

ACEs & Work

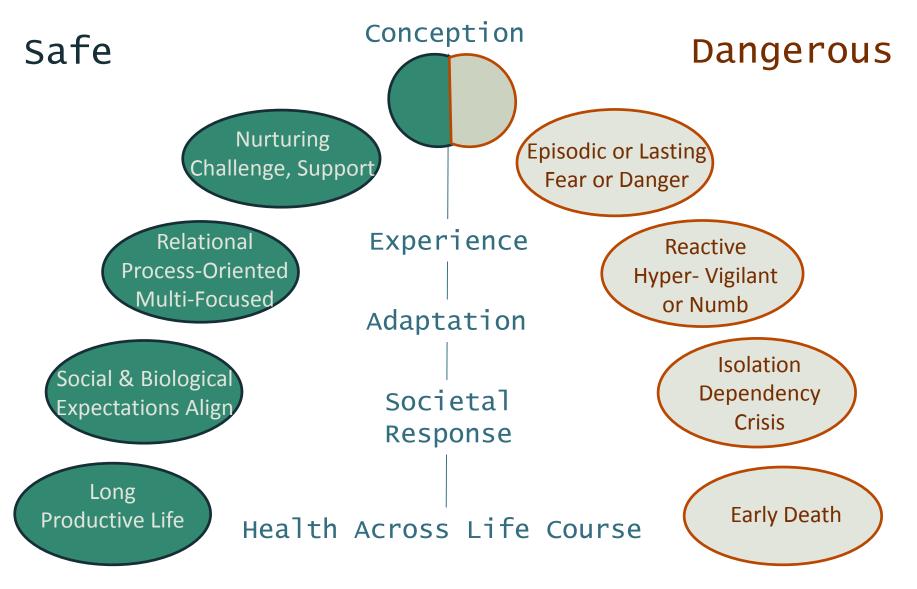






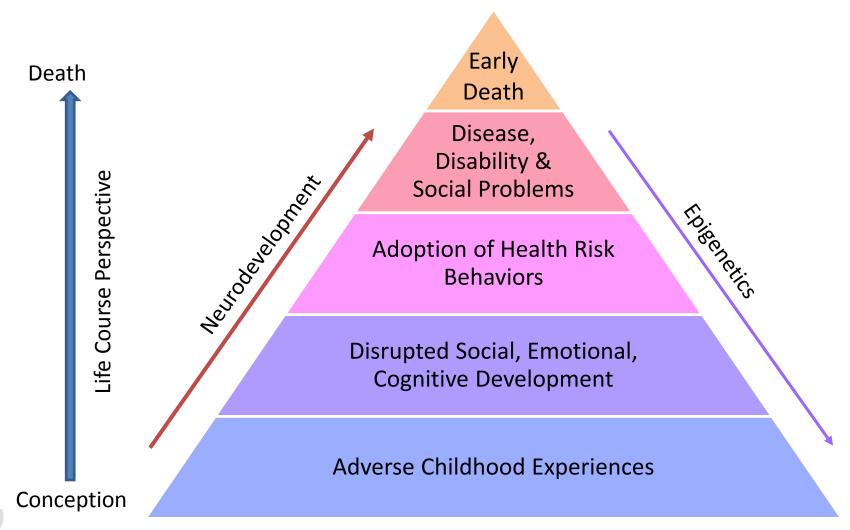


Experience & Adaptation





Adverse Childhood Experience "The ACE Study"



Experiences Considered

Indicators of Family Dysfunction

- 1. Mentally ill, depressed or suicidal person in home
- 2. Drug addicted or alcoholic family member
- 3. Parental discord indicated by divorce, separation, abandonment
- 4. Witnessing domestic violence against the mother
- 5. Incarceration of any family member

Abuse

- 6. Child physical abuse
- 7. Child sexual abuse
- 8. Child emotional abuse

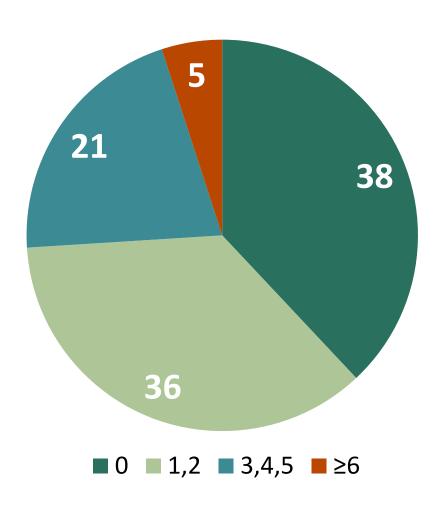
Neglect

9. Physical Neglect

10.Emotional Neglect



ACEs are Common



62% of adults have ≥1 ACE

5% have ≥6



ACE & Population Health in Washington; Anda & Brown; 2009

Major Findings

ACE Categories (ACEs) are Interrelated

-87% of people with 1 have >1

ACEs are Common

– Nearly 2/3 of adults have \geq 1; 27% have \geq 3; 5% have \geq 6

Accumulation of ACEs Matters

– Higher # (ACE Score) = higher population risk

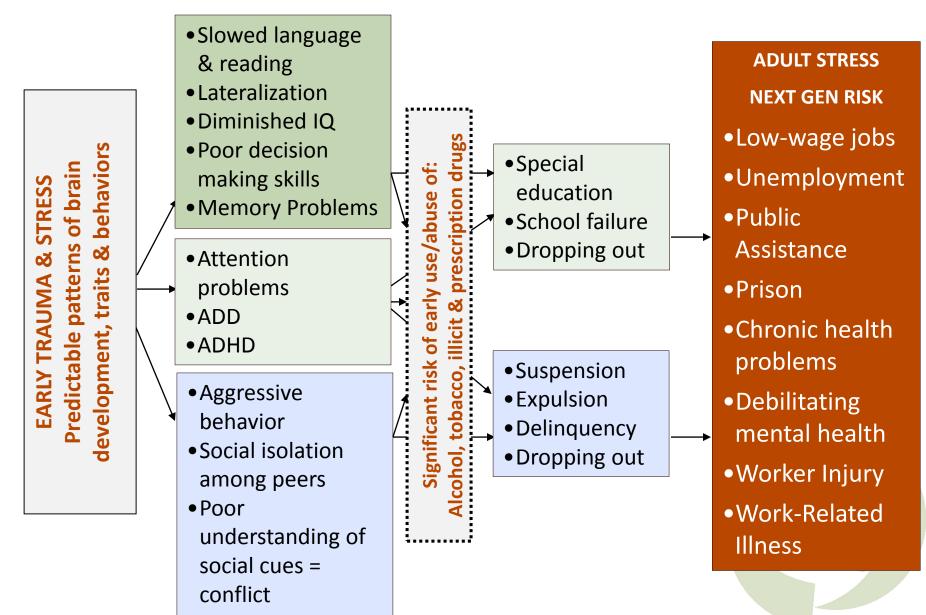
Graded Relationship: Disease, Disability, Social, Productivity

