Adverse Childhood Experiences in Wisconsin:
Findings from the 2011-2012 Behavioral Risk Factor Survey

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• **Vision:** All Wisconsin children grow up in healthy and nurturing environments - free from violence with an equal opportunity to reach their full potential.

• **Mission:** The Children's Trust Fund promotes the development of a sustainable, comprehensive prevention infrastructure that reflects research and promising practices in child abuse and neglect prevention. Through strategic partnerships and investments, the Children's Trust Fund supports Wisconsin communities in the provision of services to prevent child abuse and neglect.
Conducted in 1995 through 1998 and was led by Dr. Vincent Felitti at Kaiser Permanente San Diego and Dr. Robert Anda at Centers for Disease Control and Prevention (CDC).

More than 17,000 participants: 75% white; 36% college educated; and 39% college graduates.

The ACE Study was originally designed to assess for “scientific gaps” in the origins of risk factors.
An ACE—adverse childhood experience—is exposure to any of the following before the age of 18:

1. Recurrent physical abuse
2. Recurrent emotional abuse
3. Sexual abuse
4. An alcohol or other drug abuser in the household
5. An incarcerated family member
6. A household member who was chronically depressed, mentally ill, institutionalized or suicidal
7. Violence between adults in the home
8. Parental separation or divorce
ACEs:

- are common
- have long-term, damaging consequences
- can happen in any family
- have a cumulative effect—the higher the score, the higher the likelihood of health risk behaviors and poor health outcomes
- are a leading determinant of public health spending
Original ACE Kaiser Findings

- **0 ACEs**:
  - Injected Drug Use: 0.3%
  - Chronic Bronchitis/Emphysema: 3%
  - Adult Alcoholism: 2.9%
  - Attempted Suicide: 1%

- **1 ACEs**:
  - Injected Drug Use: 0.5%
  - Chronic Bronchitis/Emphysema: 4%
  - Adult Alcoholism: 5.7%
  - Attempted Suicide: 2%

- **2 ACEs**:
  - Injected Drug Use: 3.4%
  - Chronic Bronchitis/Emphysema: 4%
  - Adult Alcoholism: 8.7%
  - Attempted Suicide: 4%

- **3 ACEs**:
  - Injected Drug Use: 2.3%
  - Chronic Bronchitis/Emphysema: 11.3%
  - Adult Alcoholism: 16%

- **4+ ACEs**: 18%
Examples of ACE-Attributable Problems

- Alcoholism & Alcohol Abuse
- COPD
- Lung Disease
- Coronary Heart Disease
- Depression
- Drug Abuse & Illicit Drug Use
- Fetal Death
- Intimate Partner Violence
- Liver Disease
- Mental Health Problems
- Obesity
- Sexual Behavior Problems
- Smoking
- Unintended Pregnancy
- Violence
- Workforce Problems
Early experiences – good and bad – shape a child’s future and world view

- Brain development
- Effects of toxic stress
- Self-regulation
- Attachment
- Self-concept
ACEs in Wisconsin

- ACE module has been included in the Wisconsin Behavioral Risk Factor Survey (BRFS) since 2010.

- Standard BRFS methods used
  - Stratified random sample of telephone numbers
  - One household member, 18 or older, selected to participate

- Over 10,000 adults participated in the 2011 and 2012 survey combined.

- Results are weighted by CDC statistical staff to represent Wisconsin’s adult population with landline and cellular telephones.
ACEs in Wisconsin: Findings

• ACEs are common
• ACEs are interrelated
• ACEs are associated with:
  – Mental Health Outcomes
  – Health Risk Behaviors
  – Physical Health Outcomes
  – Socioeconomic Status
  – Medicaid/Badger Care Enrollment
  – Quality of Life
58% of Wisconsin adults reported growing up experiencing at least one ACE.

Of those 25% reported having 4 or more ACEs.
ACEs and Educational Attainment

- No Diploma/GED
- HS Grad
- Some College
- College Degree

0 ACEs
1 ACEs
2,3 ACEs
4+ ACEs
ACE Score by Insurance Type

<table>
<thead>
<tr>
<th>Insurance Type</th>
<th>4+ ACEs</th>
<th>2-3 ACEs</th>
<th>1 ACE</th>
<th>0 ACEs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Uninsured</td>
<td>26%</td>
<td>24%</td>
<td>20%</td>
<td>31%</td>
</tr>
<tr>
<td>Medicaid/Badger Care</td>
<td>23%</td>
<td>23%</td>
<td>25%</td>
<td>30%</td>
</tr>
<tr>
<td>Medicare/Private Insurance</td>
<td>11%</td>
<td>20%</td>
<td>23%</td>
<td>46%</td>
</tr>
</tbody>
</table>

Legend:
- Green: 4+ ACEs
- Purple: 2-3 ACEs
- Orange: 1 ACE
- Maroon: 0 ACEs
ACE Scores in Children & Adolescents

- NatSCEV
- NSCAW II
- LONGSCAN
NSCAW11: ACE Scores by Age

% of sample reporting ACEs

Total number of ACEs

0-2 y.o. 3-5 y.o. 6-10 y.o. 11-17 y.o.

