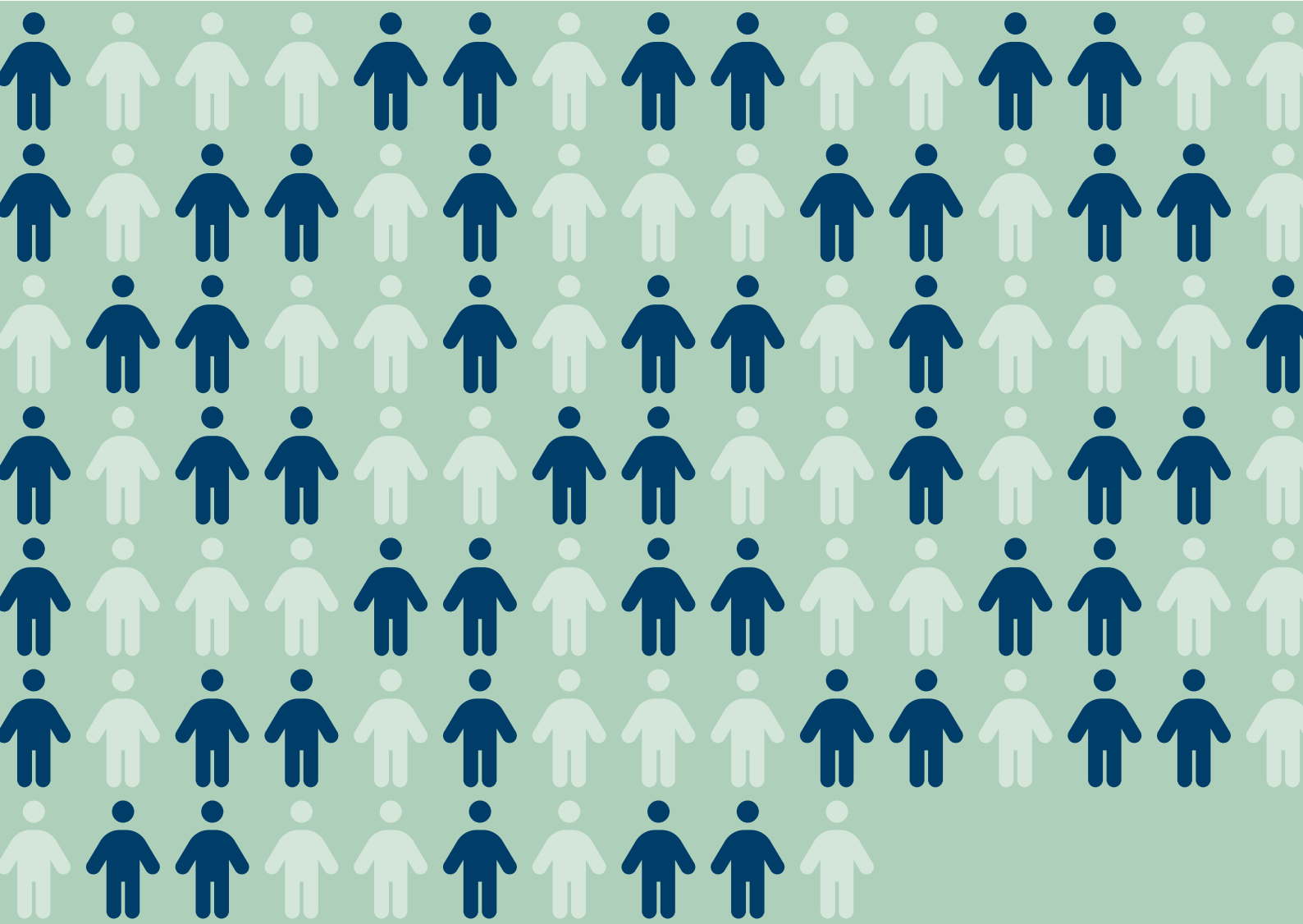


# VOICES IN SPORT

WARREN LARKIN  
ASSOCIATES

SAY SOMETHING IF YOU SEE SOMETHING

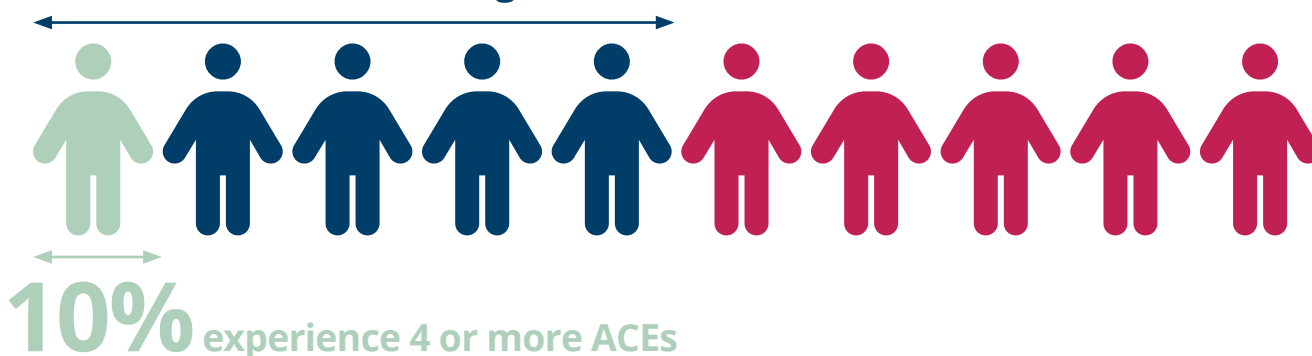


## ADVERSE CHILDHOOD EXPERIENCES (ACES)

are common forms of childhood trauma that at least 50%  
of the population in England experience growing up

# 50%

of people reported experiencing at least 1 ACE before the age of 18



## SUMMARY

**Adverse Childhood Experiences (ACEs) are common forms of childhood trauma. Studies of the population in England and Wales suggest that at least 50% of the population experience growing up. 1 in 10 people experience 4 or more ACEs growing up.**

Exposure to Adverse Childhood Experiences (ACEs) is perhaps the single strongest predictor of poor social outcomes, poor physical health and poor mental health outcomes that we know about.

We also know that positive experiences and activities (including regular sports participation), coping skills, a sense of belonging and safe, trusting, adult relationships can protect children from the impact of ACEs.

Sports clubs and their staff have a unique opportunity to help children affected by ACEs to feel safe, connect with peers and trusted adults, build ways of coping and contribute to their wellbeing.

### WHAT ARE ADVERSE CHILDHOOD EXPERIENCES OR ACEs?

The term 'ACEs' or 'adverse childhood experiences' refers to 10 categories of highly stressful and potentially traumatic life experiences that happen before the age of 18 years. These are:

- 1 Parental mental illness,
- 2 Parental drug misuse,
- 3 Parental alcoholism
