

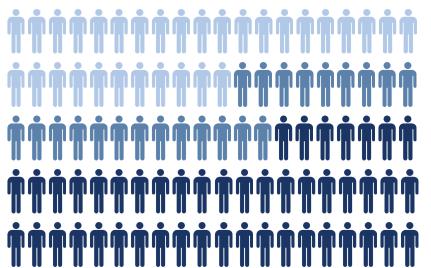
Data Snapshot

Adverse childhood experiences (ACEs) in Ohio

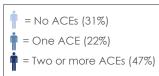
Exposure to adverse childhood experiences (ACEs) — potentially traumatic events that occur during childhood — is a pervasive problem affecting many children in Ohio and across the country. ACEs exposure contributes to poor health and well-being throughout life, including disrupted neurodevelopment, social and emotional challenges, disease, disability and premature death.

How many Ohioans have been exposed to ACEs?

Prevalence of ACEs in Ohio. 2021



In 2021, more than two thirds of Ohio adults reported having been exposed to ACEs, and nearly half of all adults reported being exposed to two or more ACEs.



Source: 2021 Behavioral Risk Factor Surveillance System, provided by the Ohio Department of Health

Prevalence of specific ACEs among adults who report at least one ACE, 2021

Abuse







Emotional abuse is the most-common ACE reported among Ohio adults, followed by substance use by a household member and divorce/separation of parents.

Household problems



Household member with a substance use disorder



Divorce/ separation of parents



Mental illness of household member



Witnessing domestic violence



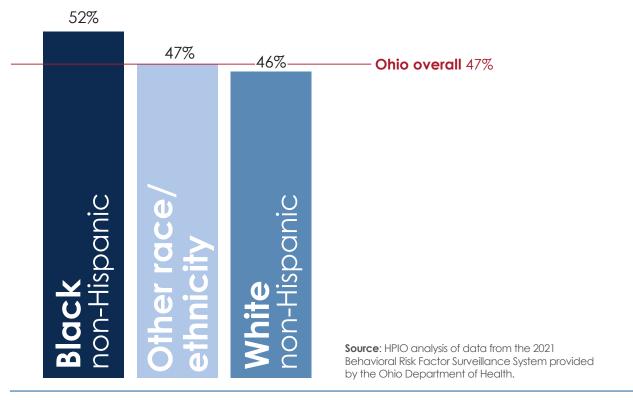
Incarcerated household member

Source: 2021 Behavioral Risk Factor Surveillance System, provided by the Ohio Department of Health

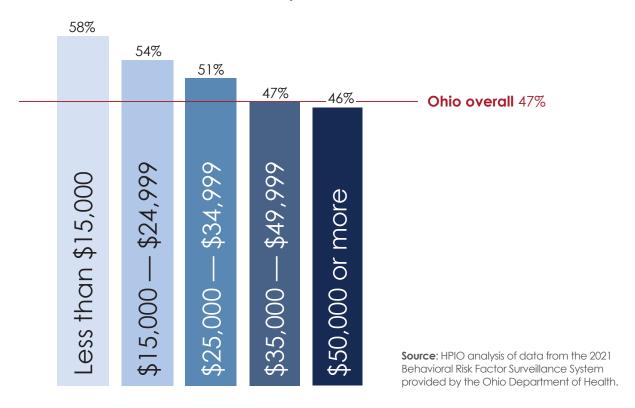
Who is most affected by ACEs?

Every Ohio child should have the opportunity to grow up free from ACEs. However, some groups of Ohioans, such as Black Ohioans and those with lower incomes, are more likely than other groups to have been exposed to ACEs.

