

ADVERSE CHILDHOOD EXPERIENCES (ACES)



Clinically understanding the impact and implications of the development of substance use disorders in young adults.

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DISCLOSURE

- Britne Amos declares no relevant financial relationships with ineligible companies to disclose.

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HISTORY OF ACES

- The original ACE study was conducted at Kaiser Permanente from **1995 to 1997** with two waves of data collection.
- Over 17,000 Health Maintenance Organization members from Southern California receiving physical exams completed confidential surveys regarding their childhood experiences and current health status and behaviors.

[ACESAWARE.ORG](https://acesaware.org);
[CDC.GOV](https://www.cdc.gov)

WHAT ARE ACES? (CDC STUDY 1998)

ABUSE	NEGLECT	HOUSEHOLD DYSFUNCTION
Physical	Physical	Household Incarceration
Emotional	Emotional	Mental Illness
Sexual		Substance Dependence
		Parental Separation or Divorce
		Intimate Partner Violence

HOUSEHOLD DYSFUNCTION

HOUSEHOLD DYSFUNCTION TYPE	DEFINITION
Household Incarceration	A household member went to prison.
Mental Illness	A household member was depressed or mentally ill or a household member attempted suicide.
Substance Dependence	A household member was a problem drinker or alcoholic or a household member used street drugs.
Parental Separation or Divorce	Your parents were ever separated or divorced.
Intimate Partner Violence	Your mother or stepmother was pushed, grabbed, slapped, had something thrown at her, kicked, bitten, hit with a fist, hit with something hard, repeatedly hit for over at least a few minutes, or ever threatened or hurt by a knife or gun by your father (or stepfather) or mother's boyfriend.

ABUSE

ABUSE TYPE	DEFINITION
Physical	A parent, stepparent, or adult living in your home pushed, grabbed, slapped, threw something at you, or hit you so hard that you had marks or were injured.
Emotional	A parent, stepparent, or adult living in your home swore at you, insulted you, put you down, or acted in a way that made you afraid that you might be physically hurt.
Sexual	An adult, relative, family friend, or stranger who was at least 5 years older than you ever touched or fondled your body in a sexual way, made you touch his/her body in a sexual way, attempted to have any type of sexual intercourse with you.

NEGLECT

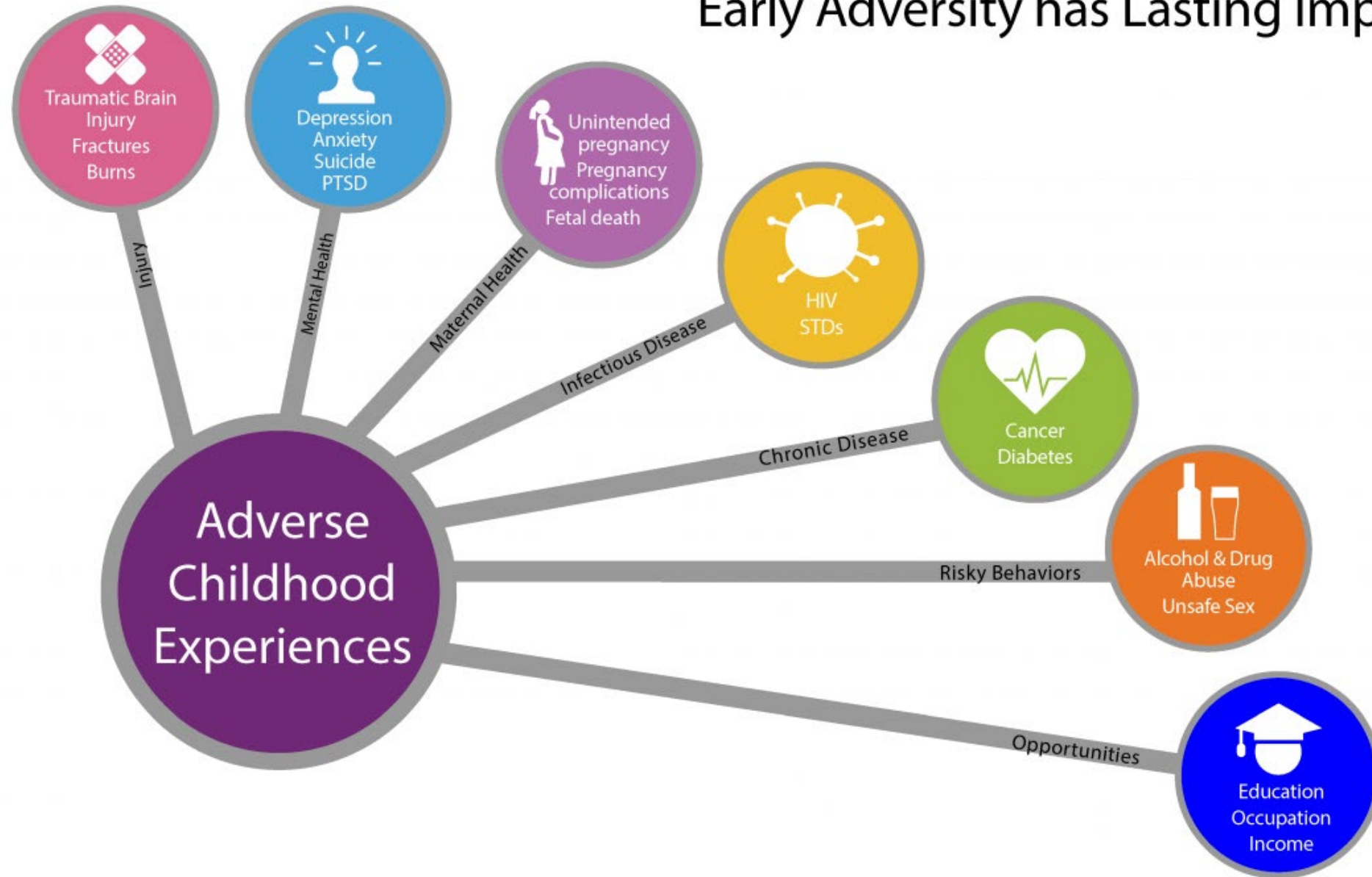
NEGLECT TYPE	DEFINITION
Physical	There was never or rarely someone to take care of you, protect you, or take you to the doctor if you needed it, you didn't have enough to eat, your parents were too drunk or too high to take care of you, or you had to wear dirty clothes.
Emotional	Someone in your family never or rarely helped you feel important or special, you never or rarely felt loved, people in your family never or rarely looked out for each other and felt close to each other, or your family was never or rarely a source of strength and support.

