



Adverse Childhood Experiences (ACEs)

Everyone goes through stress as a child – failing at something we cared about, having to move to a new house or change school, or losing a friend or pet. These experiences help us grow and become resilient.

But adverse childhood experiences are not something a child can just bounce back from. They are too overwhelming and scary, or they are situations that see a child lacking any real support.

Adverse Childhood Experiences (ACE) refer to some of the most intensive and frequently occurring sources of stress that children may suffer early in life.

When children are exposed to adverse and stressful experiences, it can have a long-lasting impact on their ability to think, interact with others and on their learning.

It has been shown that considerable and prolonged stress in childhood has life-long consequences for a person's health and well-being, with negative behaviours often being used unconsciously as protective solutions to unrecognised problems dating back to childhood.

What is an Adverse Childhood Experience (ACE)?

The term **ACE** is used to describe a wide range of stressful or traumatic experiences that children can be exposed to whilst growing up. ACEs range from experiences that directly harm a child (such as suffering physical, verbal or sexual abuse, and physical or emotional neglect) to those that affect the environment in which a child grows up (including parental separation, domestic violence, mental illness, alcohol abuse, drug use or incarceration).

The [Commons Select Committee report: Evidence-based early years intervention](#) published in November 2018 cited that whilst there is no universally agreed definition of an adverse childhood experience (ACE) studies addressing the issue have mostly converged on a similar set of experiences falling under this term and listed the following experiences:

- verbal abuse
- physical abuse
- sexual abuse
- physical neglect
- emotional neglect
- parental separation

- household mental illness
- household domestic violence
- household alcohol abuse
- household drug abuse
- incarceration of a household member

The Science behind ACEs

When exposed to stressful situations, the ‘fight, flight or freeze’ response floods the brain with corticotrophin-releasing hormones (CRH), which usually forms part of a normal and protective response that subsides once the stressful situation passes.

However, when repeatedly exposed to ACEs, CRH is continually produced by the brain, which results in a child remaining permanently in this heightened state of alert and unable to return to their natural relaxed and recovered state.

Consequently, children and young people who are exposed to ACEs have increased – and sustained – levels of stress. In this heightened neurological state, a young person is unable to think rationally and it is physiologically impossible for them to learn.

ACEs can have a negative impact on development in childhood which in turn can give rise to harmful behaviours, social issues and health problems in adulthood. There is now a great deal of research demonstrating that ACEs can negatively affect lifelong mental and physical health by disrupting brain and organ development and by damaging the body’s system for defending against diseases. The more ACEs a child experiences, the greater the chance of health and/or social problems in later life.

ACEs research shows that there is a strong correlation between ACEs and poor physical and mental health, chronic disease (such as type II diabetes, chronic obstructive pulmonary disease; heart disease; cancer), increased levels of violence, and lower academic success both in childhood and adulthood.

Full details can be found on the trailblazer website at [original ACEs study](#)

Prevalence of ACEs

It is more common to have a few or several ACEs rather than just one. Over 12% of participants in the original US study scored four or higher.

UK studies showed:

- Wales – almost 50% experienced 1 ACE and 14% experienced 4 or more
- England – almost 50% experienced 1 ACE and over 8% 4 or more
- Scotland does not have an ACE survey but it is proposed a similar prevalence of ACEs can be assumed.

The evidence for the [Commons Select Committee report](#) cited:

- 50% of Welsh adults had experienced at least one ACE
- 47% of English adults had experienced at least one ACE
- Scottish Public Health estimated that prevalence in Scotland would be at least as high.

The **Children's Commissioner's Office** estimated at least 690,000 children aged 0–5 in England live in a household with an adult that experienced domestic violence and abuse, substance misuse or mental health issues.

ACEs and Health Inequalities

A **UK study suggests** those with 4+ACEs are:

- 2x more likely to have a poor diet
- 2 x more likely to binge drink
- 3 x more likely to smoke
- 5 x more likely to have sex under 16 years
- 6 x more likely to have been pregnant or got someone accidentally pregnant under 18
- 7 x more likely to be involved in recent violence
- 11 x more likely to have been incarcerated
- 11 x more likely to have used heroin or crack

Can ACEs be prevented?

ACEs are a primary example of the complex issues the multi-agency safeguarding workforce often faces. The negative effects of ACEs are felt throughout the community and can affect people of all backgrounds.

Early intervention and collaborative working are essential to reducing the impact of ACEs. Early intervention refers to taking action to resolve problems as soon as possible before they become more difficult to reverse.

The **Select Committee report** of November 2018 recommended early intervention in relation to childhood adversity and trauma, to tackle the potential long-term problems that those who encounter such experiences are more likely to encounter; and a new adversity-targeted early intervention strategy.

