

### What are Adverse Childhood Experiences (ACEs)?

ACEs are specified traumatic events occurring before the age of 18. They can include experiences that directly affect a child (such as experiencing *sexual, physical or verbal abuse and emotional and physical neglect*) and indirect experiences that affect the environment in which a child grows up in (*parental separation, substance misuse, mental illness, incarceration or domestic abuse*).

### How common are ACEs?

ACEs are prevalent across the general population.

An English ACE Population Study found that:

- 52% of people have experienced 0 ACEs
- 23% of people experienced at least one ACE
- 16% of people have experienced 2 -3 ACEs
- 9% of people have experienced four or more ACEs

Source: <https://bmcmmedicine.biomedcentral.com/articles/10.1186/1741-7015-12-72>

### What impact can ACEs have?

- When a child or adult experiences a stressful or traumatic event, the “fight, flight or freeze” response causes a flood of corticotrophin-releasing hormones (CRH) which is a normal protective response to a stressful situation.
- For children who experience these situations repeatedly, the brain continually releases CRH, which means the child remains at a state of permanent alert and is unable to relax. It has been described as facing a bear every day!
- The impact is that a child is unable to think rationally and they are physiologically unable to learn.
- Continual exposure to ACEs in childhood can change the way your brain and body develops and can therefore increase the risk of developing health - harming behaviours. These behaviours then lead to an increased risk of poor physical and mental health later in life (including cancer, heart disease, diabetes, depression and anxiety) and ultimately early death, as well as negative social outcomes, such as low levels of education, poor employment prospects and involvement in criminal activity.
- ACEs are strongly associated with the substantial increase in the use of health and social care resources and on the criminal justice system.
- Children who are repeatedly exposed to trauma are also less able to cope with additional stress so may be more aggressive, more angry or withdrawn.

### What build resilience?

Resilience is the ability to bounce back after adversity. Developing resilience has been shown to improve outcomes even in those who experience high levels of ACEs. There are different domains of resilience:

- Having access to one stable, caring and trusted adult in childhood
- Being engaged in community activities such as team sport
- Sense of competence and self – esteem
- Developing coping skill such as mindfulness, meditation etc
- Supportive friends and positive attachments

## Can we overcome ACEs? Aren't we already doing this?

We have understood that specific traumatic experiences in childhood can lead to poor outcomes for some time; we knew for example that children of parents who had mental health problems are more likely to develop problems themselves. What is new is the understanding of the cumulative effect of ACEs and the knowledge that ACEs often co-occur. Identifying one ACE should prompt a process to identify others and to uncover the root causes of adverse experiences. The ACEs approach also gives us a way to overcome the effects by building the resilience of individuals and communities.

## What is happening in Gloucestershire?

The Action on ACEs strategy outlines a route towards achieving a **resilient Gloucestershire where communities and organisations are acting on ACEs**. We want to build a social movement that recognises the potential lifelong impacts of adversity in childhood and catalyses action on ACEs to ensure we respond to current harms and break the intergenerational transmission of harms.

In order to achieve this we have identified the actions we will take to

- raise **awareness** of ACEs
- to ensure individuals, communities and organisations can **talk about** ACEs
- **take action** to stop the damage ACEs do and also to **build resilience** around ACEs.