ADVERSE CHILDHOOD EXPERIENCES AND LASTING IMPACTS



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Early Adversity has Lasting Impacts



THE RELATIONSHIP OF ACES TO SUBSTANCE USE

RESEARCH HAS DEMONSTRATED A STRONG, GRADED RELATIONSHIP BETWEEN ACES AND A VARIETY OF SUBSTANCE-RELATED BEHAVIORS, INCLUDING:

- **Early initiation of alcohol use.** ACEs can predict earlier age of **drinking onset**. Therefore, underage drinking prevention programs may not work as intended, unless they help youth recognize and cope with stressors of abuse, household dysfunction, and other **adverse experiences** (Rothman, Edwards, Heeren, & Hingson, 2008).

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(Rothman, Edwards, Heeren, & Hingson, 2008).

- Exposure to poly-victimization (multiple ACEs) during childhood is particularly related to substance use during young adulthood.

(Shin, McDonald, Conley, 2018).

- * Effects varied by demographic variables such as gender and ethnic background.

(Rogers, Pakdaman, Forster, Sussman, Grigsby, Victoria, Unger, 2022).

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- **Higher risk of mental and substance use disorders as an older adult (50+ years).**

ACEs, such as childhood abuse (physical, sexual, psychological) and parental substance abuse, are associated with a higher risk of developing a mental and/or substance use disorder later in life.

(Choi, DiNitto, Marti, & Choi, 2017).

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- **Continued tobacco use during adulthood.** Prevalence ratios for current and ever smoking have been shown to increase as ACE scores increase.
 - (Ford et al., 2011).
- **Prescription drug use.** For every additional ACE score, the rate of number of prescription drugs used increased by 62%.
 - (Forster, Gower, Borowsky, & McMorris, 2017).

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RESEARCH HAS DEMONSTRATED A STRONG, GRADED RELATIONSHIP BETWEEN ACES AND A VARIETY OF SUBSTANCE-RELATED BEHAVIORS, INCLUDING:

- **Lifetime illicit drug use, drug dependency, and self-reported addiction.**

According to a study on childhood abuse, neglect, and household dysfunction and the risk of illicit drug use, each ACE increased the likelihood of early initiation into illicit drug use by 2- to 4-fold.

- (Dube et al, 2003)

