

The Association of Directors of Public Health

What Good Looks Like – Addressing Adversity, Trauma and Resilience in Infants, Children and Young People

Background

The physical, emotional, and mental wellbeing of infants, children and young people (ICYP) is significantly impacted by the social determinants of health into which they are born, live, learn, and grow. Exposure to adversity and the experience of trauma during this period can have long lasting consequences. Therefore, addressing these issues is a crucial public health priority.

In recent years, the impact of adversity and trauma has gained significant attention, and the understanding of the developing brain and its vulnerability to stress has led to greater emphasis on public health interventions for ICYP. Public health efforts should focus on fostering the conditions for healthy development and resilience, as well as focused action to prevent adversity and mitigate the impact of trauma.

This publication sets out features of what good looks like (WGLL) when addressing adversity, trauma, and resilience in any defined place. It is intended to serve as a guide and was developed collaboratively through the synthesis of existing evidence, examples of good practice, practitioners' experiences, and expert opinions.

This resource is designed for a wide range of professionals who work with ICYP, including those in public health, education, social care, healthcare, and community organisations. It aims to support health practitioners in their efforts to promote healthy development that seeks to prevent adversity and trauma in childhood, and builds on the natural strengths and resilience that children and young people have, and can be developed to reduce the risk of negative impacts of trauma and adversity.

Definitions

- Adversity refers to any challenging or difficult situation, event, or circumstance that can cause stress, hardship, or suffering. This could include poverty, family breakdown, or exposure to violence.
- Trauma describes an event, series of events, or set of circumstances that is the experience of an
 individual which is physically or emotionally harmful or life threatening and has lasting adverse
 effects on the individual's functioning and mental, physical, social, emotional, or spiritual
 wellbeing.
- **Resilience** is the ability and process of being able to adapt well in the face of adversity, trauma, tragedy, threats, or significant sources of stress.

There is no commonly used definition of childhood vulnerability. A child can be vulnerable due to the action or inaction by other people (eg family and school) and their physical and social environment (eg housing conditions, poverty, community crime, and violence).

However, it is important to note these factors do not inevitably lead to poorer outcomes and could result in Benevolent Childhood Experiences (BCEs), which are characterised by safety and security, positive self-perceptions and social support. It is important to provide adequate support to strengthen the protective factors surrounding children and their families.

The impact on infants, children and young people

Adversity and trauma may significantly affect a child's development, influence their relationships, and heighten the risk of engaging in risky and harmful behaviours, including health behaviours such as smoking, alcohol, and substance use, leading to poorer mental and physical health outcomes in adulthood. Children and young people who face adversity and trauma are twice as likely to engage in binge drinking and maintain an unhealthy diet, 11 times more likely to use illicit drugs, and six times more likely to experience an unplanned teenage pregnancy. They are more likely to struggle making friends and to underachieve at school. However, poor outcomes are not inevitable, and early intervention can make a positive difference. Individuals who experience more adversity often exhibit fewer resilience factors, yet the presence of resilience assets, such as a safe adult, can buffer the impact of adversity and trauma and prevent them from leading to poorer outcomes.

A whole-systems approach

The Association of Directors of Public Health (ADPH) advocates for a whole-system and asset-based approach to improving outcomes for all children, recognising that vulnerability is inherent and can increase significantly in the presence of trauma and adversity. This approach centres around the following principles:

- prevent vulnerability
- build resilience
- detect and mitigate
- intervene early when problems arise
- create the conditions through the life course where negative effects are lessened

This requires a national commitment through Government policy and funding, as well as joint working amongst partners, including public health, the NHS, housing, education, social services, planning, voluntary sector, police, and youth justice sectors to create a seamless network of support.

No single sector can tackle these complex issues alone. Instead, collaboration across the system is required to provide a comprehensive safety net for children and young people, ensuring that support is accessible and responsive to their individual needs and specific challenges.

