Adverse Family Experiences
THE VERMONT STORY

CHAPTER 1

Created in partnership by Vermont Care Partners and the Department of Mental Health
What Are Adverse Childhood Experiences (ACEs) and Adverse Family Experiences (AFEs)?

**ACES**
- 10 types of abuse, neglect and other trauma that an adult experienced in childhood
- ACE questions are asked of an adult about his or her own childhood

**AFES**
- 9 types of neglect and trauma that a child may experience in his or her home or neighborhood
- AFE questions are asked of a parent / guardian about his or her child (except questions about physical or psychological abuse)
Why Do ACEs Matter?

1 type of experience = 1 ACE or AFE

The Adverse Childhood Experiences (ACE) studies show the link between early childhood experiences and physical, mental, and behavioral health outcomes in adulthood.
Life Expectancy Decreases as ACEs Increase

- 0 ACEs: 80 years
- 6+ ACEs: 60 years
Adverse Family Experiences Are Things Like:

- Not having enough to eat
- Not having stable housing
- Having parents who are divorced or separated
- Having a parent who died or went to jail
- Seeing or hearing physical violence between adults in the home
- Being a victim of neighborhood violence
- Living with an adult who was mentally ill or suicidal
- Living with an adult who has alcohol or drug problems

Shifting our focus to Adverse Family Experiences (AFEs) of children gives us the opportunity to intervene early, *before* health outcomes play out.
How Common Are AFEs Among Vermont Children?

As few as 3 AFEs can affect how well children do in school, how well they get along with others, and their health.
1 in 8 children in Vermont have experienced 3 or more types of adverse family experiences.

How many children is this? It is about 800 classrooms of 20 children!
Most Common AFEs in Vermont

- Living with someone who is very depressed, mentally ill, or suicidal: 13,458 (11%)
- Living with someone who has a drug or alcohol problem: 17,973 (15%)
- Not having enough food to eat or stable housing: 30,710 (25%)
- Divorce / separated parents: 32,252 (26%)

These 4 AFEs also are more common in Vermont than in the nation.
Asthma is a common health condition, but in Vermont, you are more likely to know a child with an Adverse Family Experience.

- 1 out of 4 children live with divorced or separated parents
- 1 out of 4 children live in a home with income hardship
- 1 out of 7 children live with someone with substance use problems
- 1 out of 9 children live with someone who is mentally ill, suicidal, or severely depressed

1 out of 12 children in Vermont have Asthma, a leading chronic health condition.
Vermont Data Shows:

- That moving may be a stressful experience for children and may be related to negative outcomes similar to AFEs
- In Vermont, 14% (17,535) of children have moved 4 or more times since birth
- 1 in 3 of these 17,535 children had 3 or more AFEs
Vermont Children With 3+ AFEs Compared to Children Without AFEs:

- Current Depression
- Current Anxiety
- Current ADHD
- Current Conduct Problems

Number of VT Children: 0 to 4000

- 3+ AFEs
- 0 AFEs
Why Should We Care?

Carrying a burden of adverse family experiences:

- Increases risky behaviors by teens
- Impacts school success
- Impacts long-term health outcomes
- Contributes to costs in health care, jails, special education and child welfare, just to name a few . . .
Why Should We Care?: Resilience & AFEs

Why Should We Care?: Resilience & AFEs

- Increases the odds that a child will not:
  - Show affection
  - Be curious
  - Smile or laugh a lot
  - Bounce back quickly when things don’t go his or her way
- as easily as their peers who have fewer AFEs

6 mos. – 5 y.o.

3 or more AFEs
Why Should We Care?: Resilience & AFEs

6-17 y.o.

3 or more AFEs

Increases the odds that a child will not be able to stay calm or in control when faced with a challenge as well as their peers who have fewer AFEs.
Why Should We Care?: School Engagement & AFEs

6-17 y.o.

3 or more AFEs

Increases the odds that a child will not engage in school as well as their peers who have fewer AFEs
National Economic Lifetime Impact of Adverse Childhood Experiences

- $124B Lifetime costs due to child maltreatment
- $83B productivity loss
- $4.6B special education
- $25B health care costs
- $4.4B child welfare
- $3.6B criminal justice

ACE National Data
What Can We Do?

Supports for Parents

Holistic Approach

Food

Housing

Jobs

Health Promotion

Treatment

Earlier supports

Safe community
References

- Adverse Childhood Experiences Study and Data
  The ACE Study is ongoing collaborative research between the Centers for Disease Control and Prevention in Atlanta, GA, and Kaiser Permanente in San Diego, CA. The Co-principal Investigators of The Study were Robert F. Anda, MD, MS, with the CDC; and Vincent J. Felitti, MD, with Kaiser Permanente.

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  Adverse Family Experiences Survey- National Survey of Children’s Health 2011-2012

- State of Iowa’s ACE Connection Network

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Look for Chapter 2 Coming Soon -

What Can We Do About the Effects of Adverse Family Experiences?