

Public Health Problems Resulting from ACEs

Pamela Pine, PhD, Director, Stop the Silence®
- A Department of the Institute on Violence,
Abuse and Trauma



WELCOME

Prevention & Mitigation of Child Sexual Abuse Training



OBJECTIVES

Participants will state the rationale and need to “take care of themselves” during these presentations

Participants will be able to generally describe the ACE Study & its overall findings

Participants will be able identify relevant groups effected by ACEs and their impact on them



ACE STUDY

Adverse Childhood Experience (ACE) Study

Prevention & Mitigation of Child Sexual Abuse Training



WHAT ARE ACEs?

What are ACEs?

“Adverse Childhood Experiences (ACEs) have been defined as stressful experiences occurring during childhood that directly impact on a child or affect the family environment in which they live. They include physical, sexual or emotional abuse, neglect, or household adversity as a result of domestic violence, imprisonment, substance abuse, parental mental health problems or family breakdown (Bellis et al., 2015a). This definition was used by an influential CDC study in the 1990s; more recent work has extended the definition to include child neglect, parental bereavement, and children living in care (Allen & Donkin, 2015). The potential impacts of ACEs are physiological and behavioural, as well as psychological, and translate into poorer outcomes across a wide range of health domains” (Bellis et al., 2015b; Danese & McEwen, 2012, in Lorenc et al., 2020), including the work environment.

WHAT'S THE ACE STUDY?

The ACE Study

The ACE Study is the largest study ever done to determine the long-term adult effects of ten common categories of adverse life experiences in childhood. 17,337 middle-class adults were involved in this retrospective and 20-year *prospective* analysis.

The very existence of these experiences was found to be quite common, though unrecognized because they are lost in time and further protected by shame, by secrecy, and by social taboos against routinely exploring certain areas of human experience. Our typical medical history completely avoids them. History avoids them completely.

Their effects a half century later in adult life are powerfully and proportionately related to adult well-being, health risks, mental illness, job performance, social malfunction, suicide, a range of biomedical diseases including cancer, and premature death. If you are unfamiliar with the ACE Study, simply look up <Adverse Childhood Experiences Study> on the Internet and on YouTube. You will find a deluge of meaningful information.



The Correlation of ACEs, Childhood Trauma, and Adult Outcomes

Adverse Childhood Experiences (ACEs) is a term that comes from the Center for Disease Control's research, which shows a correlation between childhood trauma and adult health outcomes. The CDC found that children's developing brains and central nervous systems are so profoundly affected by ACEs that they are the root cause of many chronic diseases, most mental illness and most violence. The 10 ACEs measured in the research conducted by the Center for Disease Control are:

1. Physical abuse
2. Sexual abuse
3. Verbal abuse
4. Physical neglect
5. Emotional neglect
6. A family member who is depressed or diagnosed with other mental illness
7. A family member who is addicted to alcohol or another substance
8. A family member who is in prison
9. Witnessing a mother being abused
10. Losing a parent to separation, divorce or death

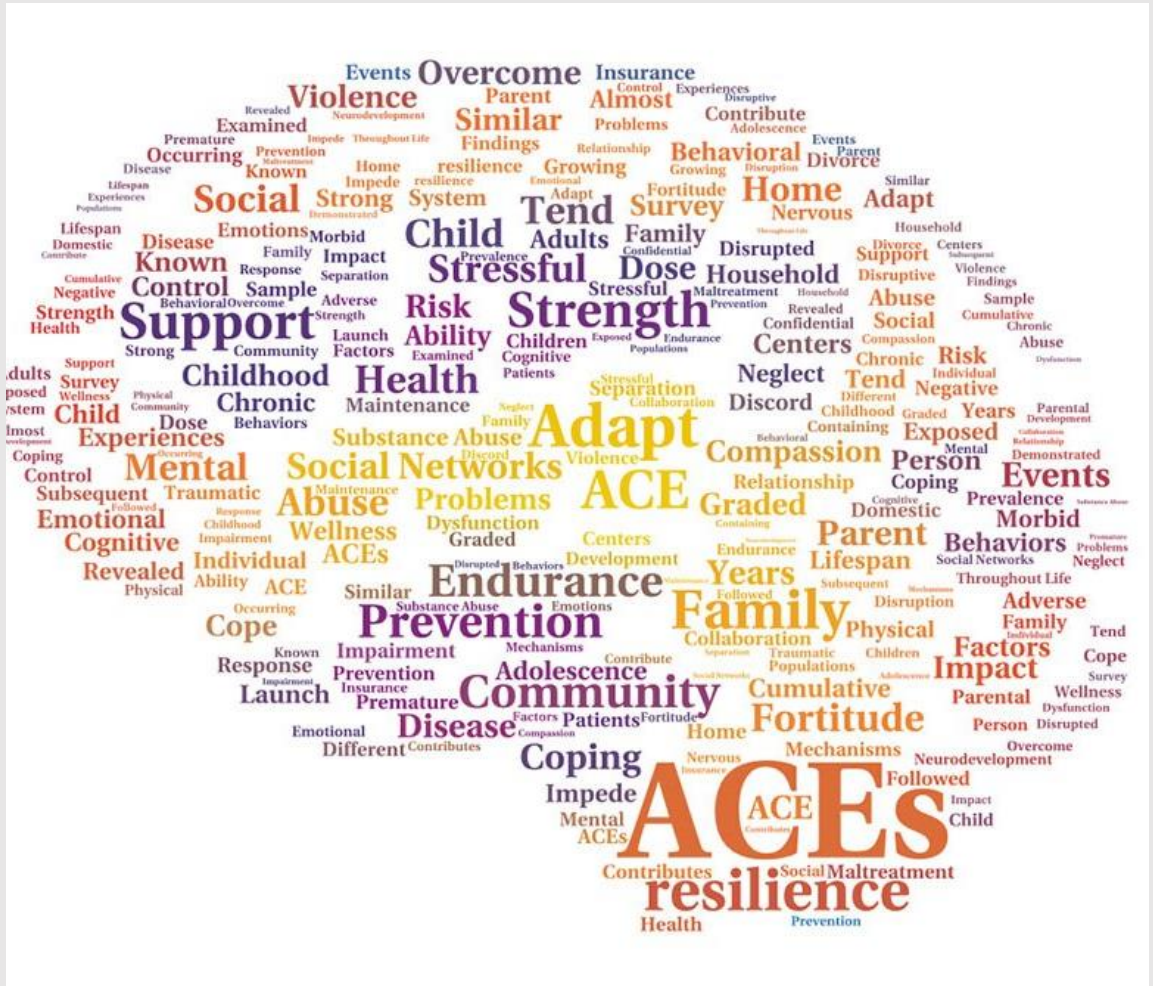
Many other types of trauma may also have an impact such as natural disasters and community violence. (<https://www.resilientchildfund.org/top-10-aces/>)



Adverse childhood experiences (ACEs, of which CSA is one) have severe psychological and physical outcomes, and strongly effect social activities and the likelihood of the ten most common causes of death in the United States (see <http://www.acestudy.org>)

ACEs contribute to the Top 10 Risk Factors for death in U.S.: smoking, severe obesity, physical inactivity, depression, suicide attempt, alcoholism, illicit drug use, injected drug use, 50+ sexual partners, sexually transmitted infections.

