

Impact of Adverse Childhood Experiences (ACE) for Individuals After Adolescent Years

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INTRODUCTION

A child who faces adverse childhood experiences (ACE) will often find a dangerous road ahead. They overcome changes in their lifestyle and deal with various challenges. The well-being and health of children can impact their lives during adulthood as the harsh effects of neglect and abuse appear in different ways. The lifespan of juveniles dealing with many established factors of ACEs can, therefore, be a major influence on what happens to the rest of society. As many studies have researched the effects of these harsh experiences, confidential surveys were needed to assess this insurmountable amount of information. As a result, many sources and states that have documented at the trends of childhood experiences data collected it through a highly used Behavioral Risk Factor Surveillance System (BRFSS). The BRFSS was implemented in the United States during 1984 and then this system started conducting interviews from 15 different states. As of 2009, 42 states and the District of Columbia have released surveys with ACE questions to their populations. There are now over 400,000 interviews being collected each year from all 50 states, the District of Columbia, and in three territories of the United States. This new addition of states implementing changes for children who experienced one of many childhood hardships is important for future laws and policies. Overall, populations will encounter various ACEs if they grow up in severe social and economic conditions. It is important to view all facets of this data to make changes in the future within all struggling communities.

BACKGROUND OF RESEARCH

The research that was conducted during my internship experience was about how adverse during childhood will impact many aspects of the individual's lives was used in a literature review for my internship. Overall, the largest study on ACE is the CDC-Kaiser Study (1998) while additional studies produce results by referencing these findings. Other studies that are included in the analyses of how the different ACE factors affect an individual's health and lifestyle. Data from other analyses indicated that exposure to one of