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## How the police conceptualise and view the relevance of Adverse Childhood Experiences (ACEs) for policing

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**How the police conceptualise and view the relevance of Adverse Childhood Experiences (ACEs) for policing: a qualitative investigation**

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## Abstract

### Purpose

Knowledge about the prevalence and impact of Adverse Childhood Experiences (ACEs) is pivotal to trauma-informed approaches, yet the impact of ACEs training is rarely investigated. This study reports a qualitative investigation of police perceptions of ACEs training in relation to conceptualisations of ACEs and trauma-informed working, practical applications of ACE knowledge and service-level support.

### Design/methodology/approach

Four focus groups were conducted with 29 police officers, who had participated in an ACEs-awareness training. Based on the qualitative data, themes were generated using reflexive thematic analysis (Braun and Clarke, 2019).

### Findings

Analysis generated seven themes, conceptualised into three domains of conceptual understanding, police culture and operationalising ACEs.

### Practical implications

The study highlighted that a lack of conceptual framework, officer concerns and police culture may present barriers to officers incorporating ACEs knowledge into their day-to-day work. Future trainings should address these issues to achieve maximum benefits.

### Research limitations/implications

The sample is limited to Scottish police officers and is ethnically non-diverse. Further evaluation of higher quality interventions is warranted.

### Originality/value

To our knowledge, this is the first in-depth qualitative study of police officers' perceptions of ACEs training. Focus groups facilitated the expression of cultural norms. The results provide insight into tailoring trauma-informed interventions in police in future, as well as raising broader service-level issues.

Keywords: ACEs; trauma; police; trauma-informed approaches; mental health

## ACEs and policing

## Introduction

Trauma informed approaches represent a major paradigm shift in the conceptualisation and implementation of services, across a wide variety of settings, including police (Ko *et al.*, 2008). Trauma informed approaches are underpinned by both awareness of the prevalence of adverse childhood experiences (ACEs; Felitti *et al.*, 1998, Merrick *et al.*, 2018), and increased understanding of the potential sequelae of trauma across the lifespan (Anda *et al.*, 2006). Understanding the ubiquity and sequelae of ACEs may be of particular relevance to police for two reasons. Firstly, accumulating evidence supports the view that ACEs are associated with an increased risk of crime involvement across the lifespan (Fleming and Nurius, 2020), and secondly, police officers are increasingly responding to welfare or vulnerability incidents that are directly or indirectly related to ACEs, such as child maltreatment, substance misuse or mental health issues (College of Policing, 2015).

Evidence from other sectors, such education and healthcare, suggests that ACEs training can positively impact staff attitudes and behaviour (Miller-Cribbs *et al.*, 2020; Steen *et al.*, 2022). However, the police is an institution with organisational and cultural features that differentiates it from other public-facing services (Brough *et al.*, 2016; Kurtz, 2008) and there is paucity of research on police officers' responses to ACEs training. In this study we conducted a qualitative investigation of officers' responses to ACEs training, with a view to elaborating their conceptualisation of ACEs and trauma-informed approaches, their views on practical implementation of ACEs knowledge and their perception of service-wide support.

## Background

The term adverse childhood experiences (ACEs) has been consistently used to refer to a specific set of experiences that include child abuse (physical, sexual or emotional), child neglect (physical or emotional) and household dysfunction (parental separation or divorce, intimate partner violence against mother, household member who is incarcerated, misuses substances or has mental illness (Felitti *et al.*, 1998; Anda *et al.*, 2006). The co-occurrence of multiple forms of child maltreatment and family dysfunction is common (McCutchen, *et al.*, 2022) and has an additive effect in relation to risk for negative outcomes (Dong *et al.*, 2004).

