



Bradford District
ACEs • Trauma • Resilience

ACEs,
Trauma &
Resilience
Strategy

2021-2024

INTRODUCTION

Vision Statement: Working in partnership with people with lived experience and colleagues from across all sectors and organisations to ensure Bradford is both trauma informed and responsive.

In 2018 [Better Start Bradford](#), Bradford Council and Bradford District and City CCG brought partners together to consider the developing work on Adverse Childhood Experiences (ACEs) across partner organisations and the ACEs hub was established to share good practice and knowledge. In 2019 a health needs assessment (1) was completed by Public Health acknowledging that **ACEs are the single greatest unaddressed public health threat facing our nation today**. The commitment was made to delivering on an ACEs strategy in Bradford.

This strategy explains what we will do to prevent and mitigate ACEs; buffer the impact of ACEs; intervene early and develop services that are trauma informed across Bradford District.

The strategy also provides a framework for local communities and organisations to use as they consider how they can contribute to acting on ACEs. It aims to help people understand how an ACEs informed approach could add value and be built into existing activity, as well as providing a common language for talking about adversity and resilience. It is also intended to be a 'living document' that will evolve over time.

The strategy has been ratified by the Children's System Board and has been presented at the Bradford Safeguarding Partnership (TBC)

PREVALENCE OF ACEs IN

BRADFORD: Why ACEs, Trauma and Resilience should matter to people living and working in Bradford.

A [health needs assessment](#) (HNA) (1) was undertaken in 2019 looking at the prevalence of ACEs in Bradford. The following was the summary to the question 'why are ACEs important to Bradford?'

- Bradford has a young population.
- Bradford's high level of deprivation puts its population at increased risk of ACEs.
- ACEs are a significant contribution to disease burden.
- ACEs are associated with numerous health inequalities.

The recommendations from the HNA were:

1. Make coping with and buffering the effects of ACEs a Bradford district priority.
2. Develop a Bradford ACEs hub with appropriate representatives from the local authority, NHS, West Yorkshire police, CCGs and the local community. The hub would be to lead and co-ordinate the following:
 - Review and evaluate current services working to reduce the impact of ACEs, act on outcomes to improve service quality and share lessons learned.
 - Identify gaps and opportunities in primary, secondary and tertiary prevention approaches to ACEs in Bradford and ensure actions taken to reduce the impact of ACEs are evidence informed.
 - Endeavour to reduce silo working between organisations by improving links and referral pathways in order to maintain efficient use of expertise and resources across the district.
 - Improve local routine data collection on ACEs and seek through our activities a reduction in the number and severity of ACEs in Bradford.
 - Raise awareness of ACEs and their associated health outcomes, as well as resilience factors, in local communities and amongst professionals.
 - Develop a district wide whole system trauma-informed approach to ACEs in consultation with all relevant stakeholders, including children and their caregivers and people with lived experience of adversity and trauma.
3. Consider adaptation of the BACCH/BACAPH “Family friendly framework” for commissioning and delivering services.

The HNA discusses primary prevention, secondary prevention, and tertiary prevention. These domains map well onto the main aims described in this strategy of reducing the impact of ACEs, promoting resilience and developing trauma-informed services and communities.

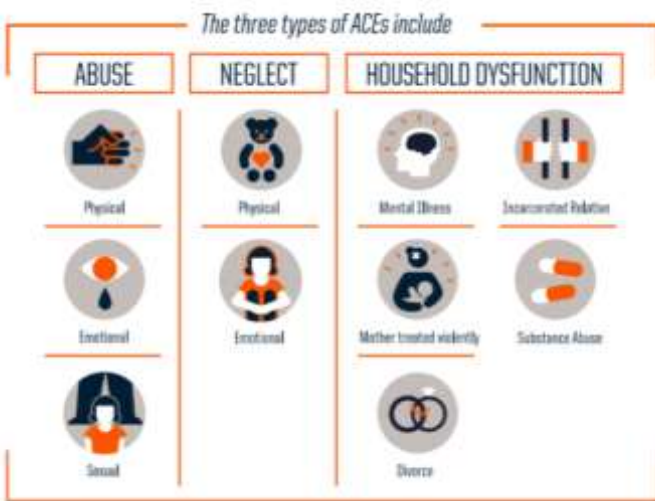
UNDERSTANDING ACES, STRESS, TRAUMA & RESILIENCE

What are Adverse Childhood Experiences?

