



ACE issue brief 3: domestic violence

Findings of the Adverse Childhood Experience (ACE) Study
Oklahoma KIDS COUNT Factbook, 2006-2007 Issue Brief 3 of 5

sponsored by:

INTEGRIS
Health

Oklahoma Institute For
CHILD
ADVOCACY

the ACE study

The Adverse Childhood Experience (ACE) Study is a large-scale, ongoing evaluation of the link between negative childhood experiences and the origins of risk behaviors that evolve into the leading causes of disease and disability in adulthood. The study is a collaborative effort between the Centers for Disease Control and Prevention and Kaiser Permanente's Department of Preventive Medicine.

The study conducted detailed biomedical and psychological evaluations of over 17,000 middle-aged, middle-class Kaiser patients. The study was designed to simultaneously assess childhood exposure to multiple types of abuse, neglect, parental substance abuse, domestic violence, and other types of serious household dysfunction. A scoring system was used to analyze the findings: a person exposed to none of the 10 factors had an ACE score of 0; a person exposed to any four factors had an ACE score of 4, and so on. The scores were then compared with the health status of these individuals.

explaining the connection

The ACE Study provides insight into how our experiences as children evolve into risky behaviors, which, in turn, evolve into disease and death. Child abuse and household trauma leave a child vulnerable, actually disrupting the normal development of the brain. The study suggests that children and adolescents adopt risky behaviors as a means of coping or covering their pain. The more trauma they experience, i.e. the higher

their ACE score, the greater the likelihood of adopting multiple risk behaviors, such as alcohol or drug abuse, smoking, overeating and promiscuity.

This series of issue briefs will explore the implications of the ACE Study in Oklahoma, and provide a basis for discussion among parents and other child advocates, health and social service professionals, policy makers and community leaders.

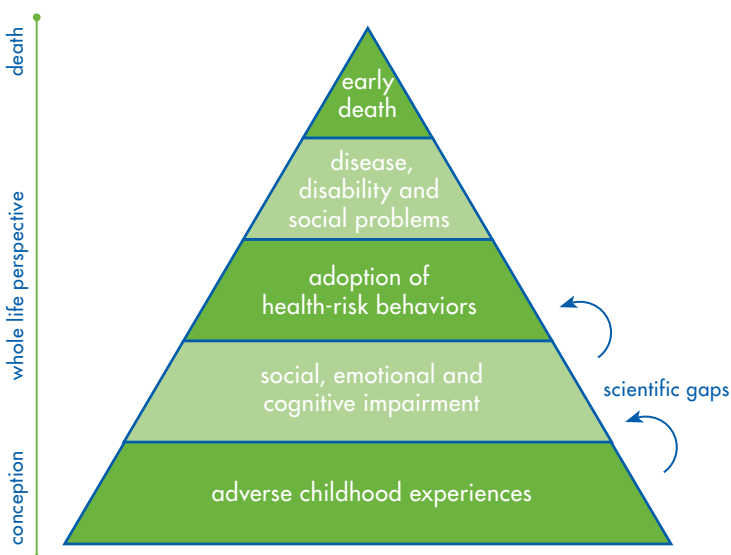
findings

The results were startling. Adverse childhood experiences are vastly more common than generally recognized. Almost three-quarters of the participants reported having experienced at least one ACE. More than one in five reported three or more, indicating that risk factors rarely occur in isolation. For example, many cases of child abuse also involve drug abuse, domestic violence and divorce. The study showed a powerful and compelling correlation between harmful experiences in childhood and adult health status decades later.

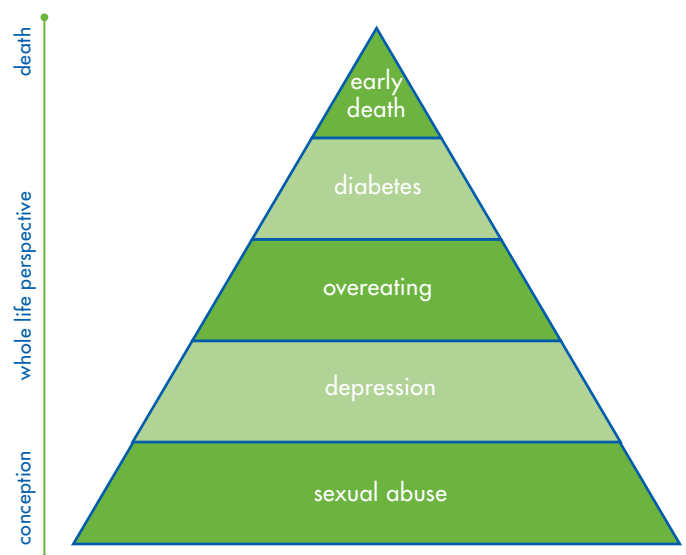
number of adverse childhood experiences (ACE score)	total
0	33%
1	26%
2	16%
3	10%
4 or more (up to 10)	12.5%

Compared to persons with an ACE score of 0, those with an ACE score of 4 or more were twice as likely to be smokers, 12 times more likely to have attempted suicide, 7 times more likely to be alcoholic, and 10 times more likely to have injected street drugs.