And they contribute to an enormous societal and monetary burden on everyone: individuals, families, communities, society, and the world!



Adverse Childhood Experience Study – to view, go to:

<https://www.youtube.com/watch?v=IbsXh6wwc3Q>

EXPERIENCES THAT LEAD TO MEDICAL OR SOCIAL PROBLEMS

Childhood abuse & neglect

Domestic Violence

Substance Abuse

Mental Illness

Crime

ACE Study Prevalence (U.S.)

ACE Score Prevalence

| | |
|-----------|------|
| 0 | 33% |
| 1 | 25% |
| 2 | 15% |
| 3 | 10% |
| 4 | 6% |
| 5 or more | 11%* |



*Credit to Dr Felitti & Dr Anda

ABUSE

Psychological (By parents)

11%

Physical (By parents)

28%

Sexual

22%

NEGLECT

Emotional

15%

Physical

10%

HOUSEHOLD DYSFUNCTION

Alcoholism or drug use in home 27%

Loss of biological parent < age 18 23%

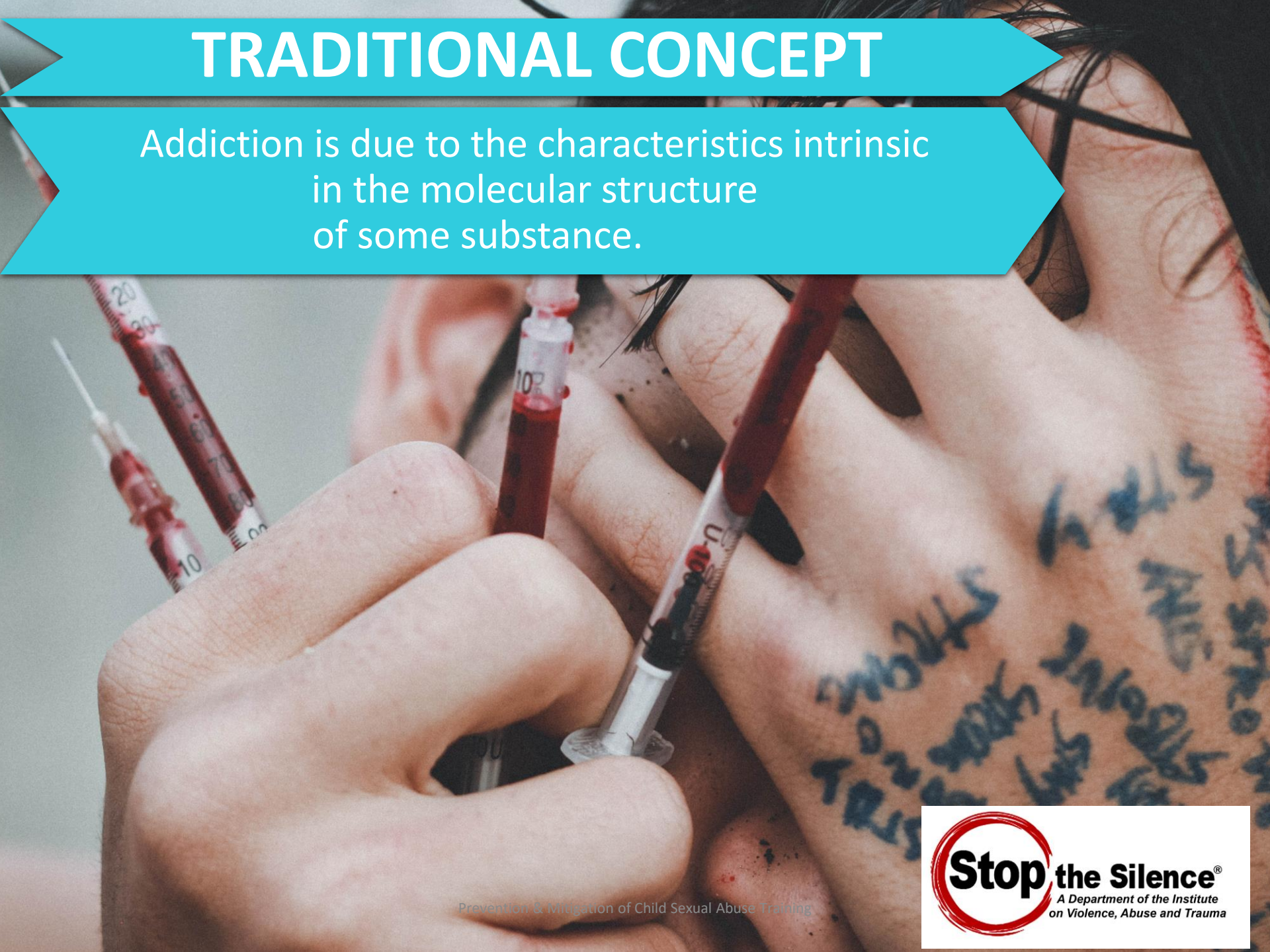
Depression or mental illness in the home 17%

Mother treated violently 13%

Imprisoned household member 6%

TRADITIONAL CONCEPT

Addiction is due to the characteristics intrinsic in the molecular structure of some substance.



BUT ACE STUDY SHOWS...