THE RELATIONSHIP OF ACES TO RELATED BEHAVIORAL HEALTH PROBLEMS

BEHAVIOR	PROBLEM
Suicide attempts	Individuals who reported 6 or more ACEs had 24.36 times increased odds of attempting suicide (Merrick et al., 2017).
Lifetime depressive episodes	Exposure to ACEs may increase the risk of experiencing depressive disorders well into adulthood—sometimes decades after ACEs occur (Ege, Messias, Thapa, & Krain, 2015).
Sleep disturbances in adults	People with a history of ACEs have a higher likelihood of experiencing self-reported sleep disorders (Kajeepeta, Gelaye, Jackson, & Williams, 2015)
High-risk sexual behaviors	Women with ACEs have reported risky sexual behaviors, including early intercourse, having had 30 or more sexual partners, and perceiving themselves to be at risk for HIV/AIDS (Hillis, Anda, Felitti, & Marchbanks, 2001). Sexual minorities who experience ACEs also demonstrate earlier sexual debut (Brown et al., 2015).
Fetal mortality	Fetal deaths attributed to adolescent pregnancy may result from underlying ACEs rather than adolescent pregnancy (Hillis et al., 2004).
Pregnancy outcomes	Each additional ACE a mother experienced during early childhood is associated with decreased birth weight and gestational age of her infant at birth (Smith et al., 2016).
Negative physical health outcomes	Experiencing adverse childhood family experiences may increase the risk for long-term physical health problems (e.g., diabetes, heart attack) in adults (Monnat & Chandler, 2015).
Poor dental health	Children who have experienced at least one ACE are more likely to have poor dental health (Bright, Alford, Hinojosa, Knapp, & Fernandez-Baca, 2015)

SCREENING FOR ACES

For Children & Adolescents (Ages 0 – 19)

Pediatric ACEs Screening and Related Life Events Screener (PEARLS)

There are three versions of the tool based on age, reporter, and format:

PEARLS for children, for ages **0-11**, to be completed by a **caregiver**

PEARLS for adolescents, for ages **12-19**, to be completed by a **caregiver**

PEARLS for adolescents self-report tool, for ages **12-19**, to be completed by the **adolescent**

For 18- and 19-year olds, either tool may be used. For patients 20 years and older, the adolescent self-report version of the PEARLS tool is also acceptable.

Screening permitted ONCE per YEAR* as needed and deemed medically appropriate

SCREENING FOR ACES

For Adults – ACE Questionnaire for Adults

- **Adults age 21 through age 64:** Permitted once in their adult lifetime (through age 64), per provider (per managed care plan). Screenings completed while the person is under age 21 years do not count toward the one screening allowed in their adult lifetime.

INTERVENTION MATERIALS

*ACES SCREENING TOOLS



- PEARLS – review the tools
- [PEARLS-Tool-Teen-Self-Report-Identified-English.pdf](#)
- [ACE-Questionnaire-for-Adults-Identified-English.pdf](#)

HOW DO YOU ADMINISTER ACE SCREENINGS?

- **Private Setting**
- **Give the Tool directly to the parent/guardian, adolescent or adult.**
 - **De-identified.** Respondents count the number of ACE categories on the screening tools that they or their child has experienced, and indicate only the total score – without identifying *which* ACE(s) they or their child experienced.
 - **Identified.** Respondents count the number of ACEs categories on the screening tool that they or their child has experienced and specify which ACE(s) they or their child experienced.

HOW DO YOU CALCULATE AN ACE SCORE?

- ACE scores range from 0-10 (PEARLS Part I and Adult ACE)
- The ACE score refers to the total number of ACE categories experienced, not the severity or frequency of any one category. The higher a patient's ACE score, the greater the risk for ACE-Associated Health Condition(s).
- ACE screening should be used in a probabilistic, not a deterministic, manner to **alert** providers to which patients are at a **greater health risk** based on population-level data. Each patient's individual health outcomes will be based on a **combination of cumulative adversity (including ACEs and other stressors), protective factors, and differential biological susceptibility.**
- If the ACE score is different on the adolescent self-report than the caregiver report, the higher of the two scores should be used.
- HIGHER SCORES indicate Greater RISK for health conditions* (3+)

“I’VE ADMINISTERED THE SCREEN, NOW WHAT?”

- Treatment Planning – what interventions are needed?
- Treatment – which interventions will be utilized and how?
- Billing – accurate and appropriate use of clinical resources



Person Centered,
Culturally Sensitive Planning



Multidisciplinary Treatment
Team Approach



Cost Effective Care
Streamlined Processes

WHAT IS THE SIGNIFICANCE OF UNDERSTANDING CHILDHOOD EXPERIENCES?

- Who Benefits?
 - Consumers –
 - Needs are addressed appropriately, accurately
 - Improved quality of Life for self and others
 - Service Providers –
 - Positive Reported Outcomes
 - Increased Funding
 - Improved Reputation



WHAT IS THE SIGNIFICANCE OF UNDERSTANDING CHILDHOOD EXPERIENCES?

Preventing Illness and Death

- [leading causes of death by age group 2017-508 \(1\).pdf](#)



ACES REVIEW

- 2011-2017 data showed 62% of California residents experienced at least 1 ACE and 16% experienced 4 or more ACES. ACES are common.
- Use Screening for ACES as a tool, indicator however not a diagnosis
- Consult a helping clinician when interpreting scores and developing treatment plans
- Visit ACESAWARE.ORG for additional information and resources including a self care guide
- [Self-Care-Tool-for-Adults.pdf](#)