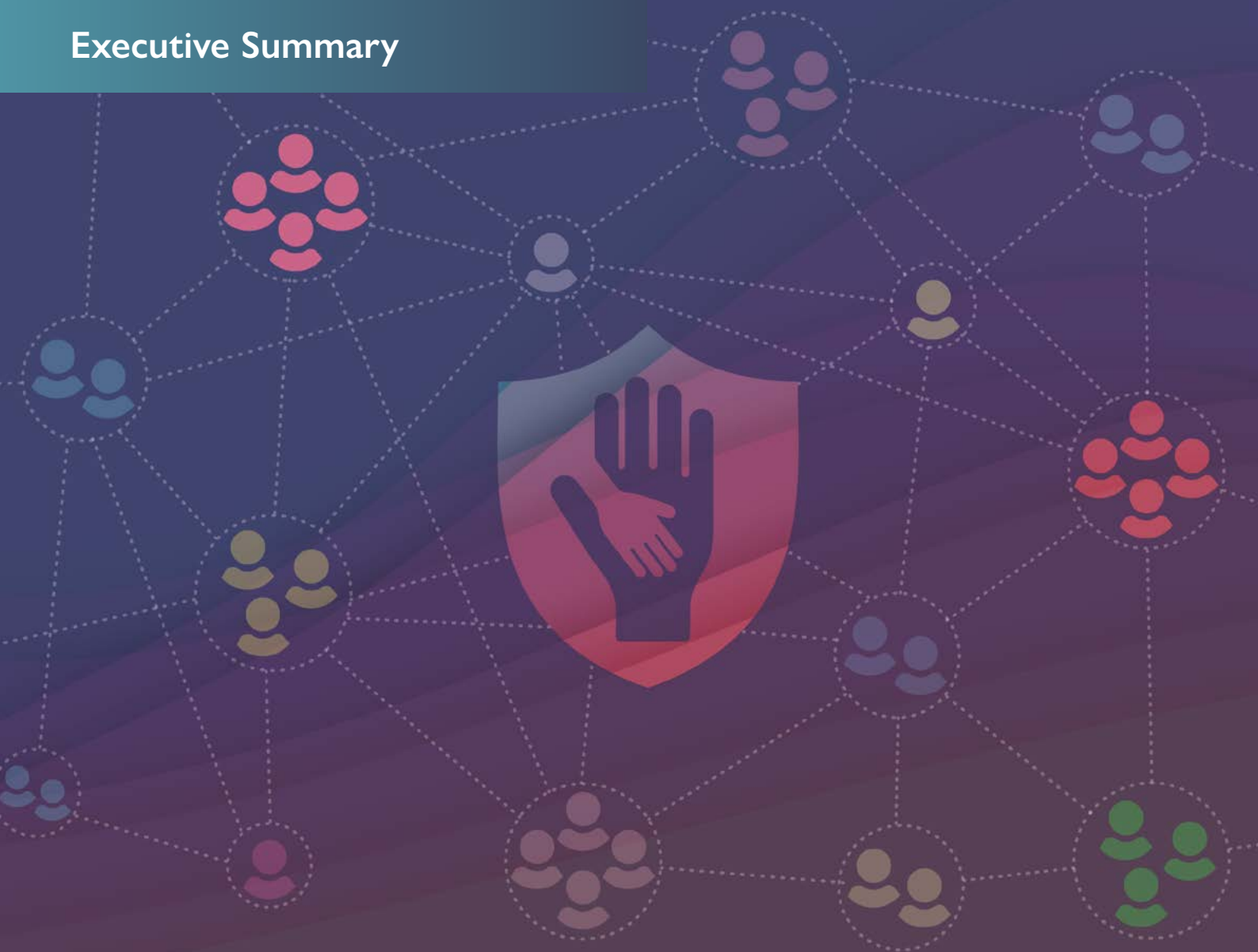




# What Works to Prevent Adverse Childhood Experiences (ACEs) at the Community Level? An Evidence Review and Mapping Exercise

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## Executive Summary



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# Acronyms

ACEs	Adverse Childhood Experiences
BCR	Building Community Resilience
COTS	Committee on the Shelterless
CTC	Communities That Care
DA	Domestic Abuse
FNP	Family Nurse Partnership
FFT	Functional Family Therapy
MST	Multisystemic Therapy
NEET	Not in Employment, Education or Training
RIS	Restorative Integral Support
SFI	Strengthening Families Initiative
VAWDASV	Violence Against Women, Domestic Abuse and Sexual Violence
YJS	Youth Justice System

# Abstract

## Background:

Adverse Childhood Experiences (ACEs) are stressful experiences that occur during childhood which directly hurt a child (for example, maltreatment) or affect them through the environment in which they live (for example exposure to domestic violence). ACEs are associated with poor educational achievement and the development of a wide range of harmful behaviours. In 2016, Public Health Wales published the first Welsh ACEs study, which revealed that 47% of adults in Wales have suffered at least one ACE in their childhood and 14% have suffered four or more. The aim of this project is to identify effective interventions at the community level relating to the prevention of ACEs and to identify initiatives undertaken across Wales.

## Methods:

Data were collected in three stages. Stage 1 was a scoping review of international published literature which aimed to identify frameworks and interventions assessed as being effective to preventing ACEs. Stage 2 was a survey to identify and map community projects which focus on the prevention of ACEs, childhood adversity and provide support for families and individuals across Wales. Stage 3 was the development of three case studies from the mapped projects, using data collected by interviews with the project leads.

## Findings:

The scoping review identified a number of interventions which are successful in preventing and mitigating ACEs with a focus on community based initiatives which provide a joined up response to adversity. The survey received 54 responses; projects worked with a range of community groups and types of adversity, providing support to families, young people, and adults. The case studies detail three projects: a community hub for young people, domestic abuse services for survivors and their children and outdoor experiences for children who are looked after and their foster carers.

## Discussion:

Addressing ACEs requires multiple interventions across sectors and throughout the life course. Within this, community based interventions can be effective in preventing and mitigating the impact of ACEs and adversity by providing a local response to address the needs of the community.

## Conclusion:

There are numerous community projects across Wales providing a range of services to address factors associated with ACEs and adversity but there is a lack of knowledge about many of these projects, their impact on the communities they serve and the best way that they can be supported.

# Background

The collective term Adverse Childhood Experiences (ACEs) was originally developed in the US (Felitti et al., 1998). ACEs are traditionally understood as a set of ten traumatic events or circumstances occurring before the age of 18 which have been shown to increase the risk of adult mental health problems and debilitating diseases (Bellis et al., 2014). Five ACE categories are forms of child abuse and neglect, which are known to harm children and are punishable by law, and five represent forms of family dysfunction that increase children's exposure to trauma (Asmussen et al., 2020).