Taking a more holistic approach at a population level avoids the potential pitfalls of focusing on singular approaches, which may only address part of the problem. This approach recognises that trauma and adversity can affect anyone at any time, regardless of pre-defined criteria. It emphasises that resilience and support are crucial factors, and that focusing solely on defined vulnerable groups may neglect those who are at risk of becoming vulnerable due to lack of access to necessary support.

Directors of Public Health (DsPH) and their teams have a crucial role to play with local partners in addressing the social determinants of health, such as housing, income, community resilience, employment, education, and creating the conditions in which ICYP can thrive.

Vision

- To encourage Governments across the four nations to reintroduce binding national targets to reduce child poverty and tackle the causes of inequalities across the life course, including prevention, early identification, intervention, and building resilience.
- To build confidence with professionals working with ICYP, and their families, to effectively address adversity and trauma and promote positive development and resilience.
- To provide these professionals with the tools, resources, and training needed to support individuals in overcoming adversity, healing from trauma, and building resilience.
- To create an accessible, inspiring, and practical resource that informs and empowers professionals to take action.
- To offer actionable guidance and strategies that can be implemented across various settings, such as schools, communities, and healthcare organisations.
- To hear and amplify the voice of the child so that children can influence policy decision making in matters related to them. Child participation is one of the core principles of the <u>Convention on the Rights of the Child</u> (CRC). This principle asserts that children and young people have the right to express their views, and there is an obligation to listen to children's views and facilitate their participation. This includes, but is not limited to, participation within their families, schools, local communities, public services, institutions, Government policies, and judicial procedures.

Principles

- **Evidence-based practice**: All strategies and interventions should be grounded in the latest research and best available evidence to ensure they are effective and impactful.
- Collaborative: Promoting and enabling collaboration between schools, families, health and social
 care services, and community agencies is essential to building a comprehensive support network
 for ICYP and to enable co-creation and co-production of a support network that meets their needs.
- Prevention and early-intervention: A fundamental shift towards prevention and early intervention
 is critical to supporting children from the earliest stages of life. By identifying and addressing
 adversity and trauma early on, interventions can prevent the escalation of issues and help children
 lead healthier, more fulfilling lives.
- Whole family approach: Preventing and reducing the impact of childhood adversity requires a
 whole family approach. Depending on the resources available locally, we recommend a focus on
 positive parenting and healthy family relationships.
- **Trauma-informed approach:** A trauma-informed approach recognises that trauma exposure can impact an individual's neurological, biological, psychological, and social development.
- Trauma-informed care: Trauma-informed care is a critical principle in addressing the needs of
 children and young people who experience adversity. This approach recognises that service users
 may have experienced trauma that services do not routinely consider. It also involves recognising
 the widespread impact of trauma and ensuring that all interactions, services, and interventions are

- delivered in a way that is sensitive to the individual's past experiences, thereby improving our ability to identify and mitigate the harms caused by adversity and trauma.
- Cultural sensitivity: Cultural factors, such as ethnicity, religion, language, and socioeconomic
 background can shape how children experience and respond to adversity and trauma. Practitioners
 must be mindful of these differences, ensuring that interventions are tailored to the cultural
 contexts of the families they serve.
- Resilience building: Interventions should aim to build on the assets and strength children and
 families already have, to further develop their skills, resources, and environments that promote
 resilience. Resilient children are more likely to overcome adversity and thrive in the face of future
 challenges, leading to better long-term outcomes.
- Local system leadership: Local leaders play a key role in coordinating efforts across sectors,
 mobilising resources, and driving system-wide change. Local system leadership helps create a more
 integrated and comprehensive approach to supporting ICYP by changing culture, upskilling staff,
 and mobilising community assets. Leadership at the local level also ensures that interventions are
 context-specific and can be adapted to each community.

Key features of WGLL

A focus on addressing health inequalities

As professionals working towards addressing adversity, trauma, and building resilience in ICYP, we should recognise and address the disproportionate impact of adversity and trauma on marginalised communities. Implementing targeted interventions that are responsive to specific needs of these populations and ensuring equitable access is important. By engaging with community leaders and organisations we can ensure services are relevant and accessible.

