
- Learned helplessness
- Impoverished relationships
- Authoritarianism
- Unresolved grief

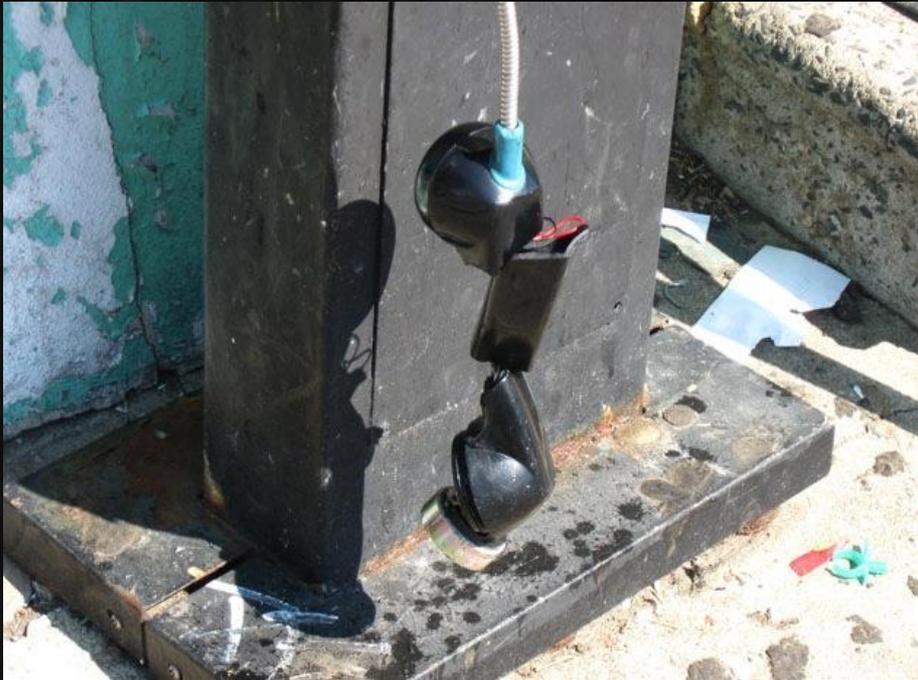


Trauma & adversity



- **Trauma causes...**
 - Changes to neurological / brain landscape
 - Affects endocrine system
 - Mental health problems
 - Poor self-regulation
 - Inability to focus
 - Triggers/flashbacks, hyper-arousal
 - Disrupted eating/sleeping
- **Exposure to trauma affects...**
 - Financial stability
 - Educational outcomes

Public Assistance



Witnesses
to Hunger



Temporary Assistance for Needy Families (TANF)

- Primarily funded by Feds
- Cash assistance with work requirement
- Pennsylvania
 - Maximum: \$421 per mo. family of 3 (27% of FPL)
 - Asset limit = \$1,000
- Work requirement 20 hrs for family w/ child under 6, over 1
- “Work first” approach
- Participants have high rates of IPV, disability, depression

Medicaid

- Jointly Funded by state & feds
- Health insurance for low - income families & people with disabilities
- Medicaid expansion positive results for health equity
- 1115 Waivers – to cover basic needs

TANF Work requirements from Joanna

Depression/drudgery



My sad little tokens

TANF: County assistance offices need a Culture of Health



[f](#) [t](#) [v](#) [i](#)

NEXT UP
U.S. astronauts to return to moon within 5 years, Pence vows
American astronauts will walk on the moon again in the next ...

They grabbed her baby and arrested her at a welfare office. Now she's speaking out.

Ashley Southall and Nikita Stewart Dec 16, 2018 2



Jazmine Headley at her lawyer's office in New York, Dec. 13, 2018. Headley, who had her baby prided from her hands in a chaotic arrest at a welfare office after a dispute, has become a cause célèbre for New Yorkers who depend on food stamps and public assistance, but say they are often met with hostility at city offices. (Sara Naomi Lewkowicz/The New York Times)

THE NATION. Politics World Economy Culture Nation Shop

POVERTY GOVERNMENT TANF

Jazmine Headley's Arrest Exposes the Punitive Design of Public Assistance

Welfare offices are the public face of a system designed to control, surveil, and penalize low-income women.

By Mariana Chilton

DECEMBER 14, 2018

[f](#) [t](#) [e](#) [p](#)



Jazmine Headley appears with her attorney, Brian Neary (left) and her mother, Jacqueline Jenkins (right) outside a courthouse in Trenton, NJ, on December 12, 2018. (AP / Mike Catalini)



Background:

What is Trauma-Informed practice?

