

SAFEGUARDING ADOLESCENTS

STRATEGY GUIDE

Theme: Trauma Informed/Adverse Childhood Experiences

Introduction

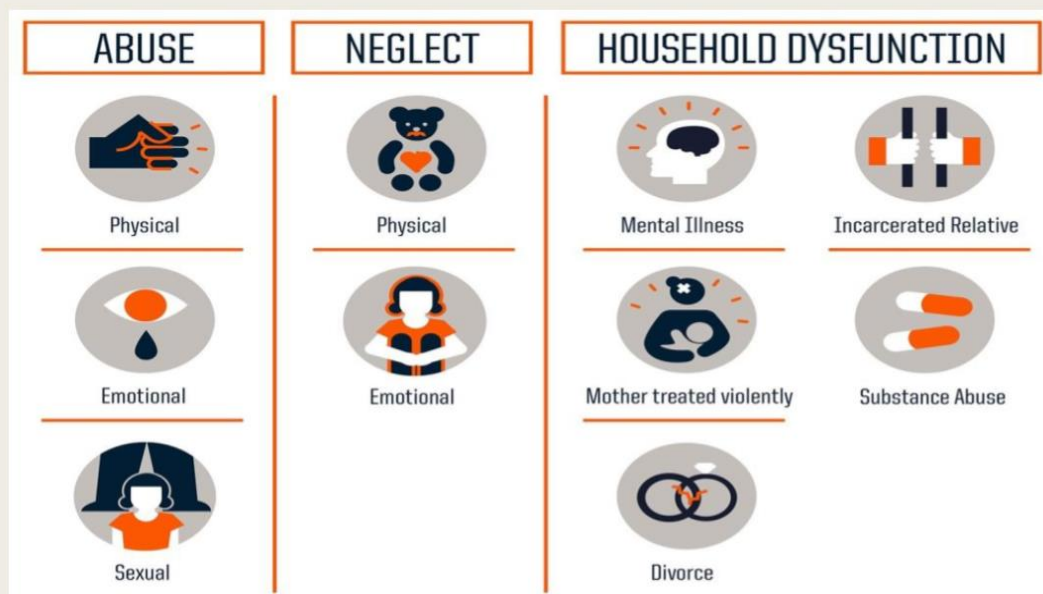
Adverse Child Experiences (ACEs)

ACEs are stressful or traumatic experiences, which include abuse, neglect, and a range of household dysfunctions such as witnessing domestic violence or growing up with substance misuse, mental illness, parental discord, or incarceration.

The impact of ACEs on a person can affect how they:

- Perceive themselves (self-esteem and self-image).
- Interact with others (passively or angrily).
- Cope with emotional pain (depression, anxiety, alcohol, or drug use).
- Use their parenting skills.
- Develop trust, boundaries, and respectful relationships (both with adults and children).

10 most widely recognised ACEs:

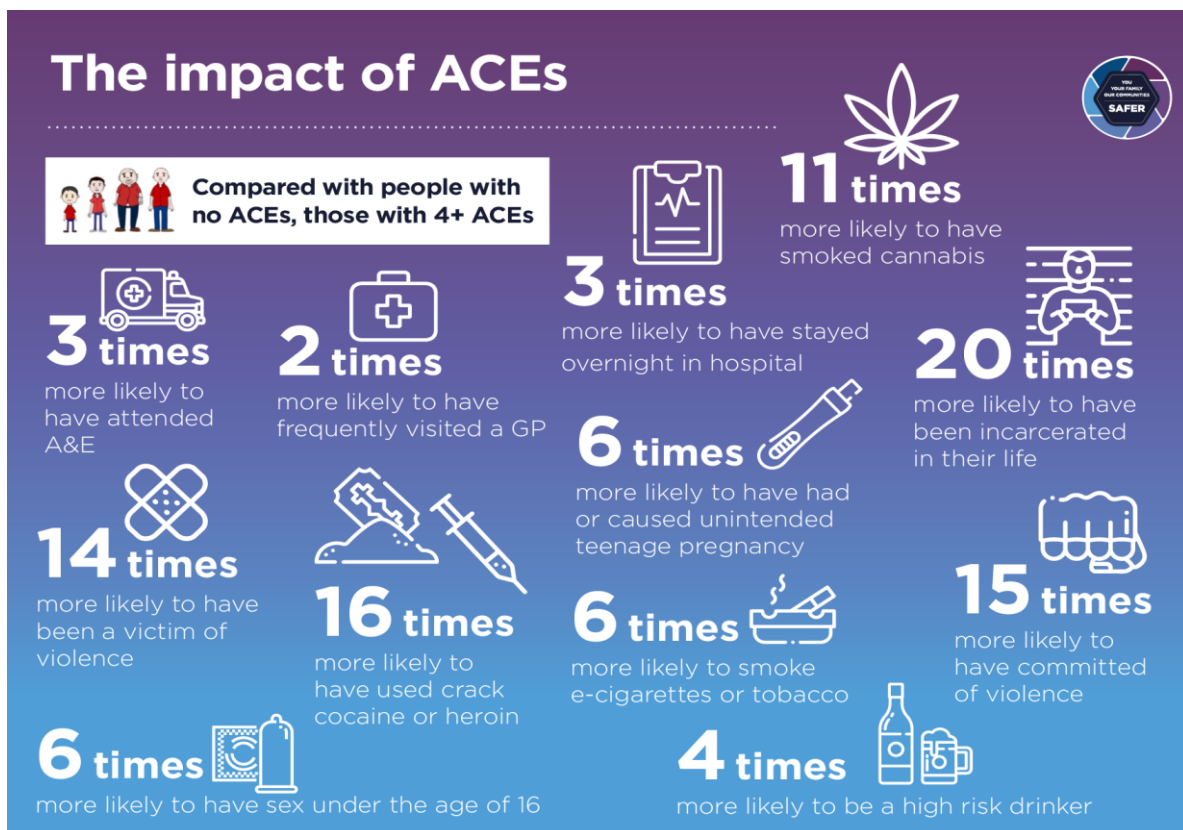


Trauma-informed practice

This is one way that communities and organisations can act on ACEs, which is also relevant to all professionals. By recognising and understanding the prevalence of trauma and its impact, trauma-informed practice strengthens resilience and empowers individuals to re-establish control of their lives. There is a need to support front line practitioners, such as police response officers, social workers, family support workers, school staff, educational officers and healthcare professionals by developing their knowledge of ACEs and the subsequent trauma that ensues.

What is the impact on safeguarding adolescents?

Safeguarding adolescents includes understanding the wider contexts of adolescent lives. ACEs have been found to have lifelong impacts on health and behaviour unless effectively addressed. The more professionals are aware of ACEs and become informed about the impact of trauma, the more they can show empathy and identify and refer children and adolescents to support services when the trauma is identified.



Trauma-Informed approach

Adopting a trauma-informed approach prevents pathologising people displaying certain behaviours. It prevents treating people as psychologically abnormal or seeing a symptom or behaviour as indicative of disease or disorder. Instead, professionals can be curious as to what has happened to them, enabling a kinder, more compassionate approach.

Behaviour

Adverse behaviours often seen are a coping and protection mechanism gone awry. They are a reflection of strategies people have developed whilst living with adversity. With an increased knowledge about ACEs and a greater understanding of a person's behaviours, as well as informing and educating individuals about the physical and emotional impact they feel, professionals can enable them to develop understanding and resilience, and so empower changes that are health affirming, rather than health damaging.

