Adverse Childhood Experiences

Adverse childhood experiences (ACEs) are a significant risk factor for substance use disorders and can impact prevention efforts.

Adverse childhood experiences (ACEs) are stressful or traumatic events, including abuse and neglect. They may also include household dysfunction such as witnessing domestic violence or growing up with family members who have substance use disorders. ACEs are strongly related to the development and prevalence of a wide range of health problems throughout a person’s lifespan, including those associated with substance misuse.

ACEs include:

- Physical abuse
- Sexual abuse
- Emotional abuse
- Physical neglect
- Emotional neglect
- Intimate partner violence
- Mother treated violently
- Substance misuse within household
- Household mental illness
- Parental separation or divorce
- Incarcerated household member

ACEs are a good example of the types of complex issues that the prevention workforce often faces. The negative effects of ACEs are felt throughout the nation and can affect people of all backgrounds. Successfully addressing their impact requires:

- Assessing prevention needs and gathering data
- Effective and sustainable prevention approaches guided by applying the Strategic Prevention Framework (SPF)
- Prevention efforts aligned with the widespread occurrence of ACEs
- Building relationships with appropriate community partners through strong collaboration
Many studies have examined the relationship between ACEs and a variety of known risk factors for disease, disability, and early mortality. The Division of Violence Prevention at the Centers for Disease Control and Prevention (CDC), in partnership with Kaiser Permanente, conducted a landmark ACE study from 1995 to 1997 with more than 17,000 participants. The study found:

- **ACEs are common.** For example, 28% of study participants reported physical abuse and 21% reported sexual abuse. Many also reported experiencing a divorce or parental separation, or having a parent with a mental and/or substance use disorder.
- **ACEs cluster.** Almost 40% of the Kaiser sample reported two or more ACEs and 12.5% experienced four or more. Because ACEs cluster, many subsequent studies now look at the cumulative effects of ACEs rather than the individual effects of each.
- **ACEs have a dose-response relationship with many health problems.** As researchers followed participants over time, they discovered that a person’s cumulative ACEs score has a strong, graded relationship to numerous health, social, and behavioral problems throughout their lifespan, including substance use disorders. Furthermore, many problems related to ACEs tend to be comorbid or co-occurring.

### ACEs and Prevention Efforts

Preventing ACEs and engaging in early identification of people who have experienced them could have a significant impact on a range of critical health problems. You can strengthen your substance misuse prevention efforts by:

- Informing local decision-making by collecting state- and county-level ACEs data
- Increasing awareness of ACEs among state- and community-level substance misuse prevention professionals, emphasizing the relevance of ACEs to behavioral health disciplines
- Including ACEs among the primary risk and protective factors when engaging in prevention planning efforts
- Selecting and implementing programs, policies, and strategies designed to address ACEs, including efforts focusing on reducing intergenerational transmission of ACEs
- Using ACEs research and local ACEs data to identify groups of people who may be at higher risk for substance use disorders and to conduct targeted prevention
ACEs Research and Behavioral Health

Research has demonstrated a strong relationship between ACEs, substance use disorders, and behavioral problems. When children are exposed to chronic stressful events, their neurodevelopment can be disrupted. As a result, the child’s cognitive functioning or ability to cope with negative or disruptive emotions may be impaired. Over time, and often during adolescence, the child may adopt negative coping mechanisms, such as substance use or self-harm. Eventually, these unhealthy coping mechanisms can contribute to disease, disability, and social problems, as well as premature mortality.

ACEs and Substance Use

- **Early initiation of alcohol use.** Efforts to prevent underage drinking may not be effective unless ACEs are addressed as a contributing factor. 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. Learn more from a [2008 study on how ACEs can predict earlier age of drinking onset](http://example.com).

- **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 substance use disorder. Learn more from a [2017 study on adverse childhood experiences and mental and substance use disorders as an adult](http://example.com).

- **Continued tobacco use during adulthood.** Prevalence ratios for current and ever smoking increased as ACEs scores increased, according to a [2011 study on ACEs and smoking status](http://example.com).

- **Prescription drug use.** For every additional ACE score, the rate of number of prescription drugs used increased by 62%, according to a [2017 study of adverse childhood experiences and adolescent prescription drug use](http://example.com).

- **Lifetime illicit drug use, drug dependency, and self-reported addiction.** Each ACE increased the likelihood of early initiation into illicit drug use by 2- to 4-fold, according to a [2003 study on childhood abuse, neglect, and household dysfunction and the risk of illicit drug use](http://example.com).

ACEs and Behavioral Problems

- **Suicide attempts.** ACEs in any category increased the risk of attempted suicide by 2- to 5-fold throughout a person’s lifespan, according to 2001 study. According to a recent [2017 article](http://example.com), individuals who reported 6 or more ACEs had 24.36 times increased odds of attempting suicide.

- **Lifetime depressive episodes.** Exposure to ACEs may increase the risk of experiencing depressive disorders well into adulthood—sometimes decades after ACEs occur. Learn more from a [2015 study on ACEs and the risk of geriatric depressive disorders](http://example.com).

- **Sleep disturbances in adults.** People with a history of ACEs have a higher likelihood of experiencing self-reported sleep disorders, according to a [2015 systematic review of research studies on ACEs and sleep disturbances in adults](http://example.com).

- **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. Learn more from a [2001 study on ACEs and sexual risk behaviors in women](http://example.com). Sexual minorities who experience ACEs also demonstrate earlier sexual debut according to a [2015 study](http://example.com).
• **Fetal mortality.** Fetal deaths attributed to adolescent pregnancy may result from underlying ACEs rather than adolescent pregnancy, according to a [2004 study of the association between ACEs and adolescent pregnancy](#).

• **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, according to a [2016 study on the association between ACEs and pregnancy outcomes](#).

**Publications and Resources**

- Archived Webinar: Trauma & Adverse Childhood Experiences: Implications for Preventing Substance Misuse
- The Role of Adverse Childhood Experiences in Substance Abuse and Related Behavioral Health Problems
- Adverse Childhood Experiences: Risk Factors for Substance Abuse and Mental Health Video – 2012
- Adverse Childhood Experiences: Implications for Transforming Our Systems of Care Video – 2012

Access more CAPT tools and other learning resources.

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**New from CAPT**

- Prevention Conversations: New Video Series Focuses on Opioids
- Collaboration Story: Rural Tekoa, Washington Paves Its Own Way to Prevent Opioid Misuse
- Preventing Opioid Misuse and Overdose: Data Sources and Tools to Inform Assessment and Planning Efforts (T/TA Tool)
- The Role of Prevention in Addressing Neonatal Abstinence Syndrome (Archived Webinar)

**News & Announcements**

**Resource List: Opioid Use in the Older Population:** New report from SAMHSA’s State Technical Assistance Contract presents resources that address opioids and older adults.
**SAMHSA's CAPT Online Course Wins Omni Awards!** *Prevention SustainAbilities: Planning for Success* was awarded three 2017 OMNI Awards for outstanding educational design and e-learning production.

**Positive Culture Framework Training.** October 17-19 in San Antonio, TX. Participants will leave with an understanding of how culture influences behavior and the benefits of a comprehensive, positive prevention approach.

- **Upcoming conferences and trainings**

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**Related SAMHSA Resources**

- [Evidence-Based Practices (EBP) Web Guide](#)
- [National Registry of Evidence-based Programs and Practices (NREPP)](#)

SAMHSA's mission is to reduce the impact of substance abuse and mental illness on America's communities.

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