Realizes

- Widespread **impact** on trauma; paths to **recovery**

Recognizes

- **Signs & Symptoms** of trauma in clients, families, staff, and systems

Responds

- Fully **integrate** knowledge **policies**, procedures/practice

Resist

- Actively **resists** “re-traumatization”

The Sanctuary Model[®] *by Dr. Sandra L. Bloom*

Healing & Resilience

- **Healing Centered approach**
 - Focuses on resilience and potential for health
 - Recognize how trauma affects a person's health, wellbeing, and behavior
 - Understands and addresses a person's lived experience, and social, political, economic context



"No Mud
No Lotus"

Thich Nhat Hanh



Approximately
2000 people over 10 yrs

**Network
Member
Advisory Board
Ongoing Evaluation**

**Social Work
Referral**

**Financial
Coaching**

**Group Classes & Peer Support
Financial SELF Empowerment
16 sessions**

**New Savings Accounts
(with potential for monthly match)
12 months**



Major Components of Building Wealth and Health Network

The Network Curriculum

Cohort Model 8-15 people per group

16 sessions

Trauma-Informed/Healing Centered

- Peer Support
- **SELF** (Safety Emotions Loss Future)
- Psychosocial and Political Education
- Goal Setting and Confidence

Financial Empowerment

- Savings & checking
- Matched savings
- Managing money
- Entrepreneurship
- Negotiate good wages
- Credit repair / building credit



2 coaches each cohort

Network Advisory Board



All participants become
Network MEMBERS



Member Advisory Council (20+ members)

Provides ongoing feedback on program & dissemination



Network Timeline

Trauma =
underneath
hunger

Worked with
Annie E.
Casey, ACF,
State Welfare
Office,
Region III to
design
program

Re-design
RCT & New
Staff

New Staff
- New
Location

2010-2013

2014

2015

2016

2016

2017

Launched
& Failed
RCT

State Changed
Recruitment;
Launched
Phase II

Begin - RWJF
Funding

S4A
Systems for Action



Outcomes Measured (Self-Report)

Audio - Computer administered - Baseline, 3-month intervals to 12 months

Basic Characteristics

- Demographics
- Benefits
- Household characteristics

Exposure to Violence and Adversity

- Adverse childhood experiences
- Community violence
- Interaction with criminal justice

Maternal & Child Health and Development

- CES-D (Center for Epidemiologic Studies - Depression)
- Self-Rated Health
- PEDS (Parents' Evaluation of Developmental Status Survey)
- Caregiver-Rated Health of Child

Economic Security

- Food Insecurity
- Housing Insecurity
- Energy Insecurity

Financial Wellbeing

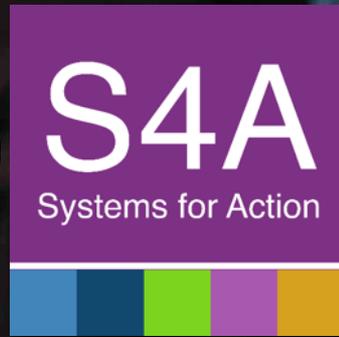
- Unofficial work/self employment
- Employment Hope
- General Self-Efficacy
- Financial behaviors, knowledge, skills & capability

[See Sun et al \(2016\) BMC Public Health](#)

RCT : Improved depression, employment, food security, self efficacy, etc.

- **Improvements in mental health, economic security, employment, and prevention of child's developmental risk**
 - **Booshehri, et al, (2019)**, Journal of Child and Family Studies
- **Improved self-efficacy and substance use among TANF participants**
 - **Dugan, et al., (2020)** Social Science & Medicine

RWJF Systems for Action (S4A)



TANF and Medicaid Integration

1. Assess effects of trauma-informed peer support built into education and training on health and economic security for participants in The Network.
2. Identify cost savings to **TANF and Medicaid** & make a case for linking these systems.
3. Engage multiple stakeholders to promote a Culture of Health within anti-poverty programming through a strategic **public dissemination effort**.

Phase II – rolling enrollment Analysis Methods

Phase II

369 Participants

Enrolled from Mixed Public Assistance or TANF,
with children < 6 years old

**< 4 class
attendance**

Low Exposure

N = 156

**≥ 4 class
attendance**

High Exposure

N = 213

16 week Intervention

Followed every 3 months, total 12 months



Research Article

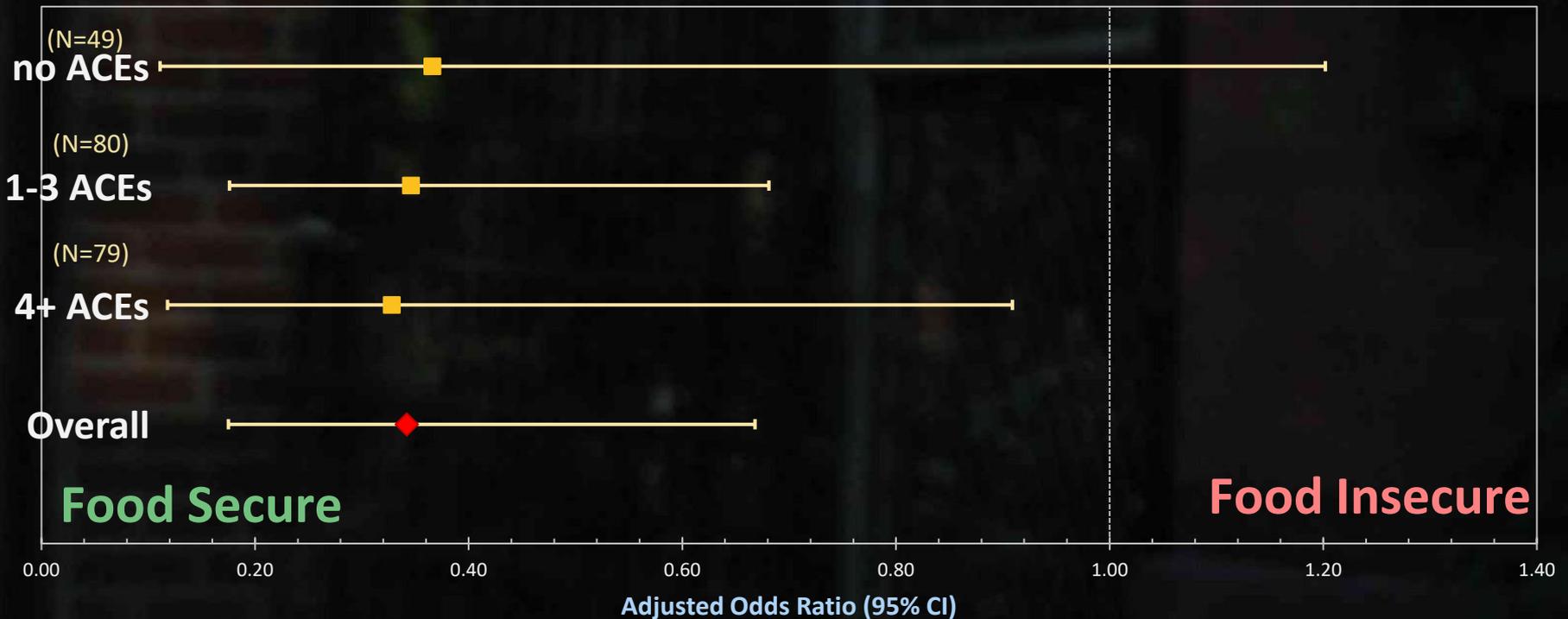
Trauma-Informed Financial Empowerment Programming Improves Food Security Among Families With Young Children

