



SPECIAL EU PROGRAMMES BODY

Project Case Study: Multiple Adverse Childhood Experiences Update February 2021



THEME:

Cross-Border Health & Social Care

FUNDING(ERDF+Match)
€5,010,241.11

MATCH FUNDERS:

Department's of Health;

LEAD PARTNER:

Health Service Executive

PROJECT PARTNERS

Western Health and Social Care Trust; Southern Health and Social Care Trust; Health and Social Care Board; Public Health Agency/CAWT; TUSLA

Start Date: 01/01/2017

End Date: 30/06/2023



<http://cawt.hscni.net>



@CAWTCrossBorder

The Multiple Adverse Childhood Experiences project (MACE) aims to transform the lives of vulnerable children and their families who are most at risk from a range of challenges and difficulties in their lives, by identifying, intervening early and providing nurturing and support within their own homes and communities on a cross-border basis.

Significant progress has been made with the Trauma Informed Practitioner Toolkit, with pilot training of the first forty practitioners taking place in February 2021.



As part of the pilot delivery phase of the project, MACE Co-ordinators will work in collaboration with the successful partner agencies and appointed providers to start the delivery of MACE trauma informed interventions across the five cross-border areas from January 2021.

The MACE Interventions to be delivered are:

- **Universal Interventions** - information programmes for families to help build healthy relationships, reduce stress, develop coping strategies and build resilience. Examples include parenting workshops, mindfulness and school transition programmes.
- **Targeted Interventions** - programmes that are designed to help families who have experienced specific trauma or adversity. They aim to enhance and promote skills for coping, managing emotions and developing resilience. Examples include addiction support, domestic violence recovery support, and parental separation support.
- **Specialist Interventions** - for those children and families whose identified adversity and trauma needs cannot be fully met through universal or targeted interventions. These involve more intensive one-to-one support for a child/family. Examples include therapeutic services, family support and one-to-one outreach programmes.