ADVERSE CHILDHOOD EXPERIENCES

AMONG ADULTS IN MICHIGAN

WHAT ARE ADVERSE **CHILDHOOD EXPERIENCES?**



Adverse Childhood Experiences (ACEs) are potentially traumatic experiences that occur before the age of 18.

ACEs can include violence, abuse, and growing up in a family with mental health or substance use problems.

ACES ARE COMMON AMONG ADULTS IN MICHIGAN

Eight specific ACEs are tracked through the Michigan Behavioral Risk Factor Survey. These ACEs are highlighted in the charts at the bottom of the page. According to **2019** data, 68% or nearly

7 out of 10 888888888











adults (4.4 million*) reported having one or more ACEs.

WHY DO ACES MATTER?

Research shows that the higher a person's ACE score (the number of ACEs they have experienced), the more likely they are to take part in risky health behaviors and experience chronic diseases like cancer, diabetes, stroke, heart disease, and depression. For example, data shows that as ACE scores increase, so does the rate of depression among Michigan adults. Why? When a child experiences severe ongoing stress, it can cause their body's stress response systems to get stuck "on" and disrupt their brains, their bodies, and their genes. These disruptions can affect them in childhood and have ripple effects throughout their lives.

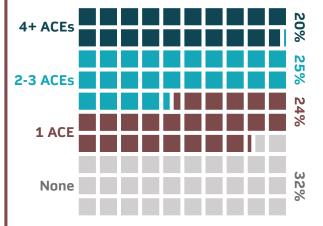
DEPRESSION IN ADULTS

% ever diagnosed with depression



MANY ADULTS IN MICHIGAN HAVE LIVED THROUGH ONE OR MORE OF THESE POTENTIALLY TRAUMATIC CHILDHOOD EXPERIENCES

AMONG ALL MICHIGAN ADULTS...



Since 2013, the number of adults who have experienced ACEs and the impact of those ACEs remains about the same. Over time and as the surveyed population includes younger generations aging, we hope to see fewer adults reporting ACEs.

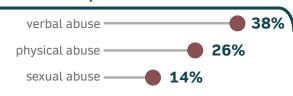
HOUSEHOLD DYSFUNCTION

% of Michigan adults that experienced this in their childhood



ABUSE

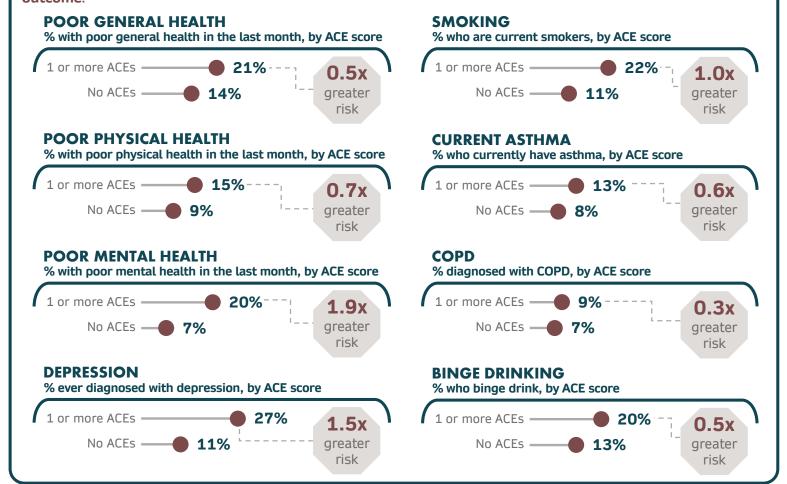
% of Michigan adults that experienced this in their childhood



^{*4.4} million adults reported experiencing at least one ACE among 6.5 million Michigan respondents who answered the ACE questions.

THE HIGHER THE ACE SCORE, THE GREATER THE HEALTH RISK

Digging deeper into the relationship between the ACE score and negative health outcomes (including risky health behaviors), we can identify many areas where **those with one or more ACEs are at greater risk than those with no ACEs for taking part in that risky health behavior or experiencing that negative health outcome**.



HOW CAN WE WORK TOGETHER TO ADDRESS ACES IN MICHIGAN?

ACEs are not destiny. ACEs and their associated harms are preventable. Creating and sustaining safe, stable, nurturing relationships and environments for all children and families can help prevent ACEs and buffer their negative impacts. If we all work together, we can make a difference!

Increase awareness about ACEs. When individuals and communities understand the impact of ACEs, they can work together to create solutions. Visit the **Michigan ACE Initiative** for information and resources.

Honor the value of positive childhood experiences. New research shows that positive childhood experiences promote long-term health and well-being for children and buffer the negative effects of ACEs. Learn more at **HOPE: Healthy Outcomes from Positive Experiences**.

Foster supportive, thriving, and resilient communities. People do best when they live in thriving families and communities. What we do matters! In Michigan, adults with more than four ACEs and high levels of social support are less likely to report negative health outcomes compared to those with low social support. Visit www.Michigan.gov/TraumaToxicStress for more information and resources.

References

Centers for Disease Control and Prevention. April 3, 2020. "Adverse Childhood Experiences." Centers for Disease Control and Prevention. Accessed July 30,2021. https://www.cdc.gov/violenceprevention/aces/.

Tian Y. and McKane P. 2021. Health Risk Behaviors within the State of Michigan: 2019 Behavioral Risk Factor Survey. 33rd Annual Report. Lansing, MI: Michigan Department of Health and Human Services, Lifecourse Epidemiology and Genomics Division.

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