Pam Phojanakong PhD, MPH¹, Seth Welles PhD¹, Jerome Dugan PhD², Layla Booshehri PhD², Emily Brown Weida MSW³, Mariana Chilton PhD, MPH³✉

Full participation compared to low participation

The Building Wealth and Health Network Phase II

Reduced the Odds of Food Insecurity by ~ 64% N= 208



ACEs = Adverse Childhood Experiences (Exposure to abuse, neglect, and household hardships)
Adjusted for Education, marital status, public assistance participation



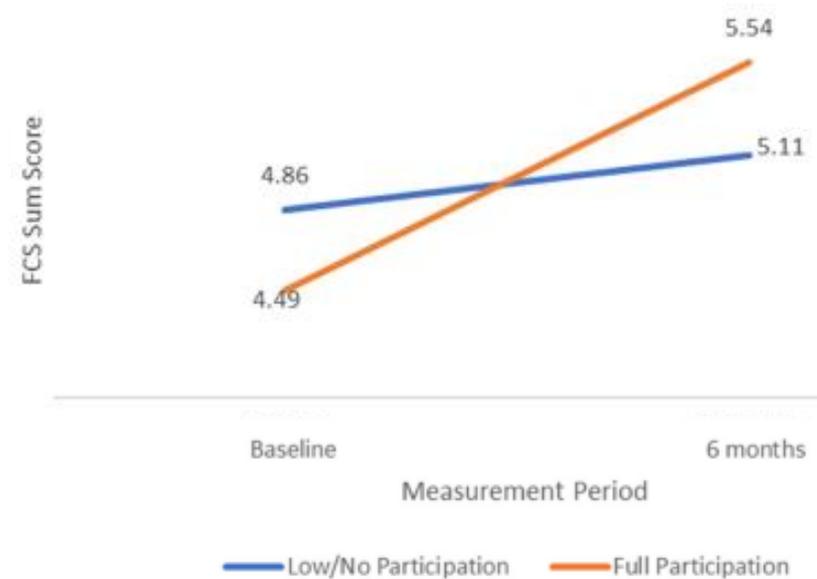
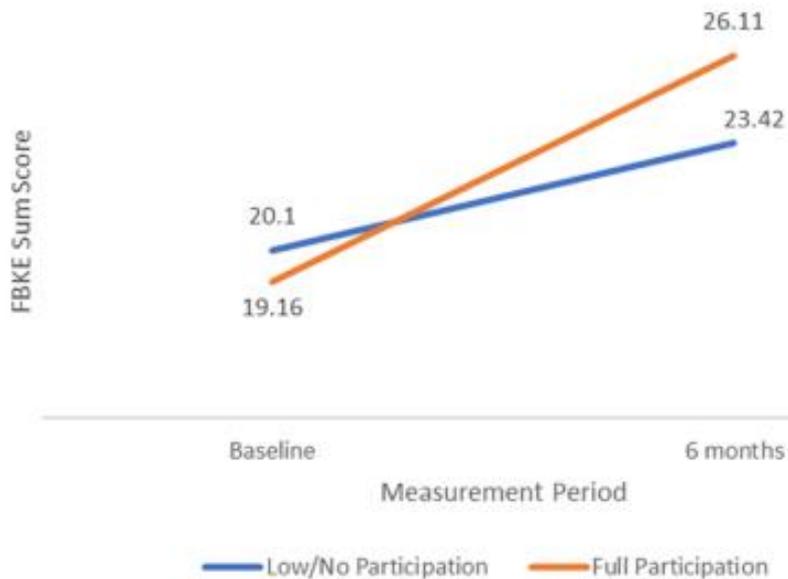
Trauma-informed Financial Empowerment Programming Associated with Improved Financial Well-being

Emily B. Weida¹ · Amy Carroll-Scott² · Felice Le-Scherban³ · Sandra Bloom¹ · Mariana Chilton¹

