



Adverse Childhood Experiences (ACEs)

Adverse Childhood Experiences (ACEs) refer to stressful or traumatic events which occur prior to a person turning 18. They include abuse (physical, emotional, sexual); neglect (physical, emotional); domestic trauma; mental illness; substance abuse and poverty.

The term was originally developed in the US for the Adverse Childhood Experiences survey which found that as the number of ACEs increased in the population studied, so did the risk of experiencing a range of health conditions in adulthood. There have been numerous other studies which have found similar findings.

Childhood adversities also include difficult events not necessarily considered to be clinically traumatic, such as a family member in prison, parent divorce, chronic health conditions and school bullying.

Understanding the impact of ACEs help us understand how experiences in *early life* translate into *adult life*.

Adverse Childhood Experiences Video

(NI) <https://vimeo.com/330114583>

(Wales) <https://www.youtube.com/watch?>

Adverse childhood experiences can create levels of stress that are dangerous to the child's brain development, behaviour, health, learning and adversely affect their future adult lives.

There are 3 types of stress recognised:

- 1. 'Positive stress'** - the stress hormones help the body to do what is needed at the moment, but once the event passes, our body goes back to its normal state.
- 2. 'Tolerable stress'** - when we face more serious stress, such as a severe injury/going through a natural disaster, our body's response is to release a flood of powerful stress hormones in order to help the body adjust.
- 3. 'Toxic stress'** - prolonged activation of stress response systems in the absence of protective relationships. Toxic stress linked to ACE's can have a detrimental effect not only on brain development, but also the likelihood of the child to adopt health-harming behaviours and potentially physical and mental illness in their future lives.



Increased risks of health - harming behaviour

Compared with people with no ACEs, those with 4+ ACEs are:

4 times more likely to be a high-risk drinker

6 times more likely to have had or caused unintended teenage pregnancy

6 times more likely to smoke e-cigarettes or tobacco

6 times more likely to have had sex under the age of 16 years

11 times more likely to have smoked cannabis

14 times more likely to have been a victim of violence over the last 12 months

15 times more likely to have committed violence against another person in the last 12 months

16 times more likely to have used crack cocaine or heroin

Resilience

Resilience is a positive, adaptive response in the face of significant adversity. It results in healthy development because it protects the developing brain and other organs from excessive stress responses in the body. Resilience transforms potentially toxic stress into tolerable stress. Like elasticity, resilience enables the person to be stretched and knocked down but bounce back up again, recover more quickly and come back stronger.

The building blocks of resilience:

- Having one or more stable, caring child-adult relationship
- Feeling you can overcome hardship and guide your destiny
- Feeling equipped to manage your behaviour and emotions
- Be involved and feel connected.

Strategies for building resilience include:

- Forming and maintaining relationships;
- Physical exercise to counteract the effects of stress;
- Relaxation— unwinding to ease pressures;
- Having fun— laughter is the best medicine;
- Developing a positive attitude – things can get better;
- Taking control — initiating small actions can give you the confidence for bigger steps;
- Acceptance – some things you cannot change but can learn to tolerate;
- Keep working at it – do not give up; and
- Remember the days you do / have coped.

Safeguarding within your organisation:

[*Keeping Children Safe: Our Duty to Care*](#)

[*Keeping Adults Safe: A Shared Responsibility*](#)