



Adverse Childhood Experiences and Adult Health Harming Behaviours

Professor Mark A. Bellis

*Director of Research, Policy and International Development
Public Health Wales*



PRIFYSGOL
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UNIVERSITY



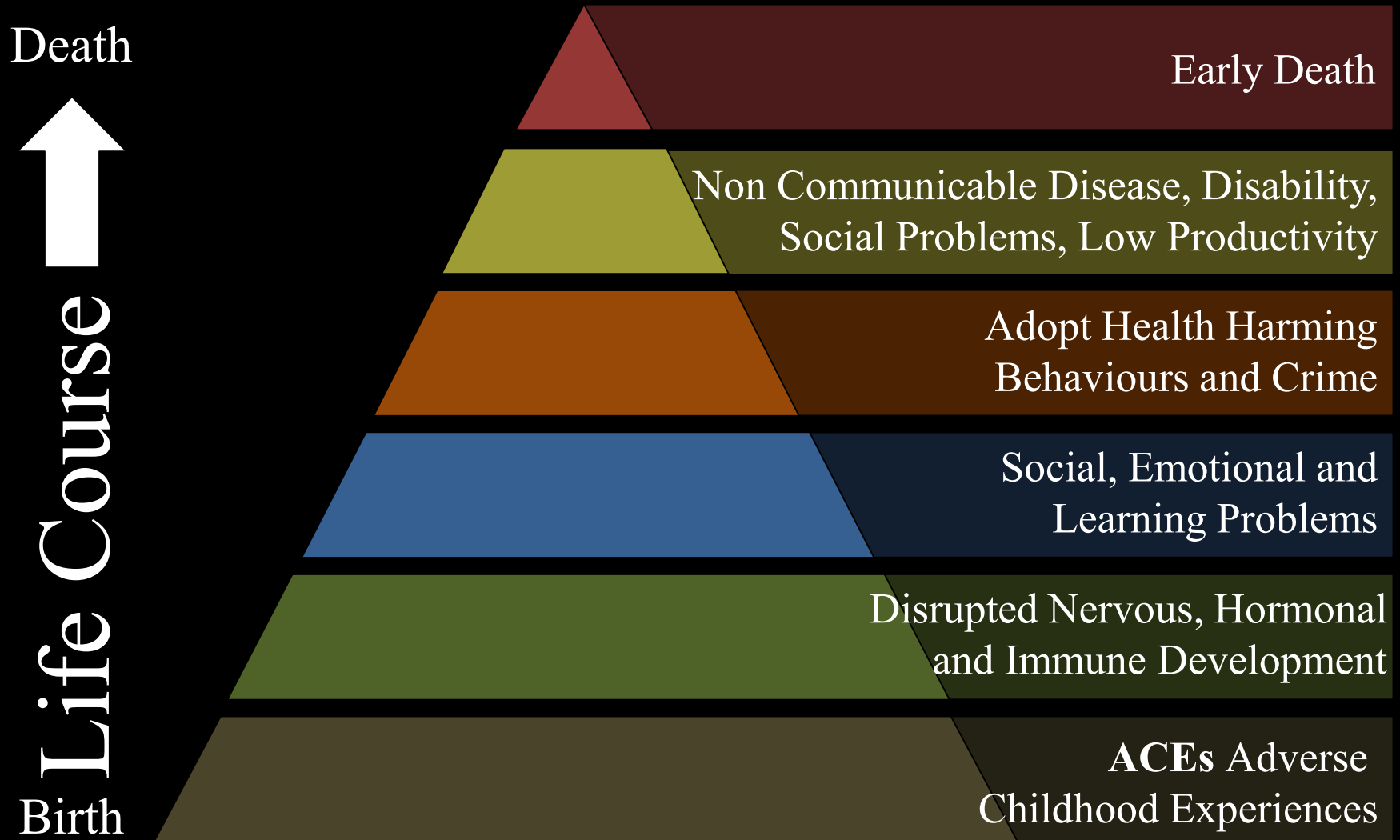
GIG
CYMRU
NHS
WALES

Iechyd Cyhoeddus
Cymru
Public Health
Wales



GLOBAL CAMPAIGN FOR VIOLENCE PREVENTION
CAMPAGNE MONDIALE POUR LA PREVENTION DE LA VIOLENCE
VIOLENCE PREVENTION ALLIANCE / ALLIANCE POUR LA PREVENTION DE LA VIOLENCE