- 4 Living with a parent or adult who went to prison or youth offending institution
- 5 Parental divorce or separation
- 6 Exposure to domestic abuse
- 7 Emotional abuse
- 8 Sexual abuse
- 9 Physical abuse
- 10 Neglect

This list of 10 types of childhood adversity has been studied most extensively over the last 25 years. However, it is not an exhaustive list of the highly stressful and potentially traumatic events and circumstances that children can be harmed by. Other examples are, experiencing bullying, living in poverty, peer rejection and isolation, racism, community violence, experience of the care system, living in an unsafe environment, food scarcity and sexual or criminal exploitation to name a few.

## ACES, DEVELOPMENTAL TRAUMA AND TOXIC STRESS

ACEs can also be thought of as 'Developmental Trauma' – This means repeated exposure to traumatic or highly stressful events and circumstances (as listed in the ACE categories) that negatively impact the normal developmental trajectory and milestones of a child's developing brain and body. Being exposed to toxic levels of stress in childhood can have a detrimental impact on social, emotional and physical development, which can have life long-consequences - making it hard for children and young people to feel safe, to cope with social situations, manage relationships, cope with strong emotions and to develop trust and successfully navigate relationships.

## HOW COMMON ARE ACES AND WHY SHOULD SPORTS CLUBS KNOW ABOUT THEM?

**They are very common** - Recent UK studies revealed that around half of people in the UK experience at least 1 ACE, and around 1 in 10 people experience 4 or more ACEs.