Addressing a problem such as child maltreatment and other ACEs with a public health perspective means a strong focus on preventing its occurrence through three levels of prevention (Klevens and Alexander, 2019). Primary prevention includes efforts to prevent ACEs so that children grow up with less exposure to adversity and are less likely to have children of their own who experience ACEs. Secondary prevention includes efforts immediately after an ACE has occurred to reduce the immediate and short-term consequences while tertiary prevention includes efforts to treat and reduce long term consequences of ACEs (Oral et al., 2016)

The scale and impact of childhood adversity means that a response cannot be provided by a single service or intervention. Instead, strategies to prevent the occurrence of ACEs and their adverse impacts are needed at every level (Oral et al., 2016). In 2015, the first national Welsh ACEs study identified the extent of ACE exposure among adults in Wales, and the strong cumulative relationships between ACEs and health-harming diseases, health conditions and health service use (Ashton et al., 2016). This study also indicated that there is a substantial subset of people who experience ACEs and avoid, entirely or in part, the negative health and social consequences.

Research suggests that connectiveness, building and maintaining supportive relationships, building self-efficacy (the feeling of being able to overcome hardship) and skills that help manage behaviour and emotions can be protective, moderating the negative effects associated with ACEs (Di Lemma et al., 2019). Additionally, evidence suggests that a range of factors can help develop childhood resilience including at least one stable relationship between a child and adult, better developed self-regulation skills and a sense of having control over personal circumstances. These findings have influenced local and national public health policy in Wales and driven multi-agency work to prevent ACEs and support those affected by them (Riley et al., 2019).

In Wales, the policy and legislative context is supportive of addressing ACEs and recent legislation puts children at the heart of co-produced, sustainable policy-making (Star, 2019). The Wellbeing of Future Generations (Wales) Act (Welsh Government, 2015) provides the foundation for all public services to work collaboratively towards an integrated life course approach to wellbeing. The Welsh Government has made a clear commitment to prioritise action to prevent ACEs through the creation of ACE-aware public services (Prosperity for All: National Strategy, Welsh Government 2017). Finally, 'A Healthier Wales: our Plan for Health and Social Care' (Welsh Government, 2019) recognises the lifelong importance of addressing adversity experienced in childhood (Di Lemma et al., 2019).

Over the past five years, many governments, including the Welsh Government have increased their investment in activities with the aim of preventing or reducing ACEs at the population level, in part by implementing training in trauma-informed care for a wide variety of frontline workforces (Asmussen et al., 2020). Using a trauma-informed lens, community health becomes a powerful focal point for viable prevention and treatment options to address ACEs and promote health equity. Self-healing on a community level involves collective engagement as people most affected by ACEs and trauma come together around activities that have the potential to lift the entire community and foster individual and community resilience (Danielson and Saxena, 2019).

## Study Aims

Community based interventions can build collective resilience, support individuals with services, and build strong bonds to a group (or a culture), all of which have been shown to be important factors in preventing and mitigating the impacts of ACEs. The Welsh ACE and Resilience Survey highlighted strong cultural connectedness, regular participation in groups (e.g., sports clubs), and higher perceived levels of support from public services and employers, were found to moderate the increased risk of mental ill health from ACEs (Hughes et al., 2018).

The aim of this project is to identify ‘what works’ at the community level to prevent and mitigate ACEs and childhood adversity more broadly and to identify and map effective projects and initiatives operating across Wales.

## Methods

The study had three stages of data collection:

### Stage One: Literature Review

A scoping review of international published literature was undertaken to address the question ‘what works to prevent and mitigate ACEs and childhood adversity at the community level’? Using a defined search strategy, the following databases were searched: Cochrane Database of Systematic Reviews; ASSIA; Medline; PsycINFO; Social Care Online and Google Scholar. Searches were undertaken in April 2021.

Search terms included: adverse childhood experiences; ACEs; childhood adversity; toxic stress; trauma informed approach; prevention; early intervention; community programmes; peer; peer approaches; reduction; what works; effective; resilience. To be included, papers had to meet the following criteria: published since 2005; interventions designed to prevent ACEs or childhood adversity more broadly (reviews or primary studies); interventions at the community level; English language.

Selected records were imported into reference management software (Endnote), duplicates were removed, and each record was title screened. Remaining records were exported into a excel spreadsheet and abstract screened. The final stage was to undertake a full paper screening, leaving 21 articles in the final sample (Appendix A). For each paper, extracted data included key aspects and frameworks relating to ‘what works’ in terms of the prevention and early intervention of ACEs and childhood adversity at the community level. Due to the diversity of approaches, this information is presented as a narrative synthesis.

## Stage Two: Survey

The second stage of the project was to identify and map community projects relating to the prevention or early intervention of ACEs across Wales using a survey. To be included, projects needed to prevent or mitigate the impact of ACEs or address childhood adversity more generally, be community based and operate in Wales. Survey links in English and Welsh were created via the online platform Survey Monkey and distributed by email using a stakeholder contact list. The stakeholder list contained a range of stakeholders including partners of the ACE Support Hub and Public Health Wales as well as contacts in Welsh Government and stakeholders from the third sector, community, and volunteer groups. The survey was also accessible to the public.

The survey was open between 14th June – 12th July 2021. In addition to the online survey, participants were offered the option of completing the survey by a telephone interview with a member of the research team or as a word document. All communication and survey options were available in English and Welsh. The final sample comprised of 54 projects (Appendix B). Data from each project was collated using a template which outlined the community focus, the project name and start date, location and services provided. Additionally, responses to each of the survey questions were analysed individually.

## Stage Three: Case Studies

From the survey responses, promising examples of interventions undertaken in Wales were followed up with an interview with the project leads. The data collected was used to develop case studies (n=3). Projects selected reflected a range of project types and include a combination of the following characteristics.

- Urban/rural
- Geographical spread across Wales
- Range of community groups
- Range of ACEs/adversities

Interviews with the project lead collected more detailed information on the project and the way that the services provided meet the needs of the community.

# Key Findings

## Literature Review

In terms of 'what works' to prevent and mitigate ACEs and childhood adversity at the community level, recent studies have shown that resilience resources in childhood and adulthood can moderate the negative outcomes associated with ACEs and show protective effects on mental ill health, childhood health and educational attendance (Di Lemma et al., 2019).

In childhood, resilience resources include having a stable trusted relationship with an adult, and participating in sport clubs (Di Lemma et al., 2019). For a child exposed to significant stress, a strong buffering relationship with an adult can be the difference between toxic stress and tolerable stress (Danielson and Saxena, 2019). For adults, relationships are a powerful protective factors for people with high ACE scores (Danielson and Saxena, 2019) and sources of resilience include regular participation in community activities and perceived financial security (Di Lemma et al., 2019). At the family level, supportive parent–child interaction, stable intimate partnerships, adequate financial resources, and adequate housing are examples of protective factors (Asmussen et al., 2019). Consequently, interventions aimed at building relationships and resilience may be effective in the prevention of ACEs and mitigation of their harms, as they show demonstrable impact on increasing self-esteem and decision-making skills, reducing stress or anxiety and poor health behaviours and violence (Di Lemma et al., 2019).

