



Adverse Childhood Experiences Among 3-Year-Olds, Alaska

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What are Adverse Childhood Experiences (ACEs)?

ACEs are potentially traumatic events that occur in childhood (0 -17 years), such as experiencing abuse or neglect, witnessing violence in the home or community, or having a family member attempt or die by suicide. Also included are aspects of a child’s environment that can undermine their sense of safety, stability, and bonding, such as growing up in a household with substance misuse, mental health problems, or instability due to parental separation or incarcerated household members.*

ACEs are preventable. Safe, stable, nurturing relationships and environments are essential to children’s health and well-being. Supporting these types of relationships and environments can reduce children’s risk for ACEs.

Figure 1: Prevalence of specific ACEs experienced among children aged 3. Data from ALCANLink.

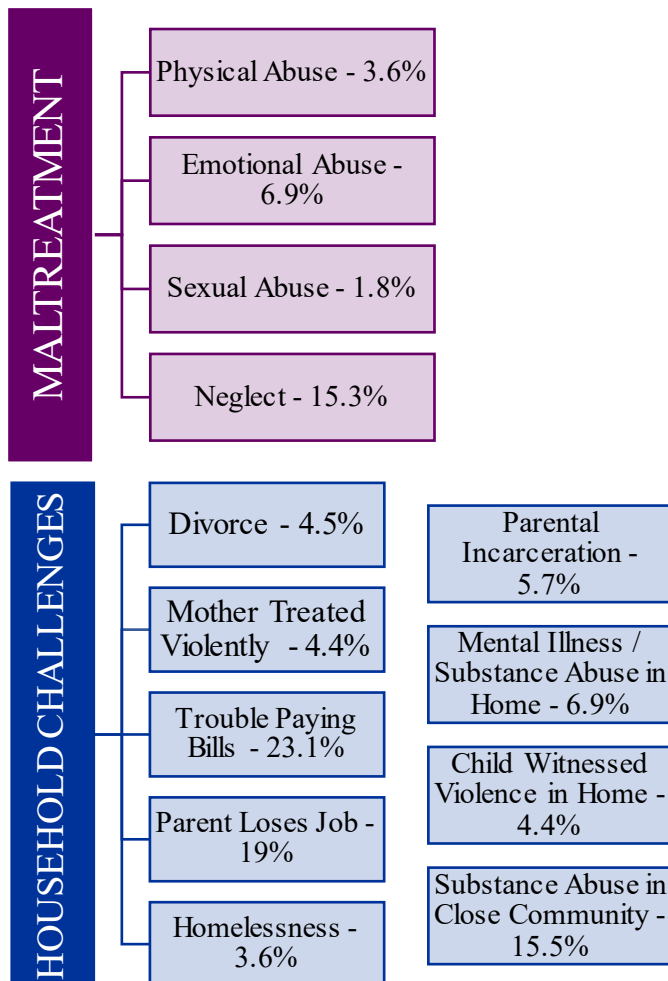
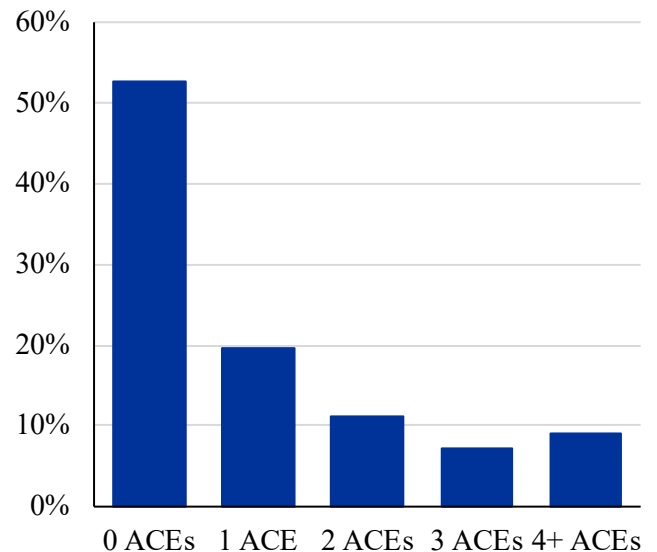


Figure 2: Weighted percent of ACEs experienced among children aged 3 years in Alaska. Data from ALCANLink.



ACEs Are Common Among Children

Among 3-year-olds in Alaska, **47.3%** of children have experienced at least one ACE, and **9.1%** have experienced four or more ACEs. Among Alaskan boys, **9.2%** experienced four or more ACEs compared to **8.9%** of girls (ALCANLink, birth years 2009 - 2017). The most common household challenge experienced by children aged 3 years in Alaska was **financial hardship** (about 23% of children) – marked by parents reporting being unable to pay bills. Related, roughly 19% of children had a parent lose employment during the child’s early childhood.

