

TITLE: Social pathways between adverse childhood experiences and poor adult health: Mediation by early adulthood experiences

AUTHOR(S): Claire Devine, Leif Rustvold, Hannah Cohen-Cline

PRESENTER(S): Claire Devine

STUDENT SUBMISSION: No

TOPIC/TARGET AUDIENCE: Adverse childhood experiences

ABSTRACT: BACKGROUND: Adverse childhood experiences (ACEs) increase the risk of physical health problems in adulthood.

PURPOSE: To test whether experiences in early adulthood 'intimate partner violence (IPV), substance use, social isolation, and trouble keeping steady work' mediate the relationship between ACEs and poor physical health in later adulthood.

METHOD: Data were derived from a survey of Medicaid enrollees in Portland, Oregon (N= 2,385). Separate models were constructed to assess the proportion of the relationship between ACEs and adult physical health that was mediated through each of the proposed pathways.

RESULTS: Experiencing four or more ACEs increased the risk of poor physical health in later adulthood by 50% (RR 1.50, 95% CI: 1.24- 1.82). Three early adulthood experiences significantly mediated this relationship: IPV (14.4% of the total effect), substance use (14.2%), and social isolation (7.6%). Work instability did not mediate the relationship between ACEs and adult physical health in our population.

CONCLUSION: These findings provide evidence that IPV, substance use, and social isolation in early adulthood mediate the relationship between adverse events in childhood and poor physical health in later adulthood. Intervening to prevent these negative experiences in early adult may mitigate the long-term effects of childhood trauma and maltreatment on health.

OBJECTIVE(S): Describe the relationship between adult physical health and adverse childhood experiences.

Identify potential early-adulthood mediators between ACES and poor adult physical health.

Identify what experiences in early adulthood can be prevented to mitigate the effects of ACEs on poor health .
