A TRAINING AID TO

Building Resilience

SUPPORTING THE EDUCATION OF ADVERSE CHILDHOOD EXPERIENCES AND THE NEED FOR RESILIENCE

Please use this as inspiration to create your own resources, start discussions, change conversations and educate and train our community on ACEs and it's essential partner, Resilience.

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What is classed as an Adverse Childhood Experience?

- **Emotional Abuse:** A parent or other adult in the household who often or very often... swears at the child, insults the child, puts the child down or make their child feel humiliated or acts in a way that the child is afraid they may be physically hurt.

- **Physical Abuse:** A parent or other adult in the household often or very often... pushes, grabs, slaps, or throws something at the child or ever hits the child so hard that marks are made or the child is injured.

- **Sexual Abuse:** An adult or person touches or fondles this child or has the child touch their body in a sexual way? An attempt to have or have oral, anal, or vaginal intercourse with the child?

- **Emotional Neglect:** The child often or very often feels that ... no one in their family loves them or thinks they are important or special? Their family doesn’t look out for each other, feel close to each other, or support each other?

- **Physical Neglect:** The child often or very often feels that ... they don’t have enough to eat, have to wear dirty clothes, and has no one to protect them or their parents are too drunk or high to take care of them or to take them to the doctor if they needed it?

- **Adult Relationships:** Are the child’s parents separated or divorced?

- **Spousal Abuse:** Is the child’s mother/father or stepmother/father: often or very often pushed, grabbed, slapped, or has something thrown at her/him? Or sometimes, often, or very often kicked, bitten, hit with a fist, or hit with something hard? Or ever repeatedly hit over at least a few minutes or threatened with a gun or knife?

- **Substance Abuse:** Does the child live with anyone who is a problem drinker, alcoholic, or who uses street drugs?

- **Mental Illness:** Is a household member depressed, mentally ill, or has a household member attempted suicide?

- **Incarceration:** Has a household member gone to prison?

**Reflection Points**

- As an adult, what is the impact on your personal/professional life if you have ACEs?
- Would the community you live and/or work in, consider all of these ACEs?
- Who needs to know that these are Adverse Childhood Experiences?
- How would you communicate what ACEs are to a child?
Adverse Childhood Experience Studies

In 2015, Wales carried out an ACE study on 2028 people. They asked about these stressful experiences that occurred during childhood. The results were:

- Verbal Abuse 23%
- Physical abuse 17%
- Sexual abuse 10%
- Parental Separation 20%
- Domestic Violence 16%
- Mental Illness 14%
- Alcohol Abuse 14%
- Drug Use 5%
- Incarceration 5%

Within this study, they found people who experienced 4 or more Adverse Childhood Experiences were:

- 4 times more likely: High risk drinker
- 6 times more likely: Unintended Teenage Pregnancy
- 6 times more likely: Smoke e-cigarettes or tobacco
- 6 times more likely: Under-age sex
- 11 times more likely: Smoked cannabis
- 14 times more likely: Victim of violence in last 12 months
- 15 times more likely: Committed violence in last 12 months
- 16 times more likely: Used crack cocaine or heroin
- 20 times more likely: Been incarcerated at any point

Reflection Points
- Can you see this pattern in your own professional experiences?
- Reflect on your own awareness and perception of what has happened to a child before they came into your life and/or what is happening to them now?
- Who needs to see this research?
The original study was carried out in America. **17,000 patients were asked about ACEs** and their later emotional, behavioural and health outcomes (Andra et al 2006). The results, similar to our UK study, shocked doctors into taking action against Adverse Childhood Experiences. Information on the original study can be found here: https://www.cdc.gov/violenceprevention/acestudy/about.html

**The Bottom Line:**
The evidence shows there is a stark dose-response relationship between the number of ACEs a person experiences, and their increased risk of mental health, physical health and anti-social behaviours. The patterns are the same across all socio-economic groups (70% are college educated).

Adverse Childhood Experiences are not confined to the under privileged – they are all around us.

Bad stuff is common, it happens to everybody.
What is Resilience?

Now we know that bad stuff happens to everybody, we need to build a child’s resilience, but they aren’t born with it, we have to build it.

Resilience is being able to bounce back and stay grounded after bad stuff happens and it is vital for every child to have it. Resilience supports healthy development and learning and significantly improves health outcomes in later life.

When Building Resilience:

Consider the child AND the parent.

A child’s greatest resource is a safe, resilient and loving adult so it is important to reflect on what you are also doing as/for a parent.

Reflection Points
- What resource could you make to show adults or children how Resilience develops in children?
- What do you currently have in place that is designed to build ‘Resilience’ in children and their parents? Is it obvious or hidden?
Educate

Working together as a community is more effective (and less tiring) than doing it alone.