## ACEs and policing

The ACEs concept draws on developmental psychopathology theory to elucidate how repetitive activation of physiological stress responses system through exposure to chronic or significant stress has the potential to impact the neurobiology during development (De Bellis 2001; Shonkoff, 2016), impeding capacities related to stress management and decision making (Danese and McEwen, 2012; Milojevich *et al.*, 2019; Wesarg *et al.* 2020). Additionally, ACEs have also been associated with dysfunctional behaviours and coping strategies including substance misuse, aggression and violence (Braga *et al.*, 2017; Bellis *et al.*, 2014; Mersky *et al.*, 2013) and with risky behaviour such as gang involvement (Wolff *et al.*, 2020). In sum, ACEs scores may denote unfavourable life circumstances and psychosocial vulnerabilities that overlap with known crimeogenic factors (Ford *et al.*, 2012; Fritzon *et al.*, 2021).

As well as being conceptualised as an additive risk factor for mental and physical health conditions in later life (Anda *et al.*, 2006; Hughes *et al.*, 2017), recent research confirms that ACEs can increase the risk of crime involvement across the lifespan (Craig *et al.*, 2017), both in generalist offenders, as well as those who commit serious offences (Levenson and Grady, 2016; Reavis *et al.*, 2013). This is further evidence by the disproportionately high rates of ACEs in young offenders and in those serving prison sentences (Ford *et al.*, 2019; Fleming and Nurius, 2020).

The nexus between ACEs and criminal justice involvement is of increasing interest, as it proposes new ways for thinking about police responding. This is particularly relevant at a point where the majority of calls to UK police concern issues of vulnerability or public welfare, rather than crime (McManus, *et al.*, 2018; Police Foundation, 2020). Although widely criticised for being reductionist (Bateson *et al.*, 2020), the ACEs concept has been instrumental in gaining public interest in trauma-informed approaches across a range of public-facing systems services, such as education, criminal justice and social work (College of Policing, 2018; Champine *et al.*, 2019).

The terms 'trauma-informed approach', 'trauma-informed care' and trauma-informed practice are underpinned by ensuring that a service and its providers are aware, sensitive and responsive to the impact of trauma (Hanson and Lang, 2016; Harris and Fallot, 2001). Lack of consensus in the definition of a trauma-informed approach

## ACEs and policing

has been identified as a barrier to creating trauma-informed systems, leading to Hanson and Lang (2016) operationalising the most commonly identified elements of trauma-informed care across seven frameworks. The mapping yielded three domains of: staff training on trauma and its impacts; trauma-focused services (such as evidence-based practice) and organisational environment and practices (safe environment, trauma-awareness policies). This mapping incorporated the commonly-cited Substance Abuse and Mental Health Services Association (SAMHSA, 2014) key assumptions of trauma-informed approaches, which are *realising* how trauma can affect individuals, organisations and communities; *recognising* the signs of trauma in service users and providers; *responding* in trauma-informed ways, and *resisting re-traumatisation*.

The shift towards a culture where individuals believe in the value of trauma-informed working requires staff to be aware of prevalence and impact of early trauma (Elliott *et al.*, 2005), and ACEs training has been shown to result in positive attitude change for service users and staff in a number of sectors (Miller-Cribbs *et al.*, 2020; Steen *et al.*, 2022). In addition, there is limited evidence that ACEs interventions lead to positive attitude change in police, but limited evidence of change in behaviour (Ford *et al.*, 2017).

Moving towards trauma-informed practice requires a cultural shift that is likely to be more challenging in cultures where members have strong commitment to informal organisational values and norms (Brown, 2007; Vaswani and Paul, 2019). Although slowly changing, police culture is characterised by cynicism towards the public, authoritarianism (Brough *et al.*, 2016; Cordner and Cordner, 2011) and a hyper-masculine approach that emphasises dominance and emotion suppression (Kurtz, 2008; Velazquez and Hernandez, 2019).

Perceptions of ACEs and trauma-informed training are rarely investigated within the broader context. Instead, as Bloom (2016, p.387) notes there exists 'a belief that simply expecting staff to attend a training about trauma or about adverse childhood experiences means that programs are now trauma informed'. In this study, we explored the perceptions of Scottish police officers of an ACEs-awareness training event. In this study, a service-level implementation of ACEs training provided a unique opportunity to investigate in depth officers' views. The study aims were to

## ACEs and policing

investigate officers' conceptualisations of ACEs and trauma-informed; their perceptions of the relevance of the training for practice, and their perceptions of service-level support.