Scores = Good Proxy Measure Childhood Toxic Stress Dose

ACEs are the Most Powerful Known Determinant of Health

- Mental, Physical, Behavioral, Productivity, Disability, & Social Problems

The Fast Track to Poverty

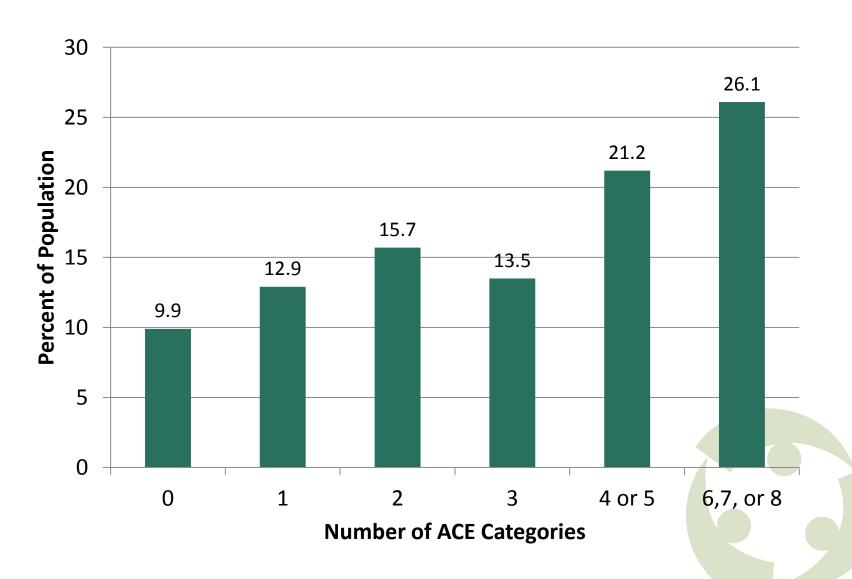


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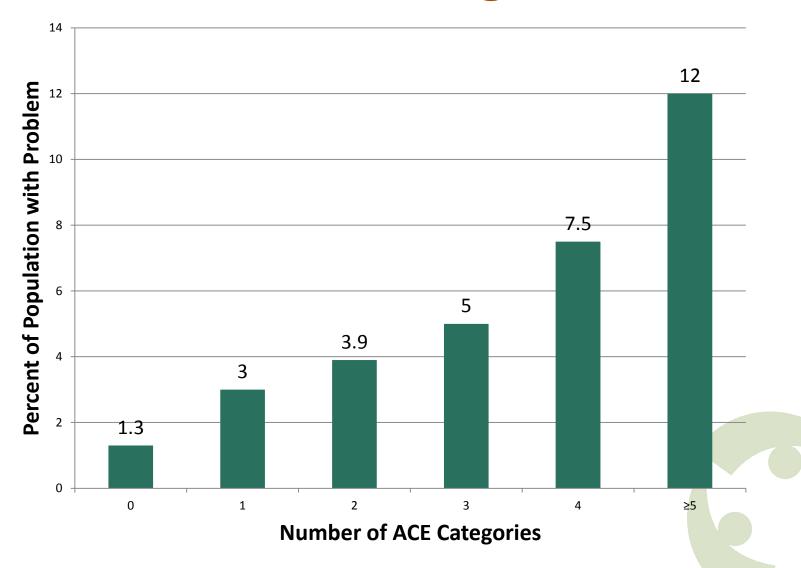
Adverse Childhood Experience & Risks for Workplace Injury/Illness