Accepted: 26 September 2024 / Published online: 25 October 2024
© The Author(s) 2024

N=369

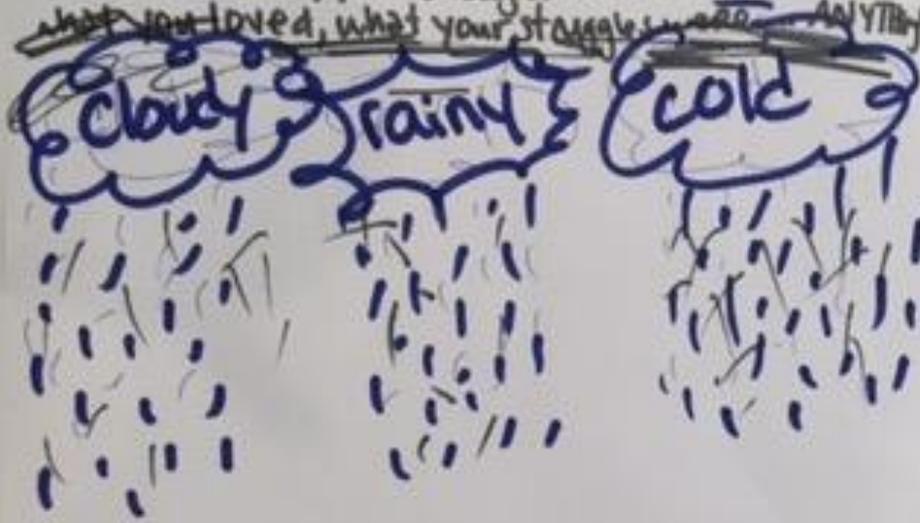
- Financial Behaviors, Knowledge and Efficacy scale (FBKE)
- Financial Capability Scale (FCS)



Member Self-assessment

YOU then

Draw or write how you felt, where you lived, who you spent time with, your thoughts about the future... what you loved, what your struggles were... ANYTHING



River of life

help caring giving
loving

YOU now

Think about what are you proud of? What have you learned & accomplished, and felt? Did you save? Overall what are your emotions? Do you feel hopeful about the future?



**In person meetings
with agency senior
administrators
(Welfare & Health)**

Webinars & conferences



Network Timeline (Cont.)



Lost collaborators for Admin Data Analysis

Won Contract (Philadelphia Works) Phase III & lost other research staff

Programming only & Hybrid, in person, teens, adults, Network Nation

2018

2019

2019

2020

2022-present

End - RWJF Funding & Received State Administrative Data

COVID19 Expanded to Rural PA Lost PhilaWorks Contract; won *new* Contract (JEVS) Phases IV-beyond



Triumphs



- 1. Improved Mental Health and Economic Security**
- 2. Involved Network Members beyond classes to become coaches and build a “Network Nation”**
- 3. Evolved from private/philanthropy funds to public funds (contracts)**
- 4. Adaptations to fit context (online, hybrid, in person)**
- 5. Spreading to Rural PA, New Jersey, and Richmond, VA**

Wounds

- **Lack of capacity**
 - to convince the state to use Medicaid funding
 - to convince state to bring Network to scale
 - to manage state administrative data
- **Racism and Sexism in state/federal systems**
- **Lack of state accountability to innovation & equity**
- **Network staff lost ground on tracking efficacy**
- **Inadequacy of trauma-informed/healing-centered models**

Bruises

- **Department of Human Services**
 - Leaders say yes to change, but slow to act
 - TANF under constant threat by state legislators
 - Staff turnover
- **Contracting with state-funded agencies**
 - State limitations on TANF costs
 - Contradictory focus on outcomes (e.g. employment vs. participation)
- **University Systems**
 - Not agile enough to invoice on time
 - Difficulties paying Network members
 - Underappreciation for public health practice and advocacy
 - Caught in parallel process - (incapable of protecting faculty/staff from traumatizing professional & political systems)

The Painful Truth

THE PAINFUL TRUTH ABOUT HUNGER IN AMERICA



Why We Must Unlearn
Everything We Think We Know—
and Start Again

MARIANA CHILTON

...: What are issues that threaten our physical, moral, emotional, or social safety?

Emotions: What are the emotions involved? How can we effectively manage them?

Loss: What have we lost or are likely to lose? What will we have to give up in order to change?

Future: Where do we want to end up? How can we create a future where we can flourish? What can we do to generate freedom?

There is so much more to the program, but this simple framework indicates how the complexity of trauma across the life course is held in a space of wonderment, care, and solidarity.

The Network helps people deal with trauma symptoms at the individual and small-group level. It also promotes resilience against community trauma. For instance, we help people learn about and resist predatory lending, heal from toxic family relations, handle conflict on the job, and testify when called on to improve policies and social services. We help people face their emotional challenges head-on and learn about ways to improve their relationships, have a greater sense of self-worth, and find tools for self and community care. We help people strategize about saving and spending that promotes household food security along with greater access to safe, affordable housing.