Adverse Childhood Experiences ACEs - The Life Course

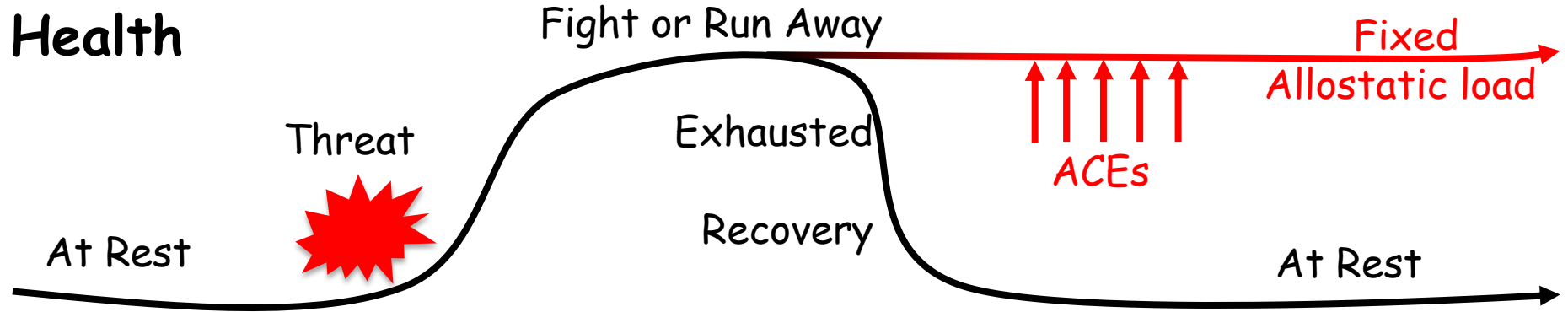


Early Life Experience and The Brain



Critical Years

- First 2 years - baby's brain grows from 25% to 80% of adult size
- Development continues in childhood learning *empathy, trust, community*



Chronic Stress from ACEs

- Violence - over-develop 'life-preserving' brain

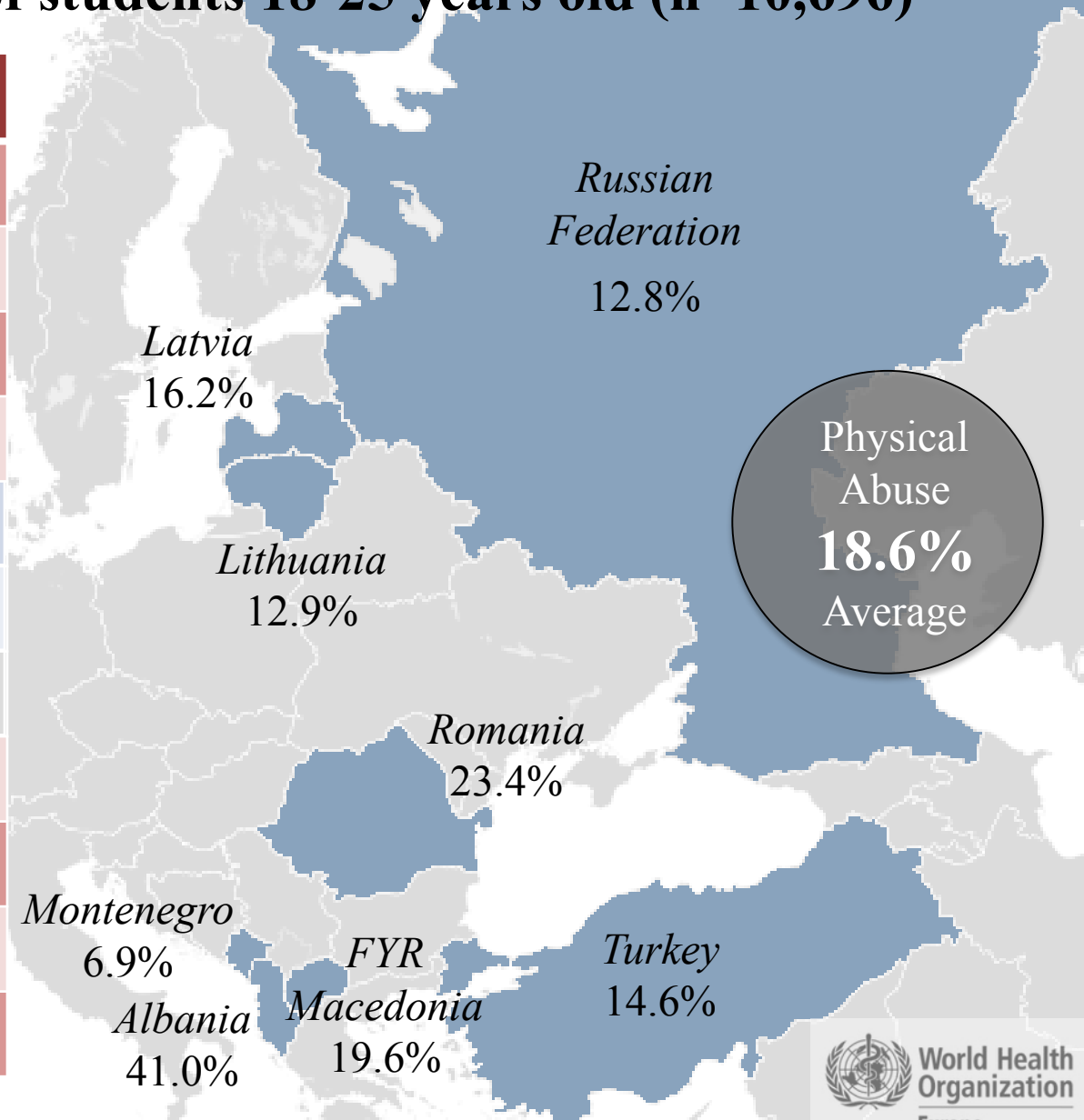
NEUTRAL CUES LOOK THREATENING

- School – anxious, disengaged, poor learner

How many people suffered ACEs 0-18 years old?

