Love and Compassion Conquers Adverse Childhood Events:
ACEs, Resiliency, and Life Satisfaction of the Jhamtse Gatsal Children’s Community

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Introduction: The Adverse Childhood Experiences Questionnaire (ACEs) was used to evaluate the health risks stemming from childhood events of the children at the Jhamtse Gatsal Children’s Community (JGCC). ACEs is a survey developed to measure adverse childhood events and to draw associations between those childhood adversities and risk behaviours and health outcomes in later life (Butchart et al., 2011). This tool consists of ten questions regarding possible major childhood adversities including household dysfunction, abuse, and neglect. See Table 1 for an overview of health, psychological, and developmental problems associated with ACEs scores.

**Table 1: ACEs scores and their corresponding risk of negative health outcomes and risk behaviors**

<table>
<thead>
<tr>
<th>ACEs Score</th>
<th>Adult Alcoholism (%)</th>
<th>Chronic Depression (M - F)</th>
<th>Smoking as an Adult (%)</th>
<th>Risk of being Raped Later in Life (%)</th>
<th>Suicide Attempts (%)</th>
<th>Teen Pregnancy (%)</th>
<th>Risk of Developmental Delays (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>3%</td>
<td>11% - 18%</td>
<td>7%</td>
<td>4.5%</td>
<td>2%</td>
<td>20%</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>5.5%</td>
<td>19% - 24%</td>
<td>7.5%</td>
<td>10%</td>
<td>3%</td>
<td>21%</td>
<td>5%</td>
</tr>
<tr>
<td>2</td>
<td>10%</td>
<td>25% - 35%</td>
<td>9.5%</td>
<td>16%</td>
<td>4.5%</td>
<td>25%</td>
<td>5%</td>
</tr>
<tr>
<td>3</td>
<td>11%</td>
<td>30% - 42%</td>
<td>11.5%</td>
<td>18%</td>
<td>11%</td>
<td>30%</td>
<td>18%</td>
</tr>
<tr>
<td>4</td>
<td>16%</td>
<td>35% - 58%</td>
<td>13.5%</td>
<td>32%</td>
<td>19%</td>
<td>40%</td>
<td>43%</td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>76%</td>
</tr>
<tr>
<td>6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>90%</td>
</tr>
<tr>
<td>7</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>99%</td>
</tr>
</tbody>
</table>

Because the JGCC is designed for children who come from traumatic backgrounds, the ACEs is a relevant tool in predicting the likelihood of future health and behavioural outcomes. In order to maximize the comfort level of the children and minimize refusals due to embarrassment or shame, the questionnaire was administered by the children’s respective Ama-Las (house mothers) to both male and female students ranging in grade from PreK to 10th. Counsellors with training with at-risk children were available to provide emotional support to the children if necessary, but no issues arose. The average ACEs score for all children was 5.47 with a standard deviation of 1.6. Remarkably, the difference in scores between male and female students were minimal, 5.7 and 5.36 respectfully. Refer to Figure 1 for a breakdown of the answers to each of the ACEs questions.
To put the scores from the JGCC in perspective, a study sampling 4000 Alaskans showed an average ACEs score of 2.28. This is notable because Alaska’s ACEs scores were the highest in the United States, and the children at JGCC have experienced over twice as many adverse childhood experiences on average. In a previous study of 5 U.S states, 80% had an average ACEs score of 2 or lower (DHSS, 2015). Comparing individual ACEs categories between JGCC and populations in the U.S is equally as telling. Alaskans had the highest rate of substance abuse in the home of the 6 U.S states included in the study, with 33.8% of the participants reporting such experience, while 84% of JGCC students reported the same. There was also a huge gap in the prevalence of physical abuse between JGCC and Alaskans. 19.1% of Alaskans reported physical abuse in the home during childhood, compared with 91% of students at JGCC.
If these children were members of a typical community, the ACEs results from JGCC would predict these children would be showing serious adverse effects of their childhood experiences. However, just as ACEs scores predict future undesirable behaviours and problematic physiology, certain community and individual practices in the present predict resilience to negative experiences. Resilience can be defined as an individual's capability to overcome adversity, the capacity to negotiate culturally meaningful ways to share resources, and the ability to navigate their way to resources that sustain well-being (Citation). There are three main qualitative aspects that determine resilience; individual, caregiver, and community. The individual aspect consists of personal skills, peer support, and social skills, the caregiver aspect consists of physical and psychological caregiving, and the community aspect consists of spiritual, educational, and cultural factors. The Child-Youth Resilience Measure (CYRM) was first created to be used with ages 9 through 23, but was modified to a child measure, youth measure, PMK (person most knowledgeable) measure, and an adult measure in 2003 (Citation). The survey consists of 28 questions, either on 3-point or 5-point scale. CYRM-28 5-point scale was used at Jhamtse Gatsal.

The JGCC scored an average of 4.59 on the CYRM. In the individual aspect the average score was 4.12, in the caregiver aspect the average score was 4.8, and in the community aspect the average score was 4.3. Compared to several populations around the world, including India, the Southern United States, South Africa, and Northern Canada (Sheshatshui), the JGCC’s scores are quite impressive.
(Figure 2). These four regions were selected to give the best picture of the success at the JGCC. India is an important reference considering the JGCC’s location in Arunachal Pradesh, South Africa is in a similar developmental stage as India, Northern Canada has a similar indigenous population as Arunachal Pradesh, and the United States has been used as the classic benchmark for resiliency research. Within all three aspects, the JGCC scored higher than any of the comparison populations.

![Subscales of Question Clusters]

Figure 3: Average Resiliency score divided into subgroups (Individual, Caregiver, and Community) for the Jhamtse Gatsal Children’s Community, India, the Southern United States, South Africa, and Northern Canada.

