

# Building Healing Behavioral Health Systems:

## Trauma-Informed/Healing-Centered Organizational Transformation

ACE-like Experiences and Positive Childhood Experiences among High School and Middle School Students in Behavioral Health Populations



# Behavioral Health Administration & Universities Partnership



## UM SOM Psychiatry Department

- Division of Child and Adolescent Psychiatry (DCAP)
- Systems Evaluation Center (SEC)



## Bowie State University

- Department of Behavioral Sciences and Services

# Maryland Childhood Trauma and ACEs

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*The following data is available due to the efforts of:*

- The Maryland Department of Health: Prevention and Health Promotion Administration Center for Tobacco Prevention and Control
- The Maryland youth who participated in the surveys used in this project

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# Building Healing Behavioral Health Systems:

Adverse Childhood Experiences and  
Positive Childhood Experiences Background



# What are Adverse Childhood Experiences?

## ACE Overview

Childhood exposure to physical, emotional, or sexual abuse, neglect, and other stressors are known as adverse childhood experiences (ACEs)

- Experiencing violence, abuse, or neglect
- Witnessing violence
- Experiencing household substance misuse
- Experiencing household mental health problems
- Instability in the home (parental separation/divorce or household members in jail or prison)

# What are Adverse Childhood Experiences?

## ACE Surveys

### Household ACEs

#### Kaiser-Permanente<sup>a</sup>

1. Emotional Abuse
2. Physical Abuse
3. Sexual Abuse
4. Emotional Neglect
5. Physical Neglect
6. Parental Separation or Divorce
7. Household Domestic Violence
8. Household Substance Abuse
9. Household Mental Illness
10. Household Incarceration

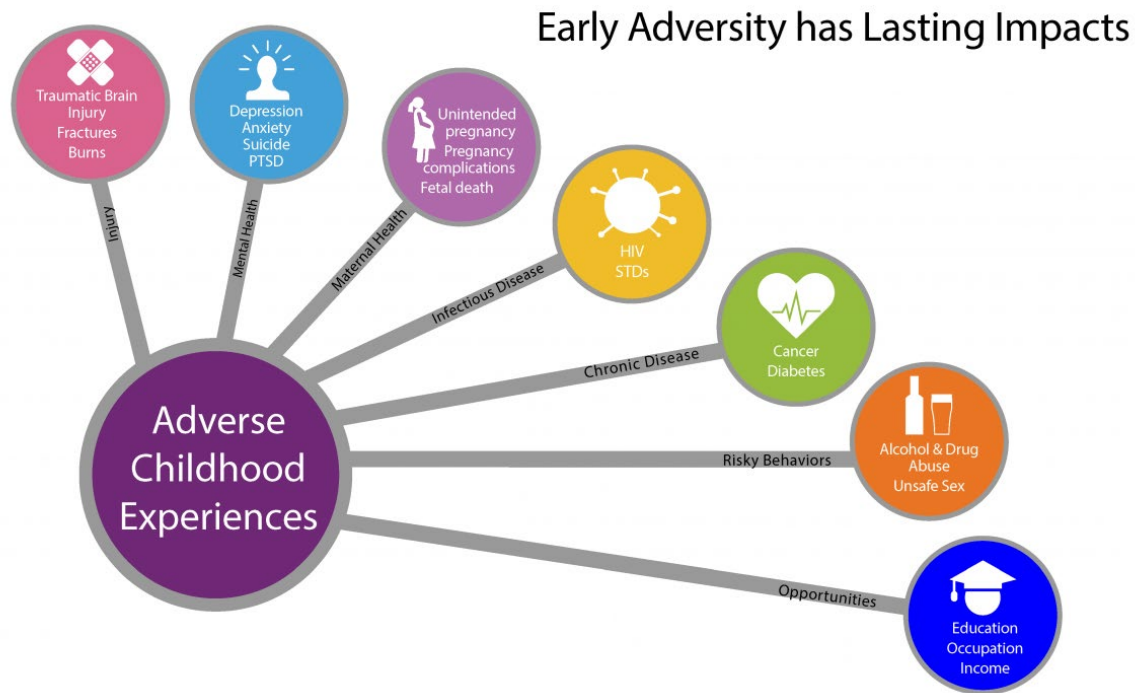
### Community ACEs

#### Philadelphia Urban Expansion<sup>b</sup>

1. Witnessed Violence
2. Felt Discrimination
3. Adverse Neighborhood Experience
4. Bullied
5. Lived in Foster Care

# What are Adverse Childhood Experiences?

## Negative Effects of ACEs



ACEs are linked to chronic health problems, early mortality, mental health problems, and substance use in adulthood.

ACEs contribute to increased frequency of:

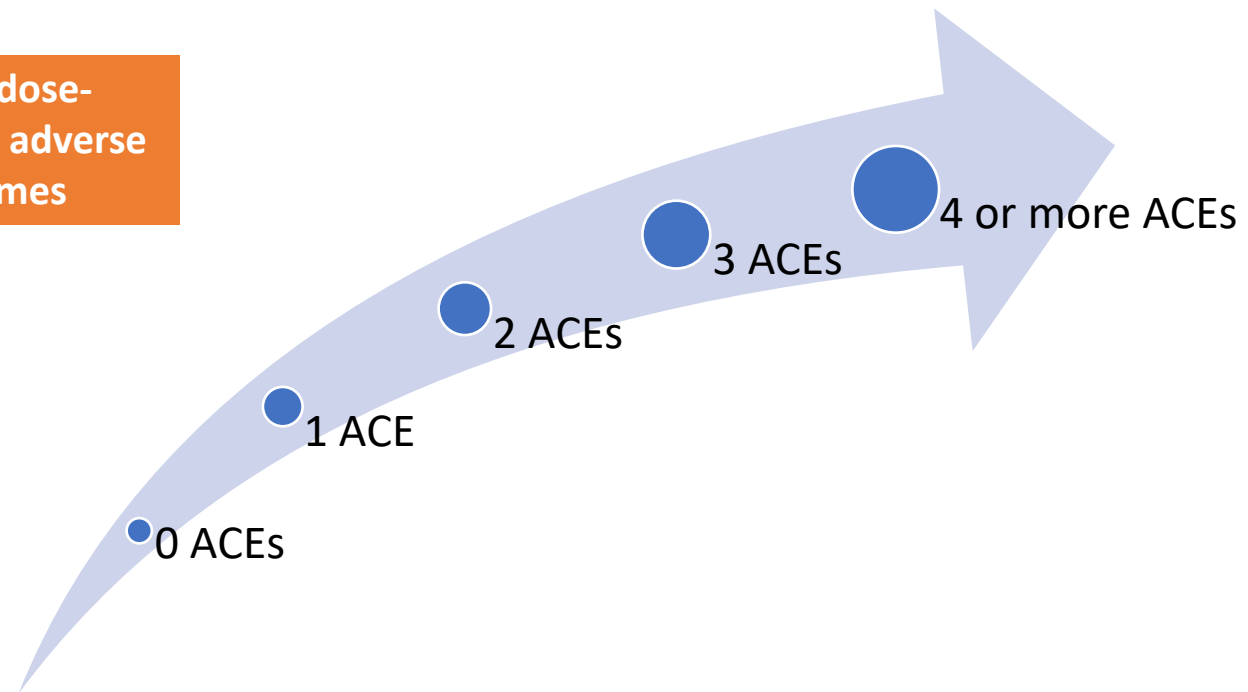
1. Reaction to Severe Stress and Adjustment (including PTSD)
2. Depression
3. Anxiety
4. Psychosis
5. Substance Use (Alcohol, Cannabis, Opioid, Other substance use)



# What are Adverse Childhood Experiences?

## Dose-Response Relationship

ACEs have been found to have a dose-response relationship with many adverse risk behaviors and disease outcomes



# Positive Childhood Experiences

1. Being able to talk openly to a family member or as a family about feelings and feel heard, accepted and supported.
2. Belief that family stood by them during difficult times.
3. Feeling safe and protected by an adult in the home.
4. Feeling supported by friends.
5. Having a sense of belonging and connection with a larger group who has “got your back” (e.g. school, church, clubs, neighborhood, etc.).
6. Enjoyment of participation in community traditions.
7. Relationship with at least one non-parent adult who takes genuine interest in you.

**Positive childhood experiences show a dose-response relationship with better adult depression and/or mental health, as well as improved social and emotional support in adulthood**



# Building Healing Behavioral Health Systems:

Key Take Aways



# Key Take Aways

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- **More students with behavioral health challenges experience all ACE-like experiences than students without behavioral health challenges.**
- **Positive Childhood Experience mitigate the impact of ACE-like experiences** on behavioral health challenges by up to 13% in high school students and 54% in middle school students



# Key Take Aways

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**Specific ACE-like experiences are associated with increased risk for:**

- **Mental Health Challenges** (1.2 – 4.2 times) increased risks are
  - Most associated with physical dating violence in high school (3.6-4.2 times) and middle school (1.8-2.6 times)
  - Followed by threatened or injured with a weapon in high school students (1.7-3.8 times)
- **Current Alcohol Use or Marijuana use** (2.3-5.4 times)
  - Increased risk for Current Alcohol Use is most associated with physical dating violence in high school (4.7 times) and middle school (2.8 times)
  - Increased risk for Current Marijuana Use is most associated with physical fighting in high school (4.8 times) and middle school (3.8 times)

# Key Take Aways



**Specific ACE-like experiences are associated with increased risk for:**

- **Ever using other illicit substances** (1.5-27.7 times)
  - **Misusing Pain Medication** Increased risk is most associated with carrying a gun in high school (5.2 times) and physical fighting in middle school (2.5 times)
  - **Heroin** Increased risk is most associated with carrying a gun in high school (27.7 times) *not collected for middle school*
  - **Cocaine** Increased risk is most associated with carrying a gun in high school (19.0 times) and physical dating violence in middle school (2.0 time)
  - **Other substances** (high school only) are most associated with carrying a gun for methamphetamines (25.0 times) and ecstasy (18.3 times)



# Building Healing Behavioral Health Systems:

Focused Data Study Methods



# Focused Data Studies

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- Focused Data Studies aim to describe and contextualize the prevalence of childhood trauma and ACEs in the State of Maryland Public Behavioral Health System, with two studies planned each year.
  - Study 1 used publicly available aggregated data to compare Maryland and Nationwide prevalence for youths and adults.
  - Study 2 performed a “deeper dive” into data for Maryland’s high school youth.
  - Study 3
    - Enables a “deeper dive” into Maryland’s middle school youth data (this report).
    - Includes analyses of ACE-like experiences among Maryland’s middle school and high school youth (separate report available).
  - Study 4 (planned) will enable a “deeper dive” into data for Maryland’s adults.



