

# ALL ABOUT ACES

## Adverse Childhood Experiences

## WHAT ARE ACES?

Kaiser Permanente's landmark study in the mid-'90s found that experiencing traumatic childhood, or what is now called **Adverse Childhood Experiences (ACEs)**, was found to have negative impacts on health and well-being impacts later in life.

**ACEs fall into three categories:** abuse, neglect, and family dysfunction between birth and age 18.

Due to the cycle of poverty, discrimination, and violence within the community, ACEs can occur intergenerationally [1], leading to increased health risk behaviors, increased risk of violence or revictimization, disease, disability, and premature death.

### ABUSE



Physical



Emotional



Sexual

### NEGLECT



Physical



Emotional

### HOUSEHOLD DYSFUNCTION



Mental Illness



Mother treated violently



Divorce



Incarcerated Relative



Substance Abuse

[www.rwjf.org/en/library/infographics/the-truth-about-aces.html](http://www.rwjf.org/en/library/infographics/the-truth-about-aces.html)

## WHO IS AFFECTED BY ACES?

ACEs affect everyone with life-long negative consequences. No one is out of reach from the impact of ACEs. However, some individuals are at higher risk due to disparities in access to quality health care, safe communities, and the ability to nurture safe, healthy, and consistent relationships — these factors compound the risk of morbidity, mortality, and quality of life. For example, an ACE score greater than or equal to 6 can shorten an individual's lifespan by as much as 20 years.

### In the United States

**61.5%** of adults across 23 states with data had 1+ ACEs.[2]

**24.6%** were estimated to have had 3+ ACEs.[2]

### In Montana

**60%** of Montana adults reported having one or more ACEs.[3]

**26%** of Montana children have 2+ ACEs, compared to the national average of 18.2%.[4]

*In 2011, a Montana report found some identifying factors such as being Native American, having parents without a high school diploma, having a lower family income, and being an adult with a disability increased one's likelihood of having a higher ACEs score [3].*

## HOW DO ACES IMPACT HEALTH?

ACEs can change brain development by impacting how the body responds to stress, especially toxic stress. Toxic stress is persistent and ongoing stress, such as abuse, neglect, and community violence, without adequate support. Research has found prolonged exposure to stress in a developing brain impacts the hippocampus,

the part of the brain that controls memory recall, emotions, and learning. This damage can lead to decreased decision-making, emotional regulation, stress management, and the ability to recall memories, which have been linked to chronic health problems, mental illness, and substance misuse in adulthood. [5]

## KEY CHILD OUTCOMES AFFECTED BY ACES IN MONTANA [6]

### + Chronic Conditions

Children with an ACE score of 1 are 19.6% more likely to develop a chronic condition requiring above routine amount or type of health care services, almost doubling to 36.1% with 2+ ACEs.

### + Overweight or Obese

Children with an ACE score of 1 are 26.9% more likely to be overweight or obese, with minimal change to 26.7% with 2+ ACEs.

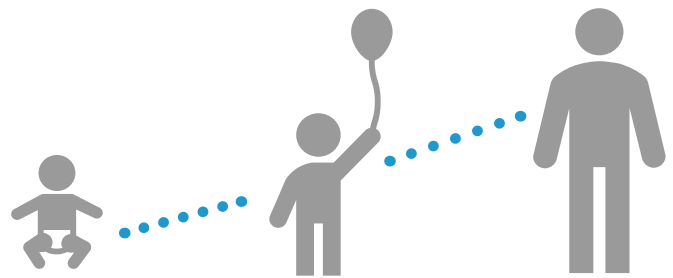
### + School Dynamics

Children with an ACE score of 1 are 28.3% more likely to be bullied, picked on, or excluded by other students, increasing to 45.9% for children with 2+ ACEs.

Children with an ACE score of 2 or more are 45.9% more likely to be bullied, picked on, or excluded by other students, decreasing to 40.1% for children with 2+ ACEs.

### + Resiliency

35.5% of children who have an ACE score of 1 presented resilience to flourish, decreasing to 16.5% with 2+ ACEs.



## HOW DOES THIS TRANSLATE INTO ADULT LIFE?

ACEs increase risk factors in adolescence and follow individuals into adulthood, impacting overall health, well-being, education, and job potential. Additional risk factors for adults have increased prevalence of injury, sexually transmitted infections, maternal and child health problems, sex trafficking, and chronic diseases such as cancer, diabetes, heart disease, and suicide. [5]

### Adult Outcomes Affected by ACEs

- **Adults with an ACE score of 4 or more** are 1220% more likely to attempt suicide, 1003% more likely to use injected drugs, 460% more likely to have recent depression, and 390% more likely to have lung disease.
- **Adults with an ACE score of 2 or more** are 400% more likely to consider themselves an 'alcoholic.'
- **At least 5** of the top 10 leading causes of death are associated with ACEs.

## STRATEGIES TO PREVENT ACES

### How Can We Reduce and Prevent ACES in Montana? [8]

1. Develop and maintain a state-level resource to share information about ACES and trauma-informed approaches.
2. Screen for ACES and trauma among high-risk parents and children.
3. Implement community-based strategies recommended by the Center for Disease Control and Prevention to prevent ACES and trauma and increase resiliency development
4. Integrate knowledge about the widespread effects of ACES and trauma into policies, procedures, and health, human service, and education environments that serve children
5. Implement resiliency-building programs and trauma-informed educational and behavioral approaches in schools and early childhood settings.
6. Increase awareness of and referrals to evidence-based early childhood home visitation programs among healthcare, human services, and other professionals.
7. Continue collecting and analyzing data to monitor the burden of ACES and trauma in Montana and progress toward reducing it.

### Responding to ACES

Though ACES can have lasting impacts on the brain development and function, brains can develop new pathways, and some effects can be reversed. One way to prevent the ongoing implications of ACES is to build resilience, or one's ability to respond to adversity. Increasing resilience is often low-cost and has a lasting impact. Some ways to improve the resilience of children are:

- Fostering a safe, stable, and supportive relationship with a parent/caregiver or other trusted adult,
- Supporting a child in making friends and building a supportive social network,
- Practicing for future adversity through problem-solving based play where you name emotions and practice coping skills (such as taking a deep breath),
- Normalizing asking for helping and don't rush in to solve children's problems,
- Modeling resiliency and coping skills to children, including repairing damaged relationships and being accountable for mistakes,
- And complimenting children on their strengths and teach them to embrace mistakes.

### Other Strategies

According to the CDC, adopting policies that focus on improving family economic stability can reduce ACES. Policies at the local, state, and/or federal levels enhance financial security through tax credits, childcare subsidies, temporary assistance, and livable wages. Change on the organizational level can also help by creating family-friendly work policies through paid family leave, family-friendly business practices, and flexible work schedules. Each of these policies will go a long way to increase the well-being of parents, the economic stability of families, and lifelong health and well-being outcomes for children. [10]



## SUMMARY

Improving and preventing ACEs is an essential topic for Montanan's health. Safety for all, especially youth, is at the forefront of quality healthcare delivery. To improve health outcomes, we need to tackle the problem at the source, identifying prevention strategies to decrease ACEs while also supporting those with 2+ ACEs through trauma-informed systems of care. Montana must also improve data collection and commit to continually evaluate ACEs outcomes to implement effective strategies that will be right for Montanans.

## References

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