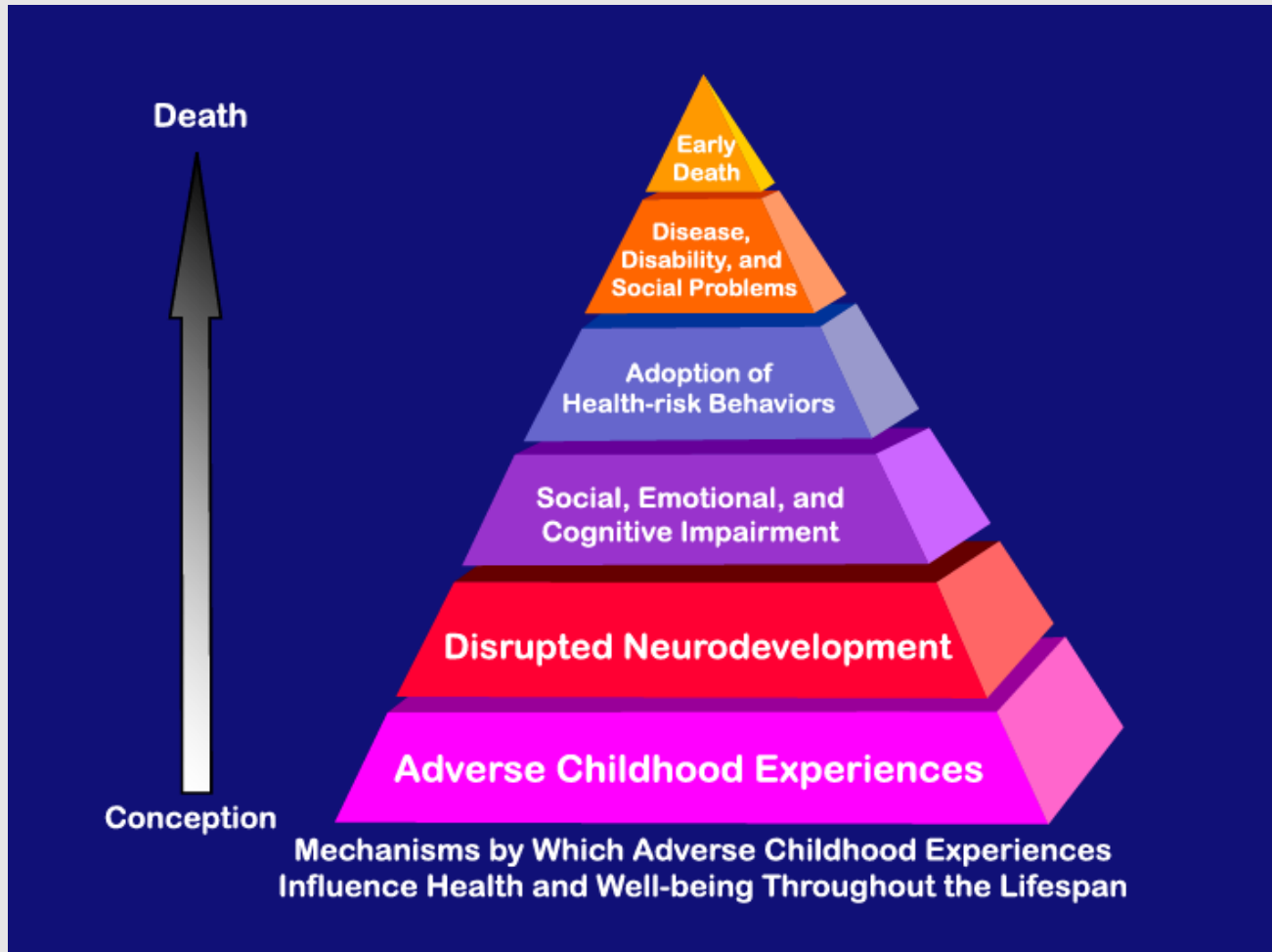
Addiction highly correlates with characteristics intrinsic to that individual's childhood experiences.



A PUBLIC HEALTH PARADOX

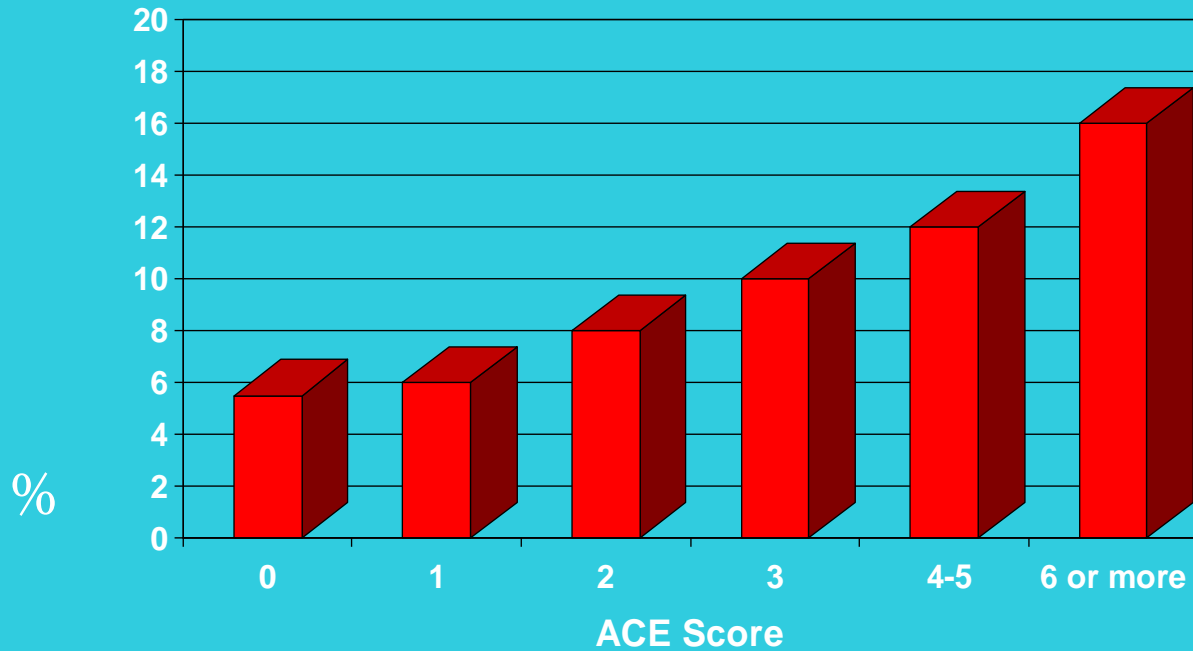
Many of our most common and intractable public health problems are unconsciously attempted solutions to personal problems dating back to childhood and buried in time and concealed by time, by shame, and by social taboo.

