

Adverse Childhood Experiences

An Overview of ACE

Adverse Childhood Experiences (ACE) can last a lifetime, but they don't have to. Early exposure to family violence, abusive treatment, neglect, alcohol and drug abuse, or separated/divorced parents can lead to health and social problems, risk-taking behaviors and a shortened lifespan. Safe, stable and nurturing relationships and communities can break the cycle of abuse and maltreatment.

What is an ACE?

Adverse Childhood Experiences (ACE) are stressful or traumatic experiences that take place in a child's life prior to age 18. ACE are strongly related to development and prevalence of a wide range of health problems, including substance abuse, throughout the lifespan.

Examples of ACE:

- Physical abuse
- Emotional abuse
- Sexual abuse
- An alcohol and/or drug abuser in the household
- An incarcerated household member
- Someone who is chronically depressed, mentally ill, institutionalized, or suicidal
- Mother is treated violently
- One or no parents
- Emotional or physical neglect

ACE place a child at-risk

When children are exposed to chronic stressful events, neurodevelopment can be disrupted. Disruption in early development of the nervous system may impede a child's ability to cope with negative or disruptive emotions and contribute to emotional and cognitive impairment. Over time, and often during adolescence, the children who experience ACE often adopt negative coping mechanisms, such as substance use. Eventually, this contributes to disease, disability and social problems, as well as premature mortality.

ACE and Other Behavioral Health Problems:

- Increased risk of suicide attempts by men and women
- Lifetime depressive episodes
- Sleep disturbances in adults
- Sexual risk behaviors
- Teen pregnancy

ACE and Substance Use

- Early initiation of alcohol use
- Problem drinking behavior into adulthood
- Increased likelihood of early smoking during adulthood
- Prescription drug use
- Increased risk of lifetime illicit drug use, ever having a drug problem, and self-reported addiction

What can you do?

Resilience is the result of a dynamic set of interactions between a person's adverse experiences and his or her protective factors. These protective factors can include a person's own biological and developmental characteristics but protective factors can also include characteristics of the family, community, and systems that mitigate the negative impacts of ACE. The negative consequences of toxic stress from ACE can be buffered with the support of caring, competent adults and appropriate intervention and support. As a professional, supporting and encouraging resiliency can help limit the effect of ACE on a person's life.



How does resilience develop?

- There are multiple pathways to resilience but some important individual, family and community conditions that support resilience are known. Protective factors, particularly safe, stable, and nurturing relationships can often mitigate the consequences of ACE. Here is a list of those factors:
- Close relationships with competent caregivers and other caring adults
- Parent resilience
- Caregiver knowledge and application of positive parenting skills
- Identifying and cultivating a sense of purpose (faith, culture, identity)
- Individual developmental competencies (problem solving skills, self-regulation)
- Children's social and emotional health
- Social connections
- Socioeconomic advantages and concrete support for parents and families
- Communities and social systems that support health and development, and nurture human capital

Suspect child abuse? Make a report or learn more through the free ND Mandated Reporter interactive training.

You can help make a difference, one child at a time.

www.stopchildabusend.com/NDDHS/mandatedreportertraining/welcome.html