

MEMORANDUM

DATE	April 11, 2017
TO	Board of Psychology
FROM	 Konnor Leitzell Central Services Student Assistant
SUBJECT	Agenda Item #4(b)(1)(B)(41) – ACR 8 (Jones-Sawyer) Post-traumatic "street" disorder

Background:

This measure would recognize post-traumatic "street" disorder as a mental health condition with growing implications for our state. This bill, if passed, would define post-traumatic "street" disorder as a form of post-traumatic stress disorder (PTSD) that is triggered by terrifying or traumatic events associated with living in highly segregated and deeply impoverished neighborhoods, where paralyzing violence or extreme poverty is either experienced or witnessed by residents.

Location: Assembly Committee on Health

Status: 01/30/2017 Referred to Assembly Committee on Health

Action Requested:

No action is required at this time. Staff will continue to watch ARC 8 (Jones-Sawyer) to review any potential impact the new term may bring to the practice of psychology.

Attachment A: ARC 8 (Jones-Sawyer) Text

Assembly Concurrent Resolution

No. 8

Introduced by Assembly Member Jones-Sawyer

January 10, 2017

Assembly Concurrent Resolution No. 8—Relative to post-traumatic “street” disorder.

LEGISLATIVE COUNSEL’S DIGEST

ACR 8, as introduced, Jones-Sawyer. Post-traumatic “street” disorder.

This measure would recognize post-traumatic “street” disorder as a mental health condition with growing implications for our state.

Fiscal committee: no.

1 WHEREAS, Post-traumatic “street” disorder is a form of
2 post-traumatic stress disorder (PTSD). Post-traumatic “street”
3 disorder is a mental health condition that is triggered by terrifying
4 or traumatic events associated with living in highly segregated and
5 deeply impoverished neighborhoods, where paralyzing violence
6 or extreme poverty is either experienced or witnessed by residents;
7 and

8 WHEREAS, Symptoms of post-traumatic “street” disorder may
9 include flashbacks, nightmares, and severe anxiety, as well as
10 uncontrollable thoughts about the event itself, which can take years
11 to manifest; and

12 WHEREAS, Post-traumatic “street” disorder symptoms tend to
13 go undetected and undiagnosed in children and adults, resulting
14 in generational and cyclical forms of the disorder permeating inner
15 cities. Symptoms may start within three months of the traumatic
16 event, but sometimes symptoms may not appear until years after

1 the event. These symptoms may cause significant problems in
2 social or work situations and in relationships; and

3 WHEREAS, Post-traumatic “street” disorder symptoms are
4 similar to those of PTSD and are generally grouped into four types:
5 intrusive memories, avoidance, negative changes in thinking and
6 mood, or changes in emotional reactions. However, with a lack of
7 diagnosis in the early stages of street trauma, symptoms become
8 masked by other disorders, such as willful defiance, attention
9 deficit hyperactivity disorder (ADHD), and violence, and those
10 other disorders become the focus of diagnosis; and

11 WHEREAS, There is an epidemic of post-traumatic “street”
12 disorder in American cities, and it has nothing to do with the wars
13 being fought abroad. Homegrown violence and a sense of
14 hopelessness in America’s urban war zones are leaving thousands
15 of children and adults with severe psychological trauma that stunts
16 their emotional and cognitive development; now, therefore, be it

17 *Resolved by the Assembly of the State of California, the Senate*
18 *thereof concurring*, That the Legislature recognizes post-traumatic
19 “street” disorder as a mental health condition with growing
20 implications for our state.