EFFECTS ON BRAIN AND OTHER DEVELOPMENT

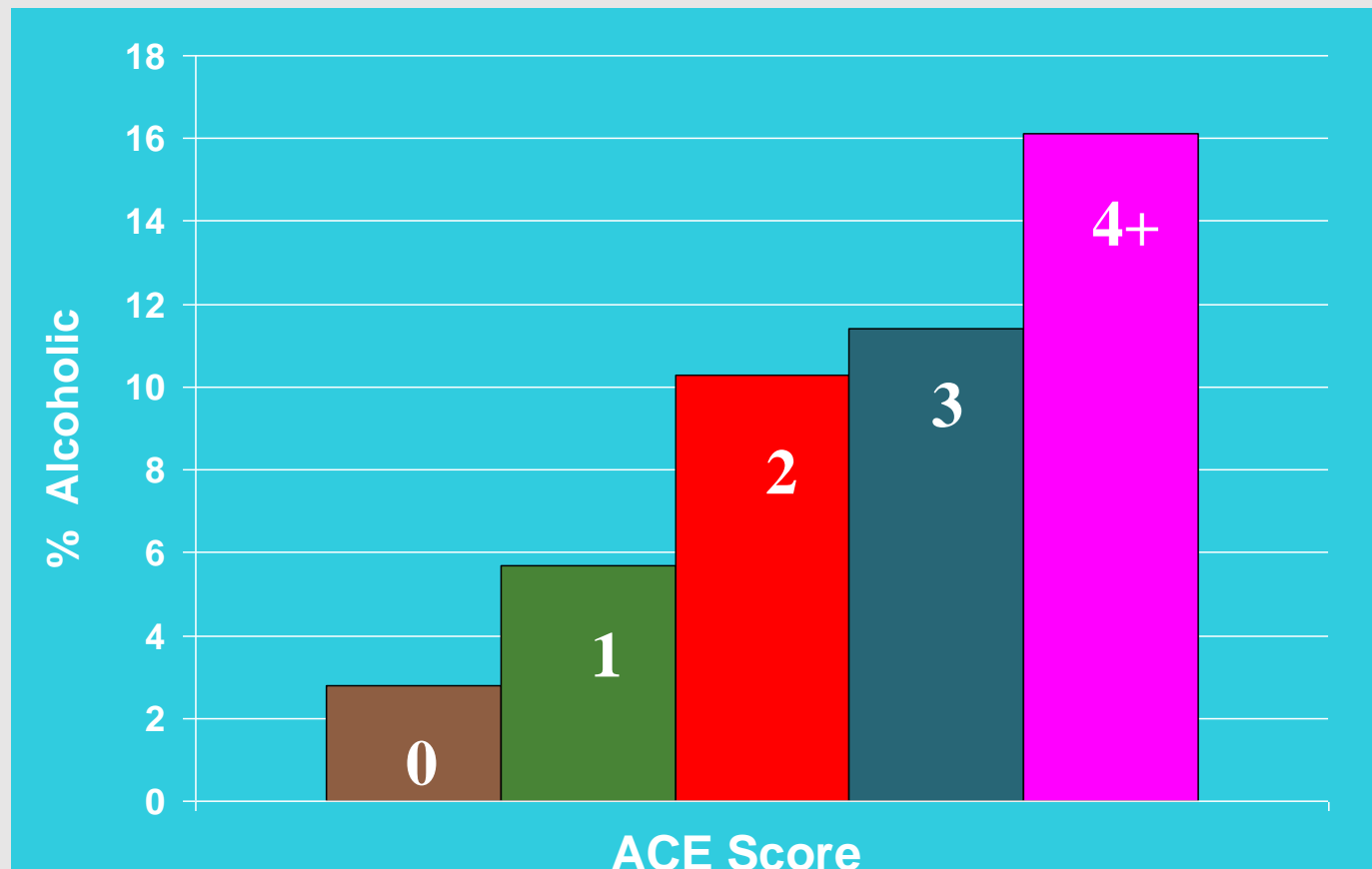


**BRAIN DEVELOPMENT – to
view and listen, go to:
<https://www.youtube.com/watch?v=IPftosmseYE>**

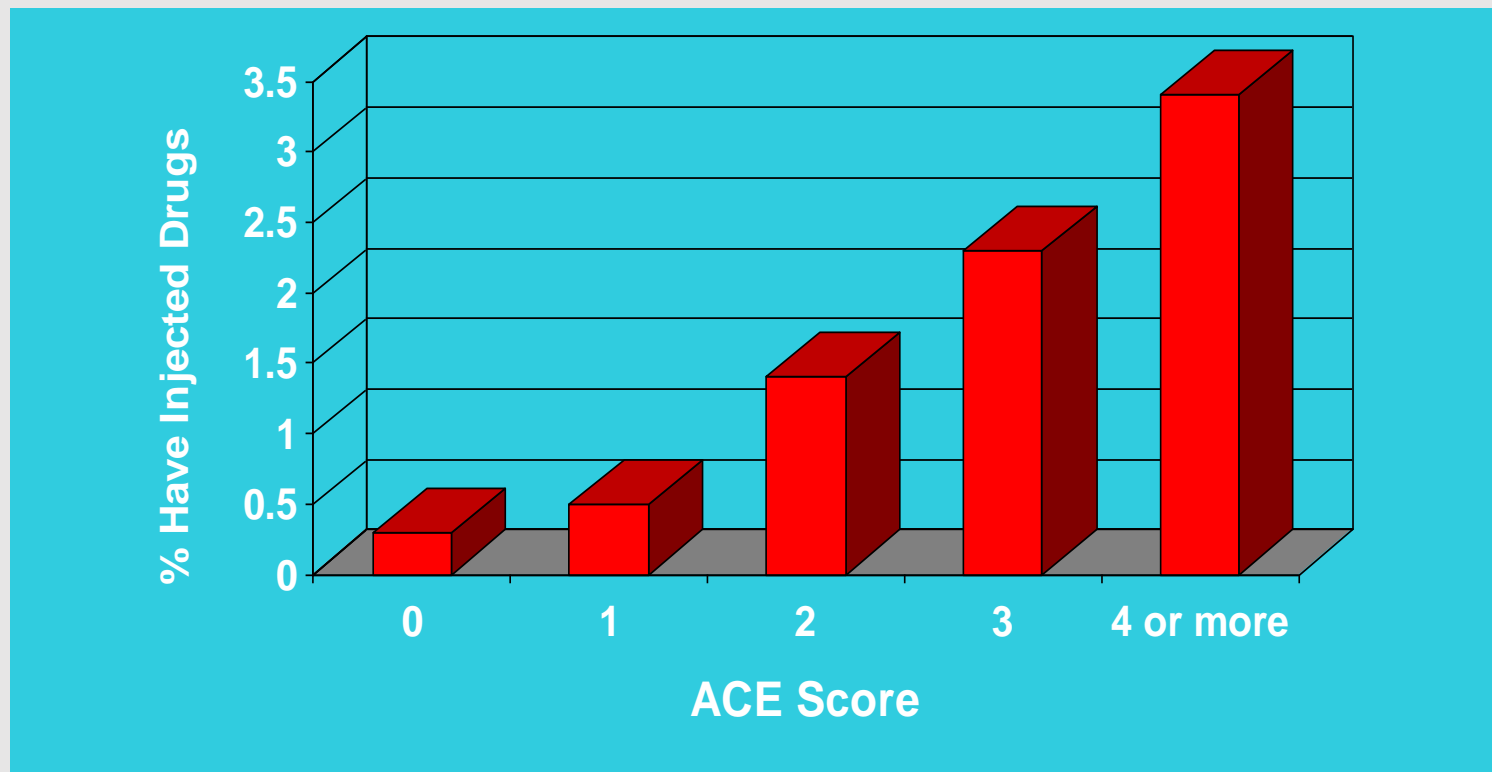
ACE vs SMOKING AS AN ADULT



ACE vs ADULT ALCOHOLISM



ACE vs INJECTION DRUG USE



ACE INCREASES LIKELIHOOD OF HEART DISEASE

Emotional abuse 1.7x

Physical abuse 1.5x

Sexual abuse 1.4x

Domestic violence 1.4x

Mental illness 1.4x

Substance abuse 1.3x

Household criminal 1.7x

Emotional neglect 1.3x

Physical neglect 1.4x

*After correction for age, race, education and convention risk factors like smoking & diabetes
Circulation Sept 2004

DEPRESSION



What if depression were *not* a disease, but a *normal response* to abnormal life experiences?