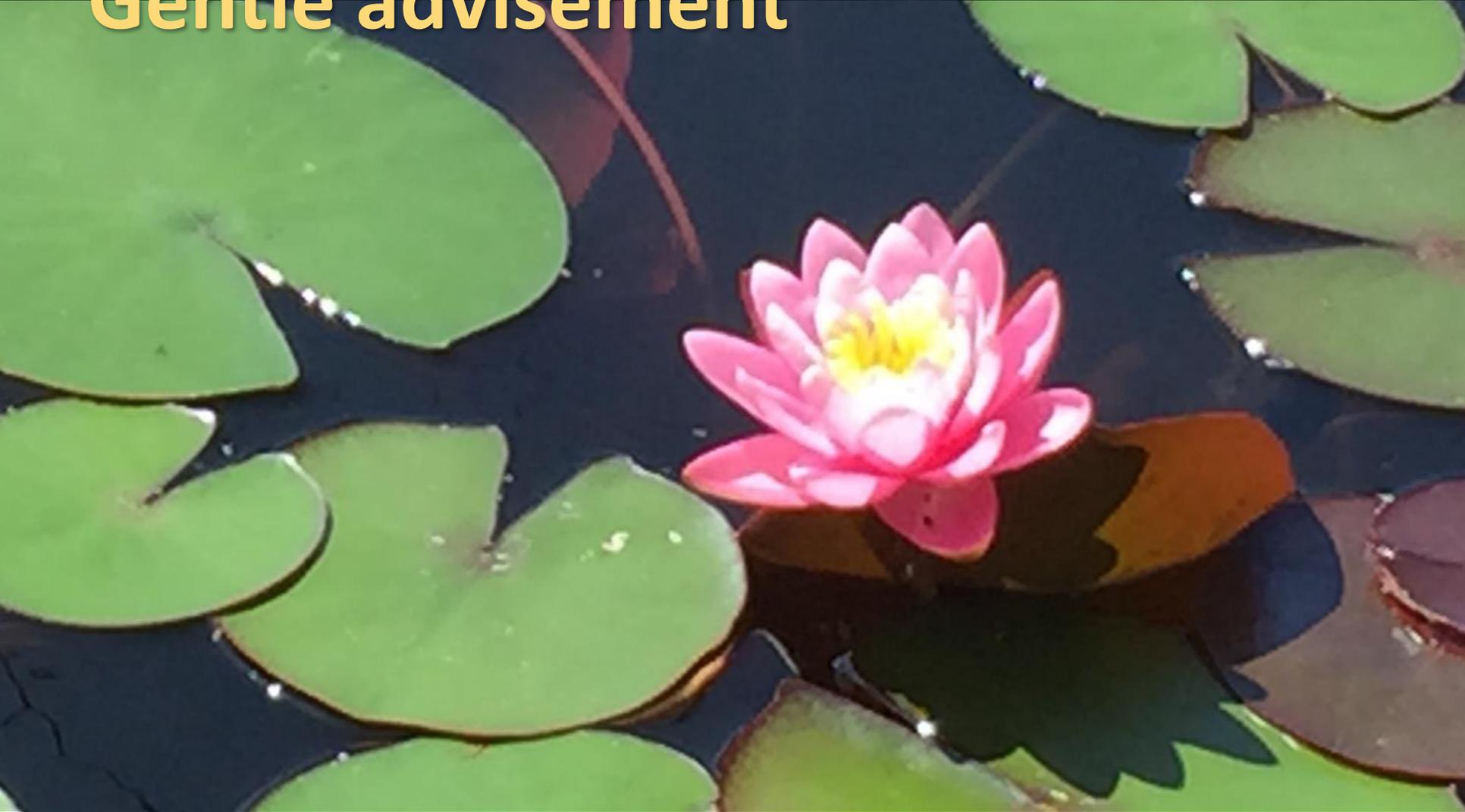
The Network is a success as well as inspiration.

It does little, however, to address the epic proportions of collective and historical trauma in the United States. Even if a person can work through their personal traumas, the systems in place around them—schools, health care systems, social services, and employers—can still exacerbate trauma while regenerating inequality, racism, and sexism.

To take action at collective and historical levels, we need to reconsider everything.

II RECONSIDER EVERYTHING

Gentle advisement



Hunger of the Body and Hunger of the Mind: African American Women's Perceptions of Food Insecurity, Health and Violence