# Methods: Data Source

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- 2021 Middle School and High School Youth Risk Behavior Survey/Youth Tobacco Survey (YRBS/YTS)
- Maryland collaborates with the Centers for Disease Control and Prevention (CDC) to collect behavioral risk data through school systems using different surveys for middle-school and high-school students.
- Data received from the Maryland Department of Health: Prevention and Health Promotion Administration Center for Tobacco Prevention and Control.

# Methods: Sample

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- The Positive Childhood Experiences (PCEs) analysis only includes students with behavioral health challenges, to best explore the impact of PCEs on these individuals.
- The remainder of the analyses includes all students to best understand the impact of each ACE across behavioral health indicators for individuals with behavioral health challenges compared to those without.
- All findings reported in this analysis are statistically significant unless otherwise stated.

# Methods: Defining Concepts in the Data

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- This analysis aims to understand the relationship of ACEs and PCEs with Mental Health and Substance Use Indicators.
- Several YRBS/YTS questions were assessed for each area of analysis: ACEs, PCEs Mental Health and Substance Use
- The methods section at the end of this slide deck includes operational definitions for mental health and substance use criteria used for this analysis

# Methods: ACE-like experiences in the YRBS/YTS

ACE-like Experience	High School
<b>Carried a weapon on school property*</b>	During the past 30 days, on how many days did you carry a weapon such as a gun, knife, or club on school property?
<b>Carried a gun*</b>	During the past 12 months, on how many days did you carry a gun? (Do not count the days when you carried a gun only for hunting or for a sport, such as target shooting.)
<b>Threatened or injured with a weapon*</b>	During the past 12 months, how many times has someone threatened or injured you with a weapon such as a gun, knife, or club on school property?



# Methods: ACE-like experiences in the YRBS/YTS

ACE-like Experience	Middle School	High School
<b>In a physical fight</b>	Have you <b>ever</b> been in a physical fight?	<b>During the past 12 months, how many times</b> were you in a physical fight on school property?
<b>Experienced physical dating violence</b>	Did someone you were dating or going out with physically hurt you on purpose? (Count such things as being hit, slammed into something, or injured with an object or weapon.)	<b>During the past 12 months, how many times</b> did someone you were dating or going out with physically hurt you on purpose? (Count such things as being hit, slammed into something, or injured with an object or weapon.)

# Methods: PCEs available for Analysis

## Positive Childhood Experiences

1. Being able to talk openly to a family member or as a family about feelings and feel heard, accepted and supported.
2. Belief that family stood by them during difficult times.
3. Feeling safe and protected by an adult in the home.
4. Feeling supported by friends.
5. Having a sense of belonging and connection with a larger group who has “got your back” (e.g. school, church, clubs, neighborhood, etc.).
6. Enjoyment of participation in community traditions.
7. Relationship with at least one non-parent adult who takes genuine interest in you.

## PCE-like Experiences in YRBS/YTS

1. Participation in Extracurricular Activities at school such as sports, band, drama, clubs, or student government.
2. Feeling safe at school and on your way to or from school\*
3. Having Food Security:
  1. Not worried that your food would run out before you got money to buy more.
  2. Did not run out of food when your family did not have the money to buy more.

\*available in YRBS/YTS High School data only

Indicates Items Available for Analysis in the Maryland YRBS/YTS data

# Methods: Measurement of Increased Risk

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- Analysis included measuring the increased risk of having each ACE or decreased risk of each PCE with each behavioral health category
- Risk is measured by an odds ratio that indicates how many times more or less likely individuals are to have a specified ACE and behavioral health category
- The risks in this report are **not causal, they are associations**. For example, when discussing mental health and a specific ACE
  - **SAY**: There is a relationship between having experienced an ACE and experiencing mental health challenges
  - **NOT**: Experiencing an ACE causes mental health challenges

# Methods: Caveats

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- Some adverse outcomes for ACE-like experiences may not surface until later adolescence or adulthood. This report includes data collected from middle school and high school students.
- Because individuals may develop mental health or substance use issues after the survey data were collected, the proportions for behavioral health outcomes will likely increase during over time.



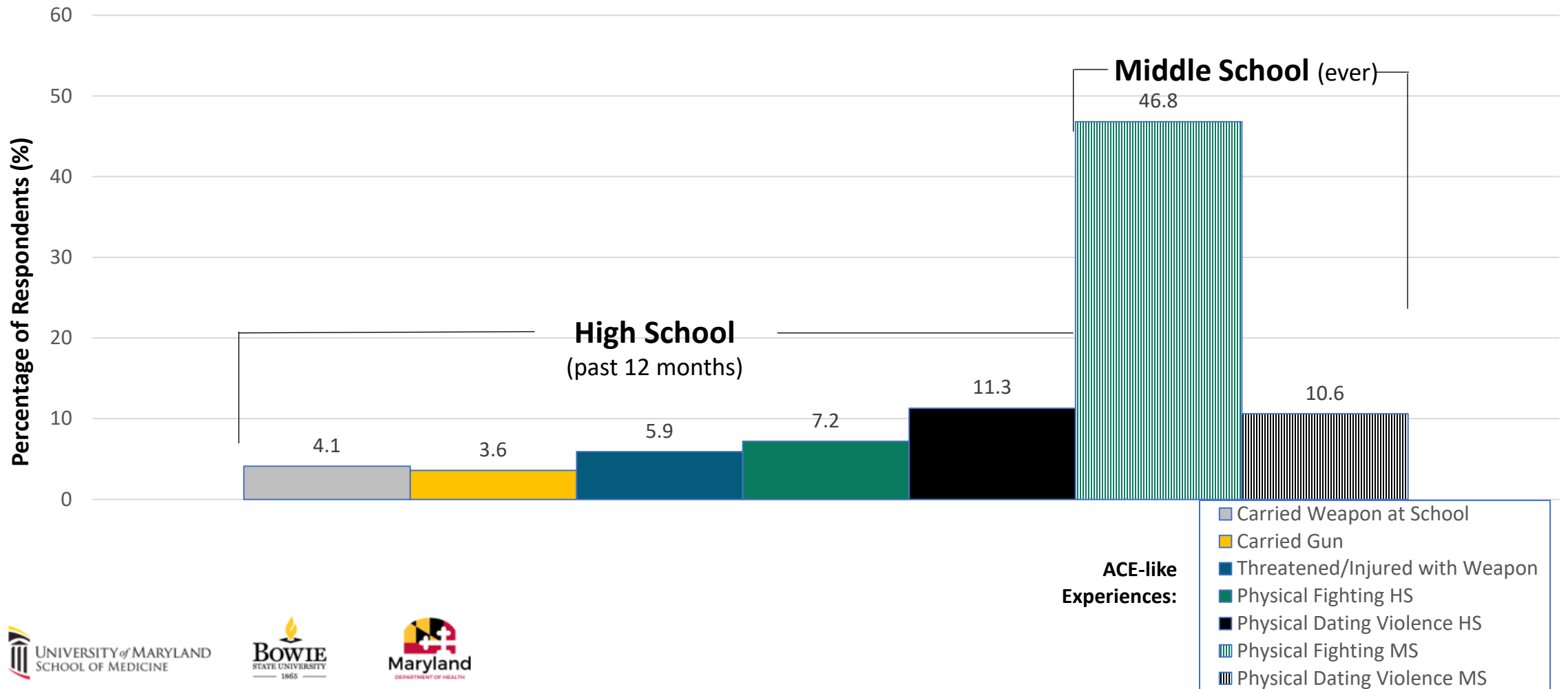


# Building Healing Behavioral Health Systems:

ACE-like Experiences in  
High School and Middle School Students



# ACE-like Experiences among Students





# Building Healing Behavioral Health Systems:

Positive Childhood Experiences (PCEs) among Individuals with Behavioral Health Challenges



# Impact of Positive Childhood Experiences

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- PCEs can counteract the impact of ACEs
- Research comparing adults with high numbers of PCEs to those who reported low or no PCEs. Adults reporting more PCEs:
  - had 72 percent lower levels of adult depression and/or poor mental health
  - were 3.5 times more likely to get the social and emotional support they need as an adult (Bethell, et al, 2019)
- When parents share ideas and talk about things that matter with their child, the child had a 1,200 percent greater chance of flourishing compared to those who did not have this type of communication (Bethell, Gombojav & Whitaker, 2019).

Bethell, C., Jones, J., Gombojav, N., Linkenbach, J., & Sege, R. (2019). Positive Childhood Experiences and Adult Mental and Relational Health in a Statewide Sample. *JAMA Pediatrics* published online 2019 Sep 9.

Bethell, C. D., Gombojav, N., & Whitaker, R. C. (2019). Family resilience and connection promote flourishing among US children, even amid adversity. *Health Affairs*, 38(5), 729-737.

Positive Childhood Experiences source: <https://www.childandadolescent.org/positive-childhood-experiences/>



# Impact of Positive Childhood Experiences

- PCEs can come from the family; however, some children live in homes where they don't feel emotionally safe. PCEs involving friends and communities can counterbalance the effect of ACEs, even if household PCEs are not available.