KEY TERMS & EFFECTS

Stress

Trauma

Traumatic stress

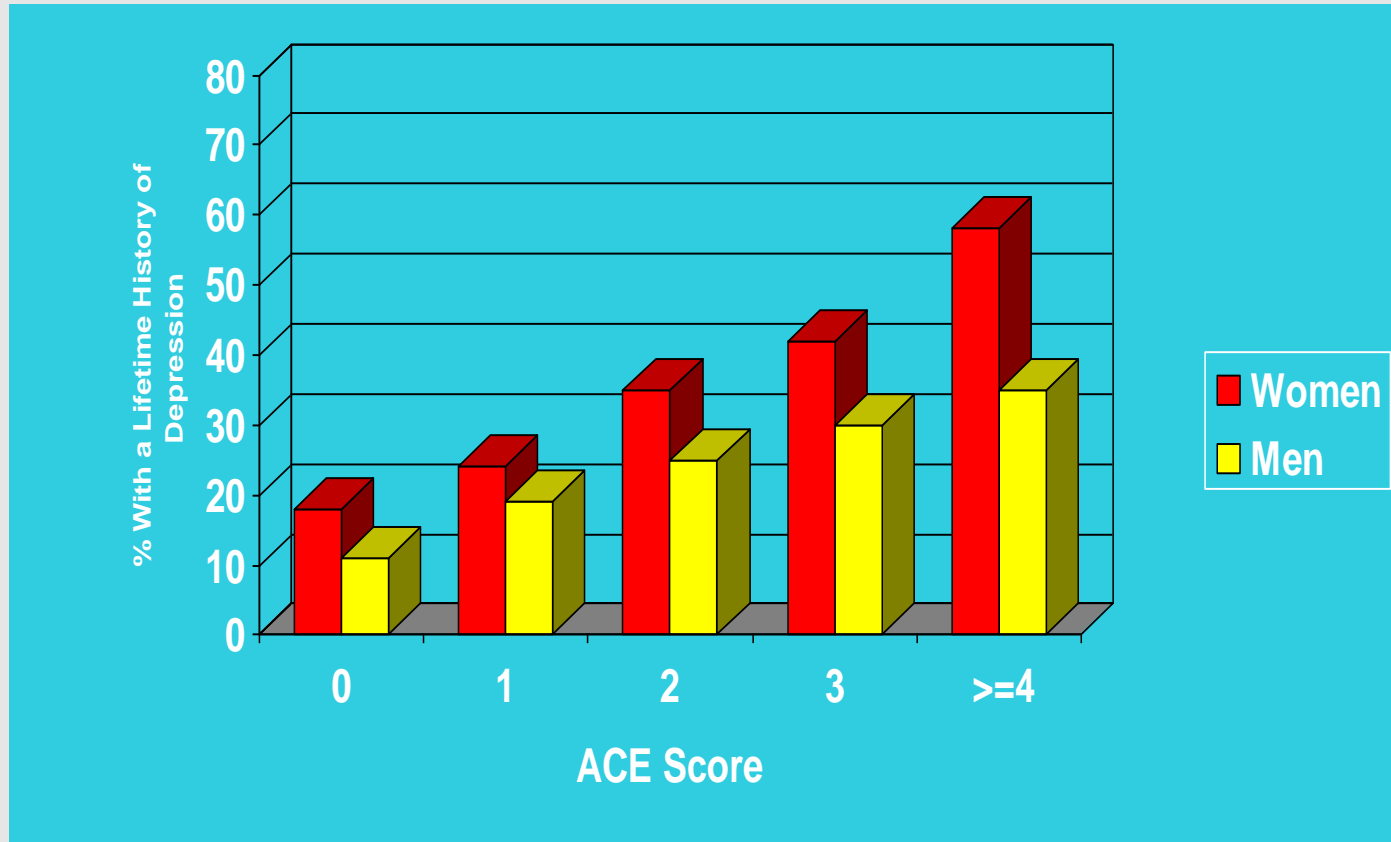
Post-traumatic stress

**EFFECTS OF TRAUMA – to view,
go to
<https://www.youtube.com/watch?v=SJhcn7Q0-LU>**

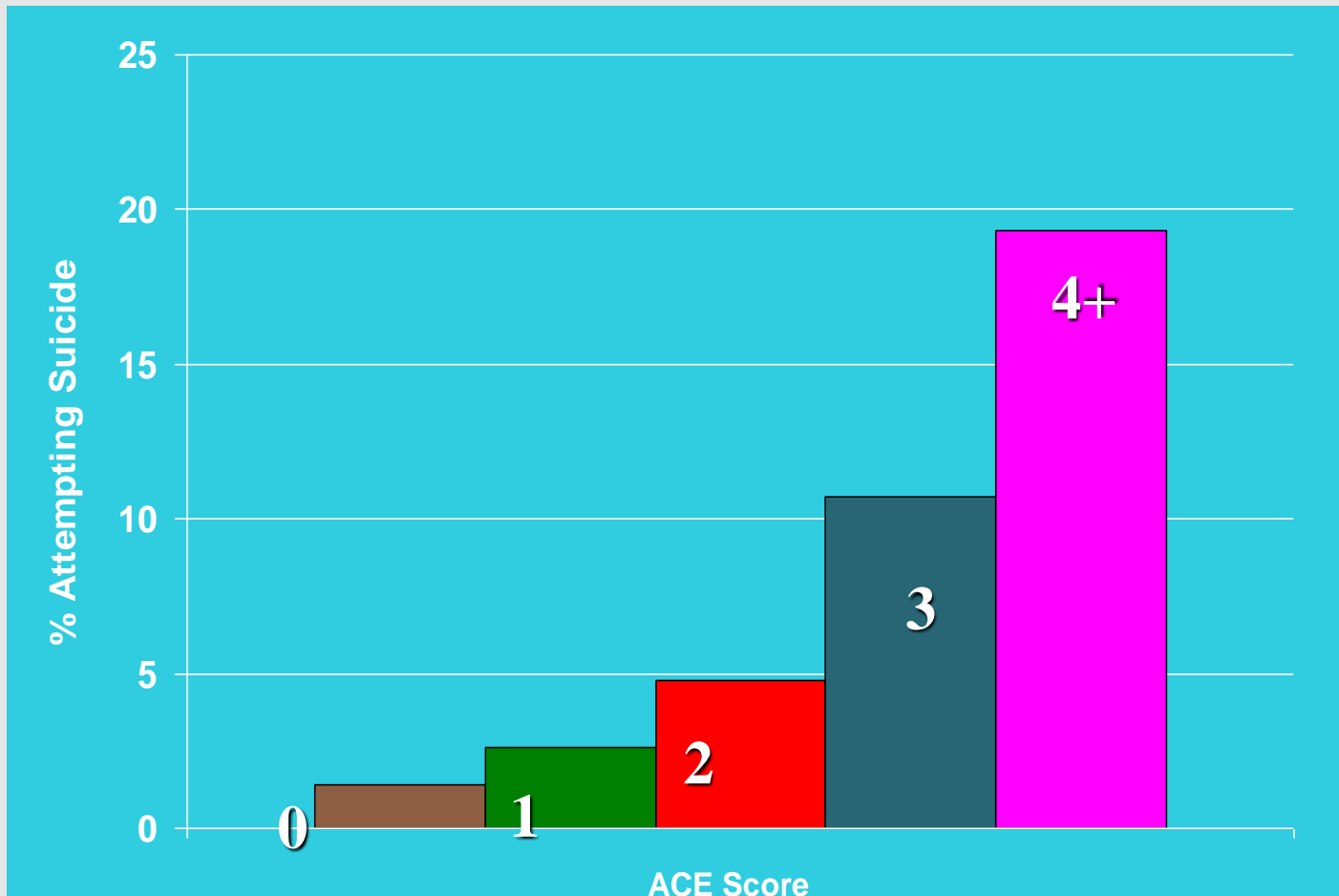
**POST TRAUMATIC STRESS
DISORDER – view at
https://www.youtube.com/watch?v=b_n9qegR7C4**