Mariana Chilton, PhD, MPH¹; Sue Booth, PhD, MND²

2002

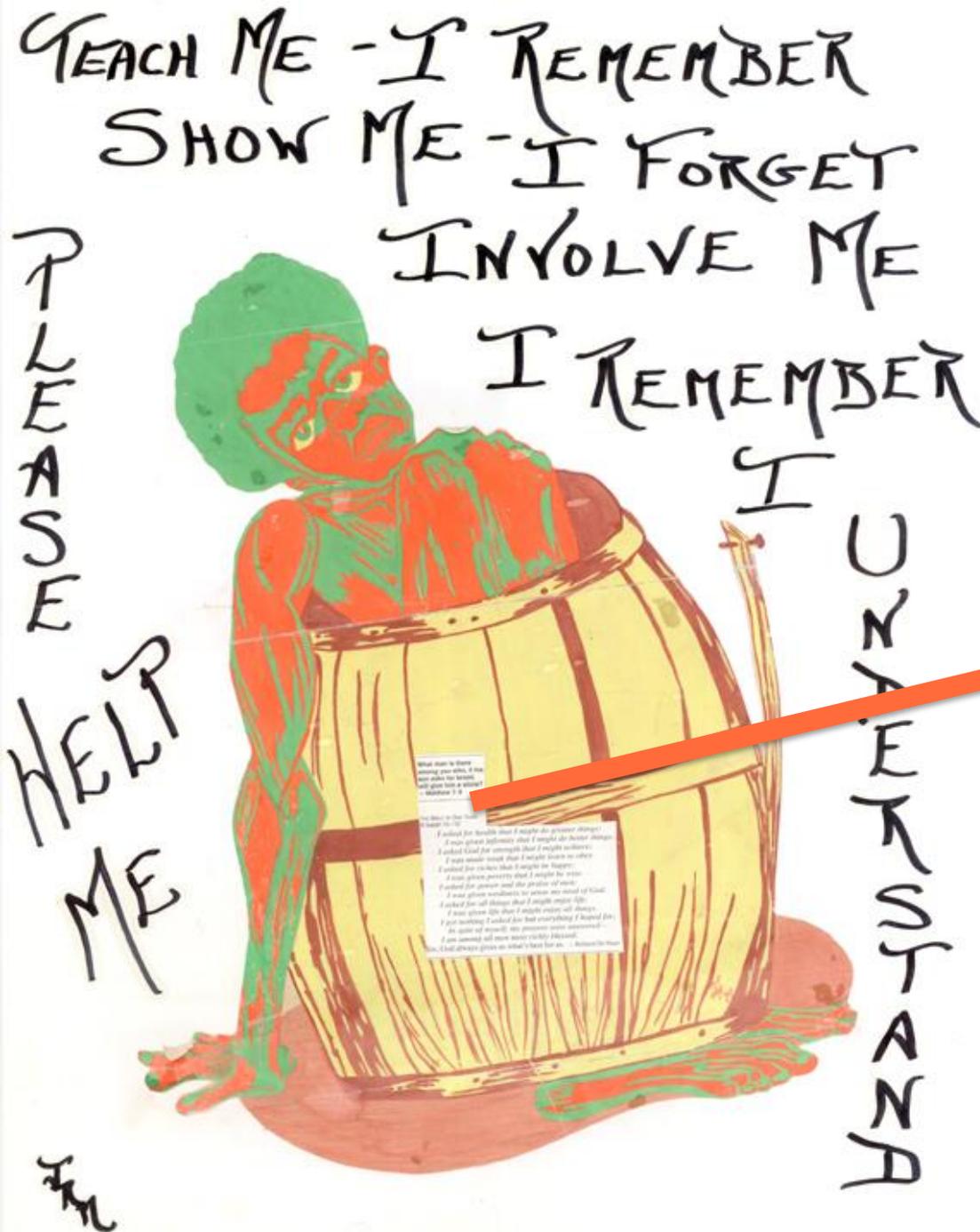


5+ Lessons

1. To share food makes you human

What man is there among you, who if his son asks for bread, would give him a stone?

Matthew 7:9



Joanna Simmons







Witnesses to Hunger



Witnesses to Hunger

Research

Exploring difficult to understand associations

- Ethnographic research
- Participatory action research / photovoice
- Investigate associations between food insecurity and
 - Public assistance
 - Poor health
 - Maternal depression

Advocacy

Changing the Dialogue about Hunger & Poverty

- Exhibits
- Speaking engagements and testimony
- informing the press
- Website
- Blog
- YouTube
- Social networking (Twitter/Facebook)



**Participant
(advocate)**

Policy Maker

Research



Food Stamps!
It's not asking the case worker for something to eat. If he was to do that I wouldn't have to have fought from early in the morning to an appointment to the welfare office to try to get food stamps and medical coverage. I can't help it if my baby's hungry. I am thinking "I'm not going to let my son starve, he's hungry!"
-Sharon and Brian by Isaac S.



REWRITE

TIANNA GAINES TURNER
PHILADELPHIA





Advocacy Strategies

1. Exhibits / Images
2. Speaking engagements
3. Testimony
4. Formal in-person meetings with Members of Congress
5. Staff Briefings
6. Informing the press
7. Local Actions
8. Website / Blogs & YouTube
9. Social networking (Twitter/Facebook)
10. Peer reviewed manuscripts
11. Op-eds





Talks, Blogs, Editorials

Triumph Over Trauma

Sherita Mouzon, *Certified Recovery Specialist*
Member, Witnesses to Hunger
Consultant & Co-Facilitator, Healing Hurt People

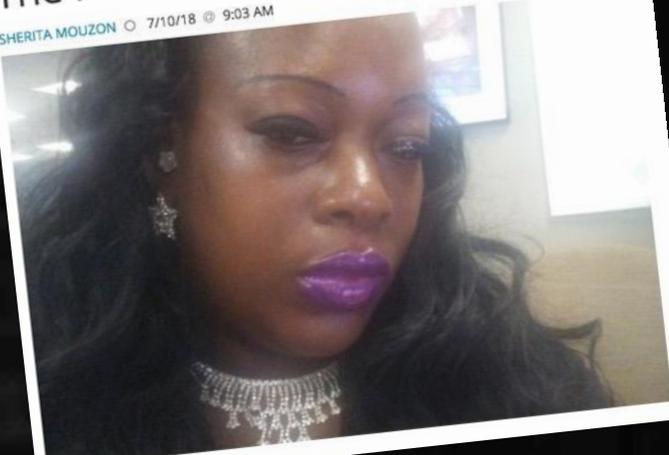
ACEs Connection

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

HOME / BLOG / THE PRICE OF TRAUMA

The Price Of Trauma

SHERITA MOUZON • 7/10/18 • 9:03 AM



TOM GRALISH and CYNTHIA GREER / SHUTTERSTOCK

NEW THINKING ON TRAUMA

The wounds are wide and deep, but there are solutions.