The Power of Parents:
- Use this training aid to educate the people in your child’s world who they regularly come into contact with, (Family, Teachers, School Governors, GP, Health Visitor etc.,) on ACEs and building resilience.
- Get Heard: Apply polite pressure to your GP, Local Authority, Police, MP, Schools, Churches etc., to get educated in ACEs and how to build community resilience. What do they know about Adverse Childhood Experiences? Have they seen the Welsh study?

The Power of Professionals:
- Educate your families and their children using ideas inspired by this training aid
- Organise ‘In-Service Training’ inspired by this training aid, talk to colleagues, share your knowledge. Join together and form an ACE task force. Organize or request training for your work place which delves deeper into toxic stress and the repair of early trauma.
- Arrange a screening of Resilience, invite the community - other companies, organizations, social enterprises, local authorities, schools, prisons etc.

Reflection Points
- What can you turn this training aid into? A PowerPoint presentation? Interactive resources? Online program? A Resilience tool box?
- Who needs to know, who can best help you share this message?
A Safe Base

A child and parent/carer needs a safe base in home, school and in the community. How are you teaching them that they should have:

**Physical Safety:** An environment where they are safe from being physically hurt. For example, where no-one will kick, hit, shake, drown or burn or deliberately pretends a child is ill or purposefully makes them ill.

**Emotional Safety:** An environment where they are safe from being emotionally hurt in any way. For example, shaming, teasing, taunting, threatening, isolating, ignoring, inappropriate expectations or silencing.

**Social Safety:** An environment where they can be taught how to make positive and meaningful relationships with other people. For example, key adults model respectful relationships with other parents, colleagues & professionals and the child has opportunities to meet and socialize with their peers and a school environment where relationships are prioritized.

**Cultural Safety:** An environment where their background and experiences are respected and acknowledge as valid and important. For example, they are treated with respect, kindness and curiosity. Their history and culture is considered when making decisions about the child.

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**Reflection Points**
- How can this information be safely communicated to the children and young people you work/live with? Consider the culture, community and family dynamics.
- What do you have in your local area to support your child or young person if they share something with you that results in safeguarding concerns?
Connection

A child/parent needs at least one person in their life who understands that the child is doing the best they can given his or her experience.

Do they have the opportunity to build relationships with key adults by:
- The key person/people always being there and never giving up?
- Being listened to, feeling heard?
- Receiving a consistent positive response?
- Experiencing kind humor?
- Being treated with respect?
- Being surrounded by flexible but consistent adults?

Do they have the opportunity to build relationships with their peers by:
- Experiencing adults around them modelling productive communication and positive relationships?
- Attending school: sharing friends, resolving conflicts?
- Giving and receiving peer support?
- Experiencing extra curricular activity/s (excessive amounts may interfere with the key adult relationships)

Do they have the opportunity to build relationships with their community by:
- Being curious about where they live?
- Being exposed to and moving between different cultures within their community?
- Understand the value of serving others in their community?
- Hearing stories of human resilience?

A simple way to check your connection: Does the child know I like them?

Reflection Points
- How can you teach a child what to expect from their relationships?
- What can you do to support a child’s relationship with their key adult, peers and their community?
- How does the key adult and the child currently connect? How can you help?
The Power of Your Relationship. How do you...

Build on a child’s/parent’s individual and unique strengths to give them confidence in their abilities?

Set high but realistic expectations/goals for that individual child/parent so they can learn how to aspire and achieve?

Can you see the best in them so they feel confident and connected in your relationship and about their future?

Do you ‘catch them’ being good and praise qualities instead of achievements so they have hope and persistence?

Treat them as capable human beings so they feel competent and worthwhile and in turn building their self-esteem?

Reflection Points
- Could you take each statement one at a time and think of an action/resource/person that could build and strengthen the child and parent?
- Reflect on how you model each statement to the children/parents you live/work with. What do you do well and how can it be enhanced? What could you improve?
Empathy = Validation = Self Esteem = Emotional Resilience

Empathy is the ability to understand and share the feelings of another without taking it on as your own.

Ask ‘What happened to you?’ instead of ’What’s wrong with you?’

Stop what you're doing, pay attention and listen
Respect the person’s story, no judgement
Be patient, wait until they're finished before speaking
Imagine how you would feel if it was you
Acknowledge the feeling behind the behaviour

Empathy can be easier to do when a child is hurt or sad but empathy is also a powerful tool for challenging behavior. When a decision has resulted in unsafe or undesirable behavior, acknowledging the feelings behind the behavior will make the child feel heard and more open to accepting a consequence to their actions.

Reflection Points
- Do you find empathy easy or tricky?
- What does empathy look like for you when faced with challenging behaviour?
- How can you teach a child and/or their parent empathy? What resources could you make to communicate empathy in different ways?
Problem Solving

Do you allow a child to make safe mistakes?

Pause, take a breath, wonder aloud ‘how would the child fix the problem?’ Questions can help with direction, however, give them the choice and chance to work it out for themselves.