European Survey of students 18-25 years old (n=10,696)

ACE are:	England
Physical abuse	15%
Sexual abuse	6%
Domestic violence	13%
Parental separation	24%
Emotional neglect	11.8%
Emotional abuse	8.0%
Household member:	
Depressed/suicidal	12%
Alcoholic	10%
Incarcerated	4%
Street drug user	4%



UK: Compared with no ACEs, those with 4+ ACEs were:

2x more likely to **binge drink**
3x more likely to be **current smoker**
5x more likely to have had **sex under 16 years**
7x more likely to be involved in **recent violence**
11x more likely to have **used heroin or crack**
11x more likely to have been **incarcerated**

INDEPENDENT OF POVERTY



If they had no ACEs problems could be reduced by:



Smoking
16%



Early Sex
33%



Heroin/Crack
59%



Binge Drinking
15%



Violence
60%

Aged 18-70 years

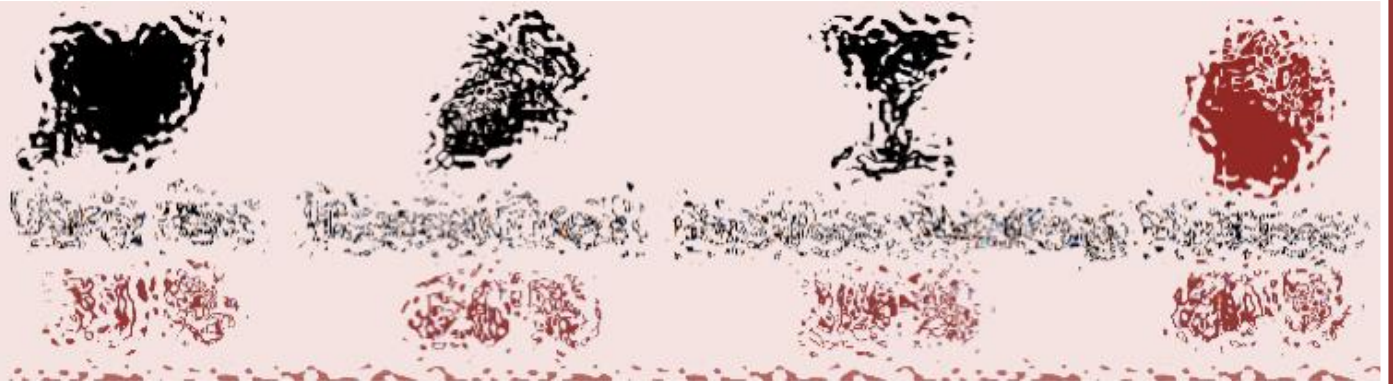
Wales: Compared with no ACEs, those with 4+ ACEs are:

6X more likely to be **current smoker / e-cig user**



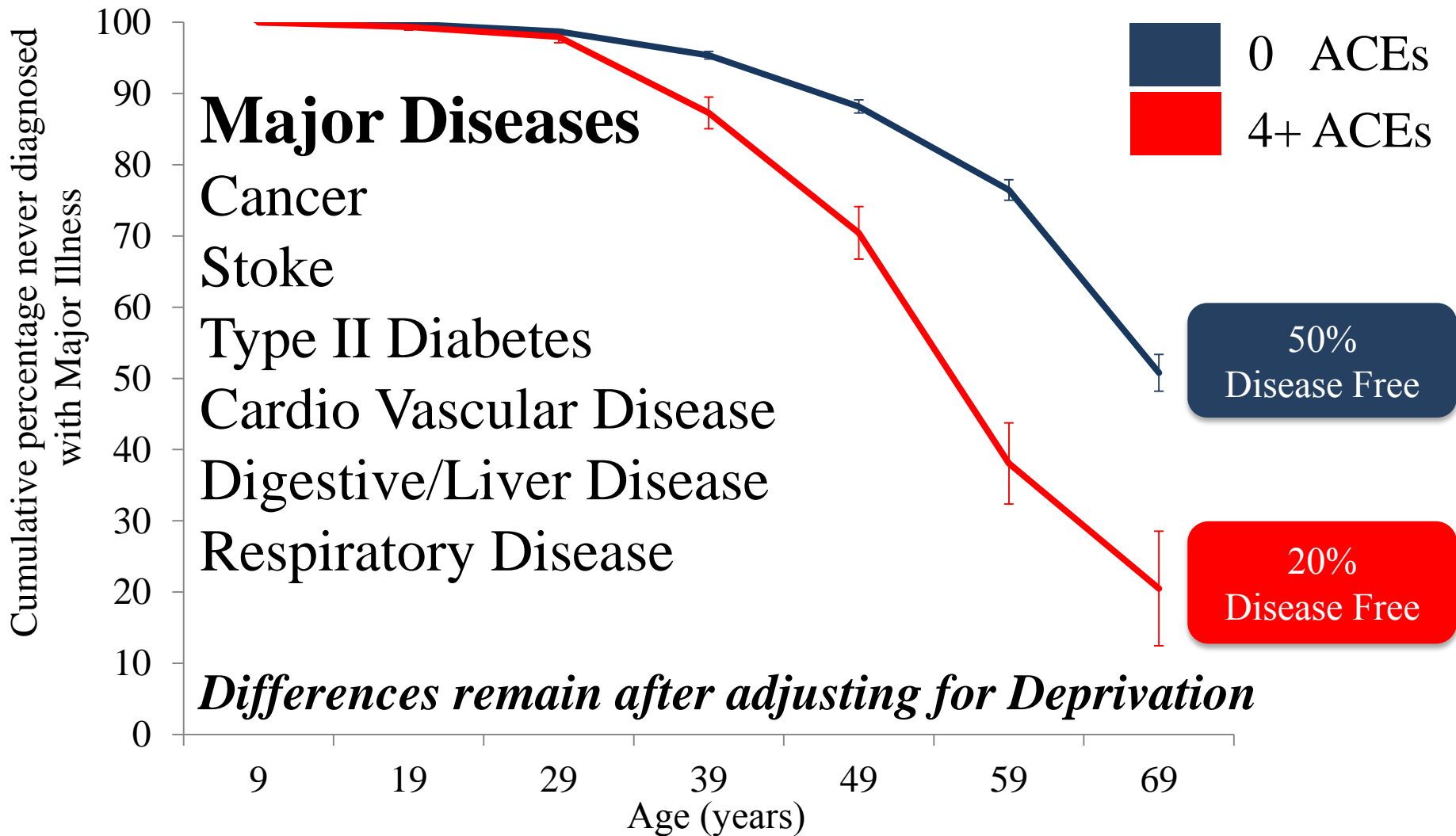
If they had no ACEs problems could be reduced by:


Smoking
24%



Aged 18-70 years
Publication - December 2015

England: Individuals **Never Diagnosed** with a Major Disease by Age (%)





Death



Depression



Deprivation

- ACEs are part of Inequalities
 - 3x more people suffered 4+ ACEs in most deprived versus wealthiest 1/5 of people (UK)
- Just in Deprived Communities
 - **More ACEs = More** smoking, alcohol misuse, early sexual activity and premature ill health across the life course

SDGs

Sustainable Development Goals

“End .. all forms of violence against
and torture of children”

