Adverse Childhood Experiences
How our past can catch up to us
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Objectives

- Define Adverse Childhood Experiences (ACEs)
- Why is this so important
- What Causes ACEs
- Short term effects in deviate behavior
- Long term effects with deviate behavior
- What we are doing
- What you can do
Video on ACES

Adverse Childhood Experiences (ACES)

Adverse childhood experiences (ACEs) are stressful or traumatic childhood experiences such as witnessing or experiencing violence, abuse and neglect. They may also include household dysfunction such as witnessing domestic violence or growing up with family members who have mental or substance use disorders. The most common is the experience of childhood physical and emotional abuse (SAMHSA, 2017).
Types of Adverse Childhood Experiences

- Physical, emotional and/or sexual abuse in childhood or adulthood
- In Childhood neglect or abandonment (food insufficiency, lack of money to meet basic needs, homelessness)
- Death of a parent
- Divorce
- Family life that includes drug addiction, alcoholism, parental incarceration, violence
- Rape
- Serious medical illness or disease (disabling conditions, loss of function, invasive and distressing procedures)
- Historical Trauma (Common in Native American Communities, Africans with historical slavery, and the Holocaust).
So what is trauma?

- Trauma refers to intense and overwhelming feelings and experiences that involve serious loss, threat or harm to a person’s physical and/or emotional well being.

- These experiences may occur at any time in a person’s life. They may involve a single traumatic event or may be repeated over many years (Compound trauma).

- Post Trauma Stress Disorder (PTSD) is experienced trauma with delayed impact on the individual, such as what veterans may experience after combat.

- These trauma experiences may overwhelm the person’s coping resources. This often leads the person to find a way of coping that may work in the short run but may cause serious harm in the long run. Such behavior is called high risk behavior.
Example of how trauma can affect us:

- Intrusive memories
- Startle response
- Shame, self-hatred
- Panic attacks
- Emotional overwhelm
- Chronic pain, headaches
- Eating disorders
- Substance abuse
- Self-destructive behaviors
- Little or no memories
- Hypervigilance
- Dissociation
- Depression
- Irritability
- Numbing
- Loss of interest
- Insomnia
- Decreased concentration
- Hopelessness

Adapted from Janina Fisher
Overall Effects of Trauma

PEOPLE WHO HAVE EXPERIENCED TRAUMA ARE:

- 4 Times More Likely To Become An Alcoholic
- 4 Times More Likely To Develop A Sexually Transmitted Disease
- 4 Times More Likely To Inject Drugs
- 15 Times More Likely To Commit Suicide
- 2.5 Times More Likely To Smoke Tobacco
- 3 Times More Likely To Have Serious Job Problems
- 3 Times More Likely To Experience Depression
- 3 Times More Likely To Use Antidepressant Medication
- 3 Times More Likely To Be Absent From Work
Trauma and the Brain

**HOW STRESS CHANGES A CHILD’S BRAIN**

*3-YEAR-OLD CHILDREN*

- Prolonged exposure to trauma triggers physiological changes in the brain.
- Neural circuits are disrupted, causing changes in the hippocampus, the brain’s memory and emotional centre.

- This can cause brain shrinkage, problems with memory, learning and behaviour.
- A child does not learn to regulate emotions when living in state of constant stress.
- Associated with greater risk of chronic disease and mental health problems in adulthood.
Example of ACEs

- ACEs is different because unlike the trauma or Post trauma experience, these experiences happen during childhood and may not show up for years.
- For example,

A child may have been molested over a 5 year period from the age of 3 to 7. After the age of 7, the abuse stops and the child grows up to forget, however, as an adult, she now experiences sleeplessness, involved in abusive relationships, has substance use disorders and suffer from physical and mental issues.
ACEs is in short......

Trauma is not the thing that happened but the effect left within us by our experiences...
Adverse Childhood Experience study

- “The CDC-Kaiser Permanente Adverse Childhood Experiences (ACE) Study is one of the largest investigations of childhood abuse and neglect and later-life health and well-being”

- [https://www.cdc.gov/violenceprevention/acestudy/about.html](https://www.cdc.gov/violenceprevention/acestudy/about.html)

- Center for Disease Control (CDC) and Kaiser Permanente (an HMO) Collaborated for ACEs study.

- The study was done between 1995 to 1997 in California with over 17,000 participants.

- These groups were given the ACEs questionnaire.

- The results were measured by the participants responses and compared to their conditions.
## Demographics of the study

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<thead>
<tr>
<th>Demographic Information</th>
<th>Percent (N = 17,337)</th>
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<tr>
<td><strong>Gender</strong></td>
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<tr>
<td>College Graduate or Higher</td>
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</table>
Adverse Childhood Experience study

Mechanism by Which Adverse Childhood Experiences Influence Health and Well-being Throughout the Lifespan
Adverse Childhood Experience Study

All ACE questions refer to the respondent’s first 18 years of life (CDC, 2002).

- Abuse:
- Emotional abuse:
- Physical abuse:
- Sexual abuse:
- Household Challenges:
- Household substance abuse:
- Mental illness in household:
- Parental separation or divorce:
- Criminal household member:
- Neglect:
- Physical neglect:
What they found is…..