## Method

## Participants

Participants were 29 police officers recruited from a single division in Police Scotland, comprising 24 were police constables and four were detective constables (Males = 62%) Participants were required to provide only work-related demographic information, thus age was not requested. Length of service with the police ranged from 3.5 to 23 years ( $M = 13$ ,  $SD = 5.07$ ). Demographic information is provided in table 1.

## Procedure

Eligible participants had attended an ACEs training session, comprising a screening of an ACEs documentary followed by a 30 minute panel discussion between individuals with lived experience of ACEs and practitioners from other services, such as social work. The purpose of this was to illustrate, through case studies, the relevance of ACEs to policing.

Prospective participants were emailed a link to an online survey comprising the participant information sheet. Participants who consented were invited to a focus group in their locality. A partial convenience sample was recruited to represent geographic location (three geographical hubs), gender and role. A further specialist group of officers working in the Public Protection (PPU) was recruited, on the assumption that ACEs training would be most relevant to this group. The intention to recruit 8 participants per group was achieved, with the exception of the PPU group, where only 5 could be recruited within the time constraints. Data was collected between 13/09/19 and 25/09/19. Focus groups were chosen, as they are particularly good at revealing group norms and meanings (Bloor *et al.*, 2001).

The focus groups, led by KD, lasted on average 69 minutes (range = 57-80 minutes) and were guided by a semi-structured interview schedule. All authors contributed to the design of the schedule. Questions were designed to probe participants' perceptions of the training and any change in practice since the training.



## ACEs and policing

conceptualisations of trauma-informed, service-level support and relationship to police trauma. Ten questions were generated including, “Can you tell us what your first impressions were of the ACEs event?”, ‘How much do you feel you know about being trauma-informed?’ and ‘Can you see any benefits for you in having knowledge of the impact of adverse childhood experiences or working in a more trauma-informed way’? The focus groups were audio-recorded and transcribed verbatim.

## Ethical considerations

The study received ethical approval from the host research institution and permission to conduct the research from the relevant police academic unit. The third author (KD) collected all data. KD used her previous policing knowledge to build rapport but positioned herself as a researcher external to the organisation. Detailed debriefings followed the focus groups, including signposting participants to external support organisations.

## Data Analysis

Data was analysed using reflexive thematic analysis (TA; Braun and Clarke, 2006; 2019), a set of approaches designed to identify patterned meaning in a dataset. It is particularly suited to investigating people’s views, perceptions, or understanding of a given phenomenon (Braun and Clarke, 2006). A critical realist approach, which assumes a reality evident in the data, was used. As per Braun and Clarke (2006) guidance, the excerpts were read by the first author (KG) for familiarisation. Initially, each segment of the data that was relevant to the research questions was coded. Open coding was used, therefore coding was modified on an ongoing basis. These codes were then reviewed by the third author (ZB) and KG identified initial themes. Themes were reviewed with ZB, modified and developed to ensure that themes represented the entire coded data. KG and ZB led on generating a coherent narrative for themes.

## Findings

The findings are represented in Table 2, which displays themes and domains, with illustrative quotes from participants.

## Conceptual understanding



## ACEs and policing

1  
2  
3 The first domain encompasses officers' understanding of the ACEs concept and its  
4 relationship to policing and trauma-informed practice.  
5  
6

## 7 ACEs as a common sense issue

8  
9 In discussing the relevance of ACEs knowledge for police work, participants made  
10 occasional references to the documentary, but predominantly articulated their own  
11 conceptualisations. In doing so, they frequently expressed the view that the link  
12 between early life adversity and involvement with crime was common sense  
13 knowledge to police officers:  
14  
15  
16  
17

18  
19 I think we've always known about it. I think ACEs has just gave it a name.