A recent review found 33 interventions with current robust evidence of preventing at least one of the 10 original ACE categories, reducing the health-harming behaviours associated with ACEs, and specifically reducing ACE-related trauma (Asmussen et al., 2019, Asmussen et al., 2020). These activities represent 10 separate intervention models that can be offered at three levels. The universal level, where interventions are provided to all children and families, regardless of level of need; these include screening, co-parenting interventions and school-based interventions. The targeted selective level which includes interventions such as the Family Nurse Partnership (FNP) which is offered on a preventative basis to children and families identified at being at particular risk of ACEs, although they may not be experiencing any specific ACE-related trauma. Finally, the targeted indicated level which includes interventions which aim to reduce ACE-related trauma and prevent the intergenerational transmission of ACEs, such as Multisystemic Therapy (MST) or Functional Family Therapy (FFT).

A further review of evidence on common approaches to prevent ACEs and/or mitigate their negative impacts found over 100 evidence-based interventions which were identified and collated across four common approaches: supporting parenting; building relationships and resilience; early identification of adversity and, responding to trauma and specific ACEs. Although the interventions identified by this review varied in type, the review identified cross-cutting themes, which could be used to inform a whole system approach (spanning individual, family and community levels) to tackle ACEs across the life course (Di Lemma et al., 2019).

In addition to interventions which reduce childhood adversity, the literature also includes interventions that reduce covariates of childhood adversity to enhance positive outcomes across the social-ecological continuum; individual, family, community, society, and public policy. Studies indicate that neighbourhoods can have a significant effect on parenting behaviours and child outcomes, demonstrating potential positive effects a neighbourhood can have in mitigating childhood adversity. Years of research have repeatedly shown that community factors such as poverty, violent crime, and drug trafficking influence rates of child maltreatment so addressing these conditions matters when trying to prevent child maltreatment (Brennan et al., 2020).

Community matters for health, social relationships, participation, and a sense of belonging, all of which influence our mental and physical health and help reduce health inequalities. Community participation can



help to increase democracy and citizenship, combat social exclusion, and give young people a voice and empower them to have more control over their lives (Public Health England, 2020). In the United States particularly, over the last decade, there has been an emerging movement to build resilient, trauma-informed communities. Such initiatives bring together stakeholders from different community sectors, community members, parents, youth, policymakers, health and social service providers, funders, and researchers to develop coordinated community responses to ACEs that can promote resilience (Matlin et al., 2019). Examples in the US include Strong Communities and Building Community Resilience (BCR) and in the UK, Strengthening Families Initiative (SFI) and Communities that Care (CTC).

## Community Projects in Wales

The second stage of data collection in this study was a survey, designed to identify and map projects which aim to prevent or mitigate ACEs or childhood adversity more broadly, operating in Wales. The final sample included 54 projects (Appendix B).

The earliest project start date was 1972, while 23 projects have been established in the last five years. Reasons for the start-up of projects included: supporting people to overcome adversity including deprivation; supporting mental health and wellbeing; supporting parents and families; bridging gaps in existing systems; personal experience and the impact of COVID-19. Supporting service users to overcome adversity was mentioned by several projects. Within this category, respondents mentioned the need to counteract a range of issues associated with deprivation including homelessness, drug misuse, unemployment, the impact of poverty as well as a lack of opportunities and disengagement. Other adversities included domestic abuse and ACEs more generally.

Supporting mental health and wellbeing was mentioned by several projects, particularly in relation to intervening at an earlier stage with young people with mental health needs. Also, to provide targeted and innovative interventions and more trauma-informed support for victims of domestic abuse or those who have experienced ACEs. Many projects had been established to support parents and families, especially families in the early years, those with children with additional needs, those experiencing domestic abuse and families where there is a risk of children entering the care system.

Several projects were set up to address gaps in existing systems, including the provision of sex education and legal advice. However, in the main, these services addressed mental health and well being and there was reference to CAMHS thresholds and the need to support young people outside those traditional and clinic-based services. A small number of projects were established because of individual experience which resulted in a desire to support those in a similar position, for example providing support around drug misuse. Finally, a small number of projects were established in response to the COVID-19 pandemic, to address increasing incidence of domestic abuse as well as the impact of lockdown on young people.

It was recognised that there is a need for greater awareness, better understanding, and more education in terms of the needs of those who have experienced trauma. Many of the projects (35) mentioned that they used a trauma informed approach to underpin the services that they provided. Additionally, most projects fitted within Welsh Government policy and legislative areas including the Well being of Future Generations Act, VAWDASV, children and families, physical/mental health and wellbeing, ACEs, housing, education, and criminal justice.

The projects varied in size, many were small scale, with 25 projects staffed by fewer than 10 people (employed or volunteering). Relating to the costs incurred by the projects, staffing was the most mentioned cost incurred, this includes the payment of staff salaries, management and operational support costs, training and payment for guest speakers or workers. Respondents also mentioned the cost of resources and equipment in general, including outgoings such as stationary, printing, administration, office costs (mobiles/I.T.), materials used for activities, food, and refreshments, as well as travel costs. Upkeep of buildings and maintenance costs as well as costs associated with venue/premises hire, utilities/bills and insurance featured in the responses. Finally, other costs included accreditation costs (Baby Friendly Initiative), licensing and locations for days out.

Many of the projects (45/54) received funding from various sources, predominantly from public bodies, followed by the private and charity sector. Additionally, most projects (40/54) have undergone evaluation, either internally (14), by other organisations (13) or a combination of both (4). Most projects evaluated by the provider take the form of a survey or questionnaire, staff appraisals and reflections, organisation evaluations and reviews, board of trustee reports or annual audits. Evaluations often use recognised scales or measurement tools including the Warwick Edinburgh Wellbeing Scale and the Canadian Occupational Performance Measure.

Projects such as Stepping Stones, The Gap Wales, Communities for Work and Flying Start assess success on outputs around work, education, qualifications, training and skills. Other projects use measures of success based on project aims. Baby in Mind assesses successful outcomes as the reduction of the risk of children entering the care system, the Fire Setter Intervention Scheme uses a reduction of crime statistics and Pobl Clarewood, a successful move to permanent accommodation. Other projects use measures such as 'distance travelled' or 'mapping success' over time; other measures include seeing children develop and reach their full potential; children and parents thriving, and happy and motivated staff.

## Case Studies

The third stage of this study was the development of case studies, selected from projects which responded to the survey. The case study summaries are collated from a combination of the survey responses and data from an interview with each of the project leads.

### Case Study 1 – Community Youth Project, Newport

The Community Youth Project supports young people (aged 6 - 25) in the Maindee area of Newport. It is a youth and community project which engages young people from diverse backgrounds (including the Gypsy Roma community and the British South Asian Community) encouraging them to thrive and be supported to reach their full potential. The project provides drop-in sessions, one to one sessions, a girls' project and an LGBTQI+ group.

