Nurture, Adverse Childhood Experiences and Trauma informed practice: Making the links between these approaches
Introduction/context

Scottish education has a key focus on wellbeing and relationship-based approaches to support children and young people. An understanding of how early experiences impact on children and young people’s behaviour and the importance of relationships in shaping later outcomes is also the foundation which underpins much of the Scottish policy landscape and curriculum. Getting it Right for Every Child (GIRFEC) recognises that children and young people will have different experiences in their lives, but that every child and young person has the right to expect appropriate support from adults to allow them to grow and develop and reach their full potential. This is now enshrined in legislation in the Children and Young Person’s (Scotland) Act (2014).

The Adverse Childhood Experiences (ACEs) study which was initially published in the USA and later replicated in both England and Wales has recently had a renewed focus both internationally and within Scotland, in part due to the release of the film ‘Resilience: The Biology of Stress and the Science of Hope. One of the core messages which has been emphasised within this research is the correlation between the number of adverse childhood experiences an individual goes through and poor health and social outcomes in adulthood. It has long been recognised that stressful events occurring in childhood can impact profoundly on children and young people’s development and outcomes including the capacity to learn and participate in school life. The increased interest in ACEs provides an opportunity to re-focus on the importance of childhood development. One of the key theoretical frameworks which emphasises the importance of early experiences and particularly the bond that an infant has with a caregiver is attachment theory. Attachment theory forms a core part of a nurturing approach. At the heart of a nurturing approach is a focus on wellbeing and relationships and a drive to support the growth and development of children and young people particularly those who may have experienced early adversity or trauma. Trauma informed approaches aim to promote an understanding of adversity and trauma amongst those working with children and young people and the wider population.

This paper will bring together the key components of nurturing, ACEs and trauma informed approaches before considering what commonalities and good practice exists across all approaches. It will also explore some of the challenges of embedding these approaches within an educational context. This paper is intended mainly for education practitioners however it may also be useful for a wider audience.

A nurturing approach

A nurturing approach can encompass both targeted support, eg. Nurture Groups and universal support as in a whole school approach. Nurture Groups were initially developed as an approach to supporting children who were believed to have missed some key early experiences which impacted on their ability to settle and respond to school. They were created by Marjory Boxall, an Educational Psychologist, in the 1960s in an inner city London borough as a means of bridging the gap between school and home and to help recreate these missed early experiences through nurturing and supportive relationships. Over time, the original Nurture Group concept has extended into a whole school approach which promotes nurturing and supportive relationships. A nurturing approach is based largely on the theory of attachment; an understanding of the impact of early adversity and how this can lead to ‘toxic stress’. Whilst a nurturing approach is based on an understanding of children's development, it also takes account of the current advances in neuroscience and brain development. The theory of attachment originally stems from work by John Bowlby in the 1950s and later by Mary Ainsworth in the 1960s. Children display proximity seeking behaviours in order to get the attention of their caregiver and the caregivers response in those early interactions results in the child developing an attachment style that is either secure or insecure. This attachment relationship is important for future long-term outcomes where secure attachment is viewed as a protective factor which can enhance social and emotional well-being and insecure attachment is seen as a risk factor in relation to well-being. The key importance of attachment with adults has been well documented as a foundation for building resilience in young people and supporting their ability to engage in learning experiences.
A further key feature of the nurturing approach is the focus on the 6 Nurturing Principles which are outlined below.

Whole school and targeted approaches use these principles to guide practice. For example, in a nurturing classroom or nurture group, children are encouraged to create strong bonds that allow them to feel safe and explore their wider environment much as they would in a secure attachment relationship. Some of the key themes which are outlined in a nurturing approach are highlighted below.

Research on Nurture Groups has demonstrated benefits in social and emotional skills as well as attainment. A range of evidence has also demonstrated the importance of some of the key features of a whole school nurturing approach, e.g. attachment to teachers has been shown to link strongly to behavior, attainment and other positive outcomes. Consequently both Nurture Groups and nurturing approaches have grown greatly in Scotland in the last twenty years and there are a number of key policy documents which advocate these approaches. Research has also demonstrated that whole school approaches which support professional learning and policy development have a greater impact on wellbeing outcomes.

Education Scotland has also developed a resource entitled 'Applying Nurture as a whole school approach' which is a framework to support the self-evaluation of nurturing approaches in schools and early learning and childcare settings.
Adverse Childhood Experiences (ACEs)

The original ACEs study carried out between 1995 and 1997 surveyed 17,000 adults in the US asking them to complete a set of questions about adverse childhood experiences and current health status and behaviours. An adverse childhood experience is a term given to describe all types of abuse, neglect and other traumatic experiences that happen to individuals under the age of 18 years. Ten adverse childhood experiences were identified. In the original US study traumatic events were categorised into abuse, neglect and household dysfunction. It has since been recognised that a number of adverse, potentially traumatic events were not included in the original ACES study including poverty, bereavement and bullying.

