

Adverse Childhood Experiences

Building Resiliency for Better Futures

Introduction of staff

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Goals for today

- ▶ 1) Share ACE Development and Concepts
- ▶ 2) Provide an opportunity to self score your own ACE!
- ▶ 3) Review ACE impact over time
- ▶ 4) Discuss strategies to prevent/ mitigate ACEs
- ▶ 5) Provide CASE EXAMPLE
- ▶ 6) Review any questions!

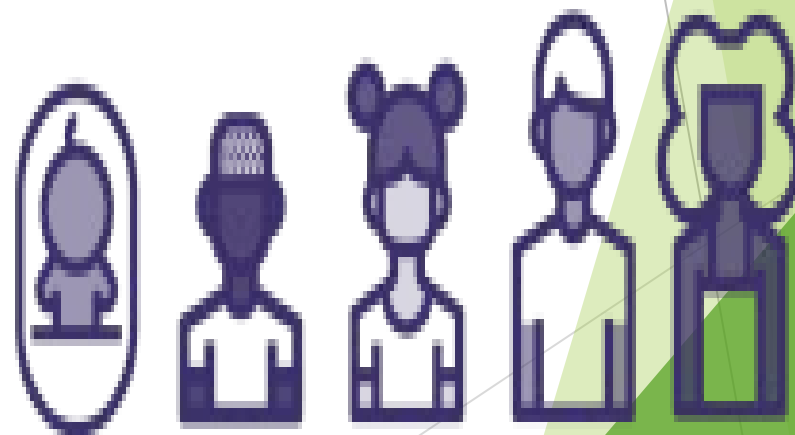
What Are Adverse Childhood Experiences?

Adverse childhood experiences, or **ACEs**, mean **potentially traumatic events in childhood (0-17 years)** such as neglect and experiencing or witnessing violence.



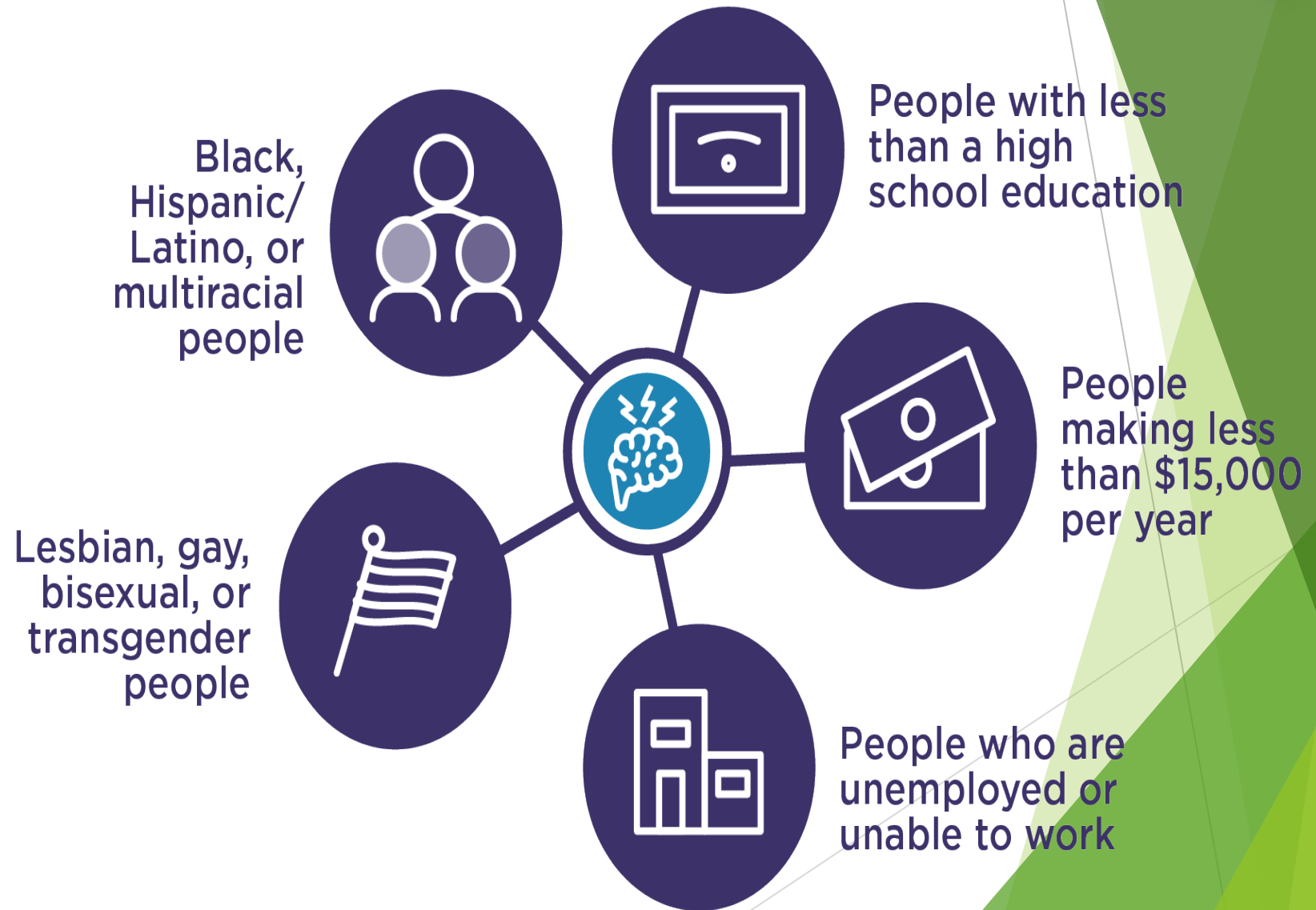
ACEs can negatively impact physical, mental, emotional, and behavioral development.