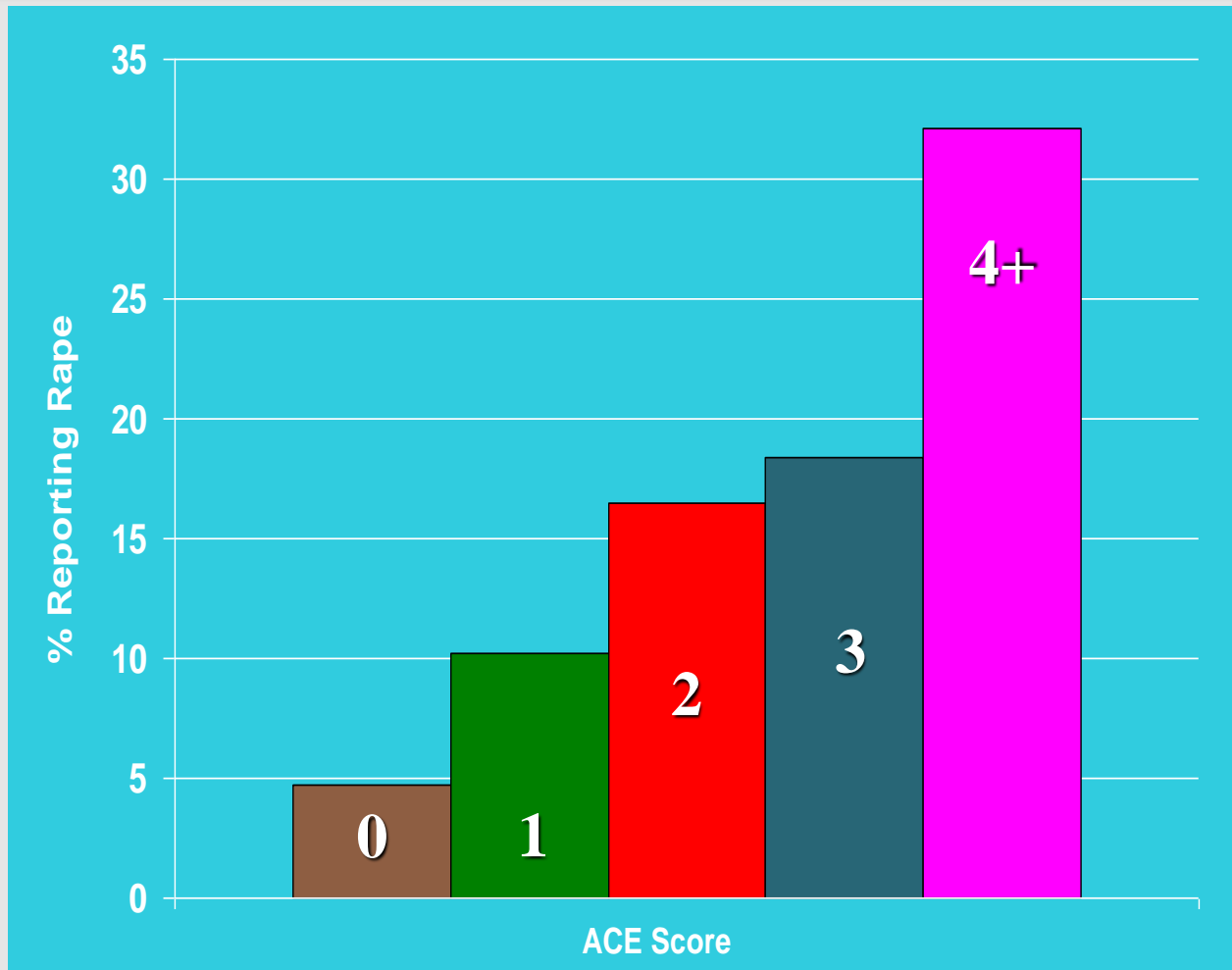
ACEs UNDLIE CHRONIC DEPRESSION



ACEs underlie suicide attempts



ACE UNDERLIE LATER BEING RAPED

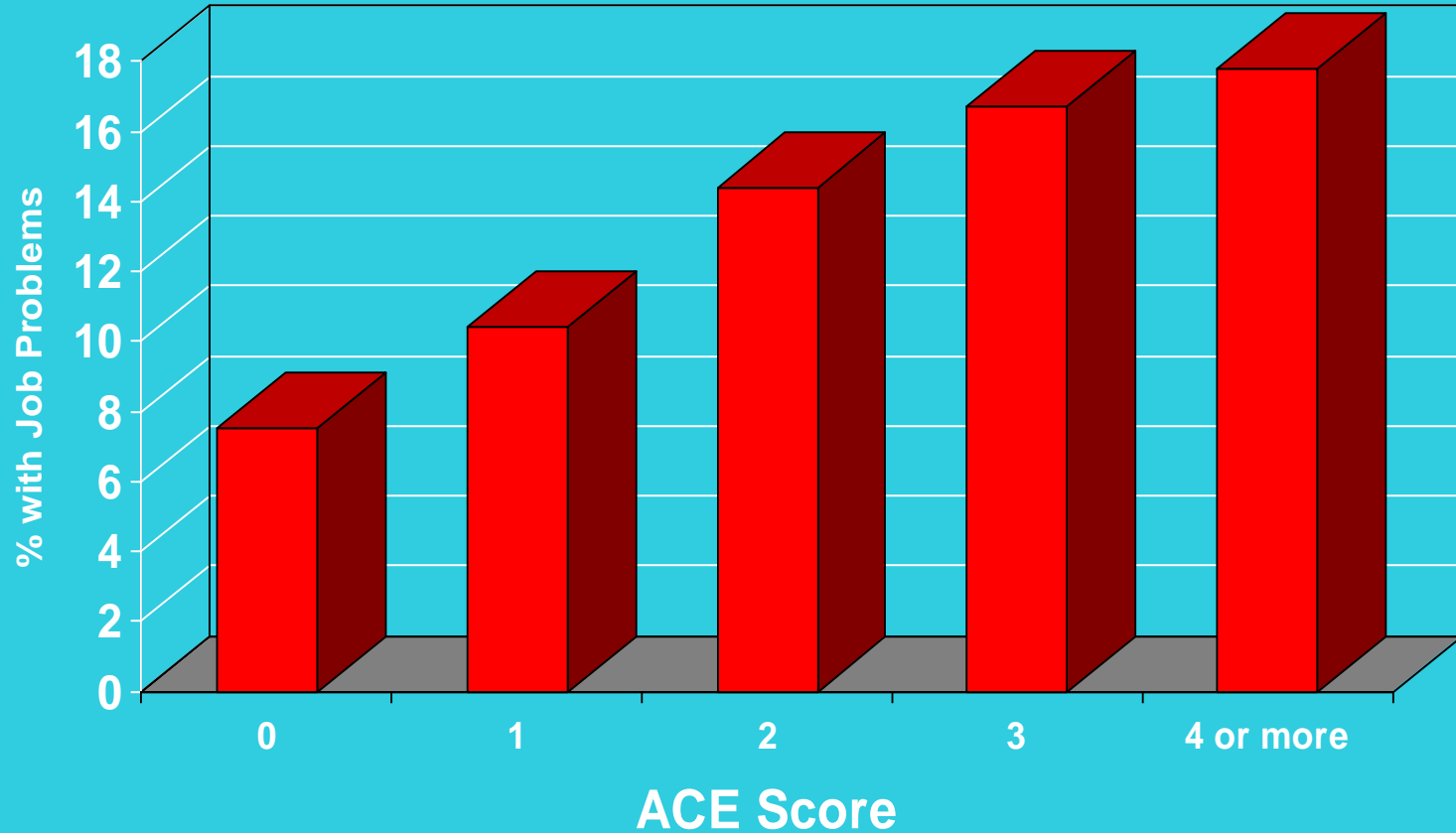


ACE & THE LIKELIHOOD OF INTIMATE PARTNER EXPERIENCES

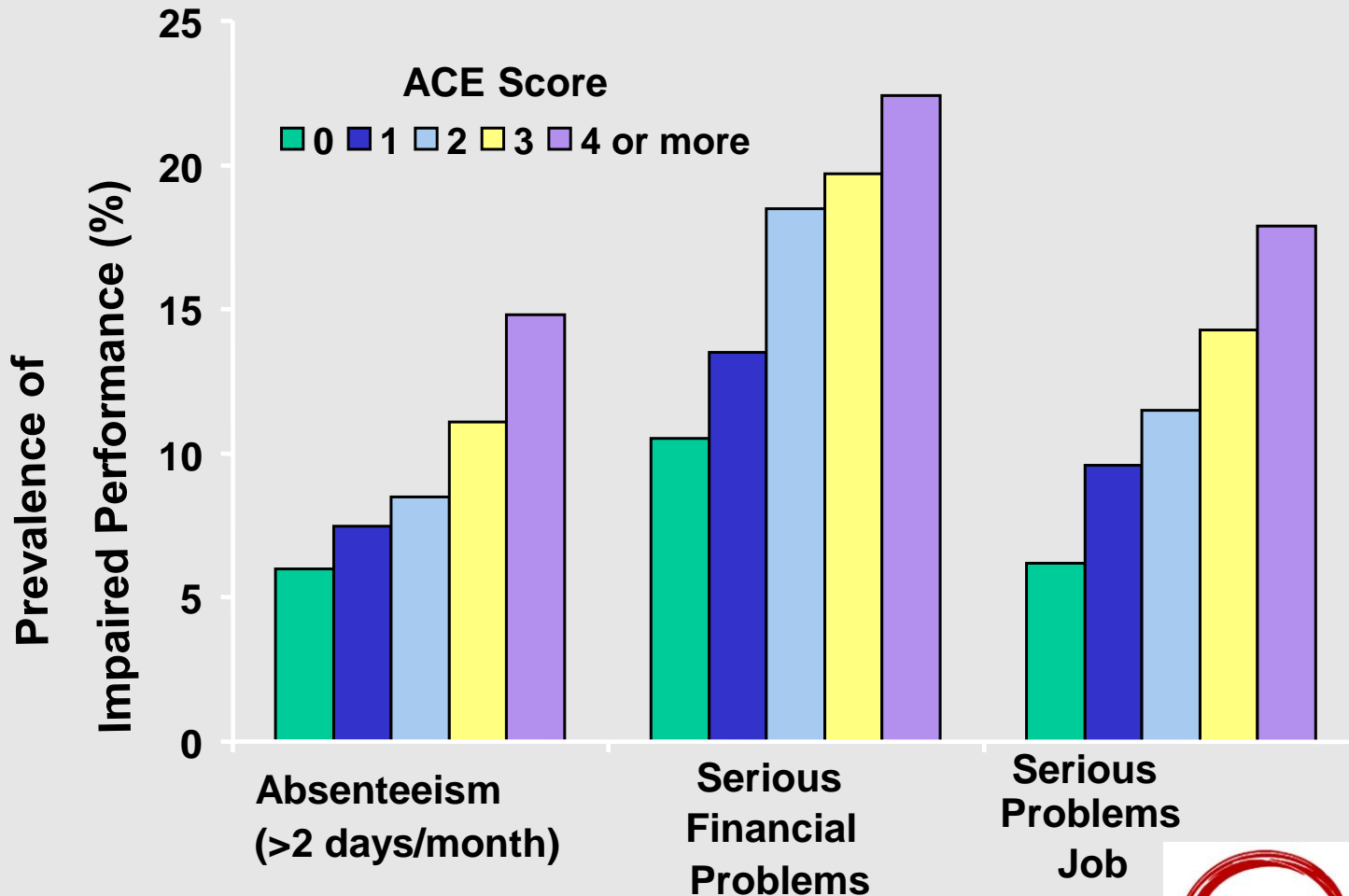
| ACE Score | Intimate Partner Violence victim* | Being Raped* |
|------------------|--|---------------------|
| 0 | 1.0 | 1.0 |
| 1 | 1.9 | 2.0 |
| 2 | 2.1 | 2.8 |
| 3 | 2.7 | 4.2 |
| 4 | 4.5 | 5.3 |
| ≥5 | 5.1 | 8.9 |

***Adjusted Odds Ratio**

ACE vs. SERIOUS JOB PROBLEMS



ACE & INDICATORS OF IMPAIRED WORKER PERFORMANCE





U.S. ACE STUDY RESULTS AND PARTICIPANT GROUPS IN CYPRUS & NEW ZEALAND

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An Example: RESULTS FROM ACE STUDY AND PAST AND CURRENT Stop the Silence PARTICIPANT GROUPS - ABUSE

Psychological (By parents) U.S - 11% CY – 16% NZ -79%/

Physical (By parents) U.S - 28% CY – 8% NZ – 50%/

Sexual U.S - 22% CY – 32% NZ - 67%/

RESULTS FROM U.S. ACE STUDY AND PAST / CURRENT GROUPS - NEGLECT

Emotional

U.S - 15%

CY – 24%

NZ – TBD /

Physical

U.S - 10%

CY – 10 %

NZ – 0 /

RESULTS FROM ACE STUDY & PARTICIPANT GROUPS - HOUSEHOLD DYSFUNCTION

Alcoholism or drug use in home U.S - 27% CY – 4% NZ–43%/

Loss of biological parent < age 18 U.S - 23% CY – 4% NZ – 14%/

Depression or mental illness U.S - 17% CY – 12% NZ – 43%/

Mother treated violently U.S - 13% CY – 0% NZ – 21%/

Imprisoned household member U.S - 6% CY – 4% NZ – 29%/

ACE SUMMARY OF FINDINGS

Common & largely unrecognized

Basis of much adult medication and public health problems

Strong predictors of later social functioning

Interrelated & not solitary

Leading determinant of health & social wellbeing

CHANGES TO THE (MEDICAL and OTHER) SYSTEMS NEEDED (Dr. Felitti)

Routinely seek a history of ACE

Acknowledge their reality

Develop systems to help with current problems

Develop systems for early prevention

The background image is a blurred photograph of a group of people, likely in a meeting or conference. The individuals are seated around a table, and the scene is filled with various colors from their clothing and the environment. The overall atmosphere is professional and collaborative.