The project began in 2013 and the overall aim is to recognise the adversities that the young people often face, these include discrimination and poverty: *“These Gypsy Roma kids are marginalised, they are discriminated against, they are victims of hate speech and hate crime and completely misunderstood”*. The aim is to address these adversities by providing a safe community space and the support that they need: *“Making them feel a part of a community, a safe place for them, someone to talk to, someone to love and care about them...they come from overcrowded households, poverty and they don't get much attention is the truth or if they do, it is often negative attention”*. The project would like to be able to extend services to more parts of the community: *“The dream is to expand Community House, because it is a safe and trusted place as a community hub...the possibilities are endless”*.

*“These Gypsy Roma kids are marginalised, they are discriminated against, they are victims of hate speech and hate crime and completely misunderstood”*.

*“Making them feel a part of a community, a safe place for them, someone to talk to, someone to love and care about them...”*

## Case Study 2: West Wales Domestic Abuse Service

The West Wales Domestic Abuse Service is a domestic abuse (DA) service based in the community. It began in 1976 in response to the need for women and children experiencing abuse from partners and family members. The aim of the work is to meet basic needs, prioritise safety and support to ensure that survivors and their children cope and recover from the trauma they have experienced. The service provides safe housing, practical advice and support including group work to enable people to understand the abuse they have experienced, counselling and ongoing support for adults and children, mentoring support and casework for up to two years.

The service works with both parents and children: *“We are trying to develop a more holistic approach in terms of understanding that if you can work earlier on with children who have witnessed and experienced domestic abuse through their parents...the hope really is to get them to a place in which their welfare acknowledges that that abuse is not right”*. In addition, this service works with the non-abusive parent as much as possible to increase understanding of the impact on the children.

*“...the hope really is to get them to a place in which their welfare acknowledges that that abuse is not right”*

It is evident that domestic abuse often links with other ACEs and this is reflected in the work that is undertaken: *“Certainly, with the ACEs agenda...we have been saying for years within the domestic abuse field that actually, what you find is that if someone has experienced...domestic abuse, the reality is that there is going to be other ACEs present”*. Acknowledging this, workers will concentrate, not only on domestic abuse, but also other factors which affect service users: *“The programmes will at the heart identify domestic abuse but also trying to build resilience, if you are taking that ACEs view, you are also trying to build resilience”*.

## Case Study 3: Wild Elements (Shake it Up), North Wales

The aims of the Wild Elements project are to use the outdoors to promote health and wellbeing for children and young people, working with a range of groups: *“We have worked with NEET (Not in Education, Employment or Training) groups, we have worked with young offenders, so we have quite a broad range...our main audience really is people who are at a disadvantage of some sort”*. The service offers a range of activities to children and young people: *“We do den building, mud play, we paint with mud, we face paint with mud, we have got a mud kitchen...or giving them that freedom to explore the woodland at their own pace”*.

The Shake it Up project works with children in care to understand access to education: *“The aim of the project was to discover the needs and issues within the support for education but also it was there to increase self-esteem of the children...to improve self-esteem, to get them out of house and off the screens and into the natural world, to explore and build their confidence and improve their mental health”*. As a result of the findings of this project: *“My recommendation having briefly looked at the data and the stories that have been shared with us is that the need for the support to be relayed back to the carers that needs to be more accessible. What we are finding is that carers don't know what is available, so they are funding things themselves”*.

*“...to improve self-esteem, to get them out of house and off the screens and into the natural world, to explore and build their confidence and improve their mental health”*

# Discussion

**The aim of this project was to identify effective interventions relating to the prevention and mitigation of ACEs, including projects at the community level operating across Wales. This section presents a summary of the findings and identifies the need for further research.**

## Stage 1: Literature Review

The literature indicates that the complex and pervasive nature of ACEs suggests that there is no single or simple solution, instead system wide strategies involving multiple interventions are required to adequately prevent and reduce the impact of ACEs (Asmussen et al., 2019). Within this, involving and empowering local communities, particularly disadvantaged groups, can promote health and wellbeing and reduce inequalities. Key within this are participatory approaches which can directly address marginalisation and acknowledges the importance of community engagement as a strategy for health improvement, particularly as it leads to services that better meet the community member's needs (Public Health England, 2020).

While the literature provides evidence of the success of these larger multi sectoral programmes, there was very little evidence in relation to smaller, grass roots community projects, possibly as result of a lack of rigorous evaluation of programmes due to restricted funding. There was also a dearth of evidence in terms of the experience of service users who benefit from the community programmes.

## Stage 2: Survey

The survey had 54 responses in total with every local authority in Wales represented. The projects were set up for a range of reasons, including tackling deprivation, supporting mental and physical health, bridging gaps in the existing system, personal experiences and the impact of COVID-19. The adversity addressed by the projects includes domestic abuse, substance misuse, those involved in the care system, homelessness, involvement in the criminal justice system and social, emotional and wellbeing needs. Community groups who were beneficiaries of the projects include new and expectant parents, families, children and young people, adults, and community groups.

The projects which responded to the survey varied in terms of size and funding and can be divided into three categories: Projects which are part of funded, Wales or UK wide initiatives, such as Flying Start (Welsh Government) and the Youth Justice Blueprint (Ministry of Justice); Projects which operate under the umbrella of broader third sector or charity groups, for example services run by NSPCC for expectant and new parents; Community projects which have been set up in response to community need (grass roots community projects), these address a diverse range of adversities and community groups and often have limited and/or short-term funding.

This survey did elicit responses from projects across Wales however we estimate that there are significantly more projects operating in Wales than responded to the survey, particularly at the grass roots level. Echoing the international literature, while larger, funded programmes are subject to evaluation and oversight, there is less knowledge and understanding of smaller, grass roots community projects. The lack of knowledge about these groups has two implications, it will impact on the ability of professionals and other service providers to provide a joined-up community response to adversity, as well as the potential for social prescribing and partnership working. Secondly, there are implications for the long-term support of these grass roots projects, since there is a gap in the evidence in terms of how these projects could best be supported.

## Stage 3: Case Studies

The case study section detailed three projects across Wales; a community hub for young people in Newport (Community Youth Project); a domestic abuse service in West Wales (West Wales Domestic Abuse Service); and an outdoor experience for children who are looked after and foster carers in North Wales (Wild Elements).

The data indicate that services are often established to respond to the needs of the community and are shaped by the communities in which they are located. As a result, where services reflect the communities they serve, they are effective at reaching and addressing the needs of diverse community members. Also, where services are small scale and rooted within the community, they are flexible and able to adapt quickly to changing circumstances. Additionally, these projects often work with other services to enhance provision, using their trusted status to facilitate wider support. Echoing the wider literature, there is a gap in evidence in terms of the way that service users experience services provided by these community groups. Also, the way that differently funded community provision (reflected in the three categories outlined above) interact with the communities that they serve. Further research could explore the experiences of services users in terms of a range of community provision to identify how such programmes interact with the community.