By Mariana Chilton

There is a toxin in Philadelphia that our children and families are being exposed to near constantly: trauma. Trauma lingers and isn't just limited to a single incident, like a gunshot. Trauma manifests in hunger, housing instability, or living without utilities. It can include exposure to abuse, neglect, gun violence, police brutality, imprisonment, and domestic violence. And trauma can pass through generations as the result of historical violence, slavery, redlining, and mass incarceration. Very much like a toxin, the longer it goes unnoticed and untreated, the worse things can get. Last Sunday, on 60 Minutes, Oprah Winfrey spoke with a leading trauma researcher, Bruce Perry, MD, about trauma, adversity, and how exposure to them affects our bodies and minds over the course of our lives. Not only does trauma affect our health, but it can adversely impact our behavior and economic success. For example, according to researchers from the Center on the Developing Child at Harvard, adverse experiences in early life impact the building of the brain's architecture, which can adversely impact how we learn, how we feel, and how we behave. And trauma exposure is related to serious physical consequences that go beyond the original trauma on C3.

How schools are responding: Teaching students, and teachers.

By Karyn T. Lynch

The School District of Philadelphia serves more than 128,000 students across 223 schools. As such, our student population represents a wide variety of socioeconomic backgrounds. Unfortunately, we live in the poorest big city in America and a significant number of Philadelphia's children face this challenge of urban poverty. These students are exposed to community violence, poverty, hunger, maltreatment and neglect, and unstable or transient living conditions, which can make the very act of showing up to school every day a victory in and of itself. While trauma can negatively impact any child, what is commonly misunderstood is that students experiencing chronic trauma are in a state of toxic stress all the time. Toxic stress can lead to changes in how the brain develops and can compromise their health. Students experiencing chronic trauma arrive to school tired, stressed, and on edge. Their brains, bodies, and nervous system can make them edgy, overreact to things that seem minor to others, lash out at others, or withdraw and isolate themselves. They are in constant "fight or flight" mode, and unlike their peers, can find simple, expected tasks like receiving and retaining knowledge, or even interacting on C3.

There's a growing recognition of the impact of stressful events on children and adults. How educators, health experts, and others respond.

Gentle advisement





Witnesses
to Hunger



Witnesses
to Hunger

Mother beats 20yr old daughter



Intimate partner violence

**Witnesses
to Hunger**



Witnesses
to Hunger

Trauma & adversity

Witnesses
to Hunger

Types of Violence

- Rape and sexual assault (family / acquaintances)
- Intimate partner violence
- Child abuse and neglect
- Murder of family and friends
- Community violence
- Mistreatment by caseworkers



Adverse Childhood Experiences (ACEs)

ACEs associated with:

- Smoking
- COPD
- Heart disease
- Diabetes
- Obesity
- Alcohol / substance use
- Attempted suicide
- Fractures
- Teen pregnancy
- Depression
- Poor self-rated physical health
- Low educational attainment
- Poor job performance

The Effects of Childhood Stress on Health Across the Lifespan



U.S. Department of Health and Human Services
Centers for Disease Control and Prevention

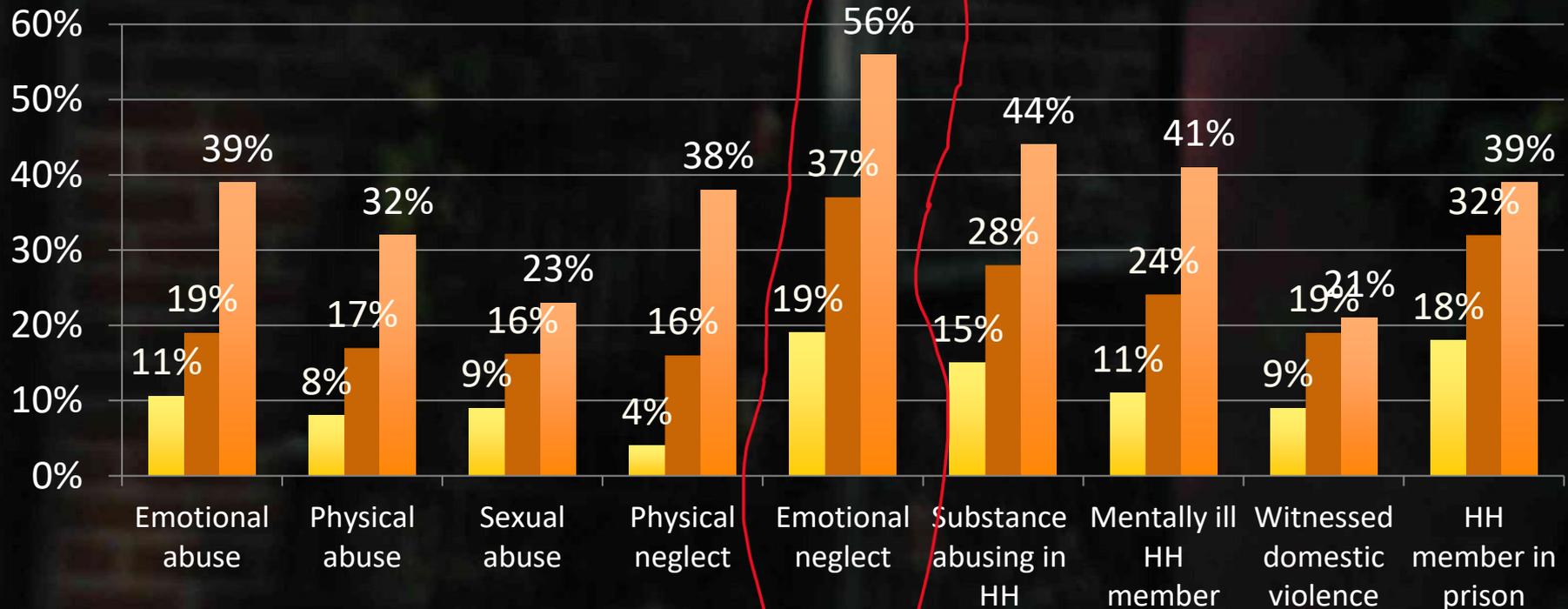
ADVERSE CHILDHOOD EXPERIENCES (ACEs)