Connected



Planning for Challenges



Pivoting

TO THINK ABOUT: ACEs, Impact, & RESPONSE

What do we know?

Impact, prevention & intervention

Treatment & mitigation continuum

DISCUSSION

Thank you for your participation



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Child Sexual Abuse

Pamela Pine, PhD, Director, Stop the Silence®

HELLO

Prevention & Mitigation of Child Sexual Abuse Training



Our orientation on CSA

Prevent, Expose & Stop Child Sexual Abuse (CSA)

Awareness, Prevention & Healing

Through Awareness-raising, Education, Training
& Policy Reform and Development

Measure & review

Presentation Focus

PARTICIPANTS WILL BE ABLE TO STATE AND DESCRIBE AND DISCUSS THE FOLLOWING

Who is victimized

Who perpetrates

Grooming process

Signs & symptoms of abuse

Shame & its impact

Why children & adults don't disclose the abuse

How to take action



TAKING CARE OF OURSELVES - SAFETY

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What is Child Sexual Abuse?



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ACCEPTED DEFINITION

CSA occurs when an adult or older child engages a child in sexual activities

Violates the law

Often takes place on an increasing continuum of abuse

CSA occurs when full consent of involved parties is not possible due to differences in size, power, age, developmental level, or authority

SEXUAL ABUSE BEHAVIOURS

Voyeurism/peeping

Exhibitionism

Inappropriate physical contact & sexualized talking

Taking sexually explicit photos & commercial exploitation

Insertion of objects

A nighttime cityscape with a teal arrow pointing right. The arrow contains the text "What do we know about the World and CSA?". The background shows a city skyline with lights reflecting in water, including a prominent tower on the right.

What do we know about the World and CSA?

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PREVELANCE

U.S – Estimated at 1 in 4 girls and 1 in 6 boys

EUROPE - 1 in 5 girls and 1 in 6 boys

Estimates of prevalence of CSA, or how often CSA occurs, range from 8-31% of girls and 3-17.6% of boys internationally

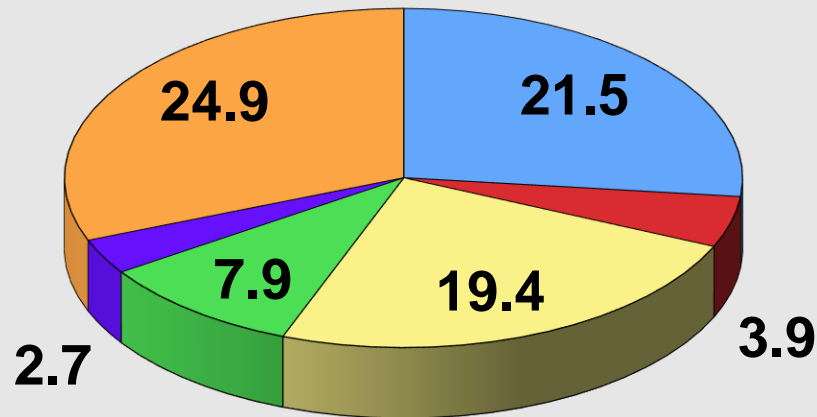
CONTEXT OF ABUSE

SURVIVORS – Who, How, What?

PERPETRATOR – Who & Why?

PERPETRATOR overview

Relationship to the victim (US)



- fathers only
- mothers only
- other relatives
- mothers acting with another person
- day care providers
- other

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The background of the slide features four crocheted bunny dolls. From left to right: a grey bunny with pink bows, a grey bunny with purple bows, a grey bunny with pink bows, and a blue bunny with a blue bow and a white tutu. They are arranged in a row against a dark, textured background.

GROOMING

Understanding grooming behaviors

Context of Abuse

Sexual abuse can take place:

- In everyday situations, at different times of day, different places
- Always in the same locations: e.g., the child's bed, the abuser's bed, on a chair in the living room, in the classroom
- At the same time every day or week (e.g., every Thursday when the child is left alone with the abuser)
- With or without being clothed
- As part of a wider range of physical or sadistic abuse
- In an "special" place away from the child's home (a car, shed, or building used for community activities)
- In a fleeting way as the child or adult come into physical contact with each other (abuser fondles child's genitals as he passes her on the stairs or in the swimming pool)
- Possibly to maximize the child's guilt it can take place in the parents' bed or in front of other children
- In a context where the child is rewarded with gifts or money

CSA IN CHILDREN & THE RESPONSE

What do we know?

Impact, prevention & intervention

Treatment & mitigation continuum

Who are the Victims/Survivors(U.S.)

Children and adolescents, regardless of their race, culture or economic status

Statistics show that girls are more often sexually abused than boys

Average age of first trauma: 7-9 years old, but children can be sexually abused earlier. There are cases of infants and 2- and 3-year-olds.



SIGNS & SYMPTOMS OF CSA

Sudden change in behavior

Physical problems

Demonstrates age inappropriate knowledge

Reluctance to be alone

Regressive behaviour

Effects of CSA

- Low self-esteem
- Depression
- Anxiety
- Isolation
- Regressive behaviors
- Dissociation
- Nightmares
- Flashbacks
- Difficulty concentrating
- Feeling unsafe
- Runaways (43%)
- Promiscuity
- Teen pregnancy (60%)
- Prostitution (95% of prostitutes/ people in porn industry)
- Drug and alcohol abuse (60-80%)
- Self-harm behaviors (cutting, burning)
- Eating disorders
- Abstinence of sex
- Interpersonal difficulties (trouble at work or home...)
- Incarceration (In U.S.: 59% of females, about 1/3 of all those in prison for homicide)

Coming up Tomorrow: ALL SYSTEMS RESPONSE NEEDED


Activating the whole community

Community based organizations

Call to action

A painting of a forest with tall, thin trees and red foliage against a colorful background. The trees are dark and slender, with clusters of bright red leaves at their tops. The background is a vertical gradient of colors, from light blue at the top to dark brown at the bottom, with yellow and orange in the middle. The overall style is abstract and expressive.

Hope and Children: there
are possible interventions
at every level



Coming Up... PREVENTION- INTERVENTION: An interrelated continuum

Issues & responses

THANKS FOR YOUR ATTENTION



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