With empathic support from a key adult; failing, conflict resolution, losing or not succeeding, can be empowering and creates a resilient, resourceful and courageous adult.

They will be able to think critically, creatively and reflectively – all by being allowed to make safe mistakes.

Supporting a child through failure contributes to one of the best developmental outcomes you can give that child.

Reflection Points

- What does failure mean to you? Reflecting on this will help you in supporting a child through their own.
- How could you teach a parent about safe mistakes?
- What resources could you make to communicate the importance of failure to a child?
Autonomy

Are they being taught how to make good decisions?
Are they allowed to take responsibility and master appropriate tasks?

Do they know how to repair – do they know how to make a genuine apology? Do they have a key adult model repair?

Can they discover who they are? By developing a core sense of identity, they will refuse to accept negatives beliefs about themselves from others.

Do they have appropriate control over their environment and decision making?

Are they supported in making sense of their world and in understanding the experiences they have had?

Are they allowed to experience ALL feelings not just the good ones?

Is self expression and self reflection encouraged to help them make appropriate choices in the future?

Can they sustain relationships with positive, kind humour?

Reflection Points
- Does the child/young person have a key adult modelling ‘good decisions’ and if not, what or who could be put in place to encourage and support this?
- Take each statement in turn, what resource could you make to communicate them to parents and/or children?
Modelling Behavior

Self Reflection: Do you have any unresolved ACEs that contribute to your reactions as a parent and/or professional? What happened to you?

With this in mind, how do you:

- Problem solve?
- Communicate?
- Show different emotions?
- React when you are triggered?
- Cope when things go wrong?
- Let go of things that can’t be solved?
- Repair your relationships?

It is not just positive behaviours children and young people need to see us modelling. How we convey, react and cope with negative emotions is also modelling behaviour.

Knowing where you go is a first step to staying connected when times are tough.

Reflection Points
- Who can support you to safely reflect on your own ACEs?
- What support/resources/ideas can be put in place to support you once you have worked out what triggers you?
- What resources could you create to help a parent reflect on their own ACEs?
Self-Care

How are you looking after yourself?
- What do you feel guilty about?
- What makes you anxious?
- How do you sleep?
- What do you do to relax?
- What do you do to have fun?
- What do you do for exercise?
- How is your nutrition?

With these questions in mind, are you adequately looking after yourself so you can look after others?

How are you looking after the parent/carer of this child?
- Are their support resources sufficient? Do they ask for help?
- Do they model self care to their children?
- What do you have in place that cares for the parents emotional heath?
- How do you treat the parent/carer of this child?
- Do they know you like them?

How can you actively focus and build upon parental resilience – ultimately this is the most helpful response in preventing and repairing trauma in children and young people.

Reflection Points
- Does the resources you have balance out the demands in your life so self care is possible?
- How could you creatively explore self care with a parent/carer and their child?
- What support is in the local community to support parents/carers with self care?
Challenges

There will always be obstacles, how can we re-frame the issues?

Budgetary Constraints: What can you do with the resources you have? Where would a culture change make the difference? How could existing funds be spent differently? What creative ways of thinking could result in needed change without requiring funds?

It’s hard to explain: Can you use each slide from this presentation as the basis for a visual training resource? Who is the person you are trying to explain it too, how do they learn? Can you change the way you're communicating the information.

I work alone: What can I do independently? How does working alone free me up to spread the message?

I work for a huge company, no-one will listen: Who is the greatest resource? Who can I start with? Who is great at communicating to the rest of the team?

I don’t know what to do: Where can I learn more? Who can I ask for inspiration?

I want to do more: Who can I ask for help? What is my first action?

I have already tried: What worked, what can I build on?

Reflection Points
- What is your biggest challenge when trying to build Resilience in your community? What happens when you reflect on the opposite of this challenge?
- How can you re-frame your biggest challenge into a positive? Who could help you do this?
Useful Links

The Sussex Community Resilience Project:  
https://www.facebook.com/TheSussexCommunityResilienceProject

Inspiration:  

Screening Details: http://dartmouthfilms.com/resilience-screenings-info and http://kpjrfilms.co/resilience/


Developmental Trauma Close Up: http://beaconhouse.org.uk/developmental-trauma/developmental-trauma-close-up/

Repair of Early Trauma: http://beaconhouse.org.uk/developmental-trauma/the-repair-of-early-trauma-a-bottom-up-approach/

Repair of Early Trauma Animation: http://beaconhouse.org.uk/developmental-trauma/animation-the-repair-of-early-trauma/

Free Support Resources: www.innerworldwork.co.uk and http://www.70-30.org.uk/infographics/

Miss Kendra’s List:  
http://www.traumainformedschools.org/programs/misskendraslist.html

Professionals: Adding the ACE questionnaire to your information gathering database will help you to provide a more effective trauma informed response to the families you are working with. The questionnaire and guidelines can be found here:  