CHILDREN
9.6% Sexually Abused
22.9% Physically Abused



Llywodraeth Cymru
Welsh Government

www.cymru.gov.uk

Protecting Children in Wales

Guidance for Arrangements for Multi-Agency
Child Practice Reviews



The Scottish
Government
Règimeal na h-Alba

National Guidance for Child Protection in Scotland | 2014



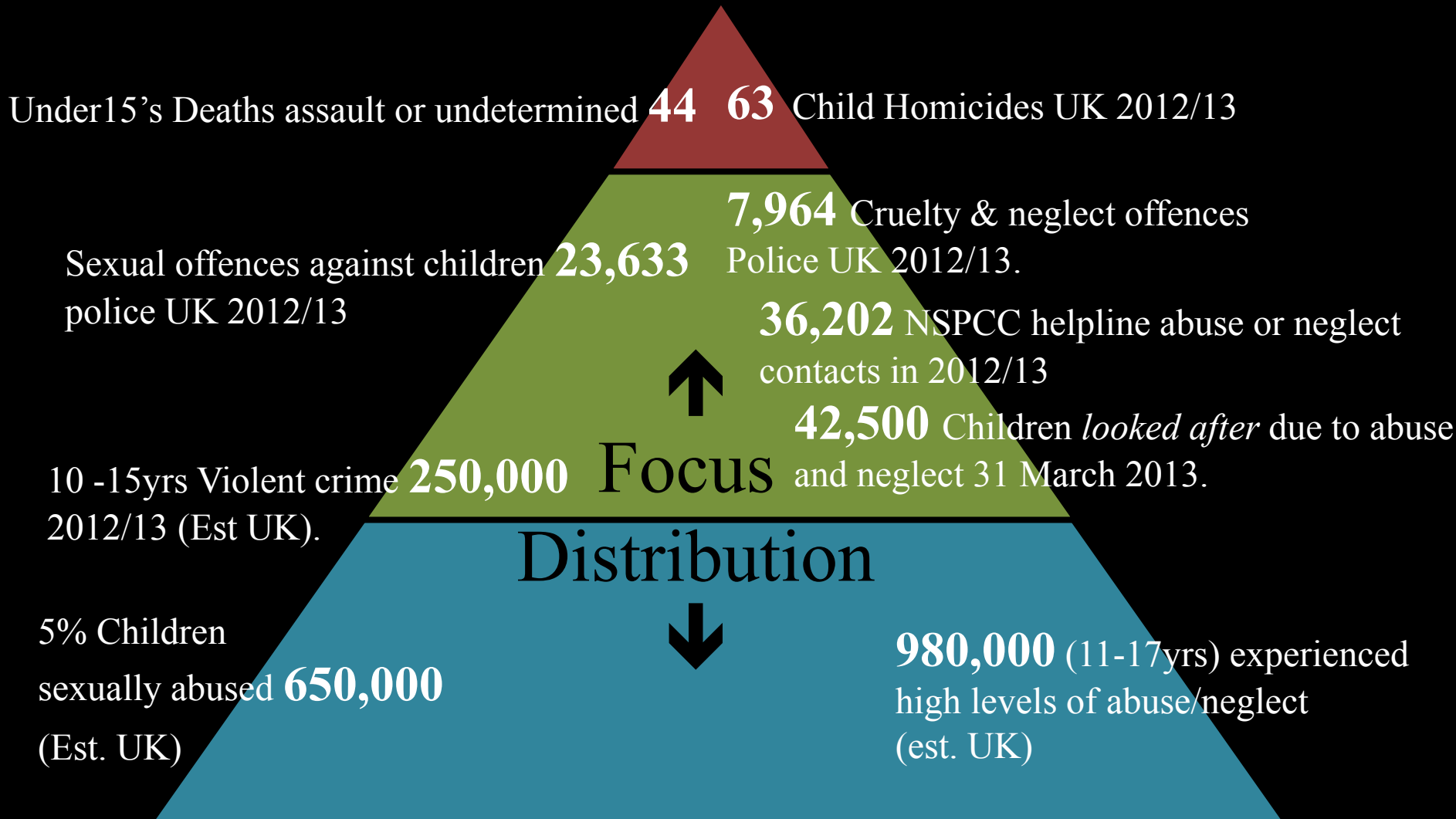
HM Government

Working together to safeguard children

A guide to inter-agency working to
safeguard and promote the welfare of
children

March 2015

Child Abuse - Distribution and Focus



Three in five people describe child abuse and neglect as “common” in the UK

Supporting Parents – Preventing ACEs



Nurse Home Visiting

Improve parent skills, support maternal mental health.

Often for younger, poorer, new mothers.

Benefits

- ↓ Child maltreatment
- ↓ Visits for child injury to Health services



Parenting Programmes

Social worker or Nurse Improving parents' skills, knowledge and confidence for child's development.

Benefits

- ↓ Child maltreatment
- ↑ Child-parent relationships
- ↓ Parental stress
- ↓ Child conduct issues



Preschool Enrichment

Social, emotional and educational skills development continuing into school often with parenting programmes.

Benefits

- ↓ Child maltreatment
- ↑ High school completion
- ↓ Arrests for violent offences
- ↑ In mid 20s more employed



Screening Parents

Paediatric training for clinicians on identifying risk for child maltreatment in low income areas

Benefits

- ↓ Child maltreatment
- ↓ Harsh physical punishment
- ↑ Professional skills

School-based Social and Emotional Learning Programmes to Prevent Conduct Problems



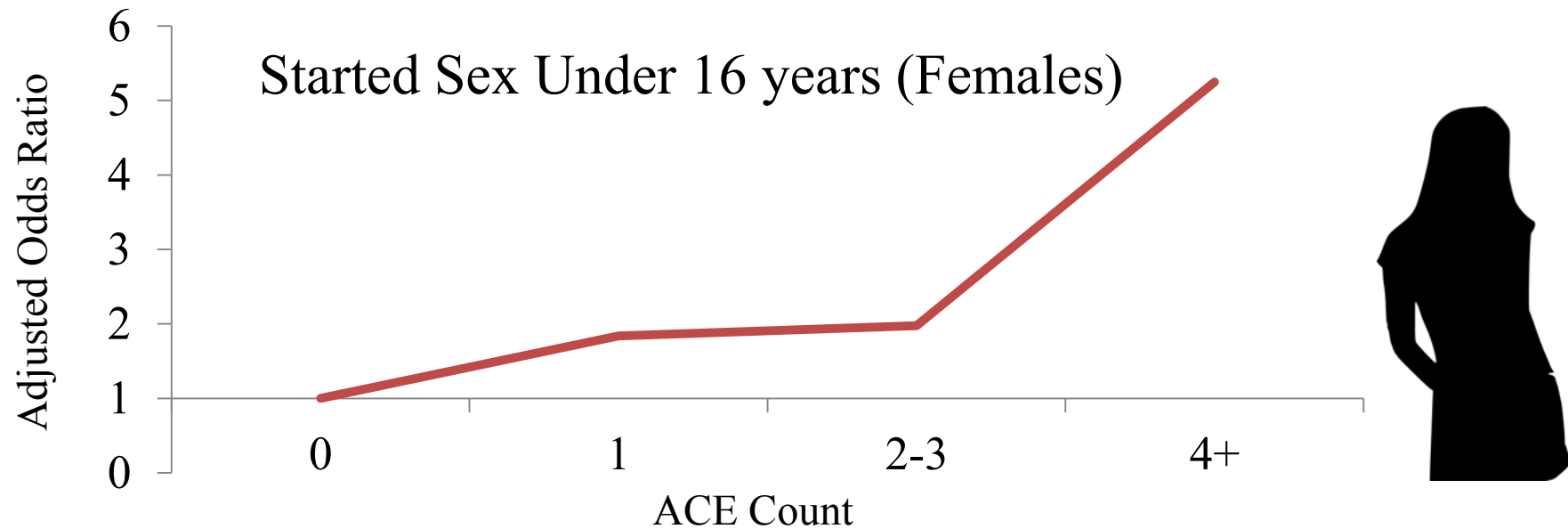
	Year 1	Year 5
Cost of intervention	£132	£132
Education	£26	£135
Health	£39	£751
Criminal Justice	£14	£1,139
Social & Voluntary	£4	£17
Other Crime/Victim	£42	£4,459
Total payoffs	£125	£6,501