20  
21 [P4]  
22

23 Officers attributed their knowledge of the relationship between ACEs and crime to  
24 their length of service. One officer noted that, on entering the police at age eighteen:  
25  
26

27 I wasn't quite as open-minded when it came to the, kind of, ACEs stuff but I  
28 think it's more age and experience that, you know, made me realise and  
29 appreciate, you know, just how much, you know, your upbringing and, you  
30 know, these kinds of emotional incidents can have on your life and your  
31 behaviour later on in life. [P28]  
32  
33  
34  
35

36 In presenting ACEs-awareness as knowledge that could be learned 'on the job',  
37 participants positioned the training as lacking in new insight, particularly for officers  
38 with longer service histories. However, a small number of participants expressed a  
39 view that that being ACEs-aware might lead to more curiosity about people's  
40 behaviour:  
41  
42  
43  
44

45 ...but I think if anything it just maybe gave us that, we'll stop and think for a,  
46 for a moment, maybe there is, we still deal with it in the same way but there is  
47 obviously things going on the in the background that have, why this particular  
48 person is presenting as they are. [P14]  
49  
50  
51  
52

## 53 Personal autonomy as a barrier

54  
55 Participants also raised a fundamental issue relating to how they could practically  
56 apply ACEs-awareness. Views on whether or not previous adversity was relevant  
57 for an individual's current situation was dependent on how much personal autonomy  
58  
59  
60

## ACEs and policing

an individual was viewed to have. Empathy for children was unanimously expressed, with participants noting a reluctance to charge a child. Embedded within this view was a recognition that formal involvement with the criminal justice system could further exacerbate a negative life trajectory:

...probably the best example I can use is - we've all been there - when it's been a fifteen-, sixteen-year-old just about to get to that magical age, and we've all thought, 'I [can't] wait to next month to give you the jail'. See if you're thinking that, I think something else needs to happen first, so, due to what's happening, with the way that we're feeling, doesn't then transpose onto potentially affect somebody, like, say getting to a positive destination, i.e. employment. [P20]

However, in relation to adults, participants viewed early adversity as being less relevant and offered autonomy as a reason. Adults were viewed as having higher levels of personal autonomy, meaning that even those who had experienced significant adversity would elicit limit empathy, as the assumption was that they could make informed choices about their own behaviour:

Sometimes, we do need to decide, right, we need to do this. But quite often it will, as we've said, it will come down to their behaviour. That, they're in control of that ultimately. [P12]

Thus, although participants asserted that they were aware of the link between childhood adversity and later behaviour, beliefs about personal autonomy were more dominant than the link between ACEs and impulsivity, poor decision making or limited life choices.

What is trauma informed?

While ACEs knowledge was positioned as common sense, officers expressed a lack of clarity about how knowledge about ACEs related to being trauma-informed.

It was the documentary, you were shipped in, you were shipped out and then you were trauma-informed and I have no idea of what that means. [P5]

In the absence of this framework, participants drew on their own conceptualisations of trauma-informed. These centred predominantly on two aspects: directly

## ACEs and policing

1  
2  
3 addressing trauma or mental health concerns in people who came into contact with  
4 the service and prevention of ACEs within society. The former conceptualisation led  
5 to a strong rebuttal that mental health support was the remit of police officers:  
6  
7

8  
9 And I think as a campus officer you've got a bit more scope to enquire into the  
10 background and maybe point them in the right direction, but I don't think our  
11 job as police officers is to be mental health support for people and to try and  
12 fix their life. [P17]  
13  
14

15  
16 Focusing on the preventative aspect of trauma-informed practice supported a  
17 view that the police was not the service to respond to the ACEs and that other  
18 services were more appropriate:  
19  
20

21  
22 So, for us to try and stop children from getting ACEs it needs to be targeted at  
23 the people who are causing the ACEs, so to me that's more health and social  
24 work than the police. [P29]  
25  
26

27  
28 Overall, ACEs were conceptualised as an intractable public health issue which  
29 was too broad for police to address:  
30  
31