The aim of the CYRM is to measure how well youth are coping with adversity at Jhamtse Gatsal. The JGCC is doing significantly better than the rest of India. From these results, it’s apparent that JGCC has a unique community that allows students to achieve healthy outcomes from their community. The translation of Jhamtse Gatsal is the Garden of Love and Compassion, and the community lives up to its name. The presence of positive mentors and role models, such as the Ama-Las, teachers, and staff, create meaningful relationships and constructive social support. These children have a great deal of cohesion within the community and their families. In this garden of love and compassion, the community shares a collective identity of surpassing hardships they've faced in their childhood and generating happiness in the community.

In terms of happiness, what we found was truly remarkable for this population. We utilized the Satisfaction With Life Scale (SWL) that has been used in 43 nations to measure happiness (Citation). The SWL is composed of 5 questions on either a 3-point, 5-point,7-point, or 10-point Likert scale, and the 7-point version was utilized at the JGCC. The SWL scores correlate with “(1) Differences between
nations in life satisfaction associated with differences in objective conditions, (2) Differences between groups who live in different circumstances, (3) Correlations with nonself-report measures of life satisfaction, (4) Genetic and physiological associations with life satisfaction, (5) Systematic patterns of change in the scales before, during, and after significant life events, and (6) Prediction by life satisfaction scores of future behaviors such as suicide (Diener, Inglehart, & Tay, 2013).

The scores of the students of the JGCC were among the most positive reported in the literature anywhere with an average of 6.7 out of 7.0. Average scores for each item are shown in Figure 4. There were no meaningful differences in scores between males and females.

Figure 4: Average response on each question of the SWL within the Jhamtse Gatsal Children’s Community.

When comparing the average Satisfaction with Life scores of the students at the JGCC with other nations’ scores around the globe, the JGCC outranked numerous other developing and developed countries. Scores were converted to percentages due to the fact that the JGCC students test was on a scale of 1-7 while the global tests are typically on a scale of 1-10. The JGCC students scored an average of 95.7%, while India itself had a SWL score of 49.9%, Brazil had 71.4%, the USA had 73.5%, and Denmark, the country with the highest SWL score, had 79.1% (Figure 5).
Happiness at the JGCC and the resilience of the students is largely due to the community these children live. Regardless of their upbringing, these students are surrounded with love and compassion from their fellow students, Ama-Las (housemothers), teachers, mentors, and other staff. They have shelter, plenty of food, support, a rich culture, and they get lots of exercise and good sleep. They all work together to achieve what is needed for the community, and they are encouraged to talk about the future and their ambitions.

Discussion Material

It’s important to note that there were a few inconsistencies that may be deflating these scores. Firstly, one of the questions addresses whether or not a caregiver was incarcerated during the individual’s childhood. However, people in this region of the world are banished from their villages rather than being incarcerated as punishment, and the ACE-IQ has no means of recognizing this variance. Within the JGCC, only 1% of children answered “yes” to this question. Similarly, there is a strong taboo in the region against admitting sexual harassment and rape. When asked if they had ever been touched in a sexual way, only 1% of children at JGCC answered “yes.” Finally, many couples in this region never get married even after having children, so the percentage of children who answered “yes” to the question of whether or not their parents were separated or divorced may be artificially low. In the JGCC, 19% of

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Figure 5: Average score on the SWL divided by the total possible score for the Jhamtse Gatsal Children’s Community, Brazil, India, the United States, and Denmark.
children answered “yes” to this question. These inconsistencies would suggest that the actual ACEs scores at the JGCC are higher than recorded here.

**Works Cited**


**Possible Deletions**

Experiencing these events as a child has been strongly correlated with negative outcomes such as chronic diseases in adulthood including heart disease, lung cancer, diabetes, and autoimmune diseases, and social/emotional problems including depression, violence, being a victim of violence, attempted suicide, and alcohol/drug abuse (). Additionally, a study by the Center for the Developing Child at Harvard University found a dramatic correlation between the number of adverse childhood experiences before age three and the likelihood of developmental delay. Children with an ACEs score of 1-2 had less than a 10% chance of having a developmental delay, the risk jumped to over 40% in children with a score of 4, over 70% in children with a score of 5, and nearing 90% chance if they scored 6 or higher on the ACE-IQ ().

Within the Individual aspect, JGCC scored marginally better than the Southern United states, the average score for India and South Africa scored similarly and lower than the Southern United States, and Northern Canada scored exceptionally lower than the rest of the regions. The second portion of figure three is the caregiver/relationship section. Here figure 3 shows that India, Southern United States, South Africa and Northern Canada are all very similar in results whereas Jhamtse Gatsal is significantly higher than the rest. The final section of figure 3 is the context/community+culture. This section shows a tie in data between India, Southern United States and South Africa, the lowest resilience is shown in Northern Canada and the highest resiliency score for context is at Jhamtse Gatsal. In all three clusters Jhamtse is the only subgroup to surpass an average of four points on each category, as where the second highest resiliency score is shown by the Southern United States with an average of 3.8 in individual measurements and caregiver relationship.
These measures have been used internationally in the assessment of policy level outcomes and measure life satisfaction and happiness. Guidelines for the use of this instrument internationally were published by Diener and others in 2005.

and has been found to be both valid and reliable in research internationally over many years of use. They have been intended to round out national evaluations to be more widely used for economic and social indicators. There is a consistency across time for these types of scales and a difference between nations that is remarkably consistent. The measures have also been found internationally to correlate with income and level of democracy, and inversely with level of corruption. These scores have also been shown to correlate with both health and longevity. For a complete review of these issues please see Diener-Inglehart-Tay 2013, but in summary