Many early life course interventions show savings within 1 to 5 years on a pan-departmental basis

(www.wsipp.wa.gov/BenefitCost; Knapp et al, 2011)

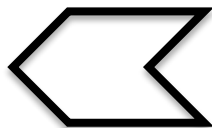
The ACEs Life Cycle

Children having Children



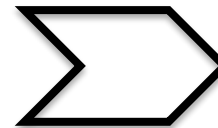
4+ ACES vs. 0 ACES

Mother ≤ 18 years when born



4+ ACES vs. 0 ACES

Pregnant under 18 years



4+ ACES vs. 0 ACES

First child born under 18 years



The ACEs Life Cycle



Alcohol and **Adverse Childhood Experiences** in Europe

The Region with the World's Highest Alcohol Consumption

- 1/3 of fatal **Child Abuse** is by individuals who have been drinking
- **Intimate Partner Violence** increases with alcohol outlet density
- **Parental Separation** increases with alcohol consumption
- **Child Sexual Abuse** often involves the use of alcohol on victims
- Intoxication increases **Suicide** risk up to 90 times compared to abstinence
- >1/3 of prisoners had alcohol problems the year before **Incarceration**



Alcohol
increases risks
of
VIOLENCE
and
ABUSE

Building Resilience - Helping people cope with ACEs

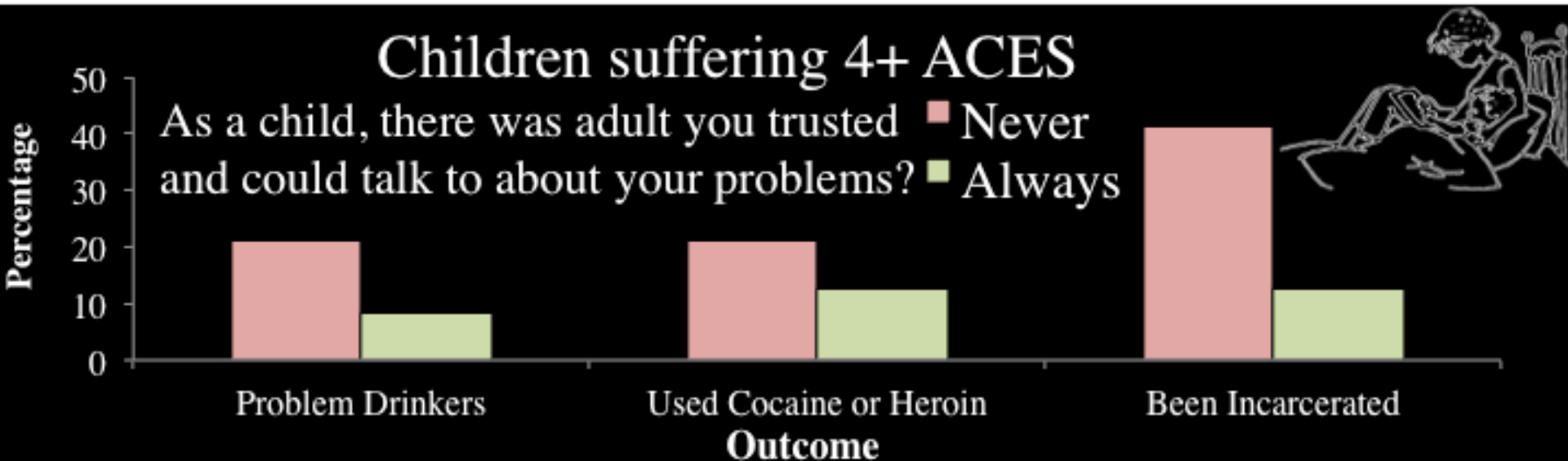
Avoid damaging behavioural and physiological changes in response to chronic stress

Feel you can overcome hardship and guide your destiny

Grounded in cultural traditions 'Connected'

