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Literature Review of the health effects caused by Adverse Childhood experiences in the Early Years in Wales

Introduction

Public Health Wales defines adverse childhood experiences as stressful incidents that have a significant negative impact on people's health and well-being, especially when they occur in early childhood (NHS, 2016). These experiences might include being subjected to verbal, mental, sexual, and physical abuse, as well as growing up in a home where there is drug misuse, alcohol abuse, parental separation, family incarceration or domestic violence (Felitti *et al.*, 1998).

The first Welsh study on adverse childhood experiences was released by Public Health Wales in 2016. The results showed that 14% of people in Wales had four or more bad childhood experiences, and 47% of adults had at least one. These findings suggest that ACE's are common which created a public health concern. As a result of these findings, the Welsh Government developed the policy "A Healthier Wales" to prioritise reducing ACE's and improving health outcomes (Welsh Government, 2018). This policy aim involves services including the NHS, social care, education and housing working together to promote healthier and longer living. In the Early Years this means practitioners support the development of health and well-being through nutrition, oral health, providing physical activity and fostering positive relationships. Positive relationships allow children to feel safe and secure and trust, which build and develop resilience which is crucial for children who have experienced trauma (Sciaraffa *et al.*, 2018).

Children with high ACE's are more likely to develop behaviour's harmful to their health including drinking alcohol and smoking during adolescence as coping mechanisms to high feelings of stress. The impact of this results in individuals being far more likely to develop serious health conditions including heart disease, diabetes and cancer (Boullier and Blair, 2018). Research in Wales shows that people with four or more ACEs are six times more likely to be a smoker and four times more likely to drink alcohol at significantly damaging levels (Bellis *et al.*, 2015a). Another impact of ACE's is that

people are then two times more likely to suffer from chronic diseases including asthma, cancer, obesity, heart and respiratory disease (Ashton et al., 2016). High ACEs' also have a significant impact on mental health as people are six times more likely to have ever received treatment for depression or anxiety (Hughes et al., 2018). This research strongly suggests that ACE's can have a long lasting effect on health and well-being.

Trauma informed school services

In recent years trauma informed approaches have been used more commonly in Wales. In 2018 Trauma Informed Schools Wales was developed to improve the knowledge in schools, communities and organisations in order to support vulnerable children who have suffered trauma. The main aspiration of this service is to build compassionate communities which enable children and young people to overcome obstacles, make positive life choices and create resilience (TIS Wales, 2025). In March 2021 the Government launched a framework A Whole School Approach Framework to promote making stronger relationships with staff, children and families stronger through identifying the individual emotional needs of children and young people. As ACE's are becoming more recognised, schools in Wales are being encouraged to participate in this training however this is not as common within the Early Years sector. Flying Start is the Welsh Government's programme which focusses on improving outcomes for children under 4 however it is only available in the most disadvantaged parts of Wales. This equates to around 25% of children meaning there is still being a large number of children who are not receiving additional support (Thomas, 2018).

Prevention in early years

Compared to people who do not encounter ACEs, research shows that those who do are more likely to suffer from poor mental and physical health outcomes (Hughes *et al.*, 2016). Through providing early intervention the long term effects of ACE's can be reduced. Educators can support this by creating a safe, nurturing and enabling environment tailored to the individual needs of every child. This builds resilience, a crucial skill which enables children to become confident and independent. Prevention also includes supporting families and working closely together to mitigate any risks and sharing

knowledge of ACE's. However, it is important to consider that not all young people who experience ACEs will suffer negative effects or be influenced by ACEs in the same ways. The impact depends on the circumstances of which include the age at the time of the experience, the length and severity and the resources (Kelly-Irving & Delpierre, 2019).

Having an awareness of trauma in early years is very important to understanding and supporting the development and well-being of children who have been exposed to ACE's . ACE's cause children to suffer toxic stress which has a significant impact on brain development, affecting the ability to learn. Through identifying ACE's practitioners can provide support to help reduce the impacts of stress on the brain and body. Through building positive relationships with a caregiver children feel safe and secure, allowing them to develop attachments which are fundamental in the social and emotional development of a child (Holmes, 2014). Interactions such as serve and return build emotional resilience. Children with high ACE's find it difficult to regulate their emotions which can result in challenging behaviour and withdrawal. Practitioners need the knowledge to identify this and provide additional support. Without early intervention adversity in childhood can perpetuate poor health and antisocial behavior in generations of families (Public Health Wales 2016). Practitioners play a fundamental part in the Welsh Governments aim to prevent and reduce the cycle of ACE's.