- Read the full report at publications.parliament.uk/cm201719

Stable, nurturing adult-child relationships and environments help children develop strong cognitive and emotional skills and the resilience required to flourish as adults. By encouraging such relationships ACEs can be prevented, even in difficult circumstances, and it is crucial to support and nurture children and young people as they develop and grow.

Tackling ACEs

Preventing ACEs should be seen within the wider context of tackling societal inequalities. While ACEs are found across the population, there is more risk of experiencing ACEs in areas of higher deprivation.

ACEs have been found to have lifelong impacts on health and behaviour and they are relevant to all sectors and involve all communities. Everyone has a part to play in preventing adversity and raising awareness of ACEs. Resilient communities have an important role in action on ACEs.

Approaches and initiatives that can be developed include:

- raising awareness of ACEs
- reporting and recording ACEs into specific public health contracts (eg for sexual health and substance misuse)
- bringing ACEs into Early Action Programmes
- train staff to be able to routinely enquire about ACEs
- support local schools to be ACE-Aware and ACE-informed
- support social movements around ACEs.

Offering Support

Although the effects of ACEs can last a lifetime, they don't have to. By getting support, young people can both reduce the impact of ACEs on their own life and break the cycle to prevent ACEs occurring in the next generation.

This support can come from something as simple as a chat with a friend or family member, from a GP, or through one of the local and national organisations that can help recognise, work through and reverse the impact of ACEs.

Additional Information and Resources



ACEs 7 min
briefing.pdf



Adverse Childhood
Experience Pyramid.j



ACEs
infographics.pdf



The Little Book of
ACEs.pdf



preventing and
healing ACEs.pdf



Understanding
ACEs - 2.pdf



understanding
ACEs - 1.pdf



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TED talks

Paediatrician Nadine Burke Harris explains that the repeated stress of abuse, neglect and parents struggling with mental health or substance abuse issues has real, tangible effects on

the development of the brain. [www.ted.com/talks/nadine burke harris how childhood trauma affects health across a lifetime](https://www.ted.com/talks/nadine_burke_harris_how_childhood_trauma_affects_health_across_a_lifetime) (approx. 16 minutes)

ACEs e-learning - <https://www.acesonlinelearning.com/>

Practice Guidance Presentation - <https://www.kirkleessafeguardingchildren.co.uk/safeguarding-2/safeguarding-processes-and-systems/multi-agency-training/practice-guidance-presentations/>

Kirklees Safeguarding Children Partnership Website - <https://www.kirkleessafeguardingchildren.co.uk/safeguarding-2/different-types-of-abuse/adverse-childhood-experiences-aces/>

ACE Studies

Routine Enquiry About Adversity in Childhood (REACH): pathfinder study 2018

REACH was implemented across a large multi-site general practice in the North West of England to consider the feasibility and acceptability of ACE enquiry in general practice from both the patient and the practitioner perspective and provides some initial insight into the potential impact of ACE enquiry on service delivery and patient health outcomes.

Find the report at www.aces.me.uk/REACH_Evaluation_Report.pdf

Routine Enquiry About Adversity in Childhood (REACH): implementation pilot evaluation May 2018

The Department of Health and Social Care asked Lancashire Care Foundation Trust to develop an implementation pack to support services in developing, implementing and embedding routine enquiry about adversity in childhood. The implementation pack was piloted by 3 services in north-west England.

The final report is published at www.gov.uk/routine-enquiry-about-adverse-childhood-experiences-implementation-pack-evaluation

Original US study

ACEs grew out of a large-scale American public health research study, the Adverse Childhood Experiences Study (ACE study). The idea for which was triggered when a doctor running an obesity programme discovered that most of their clients had suffered childhood sexual abuse.

The original ACEs study, conducted in the USA, found that around two thirds (64%) of the 17,000 individuals included in the study reported at least one ACE, with over a quarter (26%)

suffering physical abuse and a fifth experiencing some form of sexual abuse. Around one in eight individuals (13%) had experienced four or more ACEs. The study found the direct impact on a number of health issues, such as addiction, mental health, diabetes, violence for those people who had experienced childhood adversity.

Felitti, M. D., Anda, R. F., Nordenberg, M. D. et al (1998) 'Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults: The Adverse Childhood Experiences (ACE) Study' American Journal of Preventative Medicine. 14.

More detailed information about the study can be found at www.cdc.gov/violenceprevention/childabuseandneglect/cestudy/about.html or sourced at [www.ajpmonline.org/article/S0749-3797\(98\)00017-8/abstract](http://www.ajpmonline.org/article/S0749-3797(98)00017-8/abstract)