Results from this study indicated that ACEs are common, with almost two-thirds of the U.S study participants reporting at least one ACE and more than 1 in 5 reporting three or more ACEs. Those with 4 or more ACEs were at greater risk of long term effects on health harming behaviours which leads to poorer outcomes in later life.

In the UK there have been two ACE studies carried out in England and Wales both demonstrating strong links between early adverse experiences and poor health and social outcomes in adulthood. While there has not been a Scottish ACE survey, a Scottish Public Health Network report, suggested that prevalence rates are likely to be similar to those reported in these studies.
'Polishing the Diamonds' Addressing Adverse Childhood Experiences in Scotland provides an overview of ACEs and inequality, whilst Tackling the attainment gap by preventing and responding to Adverse Childhood Experiences (ACEs) provides further guidance for educators in tackling the attainment gap. There is also an increasing recognition of the links between adverse childhood experiences, inequality and later offending behaviour as outlined in ‘Reducing offending, reducing inequality’. These documents highlight the links between ACEs and health inequalities and the need to build on strategies that increase resilience in all children and young people by recognising the importance of targeting specific social and emotional skill development. The importance of one stable adult relationship which often acts as a protective buffer and allows children and young people to develop skills needed to cope with adverse life experiences is also recognised.

One of the key messages that has arisen in discussion about ACEs within education and beyond is the need to use ACEs awareness to guide practice and link it with existing frameworks. The Welsh ACEs research has also recently highlighted sources of resilience and how they can mitigate against the influence of ACEs.

Trauma Informed practice

Given the growing awareness of the prevalence of adverse and traumatic experiences in childhood and an understanding of the impact of these, interest is growing in what is often termed trauma informed practice. The framework ‘Transforming Psychological Trauma’ indicates that this is everyone’s business and highlights the need to increase the understanding of trauma and its impact through supporting the development of skills and knowledge in the broad Scottish workforce. It also recognises the correlation between trauma and poorer outcomes which may be caused by the direct impact of the trauma, the impact of the trauma on a person’s coping response or the impact of the trauma on a person’s relationships with others.

A response to adverse experiences will be impacted by both individual factors (such as previous experiences, poverty, developmental level, presence of a disability) and experiential factors (chronic or single event, nature of event, availability of support, severity, physical proximity, presence of stigma, availability and quality of interventions). Importantly, what makes an experience traumatic is the individual’s reaction to the event rather than the event itself. The terminology around different types of trauma can often be complex and overlapping. The diagram below provides an illustration of what experiences might constitute trauma.
Whilst this illustrates examples of simple and complex trauma, the term developmental trauma may also be used in trauma informed practice. Developmental trauma describes how complex trauma can impact on children and young people and how their development can slow down or become impaired following a traumatic event.

The evidence base is emerging that trauma informed practice can support identification of need and lead to improved outcomes for those affected by trauma. Considering support through a trauma informed lens can contribute to a greater understanding of the reasons underlying some children’s difficulties with relationships, learning and behaviour. A school ethos that embraces an understanding of what has happened to an individual is far more likely to lead to supportive interventions that ultimately avoid exacerbating stress and trauma. The focus should be on relationships and promoting skills in self-regulation rather than on punitive approaches. Integrating trauma informed approaches into existing educational practices can contribute to the achievement of positive outcomes for children and young people.

What are the commonalities between a nurturing approach, Adverse Childhood Experiences (ACEs) awareness and trauma informed practice in an educational context?

- All recognise the importance of early adverse experiences on later outcomes
- All highlight the importance of practitioners having an understanding and awareness of underlying reasons for behaviour
- They are psychologically informed and make use of research/evidence to inform practice
- There is an emphasis is on the importance of relationships to support the negative impact of early adversity.
- Early intervention is emphasised as a means of preventing and mitigating against later negative outcomes
- There is a recognition that poor outcomes are not predetermined and can be reduced with appropriate support that builds resilience in people affected by trauma and adversity

The diagram below outlines some of these links from a nurturing perspective.
Potential benefits of a nurturing approach, Adverse Childhood Experiences (ACEs) awareness and trauma informed practice in an educational context

- Increases practitioner knowledge and awareness of the impact of early experiences thus increasing staff confidence about responding appropriately to children and young people's needs
- Provides a framework to develop understanding and support for children and young people
- Can help to develop a shared language for practitioners
- Originates from evidence based practice
- Encourages schools and early years and childcare settings and their wider communities to focus on early intervention and prevention
- Acknowledges the key role that practitioners can have in improving life chances for children and young people
- Helps the wider school community (including children, staff, parents and carers) to develop understanding about the potential impact of adversity and trauma on their own lives and the lives of others, thus aiding recovery

Potential challenges of a nurturing approach, Adverse Childhood Experiences (ACEs) awareness and trauma informed practice in an educational context

- There is a possibility that highlighting the potentially negative outcomes related to adverse experiences can give an overly fatalistic view if not balanced with evidence on resilience
- When approaches are implemented in isolation without making clear links with national frameworks and priorities such as Getting it Right for Every Child and the wellbeing agenda, there is the risk of the approach being unsustainable and fragmented
- Each approach needs to balance understanding and awareness with a clear focus on appropriate intervention and support that leads to positive outcomes for children and young people. Further evidence needs to be gathered as to the impact of each of these approaches at a whole school level
- Complexity and confusion around language and terminology that is often used

What would good practice look like within a nurturing, ACEs aware and a trauma informed educational context?