## Household PCEs

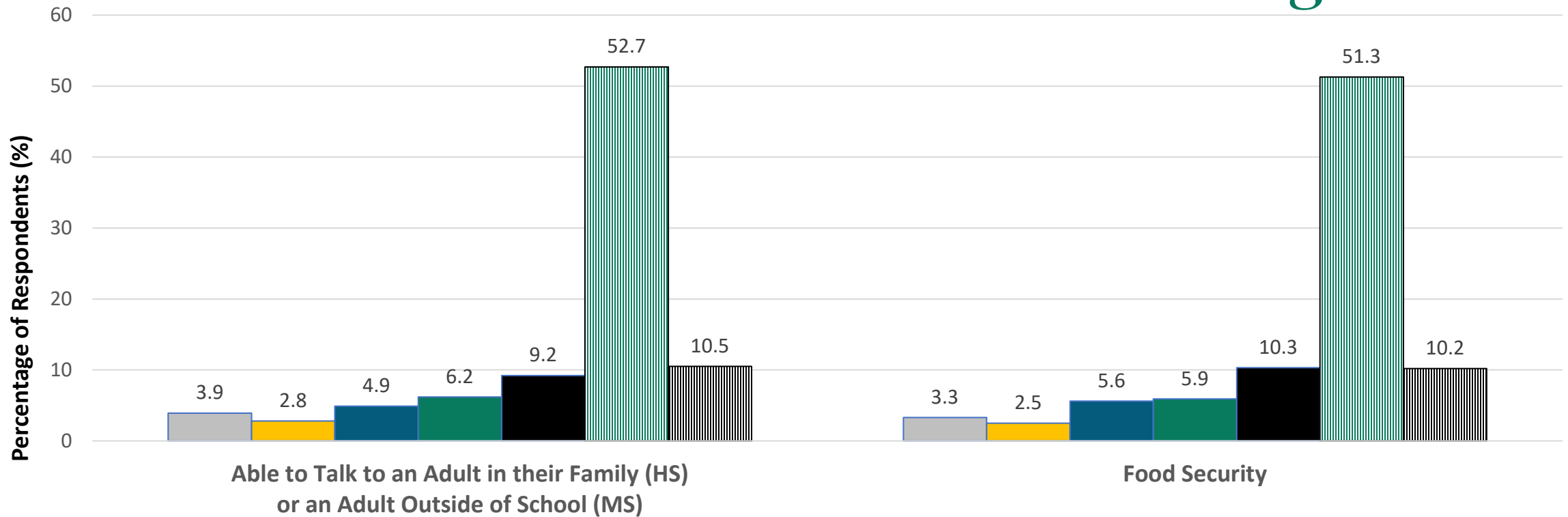
- Being able to talk openly to a family member or as a family about feelings and feel heard, accepted and supported.
- Belief that family stood by them during difficult times.
- Feeling safe and protected by an adult in the home.

## Community PCEs

- Feeling supported by friends.
- Having a sense of belonging and connection with a larger group who has “got your back” (e.g. school, church, clubs, neighborhood, etc.).
- Enjoyment of participation in community traditions.
- Relationship with at least one non-parent adult who takes genuine interest in you.

Bethell, C., Jones, J., Gombojav, N., Linkenbach, J., & Sege, R. (2019). Positive Childhood Experiences and Adult Mental and Relational Health in a Statewide Sample. *JAMA Pediatrics* published online 2019 Sep 9. Positive Childhood Experiences source: <https://www.childandadolescent.org/positive-childhood-experiences/>

# Household PCEs and ACE-like Experiences in Individuals with Behavioral Health Challenges



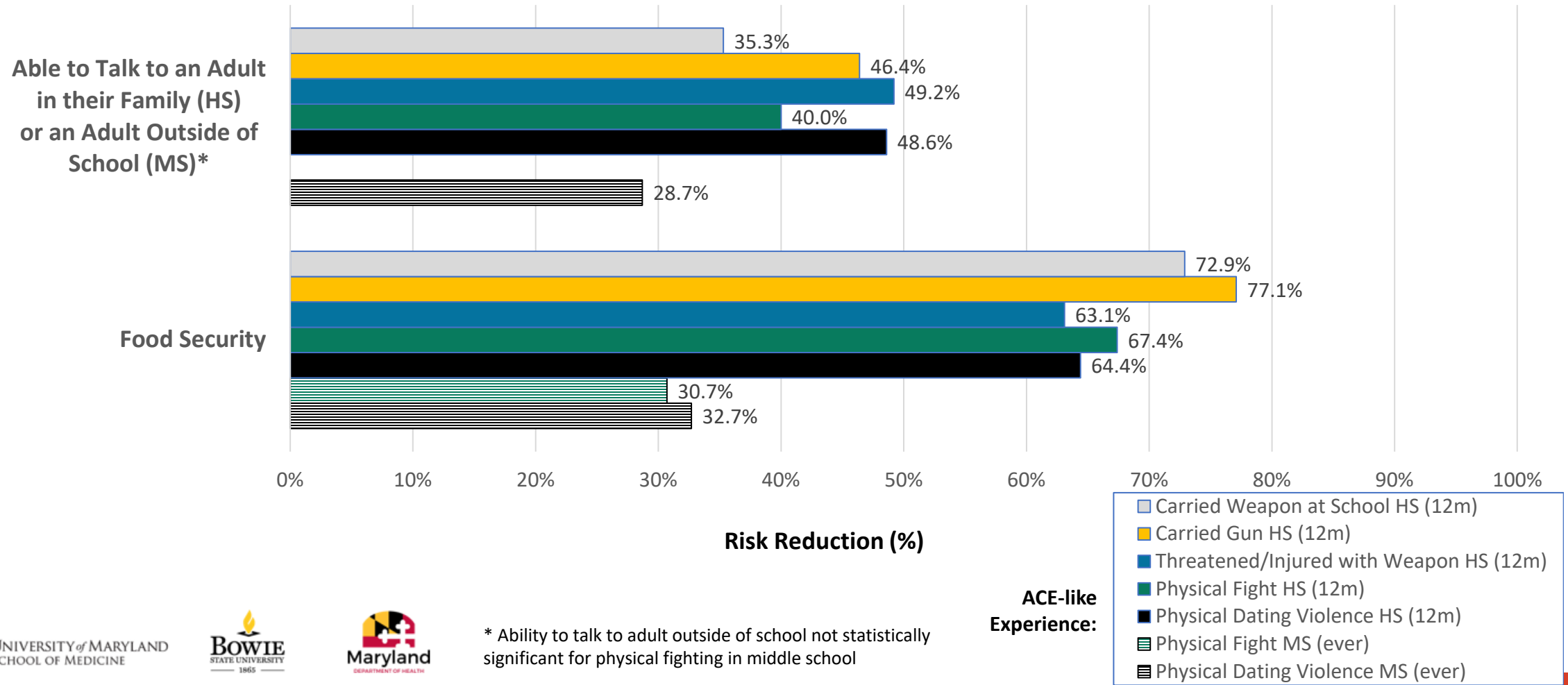
## Positive Childhood Experiences

### ACE-like Experience:

- Carried Weapon at School HS (12m)
- Carried Gun HS (12m)
- Threatened/Injured with Weapon HS (12m)
- Physical Fighting HS (12m)
- Physical Dating Violence HS (12m)
- Physical Fighting MS (ever)
- Physical Dating Violence MS (ever)



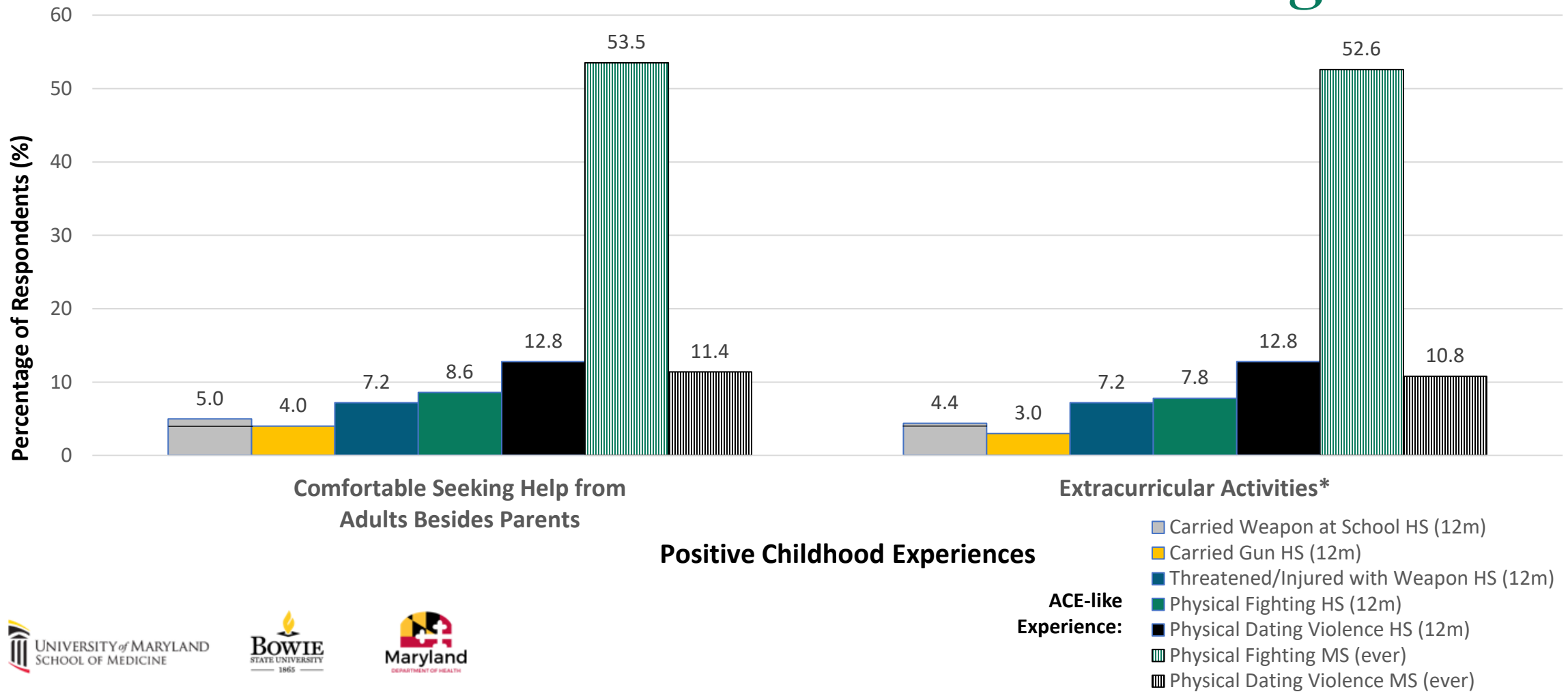
# Household PCEs and Reduced Risk with ACE-like Experiences in Behavioral Health Population