32  
33 I think it starts with health. I think it starts with, even before women are  
34 pregnant, before they're born and it's a huge social issue. I don't know that it is  
35 for Police Scotland to fix, but I think it's a Scotland-wide issue. [P7]  
36  
37

38  
39 Paradoxically, conceptualising trauma-informed approaches as mental health  
40 support or prevention of ACEs, led to an under-recognition of practices that were  
41 aligned with a trauma-informed approach. Participants mentioned recognising  
42 vulnerability and responding by adjusting language or social engagement with the  
43 person, however, this was not characterised as trauma-informed:  
44  
45

46  
47 If someone's breaking the law, they're breaking the law to an extent, and,  
48 yeah, you can be a wee bit more compassionate in dealing with them or, you  
49 know, whatever, you can change your approach, your personal skills [with]  
50 that person while you're dealing with them, but we're limited as to what we can  
51 really do and it almost feels like, it's good to have an awareness of it but the  
52 actual *mechanics* of it, and put in to practice, would really fall with other  
53 agencies. [P28]  
54  
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## ACEs and policing

The current understanding of trauma-informed approaches as being focused on young people and prevention of ACEs was a barrier to participants being able to imagine how trauma-informed approaches could be rolled out across a Division.

### Police culture

Domain 2 focuses on themes relating to implicit culture within policing.

### Policing is about crime

Although participants conceded that knowledge about ACEs was helpful to some extent, it was viewed as only subsidiary to core policing work, which officers highlighted is focused on solving and preventing crime:

I get all that [ACEs], but first and foremost I think we're, we're police officers and we've got a job to do. [P20]

In support of this, participants offered the view that the training that police receive is focused predominantly on public safety and crime reduction, leaving them with limited ways in which they could respond:

And I think as police officers what needs to be obviously highlighted, we don't have very many disposals in our bag, [know] what I mean. We, we're there to uphold the law and the kind of tool we've got, if you like, is, is charging folk and obviously incarcerating folk. [P20]

Participants frequently offered examples of scenarios where physical safety was threatened in the moment. These examples highlighted concerns that taking trauma-informed approaches would have the potential to increase risk for police officers or the public:

I'm thinking of my own safety, my colleague's safety, and if they're kicking off and being violent to the extent that they need to be restrained, then they'll be restrained. [P28]

### What about us?

A key aspect of a trauma-informed service is that it recognises and responds to trauma in service users and service providers. The majority of participants expressed the view that trauma impacts were under-recognised in the police. This was

## ACEs and policing

1  
2  
3 highlighted by comparing police responses to those of other services, following a  
4 traumatic incident:

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6  
7 I think where the, when you see other emergency services especially, we're the  
8 worst that, they don't care. Like, I went to a cot death once and the ambulance  
9 service that dealt with that were off the street for the rest of the day. Their, I  
10 think it's an Inspector, came in and said 'that's you done', and we went up and  
11 took statements from them all and not one person said, 'how does, how's that  
12 affected you? [P8]

13  
14  
15 It was acknowledged that formal support options did exist, but these were rarely  
16 accessed, partly due to the prevailing culture where resilience was defined as the  
17 ability to keep going, despite exposure to trauma:

18  
19  
20 I think the mechanisms are there to do it but I don't think it's really-, I think it's  
21 just that attitude that you always get in the police, you just get on with it. [P28]

22  
23  
24 Discussions with colleagues, 'banter' and black humour were discussed as  
25 alternative debriefing methods. These were preferred to service-level responses  
26 that did not align with the prevailing culture:

27  
28  
29 ...it was all done in the best, with the best of intentions but to actually have the  
30 group, a couple of counsellors come down and speak with this, you know, as a  
31 shift, they didn't really get a positive response from that. [P9]

32  
33  
34 In doing so, participants described a paradox where they felt unsupported by the  
35 service, yet service-level provision of support was characterised as at odds with  
36 officers' views of the support required. There was a recognition, by some officers,  
37 that the current attitude towards police trauma was a limiting factor in police  
38 divisions adopting trauma informed approaches in relation to the public. On  
39 participant likened it to families with intergenerational adversity:

40  
41  
42 So, if we're talking about learned behaviour, and we're talking about, this is the  
43 way that families are going because they've got all these experiences, and it's  
44 all, like, a lot of it's learned behaviour in the family. Well, learned behaviour in  
45 the workforce; we're getting treated that way - what's the workforce going to be  
46 treating everybody else like? [P17]

## ACEs and policing

## Operationalising ACEs

The third domain comprises themes that encapsulate the extent to which officers believed that ACEs awareness could be incorporated into day-to-day police work.

It makes no difference

Providing ACEs awareness training, without concrete examples about how it should be implemented, was viewed as likely leading to little change. Using ACEs knowledge to respond at the individual level was not viewed as actionable, without any changes to policies or procedures:

But if they actually said, they're bringing procedural changes, or asking us to do something specific it would be far more worthwhile, I think. [P28]

Positioning police work as procedurally-bound, with little flexibility for responding on an individual basis, led to a view that a trauma-aware approach would not lead to differences in practice. This was linked to a view that officers should be changing what they did, rather than how they did it:

We're dealing with it as an incident-based thing, so if they've tried to commit suicide, we'll be passing it on to social work. We won't be saying, 'Oh well, they're feeling a bit low, but actually they've had a lot of stuff in their past, so we'll do something different with it'. We're dealing with it the exact same, so it makes no difference. [P25]

However, in some cases, there was an assertion that day to day work could be carried out within the confines of current procedural guidance, while still taking a trauma-informed approach, through recognising vulnerability and responding accordingly:

I think it does kinda get to the prevention in it, prevention kind of side of it, but I would still think about it, see if I'm taking a statement from an adult, I still have it in the, kind of, back of my mind, that the statement might not go as well as what I wish it to go and I might need to take a bit of, kind of, extra time, to get what I'm looking for. [P1]

## Conflict with responsibilities



## ACEs and policing

1  
2  
3 Based on their current perception of trauma-informed practice, participants raised  
4 concerns that being trauma-informed might conflict with what they viewed as core  
5 policing work: solving crime and protecting members of the public and colleagues.  
6 They equated a trauma-informed practice with being more lenient or employing  
7 practices that might potentially conflict with their capacity to carry out police work  
8 effectively. There was a tension between practices that were viewed as trauma-  
9 informed and the role of the police to prevent and deal with criminality.

10  
11  
12  
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15  
16 I mean, people either want us to get drugs off the street or they want us not to  
17 potentially emotionally upset a young child. Because you can't always do both.  
18 [P28]

19  
20  
21  
22 Where a perceived conflict existed, participants believed that what they viewed as  
23 their primary role should take precedence. In particular, it was viewed that trauma-  
24 informed approaches were less likely to be considered in situations where risk to the  
25 public was a factor. Risk-focused training meant that public safety would take  
26 precedence over concern for the wellbeing of those involved in the situation:

27  
28  
29  
30  
31 ...if we were to go to a call that involves a child, albeit you might be thinking  
32 about ACEs and stuff like that in the back of your head, in reality is it going to  
33 change the way you deal with that call? Probably not, right. Because your first,  
34 your first and foremost, thought is protecting that member of the public. [P19]

35  
36  
37  
38 Participants also expressed the view that taking a trauma-informed approach could  
39 lead to negative consequences, for which they would be accountable to senior  
40 officers and colleagues:

41  
42  
43  
44 If [young people] then run away or whatever then it's, you're talking a high risk  
45 – missing, missing kids and stuff like that - and the question would be put on  
46 you, why did you not have the handcuffs? Why were they not restrained  
47 properly?" [P13]

48  
49  
50  
51  
52 The predominant view was that trauma-informed approaches involved being more  
53 compassionate and more lenient in terms of everyday interactions and sentencing.  
54 Officers were particularly aware that considering the background of individuals who  
55 commit crime might conflict with their duty towards other members of the public:



## ACEs and policing

1  
2  
3 Whereas, the old people, the vulnerable people in that street are saying, 'Well  
4 actually, we're being targeted by that young person; we're suffering, we're  
5 stressed.' So, we've got a duty to them, as well, and it looks as though, with  
6 the things coming out, that we might be, appear to be getting soft in our  
7 approach. So, it's a difficult balance. [P25]  
8  
9  
10  
11

12 Thus participants identified a number of areas where they believed trauma-informed  
13 approaches, as they currently understood them, would compromise their role in  
14 terms of safety, attending to what they viewed as the key purpose of the role and  
15 their performance as rated by their seniors, colleagues and the public.  
16  
17  
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## Discussion

20  
21  
22 Understanding the potential life-long impact of ACEs is pivotal to principles of  
23 trauma-informed practice (Piotrowski, 2020). However, it is commonly assumed that  
24 providing ACEs training will lead to a service becoming trauma-informed (Bloom  
25 2016), without accounting for the heterogeneity of organisational contexts. In this  
26 study, although officers were generally positively inclined towards the training, they  
27 perceived that it provided limited novel insight. Officers readily acknowledged the link  
28 between ACEs and a negative trajectory in children, but offered the view that adults  
29 have choice and agency over their own behaviour and outcomes, regardless of their  
30 early experiences. This view has parallels with Caveney *et al's* (2020)  
31 conceptualisations of 'proper' and 'improper' victims, where sympathy for victims of  
32 crime was tempered by the extent to which they were viewed to have made choices  
33 that facilitated the crime. Viewing the adult public through an ACEs lens is also likely  
34 to be moderated by a prevailing 'us and them' element of police culture, involving  
35 cynical attitudes toward the public (Boivin *et al.*, 2020; Terrill *et al.*, 2003).  
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47 As the training did not explicitly clarify the relationship between ACEs and trauma-  
48 informed approaches, officers drew on their own conceptualisations of trauma-  
49 informed, characterising it mainly as prevention of the occurrence of ACEs and  
50 providing support for traumatised individuals. Coupled with a view that the ACEs  
51 issue was intractable, these conceptualisations supported a view that trauma-  
52 informed approaches were more suited to other services, such as social work.  
53 Notably, some officers described interactions that could be characterised as trauma-  
54 informed (such as taking more time to gather a statement from a dysregulated  
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56  
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## ACEs and policing

individual) but did not necessarily characterise these as trauma-informed. As noted previously, service providers across different services can have disparate understandings of trauma-informed (Donisch *et al.*, 2016), hence providing a clear definition of trauma-informed, with police-specific examples should therefore be integral to ACEs or trauma-informed training for police.

Elements of prevailing police culture conflicted with understanding of how ACEs knowledge in practice. Despite the fact that welfare/vulnerability referrals to the police are now increasing, there was a dominant view, that core police work is focused on crime. The 'crime fighter' view of policing has previously been identified as an enduring element of police culture (Caveny *et al.*, 2020) and reflects a culture that may be resistant to new conceptualisations of policing. This was further identified in the officers' appeals for more practical guidance on how trauma-informed practice could be adopted within current guidance and policies. Institutional policy has been identified as significant barrier to trauma-informed practice across several systems (Bargeman *et al.*, 2022), and Brough *et al.* (2016) noted that police culture is particularly characterised by 'formality, enforcement of rules and compliance with procedures' (p. 34, 2016). Furthermore, individuals expressed concerns about reprisals if they were to work in more trauma-informed ways. These concerns need to be acknowledged in trainings and service-level endorsement of interpretation of policies through and ACEs lens would increase confidence.