## Summary

Community-based interventions that strengthen neighbourhood-level resources may be most effective in buffering the toxic stress response in children while positive environmental changes can improve childhood outcomes, even in extreme cases of adversity. Community based interventions have been shown to be effective and long-term follow up of children involved in interventional programs exhibit enduring behaviour and health effects (Franke, 2014). However, system-wide strategies for preventing or reducing ACEs are not easy or cheap and the evidence suggests that the successful delivery and integration of effective activities requires time, skill and commitment that is not currently available in most community systems. To overcome this would require long-term public investment in system wide approaches, covering the intervention costs, workforce development, multiagency working, governance, and evaluation so that the impact of various intervention combination and multiagency approaches can be tested and compared (Asmussen et al., 2019).

## Conclusion

**A joined-up community approach can have a significant impact on children facing adversity. There are numerous community projects across Wales providing a range of services to address factors associated with ACEs and adversity but there is a lack of knowledge about many of these projects, their impact on the communities they serve and the best way that they can be supported.**



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## Appendix A: Table of Included Papers

Lead Author	Year	Title	Summary
Asmussen	2020	Adverse Childhood Experiences: what we know, what we don't know, and what should happen next.	This review examines the evidence-base for adverse childhood experiences (ACE) and considers the strength of evidence underpinning common responses to ACEs, including routine ACE screening and trauma-informed care
Asmussen	2019	The Potential of Early Intervention for Preventing and Reducing ACE-Related Trauma	This article identifies twenty-four interventions with causal evidence of preventing or reducing ACE-related trauma and considers how they could be offered through system-wide strategies aimed at improving the lives of children who are at the greatest risk.
Blitz	2013	Prevention through collaboration: Family engagement with rural schools and families living in poverty	This study demonstrates ways in which trauma informed practices can be applied to mezzo- and macro-level services. Lessons learned from these efforts show that initial systems change can occur with outreach to a small sample of hard-to-reach families, potentially creating system readiness for larger change.
Brennan	2020	Effective prevention of ACEs in Adverse childhood experiences: Using evidence to advance research, practice, policy, and prevention.	This chapter explores universal, targeted, and indicated programs that aim to prevent childhood adversity or prevent the recurrence of adversity.
Condon	2019	Toxic Stress and Vulnerable Mothers: A Multilevel Framework of Stressors and Strengths	This article aims to advance the science of toxic stress prevention by exploring the stressors and strengths experienced by vulnerable mothers through application of a theoretical framework.
Danielson	2019	Connecting adverse childhood experiences and community health to promote health equity	This paper is intended to establish a common language for how community healing can address ACEs and foster health equity.
Ellis	2017	A New Framework for Addressing Adverse Childhood and Community Experiences: The Building Community Resilience Model	Proposes a transformative approach to foster collaboration across child health, public health, and community-based agencies to address the root causes of toxic stress and childhood adversity and to build community resilience.
Franke	2014	Toxic Stress: Effects, Prevention and Treatment	This article briefly summarises the findings in recent studies on toxic stress and childhood adversity following the publication of the American Academy of Pediatrics (AAP) Policy Report on the effects of toxic stress.

Hall	2012	Reducing adverse childhood experiences (ACE) by building capacity: A summary of Washington family policy council research findings,	In this study, researchers sought to demonstrate the strong impact of the community networks' capacity to interrupt health and social problems.
Kagi	2012	Translating the adverse childhood experiences (ACE) study into public policy: progress and possibility in Washington state.	This introduction to the themed issue overviews the Adverse Childhood Experiences (ACE) Study and discusses prevention and intervention with ACE and their consequences in communities.
Klevens	2019	Essentials for Childhood: Planting the Seeds for a Public Health Approach to Preventing Child Maltreatment	This article describes how the Centres for Disease Control and Prevention used a public health approach to develop a narrative, relationships, and strategy to prevent child maltreatment.
Larkin	2012	Mobilizing resilience and recovery in response to adverse childhood experiences (ACE): A restorative integral support (RIS) case study	The current empirical case study presents the Committee on the Shelterless (COTS), in Petaluma, CA, as an example of one social service agency employing RIS to break cycles of homelessness.
Di Lemma	2019	Responding to adverse childhood experiences: an evidence review of interventions to prevent and address adversity across the life course	The review identifies over 100 programmes and interventions which were collated across four common approaches: supporting parenting; building relationships and resilience; early identification of adversity and responding to trauma and specific ACEs.
Longhi	2019	How to increase community-wide resilience and decrease inequalities due to adverse childhood experiences (ACEs): Strategies from Walla Walla, Washington	This paper summarises the evidence that community-wide resilience moderates such impacts and examines how resilience can be increased by strategic interventions focused on community capacity building; Trauma-Informed Practices (TIPs) by staff in community organizations; and cultural change.
Mayer	2012	Adolescent parents and their children: A multifaceted approach to prevention of Adverse Childhood Experiences (ACE)	This current article proposes a universal, multifaceted, and interdisciplinary prevention science model that has two targets: adolescent parents and their children
Oral	2016	Adverse childhood experiences and trauma informed care: the future of health care	This article reviews childhood adversity and traumatic toxic stress, presents epidemiologic data on the prevalence of ACEs and their physical and mental health impacts, and discusses intervention modalities for prevention.
Pachter	2017	Developing a Community-Wide Initiative to Address Childhood Adversity and Toxic Stress: A Case Study of The Philadelphia ACE Task Force	This article describes the origins and metamorphosis of the Philadelphia ACE Task Force, which initially was narrowly focused on screening for adverse childhood experiences (ACEs) in health care settings but expanded its focus to better represent a true community-based approach to sharing experiences with addressing childhood adversity in multiple sectors of the city and region.



Public Health England	2020	No child left behind: a public health informed approach to improving outcomes for vulnerable children	This report sets out how adopting a public health informed approach offers substantial opportunities to reduce inequalities and improve health and wellbeing outcomes for the most vulnerable children
Rog	2021	Opportunities for psychologists to enact community change through adverse childhood experiences, trauma, and resilience networks	This article describes the structure, operation, and accomplishments of these networks to make a case for the ways in which psychologists, working with other professionals and grassroots leaders, can contribute to these efforts.
Star	2019	Putting Children at the Heart of Policy	This article explores the developmental methods used to create the acts and how the best interests of children are addressed by the public health agenda, whose aim is to work nationally across all sectors to achieve a thriving society and optimum health and wellbeing for the present and future generations' (PHW, 2016)
Woods-Jaeger	2018	Development, Feasibility, and Refinement of a Toxic Stress Prevention Research Program	This paper describes the iterative development of a community-based intervention, 2Gen Thrive, which was designed to prevent toxic stress and promote resilience by improving caregiver capacity to respond to children's emotional, behavioural, and developmental needs.