\* Ability to talk to adult outside of school not statistically significant for physical fighting in middle school

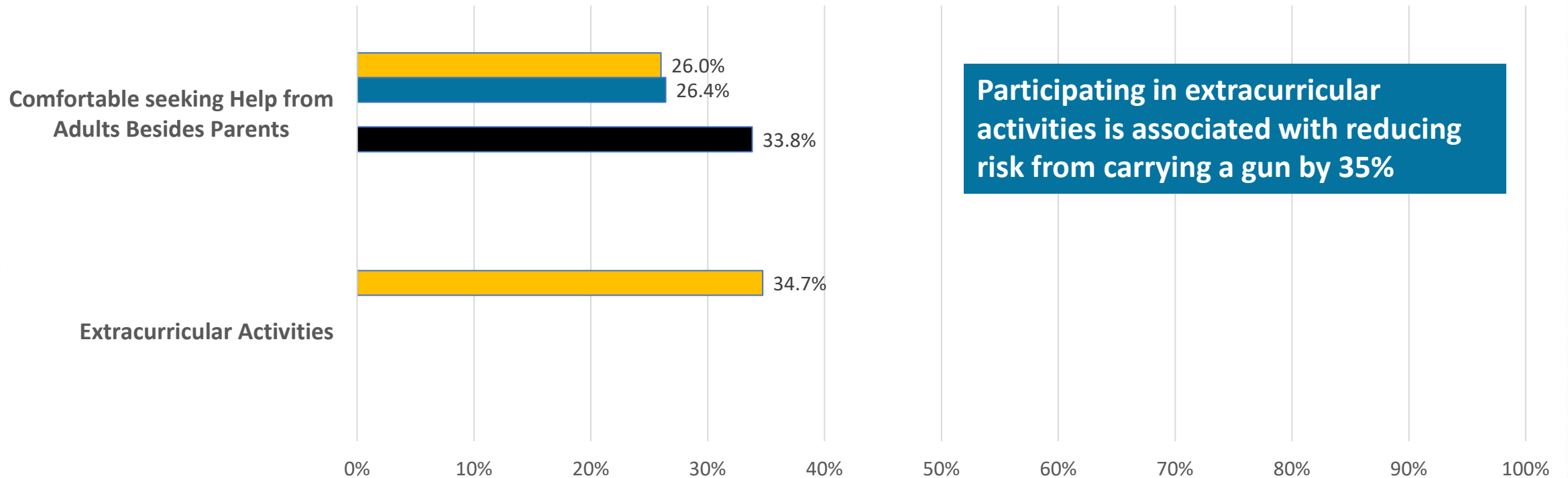


# Community PCEs and ACE-like Experiences in Individuals with Behavioral Health Challenges





# Community PCEs and Reduced Risk with ACE-like Experiences in Behavioral Health Population

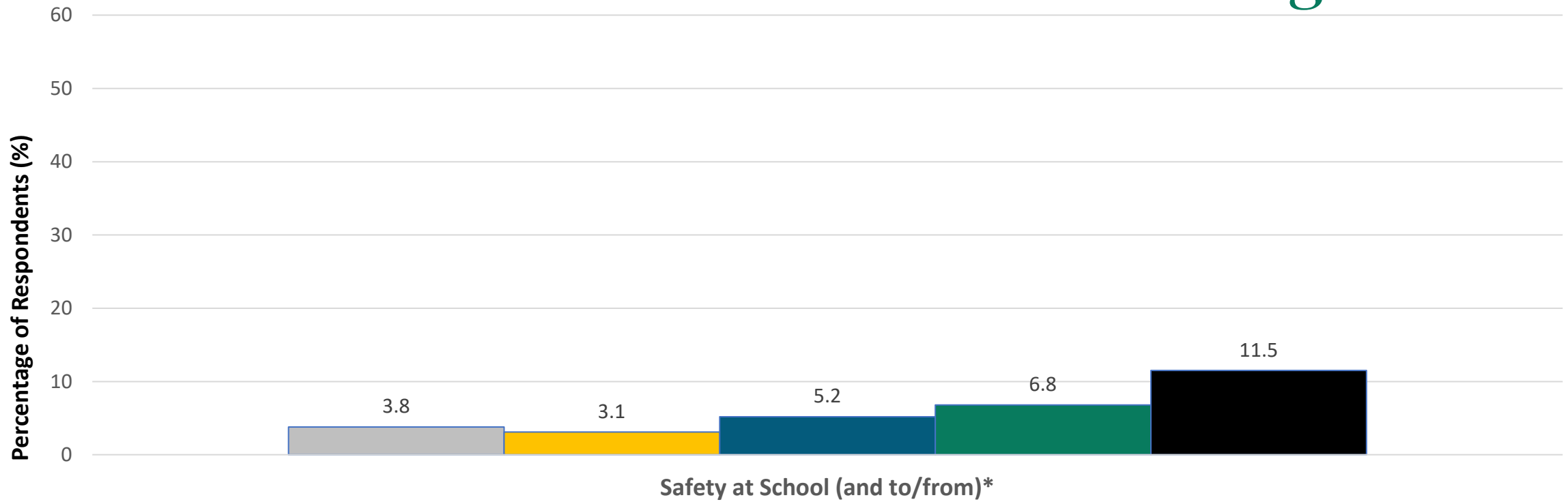


Participating in extracurricular activities is associated with reducing risk from carrying a gun by 35%

\* Only statistically significant results shown above

- ACE-like Experience:**
- Carried Weapon at School HS (12m)
  - Carried Gun HS (12m)
  - Threatened/Injured with Weapon HS (12m)
  - Physical Fight HS (12m)
  - Physical Dating Violence HS (12m)
  - Physical Fight MS (ever)
  - Physical Dating Violence MS (ever)

# Community PCEs and ACE-like Experiences in Individuals with Behavioral Health Challenges

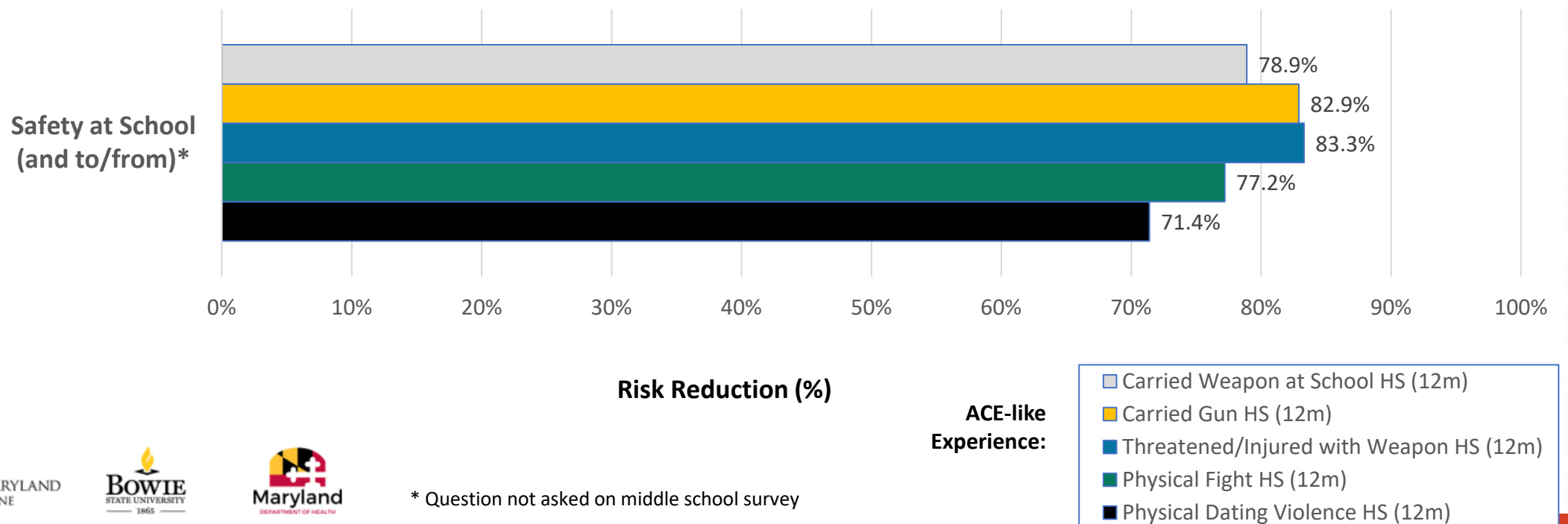


\* Question not asked on middle school survey

- ACE-like Experience:**
- Carried Weapon at School HS (12m)
  - Carried Gun HS (12m)
  - Threatened/Injured with Weapon HS (12m)
  - Physical Fighting HS (12m)
  - Physical Dating Violence HS (12m)

# Community PCEs and Reduced Risk with ACE-like Experiences in Behavioral Health Population

Safety at School (and to/from) is associated with reducing risk from carrying a gun or being threatened/injured with a weapon by 83%