ADVERSE CHILDHOOD EXPERIENCES 10 questions

Category	Subcategory	Example Question
Abuse	Emotional	Emotional Neglect
	Physical	
	Sexual	
Neglect	Emotional	Did you often or very often feel that . . .
	Physical	
Household Instability	Parental Separation	No one in your family loved you or thought you were important or special? or Your family didn't look out for each other, feel close to each other, or support each other?
	Mother Abused	
	Mental Illness	
	Substance Abuse	
	Incarceration	

Prevalence of ACEs by Food Security Status

N=1,255



- Food Secure
- Low Food Secure
- Very Low Food Secure

Sun et al (2016)



Moms are trying to break the chain



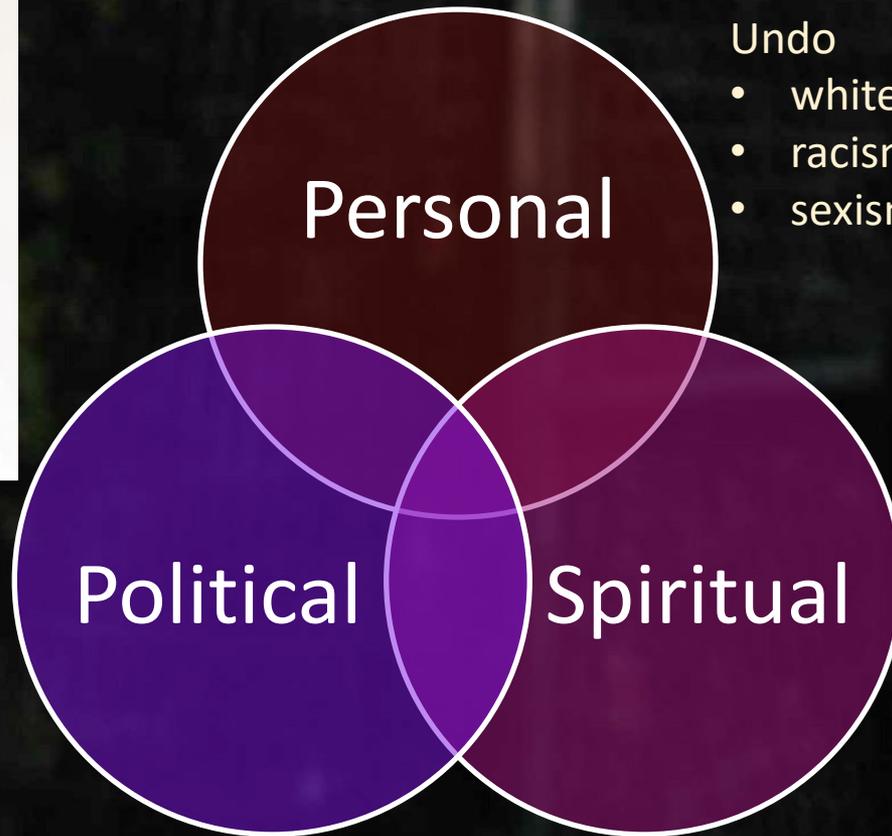
THE PAINFUL
TRUTH ABOUT
HUNGER
IN AMERICA



Why We Must Unlearn
Everything We Think We Know—
and Start Again

MARIANA CHILTON

Three Domains of Action



Undo

- white supremacy
- racism
- sexism

1. Decolonization
2. Reparations
3. Universal programs
4. Human Rights & Rights of Nature
5. Solidarity economy
6. Abolition of prison/police

- Expand our ability to love
- End culture of domination
- Get in right relationship with ourselves, each other, and nature



Loving Kindness

Looking & Listening deeply



Compassion

The intent to alleviate and transform suffering



Joy

Joy is for everyone



Equanimity

Love without discrimination

Black and brown women should run the world



LOVE

Thank you!!

mmc33@drexel.edu



2025 S4A Call for Proposal

Register [here](#).

2025 Call for Proposals:
Community-Led Systems Research to
Address Systemic Racism

Informational Applicant Webinar

February 24 | 1pm ET

S4A
Systems for Action