these specified abuse and traumatic experiences will increase the individual's risk of being impacted by more factors. Additionally, the ACE score and impaired worker performance relationship are strong. They discovered that these childhood experiences have a strong impact on adult problems, disrupt brain functioning, and can even lead to death. Participants face long-term health implications and employment struggles. It was also found that research of the ACE factors indicated that early intervention is necessary to lower the health risks of the population. The study concluded that pediatricians should play a significant part in being the first line of primary care in everyday practice and academics. Overall, each article of the research provided important data since implementing different programs and initiatives of children with adverse childhood experiences is essential for long term success.

CDC-KAISER ACE STUDY

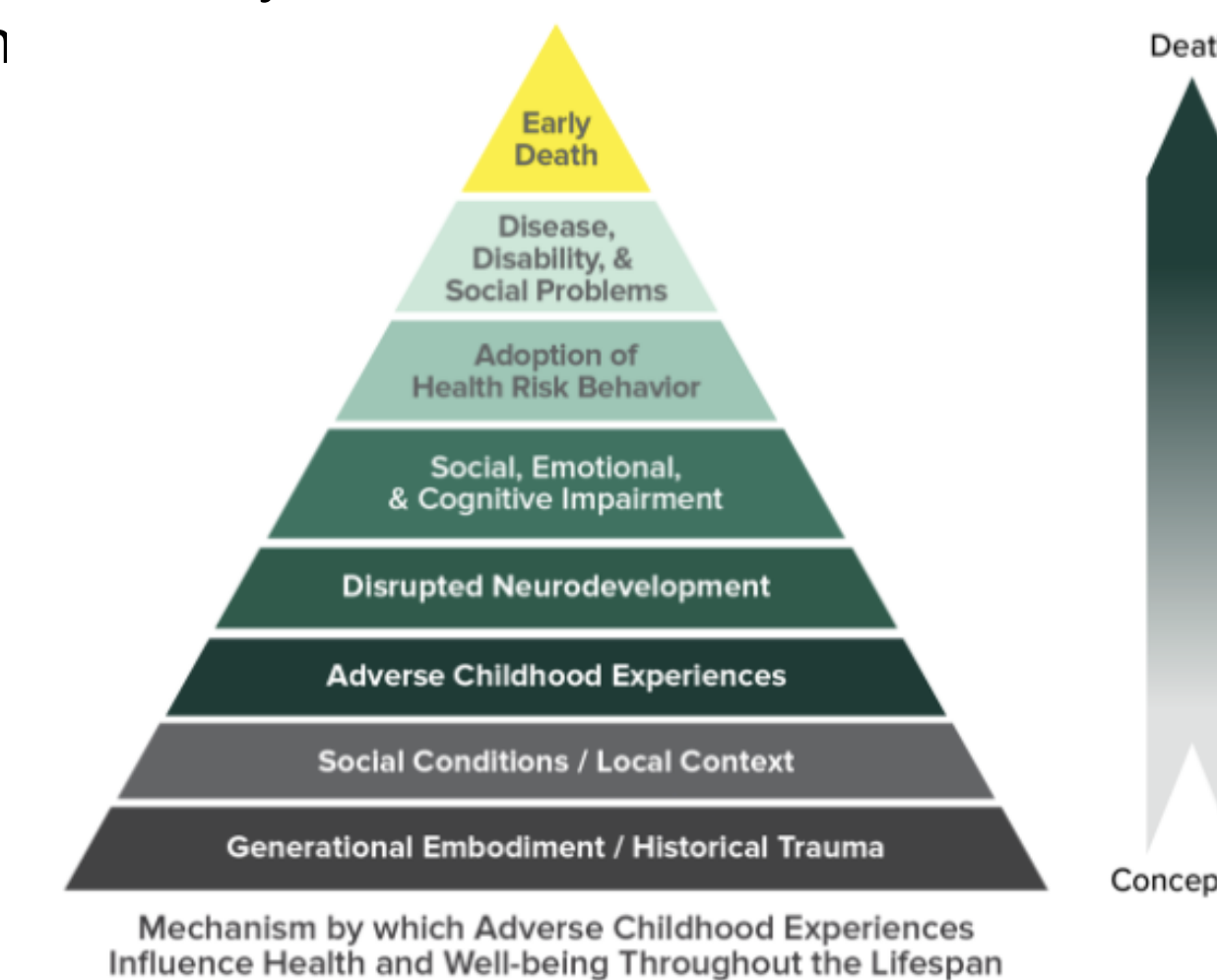
The CDC-Kaiser ACE Study (1998) examined adverse childhood experiences (ACE) with three major categories: abuse, household challenges, and neglect. The study took a sample of 17,337 individuals with two waves of questions involving experiences in childhood and then their present status of health and behaviors. Demographic information was taken from each participant and replied to the survey from the years 1995 to 1997. The participants who were involved in the study had ages ranging from 19 to 60 years old and over. Once the data was collected, the respondents included all participants even if they documented having no ACEs. Also, the respondents of the study determined if individuals have been abused by administering confidential surveys regarding specific questions about if they encountered different kinds of abuse. This data from the abuse category was then separated by gender. Other subcategories pertained to the subjects' first 18 years of living. The abuse category included emotional, physical, and sexual abuse. Questions regarding household challenges considered mothers being treated violently, substance abuse, mental illness, parental separation or divorce, and incarcerated household members. Lastly, data included emotional and physical neglect, determined in only the second wave of data collection.