**The more ACEs an individual experiences, the worse their outcomes throughout life tend to be** - The risks greatly increase of not doing well at school, not having a job, poor mental health, and low levels of life satisfaction.

**There are powerful links between ACEs and of some of the leading causes of disease and death in adults.**

The English ACEs Study from 2014, showed that people with 4 or more ACEs (compared to people with no ACEs) were:

**6x** more likely to have had or caused an unplanned teenage pregnancy

**7x** more likely to have been involved in violence in the last year

**11x** more likely to have used Crack, Heroin or have been to prison

It is common for a person who experiences one type of abuse or adversity to also experience other ACEs. Research suggests that if a person has one type of ACE, they are:

**87%**

**of people with 1 ACE had 2 or more ACE's**

Bad things that happen to children don't often happen in isolation.

Felitti, V.J., Anda, R.F., Nordenberg, D., Williamson, D.F., Spitz, A.M., Edwards, V., Koss, M. and Marks, J. (1998) 'Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults' American Journal of Preventive Medicine 14(4): 245-258.

## EXPERIENCING ACES DOES NOT ALWAYS LEAD TO POORER OUTCOMES.

### RESILIENCE HAS BEEN DESCRIBED AS THE ANTIDOTE TO ADVERSITY

Just because a person has experienced ACEs in childhood, does not mean that they will always experience the poor outcomes later in life.

Resilience factors can protect us from the harmful impact of childhood trauma. For example, people who experienced ACEs in childhood, but also had at least one safe positive adult relationship in their life, often cope better with ACEs. Regular sports participation also seems to be protective. People with more resilience factors tend to have fewer negative outcomes later in life.

Resilience has been defined as, 'the process of adapting well in the face of adversity, trauma, tragedy, threats or significant sources of stress.' Biological, psychological, social and cultural factors interact with one another to determine how a person copes with stressful life events and our resilience levels can change over time and according to what is happening in our lives.

Sports clubs and the adults that run them can play an important role in the resilience of children and young people. You have a unique opportunity to help children affected by ACEs to feel safe, connect with peers and trusted adults, build ways of coping and contribute to their wellbeing. Having positive adult relationships has been shown to have a protective effect, buffering some of the toxic effects of adverse childhood experiences for children and young people.

You might be the one safe adult relationship in a young person's life and their time at the club/ class might be

the most important resilience factor they have. Each interaction with a child or young person is an opportunity to contribute to their wellbeing and resilience or could further add to their stress and burden. Positive relationships really are the key to recovery and resilience.



### WHAT ARE THE SIGNS I CAN LOOK OUT FOR?

Children and young people who have experienced trauma can display some or all of the following:

- 1 Distressing mental intrusions and memories of the event,
- 2 A strong desire to avoid reminders of what happened and
- 3 Appear highly stressed, constantly on the lookout for danger and threat and
- 4 Demonstrate a heightened stress response (struggling to relax, problems sleeping, being easily startled, having outbursts of anger or aggression and irritability).
- 5 Difficulty navigating relationships, have
- 6 Reduced concentration, and may experience
- 7 Physical symptoms like headaches, nausea and increased blood pressure and heart rate, tiredness, muscle tension, joint pain, back pain or other types of pain.

<https://ncsacw.acf.hhs.gov/>  
<http://www.apa.org/helpcenter/road-resilience.aspx>  
<https://advising.unc.edu/wp-content/uploads/sites/341/2020/07/The-Road-to-Resiliency.pdf>

## BEHAVIOUR AS COMMUNICATION

Sometimes a child or young person may show the people around them that they are, suffering, scared, confused and in pain, by behaving in ways that are out of character, challenging or risky.



For example, sometimes people try to cope by self-medicating with alcohol or drugs.



They might be so scared and feel so unsafe that they behave in an aggressive or violent way to keep people away from them – sometimes referred to as ‘defensive aggression’.



Sometimes a child or young person may appear withdrawn, cut-off emotionally or their mood may appear flat, depressed or changeable.



Going missing or running away can indicate that a child or young person is trying to escape adversity in their home situation.



