



Minnesota Communities Caring for Children

Home of Prevent Child Abuse Minnesota and
the Minnesota Circle of Parents

What are Adverse Childhood Experiences (ACEs)?

Adverse Childhood Experiences (ACEs) are significant childhood traumas which can cause toxic stress and result in physical changes in brain development. These brain adaptations may affect learning ability and social skills, and can also result in long-term health problems.

ACEs cause many children to revert to a physical survival mode which increases heart rate, blood pressure, breathing and muscle tension in an attempt at self-protection. A survival response runs on fight-or-flight hormones. These stress hormones create a shift in the body, shutting down digestive function, weakening the immune system and making the body more vulnerable to infection. Over time, these stress hormones also drain the adrenals, which act like little batteries that sit on top of the kidneys and regulate stress.

The ACE study looked at the following categories of childhood trauma:

- Emotional Abuse
- Physical Abuse
- Sexual Abuse
- Emotional Neglect
- Physical Neglect
- Mother treated violently
- Household substance abuse
- Household mental illness
- Parental separation or divorce
- Incarcerated household member



ACEs in Minnesota

A 2011 survey of Minnesotans conducted by the Minnesota Department of Health found that over half of Minnesotans have experienced at least one ACE. Of those, 60% had two or more ACEs, and 15% had 5 or more ACEs.



The ACE Study found that exposure to ACEs can increase the risk of:

- Alcoholism and alcohol abuse
- Chronic obstructive pulmonary disease
- Depression
- Fetal death
- Health-related quality of life
- Illicit drug use
- Ischemic heart disease
- Liver disease
- Risk for intimate partner violence
- Multiple sexual partners
- Sexually transmitted diseases (STDs)
- Smoking
- Suicide attempts
- Unintended pregnancies
- Early initiation of smoking
- Early initiation of sexual activity
- Adolescent pregnancy

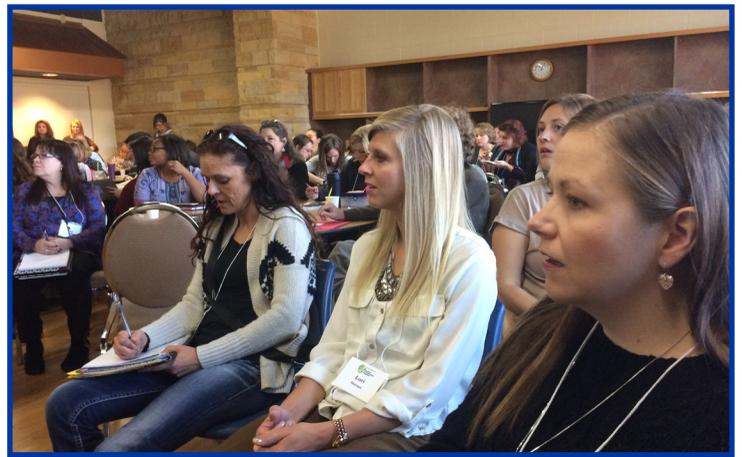
Moving Beyond ACEs

Now that we understand the impact of trauma, it's important that we shift to the use of trauma-informed approaches in practice and in policy. Adults that have experienced ACEs need to heal in order to prevent the intergenerational transmission of ACEs. A big part of the healing process is building resilience. Resilience is the process of adapting well in the face of adversity, trauma, tragedy, threats or significant sources of stress. **Resilience can be learned and developed.** Some factors that contribute to resilience include; having caring and supportive relationships, the capacity to manage strong feelings and impulses, and skill in communicating and problem solving.

One framework for preventing trauma and building resilience is *Protective Factors*. The Center for the Study of Social Policy (CSSP) discovered these factors as part of a two-year study that reviewed existing research and noted conditions that lower instances of child abuse and neglect. At the foundation of this model is reinforcing and building strengths in families, including individual and family resilience.

MCCC offers trainings that raise awareness about ACEs and motivate individuals and communities to act in ways that prevent trauma and build resilience. Trainings include:

- Understanding ACEs: Building Self-Healing Communities
- Protective Factors
- Emotional Intelligence
- Community Organizing & Family Issues



Protective Factors

Parental resilience: Increasing parents' ability to problem solve and build relationships.

Nurturing and attachment: Listening and responding to a child in a supportive way. Discovering and paying attention to the child's physical and emotional needs.

Social connections: Having family, friends or neighbors who are supportive and willing to help and listen when needed.

Concrete supports: Having their child's basic needs met, such as housing, food, clothing and health care.

Knowledge of parenting and child development: Increasing parents' knowledge of their child's development and appropriate expectations for their child's behavior.

Social and emotional competence of children: Helping their child to interact positively with others, manage emotions and communicate feelings.

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