Prevalence of two or more ACES, by race and ethnicity, 2021



Prevalence of two or more ACES, by income, 2021

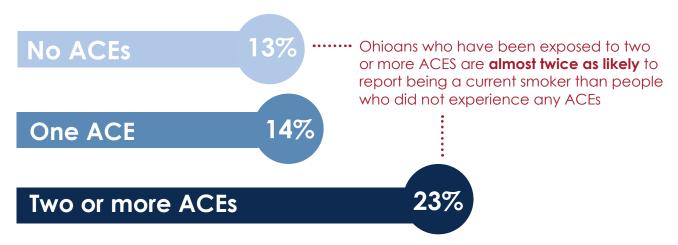


How does ACEs exposure impact health?

The risk for developing poor health outcomes associated with ACEs increases in proportion to the number of ACEs to which a person is exposed. Below are examples of two outcomes for which exposure to a higher number of ACEs can result in a higher likelihood of negative outcomes for Ohioans.

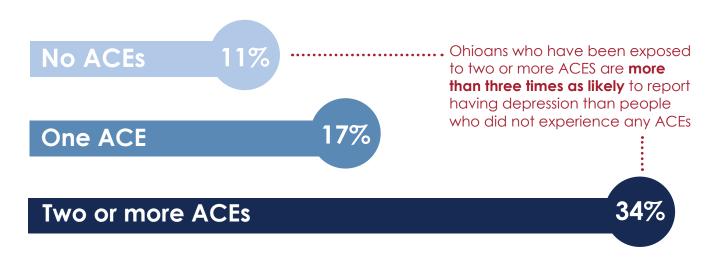
Prevalence of negative health outcomes (age adjusted), by number of ACEs, 2021

Percent of adults who are current smokers



Source: HPIO analysis of data from the 2021 Behavioral Risk Factor Surveillance System provided by the Ohio Department of Health.

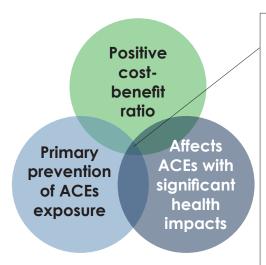
Percent of adults who ever reported being diagnosed with depression



Source: HPIO analysis of data from the 2021 Behavioral Risk Factor Surveillance System provided by the Ohio Department of Health.

What can be done to prevent ACEs?

Starting in 2020, HPIO released a series of policy briefs on the health and economic impacts of ACEs and elevated 12 evidence-informed, cost-effects strategies (program, policies and practices) that can prevent ACEs. HPIO has continued this work by analyzing the extent of implementation of the 12 key strategies:



12 key strategies to prevent ACEs

- Early childhood education programs
- Early childhood home visiting
- Medical-legal partnerships
- Family income supports
- School-based violence, bullying and intimate partner violence prevention programs
- Parent/caregiver and family skills training
- School-based social and emotional instruction
- Community-based violence prevention
- Mentoring programs for delinquency
- Drug courts
- Trauma-informed care
- Behavioral health treatment

For more information on the key strategies identified, please see A strategic approach to prevent ACEs in Ohio

Key findings from HPIO's work on ACEs

- Focusing action on key strategies can have a powerful impact. State policymakers and other partners can maximize the effectiveness of public and private spending to prevent ACEs by focusing on the 12 cost-beneficial strategies displayed above.
- ACEs prevention efforts must reach children and families most at risk. Ohio's public and private leaders should equip communities to support children and families that are most at risk for experiencing adversity and trauma, such as Ohioans of color and Ohioans with low incomes, disabilities and/or who live in urban and Appalachian areas.
- Preventing ACEs can improve health and reduce healthcare and other spending. For
 example, if ACEs exposure were eliminated in Ohio, more than \$10 billion in annual healthcare
 spending could be avoided and an estimated 36% of depression diagnoses could be
 prevented.

Ohio ACEs Impact project

Led by the Health Policy Institute of Ohio and informed by a multi-sector advisory group, this project includes policy briefs, fact sheets and a resource page to build on and amplify current efforts to address ACEs in Ohio.

Learn more about the project here:

www.hpio.net/ohio-aces-impact-project

Support for this project was provided by the Harmony Project, the Ohio Children's Hospital Association and HPIO's other **core funders**.