

# ACEs:

Adverse childhood experiences (ACEs) are traumatic events that can dramatically upset a child's sense of safety and well-being.

# BEYOND ACEs:

## Building Hope & Resiliency in Iowa



EXECUTIVE SUMMARY  
OF IOWA ADVERSE  
CHILDHOOD  
EXPERIENCES DATA,  
2012-2014

## 8 types of studied ACEs in Iowa

### ABUSE

- 1 Physical
- 2 Emotional
- 3 Sexual

### HOUSEHOLD DYSFUNCTION

- 4 Substance abuse in home
- 5 Family member with mental illness
- 6 Incarcerated family member
- 7 Separation/Divorce
- 8 Domestic violence

Although the Iowa study focuses on eight categories, trauma can occur at any age from many kinds of events including economic hardship, crime in the community, and the loss of a loved one. What is experienced as trauma is personal and influenced by our past experiences, current relationships and the community in which we live.

## Adverse Childhood Experiences and Iowa's opportunity to respond

Early experiences shape the quality of our adult lives. The Adverse Childhood Experiences (ACE) Study revealed how strongly negative experiences in childhood can derail a child's development and lead to a host of health and social challenges throughout a lifetime. This original study, conducted in California in the mid-1990s, looked at a predominantly white, middle-class, educated population.

From 2012-2014, Iowa stakeholders joined other states in studying the ACEs data of its population. Our analysis shows that **56 percent of Iowa adults have experienced at least one of eight types of child abuse and household dysfunction.** 14.2 percent have experienced four or more.

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As the number of these experiences increases, so does the likelihood of having a wide range

of poor outcomes. Adults with a greater number of ACEs have an increased likelihood of adopting risky behaviors such as smoking, alcoholism and drug use. They also have an increased risk of having health problems including diabetes, heart disease, depression, sexually transmitted diseases and early death. Iowa's findings are in-line with the original study.

The ACE Study gives us a new way to look at the health and social issues we are working to address in our communities – **and it is inspiring a movement to respond.** Emerging research shows that building caring connections promotes positive experiences for children from the start and helps those with a history of trauma heal. Individuals, organizations and communities are implementing trauma-informed strategies that are changing the outcomes we see in the ACEs data.

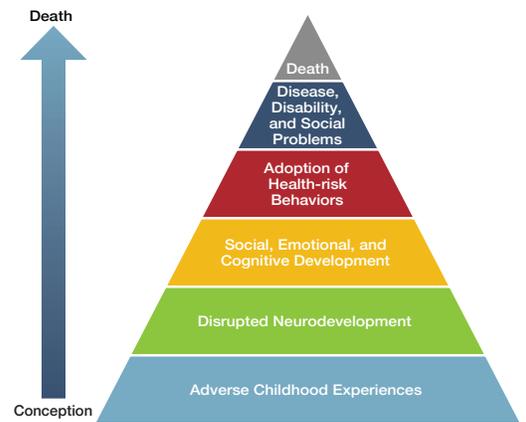
This report summarizes three years of ACEs data gathered through Iowa's Behavioral Risk Factor Surveillance System and shares emerging data tied to this study. We hope these findings inspire individuals, organizations and communities to take action. **Through hope and resiliency we can improve Iowans' health and well-being and create a brighter future for our communities.**

# ACEs among Iowa adults today

## ► Why are ACEs so **damaging**?

Learning to cope with stress is an important part of child development. If we feel threatened, our bodies help us respond by increasing stress hormones, which raise our heart rate, blood pressure and muscle tone. When a young child experiences stress within an environment of supportive adult relationships, the effects of stress are buffered and brought back down to baseline easily. This helps a child