- Safe, secure, flexible and caring environments where positive relationships are seen as being fundamental
- A whole school focus on wellbeing; social and emotional learning and the building of resilience
- An awareness amongst practitioners of the impact of adverse experiences and trauma across the whole school community (including staff and parents/carers)
- Assessment and planning that has a focus on what has happened to an individual rather than what is wrong with an individual
- Identification of developmentally appropriate supports that promotes self-regulation
- A range of universal whole school approaches that enhance the wellbeing of all children and young people alongside targeted support that is proportionate and meets the needs of children and young people
- Senior Leadership Teams and practitioners who are reflective and supportive in their practice and recognise the importance of the wellbeing needs across the school community
- Establishments are able to take forward many features of highly effective practice as outlined in How Good is Our School? 4 (HGIOS?4), eg. All staff and partners model behaviour which promotes and supports the wellbeing of all.
What work has already been undertaken within education to take this agenda forward?

- Extensive professional learning has been undertaken which focuses on attachment theory and whole school nurturing approaches and this has supported staff understanding of the importance of relationships and how to use the six nurturing principles to support the needs of all children and young people but particularly those who have experienced adverse childhood experiences.
- Applying Nurture as a whole school approach is being used by many schools and early learning and childcare settings to support their self-evaluation of a nurturing approach but also to provide a framework to support an awareness of the impact of adverse early experiences and of developmental trauma.
- How good is our school? 4 and How good is our early learning and childcare provides clear guidance for schools to develop a ‘learning environment that is built on positive, nurturing and appropriately challenging relationships which lead to high quality learning outcomes’.
- Schools and early learning and childcare settings have undergone professional learning which has helped them to recognise what is involved in a trauma informed approach and use this to shape how language is used in schools and to develop a deeper understanding of the needs of children and young people and how to support them.
- Key adult programmes have been established which links a key adult to a child or young person in order to provide them with a good attachment model which can mitigate against some of their early adversity.
- Many schools have a focus on the language of emotion and have developed a range of activities that helps children and young people to express how they feel and to ask for support when they need it.
- Engagement in self-regulation coaching sessions which has enabled practitioners to explore what we mean by self-regulation and help children and young people to develop skills to help them in areas such as executive functioning and in emotional regulation, whilst recognising the key role of the adult in co-regulation.
- A large number of schools and local authorities have bought the license for ‘Resilience: the Biology of Stress and the Science of Hope’ and have shown the film extensively to educators and their partners and have followed this up with discussion forums to focus on the issues facing children and young people in their communities whilst exploring means of supporting their needs.
- Schools and early learning and childcare settings are working closely with their partners within the local authority and the third sector to explore how they can meet the needs of the families within their schools by offering a range of skill based activities and opportunities for parents/carers to meet and support each other.
- A number of national and local events have been held which allow educators and their partners to get together to share good practice and discuss the best ways of supporting children and young people who have experienced adverse childhood experiences and trauma.

Conclusion

The national movement around Adverse Childhood Experiences has helped to reinforce the message that children’s early experiences impact significantly on their later outcomes – a message that is also emphasised in a nurturing approach and trauma informed practice, and has been further developed by the growing field of neuroscience. This renewed focus is welcome as it has moved the conversation on for many from ‘what is wrong with this child’ to ‘what has happened to this child’. However, it is essential that those involved in education are able to see the links between this and approaches that are already established within education such as child development, attachment theory and whole school nurturing approaches. One of the important messages for educators is the idea that relationships can mitigate against negative outcomes - both within the home and community context and the school context. Learning how to cope with adversity is an important part of healthy childhood development. It is only when stress is prolonged and occurs without the buffering effect of protective relationships, that it can lead to a stress response or reaction that can become more toxic over time. Consequently, schools need to develop a relationship based approach to support the wellbeing of all young people, but particularly those who have experienced adversity without these protective relationships. Getting it right...
for every child emphasises the importance of wellbeing in Scottish schools and this focus provides a key mandate for taking forward the approaches discussed in this paper. “If relationships are where things developmentally can go wrong, then relationships are where they are most likely to be put right.”

We are at exciting and pivotal moment in our national conscience with regard to recognising the impact of early experiences on children and young people and it is essential that we capitalise on this to improve outcomes for all children and young people but we can only do this through linking it to existing frameworks and good work already in place.
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