Early intervention

Systems should be in place to identify ICYP at risk of or experiencing adversity and trauma as early as possible. This often involves routine screening and assessment across different settings, including healthcare and education, which are trauma-informed and recognise early warning signs to support early identification and mitigation.

A well resourced workforce

Having a well-equipped workforce to deliver trauma-informed care, as well as dedicated staff who focus on these approaches and do not see them as 'added on' tasks, including education and training for said staff, is key to addressing adversity, trauma, and building resilience. Processes should be in place to support staff emotionally eg through peer support and proactive reflective practice supervision, as well as training and education on the impact of trauma and safe strategies to address it.

We should invest in the development and retention of a skilled and diverse workforce and foster collaboration between different agencies and sectors to ensure coordinated and integrated care across the children's sector.

Ongoing evaluation and improvement

Actively processing feedback from staff and service users can inform service development and improvement. Having robust evaluation frameworks to measure outcomes and track progress demonstrates continuous improvement in practice.

Measuring our achievements

Achievements can be monitored and evidenced using the data sources and tools listed below:

- PHOF Vulnerable Children and Young People profiles for measuring impact at a population level.
- The Supporting Families Programme Outcomes <u>Framework</u> suggests data measures that support wider sharing of good data practices across local authorities and across Government.

Resources

A suite of case studies highlighting approaches taken to addressing adversity, trauma, and resilience within different organisations.

- <u>Trauma-informed toolkit</u> developed by the Safeguarding Board Northern Ireland.
- Our Way of Working is about developing a common and consistent approach to working with families. Training for you was developed to support teams to embed 'Our way of Working', as well as additional resources for support.
- The <u>trauma-informed practice: Toolkit</u> has been developed to provide those working with ICYP with clear, tangible examples of where trauma-informed practice has been successfully embedded across different sectors of the workforce and how that learning can be applied in a range of contexts. This resource has been replaced by the <u>Roadmap for Creating Trauma-Informed and Responsive Change.</u>
- <u>Trauma-informed Wales</u> outlines a societal approach to understanding, preventing and supporting the impacts of trauma and adversity.
- <u>Trauma-informed Lancashire</u> provides a range of resources to support trauma-informed ICYP work, including a <u>Trauma-informed Organisational Development Framework: A Self and Peer Evaluation Toolkit</u> and a trauma-informed audit tool.
- Working with Trauma Quality Mark is a set of good practice standards in trauma-informed working. A practical and accessible tool to help organisations review, develop, and evidence trauma-informed practice throughout their organisation.

About ADPH

ADPH is the representative body for DsPH in the UK. It represents the professional views of all DsPH as the local leaders for the nation's health.

The Association has a heritage dating back over 160 years and is a collaborative organisation, working in partnership with others to strengthen the voice for public health. It seeks to improve and protect the health of the population through collating and presenting the views of DsPH; advising on public health policy and

legislation at a local, regional, national and international level; facilitating a support network for DsPH; and providing opportunities for DsPH to develop professional practice.

About What Good Looks Like

The WGLL programme aims to facilitate the collective efforts of local organisations and wider society towards improvements in their population health outcomes. This publication represents the practical translation of the core guiding principles of the new Quality Framework for the Public Health system and features of WGLL when addressing adversity, trauma, and resilience in ICYP in any defined place. It was developed collaboratively through the synthesis of existing evidence, examples of good practice, practitioners' experiences, and consensus expert opinions. It is intended to serve as a guide and will be iterative with regular reviews and updates when new evidence and insights emerge.

ADPH would like to acknowledge the contribution of the <u>Infants, Children and Young People's Project</u> Advisory Group, Linda Dobraszczyk (retired Public Health Children's Commissioner) and Dr Warren Larkin (Managing Director, Warren Larkin Associated Ltd and Consultant Clinical Psychologist).

References

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