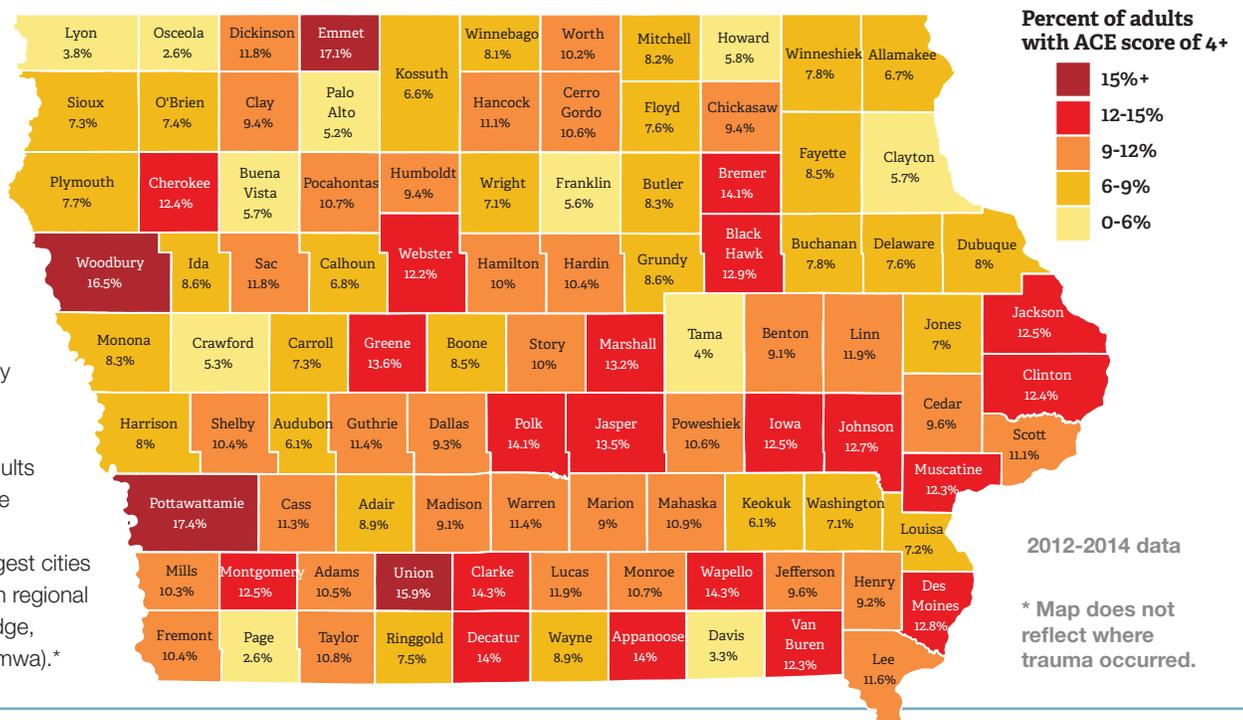
develop a healthy response to stress. When a child experiences stress that is powerful, frequent, prolonged and/or unpredictable without adequate adult support, that child's stress response system remains on at all times. This high level of stress can disrupt the development of the brain and other organs, and increase the risk for poor health, learning and social outcomes.



## Where do Iowa adults with ACEs live now?

All Iowa counties have adults who report experiencing significant adversity in childhood. On average, however, fewer adults with a high percentage of ACEs live in suburban counties, places with high incomes and relatively few social strains.

A greater share of adults reporting four or more ACEs live in counties containing Iowa's largest cities and non-metropolitan regional centers (like Fort Dodge, Burlington, and Ottumwa).\*