However, providing interventions in Early Years is challenging. Practitioners have different levels of understanding what ACE's are. Practitioners need adequate training to develop the skills required to effectively provide trauma-informed care. A lack of funding in the Early Years sector also make it challenging to provide resources to support interventions. Practitioners may feel they do not have adequate time to provide interventions to children in their care due to looking after so many children at the same time. Practitioners may find it uncomfortable to ask parents questions if they make any concerning observations and parent have not openly informed them of any challenging experiences their child has had. This research project will determine how much

knowledge staff within Early Years have on trauma due to ACE's and whether more training is needed.

Methodological considerations

In research, methodological considerations are essential since they guarantee a study's validity, dependability, and accuracy (Smith, 2025). There are multiple methods that can be used to collect data, all of which have strengths and weaknesses. It is important to take this into consideration when selecting the method chosen to conduct any research and choose the method that is successfully going to answer the research question (Heath *et al.*, 2018).

The purpose of this study is to collate information on how much knowledge practitioners have on trauma caused by adverse childhood experiences. With the focus specifically being on early years practitioners this can be described as using purposeful sampling to collect the data. Purposeful sampling is the term used when participants are selected due to the relevance of the of the research question (Stratton, 2024). The research in this study will collect primary data using the research method of interviewing. Primary data is information that is collected directly by the researcher (Rabianski, 2023).

Interviews can be categorised as formal or informal based on the nature of the intended purpose. People may conduct informal interviews as part of their everyday lives use a conversational approach. Formal interviews, on the other hand are more structured with a pre-determined set of questions. Using the method of formal interviews in this study will obtain direct experiences and views which are unique to every participant.

To ensure the data is reliable and non-bias the Nursery Nurse practitioners will be selected for interview using random sampling. Using random sampling means that every practitioner has a chance of being selected for interview, making it a fair choice of method. The sample size will be 50 participants chosen at random from all of the nurseries located in South Wales. A sample size lower than this would not represent enough of the population, making the results inconclusive.

The method chosen to conduct this research is semi-structured interviews using open ended and closed ended questions. A structure of direct questions will be planned

however the questions asked adapt based on the answers given by the interviewee. Unlike structured interviews, using a semi-structured interview technique allows for follow up questions to be asked depending on the answers in order to gain in depth data (Parrish *et al.*, 2023). If a practitioner says they know what the causes of childhood trauma are, this can be followed up with asking the practitioner to give examples. This capacity to pose further inquiries generates information that will allow the researcher to better understand the problems discussed the interviewee (Newby, P 2014). This will allow the researcher to clarify the information being said resulting in the data collected being more accurate.

Semi-structured interviews allow the researcher to gather reliable qualitative data that is comparable. Qualitative research uses techniques including focus groups and interviews to investigate attitudes, behaviour and experiences. This technique is able to provide participants opinions in detail, finding out why and how. Quantitative research gathers statistics by using largescale survey research, using methods such as questionnaires or structured interviews (Dawson, C 2009). Combining qualitative and quantitative research is referred to as using mixed methods. Mixed methods research uses more than one type of data to collect information. This makes the results highly reliable as it allows for more comparisons to be made. However a disadvantage of using mixed methods is that this method is considerably more time consuming. Using mixed methods requires the collection of different types of data which would double the time of the research project in comparison to using one.

The benefits of semi-structured interviewing allow for flexibility to ensure the respondent understands what is being asked by rephrasing questions allowing them to provide further detail in their answers (Newby, P 2014). Additionally, they allow researchers to pose delicate questions that would not be suitable in focus groups, as people might be unwilling to discuss sensitive information (Kaplowitz & Hoehn, 2001). Discussing trauma can be a personal issue for some adults if they have suffered ACE's therefore focus group interviews would not be an appropriate method of conducting this research. Another benefit of using semi-structured interviews to gather data is that the information heard is directly from the voices of respondents. In this study it is important the

information is collated from Nursery Practitioners, not managers or owners. This ensures the information reflects the direct knowledge and experiences of individuals making it valid to the purpose of the research.

However the limitations to using semi-structured interviews can be the risk of asking leading questions which can cause the interviewer to develop observer bias. Any form of systematic deviation from reality that occurs when witnessing and documenting data for a study is known as observer bias (Mahtani *et al.*, 2018). This can result in the researcher gathering misleading information. Another limitation according to Newby 2014 is that semi-structured interviews are time consuming. Interviews take longer using semi-structured approach compared to a structured approach due the flexibility and adapting that is used to gather in depth information.