ACE Pyramid: Conceptual Framework



ACE Pyramid: Real Life Scenario



major findings of the ACE study

Many studies have examined the impact of a single type of maltreatment on children. Yet the ACE Study found that co-occurrence of multiple forms of childhood abuse and household dysfunction is common, and their effects are cumulative.

In Oklahoma, there is no data to track co-occurrence of abuse or dysfunction on individual children and families, i.e. whether a single child is victimized in multiple ways. Oklahoma KIDS COUNT has gathered county-by-county data to determine which counties report high incidents of adverse childhood experiences.

domestic violence: state level findings

In 2004 in Oklahoma, over 24,500 domestic violence cases were reported to Oklahoma law enforcement agencies, reflecting a 32% increase since 1993. Experts indicate that only 50% of intimate partner violence incidents are reported. Oklahoma ranks 7th nationally in the number of females murdered by

males, with 92% of the perpetrators being known by the victim.

As of January 2006, the Oklahoma Domestic Violence Fatality Review Board had reviewed 170 of the 359 domestic violence death cases that occurred from 1998 to 2002. They found that almost 40% of the victims had children with the perpetrator, and 46% had children with another partner.



ACE Category

Definition for Inquiry Into Childhood Experience

Household or Family Dysfunction

Mother Treated Violently

Your mother or stepmother was sometimes, often, or very often pushed, grabbed, slapped, or had something thrown at her and/or sometimes, often, or very often kicked, bitten, hit with fist, or hit with something hard, and/or ever repeatedly hit over at least a few minutes and/or ever threatened or hurt by a knife or gun.

implications of ACE study

The long-term impact of domestic violence cannot be overstated. The Oklahoma Coalition Against Domestic Violence and Sexual Assault reports that child abuse and neglect is 15 times more likely to occur in homes where domestic abuse takes place. Boys from homes where domestic violence is present are 25 times more likely to commit rape as an adult and 6 times more likely to commit suicide. Researchers have found that one fourth to one half of men who commit acts of domestic violence also have substance abuse problems, and that a sizable percentage of convicted batterers were raised by parents who abused drugs or alcohol.

Exposure to domestic violence has varying effects depending upon the age of the child. Pregnant women who are subject

to domestic violence have high levels of the stress hormone cortisol, which can result in poor fetal growth and a reduction in early brain development that is linked to childhood hyperactivity syndromes such as ADD.