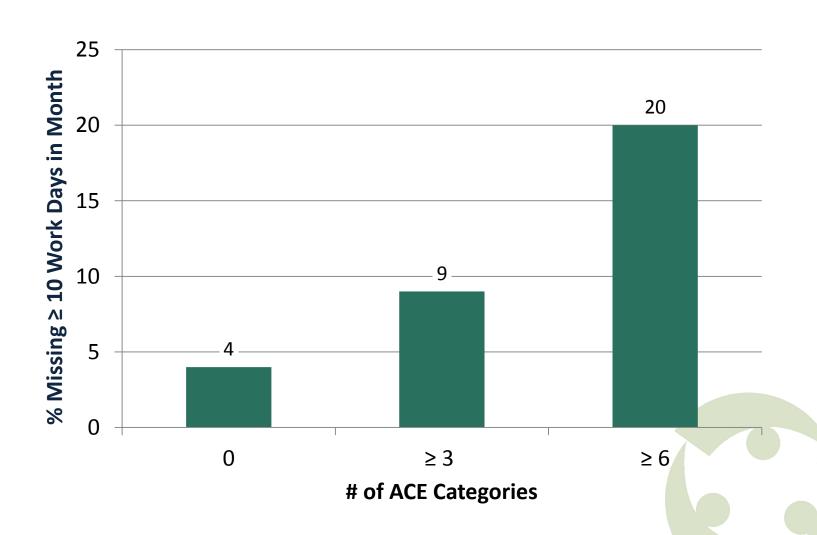
Insufficient Sleep ≥21 of 30 Days



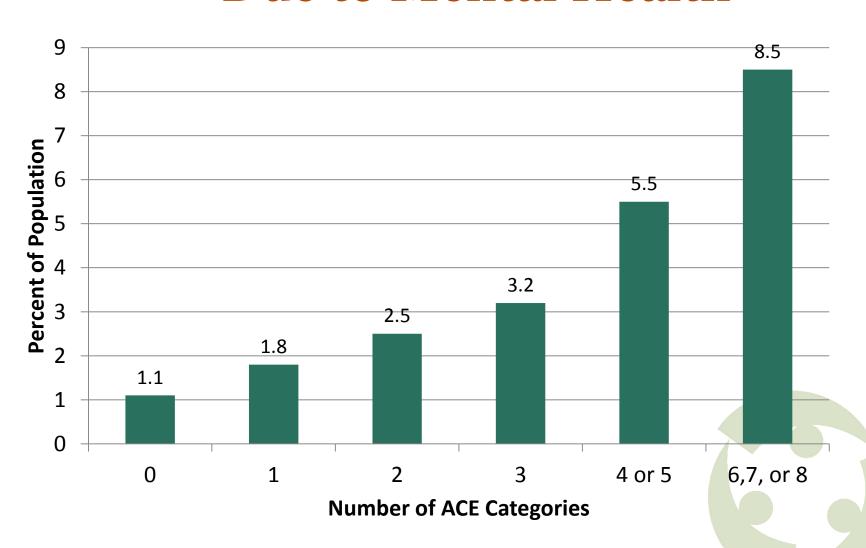
Ever Had a Drug Problem



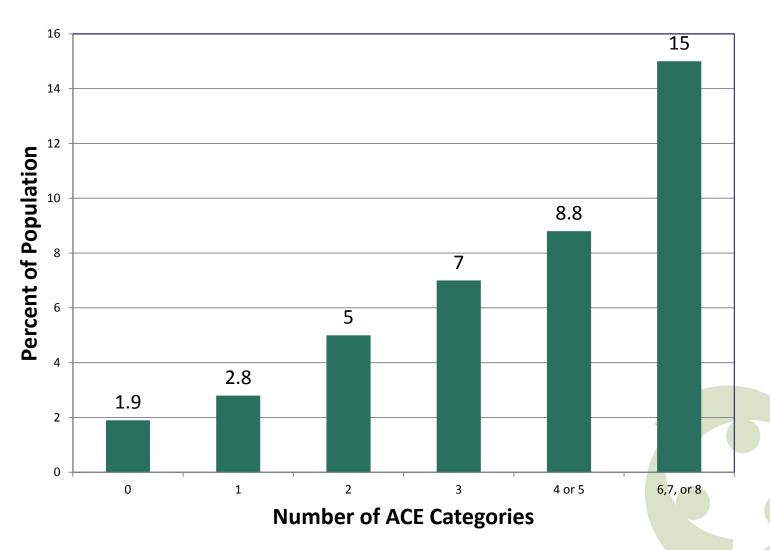
Missed Work



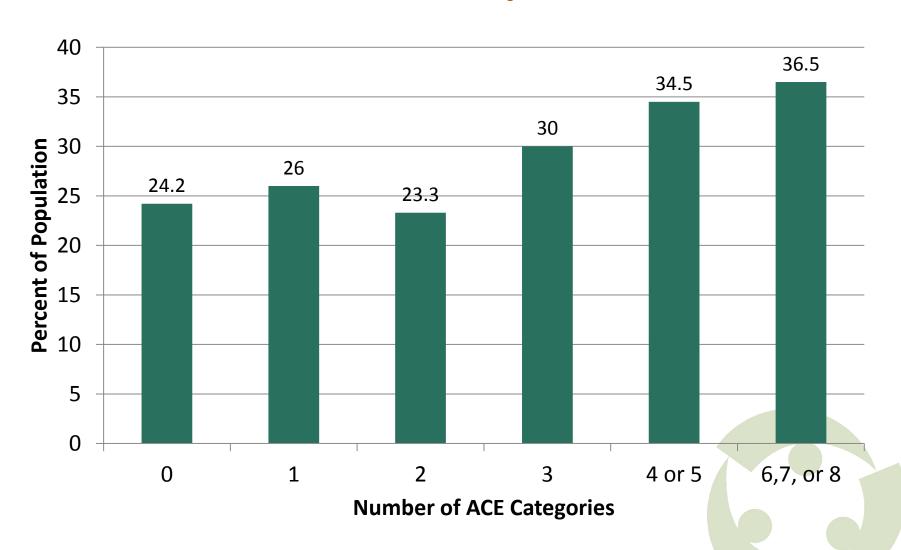
Missed Work ≥30 Days Due to Mental Health