Behaviours through a trauma informed lens

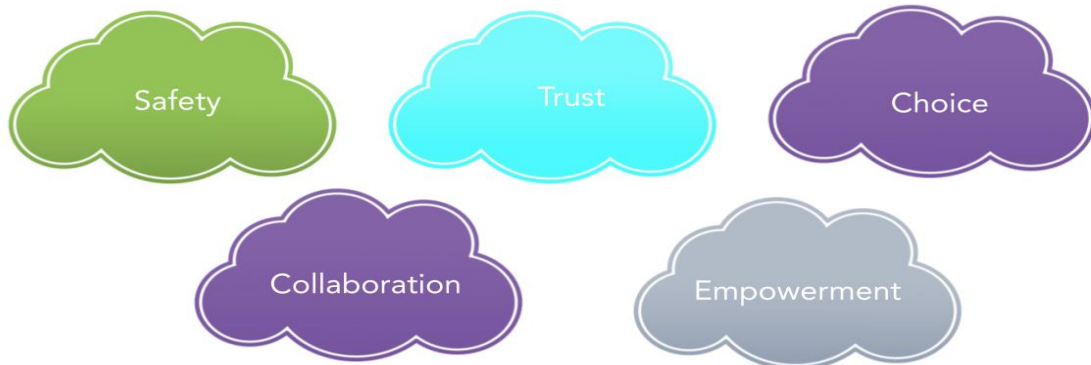
Manipulative	Getting needs met in ways that have worked in the past. Doing whatever is necessary to survive
Lazy	Overwhelmed. Lacking the skills to make decisions about what to do first or to organise
Resistant	Mistrustful of others due to history of being hurt by others. Scared to make progress and then lose everything
Unmotivated	Depressed. Fearful. Overwhelmed. "Frozen".
Disrespectful	Feeling threatened, unsafe, out of control
Attention - Seeking	Feeling disconnected, alone or unheard by others. Looking for connections.

A workforce that can recognise where an individual may be affected by trauma can adapt practices accordingly, in order to minimise distress and maximise trust. Firstly, it supports the recovery of those affected by trauma, empowering them, and providing them with a different experience of relationships - one in which they are offered safety rather than threat, choice rather than control, collaboration rather than coercion and trust rather than betrayal. Each encounter provides an opportunity to reverse the association between trauma and relationships and is an important part of recovery. Secondly, it minimises the barriers to receiving care, support, and interventions to those affected by trauma when memories of past trauma are triggered by multi-agency interventions or interactions with staff.

There are **five principles of trauma-informed practice** that communities and organisations can adopt:

1. **Safety** - making sure you meet somewhere they are comfortable with.
2. **Trustworthiness** - demonstrating you can be trusted every time you meet them – being on time, being prepared, ringing them if you are going to be late.
3. **Collaboration** - involve them in their own life plans, negotiate do not prescribe.
4. **Connectedness** - relationships heal through relationships. Be genuine with them, encourage connecting to the community.
5. **Empowerment** - this might feel strange to the individual, but the steps above will facilitate this – they might start challenging you!

Underpinning Principles



Resilience

Resilience is often described as a seesaw or a scale, where protective factors on one side counterbalance the negative outcomes on the other. Building resilience can be done through promoting these protective factors such as relationships, community support and coping skills. Research has found that having a relationship with at least one trusted adult, such as a parent, sibling, wider family network or professionals, can provide the buffering needed to overcome the effects of ACEs and toxic stress.

Not showing emotion is not the same as managing well or being resilient. Professionals will often encounter a child or their family member when the child is vulnerable to harm. These interactions present crucial opportunities for protection. Responding to these opportunities requires the ability to recognise (or see the signs of) vulnerabilities and potential or actual risks of harm, whilst maintaining an open stance of professional curiosity (or enquiring deeper) and understanding one's own responsibility and knowing how and when to act.

Individuals need to be curious about the behaviour of clients and frame that curiosity in rephrasing questions, making them supportive and trauma informed.

Vicarious trauma

Vicarious trauma is a process of change resulting from empathetic engagement with trauma survivors. Anyone who engages empathetically with survivors of traumatic incidents, torture, and material relating to their trauma, is potentially affected, including doctors and other health professionals.

Common signs of vicarious trauma and strategies for coping are available on the [British Medical Association website](#).

Additional Resources and Information

[Adverse Childhood Experiences \(ACEs\) – YouTube](#) - Adverse Childhood Experiences (ACES) Welsh Public Health Videos.

[Trauma Informed Practice and Adverse Childhood Experiences – Safe4Me](#) - Trauma Informed Directory.

[Resources \(beaconhouse.org.uk\)](#) - Trauma Informed resources and training.

[British Medical Association](#) - Vicarious trauma: signs and strategies for coping.

[Home - Trauma-Informed Hampshire, Portsmouth, Southampton & Isle of Wight - Community of Practice - Knowledge Hub \(khub.net\)](#) - Community of Trauma Informed Practice. Register for free.

[Trauma Informed Schools UK](#) - Provides appropriate training for schools, communities, and organisations so that they become trauma informed.