- ACEs can also have lasting effects on health, well-being, and prosperity well into adulthood.

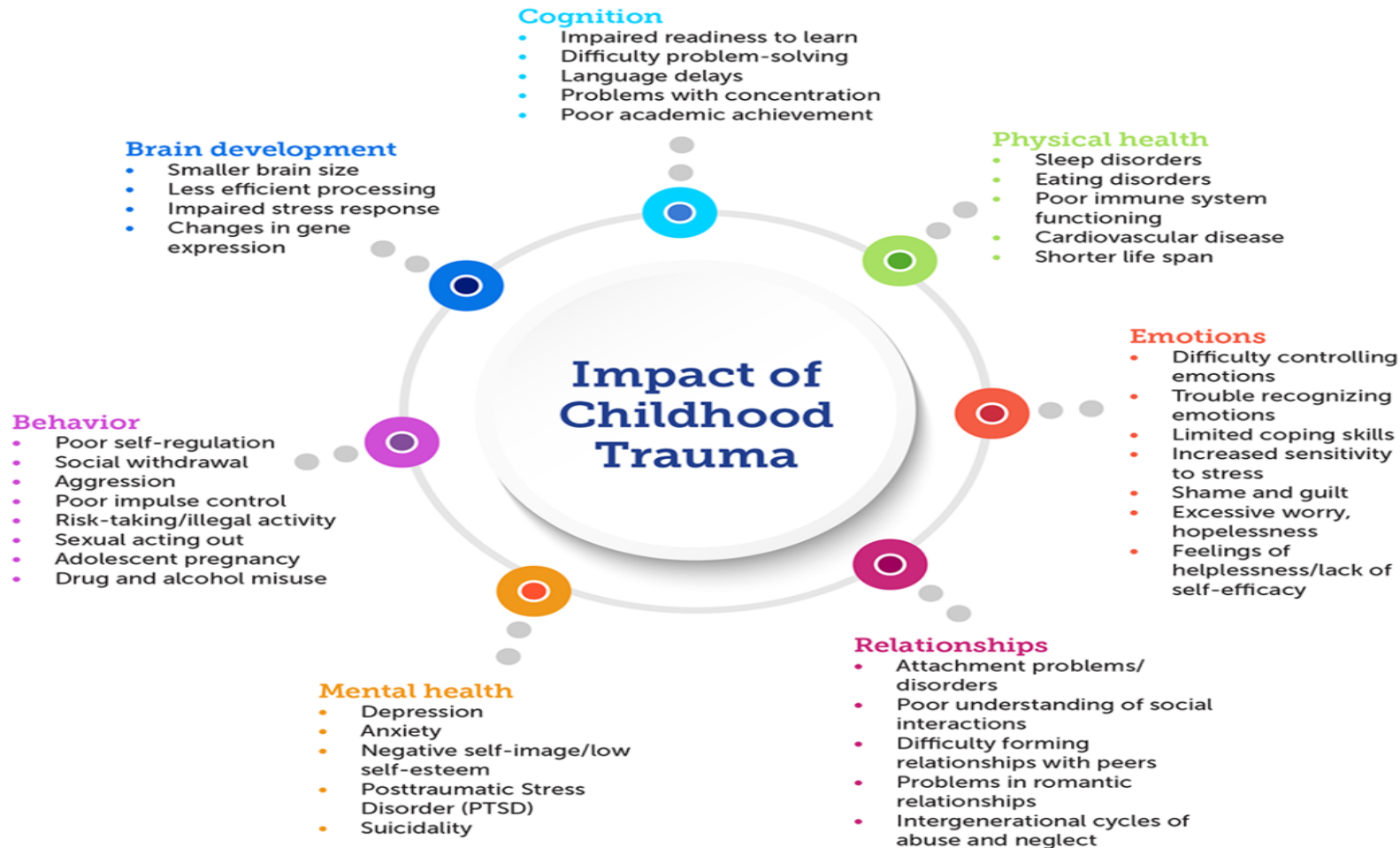


Some Groups Are More Likely to Have Experienced ACEs

Multiple studies show that people who identified as members of these groups as adults reported experiencing **significantly more ACEs**:



Impact of Childhood Trauma



Types of ACEs



ABUSE

- Emotional
- Physical
- Sexual



NEGLECT

- Emotional
- Physical



HOUSEHOLD CHALLENGES*

- Substance misuse
- Mental illness
- Suicidal thoughts and behavior
- Divorce or separation
- Incarceration
- Intimate partner violence or domestic violence

Other Adversity



- Bullying
- Community violence
- Natural disasters
- Refugee or wartime experiences
- Witnessing or experiencing acts of terrorism

* The child lives with a parent, caregiver, or other adult who experiences one or more of these challenges.