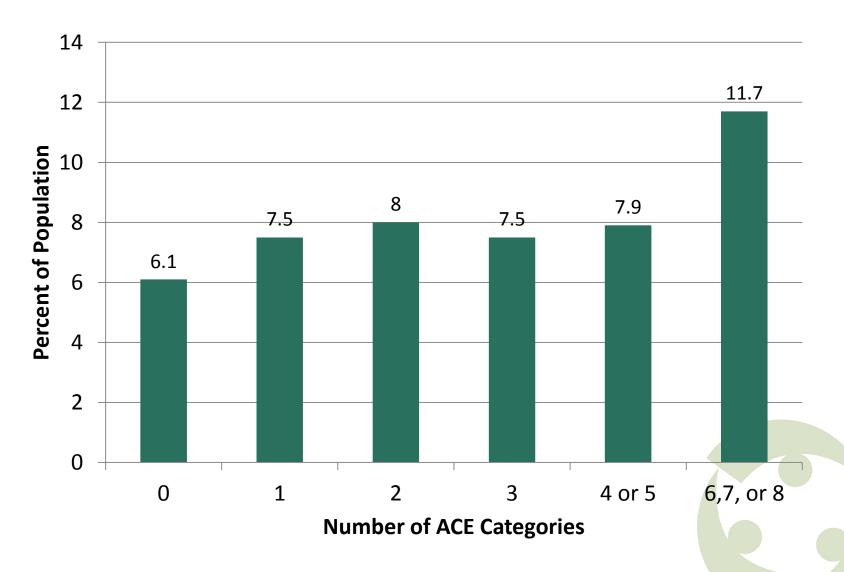
Anxiety



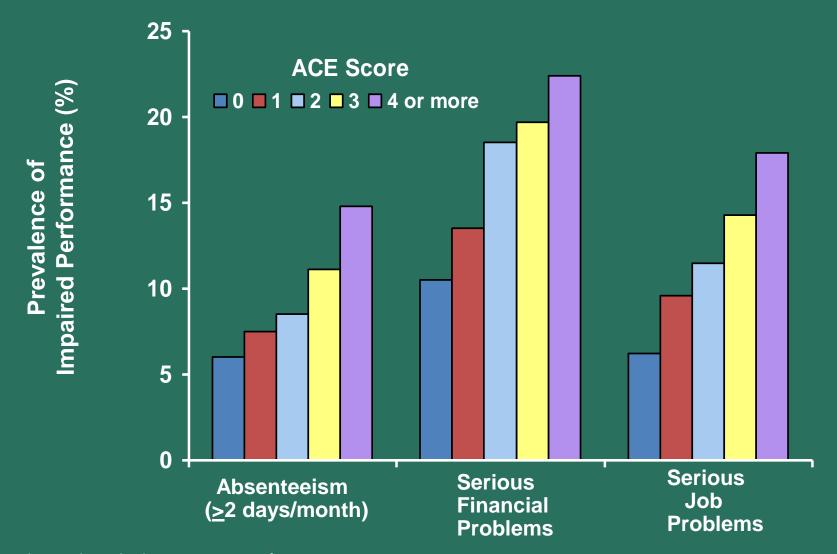
Obesity



Diabetes



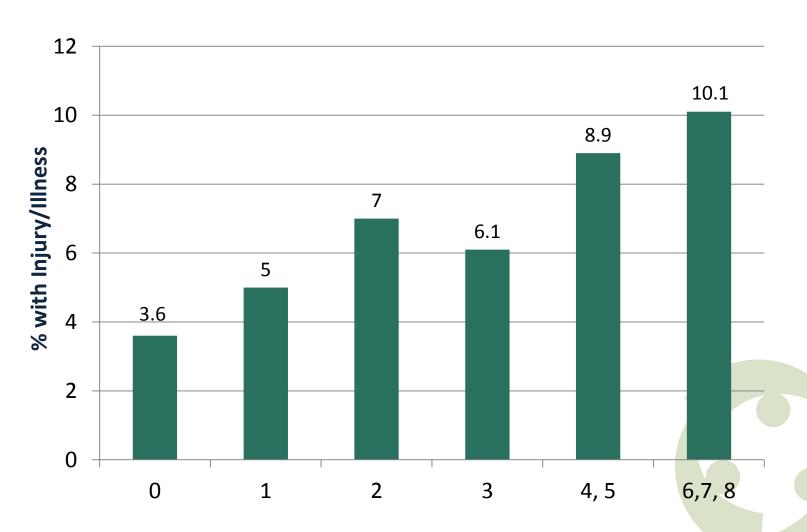
ACE Score and Indicators of Impaired Worker Performance



Adverse Childhood Experience & Worker Injury, Work-Related Illness



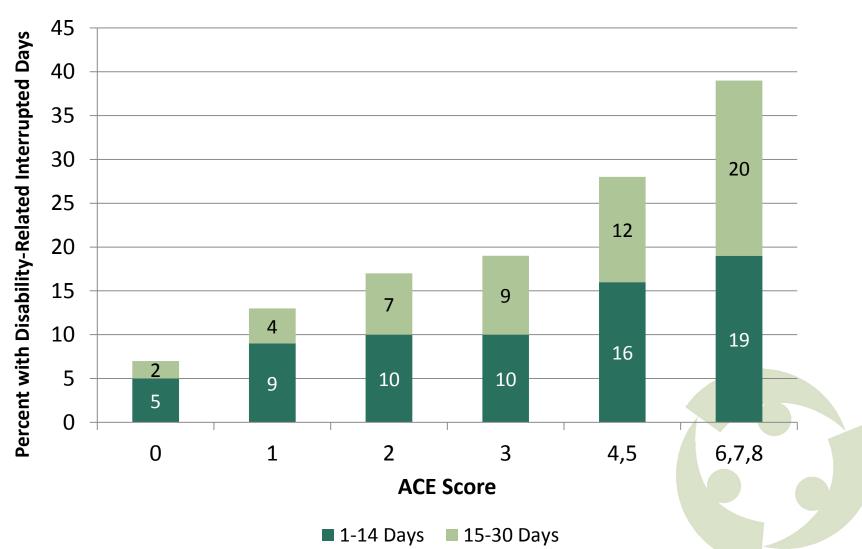
Work-Related Injury or Illness in Past Year



