

Adverse childhood experiences (ACE's)

What are adverse childhood experiences?

'Adverse Childhood Experiences (ACEs) are stressful or traumatic experiences that can have a huge impact on children and young people throughout their lives'.

Research done in the USA in the 1990's determined 10 fundamental ACE's that include the following:

- Abuse: including physical, sexual, verbal
- Neglect: including emotional, physical
- Growing up in a household where:
 1. there are adults with alcohol and drug use problems
 2. there are adults with mental health problems
 3. there is domestic violence
 4. there are adults who have spent time in prison
 5. parents have separated

In addition to the above it is considered that a child who has experienced bereavement, bullying, poverty and community adversities such as living in a deprived area or neighbourhood violence will as a result experience high levels of stress which in turn impacts negatively on healthy brain development. As children's brains develop, particularly the most rapid of brain development in children aged 0-5, the negative (adverse) experiences impact upon the child's ability to build positive and healthy pathways in the brain that is needed to regulate behaviour and achieve long term health outcomes.

The long-term impact of adverse childhood experiences.

Research acknowledges that if a child experiences 4 or more ACE's they are;

- 4x more likely to be a high-risk drinker
- 16x more likely to have used crack cocaine or heroin
- 6x increased risk of never or rarely feeling optimistic
- 3x increased risk of heart disease, respiratory disease and type 2 diabetes
- 15x more likely to have committed violence
- 14x more likely to have been victim of violence in the last 12 months
- 20x more likely to have been in prison at any point in their life

In Scotland, the Governments approach *Getting it right for every child* (GIRFEC) directly takes into account the need to support children who have, or are experiencing ACE's.

GIRFEC considers four important elements in its policy.

It is child focussed, based on an understanding of the wellbeing of a child in their current situation considering the child's developmental needs and family and community influences. It advocates the importance of tackling needs early and recognises the importance of working in a joined-up way that coordinates efforts to achieve well-being for the child.

Source: Scottish Government Gov.Scot

ACES's in the early years

Catastrophic cortisol – Cortisol (also known as the stress hormone) plays a key role in managing stressful situations. It has a '*powerful effect on early childhood development. When babies and children are continuously exposed to stressful, threatening situations in the home or whose needs for attachment or affection continually go unmet, they eventually develop a hyper-reactive stress response.*'

Early Childhood and Neuroscience -Theory, Research and Implications for Practice. Mine Conkbayir (2017)

Our response in early years when working with children with ACE'S

- Recognise the signs, symptoms and impact of ACES's in young children and they families.
- Intervene early to support children with appropriate interventions and strategies that aid healthy brain development and overall well-being.
- Engage others in your strategy to support who can offer expert advice and knowledge that provides a multi-agency, coordinated approach that leads to positive solutions for children and their parents.
- Provide children with a place and space to feel safe, secure and loved. Accommodate quiet areas in a setting where they can rest and be quiet, or outdoor spaces where they can enjoy open areas to develop gross motor skills and explore.

*Check out our Early Years Hub interview with Mine Conkbayir on Adverse Childhood experiences on our Safeguarding Hub.