To reduce the risk of limitations interviewers can receive training. This reduces the chances of unbiased interviewing. It is important the interviewer actively listens and does not share their own information or knowledge of the topic being discussed. In preparation before conducting the interview it is important to practice with mock interviews to gain feedback on how the interview techniques could be improved. Pilot interviews may also be considered before the main research is carried out. According to Teijlingen *et al* 2013 pilot studies are an essential component of well thought out research studies. This will allow the researcher to refine the questions, ensuring they are relevant and clear to the participant. If the participant does not understand the questions, wording can be changed. Refining questions saves time during the research process and ensures likely success in gathering accurate information increasing the research quality.

During the interview process it is crucial the researcher is mindful of the Hawthorne effect. This occurs when a subject's typical behavior changes because they are aware that their behavior is being observed or examined, this is known as the Hawthorne effect (Oswald *et al.*, 2014). In this research study this means that the practitioners being interviewed may alter their responses to what they perceive the interviewer wants to hear. To reduce the Hawthorne effect from happening, the interviewer can make the participant feel relaxed and comfortable through building rapport. Building rapport

involves using positive body language, remaining fully engaged and actively listening. The Hawthorne effect has long been referred to as the "Achilles heel" of participant research, making it one of the biggest obstacles that research observers encounter when collecting data (Coombs and Smith, 2003). However a criticism of the Hawthorne effect is that there may be other variables that are impacting behaviour of the participant. These might include feelings of stress or anxiety, or nerves if the participant lacks interview experience.

Alternatively the research method of questionnaires was considered to conduct this research however according to Hopkins 2014 using this method can make it challenging to create questions that will get in depth answers. Using questionnaires also requires the cooperation of the organisations involved (Cohen *et al.*, 2018). If the nurseries were assisting in distributing, collecting and returning the questionnaires management may choose not to return the questionnaires of practitioners who admitted to having little or no knowledge of ACE's. Another limitation is that self-administered questionnaires can often suffer from poor response rates, especially if they are too long to complete. Participants could be concerned about confidentiality prohibiting them from sharing personal information. Low response rates of questionnaires can lead to unrepresentative samples making the research inaccurate. According to Newby 2014 interviewing participants face to face produces higher response rates indicating that interviewing is the better method for this research project.

To further ensure the data gathered in this study is valid triangulation is required. Triangulation is described as the process of comparing and integrating evidence from multiple sources to gain a deeper comprehension of the research topic (Roberts-Holmes 2018). In this research project data triangulation could be applied by interviewing teachers in schools to compare and contrast their knowledge of ACE's. This will allow for an accurate comparison between education settings and early years settings. This data will confirm if school settings have received more training and whether more training of ACE's is required within early years. Using triangulation ensures the data provided in this research is credible and trustworthy.

Ethical Considerations

The ethical considerations for this research include gaining consent from participants who will be interviewed. Consent is required at the beginning of research projects, the researcher must consider that the participant has the right to withdraw from the study at any time and ensure the participant is aware of this right (BERA, 2023). It is not required that the participant explains their decision to do so. It is the responsibility of the researcher to fully explain what the study involves, what the purpose of the research is and how the information gathered will be used. Details of the target population and why it was chosen should also be included in the consent form. This ensures that the participants have had the opportunity to make an informed choice. It is important to give the participant time to reflect on the information prior to signing the consent form. If the participant is happy with the information provided and willing to partake they will sign the consent form. It is significant that the researcher does not persuade any participants to take part, consent must be voluntary (UWTSD, 2022). Any participant that has been selected has the right to refuse consent and not take part.

All consent forms should be kept by the researcher as this provides the only evidence that they agreed to participate. Additionally, it is recommended that the data and the record match by keeping them stored together. This can be achieved by naming the scan of a consent form with the date of collection, the research round number, and the participant number. In doing so, this prevents information from being mixed up. This also allows for data to be frequently reviewed by the researcher ensuring that the information collected is minimised and relevant to the research question.

The researcher has a duty to protect the confidentiality of the participant throughout the duration of the research project. The consent form will explain what measures will be taken to ensure confidentiality is maintained. Measures include ensuring the interviews will not be over heard. A quiet and private location should be provided for participants. However, there are limits to confidentiality due to legal obligations. The consent form will be written explaining that confidentiality will be broken if there is a safeguarding

concern. As the participants are discussing their knowledge of adverse childhood experiences they may discuss specific cases of children they have or are currently working with. If any disclosure is made during the interview the researcher has a duty of care to safeguard and protect the child. The researcher has a duty of care to ensure the best interests of every child are considered a priority as outlined in Article 3 of the United National Convention on the Right of the Child (UNICEF). If information emerges which describes a child being a victim of abuse the researcher has a duty of care to report this (Steinberga *et al.*, 1999).