Adverse Childhood Experience & Barriers to Returning to Work

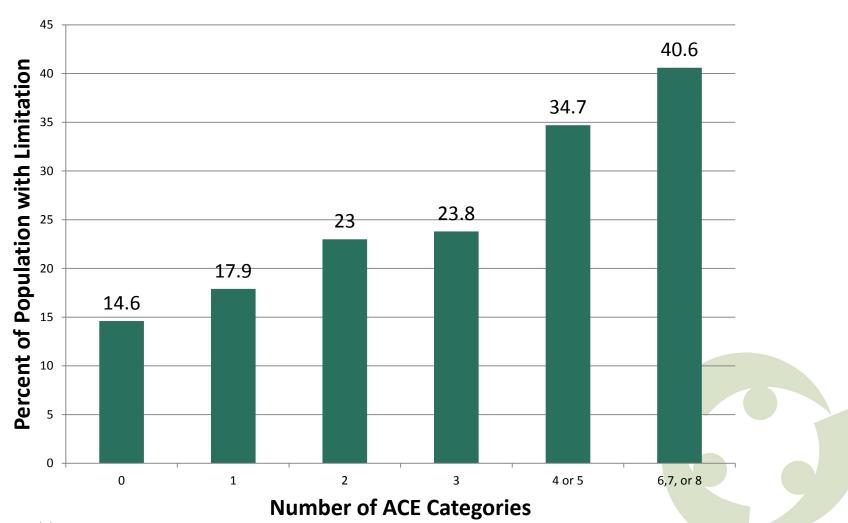


Disability-Related Days When Can't Do Usual Activities

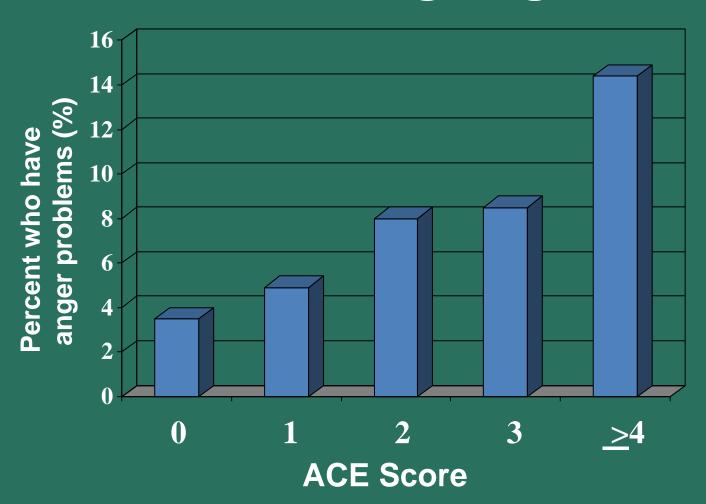


Activity Limitation

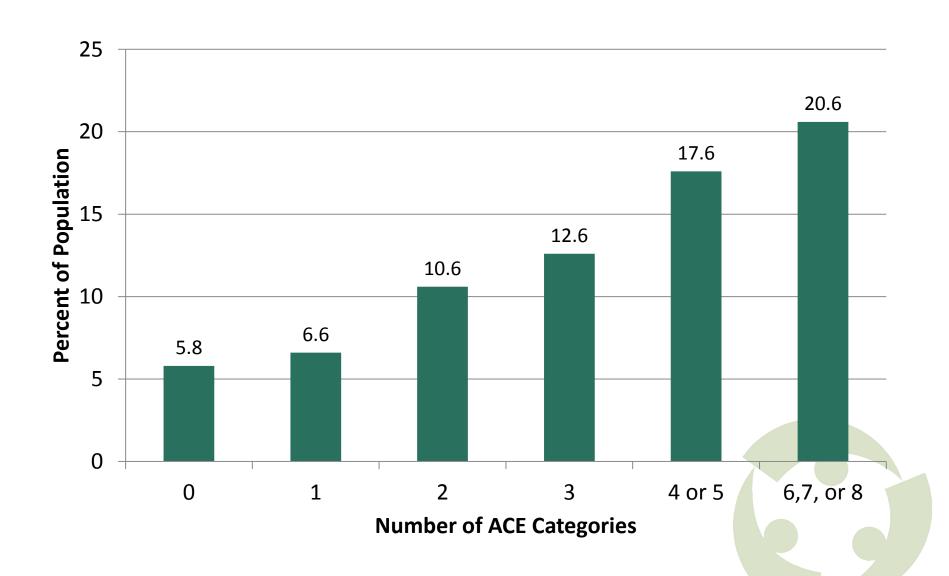
Due to Mental, Physical or Emotional Problems



The ACE Score and Difficulty Controlling Anger

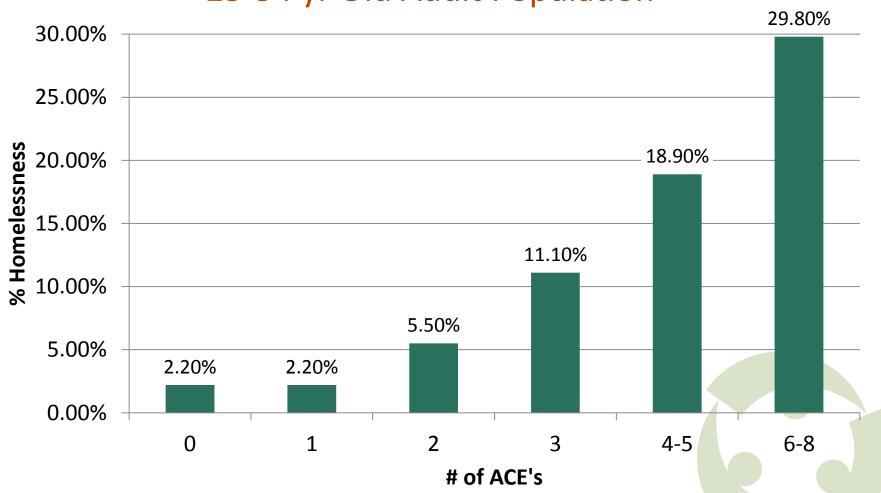


≥14 of 30 Unhealthy Mental Health Days

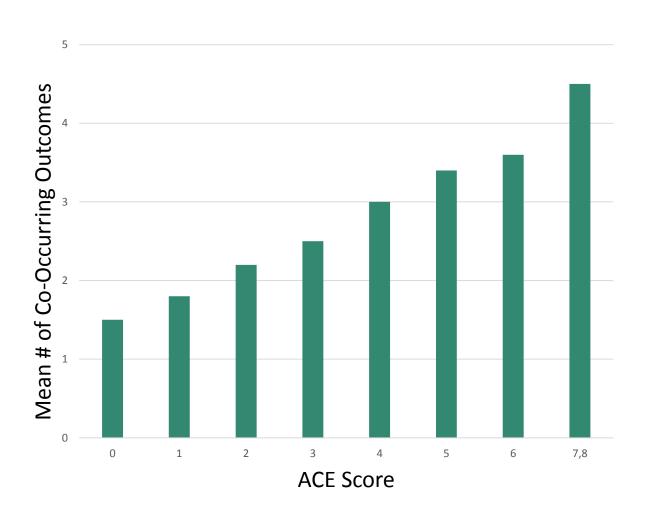


ACEs & History of Homelessness





ACEs and Co-Occurring Problems



Health & Social Problems

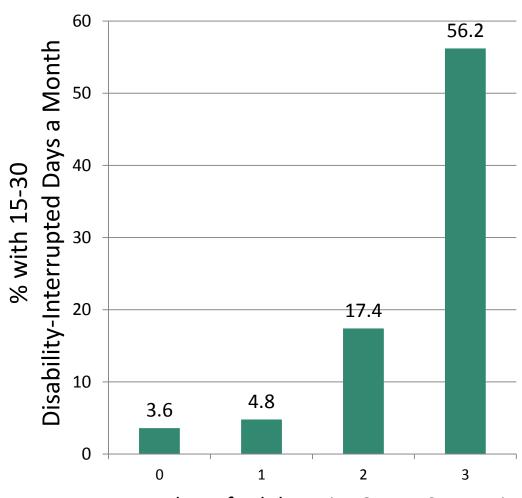
Panic Reactions Depression Anxiety Hallucinations Sleep Disturbances Severe Obesity Pain **Smoking** Alcoholism Illicit Drug Use IV Drug Use Early Intercourse **Promiscuity** Sexual Dissatisfaction Amnesia (Childhood) Problems with Anger Perpetration of Family Violence

Adult Adversity Compounds Effects

Adults with ≥3 ACEs Plus

Major Stress Categories:

- 1. Homelessness
- 2. Incarceration
- 3. Chronic illness
- 4. Separation/Divorce
- 5. Severe Depression
- 6. Work-related Injury/
 Illness