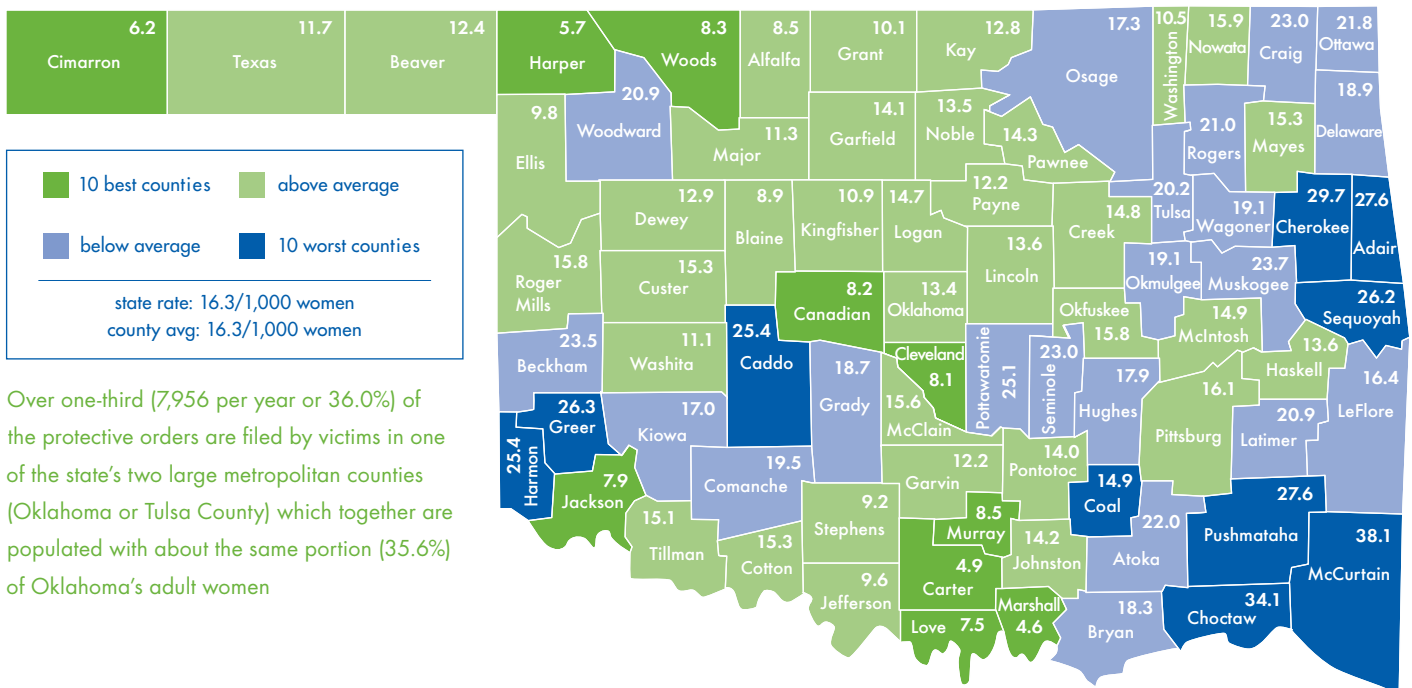
Infants are often directly involved in domestic violence incidents. They are held as a shield by the mother, hit by thrown objects, or intentionally threatened or hurt to terrify the mother. Even when they are lying passively in their cribs, infants are exquisitely sensitive to their surroundings. The developing brain is most vulnerable to the impact of traumatic experiences during the first year of life. Frequent and prolonged exposure to elevated cortisol levels may affect the development of the stress-regulation system in the brain,

resulting in swings from hyper-vigilance to depression. In addition, the disruption in the infant / caregiver attachment process can have long-term effects on a child's ability to form relationships throughout life.

Older children exposed to domestic violence often exhibit signs of post-traumatic stress disorder, including anger or depression, illnesses and absences from school, and a high likelihood of involvement in extreme risk-taking behaviors—including suicide attempts, substance abuse and criminal activity.

Exposure to trauma and threatening events at any age demands extraordinary coping efforts. The ACE researchers stress that recognizing the overlap of multiple types of abuse is important to understanding the true burden of cumulative stressors on later-life adjustment.

protective order issued (2003)



Over one-third (7,956 per year or 36.0%) of the protective orders are filed by victims in one of the state's two large metropolitan counties (Oklahoma or Tulsa County) which together are populated with about the same portion (35.6%) of Oklahoma's adult women

policy opportunities

establish a state-level coordinating mechanism

The Substance Abuse and Mental Health Services Administration (SAMHSA) recommends that a new mechanism be developed at the State level to coordinate planning among disparate agencies based on client needs assessment.

Devise financing strategies for blended funding
Address and coordinate the multiple needs of families involved with domestic violence, substance abuse, and child abuse and neglect

Housing

Childcare

Emotional and physical safety of children and non-abusive parent

Health and mental health care

Economic stability

Legal protection

Vocational and educational services

Parenting training

Peer counseling and support

establish connections between domestic violence and substance abuse treatment fields

Despite the considerable overlap in the client populations for domestic violence and substance abuse, there has been little deliberate effort to facilitate communication and collaboration between the two.

Substance abuse treatment programs should screen all clients for current and past domestic violence, including childhood physical and sexual abuse.

When possible, domestic violence programs should screen clients for substance abuse.

Establish a means to make appropriate referrals for clients/patients to obtain needed services.

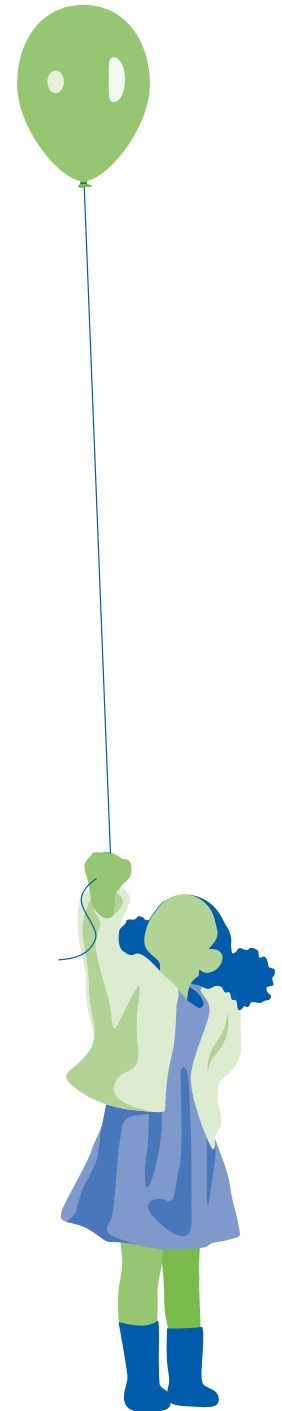
increase protective factors for both mothers and children

Schools, employers, community-based organizations, local hospitals and faith-based organizations can play a significant role in providing safe, supervised and enriching opportunities for children and families. Increased investment is needed for programs, such as after school or mentoring programs, and supportive services for the non-offending / victimized parent, which build on the strengths and assets of children, youth and families.



domestic violence index

county name	Household or Family Dysfunction Violence Against Mother ACE			county name	Household or Family Dysfunction Violence Against Mother ACE		
	number filed 2003 protective orders	2003 adult women PO filing rate/1000	2003 PO filing rank		number filed 2003 protective orders	2003 adult women PO filing rate/1000	2003 PO filing rank
STATE TOTALS	22,086	16.3		Latimer County	86	20.9	59
Adair County	215	27.6	74	Le Flore County	299	16.4	47
Alfalfa County	17	8.5	11	Lincoln County	167	13.6	29
Atoka County	109	22.0	62	Logan County	205	14.7	35
Beaver County	26	12.4	24	Love County	26	7.5	5
Beckham County	175	23.5	65	McClain County	171	15.6	42
Blaine County	38	8.9	12	McCurain County	498	38.1	77
Bryan County	268	18.3	51	McIntosh County	121	14.9	37
Caddo County	283	25.4	69	Major County	34	11.3	20
Canadian County	286	8.2	8	Marshall County	25	4.6	2
Carter County	64	3.5	1	Mayes County	226	15.3	41
Cherokee County	500	29.7	75	Murray County	43	8.5	10
Choctaw County	211	34.1	76	Muskogee County	655	23.7	66
Cimarron County	7	6.2	4	Noble County	58	13.5	28
Cleveland County	686	8.1	7	Nowata County	67	15.9	45
Coal County	62	27.2	72	Okfuskee County	68	15.8	44
Comanche County	804	19.5	56	Oklahoma County	3521	13.4	27
Cotton County	39	15.3	40	Okmulgee County	294	19.1	54
Craig County	132	23.0	64	Osage County	296	17.3	49
Creek County	391	14.8	36	Ottawa County	281	21.8	61
Custer County	152	15.3	39	Pawnee County	92	14.3	34
Delaware County	289	18.9	53	Payne County	342	12.2	23
Dewey County	24	12.9	26	Pittsburg County	274	16.1	46
Ellis County	16	9.8	15	Pontotoc County	195	14.0	31
Garfield County	318	14.1	32	Pottawatomie County	673	25.1	67
Garvin County	133	12.2	22	Pushmataha County	128	27.6	73
Grady County	344	18.7	52	Roger Mills County	20	15.8	43
Grant County	20	10.1	16	Rogers County	612	21.0	60
Greer County	53	26.3	71	Seminole County	219	23.0	63
Harmon County	31	25.4	68	Sequoyah County	400	26.2	70
Harper County	8	5.7	3	Stephens County	156	9.2	13
Haskell County	63	13.6	30	Texas County	81	11.7	21
Hughes County	94	17.9	50	Tillman County	52	15.1	38
Jackson County	79	7.9	6	Tulsa County	4435	20.2	57
Jefferson County	25	9.6	14	Wagoner County	447	19.1	55
Johnston County	59	14.2	33	Washington County	209	10.5	17
Kay County	237	12.8	25	Washita County	50	11.1	19
Kingfisher County	59	10.9	18	Woods County	29	8.3	9
Kiowa County	68	17.0	48	Woodward County	146	20.9	58



This issue brief is the third in a series describing the impact of adverse childhood experiences on adult health status. These briefs are made possible through Project ACT (All Children can Thrive), a project of the Oklahoma Institute for Child Advocacy funded by INTEGRIS Health, in partnership with Oklahoma KIDS COUNT. All five issue briefs and the Oklahoma KIDS COUNT Factbook will be available online at www.oica.org in January of 2007.

420 NW 13th Street, Suite 101, Oklahoma City, Oklahoma 73103
 phone: 405.236.KIDS (5437) fax: 405.236.KIDX (5439) www.oica.org