Self Assessment Quiz

Disclaimer ...take care of yourself and your customer...

Purposeful approach as well in using/not using the tool, as this can trigger trauma reactions if not structured carefully.

Care should be exercised using the ACEs assessment in public or other environments for several reasons.

You may need permission from a child's parent/guardian to administer it and there can be other legal constraints that should be adhered to.

Additionally, if you are not prepared for or able to address the results of the assessment it's probably not a good idea to uncover them.

Finding Your ACE Score

While you were growing up, during your first 18 years of life:

1. Did a parent or other adult in the household often or very often...

Swear at you, insult you, put you down, or humiliate you?

or

Act in a way that made you afraid that you might be physically hurt?

Yes No If yes enter 1 _____

2. Did a parent or other adult in the household often or very often...

Push, grab, slap, or throw something at you?

or

Ever hit you so hard that you had marks or were injured?

Yes No If yes enter 1 _____

3. Did an adult or person at least 5 years older than you ever...

Touch or fondle you or have you touch their body in a sexual way?

or

Attempt or actually have oral, anal, or vaginal intercourse with you?

Yes No If yes enter 1 _____

4. Did you often or very often feel that ...

No one in your family loved you or thought you were important or special?

or

Your family didn't look out for each other, feel close to each other, or support each other?

Yes No If yes enter 1 _____

5. Did you often or very often feel that ...

You didn't have enough to eat, had to wear dirty clothes, and had no one to protect you?

or

Your parents were too drunk or high to take care of you or take you to the doctor if you needed it?

Yes No If yes enter 1 _____

6. Were your parents ever separated or divorced?

Yes No If yes enter 1 _____

7. Was your mother or stepmother:

Often or very often pushed, grabbed, slapped, or had something thrown at her?

or

Sometimes, often, or very often kicked, bitten, hit with a fist, or hit with something hard?

or

Ever repeatedly hit at least a few minutes or threatened with a gun or knife?

Yes No If yes enter 1 _____

8. Did you live with anyone who was a problem drinker or alcoholic or who used street drugs?

Yes No If yes enter 1 _____

9. Was a household member depressed or mentally ill, or did a household member attempt suicide?

Yes No If yes enter 1 _____

10. Did a household member go to prison?

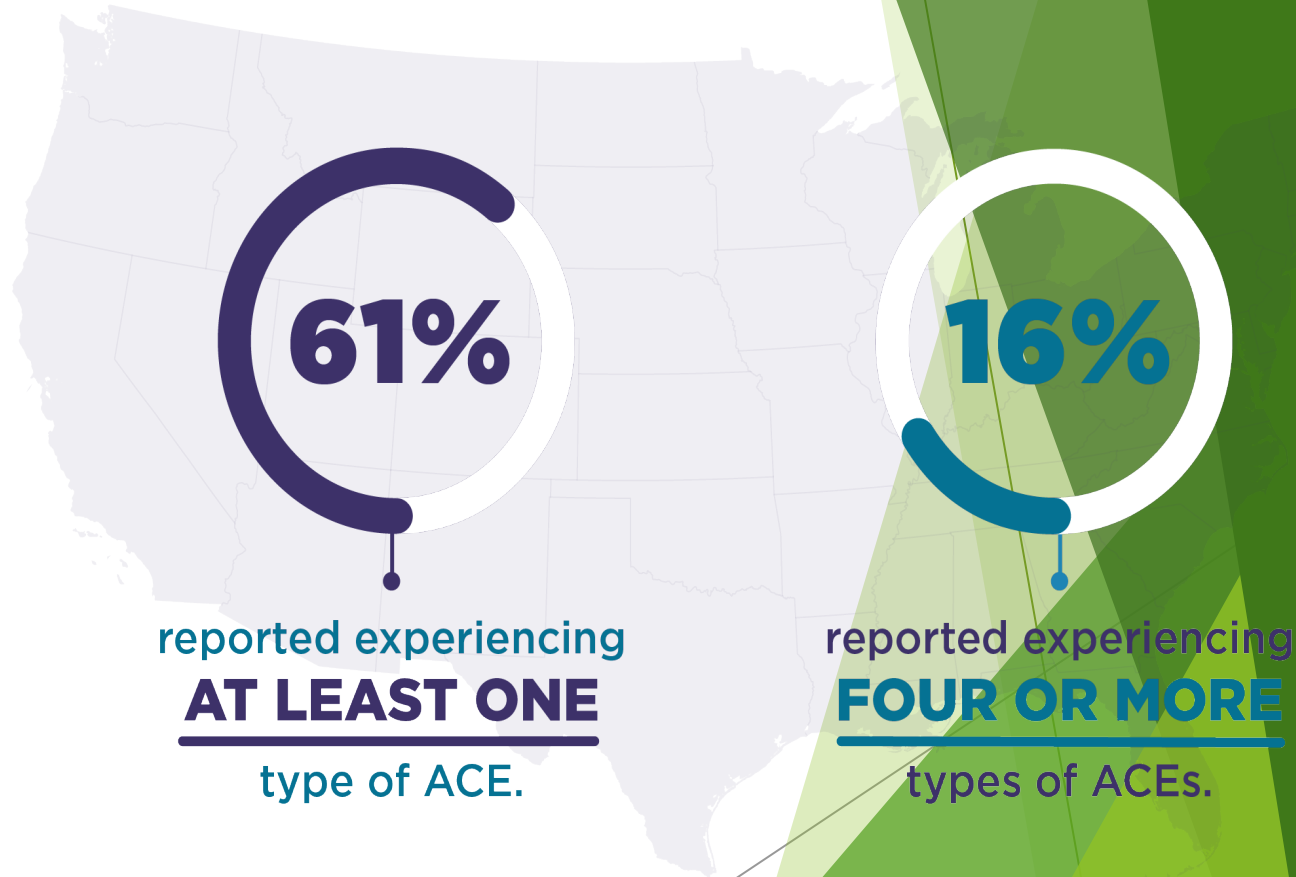
Yes No If yes enter 1 _____

Now add up your “Yes” answers: _____ This is your ACE Score.

(adapted from: http://www.cestudy.org/files/ACE_Score_Calculator.pdf)

Many People Report ACEs

According to data collected from **more than 144,000 adults across 25 states** between 2015 and 2017:



► Centers for Disease Control and Prevention 1600 Clifton Road NE, Atlanta, GA 30333 Publication date: November 5, 2019

History of CDC-Kaiser ACE study

- ▶ One of largest investigations of its kind
- ▶ Began at Kaiser Permanente from 1995-97
- ▶ Over 17,000 Health Maintenance Organization members participated
- ▶ Confidential surveys completed regarding childhood experiences and current health status and behaviors

Adverse childhood experiences, or ACEs, are potentially traumatic events that occur in childhood (0-17 years). For example:

- ▶ experiencing violence, abuse, or neglect
- ▶ witnessing violence in the home or community
- ▶ having a family member attempt or die by suicide

Also included are aspects of the child's environment that can undermine their sense of safety, stability, and bonding, such as growing up in a household with:

- ▶ substance use problems
- ▶ mental health problems
- ▶ instability due to parental separation or household members being in jail or prison

ACEs are linked to chronic health problems, mental illness, and substance use problems in adolescence and adulthood.

ACEs can also negatively impact education, job opportunities, and earning potential.

However, ACEs can be prevented.

ACEs are common

About 61% of adults surveyed across 25 states reported they had experienced at least one type of ACE before age 18, and nearly 1 in 6 reported they had experienced four or more types of ACEs.

Centers for Disease Control and Prevention 1600 Clifton Road NE, Atlanta, GA 30333 Publication date: November 5, 2019

Preventing ACEs could potentially reduce many health conditions

For example, by preventing ACEs, up to 1.9 million heart disease cases and 21 million depression cases could have been potentially avoided.

Centers for Disease Control and Prevention 1600 Clifton Road NE, Atlanta, GA 30333 Publication date: November 5, 2019

Some children are at greater risk than others.

Women and several racial/ethnic minority groups were at greater risk for experiencing four or more types of ACEs

ACEs are Costly

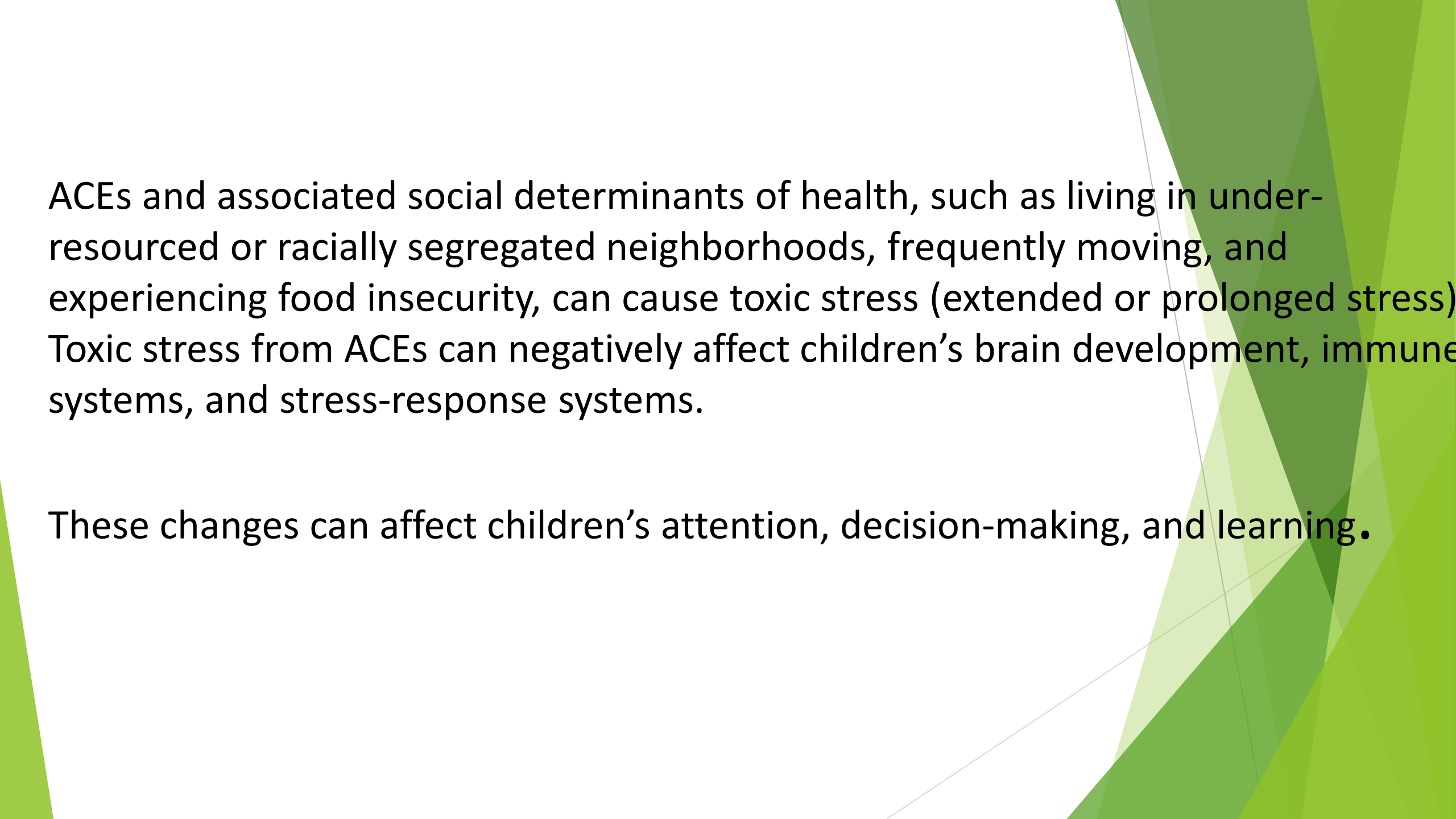
The economic and social costs to families, communities, and society totals hundreds of billions of dollars each year.

A 10% reduction in ACEs in North America could equate to an annual savings of \$56 billion

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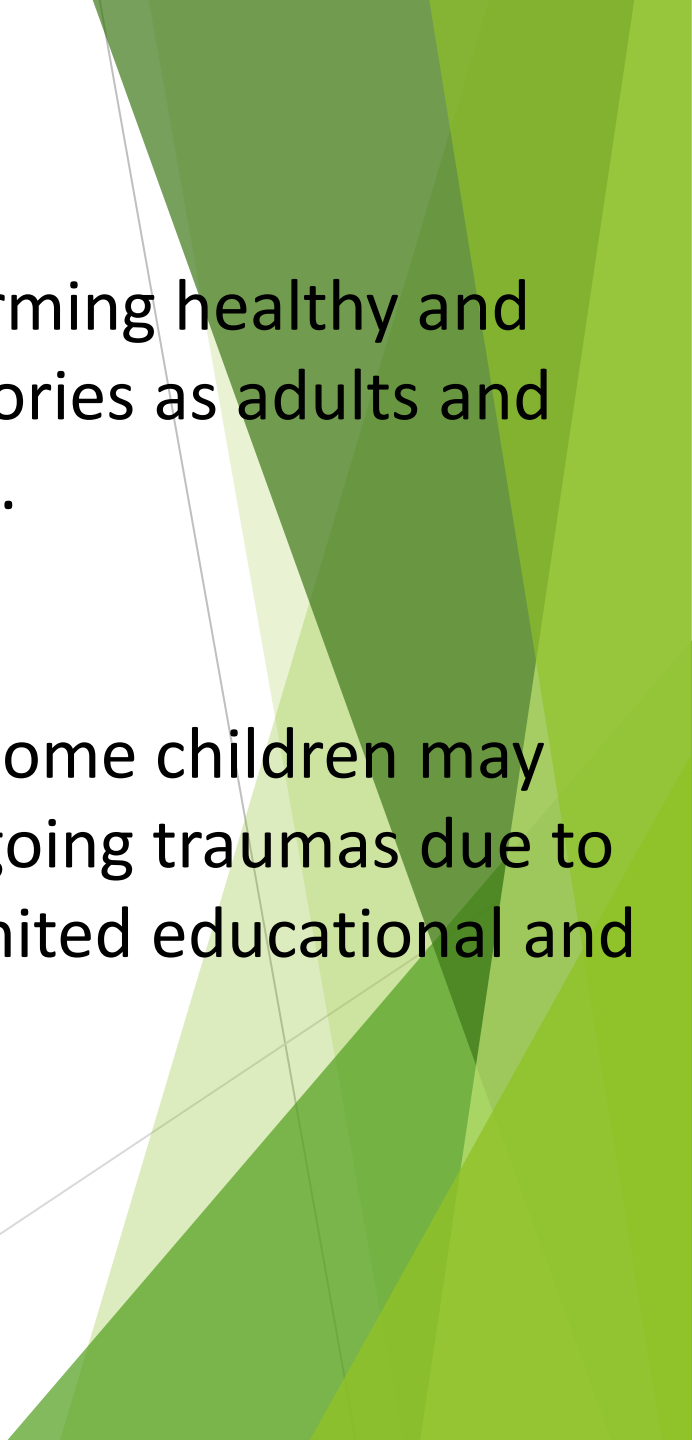
ACEs can have lasting, negative effects on health, well-being, as well as life opportunities such as education and job potential.

These experiences can increase the risks of injury, sexually transmitted infections, maternal and child health problems (including teen pregnancy, pregnancy complications, and fetal death), involvement in sex trafficking, and a wide range of chronic diseases and leading causes of death such as cancer, diabetes, heart disease, and suicide.



ACEs and associated social determinants of health, such as living in under-resourced or racially segregated neighborhoods, frequently moving, and experiencing food insecurity, can cause toxic stress (extended or prolonged stress). Toxic stress from ACEs can negatively affect children's brain development, immune systems, and stress-response systems.

These changes can affect children's attention, decision-making, and learning.

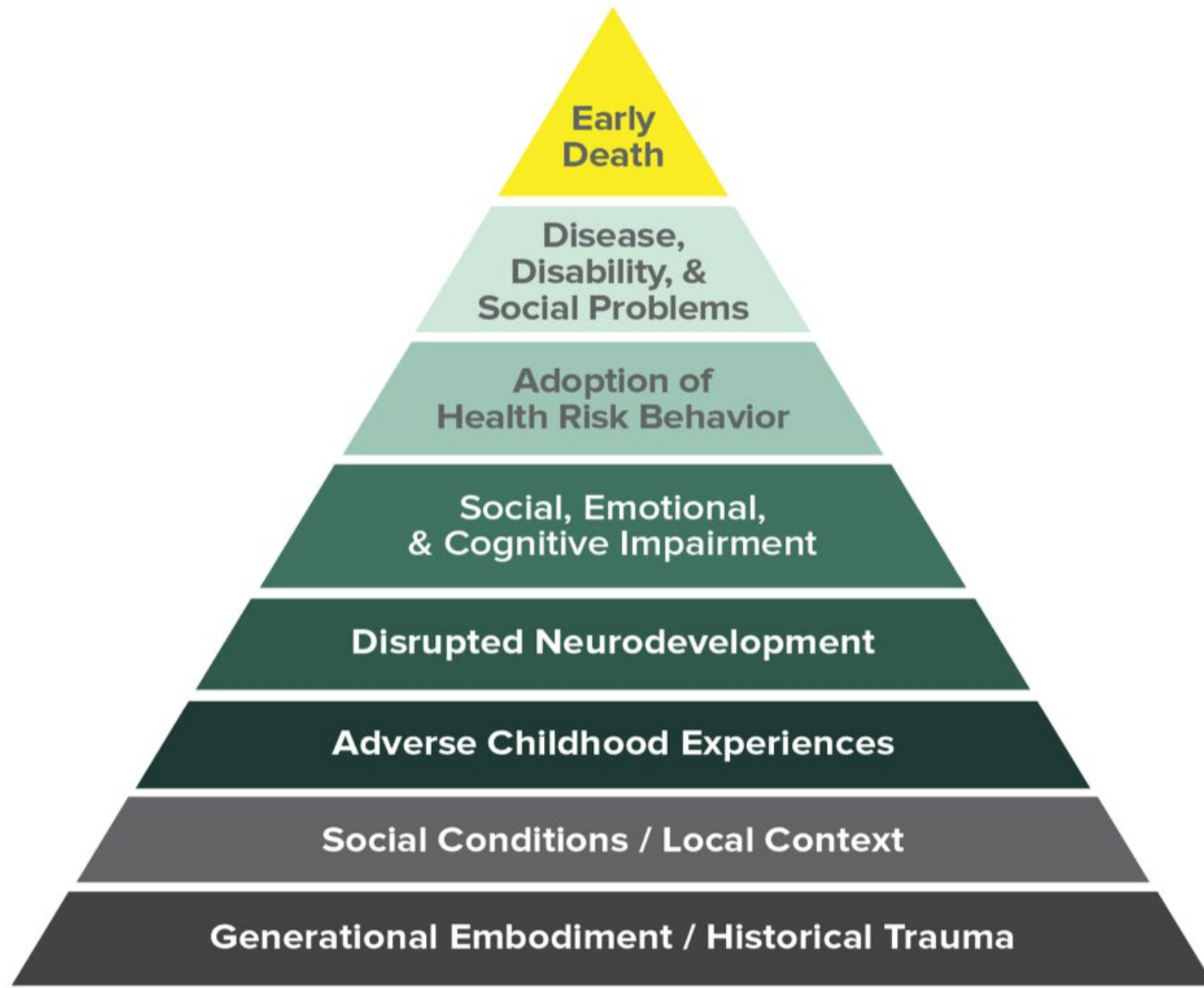


Children growing up with toxic stress may have difficulty forming healthy and stable relationships. They may also have unstable work histories as adults and struggle with finances, jobs, and depression throughout life.

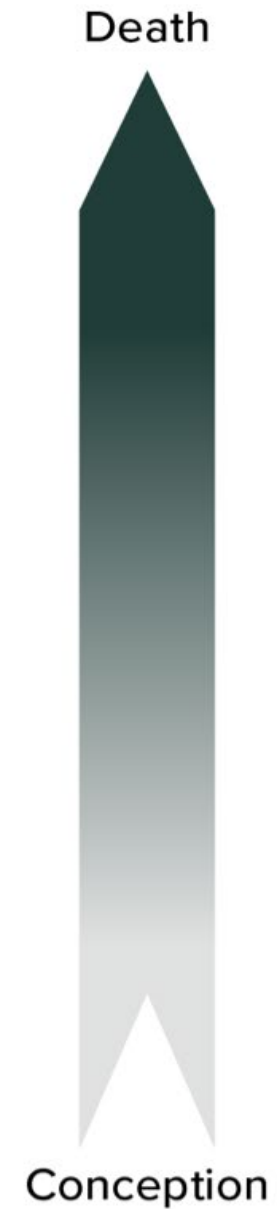
These effects can also be passed on to their own children. Some children may face further exposure to toxic stress from historical and ongoing traumas due to systemic racism or the impacts of poverty resulting from limited educational and economic opportunities.

Preventing ACEs

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Mechanism by which Adverse Childhood Experiences Influence Health and Well-being Throughout the Lifespan



Strategy	Approach
Strengthen economic supports to families	<ul style="list-style-type: none">•Strengthening household financial security•Family-friendly work policies
Promote social norms that protect against violence and adversity	<ul style="list-style-type: none">•Public education campaigns•Legislative approaches to reduce corporal punishment•Bystander approaches•Men and boys as allies in prevention

Ensure a strong start for children

- Early childhood home visitation
- High-quality child care
- Preschool enrichment with family engagement

Teach skills

- Social-emotional learning
- Safe dating and healthy relationship skill programs
- Parenting skills and family relationship approaches

Connect youth to caring adults and activities

- Mentoring programs
- After-school programs

Intervene to lessen immediate and long-term harms

- Enhanced primary care
- Victim-centered services
- Treatment to lessen the harms of ACEs
- Treatment to prevent problem behavior and future involvement in violence
- Family-centered treatment for substance use disorders

Raising awareness of ACEs can help:

- Change how people think about the causes of ACEs and who could help prevent them.
- Shift the focus from individual responsibility to community solutions.
- Reduce stigma around seeking help with parenting challenges or substance misuse, depression, or suicidal thoughts.
- Promote safe, stable, nurturing relationships and environments where children live, learn, and play.

Behavioral Risk Factor Surveillance System and 6 State Pilots

- ▶ States collected data from 2009-2020
- ▶ CDC funded grants to 6 states, implementing two or more prevention strategies, starting in 2020 (CT, GA, MA, MI, MN and NJ)

Publications

Fact Sheet:

- [Vital Signs Fact Sheet: Adverse Childhood Experiences \(ACEs\) \[865 KB, 2 Pages, 508\]](#)

CDC's Vital Signs fact sheet featuring ACEs and their negative impacts on health as well as education and employment opportunities later in life.

CDC Reports:

- [Adverse Childhood Experiences \(ACEs\) Prevention Strategy Plan \[3 MB, 20 Pages\]](#)

This resource outlines CDC's specific goals and objectives for ACEs prevention and response. The goals and objectives aim to prevent ACEs before they happen, identify those who have experienced ACEs, and respond using trauma-informed approaches in order to create the conditions for strong, thriving families and communities where all children and youth are free from harm and all people can achieve lifelong health and wellbeing.

- [Preventing Adverse Childhood Experiences \(ACEs\): Leveraging the Best Available Evidence \[4 MB, 40 Pages, 508\]](#)

This is a resource to help states and communities leverage the best available evidence to prevent ACEs from happening in the first place as well as lessen harms when ACEs do occur. It features six strategies drawn from the CDC Technical Packages to Prevent Violence.

- https://www.cdc.gov/violence-prevention/php/resources-for-action/?CDC_AAref_Val=https://www.cdc.gov/violencepreven

CDC's technical package that identifies a number of strategies based on the best available evidence to help states and communities prevent and reduce child abuse and neglect. [Also available in Spanish \[21 MB, 52 Pages, 508\]](#)

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Case example and clinical uses in care management

Why Screen?

Routine and universal Adverse Childhood Experiences (ACEs) screening helps clinical teams provide more effective and equitable health care. Screening results can be used to provide targeted clinical interventions, as well as offer greater compassion, patience, and the opportunity for relational healing.

1. Routine screenings for children can capitalize on critical opportunities for prevention, early detection, and intervention.
2. ACE screening can prevent and reduce the accumulation of exposures to adversity and the risk for negative health outcomes.
3. Screening improves clinical assessment for and treatment of childhood health conditions.

Why should adult patients be screened for ACEs?

Over the past 20 years, studies have demonstrated the impact of exposure to ACEs on adult morbidity and mortality. There are several critical ways that screening for ACEs can benefit adult patients:

1. ACE screening can improve clinical assessment, patient education, and treatment planning for chronic health conditions.
2. ACE screening helps providers and patients address behavioral pathways to ACE-Associated Health Conditions.
3. ACE screening can validate and empower patients and contribute to improved family health.

ACE screening is especially relevant in reproductive health care settings. In addition to the value of screening adults for ACEs, there are several ways that screening pregnant women and their partners for ACEs can support their and their **child's** health:

1. ACE screening helps identify risks to reproductive health.
2. ACE screening promotes a positive cycle of health by reducing the intergenerational transmission of ACEs and toxic stress.
3. ACE screening supports the provision of trauma-informed reproductive health services.

[Benefits of Screening for ACEs | ACEs Aware - Take action. Save lives.](#)

Here are 3 YouTube videos that talk about ACES and some ways in which professionals can intervene to help children who are experiencing trauma in their home, school or community. Please feel free to access to deepen your understanding of the care needs for those exposed to toxic environments.

<https://youtu.be/-vlqJK8Nu1Q?si=plg8maHiQYr8bu7Z>

Office of the California Surgeon General (2min33sec)

<https://youtu.be/Kn1a7a1iMew?si=U5q3omUozyQpd6AJ>

Conversations for Caring (8min15sec)

<https://youtu.be/Z8db4x4vjCE?si=LXEjZ9Ef2nHZJkhg>

Clarity Child Guidance Center (13 min40 sec)

Among the predictive results of ACE are:

Probability of Outcomes Given 100 American Adults		
33 with 0 ACEs	51 with 1-3 ACEs	16 with 4-8 ACEs
1 in 16 smokes	1 in 9 smokes	1 in 6 smokes
1 in 69 are alcoholic	1 in 9 are alcoholic	1 in 6 are alcoholics
1 in 48 uses IV drugs	1 in 43 uses IV drugs	1 in 30 uses IV drugs
1 in 14 has heart disease	1 in 7 has heart disease	1 in 6 has heart disease
1 in 96 attempts suicide	1 in 10 attempts suicide	1 in 5 attempts suicide

Chart from ACEs Iowa 360
Source: <http://www.bfhd.wa.gov/ph/aces.php>

Case to present: “B”, age 14.

He is the (adopted from CPS origins) oldest of 5 siblings otherwise ages 9 to 4:

The 9 year male contact with Cigna/Evernorth due to eye injury 2/2020.

8 year old female-victim/asd has had a case manager and various authorizations for care.

7 year old female-victim/asd, has had a case manager and various authorizations for care.

4 year old male-has EAP trigger this week to support/ as well as feeding and speech therapy/ and various authorizations for care.

B had early intervention through the school district and county in which he resides, and Applied Behavioral Analysis, recommended/received for 40 hours but lost services due to pandemic. Family maintained treatment team through county/home school and psychiatrist for medications (ADZENYS XR-ODT - 9.4 MG, LITHIUM CARBONATE ER - 450 MG, ESCITALOPRAM OXALATE 20 MG, BUPROPION HCL SR – 150 MG)

Parent's first Evernorth contact was 3/24/21, and parents have had numerous rounds of EAP authorizations for care and therapy, ongoing. B is diagnosed with Autism, as well as Obsessive Compulsive Disorder, Depression, ADHD, child verbal but functional level is moderate/ level 2, stereotypical and inappropriate behaviors, needs more care. Has been in JDP as well as wilderness camp.

After acute inpatient stay in 3/2021 the family began seeking Residential placement (other prior attempts since age 11), but difficulties as either no beds, customer too young or too old, or neuro/behavioral issues precluding admit.

Child re-violated on short release to probation and taken into juvenile justice placement/detention center 9/2022, with possible placement in private treatment facility (+15 contacted) with one accepting/reviewed but then placement declined by court order as child continues to display inappropriate and pubic sexual behaviors.

Child continues in juvenile justice placement, currently set to age 19 and on wait list for JPD treatment facility that may take a year.

In reviewing the general structure of the ACES evaluation, this child shows 7 positive of the 10 possible scores, confirmed and with the remaining 3 also suspected positive but not able to be confirmed (suspected sexual abuse, suspected drug use by parent, suspected family violence to include adult/mother).

His risks in all areas is then extremely high, and long term intensive interventions are needed and expected. Current care is largely containment, with hopes for better fit mental health care to begin as he will be in state custody for 7+ years.

- Recall- shown in this case regarding our prior review of ACES
- Compared to those children with no ACEs, children three to five years old with two or more ACEs are four times more likely to have three or more of the six social and emotional challenges that can affect learning.
- About two thirds of children six to 17 years old who bully, pick on, or exclude other children - or are themselves bullied, picked on or excluded - have ACEs.
- <https://www.cdc.gov/aces/about/index.html>

Further Resources and review links :

The Substance Abuse and Mental Health Services Administration has also created a set of guidelines that help define the best practices for trauma informed care at the organizational level. These can be applied to an organization based on the results of general ACEs data.

[TA Coalition Webinar: Trauma Informed Practices in Schools: Understanding Racial Trauma and Cultivating Wellness | National Association of State Mental Health Program Directors \(nasmhpd.org\)](#)

<https://www.cdc.gov/violenceprevention/aces/index.html>

<https://www.acesaware.org/learn-about-screening/benefits-of-ace-screening/>

<https://knowledgeworks.org/resources/ace-assessment-how-used/>

[Institute for Community and Family Resilience - Connect Through Love \(connectthrulove.org\)](https://connectthrulove.org)

Questions, needs or concerns?