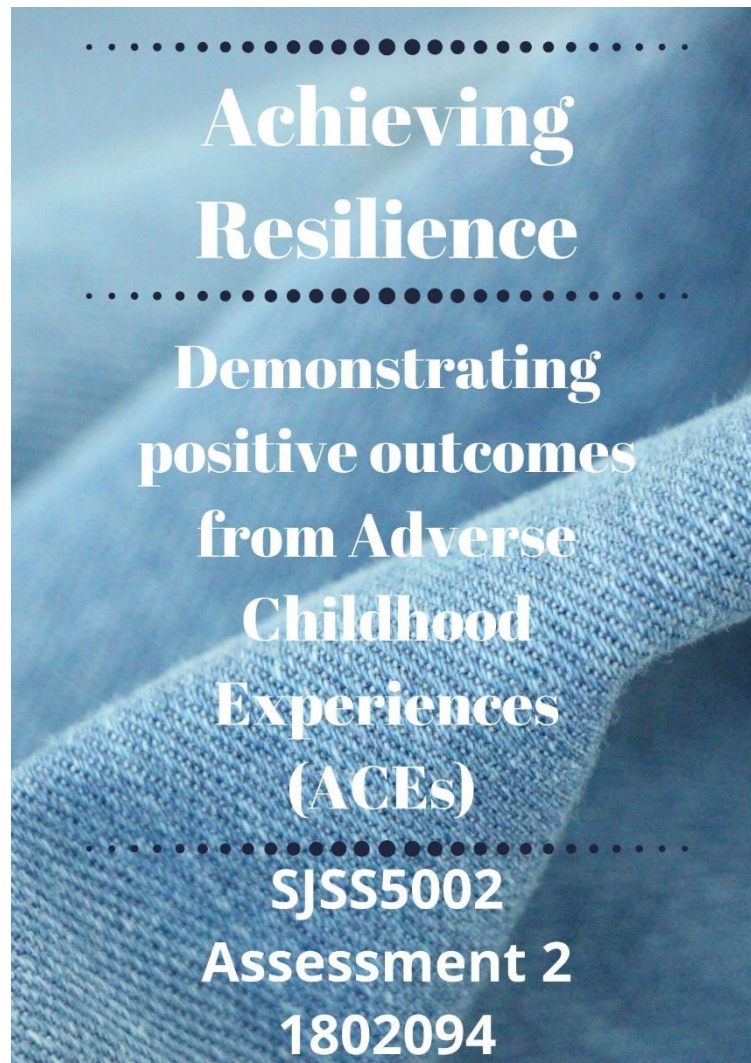




Despite the negative issues that can occur in adult life as a direct result of childhood trauma as proposed by (Felitti *et al.*,1998) there are also positive outcomes available to anyone who may have been impacted by an adverse childhood experience (ACE). Or multiple ACEs. Their research has shown that ACEs can have a significantly negative influence throughout the lifetime of a person and that outcomes are poorer with every instance of adversity encountered, although Sabates and Dex (2012) argue that it is not definitive which combinations of experience create which issues.

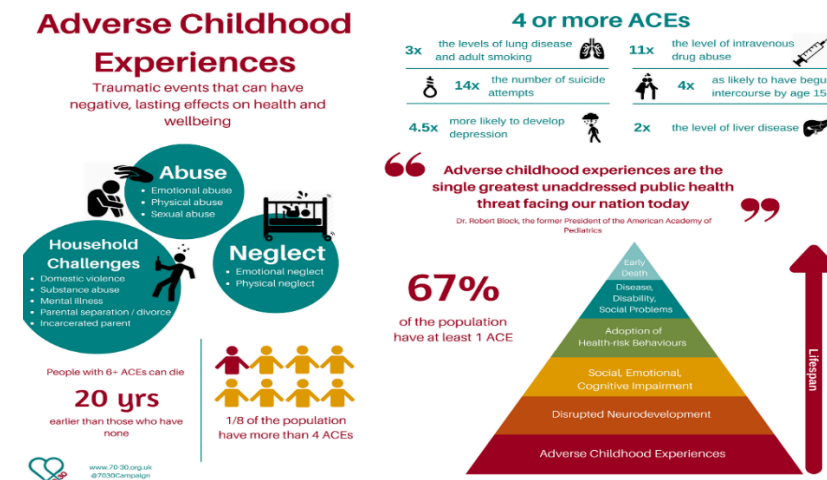


Image 1

Of course, not everyone who experiences ACEs or childhood trauma develop negative outcomes in adulthood, although identifying how ACEs work and what their characteristics are, gives an opportunity to reduce them. Cooper (2015), suggests that understanding how trauma affects both health and behaviour over a lifetime of an individual, can transform outcomes for people medically, socially and economically within the health and social care landscape. Another important issue to reflect upon is how not to begin labelling and defining people dependent on how many ACEs they may have experienced as, Holland (2018) suggests is a drawback to the model.