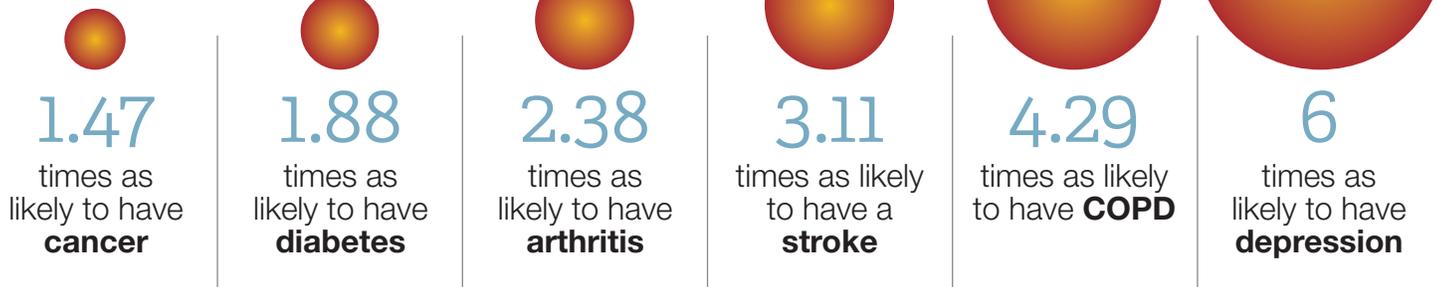


## Prevalence of **additional ACEs** among those who experience each category of ACE

If an individual experiences one type of ACE, they are more likely to experience one or more additional ACEs. For example, a child growing up in a home with an incarcerated family member is 85 percent likely to experience at least one additional ACE and 74 percent likely to experience at least two additional ACEs. These findings highlight that childhood trauma is not often an isolated incident. Many children experience several types of events that cause severe stress.

	% with 1+ additional ACE	% with 2+ additional ACEs
<b>CHILD ABUSE</b>		
Emotional abuse	69	48
Physical abuse	84	69
Sexual abuse	73	56
<b>HOUSEHOLD DYSFUNCTION</b>		
Substance abuse in home	73	54
Incarcerated family member	85	74
Family member with mental illness	76	58
Domestic violence	86	73
Separation/Divorce	71	51

## Those experiencing **four or more** ACEs compared to those with **zero** are:



Research shows that 4 or more ACEs is a critical threshold for many increased health and mental health risks.

## Hope for a better future

“What is it about my story you might want to hear?” says Yolanda to the community members who have gathered to learn about the impact of childhood trauma. “Do you need to hear the desperation of a kid ‘raised’ in unimaginable conditions? Do you need to hear about how horrific things got for a mother of four children that would allow her to walk into DHS and say, ‘I can’t do it anymore?’ Or what you’re needing to hear is how the girl in front of you begged and pleaded for any relative including dad, grandmas, ex-step dad, even friends’ parents to please come get me out of the children’s shelter because 9-10 months is just too long?”

By age 12, Yolanda’s life had hit rock bottom. Her ACE score – the total categories of abuse, neglect and household dysfunction she’d experienced as a child – was a “perfect 10” based on the number of categories in the original study. The family dysfunction stemmed generations with both her mother and father having extremely traumatic experiences themselves. Yolanda began drinking and smoking marijuana at a young age. At age 14, she met a boy who claimed to love her and soon became pregnant.

Despite these odds, Yolanda was determined to not let her childhood define her.

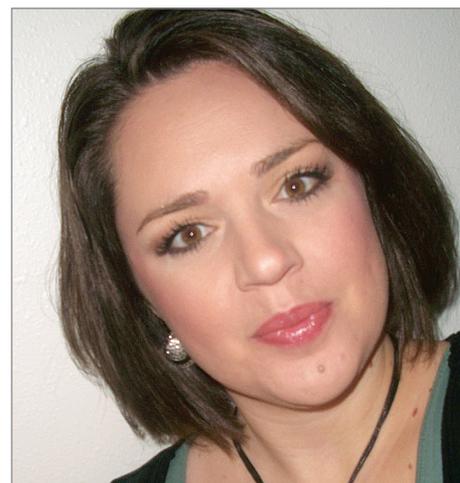
“All I needed was just a tiny bit of hope that things could be different,” she said, “and to

be treated like and talked to as if my future could be whatever I decided it would be. I just needed someone standing at the fork in the road nodding their head in the right direction. I just needed little nudges.”

These nudges began when her 5th grade teacher had her tested for the talented and gifted program. “This was the first time it occurred to me that maybe I am more than I thought,” Yolanda said. Her therapist helped her see that repeat nightmares were the result of her environment, and her 7th grade writing teacher encouraged Yolanda to pour her emotions into her journal. While in foster care, her caseworker listened, advocated for Yolanda to keep her son, and even helped her get the diapers, bedding and clothing she needed when she suddenly decided to keep her son on the day he was born.

“All it takes is the heart of someone in your exact position, whatever you may be, to change the lives of one individual,” she tells the community group. “It takes you remembering that no matter their ACE score and no matter what is seemingly going on in their life at the moment, it has no bearing on their potential. I want you to know that it wasn’t one person in my life or one event or one program that saved me. It was little nudges all along the way.”

