



ACEs

Adverse
Childhood
Experiences

Be the Change



Integrating family approaches:

How knowledge of ACEs, Trauma, Signs of Safety, Building Better Futures and Think Family NI can collectively support compassionate and effective practice

Arts Care



Introduction

This leaflet is designed to illustrate current models and approaches which are being used in the statutory, community and voluntary sectors in Northern Ireland. All have a role to play in families' lives, at different times, depending on need. They can complement each other and be integrated to inform a practitioner's 'tool kit'. The commentaries beside each image are generalised so that practitioners can apply the models or approaches to their own work.

The fictional family portrayed in the leaflet are on a journey toward recovery and a better future. Practitioners are illustrated interacting with members of the family in different settings (a school's nurture or play room; an office or counselling room in a centre; a family home) using a range of approaches and models but with a consistently compassionate, child centred and trauma informed approach. They are also observed working in partnership with each other and the family. The role or profession of the practitioners is not made explicit as the approaches and models can be used by a range of disciplines to different extents e.g. by social workers, health visitors, community psychiatric nurses, GPs, family support workers, teachers, school nurses, counsellors, youth workers or mentors.

This leaflet is not a substitute for training in each of the models and approaches; the aim is to highlight where they interlink and how they complement each other in the best interests of the family. These approaches and models should be used to inform practitioners' assessments, their direct work with individuals and families, and guide discussions in professional supervision and in decision making fora.



The models and approaches are:

- ▶ **Adverse Childhood Experiences (ACEs): Using a Trauma 'Lens'**
An approach led by EITP Trauma Informed Practice Project managed within the SBNI (Safeguarding Board Northern Ireland), based upon the international research, particularly referencing the Welsh study¹. The project supports the workforce's understanding of ACEs through the application of a trauma lens, and to consider how children, families and adults may have been impacted by experiences of adversity and trauma. Using a trauma lens means: realising the potential impact adversity can have upon children and adults; recognising that behaviour can be the expression of trauma and adversity; committing to resist re-traumatisation of people engaging in our systems and services, as well as our workforce, by responding compassionately and effectively².
- ▶ **Signs of Safety**³ is a process model which involves rigorous and balanced risk assessment from first becoming involved with a family until the network is working well enough that social services input is no longer needed. The focus is upon the everyday living arrangements of children actively maintained and monitored within a network of the people naturally connected to them. It comes from a solution focussed approach and sets out a method of how professionals work with families and their support networks, considering harm and safety.
- ▶ **Building Better Futures (BBF)**⁴ is an evidence informed framework for assessing and enhancing parenting capacity with families where children are in need of support or protection. It outlines core dimensions of parenting to guide practitioners' assessments and

inform strategies to enhance parenting; offers a framework for analysing the facts and feelings arising from the assessment; and a summary of tools for gathering information. BBF aims to facilitate relationship-based, strengths focused practice; it is child-centred with an emphasis on enhancing the child's safety, identity, security, stability and lived experience; and views parenting within the family's ecological context.

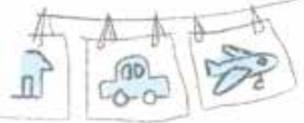
- ▶ **'Think Family' Northern Ireland** uses The Family Model⁵ as the framework to promote family focused conversations in families where there are parental mental health issues. The model provides a systemic approach to parental mental health issues by looking at the present (living with mental illness), looking back (at the childhood origins of adult psychopathology) and looking ahead (at needs of support, potential for recovery and the need to intervene early in terms of age or onset of issues). Everyone is affected when someone is ill; getting the balance right between mental health issues and parenting, and how they can each affect the other, is an important determinant for family recovery. So too is the quality of contact and engagement between the parent with mental health issues, their families, practitioners and services involved. Consideration of the natural support networks surrounding the family: e.g. extended family, friendships, voluntary, community sector and what professional supports may be effective, will also support individual and family recovery.

1 Bellis et al 2014, 2018; www.pbw.nhs.wales
2 SAMHSA 2014; Treisman 2018
3 Elia International Ltd. www.elia.ngo
4 EITP Houston et al
5 Falkov 2012





SCHOOL OFFICE



$2+7=$
 $7-5=$
 $8-7=$

I need to understand what has been happening to her.

Uh-oh, Mum said not to talk about Daddy, but I forgot. I get mixed up sometimes. Mr. Hughes brings all these things for me to play with, I can forget about what is worrying me.

I like having juice and toast with Mr. Hughes

NURTURE ROOM

Understanding Behaviour

The picture shows the child expressing herself through a range of behaviours which the school pick up on: she is falling asleep in class; she has few friends; or when she does interact with peers she seems to bully or be aggressive.

A practitioner informed by the approaches may use elements of each of the models when working with a child by:

- ▶ creating a safe space within the setting which is calm and child centred
- ▶ providing for basic needs, nurturing the child with food, warmth and attention
- ▶ listening to the child by: observing behaviours and considering what those behaviours are communicating about what the child feels
- ▶ providing opportunities for the child to communicate through a range of mediums (play, games, stories, music as well as talk)
- ▶ communicating clearly to the child
- ▶ supporting the child to feel safe through validating their feelings and recognising their behaviour as potentially the language of trauma
- ▶ taking time, talking gently, warning of any change, sitting beside the child - not in front
- ▶ building a relationship: being open, clear, using child centred language, asking the right questions, using child centred tools, gaining a picture of the child's day to day experience and how the adults in their life respond to the child's needs
- ▶ offering reassurance: removing blame, shame and guilt, offering understanding of parental issues as needed (e.g. parental mental ill health); being committed to not re-traumatising
- ▶ discovering the child's hopes and dreams through active listening and the use of therapeutic play tools and offering hope of change





I wonder what has happened to him?
He looks exhausted.



He is the first person to
ask me if I was OK.
I didn't realise the impact
my mental health was
having on my family.

LOCAL
SUPPORT
Aware NI
PIPS
Men's Shed
INSPIRE
RELATE

I see you have a lot to
manage at the moment.
How are you doing?
How are the family?
What support have you
had already? How can I
support you?