Bowen (2004), defines families within his theory as an emotional assembly of beings. People linked by their own feelings and thriving on the feelings and emotions of those closest to them. A child's health and wellbeing are overwhelmingly affected and influenced by parents, especially by mothers and Bowlby (1969) provides theory to support the belief that children develop positively when provided with a secure and warm attachment to someone giving consistent and trustworthy care. Toxic stress is the phrase used in research by The Department of the Developing Child at Harvard University (2019) to determine the response to multiple trauma or prolonged adversity. This stress can cause detrimental damage to the developing brain of a

child as it continuously activates the body's fight or flight reactions and maintains a heightened state of anxiety. A child's brain cannot return itself to normal even after the ordeal is over or removed and again highlights that the presence of a nurturing and responsive caregiver will reduce the intensity of the situation and minimise the effects on the brain.

Overcoming the generational cycle of ACEs and reducing the prevalence of ACE experienced parents raising ACE experienced children, depends very much on the promotion of resilience. Barry (2018), describes resilience as an individual's way of coping with difficulty in their life, however, The University of Southampton (no date) argue it is the capability of something or someone to absorb disturbances, change and adversities, whilst continuing to function within its normal identity and existence. Providing families with key skills and a toolbox of strategies will significantly improve outcomes in later life. Findings in The Lancet Public Health Journal (Hughes et al., 2017) state that people with four or more aces are at greater health risk than those who have one. These risks include Diabetes type 2, heart disease, cancer, alcohol and or drug addiction and mental illnesses. In support of the reduction of these health problems in later life, Dowd (2017) suggests we aim to guide children into positive

relationships, teach emotion expression and regulation, give them the motivation to grow and learn and the support in socialisation in which to do these. These approaches in childhood will reduce the risks of adversity in adulthood.