Definition of ACEs from [Shared Language Paper from Blackpool and Cumbria \(2019\) \(2\)](#):

Adverse Childhood Experiences (ACEs) are stressful or traumatic events that happen in childhood and can affect people as adults. They include events that affect a child or young person directly, such as abuse or neglect. ACEs also include things that affect children indirectly through the environment they live in. This could be living with a parent or caregiver who has poor mental health, where there is domestic abuse, or where parents have divorced or separated. ACEs can be single events, long-term or repeated experiences.

Whilst acknowledged as not exhaustive, the following list of ACEs derived from a systematic review of the effect of childhood adversity is a useful tool. Taken from [Hughes et al 2017 \(3\)](#).



Missing from the list are the impact of adverse environmental factors (such as deprivation, housing insecurity, racism and neighbourhood violence) which are also recognised as having a significant impact on development. This is depicted well in the image below from [Ellis and Dietz 2017 \(4\)](#).



Figure 1 Types of Adverse Childhood Experiences Image courtesy of the Robert Wood Johnson Foundation

Figure 2 .Ellis, W., Dietz, W. BCR Framework Academic Paediatrics (2017)

What is trauma?

A definition of trauma from [Shared Language Paper from Blackpool and Cumbria \(2019\) \(2\)](#):

Trauma is a term for a wider set of experiences or events that can happen at any time of life and includes some of the adversities in childhood known as ACEs. Trauma describes the psychological impact of experiencing or witnessing a physically or emotionally harmful or life-threatening event. It may be a single incident or prolonged or repeating experiences. Trauma can affect people long after the event(s) by causing anxiety, depression, or Post Traumatic Stress Disorder (PTSD). It may also affect the way people relate to others or deal with day-to-day stresses.

What is resilience?

Research shows that some individuals do not experience the negative outcomes often associated with ACEs (5). The capacity to overcome and adjust to the challenges of significant adversity is referred to as resilience.

Resilience is a complex and dynamic developmental process and may comprise biological, psychological, or social factors which help to buffer the impact of stress associated with ACEs. Meins (2017) explains: “Resilience shouldn’t be viewed as an individual trait; rather, it embodies a *process* involving multiple systems – child attributes, family functioning, social relationships, the broader environmental context – at particular points in time.” (6)

[See Theoretical Guidance to ACEs, Trauma and Resilience](#)

What is toxic stress?