In this study, officers expressed a fundamental disparity between how they were being encouraged to account for trauma in their dealings with the public, whilst simultaneously feeling that their own trauma was under-recognised by the service. It is an uncontested fact that operational policing involves cumulative exposure to trauma (Tuckey *et al.* 2012). At the same time, police officers report disproportionately high levels of ACEs (McDonald *et al.*, 2022; Prost *et al.*, 2020) which have been linked to reduced resilience (Violanti *et al.*, 2021). Trauma-informed services not only recognise and respond to vulnerability in those in contact with the services, but extend this to staff members. Where officers feel unsupported by the service in their own trauma, it is less likely that they will perceive trauma-informed practice or ACEs training as beneficial.

## Implications

## ACEs and policing

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3 This study identified some practical suggestions to improve officer training on ACEs  
4 and trauma-informed, as well as identifying some systemic issues that require  
5 service-level consideration. Future trainings require clear definitions of ACE and  
6 trauma-informed approaches, with explicit linkage between the two concepts. Follow-  
7 up discussions with practical examples from policing would further clarify practical  
8 implementation. In particular, examples endorsed by senior staff would have the  
9 potential to allay concerns about reprisal. More broadly, the operationalisation of  
10 trauma-informed approaches has been poorly defined across services (Bargeman *et*  
11 *al.*, 2022). Given the inherent risks associated with policing, clear operationalisation  
12 of trauma-informed policing is urgently required.  
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21 An intrinsic and significant barrier to officers responding positively to trainings is the  
22 perception that trauma is under-recognised in officers. Future training should  
23 explicitly acknowledge potential trauma in service providers and signpost to support  
24 services. Training could also highlight the benefits of ACEs and trauma-informed  
25 knowledge in supporting colleagues (Ford *et al.*, 2017). However, while mental  
26 health literacy in police has been associated with greater help-seeking, other  
27 potential barriers, such as perceived negative impact on career progression (Lane *et*  
28 *al.*, 2022) need to be addressed as part of a changing police culture.  
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## Limitations

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38 Stratified sampling was used to recruit participants representing a spread of gender,  
39 length of service and role. However, there was a lack of ethnic diversity in the  
40 participant pool, potentially reflecting the police in general. Participants tended  
41 towards a moderately long service history, meaning the views of younger officers  
42 were potentially underrepresented. The results from this study reflect the views of  
43 officers within a particular division in Scotland are not necessarily reflective of the  
44 wider UK or International context.  
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Table 1

## Participant demographics

ID	Designation	Role	Service (years)
P1	PC	Campus/School	13
P2	PC	RP	3.5
P3	PC	RP	15
P4	PC	RP	12
P5	PC	RP	14
P6	PC	Campus/School	11
P7	PC	Local policing	9
P8	PC	Local policing	18
P9	PC	Campus/School	17
P10	PC	Campus/School	10
P11	PC	Local policing	15
P12	PC	RP	11
P13	PC	Local policing	8
P14	PC	Local policing	5
P15	PC	RP	13
P16	PC	Community safety	9
P17	PC	Campus/School	20
P18	PC	Campus/School	20

P19	PC	Campus/School based officer	8
P20	PC	Campus/School based officer	17
P21	PC	RP	5
P22	PC	Community safety	8
P23	PC	Community safety	13
P24	PC	Anti-social behaviour PC	12
P25	DC	Concern Hub	15
P26	PC	Concern Hub	18
P27	DC	Domestic Abuse Unit	23
P28	DC	PPU	12
P29	DC	PPU	22

RP Response policing; PPU = Public Protection Unit

Table 2.

## Domains and themes

Domain	Theme
Conceptual understanding <i>"It was the documentary, you were shipped in, you were shipped out and then you were trauma-informed and I have no idea of what that means."</i> [P5]	1. ACEs as a common sense issue 2. Personal autonomy 3. What is trauma-informed?
Police culture <i>"I get all that [ACES], but first and foremost I think we're, we're police officers and we've got a job to do."</i> [P20]	1. Policing is about crime 2. What about us?
Operationalising ACEs <i>"...you might be thinking about ACEs and stuff like that in the back of your head, in reality is it going to change the</i>	1. It makes no difference 2. Conflict with responsibilities



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*way you deal with that call? Probably*

*not, right.” [P19]*

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