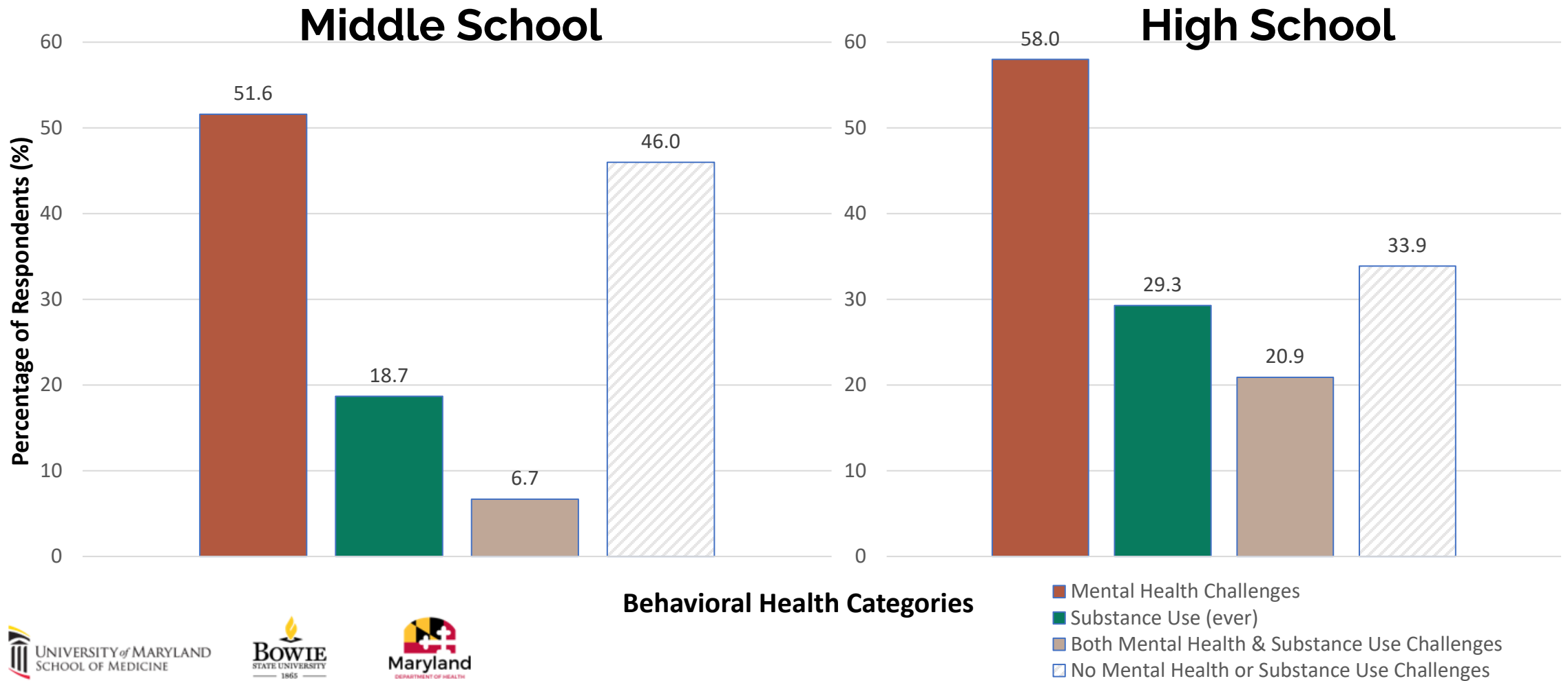
# Building Healing Behavioral Health Systems:

Behavioral Health Categories and ACE-like Experiences

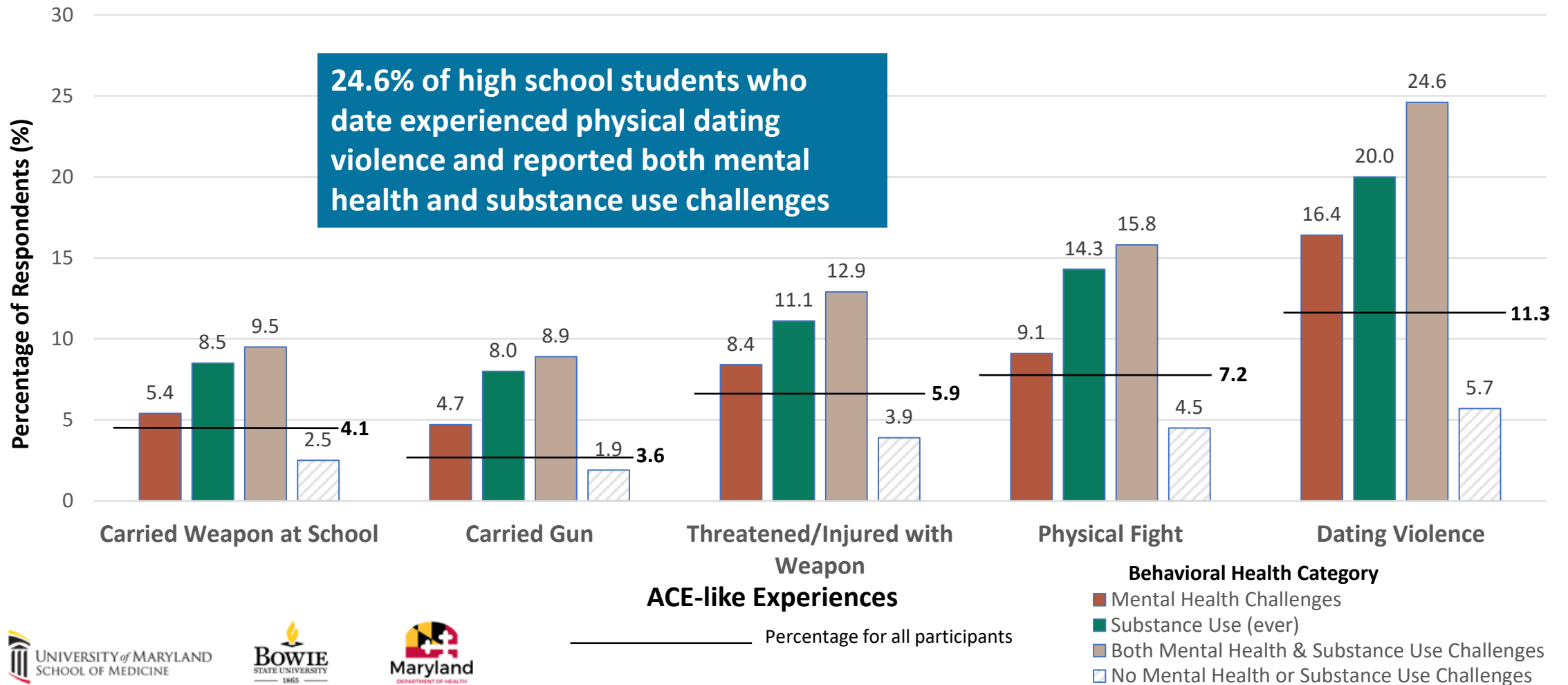




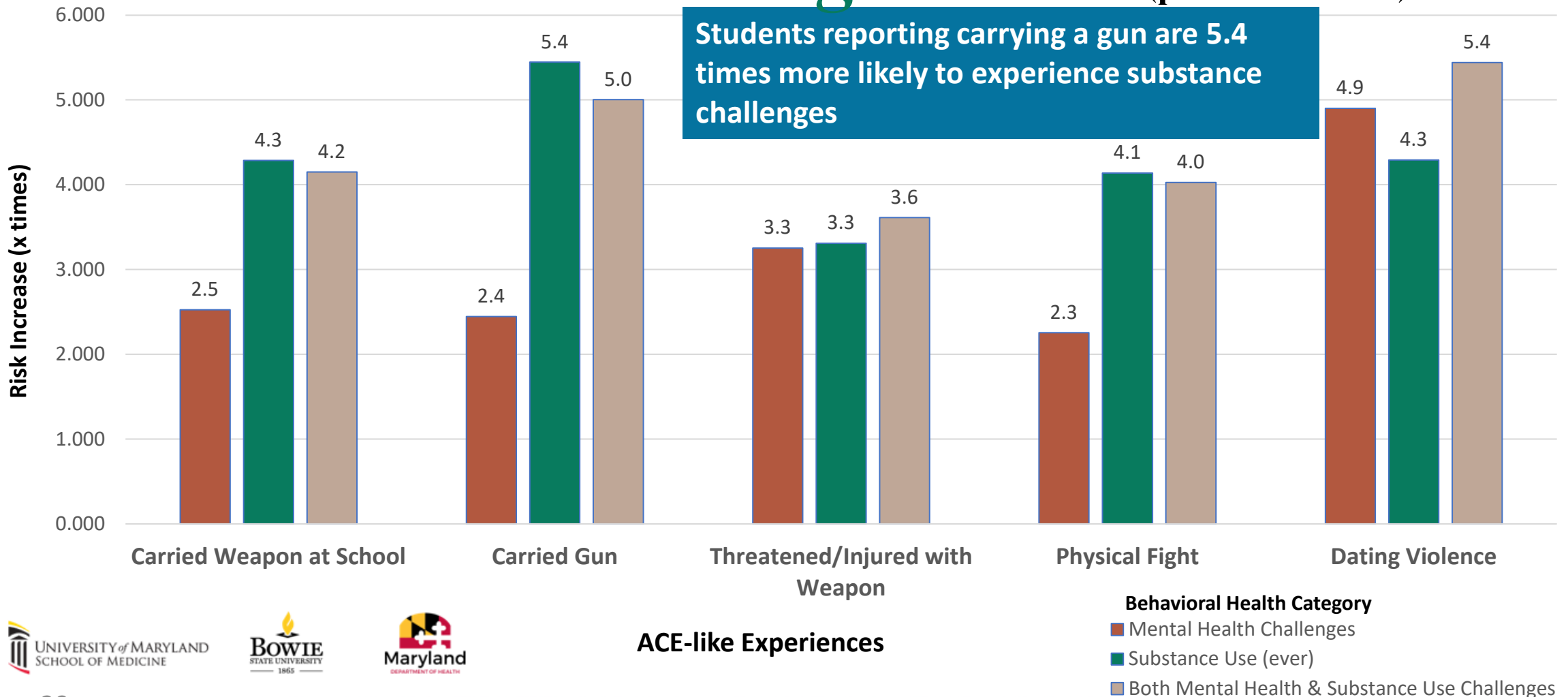
# Behavioral Health among Students



# ACE-like Experiences and Behavioral Health in High School (past 12 months)

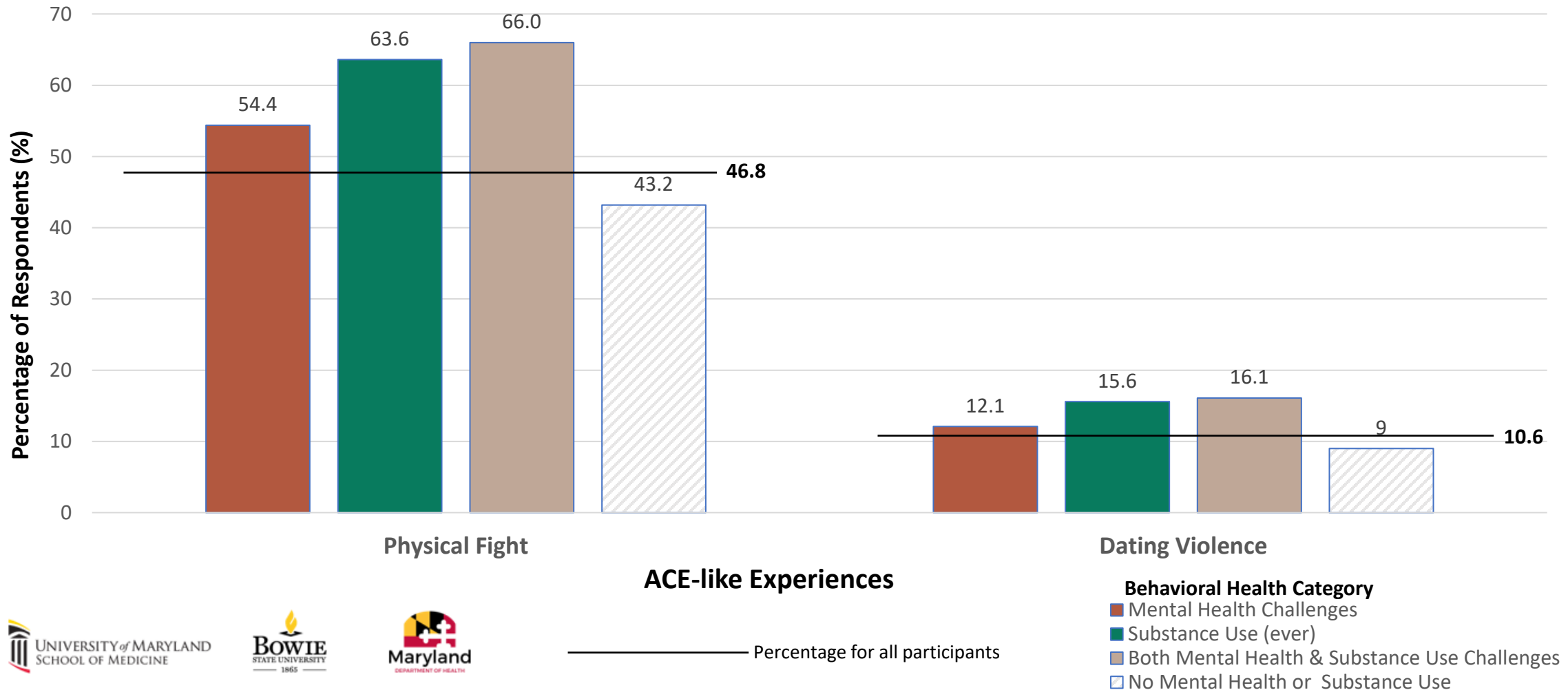


# ACE-like Experiences and Increased Risk with Behavioral Health in High School (past 12 months)



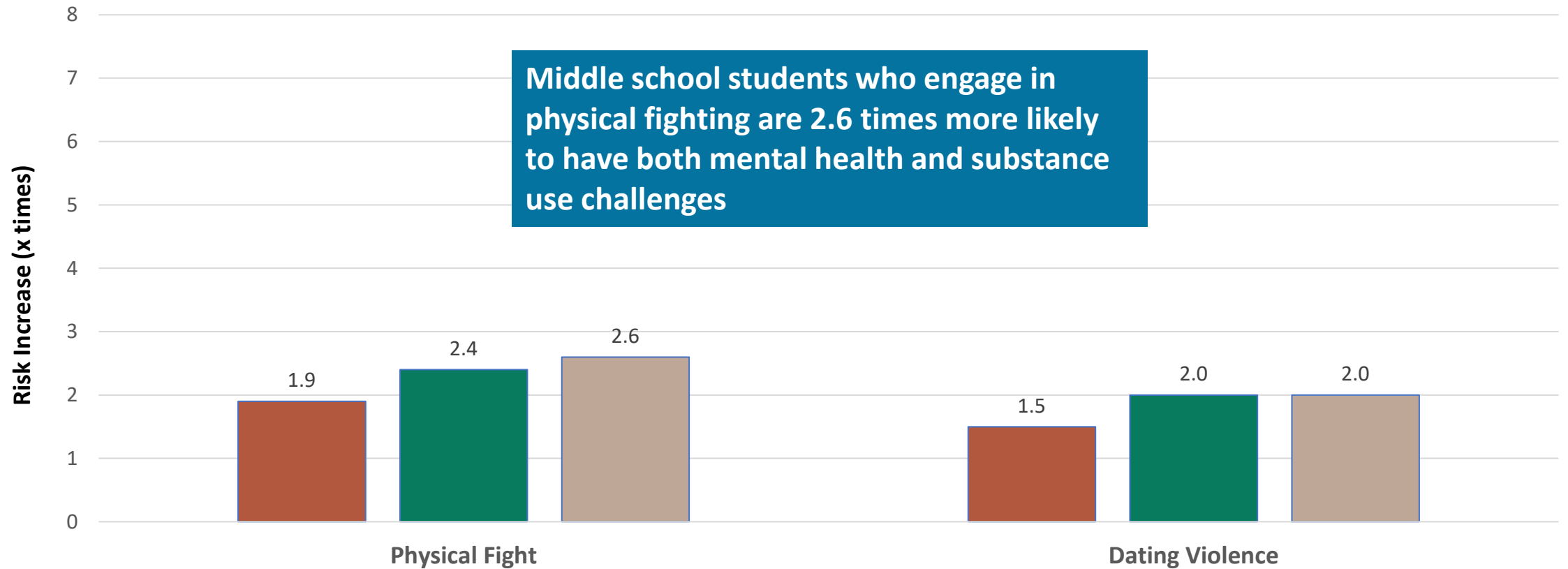
ACE-like Experiences

# ACE-like Experiences and Behavioral Health in Middle School (ever)





# ACE-like Experiences and Increased Risk with Behavioral Health Risks in Middle School (ever)



Middle school students who engage in physical fighting are 2.6 times more likely to have both mental health and substance use challenges

## ACE-like Experiences

### Behavioral Health Category

- Mental Health Challenges
- Substance Use (ever)
- Both Mental Health & Substance Use Challenges