# Appendix B: Summary of Projects

Community	Project Name & Start Date	Location	Services Provided
Expectant/ New Parents	Baby Friendly (2004) Hello Baby (2011)	RCT/Merthyr/ Bridgend	<p>Two initiatives provide services to all antenatal mothers in the Flying Start area.</p> <p>Hello Baby (Bridgend) is a universal antenatal parenting initiative delivered alongside traditional midwifery parentcraft education which aims to increase the rates for breastfeeding, strengthen parent-baby attachment and family relationships.</p> <p>Baby Friendly (RCT/Merthyr/Bridgend) is an evidence based staged accredited programme to promote, protect and support breastfeeding. Both initiatives support positive responsive parenting through one to one or group sessions which are flexible in approach and mother led in the antenatal period with follow up in the postnatal period.</p>
Expectant/ New Parents	Baby in Mind (2018)	Bridgend	<p>The aim of the service is to reduce the number of babies coming into the care system at birth. The service establishes relationships pre-birth, focussing on past trauma and ACES by providing motivational interviewing, trauma informed therapies and parenting programmes that improve attachment. These interventions continue post birth and up to six months post-delivery.</p>
Expectant/ New Parents	Pregnancy in Mind Baby Steps Building Blocks (NSPCC)	Range of Locations	<p>Three key programmes aimed to enhance core parenting skills, mitigate the impact of parental adversities, and build parental unborn/baby relationships: Pregnancy in Mind is a preventative mental health service delivered by professionals during the middle trimester of pregnancy. Baby Steps is a perinatal educational programme designed to help prepare parents-to-be. Building Blocks is a practical, home-based programme for parents and carers of children under 7-years-old who may need extra support in gaining the skills and knowledge they need to care for their child.</p>
Expectant/ New Parents	Flying Start & Families First (3 responses)		<p>Flying Start focusses on intensive health visiting, parenting support, childcare and speech, language, and communication support. Families First is the enhanced preventative service offered to children and families to prevent them becoming at risk of safeguarding. Three responses detailed the Flying Start initiative, one detailed the Flying Start and Families First Health team, an enhanced preventative service offered to children and families to prevent them becoming at risk of safeguarding. Included are families with children under 5 years and children with Additional Learning Needs.</p>
Expectant/ New Parents	Jig-So (2 responses)		<p>JIG-SO is part of the Welsh Government's Flying Start and Families First programmes. It is an early intervention, multi-agency project, consisting of a dedicated team of midwives, family facilitators, nursery nurses, early language development workers and managers. In Swansea, the team support the well-being of vulnerable and expectant young parents (aged 16-24 years) from 17 weeks of pregnancy and throughout the child's infant years. Families are under social services, in Flying Start or generic referrals and are offered a holistic package of support that is tailored to each individual or family.</p>

<b>Expectant/ New Parents</b>	Parental Resilience and Mutual Support (PRAMS) (2014)	Wrexham and Flintshire	Provides additional support for mothers and fathers through early parenthood. This support involves several free weekly sessions; 'Your and Your Bump' involves free weekly sessions aimed to ensure that expectant parents enjoy their pregnancy and future life as a parent while 'You and Your Baby' aims to challenge negative thoughts, feelings and behaviours to make lasting positive changes.
<b>Families</b>	Swansea and Mountain View Children's Centre (2007)	Swansea	Offers a one stop shop of family support services including Flying Start family support groups, baby massage, sensory, yoga groups, stay and plays, antenatal support, housing and other professional services. These services are aimed at supporting families, a food bank and outreach support.
<b>Families</b>	Stepping Stones Next Step Survivors Group (2017)	North Wales	Stepping Stones is a charity that provides therapeutic services to adults who have been sexually abused as children. This project provides a service for adults who have accessed Stepping Stones, and other family members including children. The aim is to provide continued support after counselling has ended. This support includes activities, education, and training. As well as providing services to those who are survivors of childhood sexual abuse, this service is also open to victims of domestic violence and provides supported group learning, individual mentor support, access to education, confidence building day, family days out, budgeting, friendship group, information and support.
<b>Families</b>	Shake It Up (2020)	North Wales	Staff work with foster carers, care leavers and children in care to deliver five sessions involving crafts, fun, games, teambuilding exercises, forest school activities storytelling and nature connections. Wild elements staff also survey foster carers to identify the needs solutions and potential benefits that support will make to the children as well as the foster families. The longer terms aims are to identify the key barriers to higher education and further education that care leavers and children in care face and to identify solutions and key areas of support.
<b>Families</b>	The ACE Recovery Toolkit (2020)	South Wales	Focuses on adults and children who have experienced domestic violence using a programme that has been written to educate and inform individuals about the impact of ACEs on them and their children. The adult recovery toolkit is a ten-week programme which provides guidance on the protective factors that help mitigate the impact of ACEs and the practical methods for developing resilience. For children and young people, the toolkit is an eight-week programme which uses a combination of creative activities and group work. These programmes give participants the tools to mitigate the impact of ACEs, learn strategies to continue to develop their family's resilience, increase self-esteem and the knowledge and tools to be able to implement healthy lifestyle choices.

<b>Families</b>	CYCA (2018)	Carmarthenshire	CYCA supports families and children in Carmarthenshire who live in poverty and do not meet the threshold for statutory services. Training is delivered to professionals to support understanding of the impact of trauma in ACE families as well as counselling and mentoring to children from ACE families. Activities include counselling, mentoring, physical activities, mindfulness activities and therapeutic play. All activities are free and easily accessible at the centre. The project began in March 2018 in response to a demand for training and better understanding of how to support individual family member's needs and to address high referrals due to gaps in services for children experiencing emotional distress.
<b>Families</b>	Family Support Centres (2018)	Conwy	Provides early intervention and prevention services through five local community-based teams, most of which are based in family centres. The teams provide a range of support, including universal support through open access groups, targeted support through groups and courses and tailored support for individual families through an allocated family worker and referrals to specialist support. The aim is to provide early help to families to prevent them going into crisis and to empower and enable families to move forward with their lives positively.
<b>Families</b>	Valley Kids (1977)	Rhondda Cynon Taff	Provides a range of activities including art, play, education and youth work to support children, young people and families. The aim of Valley Kids is to release potential within communities to counteract the effects of social deprivation and enable children and young people to grow and develop through play, education, recreation, and creative activities.
<b>Families with specific needs</b>	SNAP Cymru Early Help/ Wellbeing Project (2019)	Swansea	Focuses on families with children with Additional Learning Needs (ALN) and disabilities by using a whole family approach. The aim is to provide focused support, build on the strengths of families to help themselves and find positive ways to improve coping and build resilience. They also provide targeted interventions when the needs of the child cannot be met within their setting or if the needs are more complex or if they have multiple needs. Each family has a named lead worker, a full assessment of the problems that they face and an agreed plan with stretching goals.
<b>Families with specific needs</b>	Stepping Stones Children's Centre (1979)	Swansea	Provides a children's creche and centre to support children aged between 1-3 years that are on the pathway of ALN diagnosis or already have a diagnosis. Children attend the centre on a weekly basis and the specialist team of play workers work with each child; parents can also access support.
<b>Families with specific needs</b>	Buddies (2000)	Swansea	Buddies supports children and families with severe learning difficulties and challenging behaviours. The aim is to develop social opportunities for young people aged 8-18 out of school to increase access to community facilities and provide families with respite. Bespoke support is provided to families with children and young people with complex and challenging needs through Saturday and after school clubs.

