

ADVERSE CHILDHOOD EXPERIENCES AMONG YOUTH IN MICHIGAN

WHAT ARE ADVERSE CHILDHOOD EXPERIENCES?



Adverse Childhood Experiences (ACEs) are potentially traumatic experiences that occur before the age of 18.

ACEs can include violence, abuse, and growing up in a family with mental health or substance use disorders.

ACEs ARE COMMON AMONG YOUTH IN MICHIGAN

The Michigan Youth Risk Behavior Survey (YRBS) asks high school youth about the number of ACEs they have experienced in their lifetime. According to **2019** YRBS data, 63%, or more than

6 out of **10** 

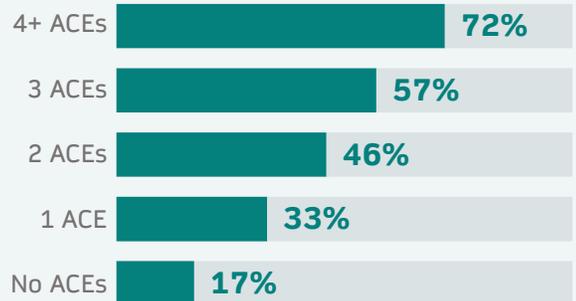
youth (about 260,000*) reported having one or more ACEs.

WHY DO ACEs MATTER?

ACEs impact a child's development, their relationships with others, and increase their risk of engaging in health-harming behaviors and experiencing poorer mental and physical health outcomes in adulthood. Children who repeatedly and chronically experience adversity can suffer from toxic stress. Toxic stress from ACEs can change brain development and affect how the body responds to stress. Over time this can limit a person's ability to process information, make decisions, interact with others, and regulate emotions throughout their life. **For example, data shows that as ACE scores increase, so does the rate of feeling sad or hopeless among Michigan high school youth.**

SAD/HOPELESS FEELINGS

% with sad/hopeless feelings for 2+ weeks in past month



THE HIGHER THE ACE SCORE, THE GREATER THE HEALTH RISK

Youth With Four or More ACEs VS. Youth With Fewer Than Four ACEs

Digging deeper into the relationship between ACE score and risky health behaviors, **youth with four or more ACEs are at greater risk than youth with fewer than four ACEs for taking part in these risky health behaviors, which may lead to negative health outcomes in adulthood.** Indicators displaying this relationship are shared below and continue onto the next page.

AMONG ALL MICHIGAN YOUTH...



MENTAL HEALTH

CONSIDERED SUICIDE

% who seriously considered suicide in the past year



ATTEMPTED SUICIDE

% who attempted suicide in the past year



*2,838 out of 4,480 respondents to the 2019 Michigan YRBS reported one or more ACE. These numbers were then statistically weighted to be representative of 415,574 Michigan high school-aged youth.



SCHOOL EXPERIENCES

BULLIED IN-SCHOOL OR ONLINE

% bullied on school property or electronically in the past year

4 or more ACEs 52%

Fewer than 4 ACEs 23%

FAILING GRADES

% with mostly Ds or Fs on report card in the past year

4 or more ACEs 11%

Fewer than 4 ACEs 5%



SEXUAL HEALTH

NO CONDOM USE

% who did not use a condom at last intercourse

4 or more ACEs 63%

Fewer than 4 ACEs 39%

EXPERIENCED SEXUAL VIOLENCE

% forced to do sexual things in the past year

4 or more ACEs 25%

Fewer than 4 ACEs 10%



ALCOHOL & MARIJUANA USE

CURRENT ALCOHOL USE

% that drank alcohol in the past month

4 or more ACEs 44%

Fewer than 4 ACEs 23%

CURRENT MARIJUANA USE

% that used marijuana in the past month

4 or more ACEs 44%

Fewer than 4 ACEs 18%



VAPING & TOBACCO USE

CURRENT VAPING

% that used an electronic vapor product in the past month

4 or more ACEs 43%

Fewer than 4 ACEs 17%

CURRENT CIGARETTE USE

% that smoked cigarettes in the past month

4 or more ACEs 15%

Fewer than 4 ACEs 3%

HOW CAN WE WORK TOGETHER TO ADDRESS ACEs IN MICHIGAN?

While ACEs can negatively impact the health and well-being of youth, the good news is that those negative impacts are preventable. Research shows there are protective factors – actions we can all take – that can protect against adverse outcomes. ACEs are not destiny! If we all work together, we can help youth be resilient and thrive.



Create positive childhood experiences.

Positive childhood experiences create a sense of safety and stability and promote long-term health and well-being. Youth do best when they are connected to caring and supportive adults, as well as community activities.



Reframe our thinking.

We must shift our questions from focusing on, “What’s wrong with you?” to asking, “What happened to you?” This shift offers opportunities for greater understanding of the whole person and their experiences – opening the door to resilience and healing in a proven, powerful way.



Foster supportive, thriving, and resilient communities.

People do best when they live in thriving families, schools, and communities. Creating and sustaining safe, stable, and nurturing relationships and environments for all youth can help prevent ACEs and buffer their negative impacts. What we do matters! Visit Michigan.gov/TraumaToxicStress for more information and resources.

References

Centers for Disease Control and Prevention. (April 3, 2020). “Adverse Childhood Experiences (ACEs).” <https://www.cdc.gov/violenceprevention/aces/>
Center on the Developing Child at Harvard University. (January 6, 2020). “A Guide to Toxic Stress.” <https://developingchild.harvard.edu/science/key-concepts/toxic-stress/>
Centers for Disease Control and Prevention. (October 27, 2020). “Youth Risk Behavior Survey Results and Data.” <http://www.cdc.gov/HealthyYouth/yrbs>

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