Equipped to manage your behaviour and emotions

One or more stable, caring child-adult relationship



ACEs in Challenging High Schools

Example from Washington State Family Policy Council

- **ACEs**
 - 1/3 of class had 4+ ACEs
 - Best predictor of health, attendance, behaviour
 - Educational success related more to ACEs than income
 - Best predictor of academic failure (after special education needs)
- **Change**
 - Public Health and others inform staff about impacts of ACEs
 - Move away from automatic punishment
- **Good schooling**



ACEs - A life course approach to Adult ill health



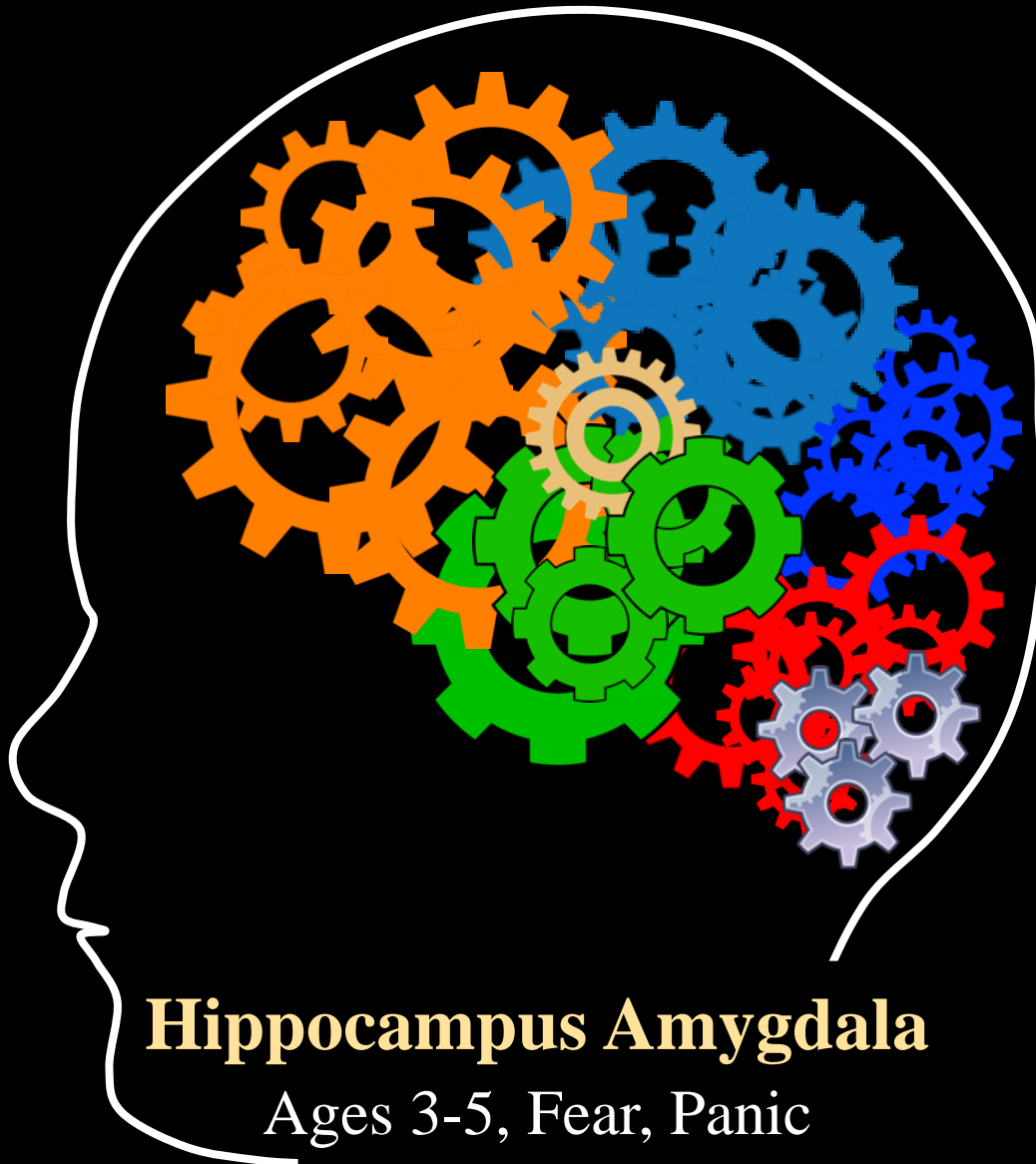
- Underlying reasons for accessing health care?
- USA – Multiple studies *in progress*
- Routine self-completed ACE survey **pre-examination** (Felitti)
- At **examination**, *How have these [ACEs] has affected you in later life?*
- Following year attendances (**Preliminary Results, n=14,000**)
 - General Practice ↓35%; Emergency Department ↓11%
 - Routine enquiry increases visibility not trauma?
- European Research Agenda?
 - REACh – Routine Enquiry About Adversity in Childhood