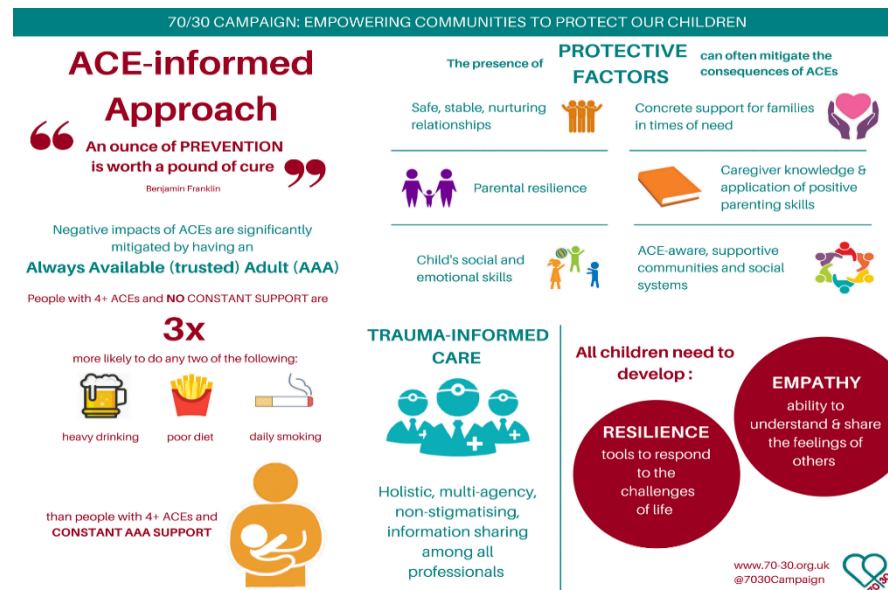


Image 2

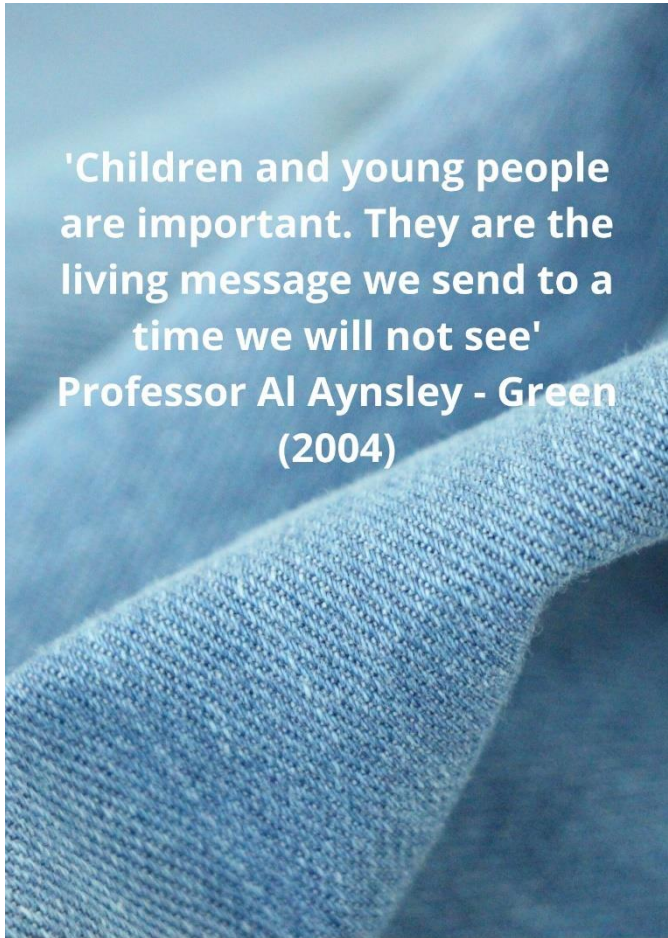
Welsh Government are extremely proactive when it comes to both promoting the welfare of its children and in striving for positive outcomes for generations to come. Currently the Building on Taking Wales Forward, Prosperity for All: The National Strategy, Welsh

Government (2017) provides a strong platform from which to drive a ‘people-centred’ approach forward and creates a positive mood in terms of child prosperity and welfare. It is envisaged that providing unique early years facilities, creating an ACE aware Wales and improving the appropriate support services for families facing hardship and challenges will develop a Wales that is well and prosperous. These are linked with the seven well-being goals taken from the Well-being of Future Generations (Wales) Act 2015 and fosters a key understanding in the promotion of healthy childhoods.

The Healthy Child Wales Quality Assurance Framework (2016) now includes a Family Resilience Assessment Instrument Tool (FRAIT). This has been developed by health visitors to integrate into their practice to allow an umbrella view of family circumstances, to aid the highlighting of areas of need and to more efficiently plan support and intervention to increase family resilience. Similarly, these principles are contained in the American Health Outcomes from Positive Experiences (HOPE) model. Here Sege (2017) recognises that parent and child wellbeing are linked and therefore positive intervention must serve to establish and maintain healthy parent-child relationships. This framework builds on the recognition that resilience is also based on many other societal determinants and that

partnerships with community, services and education all have important parts to play in the building of a child's personality and identity. This is supported by Bronfenbrenner's (1979) model of ecology of human development. Trauma informed practice is another popular contemporary focus in building resilience and facilitating recovery. Wilson, Pence and Conradi (2013) suggest using a 'trauma lens' to evaluate the impact of a traumatic event, looking at how to minimise its impact, reduce the incidence of it happening again or being reminded of it. In contrast Steele and Malchiodi (2012) argue that trauma informed practice needs to be able to strengthen children despite their trauma and to move forward with confidence to any future trauma they may face.

For these interventions to be effective however, all public services in Wales need a cohesive approach to empowering families, they need the right services provided geographically and key professionals using a formal model of resilience to measure and determine family's needs and how best to meet them. There continues to be research carried out worldwide and within Wales to learn how best to remove, reduce or at least repair damage done by childhood adversity, how best to learn and improve from it and how to best protect future generations to come.



**'Children and young people
are important. They are the
living message we send to a
time we will not see'
Professor Al Aynsley - Green
(2004)**

Rationale.

This leaflet is a brief introduction to Adverse Childhood Experience and the positive outcomes to be gained from resilience-based practice and trauma informed services. The audience being newly appointed staff working within the high quality child centred approach, Early Childhood Education and Care, Drakeford (2019) approach in Wales and also for those parents who are aware that they have themselves been impacted by adverse childhood experiences and more specifically those at higher emotional and physical health risk having experienced the significantly four or more traumatic events as children. Awareness of these ACEs and support to both parent and care for children proactively can significantly reduce the prevalence of future generations of children suffering the same traumatic events and improve the health outcomes in adults focussed on improvement within their families. An intergenerational focus on supported learning, practical parenting advice and a promotion of positive childhood experience can not only improve outcomes for future generations of children but on the parents themselves as they enhance their own feelings of strength, wellbeing and resilience alongside raising children in a secure, healthy and positive manor thus serving to reduce both the health and economic disadvantages of child trauma.

A critique of the ACEs theory has been sought however it can be argued that the models benefits in positively informing future practice outweighs the drawbacks. The design of the leaflet represents the level of academic requirement requested but is balanced with infographics and pictures to appeal to any reader interested in its topics. The subject matter has been chosen by the student to promote the understanding that whole family resilience matters, to showcase a belief in a holistic family approach to the health and wellbeing protection of all and to develop a landscape of better-quality childhoods.

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Infographic 1

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Infographic 2

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