Number of Adult Major Stress Categories
Added to ACE Score of ≥3

Outcomes Attributable to ACEs

Risk

Smoking

Heavy drinking

Obesity

Risk of AIDS

Taking painkillers to get

high

Obesity

Prevalent Disease

Cardiovascular

Cancer

Asthma

Diabetes

Auto immune

COPD

Ischemic heart disease

Liver disease

Poor Mental Health

Frequent mental

distress

Sleep disturbances

Nervousness

MH problem requiring

medication

Emotional problems

restrict activities

Serious & persistent

mental illness

Intergenerational ACE Transmission

Mental Illness

Drugs or Alcohol Problem

Multiple divorces, separations

Victim of family violence

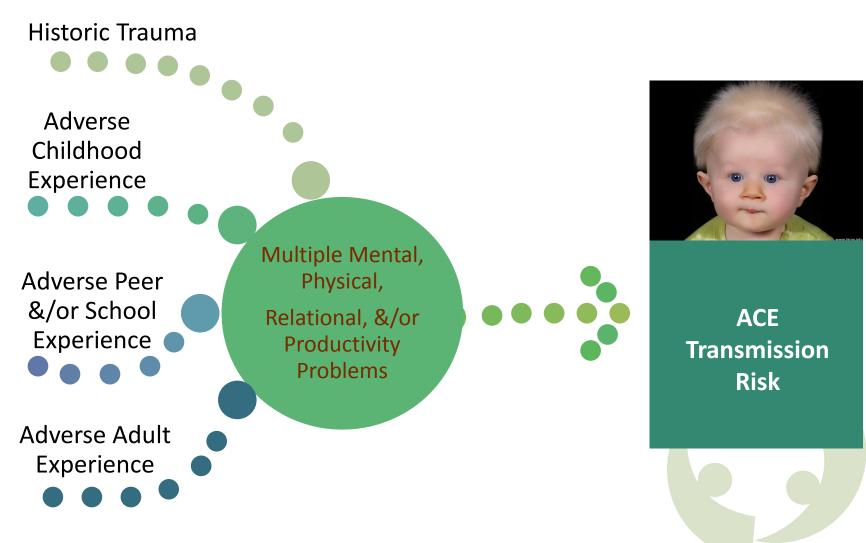
Adult incarceration

Health & Social Problems

Fair or poor health
Life dissatisfaction
Health-related limits to
quality of life
Disability that impedes
daily functioning
Don't complete
secondary education
Unemployment
History of adult
homelessness



Cascade of Experience-Societal Response Matters



The Help that Helps

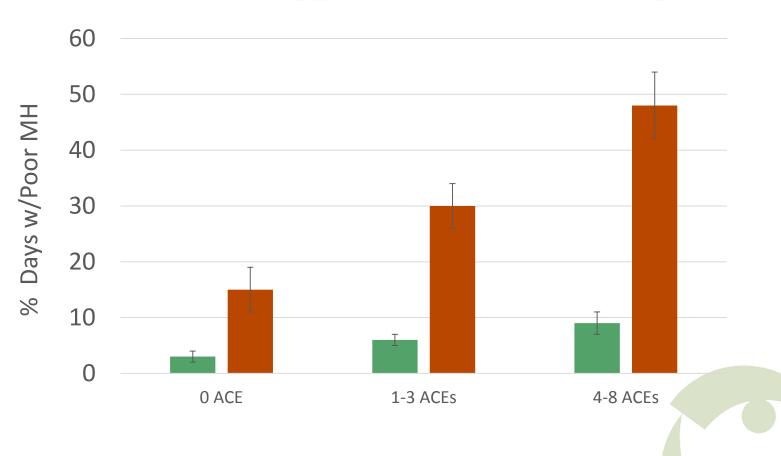
Three Resilience Themes Each Make a Difference

They are even more powerful when we Layer Up...

- 1. Feeling socially & emotionally supported, satisfied with life and hopeful
- 2. Experiencing hope plus two or more people who give concrete help when needed
- 3. Community reciprocity in watching out for children, intervening when they are in trouble, asking for helfriends and doing favors for one another (Community Reciprocity).

Poor Mental Health Days

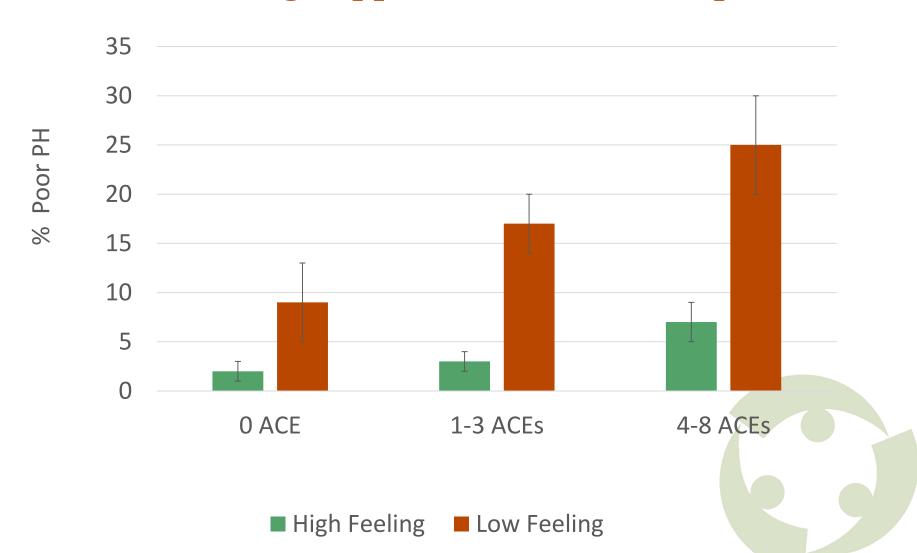
& Feeling Supported, Satisfied, Hopeful



■ High Feeling
■ Low Feeling

Poor Physical Health

& Feeling Supported, Satisfied, Hopeful



Functional Disability & Feeling Supported, Satisfied, Hopeful

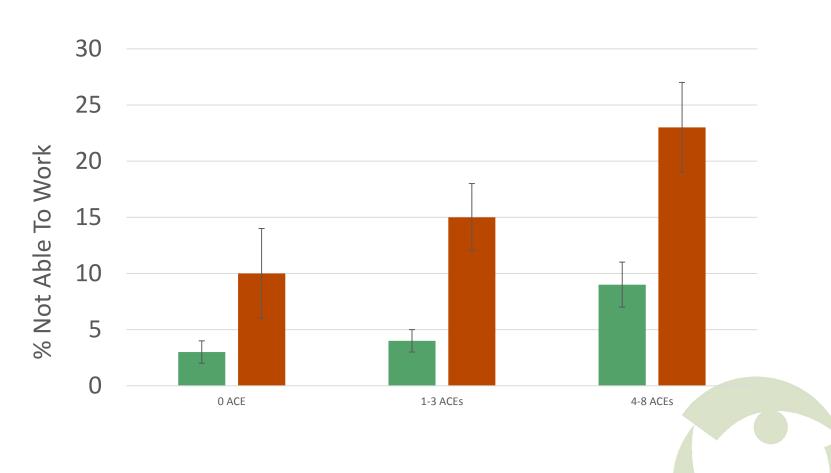
80 70 60 50 40 30 20 10 04-8 ACEs 0 ACE 1-3 ACEs