Children and Young People	Wales Police Schools Programme (2018)	Wales wide	This is a jointly funded prevention programme between the four Welsh police forces and Welsh Government. It aims to safeguard the children of Wales through crime prevention education by delivering age appropriate and engaging programme of learning for Year 8 pupils in schools to raise the awareness of substance misuse, domestic abuse, child sexual exploitation and mental health. It further aims to build resilience and highlight the services young people can access for additional support. The lessons and assembly deliveries reach children who have experienced ACEs. They also have a targeted ACE intervention, working with the community safety team, youth service, drug agencies and others to put on a wellbeing workshop for Year 8.
Children and Young People	KPC Youth and Community (1998)	Bridgend	This service provides open access youth provision for children and young people over 8 years primarily but also 5-7 years through after school provision. Provision includes a range of activities, support, advice, and information to help meet the emotional and physical wellbeing of young people through on-site activities as well as outreach and some on-line support.
Children and Young People	Ysgol Emmanuel Play Therapy (2020)	Denbighshire	This service provides play therapy within the school setting, focussing on children with ACEs, children who are looked after, and care leavers in an area of high deprivation. A play therapist works with vulnerable pupils, many of whom have multiple ACEs using individual therapy to overcome issues of anger, self-esteem, or loss.
Children and Young People	Youth Offending Teams	Wales wide	Youth offending teams dealing with youth with high levels of need and complexity. Practitioners in Youth offending teams deliver trauma sensitive and developmentally aware interventions to support collaborative working across multiple systems involved in these young people's lives.
Children and Young People	Primary School, Prestatyn (2019)	Denbighshire	The primary school has offered children counselling and emotional support with their families being signposted to other agencies for support since September 2019. The aim is to improve the mental wellbeing of families so that children can feel better emotionally and achieve educationally.
Children and Young People	Children and Young People's Wellbeing Support (2020)	Swansea/ Pembrokeshire	This service focusses on children and young people (5-18 years) who have been impacted by the Covid 19 pandemic. Support includes one to one support and a support plan which is tailored to the individual, this can include play, arts, crafts, cooking, and activities which build resilience, raising confidence, wellbeing, self-esteem and coping strategies.
Children and Young People	Children and Young People Support Services (2016)	Caerphilly	This service attempts to address trauma caused to children and young people when they have experienced domestic abuse within the home at an early stage. This service runs programmes including a six-week rolling programme for 8-12 year olds to access peer support; a recovery toolkit (8 weeks for a young person and 10 weeks for an adult) focussing on either ACEs recovery or domestic abuse recovery; ADAPT is a six week programme for young people (11-18) on how to recognise the warning signs of abuse and build self-esteem, this course also covers grooming and CSE/CCE. Courses are also run for parents and male victims of domestic abuse and sexual violence.

Young People	Communities for Work	Newport	This service supports young people (16-24 years) not in education, employment or training (NEET) into work by addressing barriers through mentoring, training and support. Young people are supported through individual and group mentoring in upskilling work, skills and support through training, CV writing, mentoring, interview techniques, completing job applications alongside signposting to appropriate services.
Young People	N.E.W MST Cymru (2020)	Flintshire and Wrexham	This service provides evidence based intensive home-based interventions with families where young people (aged 11-17) are at risk of care or custody as a result of engaging in anti-social behaviour and/or using substances. Using multi systemic therapy the aim is to keep young people at home where it is safe to do so and reduce anti-social behaviour. Many of the young people are considered to be at risk of criminal and/or sexual exploitation.
Young People	ACEs RTK (2021)	Carmarthenshire and Neath Port Talbot	This service provides an 8-week programme aimed at any young person who has witnessed or experienced domestic abuse. Using the Calan DVS children and young people recovery toolkit allows children and young people to become experts in their own recovery, to allow them to understand that they are not responsible for what has happened to them and to help them come to terms with their experiences.
Young People	Project Jiwsj (2002)	North Wales	This service offers targeted bespoke relationships and sex education (RSE) programmes for groups of vulnerable young people under 25 as well as to support the professional development of BCUHB staff and/or sexual health practitioners. It offers programmes to small groups of young people who have been identified as being vulnerable in some way, for example, ALN, homeless, excluded from education, LAC as well as RSE Training for the staff who support them.
Young People	Pobl Clarewood (2000)	Neath	The service provides supported housing for young people with complex needs (aged 16-25). The service also provides support to learn independent living skills in order to maintain future tenancies, such as paying bills, completing forms, maintaining flats, laundry, shopping budgeting and socialising.
Young People	Healthy Image Project (2012)	Conwy	The aim of the project is to support young people aged 11-25 years with their emotional and physical health within the community and school settings. It also offers young people the opportunity to become volunteers and peer educators. The project was developed in response to a need for young people to gain access to projects which promote positive physical and mental health, and aims to educate, empower and support young people to make positive life choices while being supported by qualified and experienced health and wellbeing youth workers.
Young People	Platform for Young People (2018)	South Wales	The service provides one to one support for young people through a 10-week wellbeing programme and peer support for young people aged 13-25. In some areas, parents and siblings are also supported with a six-week wellbeing programme as well as a peer mentoring network, training, and volunteering opportunities. The aim is to provide a space to explore wellbeing outside the traditional medical model and services and to provide ideas for everyday wellbeing strategies.

