ACEs and Prevention Talking Points

Why prevention matters

- Eighty percent of brain growth happens in the first three years of life. Genes provide the basic blueprint, but experiences shape the brain’s pathways and establish the foundation for future health, learning and well-being.

- Children who experience abuse, neglect and household dysfunction growing up are at greater risk for a range of poor outcomes in emotional, cognitive, physical and/or behavioral development. (See ACEs talking points.)

- Critical to a child’s development is a safe, stable and nurturing environment.

- Children who grow up in safe, stable and nurturing environments are more likely to become responsible, productive members of society. Child development is the key foundation for solid community and economic development.

What is prevention?

- Child abuse prevention means:
  - To stop a behavior or action through laws and policies, education and awareness, and risk reduction
  - To promote a behavior or action through education, raising awareness, and giving families the tools and support they need.

- Prevention activities work to build safe, nurturing environments for children by:
  - Normalizing parenting stress
  - Providing supports and education to parents before they get to crisis
  - Minimizing the risk of abuse by addressing parenting habits, behaviors and situations
  - Giving parents a break from parenting so that they can take care of themselves and helping to connect them with a support system
  - Advocating for policies that protect children and invest in families
  - Raising awareness to change the way communities think about prevention and the role they can play in prevention efforts

- Prevention programs and services build protective factors in families that improve families’ overall well-being, strengthen a child’s environment and reduce the likelihood of abuse and neglect.
  - Protective factors include:
    - Nurturing and attachment – developing a close bond helps parents relate, respond and communicate with their child.
- **Parenting and child development knowledge** – Understanding child development can be calming for parents and help parents respond appropriately to a child’s behavior.
- **Resilience** – Recognizing the signs of stress and enhancing problem-solving skills can improve parents’ capacity to cope.
- **Social connections** – Identifying a network of family, friends, and neighbors provides parents support in times of need.
- **Concrete supports** – Offering parents access to financial, housing, medical, and other resources and services help parents meet their basic needs, so they can focus on their role as parents.

  o **Prevention programs include:**
    - **Parent Education** – Focuses on parenting techniques and age-appropriate behaviors while creating an informal, supportive network among attendees.
    - **Home Visiting** – Provides intensive one-on-one education between a provider and a family within the home. Connects parents to parenting information and community resources.
    - **Respite Care** – Provides parents an educational environment for their children while they receive temporary relief from caregiving responsibilities.
    - **Crisis Care** – Offers parents a safe, nurturing environment for their children during times of emergency.
    - **Sexual Abuse Prevention** – Educates parents, community members and children about sexual abuse and how to prevent it.

**The cost of abuse**

- Research proves that focusing on prevention is a far more effective use of resources to ensure children reach their full potential than treating the effects of abuse after it has occurred. Yet, for every $50 spent to treat abuse, only $1 is spent to prevent it from ever occurring.

**The ACE Study**

- The Adverse Childhood Experiences (ACEs) study was the largest study looking at short- and long-term impacts of childhood trauma ever done.

- The principal investigators were Dr. Vincent Felitti, founder and chief of Kaiser Permanente’s Preventive Medicine Department, and Dr. Robert Anda with the Centers for Disease Control and Prevention’s Epidemic Intelligence Service.

- More than 17,000 members of the Kaiser Health Plan in San Diego filled out a survey measuring the number of adverse childhood experiences between 1995 and 1997. Most study subjects were white, educated and middle class.
The survey focused on 10 types of childhood trauma categorized by abuse, neglect and household dysfunction (five types of child abuse and neglect and five types of household dysfunction). An ACE score was calculated by the number of categories a person was exposed to, not the frequency or severity of an experience within one category.

The number of ACEs a person experienced was compared with that person’s physical and mental evaluations.

Results

ACEs are common: Nearly two-thirds of participants reported at least one ACE and more than one in five reported three or more ACEs.

ACEs are linked to a wide range of health and social outcomes:
  - Depression
  - Smoking, illicit drug use, and alcoholism
  - Heart, liver and pulmonary disease
  - Adolescent pregnancy, sexually transmitted diseases, and intimate partner violence
  - Health-related quality of life

As the number of ACEs increase, so does the likelihood of significant emotional, cognitive, physical and behavioral challenges. These challenges can lead to other problems including learning delays, adoption of health-risk behaviors and lost productivity.

Iowa ACEs Data

Data was gathered through the 2012 Iowa Behavioral Risk Factor Surveillance System, an annual state health survey conducted by the Iowa Department of Public Health in partnership with the Centers for Disease Control and Prevention

Adults were surveyed about whether they experienced eight types of child abuse and household dysfunction as children. The results were compared with their health status.

Questions were developed by the CDC and are similar, though not identical, to the original ACE Study published in 1998.

Iowa data has been analyzed and shared with the public, policymakers and professionals.

Iowa’s findings

ACEs are common:
  - 55 percent of Iowans reported at least one ACE prior to age 19.
  - 14 percent reported four or more ACEs.
Most common ACEs reported by Iowa adults: childhood emotional abuse (28%), substance abuse (26%) and parent separation/divorce (22%)

Least common ACEs reported: childhood sexual abuse (10%) and incarceration of an adult household member (7%)

**ACEs impact lifelong health and wellbeing**

As the frequency of traumatic experiences increases so does the likelihood that someone will have poor physical and mental health as an adult.

- More than twice the number of adults with four or more ACEs rated their health poorly (23%) compared to adults with zero ACEs (10%).
- Those who experienced a high number of ACEs reported 5-7 bad health days each month compared with 1-3 days for adults with zero ACEs.
- Those with 4 or more ACEs were nearly 5 times as likely to be diagnosed with clinical depression as compared to those with no ACEs.

Data is being collected in 2013 and 2014, with questions about childhood neglect being added to the 2014 survey.

The complete report is available at [www.iowaaces360.org](http://www.iowaaces360.org).

**Message of hope**

- Two-thirds of Iowans reported one or no ACEs. We have an opportunity to build on these families’ successes so that more children grow up in the safe, nurturing environments they need to thrive.

- A community that invests in families will see the reward as more children grow up to reach their full potential.

- Child development is a foundation for community and economic development, as capable children become the foundation of a prosperous and sustainable society.

- We have developed innovative programs that show significant long-term improvements for children. With community support, we can ensure more families are able to access these services.

- We can provide the support and resources needed to make families stronger. Together we can build a brighter future for our community overall.

**What community members can do**

- Educate – inform friends and family about resources that prevent child abuse, the importance of ending child abuse, and what they can do to get involved.

- Advocate – urge leaders to support policies that positively impact children and families.
• Donate – make a financial contribution to support organizations working to prevent child abuse.

• Participate – get involved in groups and projects that bring attention to child abuse prevention and provide resources and supports to families.

Definitions developed for the project

Adverse Childhood Experiences:
Stressful or traumatic incidents that occur in a child’s life. They include physical, sexual and emotional abuse, physical and emotional neglect, and growing up with household dysfunction including domestic violence, substance abuse, mental illness, parental separation or an incarcerated family member.

Child Abuse Prevention:
Building communities that enhance families’ nurturing and attachment, parenting knowledge, resiliency, social connections and access to resources to support safe and nurturing environments for children under age 18.