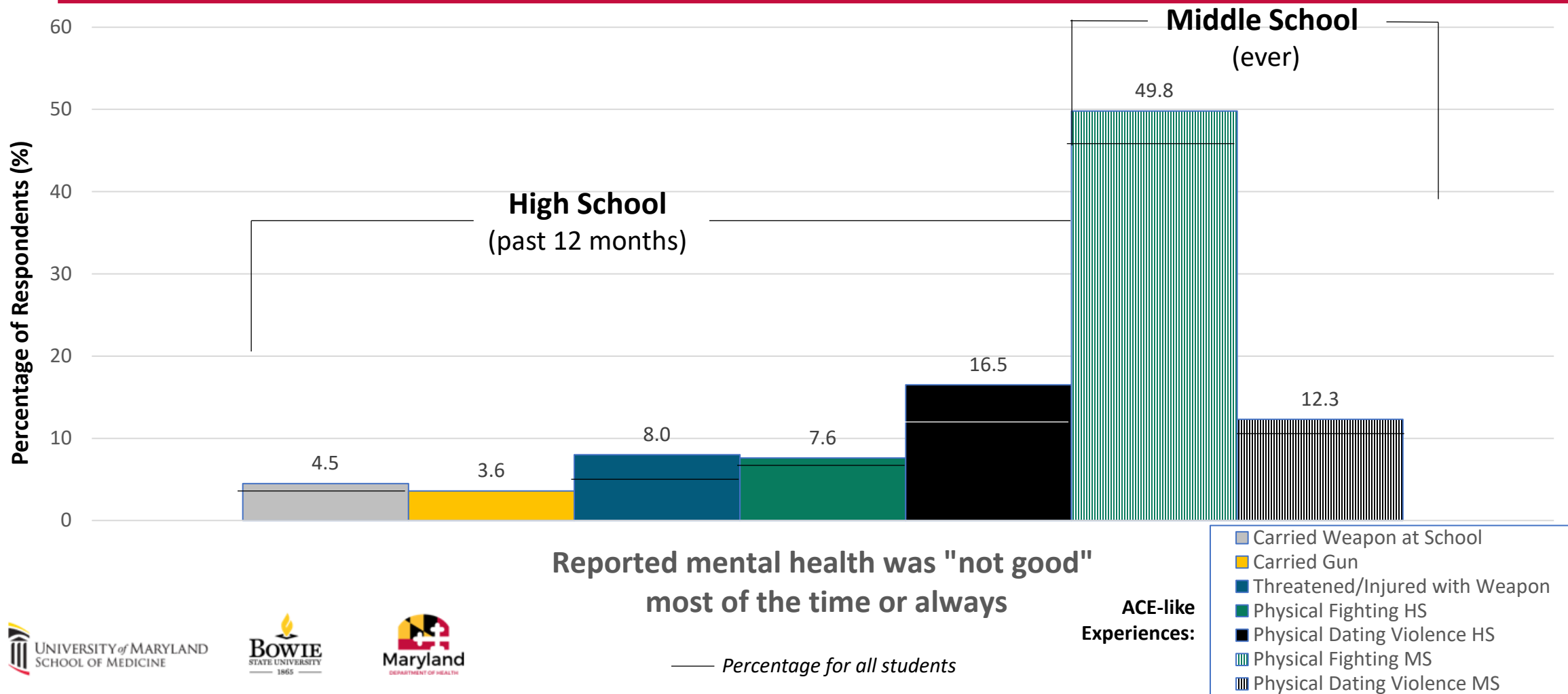


# Building Healing Behavioral Health Systems:

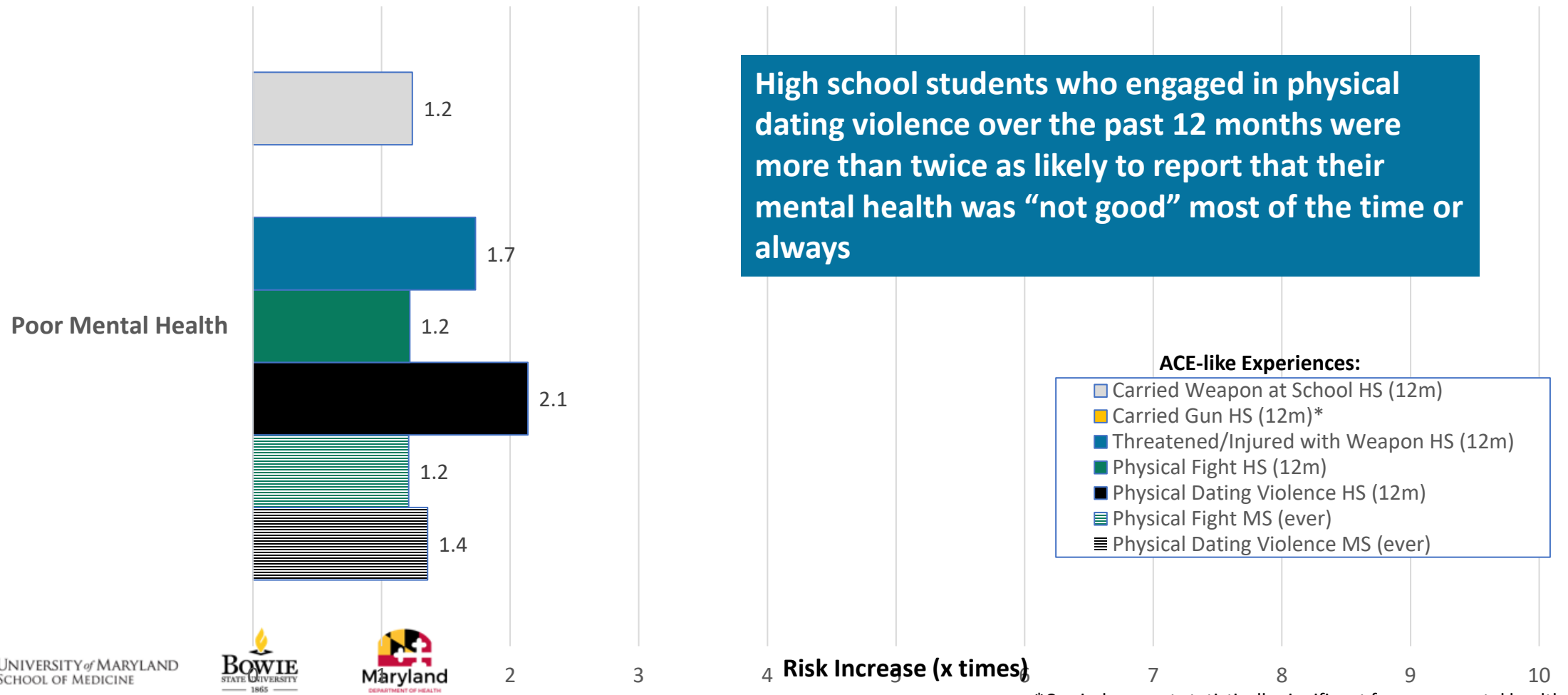
Mental Health Indicators and  
ACE-like Experiences



# Poor Mental Health and ACE-like Experiences



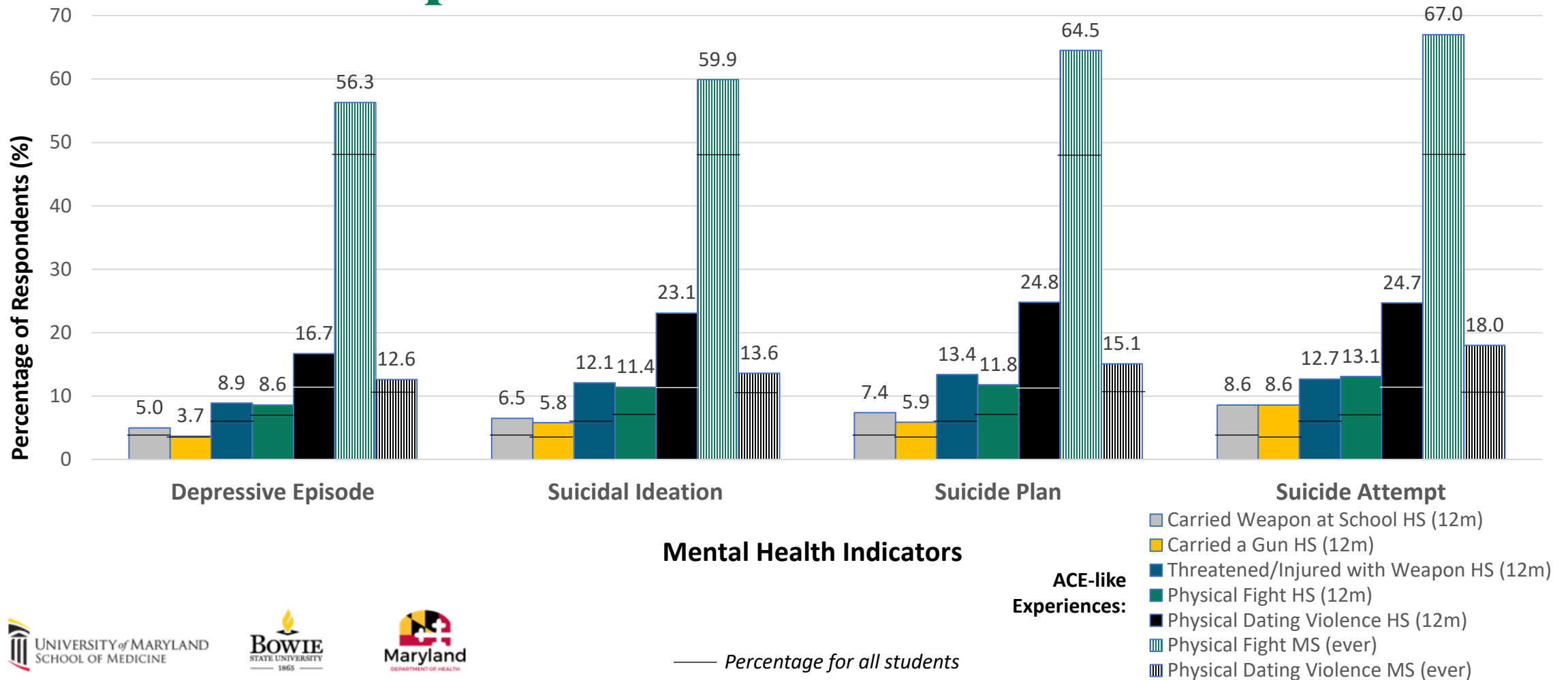
# ACE-like Experiences and Increased Risk with Poor Mental Health