<b>Young People</b>	Enhanced Case Management (Youth Justice Board, Youth Offending Teams and the CAMHS) (2014)	Wales wide	This service supports practitioners in the Youth Offending Team to deliver trauma sensitive and developmentally aware interventions, also to enable joined up and collaborative working across multiple systems. This is in acknowledgment that there is a significant degree of trauma identified in young people in the youth justice system, increased levels of complexity and ACES however, these children are not meeting CAMHS thresholds.
<b>Young People</b>	Youth Justice Blueprint (2019)	Wales wide	This service targets children in the Youth Justice System (YJS) who have experience trauma in their early years and upbringing. This focuses on the development of trauma informed approaches and practice across the YJS through the development of the Youth Justice Blueprint and the ambition to develop a trauma informed youth justice system across Wales.
<b>Young People</b>	Emphasis (2011)	South Wales	This service provides assertive outreach support for young people aged 14-19 who have or are at risk of disengaging from education and training which impacts on the risk of youth homelessness. The focus is to support young people to re-engage with education and training since this was identified as a risk factor for youth homelessness. Additionally, ensuring that wider family and carers are also supported and signposted for ongoing support to improve their ability to parent and nurture the young person with the aim to support the young person to remain at home.
<b>Young People</b>	The Fire Setter Intervention Scheme (2015)	South Wales	The service works with young people (up to 18 years) who have been identified as involved in deliberate fire setting by providing a tailored response to meet their needs through one or multiple sessions. Cognitive behaviour therapy is used to attempt to change behaviours in the long term, working with each individual to provide a tailored response to meet their needs. The aim is to reduce deliberate fire setting, reduce the damage caused by arson and prevent individuals becoming involved in the criminal justice system.
<b>Young People</b>	Whole School Approach (BOOST) (2018)	Newport	This service works with young people, school staff, parents and caregivers to help share knowledge, offer support, and create sustainable systems around mental health in schools. They aim to challenge stigma and discrimination by raising the profile of mental health and wellbeing in schools, making it something people feel comfortable and confident to talk about. This is done by supporting and creating sustainable systems around mental health in schools through assemblies, one to one support sessions workshops and training for young people, school staff, parents, and carers.
<b>Adults</b>	Gwent Specialist Substance Misuse Services (1990)	Gwent	This service targets adults with substance misuse problem and provides treatments, often medication but also different therapeutic approaches such as Emotional Skills Training, CBT and EMDR since many patients have experienced ACE's or other traumas that often lead them to start using substances.



Adults	Barod (1972)	South and West Wales	This service provides support to individuals affected by alcohol and drugs and their friends and families. Barod specialises in substance misuse support for both adults and young people and delivers face to face services including a needle exchange and advice and support. Additionally, Barod provides advice and support to professionals, training and policy development advice and awareness raising campaigns and events. Barod also offers support to other organisations to understand the complexities of substance misuse and how to support their service users.
Adults	Cartrefi Conwy (2019)	Conwy	This service provides sound therapy, art therapy and psycho awareness sessions to tenants and others experiencing stress and anxiety in Conwy.
Adults	Domestic Abuse Occupational Therapy (DAOT) (2020)	Wrexham	The service works directly with both men and women who have experienced domestic abuse. They provide early interventions, mental health rehabilitation and self-management strategies to support wellbeing into daily routines. This approach uses a person-centred method to identify individually meaningful occupational goals and finally, to harness a network of health, social care and third sector providers to deliver appropriate support.
Adults	Adult Community Mental Health	Anglesey	The focus is on adults experiencing complex mental health issues and provide the community with therapeutic support, care coordination, medication and monitoring as well as risk management.
Adults	North and Mid Wales Law clinic (2020)	North and Mid Wales	This service provides access to free legal advice generalist advice and casework in three areas of law – family community care and employment. This service supports litigants in person at the earliest possible stage of the advice process. Through the Citizens Advice network, clients have access to free advice and can be referred to the project.
Adults	The West Wales Domestic Abuse Service (1976)	Ceredigion	The aim of this service is to meet the basic needs of the service users. The service prioritises safety and support to ensure domestic abuse survivors and their children cope and recover from the trauma. This service provides safe housing, practical advice and support including group work, counselling and ongoing support for adults and children, mentoring support and casework for up to two years.
Adults	Probation Female Offending Blueprint (2019)	Wales wide	The blueprint aims to support women to live crime free lives, improve wellbeing, reduce the number of women in the system by early intervention and addressing vulnerability. Also, to deliver a bold approach transformative services distinct to Wales and locally led, building on and learning from the successful pathfinder whole system approach model.
Adults	Clear (part of Change That Lasts) (2019)	Cardiff	Clear is an early intervention and awareness programme for men who are concerned about their behaviour within an intimate relationship. The service works with male perpetrators of domestic abuse to focus on early intervention and education awareness. Change that Lasts already had strands working with communities and professionals to recognise, respond and refer survivors of domestic abuse. The Clear strand was a partnership between Welsh Women's Aid and Respect to offer a perpetrator response.



<b>Whole Communities</b>	Gwent Community Psychology (2019)	Gwent	Working in partnerships across a range of sectors including health, Families First, social care, education, housing, the voluntary sector and sport and leisure. A team of clinical psychologist, systemic therapists and assistant psychologists work with a community of professionals to support psychological wellbeing within families. The service delivers direct work, consultation, group work, reflective practice, and training as well as project-based work relating to identified need. The more vulnerable, marginalised and those who would not meet the criteria for specialist services and yet have complex needs, referred to as the missing middle.
<b>Whole Communities</b>	The Iceberg Transformation (2018)	Gwent	The service addresses a range of problem across several projects which focus on more relational practice, using a wider lens of distress and intervention beyond traditional clinic based CAMHS. The aim is to work collectively to shift the culture to more attachment and trauma informed services with family and community strengths-based interventions.
<b>Whole Communities</b>	Antur Aelhaearn (1974)	Gwynedd	This project aims to maintain and promote the village community. The aim is to halt the trend of depopulation by providing opportunities for employment in the district by supporting the development of opportunities by attracting business opportunities. Also, to provide housing or amenities to benefit the community, to provide training and employment for adults in the community and focus on the promotion of wellbeing in the village through initiatives such as a gardening club, community owned gym and jobs club.
<b>Whole Communities</b>	Housing Support Grant (2021)	Denbighshire	Prevents homelessness through early intervention and prevention.
<b>Community Section</b>	Community Youth Project (2013)	Newport	This project supports young people (aged 6 -18) in the Maindee area of Newport. It is a youth and community project which engages young people from diverse backgrounds (including the Gypsy Roma community and the British South Asian Community) to thrive and be supported to reach their full potential. The project provides drop-in sessions, one to one session, a girls' project and an LGBTQ+ group.
<b>Community Section</b>	The Gap Wales – The Sanctuary Project (1988)	Newport	This project provides holistic support to asylum seekers and refugees including young people and families in Newport. The service aims to reduce social exclusion of asylum seekers and refugees, promote wellbeing, develop English language skills and promote volunteering. This is achieved through the provision of sports activities, English classes, social groups, advice advocacy, support and a gardening and bike project.
<b>Community Section</b>	Community Cohesion N E Wales	Denbighshire, Flintshire and Wrexham	The project aims to build capacity to support communities and individuals with protected characteristics including BAME, LGBTQ+, disability, youth, refugees, asylum seekers, gypsy and travellers. This is done through strategic support, partnership working, community and IT support, training and awareness, communications, newsletters, forums and workshops.



PROFIADAU NIWEIDIOL MEWN PLENTYNDOD  
ADVERSE CHILDHOOD EXPERIENCES

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