0 1 1 2
1 6 6 28
2 20 23 28
3 21 23 38
4 51 43 68

% of sample reporting ACEs

≥4
Minnesota 8th, 9th, and 11th Graders Reporting Any Past 30 Day Alcohol Use, by ACE Score, 2013 MSS

- ACE Score 0: 10.9%
- ACE Score 1: 20.6%
- ACE Score 2: 27.6%
- ACE Score 3: 34.6%
- ACE Score 4: 47.0%
Minnesota 8th, 9th, and 11th Graders Reporting Any Past 30 Day Cigarette Smoking, by ACE Score, 2013 MSS

ACE Score 0: 3.4%
ACE Score 1: 9.9%
ACE Score 2: 14.6%
ACE Score 3: 21.7%
ACE Score 4+: 32.8%
Minnesota 8th, 9th, and 11th Graders Reporting Past Year Suicidal Ideation and Attempts, by ACE Score, 2013 MSS

- ACE Score 0: 4.9% Seriously considered suicide, 1.0% Actually attempted suicide
- ACE Score 1: 13.7% Seriously considered suicide, 3.6% Actually attempted suicide
- ACE Score 2: 22.5% Seriously considered suicide, 7.2% Actually attempted suicide
- ACE Score 3: 30.7% Seriously considered suicide, 10.8% Actually attempted suicide
- ACE Score 4+: 41.9% Seriously considered suicide, 20.6% Actually attempted suicide
Minnesota 8th, 9th, and 11th Graders Reporting Having Significant Problems in the Last 12 Months with Feeling Very Trapped, Lonely, Sad, Blue, Depressed, or Hopeless About the Future, by ACE Score, 2013 MSS

- ACE Score 0: 18.6%
- ACE Score 1: 36.3%
- ACE Score 2: 50.8%
- ACE Score 3: 59.9%
- ACE Score 4+: 70.3%
Minnesota 8th, 9th, and 11th Graders Reporting Experiencing or Exhibiting Bullying Behaviors in the Past 30 Days, by ACE Score, 2013 MSS

- Experienced past 30 day bullying (victim)
  - ACE Score 0: 37.3%
  - ACE Score 1: 53.8%
  - ACE Score 2: 64.7%
  - ACE Score 3: 69.5%
  - ACE Score 4+: 77.2%

- Exhibited past 30 day bulling (bully)
  - ACE Score 0: 21.3%
  - ACE Score 1: 34.3%
  - ACE Score 2: 42.5%
  - ACE Score 3: 47.3%
  - ACE Score 4+: 55.8%
Minnesota 8th, 9th, and 11th Graders Describing Their Grades for the School Year, by ACE Score, 2013 MSS
• The presence of protective factors are known to mitigate the consequences of adverse childhood experiences.

• A number of protective factors that can help build resilience include:
  – Caring and competent relationships
  – Good health & a history of adequate development
  – Good peer relationships
  – Hobbies and interests
  – Above average intelligence
  – Easy temperament
  – Positive disposition
  – Active coping skills
  – Positive self-esteem
  – Good social skills
• Additional research is needed to better understand how some individuals and communities are able to thrive under difficult and traumatic circumstances.

• There is a need for a consistent and uniform definition of resiliency across systems.

• Trauma-informed care, including having professionals with skills in trauma-informed care may also help build resilience in individuals.
Wisconsin’s Four Key Priority Areas:
1) Increase public awareness;
2) Address co-occurrence of ACEs among children of incarcerated parents;
3) Expand the knowledge and use of ACE data within Medicaid/BadgerCare; and
4) Enhance ACE related data in Wisconsin.
Midwest Regional ACE Summit

- Featured national experts: Dr. Robert Anda, Laura Porter, Susan Dreyfus and Bryan Samuels
- State Peer Discussion Sessions on Policy, Practice, Community Engagement and Building Resiliency
- Next Steps: Advancing strategies identified in the peer discussion sessions and creating a community of practice surrounding ACEs.
- Next Midwest Regional ACE Summit to be hosted by Illinois.
Washington State
- High Capacity Communities
  - Ex. Children’s Resilience Initiative in Walla Walla

California
- Center for Youth Wellness – Nadine Burke Harris
- Assembly Health Committee – ACE Resolution

Iowa
- ACEs 360
Policy Recommendations

• Greater Investment in Prevention Strategies
  – Project GAIN
  – Wisconsin’s Community Response Program
  – Positive Community Norms Statewide Initiative

• Medicaid Policy Changes
  – Benefits package specific for individuals with ACEs and trauma
  – Reimbursement for evidence-based prevention initiatives

• Design and Pilot Prevention and Intervention Strategies with Children and Parents involved in Corrections

• Invest in Research on Resilience
Additional Information

- ACEs in Wisconsin
  http://wichildrenstrustfund.org/

- ACEs Connection
  http://acesconnection.com/

- ACE Study web page
  http://www.acestudy.org/

- Center for Disease Control
  http://www.cdc.gov/ace/

- Center on the Developing Child at Harvard University
  http://developingchild.harvard.edu/

- Child Emotion Lab at University of Wisconsin-Madison
  http://www.waisman.wisc.edu/childemotion/sets.html