

Four Ways to Assess Positive Childhood Experiences

Inquiring about strengths, learning proxy measures for resilience, and promoting access to positive childhood experiences are key components of the HOPE framework. While there is not a single, evidence-based approach providers can use to ask about positive childhood experiences, the following options represent research-informed methods currently being used in the field.

The first two techniques are based on standardized, validated queries and will generate scores. Higher scores are associated with stronger resilience. The questions can be included in any standard intake form, paired with an ACEs screen, or used as a stand-alone screening tool.



Positive Childhood Experiences scale (Bethell et al, 2019)

In a population survey conducted in a largely White sample in Wisconsin, this scale has been shown to protect adult mental health. A score is calculated based on the number of questions that were answered "always" or "almost always".

Thinking back to your childhood, up to the age of 18, please indicate how often you:

- Felt able to talk to their family about feelings
- Felt their family stood by them during difficult times
- Enjoyed participating in community traditions
- Felt a sense of belonging in high school
- Felt supported by friends
- Had at least two non-parent adults who took genuine interest in them
- Felt safe and protected by an adult in their home



Benevolent Childhood Experiences (Narayan, Rivera, Bernstein, Harris, & Lieberman, 2018).

This instrument was developed for clinical use at the primary care clinic at the University of California, San Francisco. It has been validated in small studies conducted among high-risk populations. Similar to the Positive Childhood Experience scale above, a total score is generated by tallying the number of affirmative answers.

When you were growing up, during the first 18 years of life

- Did you have at least one caregiver with whom you felt safe?
- Did you have at least one good friend?
- Did you have beliefs that gave you comfort? Did you have opportunities to have a good
- Did you like school?
- Did you have at least one teacher who cared about you?
- Did you have good neighbors?

- Was there an adult (non-parent/caregiver) who could provide you with support and advice?
- Did you have opportunities to have a good time?
- Did you like yourself or feel comfortable with yourself?
- Did you have a predictable home routine, like regular means and a regular bedtime?



The next two approaches are more conversational. They serve to better understand the child and family circumstances while forming a foundation for engaged, collaborative problem solving.

The Four Building Blocks of HOPE

The Building Blocks can be adapted for use between any child serving provider and the family. Research has shown that programs that promote access to these childhood experiences help children and youth, including those who have experienced trauma and adversity. This is not a formal screen and does not result in a score. Instead, families respond with what these experiences mean to them, and the worksheet serves as a conversation starter with the clinician. This is part of a tool developed by Dr. Gretchen Pianka in Lewiston, Maine and is reproduced with permission. The complete tool can be <u>found here</u>.

Building Blocks for Health

These four building blocks are important factors in growing up healthy. Share whats working & your provider will brainstorm with you for solutions to anything that is not working

Engagement: What is one thing you like to do as a family outside the home? Where do you feel the most connected to others?

Relationships: What do you like to do at home with your family? Who is

someone outside of your family that really cares about you?

Emotional Health:

Environment:

Describe a place you love to go or play. Where is your safe

space?

What feelings do you talk about at home? Who can you talk to about feelings with? How can you take care of yourself when you have big feelings?

Narrative Therapy Techniques

Providers can use narrative therapy to draw out family and child strengths asking questions like:

- Can you describe the last time you managed to get free of {the problem} for a couple of minutes?
- How have you handled {pressing concern} in the past?
- Can you share a bit about something you've done recently that you're proud of?

Then, explore with them the factors that enabled them to succeed. Listen for the building blocks of HOPE – relationships, environments, engagement, and emotional growth. Careful listening to a person's past successes places the provider in a position to better understand what resources to draw on to address current challenges. This approach may fit best when confronted with a challenging situation, or when a person feels helpless to approach a problem.

To learn more about HOPE, the Four Building Blocks and MORE, visit positiveexperience.org or email HOPE@tuftsmedicalcenter.org.