■ High Feeling ■ Low Feeling

% Disability

Report Not Being Able to Work

& Feeling Supported, Satisfied, Hopeful



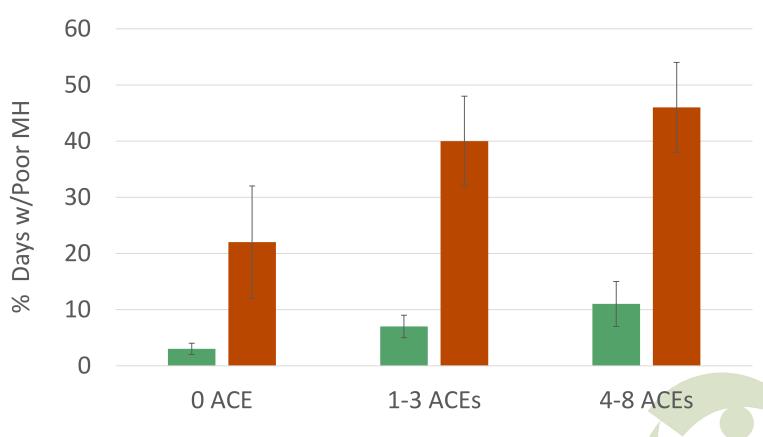
■ High Feeling ■ Low Feeling

Experiencing Hope + At Least Two People Who Help



Poor Mental Health Days

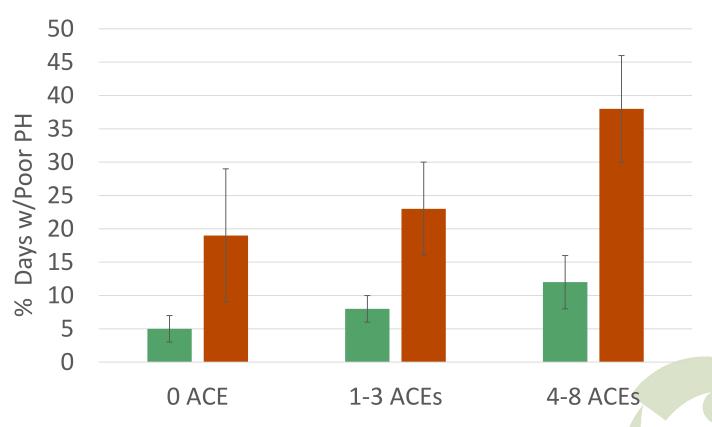
& Experiencing Help & Hope



■ High Feeling ■ Low Feeling

Poor Physical Health Days

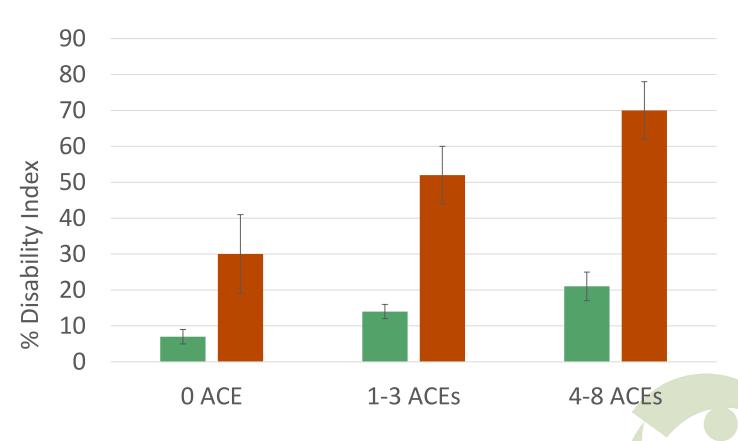
& Experiencing Help & Hope



■ High Feeling ■ Low Feeling

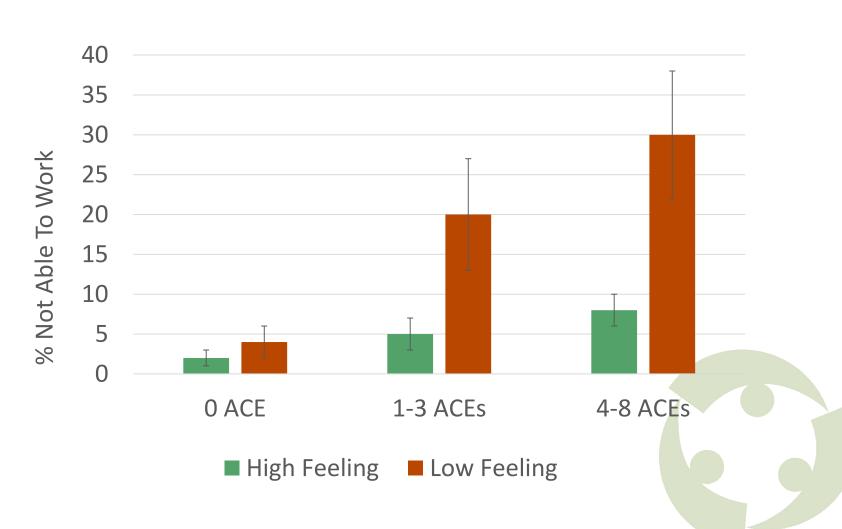
Functional Disability

& Experiencing Help & Hope



■ High Feeling ■ Low Feeling

Report Not Being Able to Work & Experiencing Help & Hope



Community Reciprocity

- a. Watching out for children,
- b. Intervening when they are in trouble,
- c. Reaching outside friendship circle to seek help for friends
- d. Doing favors for one another (Community Reciprocity).

A Rising Tide Lifts All Boats

Mental Illness

Obesity

Alcohol consumption

Physical activity meeting recommended levels

Layer Up

Strengths in All 3 Resilience Factors: Population-Level Impacts

- 1. Feeling socially & emotionally supported, satisfied with life and hopeful
- Experiencing hope plus two or more people who give concrete help when needed
- 3. Community reciprocity in watching out for children, intervening when they are in trouble, asking for help for friends and doing favors for one another (Communication).

Protocol: Ask, Listen, Educate, Affirm

"We now know that childhood experience has a big impact on health throughout our lives. These ACE questions are important for us to work together to improve your health and the health of your family."

When you know the ACE score, ask:

"How have these experiences affected you through your life?"

Support the next steps in the conversation, e.g.:

"People with high ACE scores often have to work harder in many aspects of their lives... how have you managed to do so well?" (Build from their answer to affirm their strengths and resilience.)

"I am sorry these things happened in your childhood. We didn't know back then; this science is new. Now that we know about the power of ACEs, how would you like to use that information to improve the health of your family?"