Recently, Yolanda gave up a successful banking career to finish her bachelor’s degree



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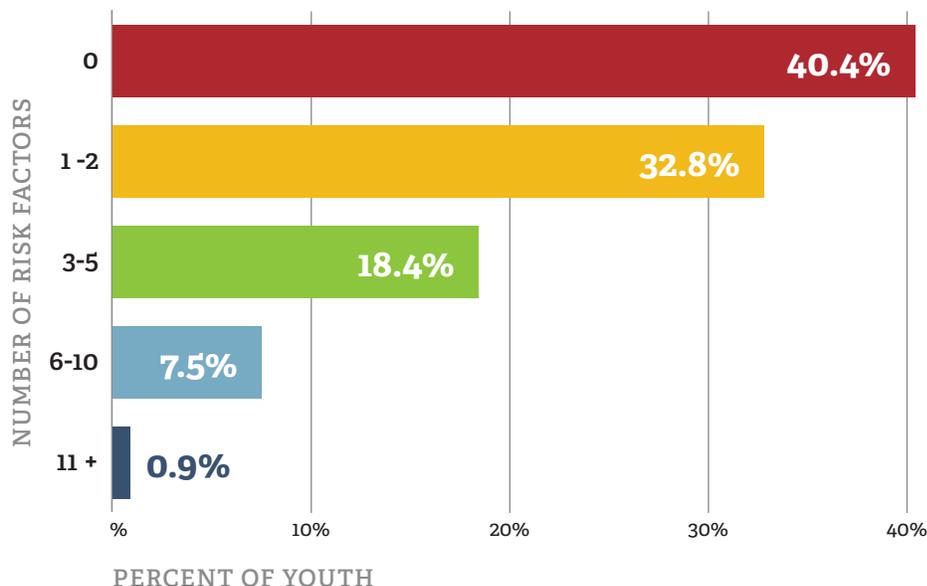
in social work and to serve as an AmeriCorps member with Families Making Connections in northern Iowa, helping support children who face similar situations as her own. Her son has found his passion as well, and now Yolanda enjoys receiving pictures of the dishes her 18-year-old cooks up in culinary school.

“This teenage mom with an ACE score of a perfect 10 raised a child to have an ACE score of 3. Only a 3,” she said. “Ideally, we want a zero. But I’ll stand by that 3 proudly and will do everything I can so that his children have an even lower score.”

# Risk factors in Iowa youth

Although Iowa ACEs data only gives a picture of adult health and well-being today, we can gain an understanding of the next generation's health and behavior patterns by looking at youth. The Iowa Youth Survey, conducted by the Iowa Department of Public Health, asks 6th, 8th and 11th graders their attitudes and experiences with substance abuse and violence, and perceptions of peers, family and community. The largest group of Iowa youth reported no risks among 16 questions related to resilience, risky behaviors and school, families and community connections. Nearly one in four students, however, had at least three risk factors and 8 percent had six-plus risk factors, indicating significant levels of stress.

These findings suggest that Iowa children are experiencing adversity at levels similar to those reported by adults in The ACE Study. **The outcomes we see in adults today won't change in the next generation unless we take greater steps to intervene earlier.**



Source: Iowa Youth Survey, Iowa Department of Public Health, 2013  
Data analyzed by Child and Family Policy Center

## Iowa's opportunity to

# RESPOND

Iowa's ACEs data highlights the significant impact trauma can have on individuals. But we also know, more than ever before, that these outcomes can be prevented. Washington state showed that through a comprehensive approach to educating communities and empowering local leaders to take action, the state could reduce rates of childhood trauma and health problems in the next generation. Since 2011, Iowa has taken a national lead in developing its own unique response to ACEs.

Change begins by building resiliency. When we respond with compassion to those who have experienced trauma and give families the tools they need to raise healthy children from the start, we develop systems that enable people to thrive, adapt and cope despite trauma. Here's how you can play a role:

► **LEARN:** Become educated about childhood trauma, its impact, and effective response strategies. Share your knowledge with others.

► **CONNECT:** Build caring connections with the children, families and adults you touch. Apply trauma-informed approaches to your personal and professional life.

► **LEAD:** Advocate for prevention and trauma-informed strategies when working on our state's most pressing issues.

For examples of ACE-response efforts in Iowa and tools to help you with your efforts, please visit [www.IowaAces360.org](http://www.IowaAces360.org).

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