RESULTS OF STUDY

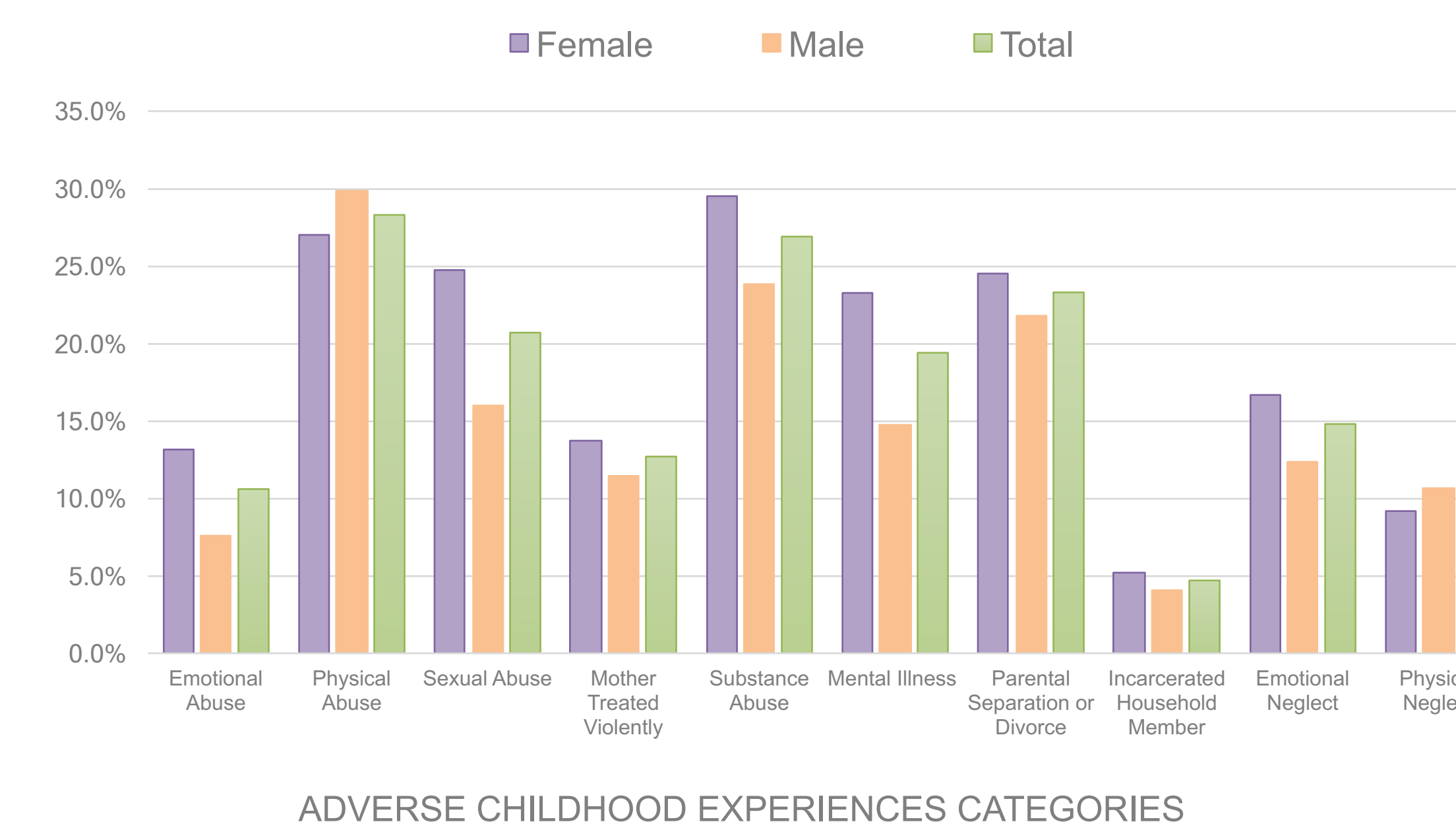
Majority participants of the original ACE Study are female (54 percent), white (74.8 percent), aged 60 and over (46.4 percent), and educated at some college/college graduate or higher (35.9 percent and 39.3 percent, respectively). This large investigation determined that ACE categories were common across all populations relating to gender, race, age range, and educational attainment. All genders had no major prevalence between their ACE score, which was calculated by the sum of the different categories. Each time a participant selected some of these 10 factors in the questionnaire, depending on their lives, that indicates an ACE the sum is then taken from each of these factors to get the ACE score. Then the information was divided by the gender of the participant to the designated score of 0, 1, 2, 3, and 4 or more. There was a relationship found between early adversity and lasting impacts faced by participants in the first and second waves of questioning.

ANALYSIS OF RESULTS

The analysis that will be focused on considers different linear models used to examine the three large categories of ACE using logistic regression. With this research, there was a statistically significant difference in being exposed to the ACE categories and looking at the respondent's age, sex, race, and educational attainment. Based on the ACE score, the main difference between genders was a score of four or more; women were at 15.2 percent and men were 9.2 percent. In total, 36.1 percent of participants had an ACE score of zero, 26 percent had a score of one, 15.9 percent were at a score of two, 9.5 percent indicated an ACE score of three, and then 12.5 percent had a score of four or more. The ACE Pyramid and distribution of data based on the categorical and n



ACE Prevalence by Category (Abuse, Household Challenges, Neglect) by Sex of Participants



CONCLUSION

In conclusion, research has shown that populations who live in severe social and economic conditions experience more ACEs. Many investigations into these living conditions have referred to the CDC-Kaiser ACE Study. Past research into child abuse and neglect also refers to the concepts behind the ACE Pyramid. To conceptualize the largest investigation into adverse childhood experiences, the CDC-Kaiser Study and other research use this pyramid to look at how these ACE factors influence one's perspective on life and harm the health and well-being of individuals. It can be determined with the findings and with the pyramid, that abused and neglected children are at risk of impairment in brain functioning and neurodevelopment, unhealthy behaviors, disease, and disabilities, or even early death. Early intervention as well as additional research or programs are needed to assist children suffering from these experiences and subsequently impact future communities and then the economy.

FUTURE REFORMS AND SOLUTIONS

The state of Pennsylvania in the past has implemented different programs, policies, and laws towards protecting children who have been abused and continue to be neglected. Research in the future should use this method of considering multiple ACE factors because it allows for finding the relationship between childhood exposure to overall health and social outcomes. Other sources suggest that resistance can start with pediatricians taking an active role in detection, prevention, and even educating others to recognize ACE factors. States should continue using and developing ACE data to build their own platforms. Ultimately, a comprehensive approach will do more than react to children and adults exhibiting symptoms of ACE; it will move ahead of the curve to prevent such circumstances altogether. I have also learned that beyond this ACE research and in my internship experience, performing community-based research is extremely beneficial. Using qualitative and quantitative data analysis to make advancements in the surrounding environment needs to be considered to improve quality of life.

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