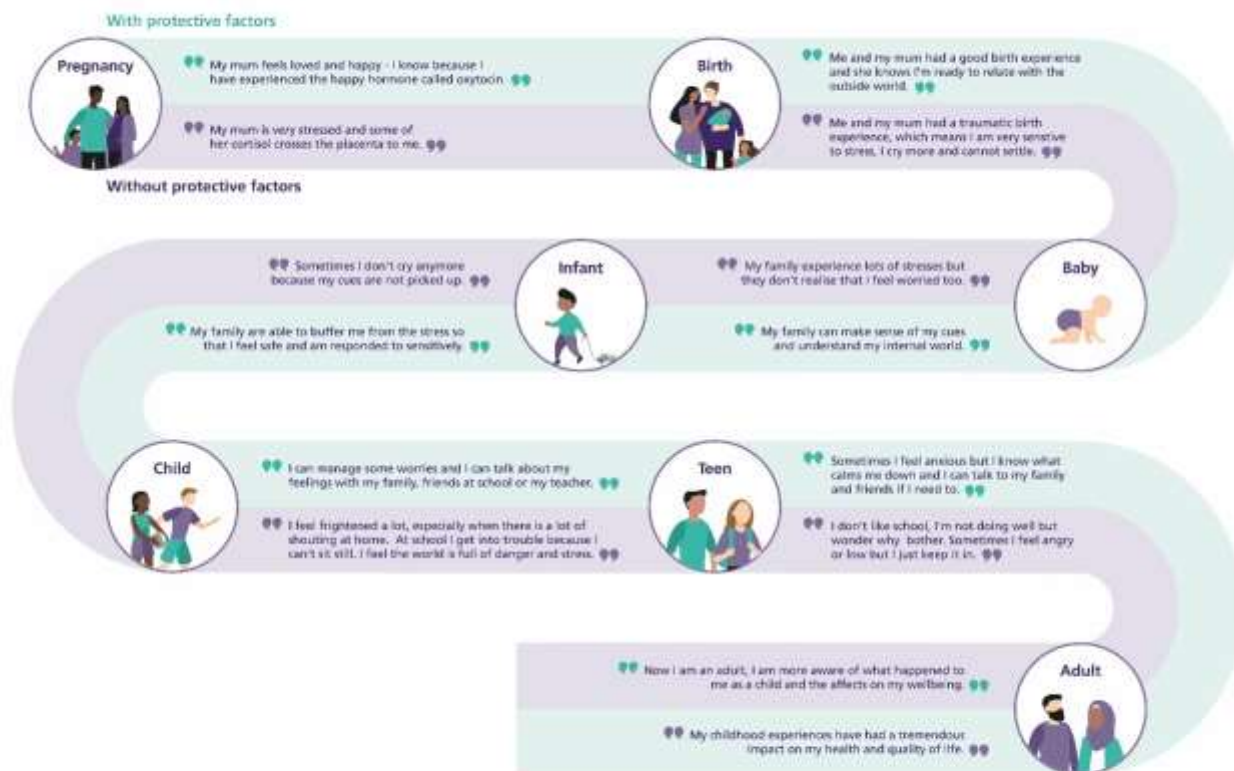
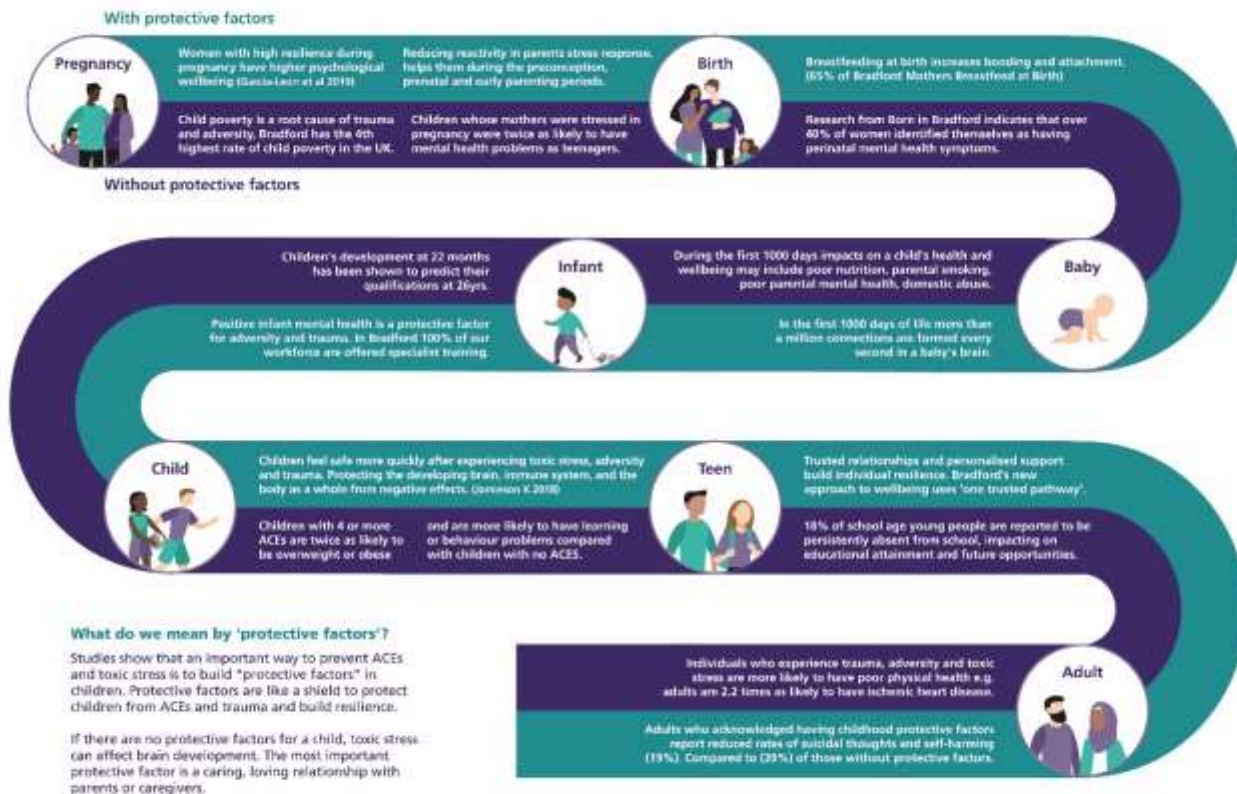
The following definitions have been shared by [Center of Youth Wellness \(7\)](#)