1. Adverse Childhood Experiences (ACEs) are common.

2. Almost two-thirds of study participants reported at least one ACE, and more than one in five reported three or more ACEs.

3. The ACE score, a total sum of the different categories of ACEs reported by participants, is used to assess cumulative childhood stress.

4. Study findings repeatedly reveal a graded dose-response relationship between ACEs and negative health and well-being outcomes across the life course.
People who experience ACEs are at risk for..

As the number of ACEs increases so does the risk for the following:
- Alcoholism and alcohol abuse
- Chronic obstructive pulmonary disease
- Depression
- Fetal death
- Health-related quality of life
- Illicit drug use
- Ischemic heart disease
- Liver disease
- Poor work performance
- Financial stress
- Risk for intimate partner violence
- Multiple sexual partners
- Sexually transmitted diseases
- Smoking
- Suicide attempts
- Unintended pregnancies
- Early initiation of smoking
- Early initiation of sexual activity
- Adolescent pregnancy
- Risk for sexual violence
- Poor academic achievement
Lifespan Impacts of ACEs

Critical & Sensitive Developmental Periods

Adverse Childhood Experience
MORE CATEGORIES – GREATER IMPACT
Physical Abuse, Sexual Abuse
Emotional Abuse, Neglect
Witnessing Domestic Violence
Depression/Mental Illness in Home
Incarcerated Family Member
Substance Abuse in Home
Loss of a Parent

Genetics
Experience triggers gene expression
(Epigenetics)

Brain Development
Electrical, Chemical, Cellular Mass

Adaptation
Hard-Wired Into Biology

Chronic Disease
Psychiatric Disorders
Impaired Cognition
Work/School Attendance, Behavior, Performance
Obesity
Alcohol, Tobacco, Drugs
Risky Sex
Crime
Poverty

Intergenerational Transmission, Disparity

Source: Family Policy Council, 2012
Important Group not represented

• There was another study conducted among Native Americans and Alaskan Indians for ACEs.
• This study was conducted to answer the question as to why there was a higher crime rate within the reservation population than non-Native inhibited areas.
• According to the study conducted by Kenny and Singh (2016), providing the same questions as the original study by Kaiser, Native Americans are 10 times more likely to experience 5 or more categories of ACEs than any other ethnic group.
Commonality of Trauma within Native American Communities

- Many Native Americans experience Historical trauma.
- 1 in 2 men have experienced emotional trauma.
- 87% of Native Americans who suffer from Mental Disorders have experienced physical or sexual abuse.
- 93% of Native Americans in substance abuse treatment report childhood abuse or neglect.
- 90% of women with alcoholism were sexually abused or suffered severe violence from parents.
What can we do?

- Recognize that ACEs is more common than we think and so are the problems associated with it.
- Early prevention is the best way to treat ACEs, especially in children.
- Prevention and Treatment is possible.
- Talk about it and read about it.
Parents, teachers and caregivers can help children by:

- Gaining an understanding of ACEs
- Helping children identify feelings and manage emotions by using “Kid friendly” language.
- Having and showing Empathy.
- Creating safe physical and emotional environments at home, in school, and in neighborhoods.
Create and Build resiliency for our children

- Resilience is the ability to return to being healthy and hopeful after bad things happen.
- Research shows that if parents provide a safe environment for their children and teach them how to be resilient, that helps reduce the effects of ACEs.
What does resiliency look like?

- Having resilient parents
- Parents who know how to solve problems, who have healthy relationships with other adults, and who build healthy relationships with their children.
- Building attachment and nurturing relationships
- Building social connections
- Having family, friends and/or neighbors who support, help and listen to children.
What does resiliency look like?

- Meeting basic needs
- Providing children with safe housing, nutritious food, appropriate clothing, and access to health care and good education.
- Learning about parenting and how children grow
- Understanding how parents can help their children grow in a healthy way, and what to expect from children as they grow.
- Nurturing hobbies, activities and play.
Adults and Children

- Work on healing through support, discussions and self-care
- Counseling
- Spiritual, Physical, Mental and Emotion Wellbeing.
- Family and community connections
- Social services resources and support.
For counselors, social workers, facilitators

- Trauma informed care - Care for individuals and families who experience trauma and tailoring our services to meet those needs towards the healing process.
- Asking our clients “What has happened to you?”
- Building treatment plans and service plans tailored to address these issues.
- Working together as a treatment team in understanding the individual and family’s needs. This is a collaborative coordination of care.
For counselors, social workers, facilitators, Law Enforcement

This would also mean working together in bringing change with all agencies. Collaboration looks like communicating for a common goal.
For Legal and Law enforcers, counselors, social workers, facilitators

- Realizing that the person you are working with may have suffered some form of trauma.
- Being able to see past a person’s offense.
- Keeping individuals accountable by court ordered treatment.
- Understanding that each person’s reaction to trauma is different.
Conclusion

- As law enforcement, parents, families, community members, healthcare providers and friends, ACEs effects us all because it affects the wellbeing of our children and later adults. The first step is to;
- Understand ACEs
- ACEs effects
- Give and get support from law enforcement, family, community and social services within your community.
Questions????
“Remember, behind every person is a story, because we each have one.”
Resources:


