THE ADVERSE CHILDHOOD EXPERIENCE STUDY (ACES): IMPLICATIONS OF LONG-TERM EFFECTS

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USEFUL FOR NOW, BUT THESE NEED TO GO AWAY

- CPS
- CPT system
- Trauma informed communities
- DV shelters



Need to prevent all of this instead!!



SAVE THE BRAIN - PREVENT ABUSE

GROW THE BRAIN - STIMULATION

Brains need both:

1. Freedom from abuse



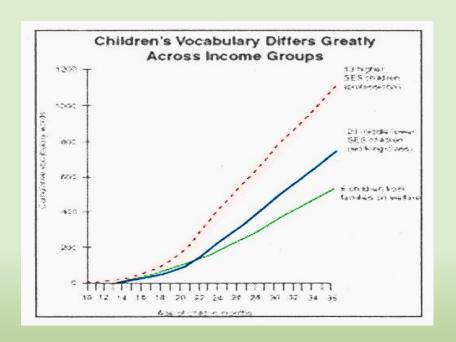


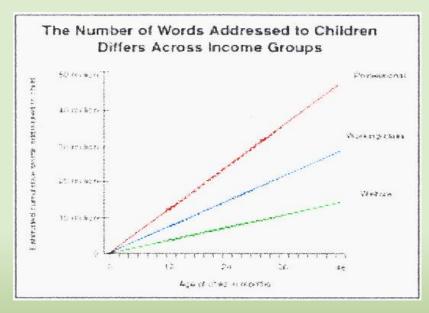




Left Behind By Kindergarten:

Children living in poverty average 15 IQ points below their peers.





Vocabulary at Age 3

Poor children: 525 words

Working class: 749 words

Professional: 1,116 words

By age 4, the average child in a poor family might have been exposed to 13 million fewer words than child in a working class family and **30 million fewer words** than a child in a professional family.



The Evolution of Prevention

What Kind of Problem is it?





Public Health Problem

"It is time for critical thinking to formulate a new national public health priority, preventing child maltreatment and promoting child well treatment."

Surgeon General Richard H. Carmona, MD MPH – March 2005

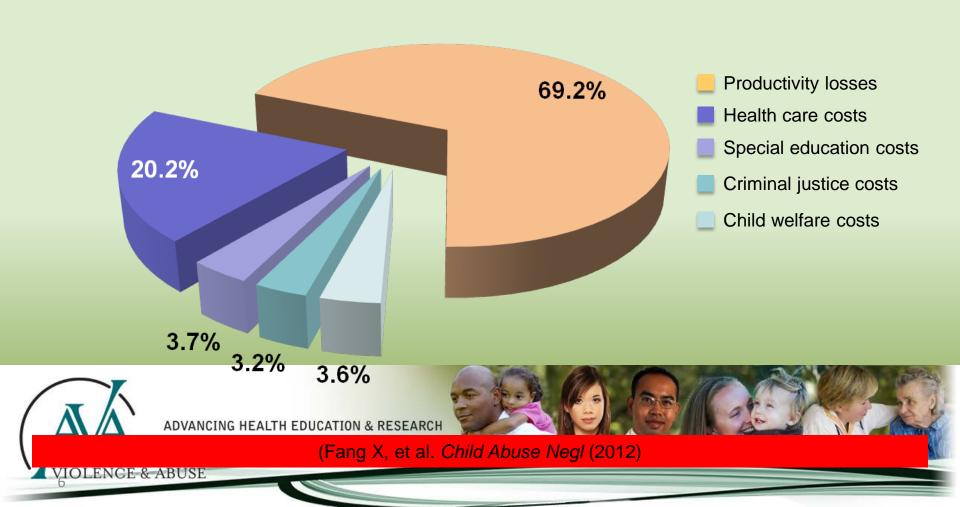






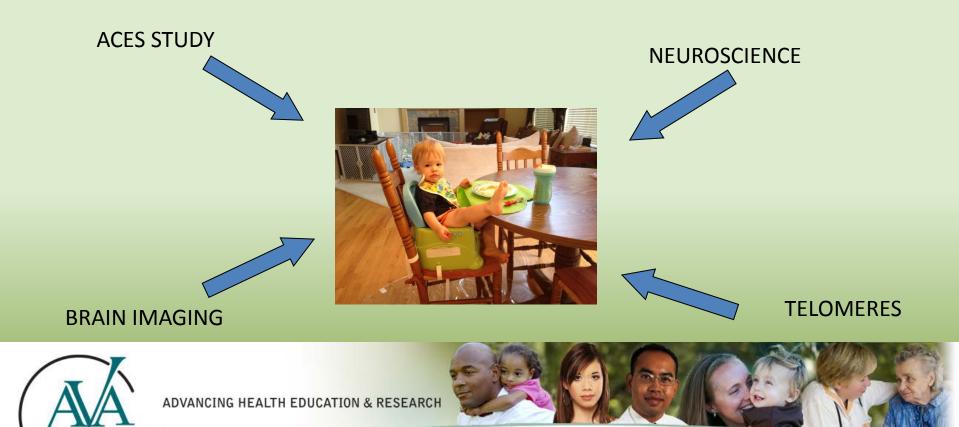
Lifetime Economic Burden of Child Maltreatment: \$124 billion in 2008

Economic burden



WHAT HAPPENS IF WE DON'T PREVENT ABUSE?

FOUR AREAS OF RESEARCH CONVERGENCE





ACES



The Influence of Child Maltreatment Throughout Life

Health-risk Behaviors

Sexual promiscuity Sexual perpetration Alcohol abuse Illicit/injected drug use Smoking Behavior problems

Child Maltreatment

Mental/Social Problems

PTSD

Depression

Anxiety

Eating disorders Academic

achievement

Unwanted pregnancy

Obesity

Revictimization

Disease and Injury Conditions

Ischemic heart disease

Diabetes

Stroke

Cancer

Suicide

Skeletal fractures

Chronic bronchitis/

emphysema

STDs (e.g., HIV)

Hepatitis

Adverse Childhood Experiences and their Relationship to Adult Health and Well-being

A collaborative effort of Kaiser Permanente and The Centers for Disease Control and Prevention

www.acestudy.org

Vincent J. Felitti, M.D. Robert F. Anda, M.D.

The Adverse Childhood Experiences (ACE) Study

- The largest study of its kind ever done to examine the health, social, and economic effects of adverse childhood experiences over the lifespan (18,000 participants)
- Average age = 57 years old



What do we mean by Adverse Childhood Experiences?

Experiences that represent medical and social problems of national importance.

- -childhood abuse and neglect
- -growing up with domestic violence, substance abuse or mental illness in the home, parental loss, or crime

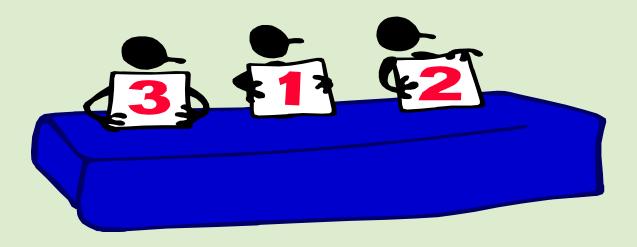


Categories of Adverse Childhood Experiences

Category
Prevalence (%)

Abuse, by Category	
Psychological (by parents)	11%
Physical (by parents)	11%
Sexual (anyone)	22%
Household Dysfunction, by Cate	egory
Substance Abuse	26%
Mental Illness	19%
Mother Treated Violently	13%
Imprisoned Household Member	3%

ACE Score



- Total number of ACE that each participant reported
- Used to assess negative experiences during childhood
- Example: Experiencing physical abuse as a child is an ACE score of one. Experiencing physical abuse plus witnessing IPV is an ACE store of two.



Adverse Childhood Experiences Score

Number of categories of adverse childhood experiences

are summed ...

ACE score	Prevalence
0	48%
1	25%
2	13%
3	7%
4 or more	7%



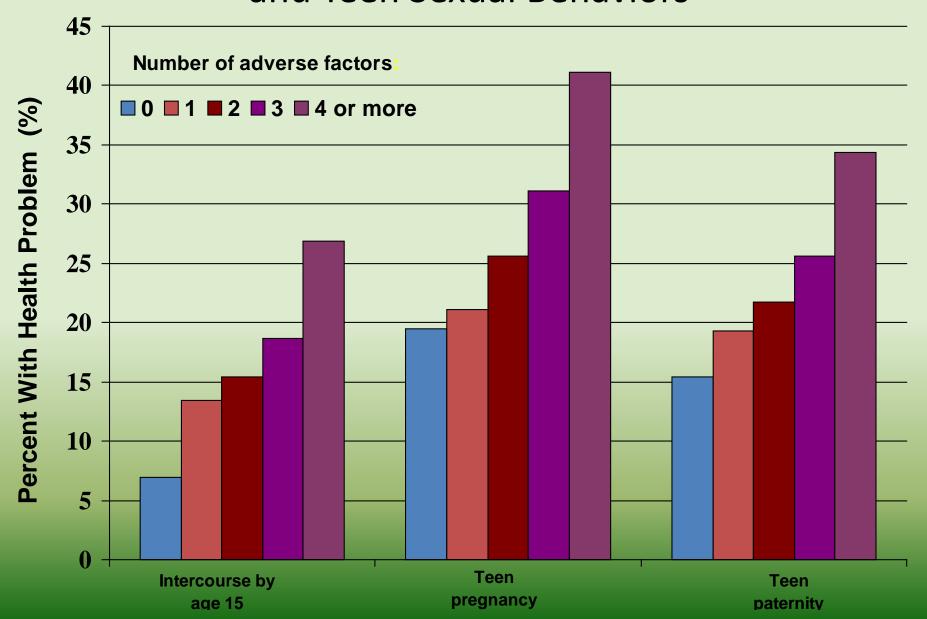
- More than *half have at least one ACE*
- If one category of ACE is present, there is an 84% likelihood of additional categories being present.

HEALTH CONSEQUENCES

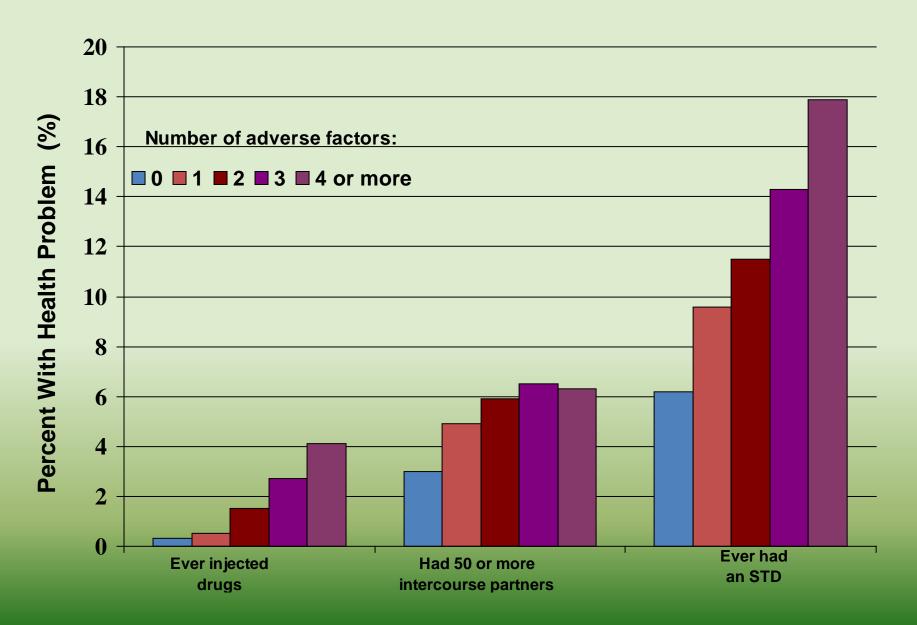


SEX

Number of Adverse Childhood Experiences and Teen Sexual Behaviors



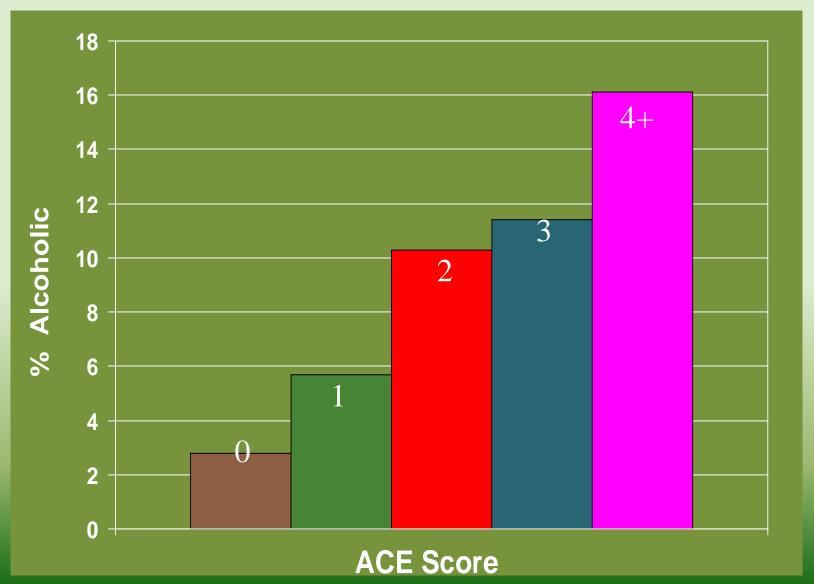
ACE Score and HIV Risks



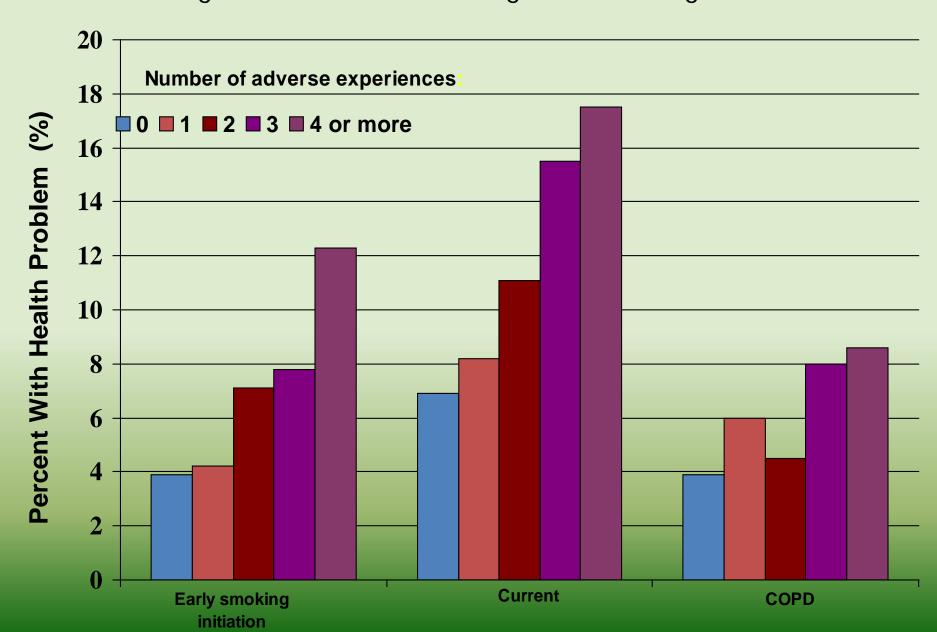
DRUGS



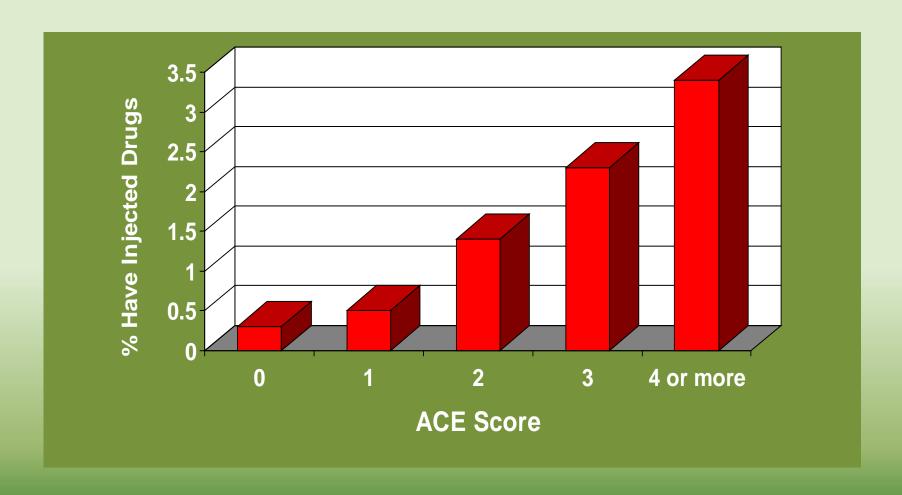
Childhood Experiences vs. Adult Alcoholism



Relationship Between Number of Adverse Childhood Experiences and Smoking Behaviors and Smoking-Related Lung Disease



ACE Score vs. Intravenous Drug Use



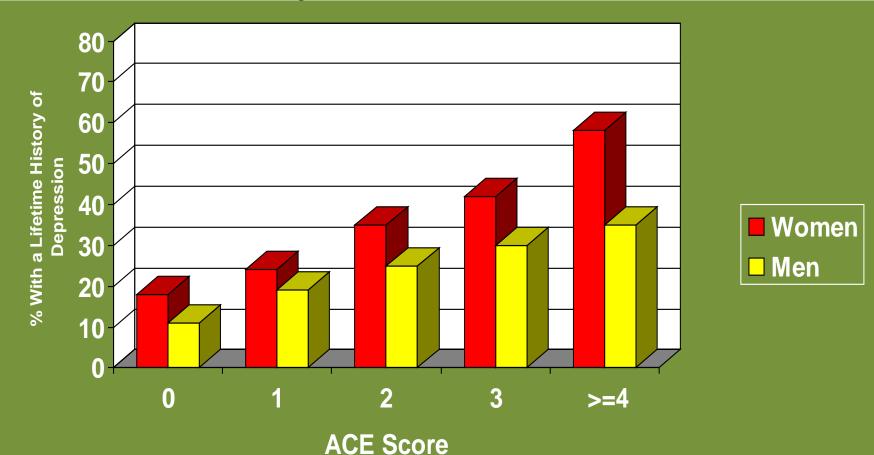
Estimates of the Population Attributable Risk of ACEs for Selected Outcomes in Women

Drug Abuse	PAR
Alcoholism	65%
Drug abuse	50%
IV drug use	78%

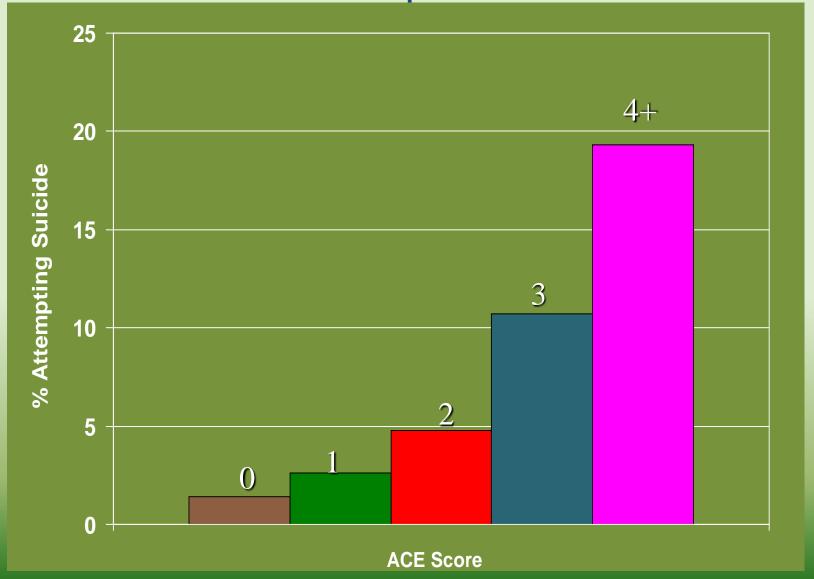
^{*}That portion of a condition attributable to specific risk factors

MENTAL HEALTH

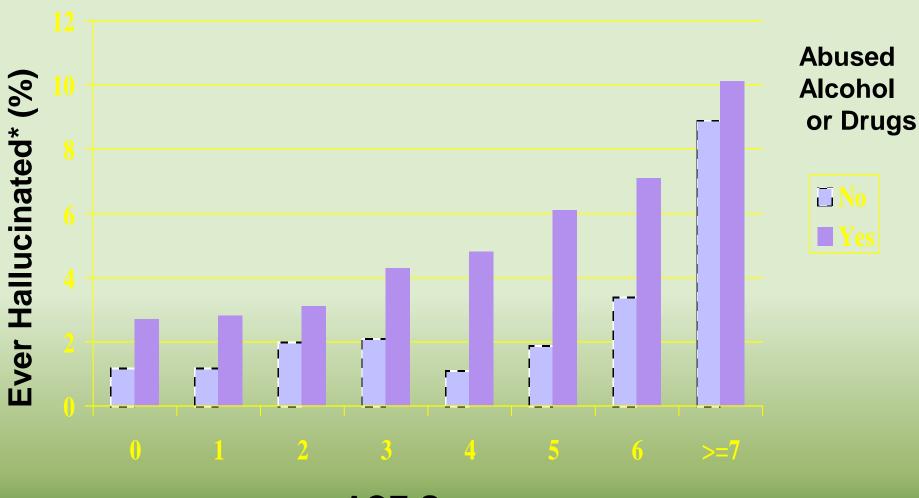
Childhood Experiences Underlie Chronic Depression



Childhood Experiences Underlie Attempted Suicide



ACE Score and Hallucinations



ACE Score

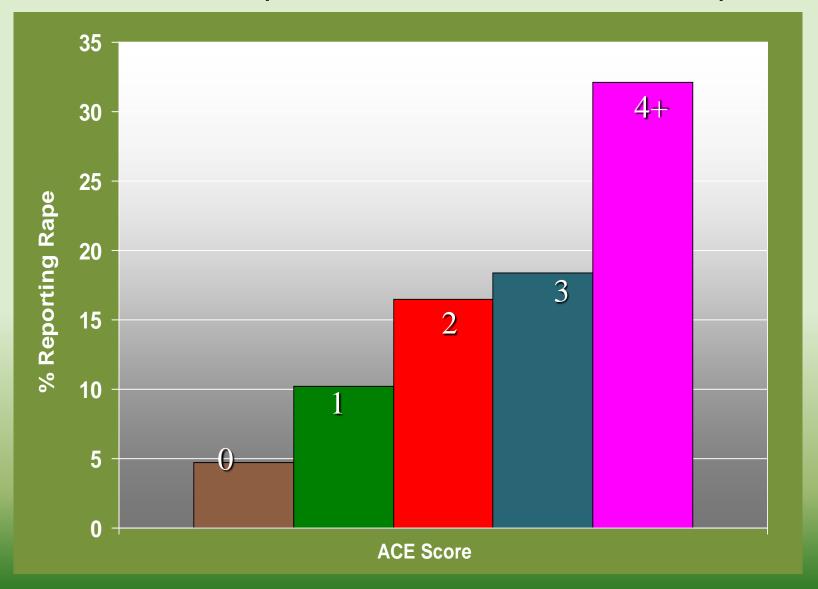
*Adjusted for age, sex, race, and education.

Estimates of the Population Attributable Risk* of ACEs for selected outcomes in women

Mental Health	PAR
Current depression	54%
Chronic depression	41%
Suicide attempt	58%

^{*}That portion of a condition attributable to specific risk factors

Childhood Experiences Underlie Rape



ACE STUDY FINDINGS

- As ACE score goes up, so does risk for:
 - Smoking
 - Organic disease
 - Adult alcoholism
 - Depression and suicide attempts
 - Having 50+ lifetime sexual partners
 - STD's and Rape (from 5% to 33%)
 - Hallucinations
 - Domestic Violence
 - Addictions
 - Dying early
 - Job Problems and lost time from work





Adverse Childhood Experiences Reported by Adults Five States, 2009

- First published report to document prevalence of ACEs in population-based representative sample from multiple states stratified by demographic characteristics, including sex, age, education, and race/ethnicity.
- Approximately 59% reported one or more ACEs
- These BRFSS estimates are similar to the findings in the Kaiser-CDC ACE study (2) and similar research, including study in Texas

CDC MMWR, December 17, 2010/59(49); 1609-1613



Adverse Childhood Experiences determine the likelihood of the 10 most common causes of death in the US

Top 10 Risk Factors: smoking, severe obesity, physical inactivity, depression, suicide attempt, alcoholism, illicit drug use, injected drug use, 50+ sexual partners, history of STD

With an ACE Score of 0

The majority of adults have few, if any, risk factors for these diseases



However, with an ACE Score of 4 or more

The majority of adults have multiple risk factors for these diseases or the diseases themselves

Many chronic diseases in adults are determined decades earlier, in childhood



Evidence from ACE Study

Adverse childhood experiences are the most basic cause of

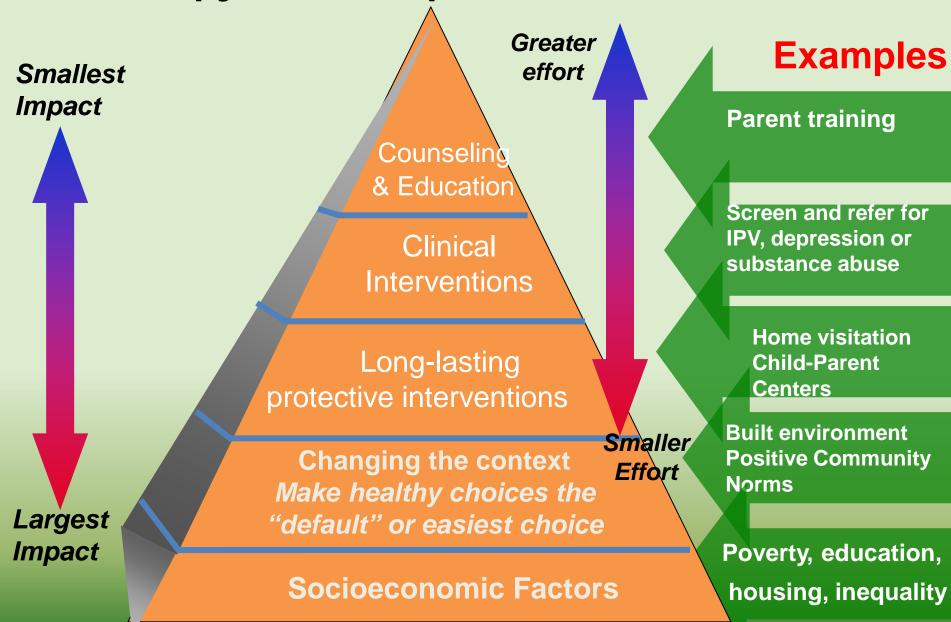
- * health risk behaviors
- * morbidity
- * disability
- * mortality
- * healthcare costs



ACES AND PREVENTION



Frieden's pyramid adapted to child maltreatment



Frieden's pyramid AJPH 2010;100(4): 590-595



Assuring safe, stable, nurturing relationships and environments for all children







Vision for DVP's
Child Maltreatment Prevention Work

SOCIAL NORMS CHANGE



- Adrian Peterson NFL
- Sparking a debate about corporal punishment in USA
- Is your organization reaching out to NFL?

AVA is trying



OPPORTUNITY FOR NORMS CHANGE: CORPORAL PUNISHMENT In the following 38 countries, children are protected by law from all corporal

- punishment (most recent first):
- **Bolivia** (2014)
- Brazil (2014)
- Malta (2014)
- Honduras (2013)
- TFYR Macedonia (2013)



• Albania (2010)

Luxembourg (2008)

Congo, Republic of (2010)

• Republic of Moldova (2008)

Kenya (2010)

• Costa Rica (2008)

Tunisia (2010)

• Togo (2007)

Poland (2010)

• Spain (2007)

Liechtenstein (2008)

Venezuela (2007)

- Uruguay (2007)
- Portugal (2007)
- New Zealand (2007)
- Netherlands (2007)
- Greece (2006)
- Hungary (2005)
- Romania (2004)
- Ukraine (2004)
- Iceland (2003)

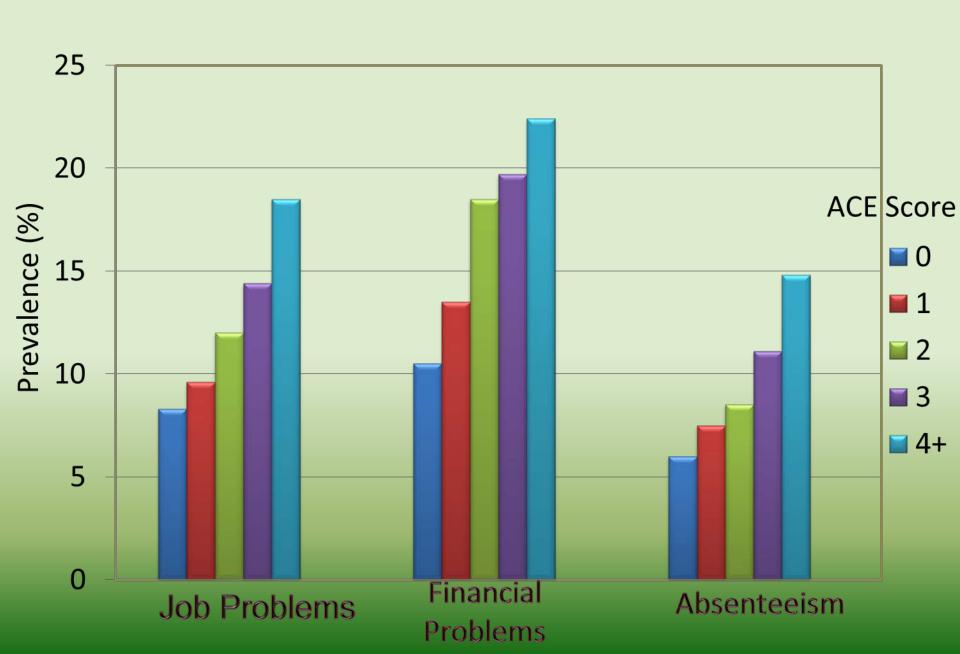
- Turkmenistan (2002)
- Germany (2000)
- Israel (2000)
- Bulgaria (2000)
- Croatia (1999)
- Latvia (1998)
- Denmark (1997)

- Cyprus (1994)
- Austria (1989)
- Norway (1987)
- Finland (1983)





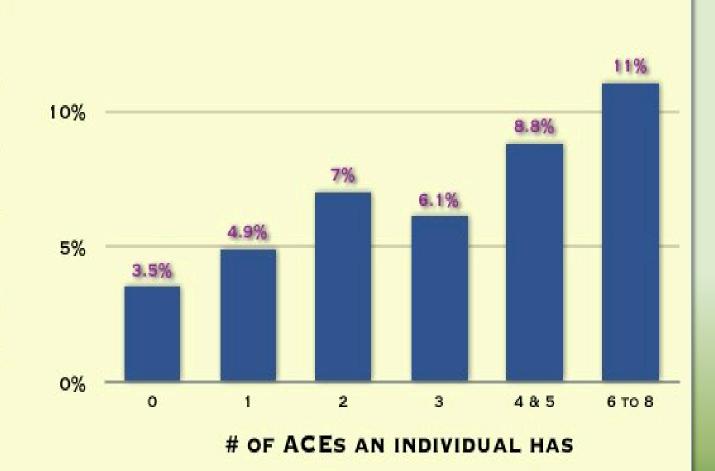
ACE Score and Work Problems



The more ACEs you've had, the more likely it is you'll experience work-related

15%

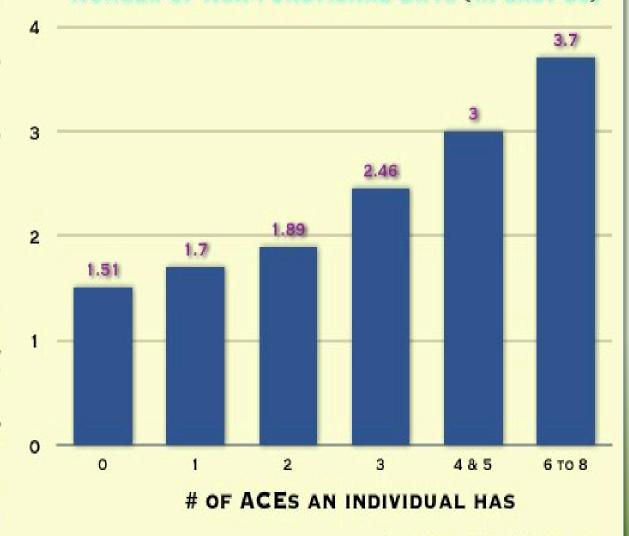
ANNUAL PROBABILITY OF WORK RELATED INJURY



from Stress, Strength, Work, Hope published by the Washington State Family Policy Council, 2012

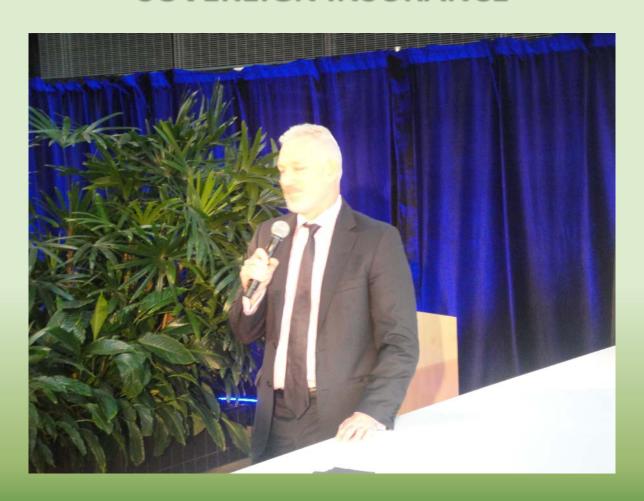
The more ACEs you've had, the more likely it is you'll miss work or work at lower productivity

NUMBER OF NON-FUNCTIONAL DAYS (IN LAST 30)



from Stress, Strength, Work, Hope published by the Washington State Family Policy Council, 2012

NEW ZEALAND SOVEREIGN INSURANCE



IMAGINE if.....

More employers offered on-site childcare and/or childcare benefits



IMAGINE If.....

Businesses helped reinforce prevention

messages......

With "floor talkers" on coping with infant crying



IMAGINE if.....

When business leaders talk with policy makers, they use the opportunity to talk about the impact of ACEs and the importance of safe, stable, nurturing relationships and communities





BRAIN DEVELOPMENT

National Scientific Council on the Developing Child www.developingchild.net

Some of the top neuroscientists have also come to appreciate how brains:

- Develop, and
- Develop differently depending upon the environment they are exposed to



3 CATEGORIES OF STRESS

Positive stress



Tolerable stress

Toxic stress





3 Core Concepts in Early Development

 Experiences build brain architecture

 "Serve and Return" interaction shapes brain circuitry



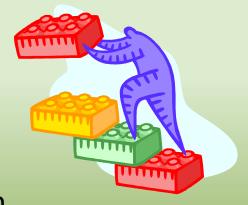
Toxic stress derails healthy development



http://www.developingchild.harvaru.equ

BRAIN DEVELOPMENT

- Early experiences are built into our bodies and brains--for better or for worse
- Healthy development in the early years provides the building blocks for:
 - educational achievement
 - economic productivity
 - responsible citizenship
 - lifelong health
 - strong communities
 - successful parenting of the next generation

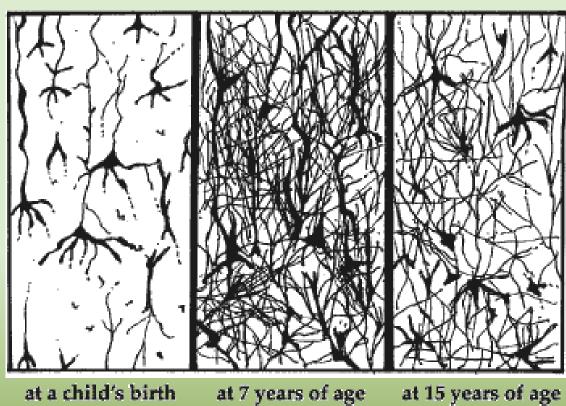


http://www.developingchild.harvard.edu



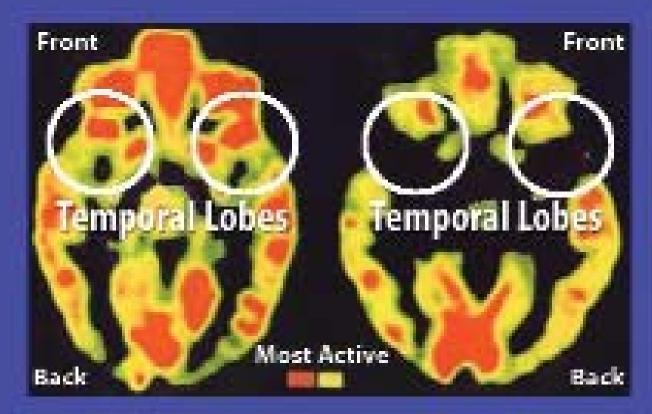
Synaptic Density





700 new synapses (neural connections) every second

SOURCE: Harvard Center on the Developing Child



Positive Stimulation Negative Stimulation

Brain activity of a normal five-year-old child (left) and a five-year-old institutionalized orphan neglected in infancy (right).

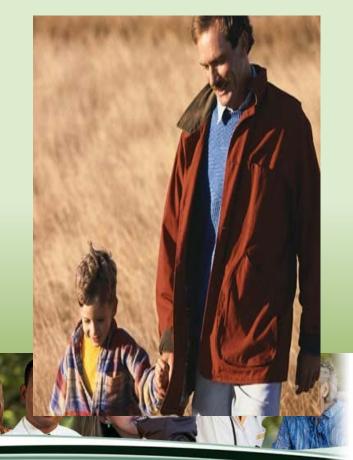


SSNRs: Influence Early Brain Development and Buffer Adverse Childhood Experiences

 Healthy development depends on the quality and reliability of a young children's relationships with the important people in their lives

 Nurturing, responsive, and individualized interactions build healthy brain architecture that provides a strong foundation for future learning, behavior, and health

can provide a buffer for ACE





- Children may be more susceptible than adults to cellular microenvironments and impact on brain development
- High rate of PTSD (42% to 90%)
- [Physical abuse rate of PTSD may be 50%]
- Limbic-hypothalamic-pituitary-adrenal axis is at risk (may be "over sensitive")



- Increased sensitivity of the locus ceruleus/SNS/chatecholamine system?
- Responsible for high heart rate, blood pressure, other effects
- Becomes dysregulated?



- Serotonin may become low in the prefrontal cortex – associated with depression, suicidal behaviors, impulsivity
- May lead to "learned helplessness"

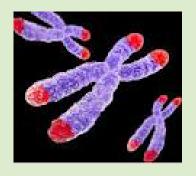


- Neuroimaging of adults supports the concept that medial prefrontal regions responsible for executive functions are hyporesponsive when abused as children
- Amygdala is hyperresponsive
- Corpus callosum is decreased (males more than females?)
- Smaller overall brain volume (e.g. 8%) as adults





TELOMERES



- Telomeres are the ends of DNA strands which are shortened with each cellular division.
- With each replication, telomeres shorten until the "Hayflick limit" is reached and the cell enters senescence.
- Telomeres are thought to be a sign of cellular aging (and perhaps overall aging of the organism).



EXPOSURE TO VIOLENCE DURING CHILDHOOD IS ASSOCIATED WITH TELOMERE EROSION FROM 5 TO 10 YEARS OF AGE: A LONGITUDINAL STUDY

- Same children examined for telomere erosion between 5 and 10 years of age
- Physical abuse caused more erosion
- Combination of physical abuse, exposure to domestic violence, or bullying caused the most erosion
- Children will have decreased life span, earlier diseases

Shalev I, Moffitt TE, Sugden K, Williams B, Houts RM, Danese A, Mill J, Arseneault I, Caspi A. Molecular Psychiatry 2012. doi:10.1038/mp.2012.32.

FOUR LINES OF CONVERGENCE



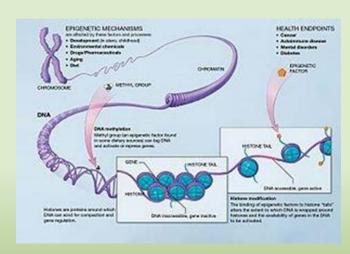
 Not only does abuse alter which neurons are selected, how different parts of the brain develop, and how neuro-hormonal pathways are altered but now it can be seen that it leaves its very footprints deep in the cells.

Abuse creates different children



EPIGENETICS

 Epigenetics is the study of heritable changes in gene activity that are not caused by changes in the DNA sequence



How people react gives you clues about their life



- Example 1:
 - A guy goes into a bar and gets into a discussion with another guy
 - That guy suddenly hits him without warning
- What kind of brain behavior is he showing?
- Limbic-hypothalamic-pituitary-adrenal overreactivity?



- Example 2:
 - A woman says that her 3 year old will not mind and she needs to hit him, but it doesn't work
 - You give alternatives, but she insists nothing works and doesn't really try
- What kind of brain behavior is she showing?



CHILDREN TELL YOU ABOUT THEIR BRAINS

CHILDREN TELL YOU ABOUT THEIR BRAINS

- They experience trauma
 - Prenatal substance exposure, mother's stress chemicals
 - Neglect
 - Physical abuse
 - Sexual abuse
 - Witnessing IPV, bullying



Response to Trauma: Bodily Functions

FUNCTION	CENTRAL CAUSE	SYMPTOM(S)
Sleep	Stimulation of reticular activating system	 Difficulty falling asleep Difficulty staying asleep Nightmares

Response to Trauma: Bodily Functions

Eating

Inhibition of satiety center, anxiety

- 1. Rapid eating
- 2. Lack of satiety
- 3. Food hoarding
- 4. Loss of appetite

Response to Trauma: Bodily Functions

Toileting

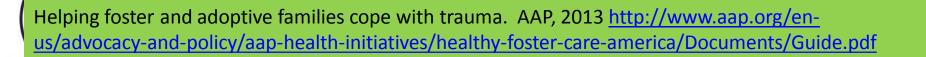
Increased sympathetic tone, increased catecholamines

- 1. Constipation
- 2. Encopresis
- 3. Enuresis
- 4. Regression of toileting skills

Helping foster and adoptive families cope with trauma. AAP, 2013 http://www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/healthy-foster-care-america/Documents/Guide.pdf

RESPONSE TO TRAUMA: BEHAVIORS

Category	More common with	Response	Misidentified as and/or comorbid with
Dissociation (Dopaminergic)	Females Young children Ongoing trauma/pain Inability to defend self	Detachment Numbing Compliance Fantasy	Depression ADHD inattentive type Developmental delay



RESPONSE TO TRAUMA: BEHAVIORS

Category	More common with	Response	Misidentified as and/or comorbid with
Arousal (Adrenergic)	Males Older children Witness to violence Inability to fight or flee	Hypervigilance Aggression Anxiety Exaggerated response	ADHD ODD Conduct disorder Bipolar disorder Anger Management difficulties

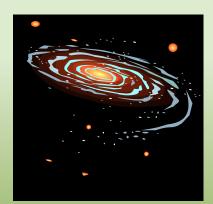
Helping foster and adoptive families cope with trauma. AAP, 2013 http://www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/healthy-foster-care-america/Documents/Guide.pdf

THERAPY –WHAT IS IT?

THERAPISTS ARE BRAIN CHANGERS

 If you go into a room with a therapist and come out with the exact same brain

In this universe – nothing happened





THERAPISTS ARE BRAIN CHANGERS

- Therapy changes brains
 - Uses adaptation to diminish neuroendocrine responsiveness to a stimuli (e.g. touching another human being is not as associated with hurt)
 - Establishes techniques that release less toxic chemicals to stress situations



THERAPISTS ARE BRAIN CHANGERS

- Mentalistic terms are ok, but they reflect actual physical underpinnings
- 21st century therapists envision the brain they are seeing and treating – if not, you are in the previous century



The Future

ABUSE CHANGES THE BRAIN

- Primary prevention is vital
- All of us might help for what has occurred, but often we can't do enough