Develop Learning Collaborative; Systematically Test Innovation

ACE-Informed Communication with Customers

Decision Aids Informed by ACE Impacts to Executive Function

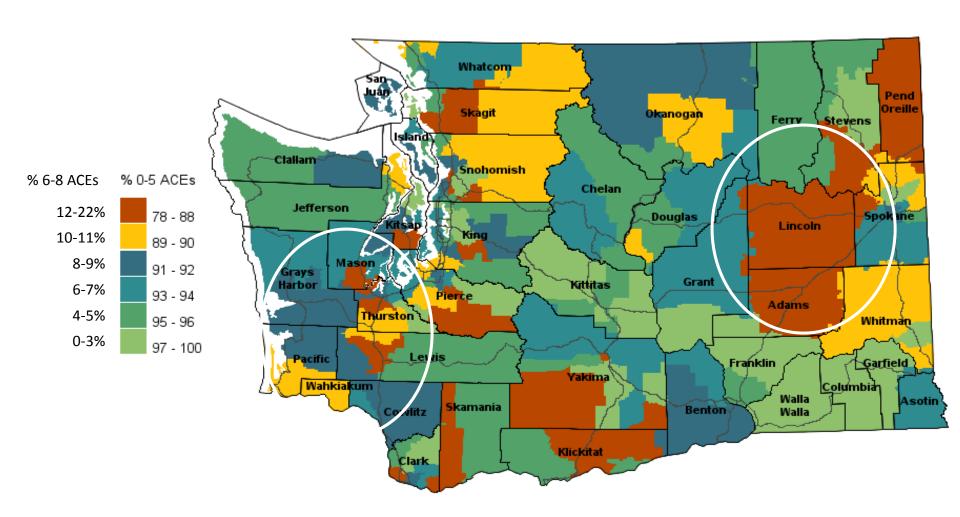
Screen for Depression among High ACE Patients, Use Combination to Improve Predictive Value of Health Testing

Consider Two Generations in Patient Interaction – Education & Support Should Include Reducing the Odds of High ACE Scores in the Next Generation

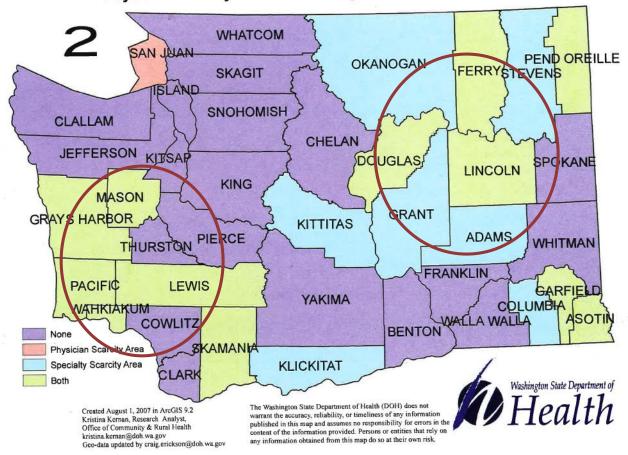
Differential Help & Resource Distribution



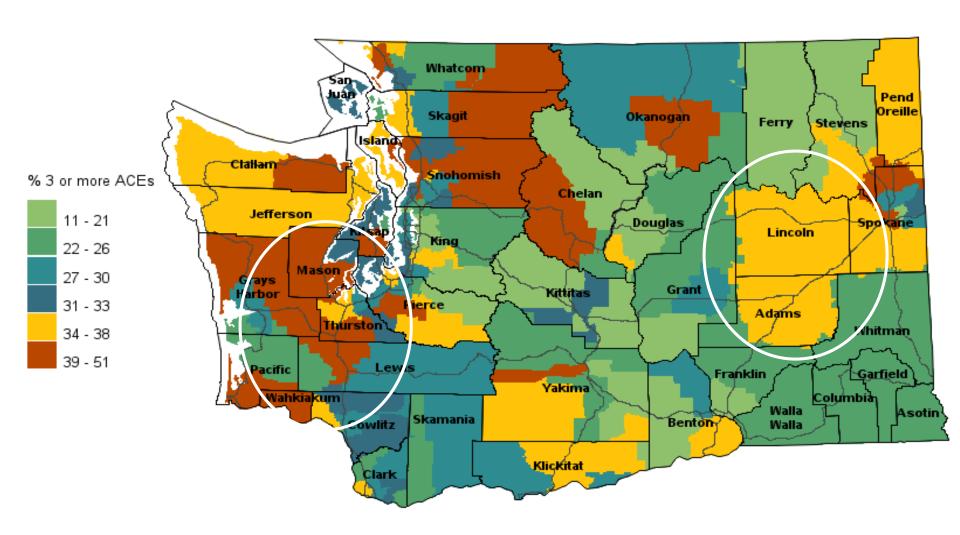
Population with ≥6 ACEs Ages 18-64



Physician Scarcity Areas in Washington State, August 2007



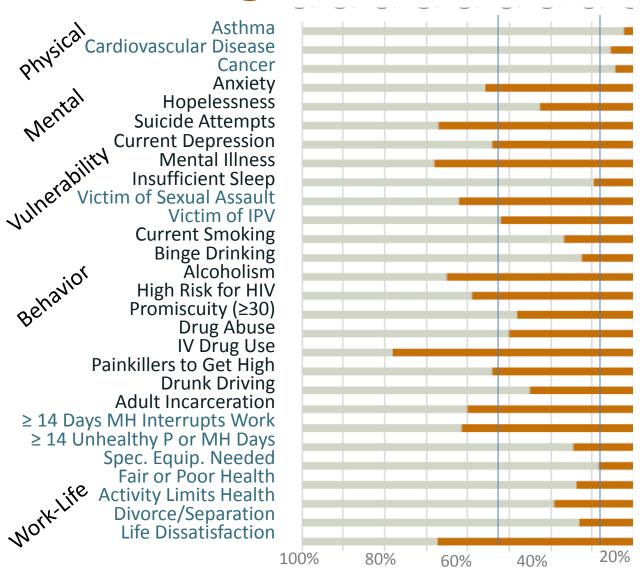
Population with ≥3 ACEs, Ages 18-64



New Era of Workforce Investment

- Effects Whole Person and Context of Family, Community
 & Society Understands Behavior as Language of Adaptation
- Considers Experience Over Time Prevents Escalation of Toxic Stress; Interrupts Accumulation and Transmission
- 3. Invests in Positive Adaptation through Healthful Relationships, Cultural Integrity & Hope-filled Engagement
- 4. Employs Dual Generation Strategies Intentional Supports are Sensitive to Age/Stage and History of Adversity
- 5. Shifts the Status-Quo Interplay of Stress & Neurogenesis throughout Peer & Universal Systems

The Magnitude of the Solution



Population Risk of Disease Attributable to ACEs.

ACE
Prevention
Reliably
Predicts
Concurrent
Rate
Reductions
for All ACEAttributable
Problems





Thank You