Consideration for the participants privacy must be maintained during the collection of data from beginning to end. During the interview participants may not be comfortable to answer a specific question asked by the researcher, this should be considered during the design of consent forms. The participant has the right to privacy therefore should be provided with the option of not answering a question. The participant also has the right for their identity to be protected (GDPA, 2018). This should be reflected in the consent form stating that precautions will be taken to ensure information in the study cannot be used to identify individuals. The participants should have the choice of providing information anonymously. Personal details including names, addresses phone numbers can be removed as a measure to protect the identity of the participants.

Researchers must ensure equal opportunities during the data collection by respecting the ethnicity of all participants (BERA, 2024). In acknowledgment of their rights and any distinctions resulting from age, gender, sexual orientation, race, nationality, culture, religion, disability, or any other significant attributes participants should be treated equally, sensitively, with dignity and without discrimination. During the research method of interviewing the researcher should ensure participants with any communication, or language barriers are not excluded. Consideration of using a translator or interpreter may need to be considered in order to facilitate participation (NSPCC, 2020).

All participants must be made aware of the possible risks involved (BERA, 2024). There are psychological risks involved including feelings of anxiety ahead of the interview. To mitigate the risk of this, the researcher could provide a guide of example questions that may be asked prior to the interview. This allows participants to prepare and reduce

feelings of anxiety. However in doing so poses a risk for bias data as the participants may not share genuine responses. During the interview participants may feel emotional distress if they have been involved with children who have suffered significant trauma. Potential feelings of guilt or embarrassment if the practitioner admits to not understanding childhood trauma and the damaging effects it has on children. This could lead to feelings of low self-esteem and lack of confidence as a practitioner. The researcher should provide reassurance that they are not judging the practitioners, allowing them to feel safe and respected. There is a social risk to consider if the responses are public, the participant may be judged by colleagues or face consequences from management if they have not adhered to safeguarding policies within their Nursery. To mitigate psychological risks the researcher could consider the interviews being anonymous. This will reassure the participant to answer questions honestly resulting in the collection of reliable data. Researchers have a duty of care to treat all participants with care and respect (UWTSD, 2022).

Students conducting research projects must also consider the potential risks to the university. If ethical guidelines are not followed appropriately, this can be damaging the reputation of the university. The researcher has a responsibility to conduct research to a high ethical standard, failure to do so will result in misconduct (UWTSD 2022). To mitigate this risk researchers should give careful consideration to the method chosen to collect data. Conducting a risk assessment would help to identify any ethical concerns that could arise to the participants. Students must conduct their research projects with honesty and transparency, failure to do so will result in plagiarism. To mitigate the risk of plagiarism, the researcher must remember to use quotation marks when directly quoting the words of the interviewee.

It is important consider the psychological risks that the researcher may be subjected to during the collection of data. Adverse childhood experiences can be a sensitive topic to discuss, therefore the well-being of the interviewer needs to be considered. During the interview the researcher may feel emotional distress. To mitigate this risk the researcher could conduct one interview a day. This also prevents the researcher from suffering from burn out as conducting semi-structured interviews will take a considerable amount

of time (Newby 2014). Another risk to the researcher is the failure to handle and store data collected which would result in a breach of confidentiality and privacy under the General Data Protection Act.

All of the research gathered will be stored in a locked cabinet in accordance with the General Data Protection Act. This includes notes taken from the interview in written form or recordings, consent forms. The retention period for the data will be two years, after this time the research will be erased. Personal data must not be held for longer than necessary for the intended purpose (GDPA 2018). The GDPA 2018 outlines that all participants have the right to see their information and request their own copy of it to use however they want. Participants also have the right to modify any information that has been documented incorrectly. Lastly participants have the right to request their information provided for the data to be deleted, also referred to as the “right to be forgotten”. Interviews may require researcher to use of digital devices. The consideration of protecting this data is of high priority. Immediately after conducting interviews the researcher should transfer study data from equipment such as voice recorders and cameras to more secure storage. To further protect confidentiality of participants it is important to limit who can access the data to those who have a specific need for it. When technology permits, it is legal requirement to prevent any third party from downloading and copying the information.

To conclude, ethical considerations are a significant part of research projects. Ethical considerations ensure the researcher, participant and university are not going to come to harm. Ethical considerations allow for the needs of the participant and the researcher to be considered and supported ensuring positive well-being and dignity throughout the project.

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