ALCANLink

The Alaska Longitudinal Child Abuse and Neglect Linkage Project (ALCANLink) links pre-birth factors assessed through the Alaska Pregnancy Risk Assessment Monitoring System (PRAMS) to early childhood factors assessed through the Childhood Understanding Behaviors Survey (CUBS). PRAMS surveys approximately 1 out of every 6 Alaskan mothers of newborns on their experiences pre-, during, and post-pregnancy. CUBS is a follow-up survey sent three years later to most PRAMS respondents still living in the state. It asks about the health and early childhood experiences of young children in Alaska.

*These examples do not comprise an exhaustive list of childhood adversity. Other traumatic experiences could impact health and well-being.



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These data are linked annually to administrative data to track demographics, movement out of state, and death. Data are also linked to OCS and Department of Education & Early Development records to examine welfare and education outcomes for the children.

<https://health.alaska.gov/dph/wcfh/Pages/mchepti/ALCANlink/default.aspx>

ACEs Are Risk Factors For Trafficking

Inadequate education, limited employment opportunities, and fragmented social support systems increase the risk of commercial sexual exploitation of children. Experiencing abuse and/or neglect, domestic violence, system-involvement (e.g., juvenile justice, child welfare), and mental, emotional, or physical disabilities further increases human trafficking risk.^{1,2} These and other risk factors mirror ACEs, suggesting that **ACE prevention efforts would also benefit child trafficking prevention.**

Alaska Risk and Prevention Research

ALCANLink documented connections between pre-birth household challenges – those experienced by the birthing parent immediately prior to and/or during pregnancy – and ACE scores,³ poor education outcomes,⁴ and child maltreatment.⁵

Addressing pre-birth household challenges experienced by pregnant individuals could serve as **early intervention against elevated ACEs and trafficking risk for Alaskan children.** Intervention programs must also continue to offer support to families throughout the child’s early childhood to address new household challenges that arise.

The CDC offers six strategies to prevent ACEs⁶ (Figure 4) that support early and continuous family support efforts. Other opportunities include connecting families to local community resources such as Help Me Grow and promoting warm handoffs between prenatal, birth, and pediatric care.

Figure 3: Relative rate ratio of expected average ACE score predicted by pre-birth household challenges (compared to 0 household challenge households). Data from ALCANLink.

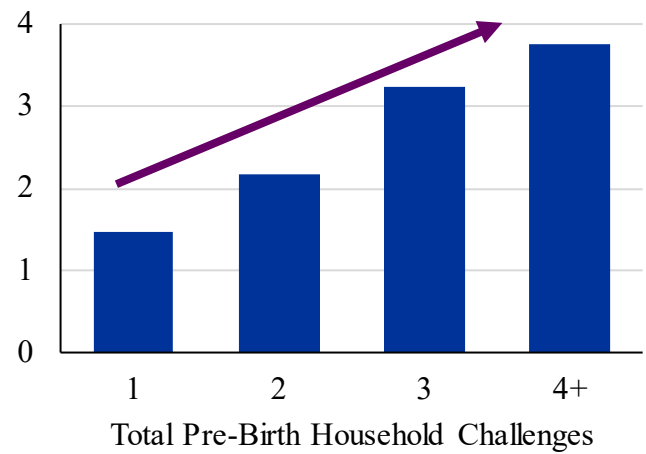


Figure 4: Six CDC strategies for ACE prevention.

Strengthen economic supports to families	Promote social norms that protect against violence and adversity
Ensure a strong start for children (home visitation; high quality childcare, preschool)	Skill-based learning
Connect youth to caring adults and activities	Intervene to lessen immediate and long-term harms

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¹ Kinnish et al. (2021). Child sex trafficking: Who is vulnerable to being trafficked. Los Angeles, CA, and Durham, NC: National Center for Child Traumatic Stress.

² Reid et al. (2017). Human trafficking of minors and childhood adversity in Florida. *AJPH Research*, 107(2), 306-311.

³ Rittman et al. (2020). Prebirth household challenges to predict adverse childhood experiences score by age 3. *Pediatrics*, 146(5), e20201303.

⁴ Husa et al. (2022). Pre-birth household challenges predict future child’s school readiness and academic achievement. *Children*, 9(3), 414.

⁵ Parrish et al. (2011). Identifying risk factors for child maltreatment in Alaska. *Am J Prev Med*, 40(6), 666-673.

⁶ CDC (2019). Preventing Adverse Childhood Experiences: Leveraging the Best Available Evidence. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.