

ADVERSE CHILDHOOD EXPERIENCES

Key Takeaways

- ACEs are common, but they are also preventable.
- ACEs are associated with 5 of the 10 leading causes of death in the US.
 - By preventing ACEs we could prevent 21 million cases of adult depression and 1.9 million cases of heart disease.
- Addressing root causes of ACEs, such as racism, poverty, and community disruption can build equitable and resilient communities.
 - ACEs can be prevented by:
 - Strengthening economic supports to families
 - Promoting social norms that create conditions where violence does not occur
 - Ensuring a strong start for children and their caregivers

Adverse Childhood Experiences (ACEs) are events or circumstances that may be traumatic to children during the first 18 years of life.^{1,2}

Examples of ACEs are:

- Experiencing violence, such as abuse, neglect, or intimate partner violence
- Living with family members with mental health or substance abuse problems
- Instability in relationships through parental separation or incarceration

ACEs are common and in the absence of support, they can cause lasting harm. They include experiences such as witnessing violence or being physically abused as a child. When children encounter multiple negative experiences, their bodies can be flooded with stress hormones, increasing their risk for later health problems, like heart disease, diabetes or depression. If we ensure every child has safe, stable, nurturing relationships and environments, even despite adversity we are setting them up to be healthy and resilient adults.





Research has found that ACEs are common—62% of U.S. adults surveyed reported experiencing at least one adversity during childhood.^{1,3} ACEs are even higher for socioeconomically and racially diverse populations, with nearly 70% reporting at least 1 ACE.⁴

ACEs are associated with 5 of the leading 10 causes of death in the US including heart disease, cancer, respiratory disease, diabetes, and suicide.²



A 2019 study found that 1 in 6 adults experienced 4 or more types of ACEs.⁵

ACEs are costly—the lifetime economic burden of child abuse and neglect in the US is estimated at nearly \$2 trillion.⁶

Adversity is not a destiny—ACEs are preventable. One research study found that by preventing ACEs we could reduce the number of adults with depression by 21 million cases and heart disease by 1.9 million cases. By addressing the root causes of ACEs, including racism, poverty, and community disruption, we can create safe, stable, nurturing relationships and environments for all children and families. Positive experiences in childhood have been shown to promote healthy outcomes for children and even minimize the effects associated with experiencing ACEs.

Prevent Child Abuse America's research, programs, and affiliate networks focus on several strategies and approaches to prevent ACEs:

- 1. We work to **strengthen economic supports** for families by advocating for polices that strengthen household financial security (e.g., Earned-Income Tax Credit) and those that create family-friendly work environments (e.g., Paid Family Leave).
- 2. We implement **home visiting and family support** and strengthening programs, like our signature program Healthy Families America, to ensure children and their caregivers have a strong start.
- 3. We **promote social norms** that create conditions where violence does not occur through public awareness and engagement campaigns.

^{1.} Centers for Disease Control and Prevention (2019). Preventing Adverse Childhood Experiences: Leveraging the Best Available Evidence. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.

^{2.} Felitti, V. J., Anda, R. F., Nordenberg, D., Williamson, D. F., Spitz, A. M., Edwards, V., ... Marks, J. S. (1998). Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults. American Journal of Preventive Medicine, 14, 245–258.

^{3.} Merrick, M. T., Ford, D. C., Ports, K. A., & Guinn, A. S. (2018). Prevalence of adverse childhood experiences from the 2011-2014 Behavioral Risk Factor Surveillance System in 23 States. JAMA Pediatrics, 172(11), 1038-1044.

^{4.} Wade Jr., R., Cronholm, P.F., Fein, J.A., Forke, C.M., Davis, M.B., Harkins-Schwarz, M., Pachter, L.M., & Bair-Merritt, M.H. (2016). Household and community-level Adverse Childhood Experiences and adult health outcomes In a diverse urban sample. Child Abuse & Neglect, 52, 135-145.

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^{6.} Peterson, C., Florence, C., & Klevens, J. (2018). The economic burden of child maltreatment in the United States, 2015. Child Abuse & Neglect, 86, 178-183.

^{7.} Ellis, W. & Dietz, B. (2020). Pair of ACEs Tree. Building Community Resilience, George Washington University. Retrieved from: https://publicheaith.gwu.edu/sites/default/files/downloads/Redstone-Center/Resource%20Description_Pair%20of%20ACEs%20Tree.pdf.

^{8.} Bethell C, Jones J, Gombojav N, Linkenbach J, & Sege R. (2019). Positive Childhood Experiences and adult mental and relational health in a statewide sample: Associations across Adverse Childhood Experiences levels. JAMA Pediatrics. e193007.