<p>Positive stress response is a normal and essential part of healthy development, characterised by brief increases in heart rate and mild elevations in hormone levels. Such as, first day at school, important exam, or job interview.</p>	<p>Tolerable stress response activates the body’s alert systems to a greater degree as a result of more severe, longer-lasting difficulties, such as the loss of a loved one, a natural disaster, or a frightening injury.</p>	<p>Toxic stress response can occur when a child experiences strong, frequent, and/or prolonged adversity — such as physical or emotional abuse, chronic neglect, caregiver substance abuse or mental illness, exposure to violence, and/or the accumulated burdens of family economic hardship.</p>
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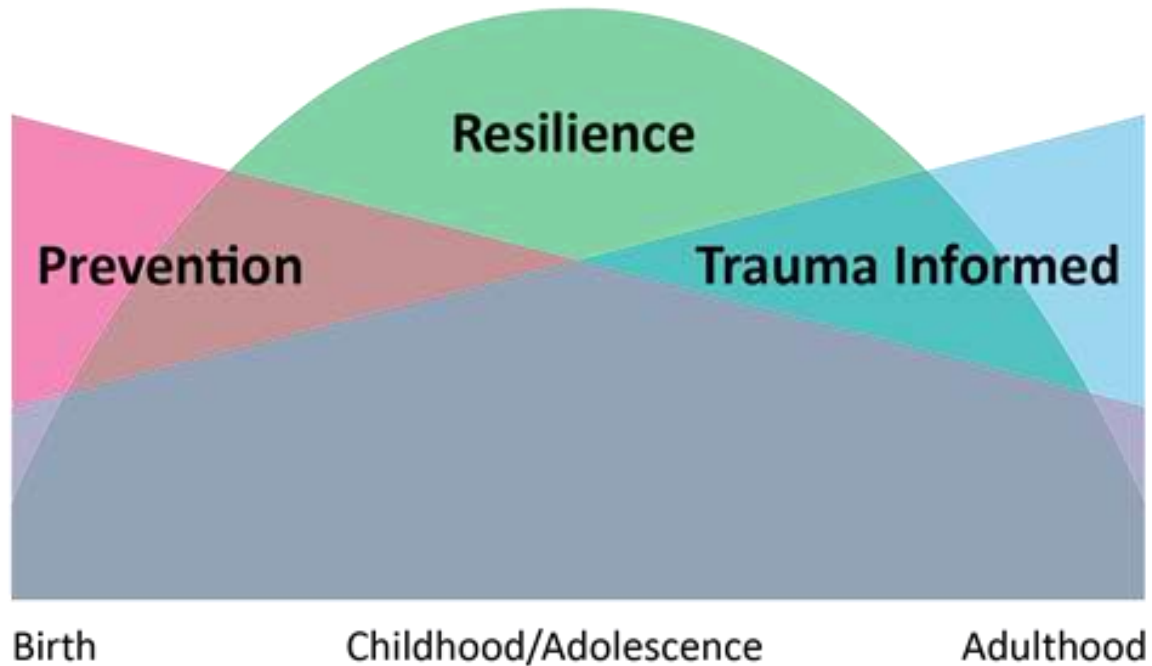


A story of two babies: with and without protective factors

The next two infographics illustrate the impact of social determinants across the lifecourse. With both local and regional statistics we see why there is a need to have a strong focus on prevention, building resilience and trauma-informed practice in this and related strategies.



STRATEGIC AIMS & ASPIRATIONS:



The ACEs strategy has three principle aims for the first 3 years:

1. To reduce the impact of Adverse Childhood Experiences and trauma on the population across the Bradford District.
2. To build resilience against long term harm of adversity and trauma.
3. To raise awareness so that the Bradford population is able to access and receive integrated support from a range of professionals across the lifespan.

Bradford will work to reduce the prevalence of ACEs and buffer the impact of them by intervening early and developing trauma informed services. This will be done in consultation with the wider system, community, including people with lived experience so that we can articulate prioritise in a meaningful way.

We aspire to have:

1. A focus on early intervention and prevention, resilience and adversity.
2. ACE aware and trauma-informed Bradford workforce and community.
3. A workforce that is equipped to adequately support people who have been affected by ACEs.
4. Embed ACE awareness into relevant policies, strategies, and commissioning processes.
5. For all organisations to implement an approved model of restorative supervision to support the health and wellbeing of the workforce.
6. Sharing best practice, learning from each other and being better together.

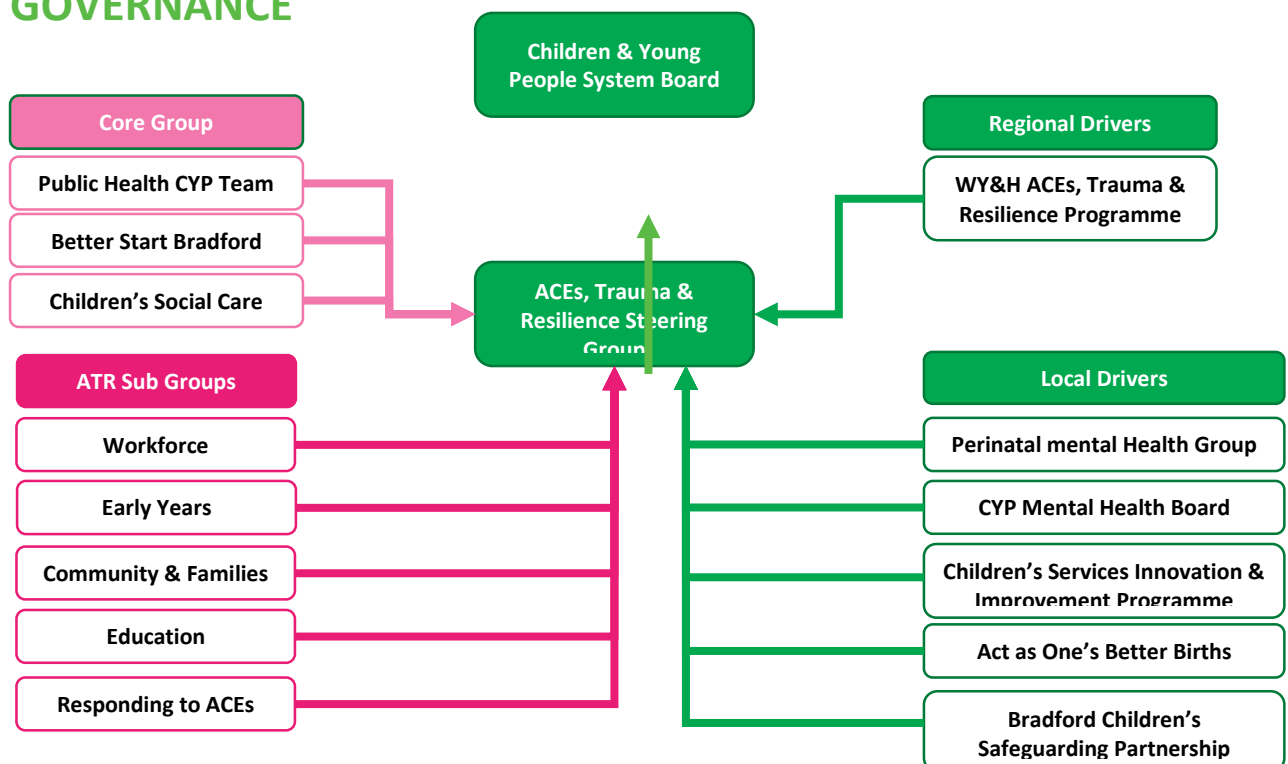
This strategy will remain a live documents and the deliverables will be refined and mobilised by the ACEs, Trauma and Resilience (ATR) steering group and the five sub-groups that have been set up. These are:

- **ATR Aware Workforce**
- **ATR Aware Community**
- **ATR Aware Early Years**
- **ATR Aware Schools**
- **Responding to ACES and Trauma (Life course)**

A key priority for the strategy is to align with and enhance these district existing plans, partnerships and strategies:

- **Prevention and Early Help Strategy**
- **Bradford District Council Plan**
- **Act As One – Healthy minds: children and young people’s wellbeing**
- **Act As One – Better Births**
- **SEND Joint commissioning strategy**
- **Children, Young People and Families Plan 2017-20**
- **Community Safety Partnership**
- **DVSA Strategy**
- **UNICEF Child Friendly Accreditation (voice of children and young person in everything we do throughout the ATR Programme)**

GOVERNANCE



Bibliography

1. **Stevens, Amy.** *Health Needs Assessment of Adverse Childhood Experiences in Bradford.* s.l. : City of Bradford Metropolitan District Council, 2019.
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4. *A New Framework for Addressing Adverse Childhood Experiences: The Building Community Resilience model.* **Ellis, Wendy and Dietz, William.** 7S, s.l. : Academic Paediatrics, 2017, Vol. 17.
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6. **Meins, Elizabeth.** Overrated: The predictive power of attachment. *The Psychologist.* [Online] The British Psychological Society, 2017. <https://thepsychologist.bps.org.uk/volume-30/january-2017/overrated-predictive-power-attachment>.
7. *An Unhealthy Dose of Stress: The Impact of Adverse Childhood Experiences and Toxic Stress on Childhood Health and Development.* s.l. : Center for youth wellness, 2018.
8. **Hughes, Karen, et al.** *Sources of resilience and their moderating relationships with harms from adverse childhood relationships.* Public Health Wales, Bangor University. s.l. : Public Health Wales NHS Trust, 2018.