Multi-disciplinary Agenda for Prevention & Resilience Research

Corpus Callosum

Infancy
Language,
Maths
Neglect

8-10 Years
Social cues
Sexual Abuse



Cortex

First 2-3 years

Judgment

All Maltreatment

8-10 Years

Reasoning

Witnessing

Domestic

Violence

Hippocampus Amygdala

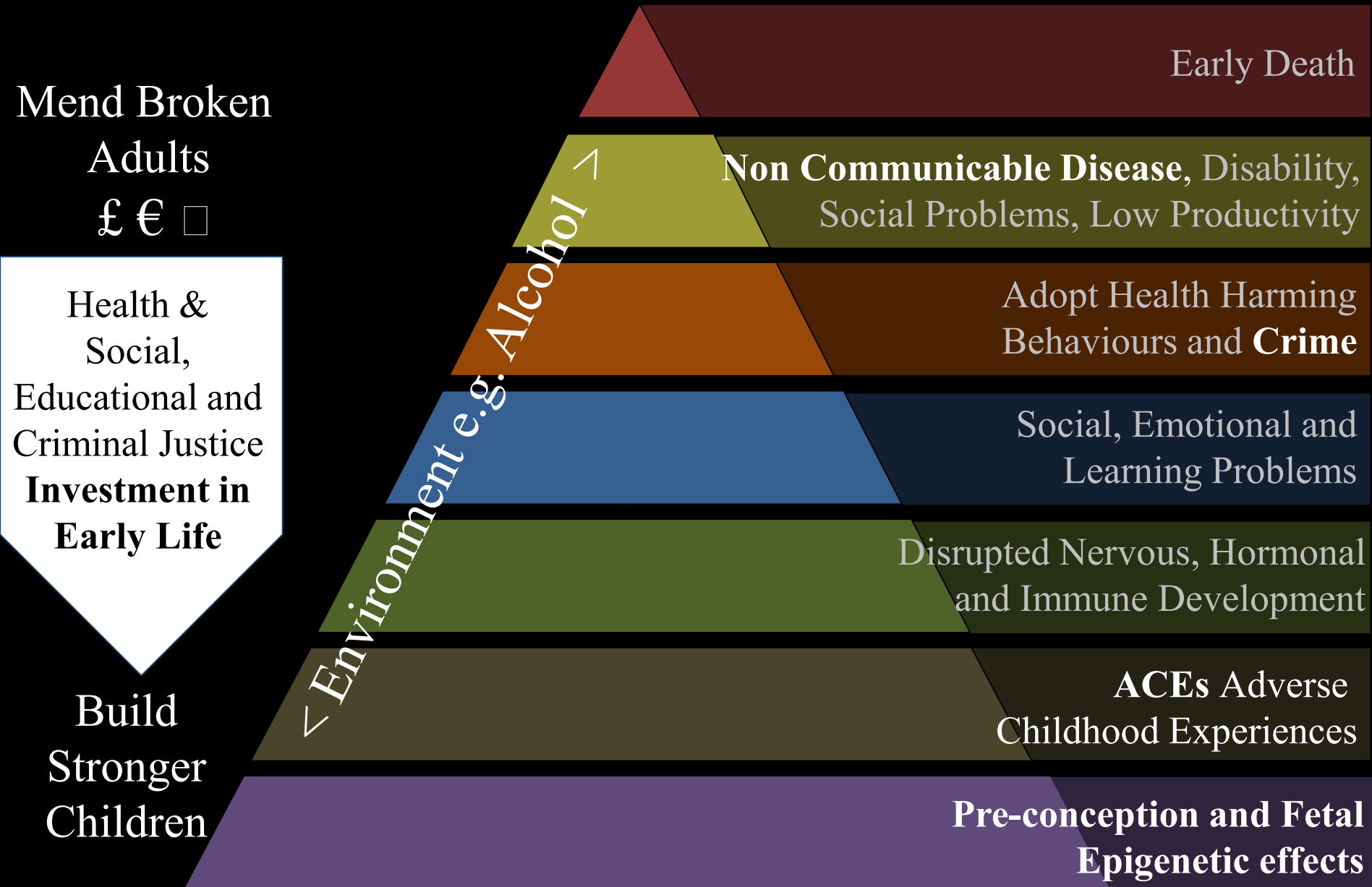
Ages 3-5, Fear, Panic

Understanding Emotion

Sexual Abuse

*Based on Washington State Family Council;
Nash, 1997; Early Years Study, 1999; Shonkoff, 2000*

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Summary

- Adverse Childhood Experiences are a **Major Cause of Non-Communicable Disease**
- **Health, Social, Education and Criminal Justice** sectors benefit from starting people on the best life trajectory – benefits obvious in partnership
- ACEs – Identifies a measurable **Health and Economic value from good parenting**
- Childhood Adversity should be a **consideration across the life course** – (Prevention, Resilience, Enquiry)
- Environmental Factors such as **poorly controlled alcohol marketing** make matters worse
- Tackling ACEs will **help reduce inequalities in health and well-being**
- Emerging **Unified Research Agenda** – What works, how and when (Neurology, Epigenetics, Public Health and more)
- Fix once and potentially long-lasting **inter-generational benefits**
- **Better informed parents will make better life course decisions**



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m.a.bellis@bangor.ac.uk

The Minsk Declaration

The Life-course Approach
in the Context of Health 2020