Children who are experiencing adversity might display knowledge of adult issues inappropriate for their age or may make a particular effort to wear clothing which covers up their body. All of which are a normal adaptation to a terrible or overwhelming event or circumstances.

## SURVIVAL MODE & THE ROLE OF ADULTS IN CREATING SAFETY

**Often these reactions & behaviours** – which are a normal adaptation to a terrible or overwhelming event or events – **can leave coaches, family members and professionals confused, upset and worried about a child or young person.**

**It is important to work really hard to maintain your relationship with the child or young person at this time as they are showing you, through their words, behaviour and demeanour that they need your help.** It is often those children and young people that push us away challenge us the most are in the greatest need of our help and compassion.

**Next time you are working with a child whose behaviour is challenging or concerning** take time to reflect on the following prompts:

**What has happened to this child for them to behave in this way in this situation?**

Or

**What situation or circumstance have they had to survive in order for this (behaviour) to be how they cope?**

Or

**This is not about me, this child is experiencing their stress response, so what has made them feel threatened or unsafe? 'What can I do to help them feel safe again?'**

Or maybe

**I need to help this child, feel calm and safe again before they can think clearly and then together we can make sense of what just happened. Problem solving and solutions can't be worked through while someone is highly stressed, upset or angry.**

## WORKING IN A TRAUMA INFORMED WAY

Trauma informed working means being aware of how common trauma and childhood adversity are in the population and recognising that in every sports club, there will potentially be around 50% of the group, class or team who have experienced (or are currently experiencing) at least one form of adverse childhood experience and 1 in 10 will have experienced (or be currently experiencing) 4 or more ACEs.

Sometimes, trauma informed practice is characterized by saying that it is a move from asking, "what's wrong with you?", to "what's happened to you?"

A trauma informed approach has been defined as:

'A program, organisation, or system that is trauma-informed **realises** the widespread impact of trauma and understands potential paths for recovery; **recognises** the signs and symptoms of trauma in clients, families, staff, and others involved with the system; and **responds** by fully integrating knowledge about trauma into policies, procedures, and practices, and seeks to actively **resist re-traumatisation.**'

**Studies indicate that it is important to create the conditions for children and young people to tell us when there is something bad happening to them.**



### ACCORDING TO RESEARCH THERE ARE A NUMBER OF FACTORS THAT CAN HELP CHILDREN DISCLOSE TRAUMA AND ABUSE:

- 1 Access to someone they can trust
- 2 Realising what is happening to them is not normal/ok (teaching children about their rights from an early age may help with this)
- 3 Inability to cope with the emotional distress they feel
- 4 Wanting help/protection
- 5 Expecting to be believed
- 6 Being asked

**By building safe trusting relationships with children and young people, by noticing and being curious about their distress, behaviour or demeanor and by initiating conversations about their lives, circumstances and wellbeing, we create the conditions for disclosures and earlier identification of past and current harms.**

### ADOPT A POSITION OF UNIVERSAL PRECAUTIONS

that is to assume everyone who you come into contact within your club will have been affected by trauma and adversity. There is no downside to adopting this stance because statistically most people do experience traumatic life events or childhood adversity, and any adaptations that are made in line with trauma informed principles will benefit all stakeholders, not just those impacted by ACEs and trauma.

# VOICES IN SPORT

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## TAKE HOME MESSAGES



ACES are common and will affect half of the children in your sports club,



Knowing the signs and think of behaviour as a form of communication,



Positive childhood experiences, including safe adult relationships and participation in sport can contribute to resilience and be protective



You have a unique opportunity to help children affected by ACEs to feel safe, connect with peers and trusted adults, build ways of coping and contribute to their resilience.



If you have any concerns ask for help from your Club Safeguarding Officer or Local Authority Duty Social Worker. You can contact the NSPCC Helpline on 0808 800 5000.



If you believe a child or young person is in immediate danger or its unsafe for them to leave/go home - please call 999 and ask for Police assistance.



To access the complete range of resources please scan the QR code or visit:  
[nwgnetwork.org/voices-in-sport](http://nwgnetwork.org/voices-in-sport)