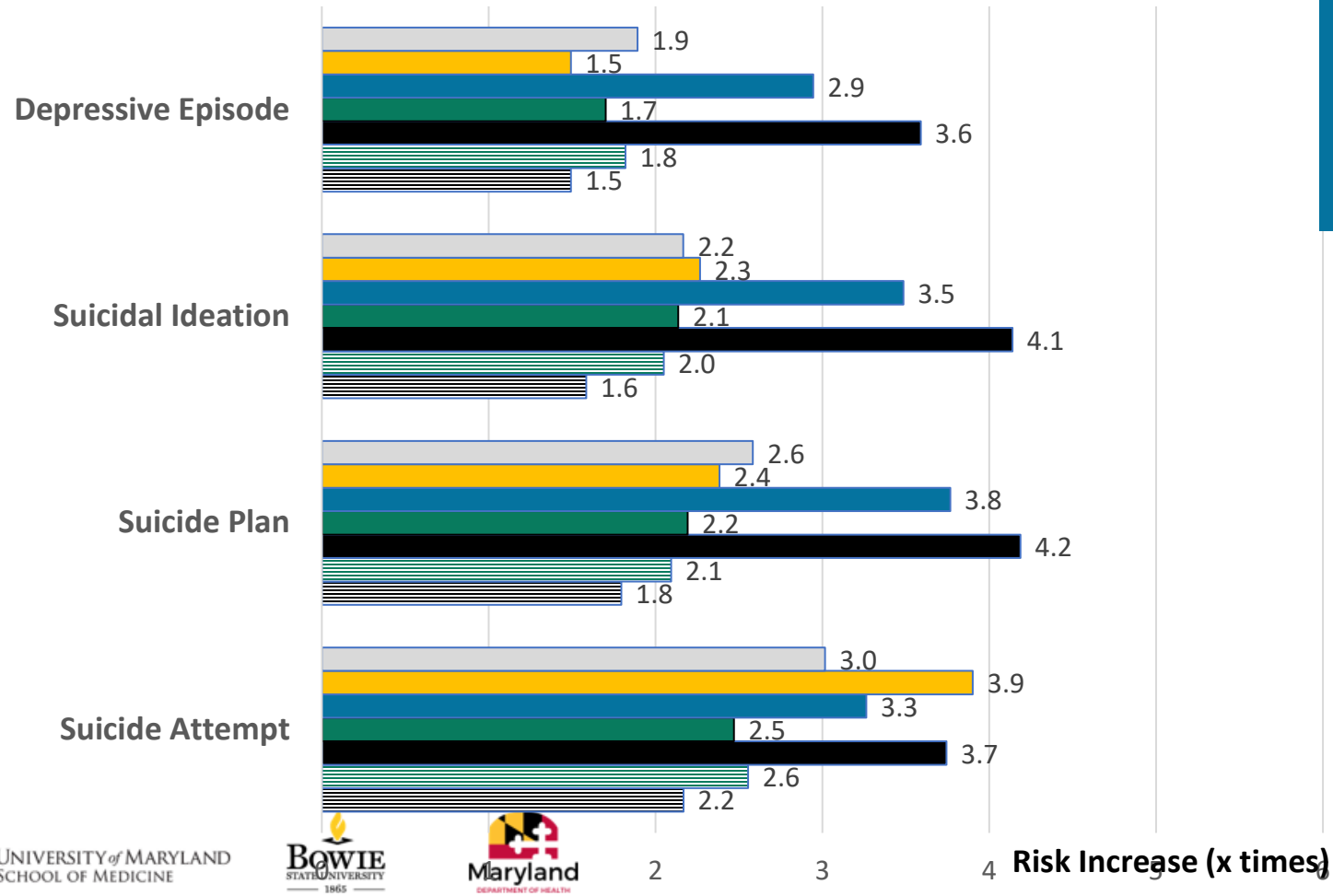
High school students who engaged in physical dating violence over the past 12 months were more than twice as likely to report that their mental health was “not good” most of the time or always



# Mental Health Indicators and ACE-like Experiences



# ACE-like Experiences and Increased Risk with Mental Health Challenges



Physical dating violence in high school students is strongly associated with increased risk for all mental health indicators by 3.6-4.2 times

- ACE-like Experience:**
- Carried Weapon at School HS (12m)
  - Carried Gun HS (12m)
  - Threatened/Injured with Weapon HS (12m)
  - Physical Fight HS (12m)
  - Physical Dating Violence HS (12m)
  - Physical Fight MS (ever)
  - Physical Dating Violence MS (ever)

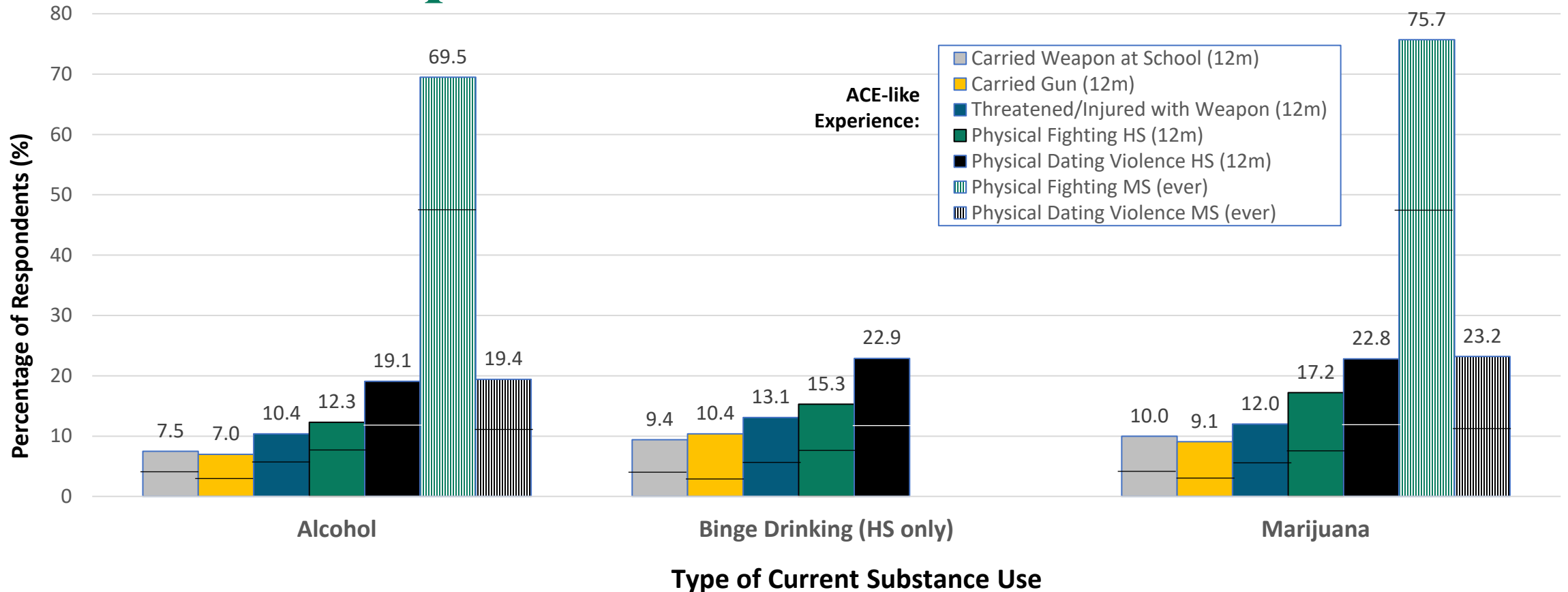


# Building Healing Behavioral Health Systems:

Substance Use and  
ACE-like Experiences

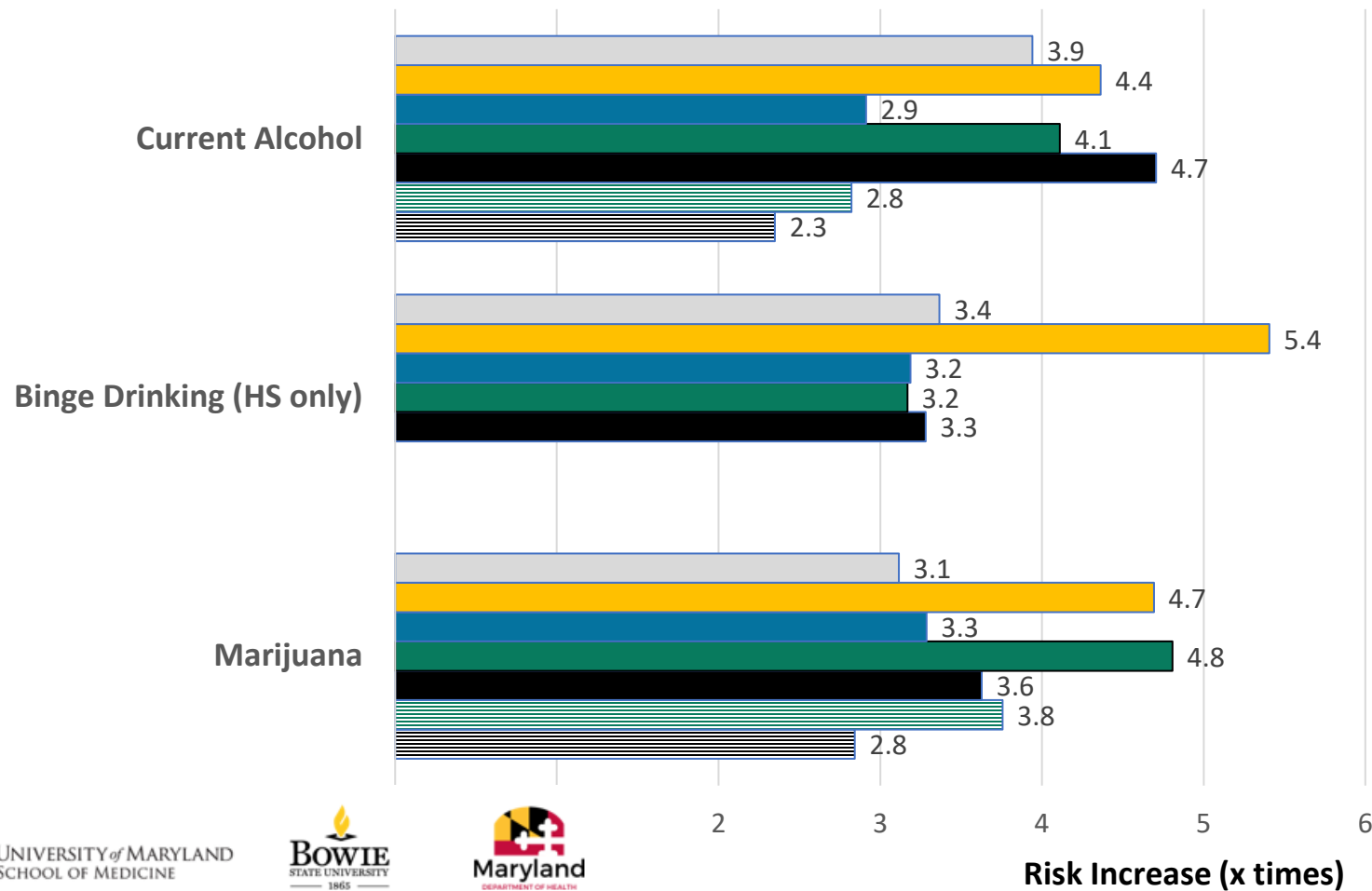


# Current Substance Use and ACE-like Experiences





# ACE-like Experiences and Increased Risk with Current Substance Use



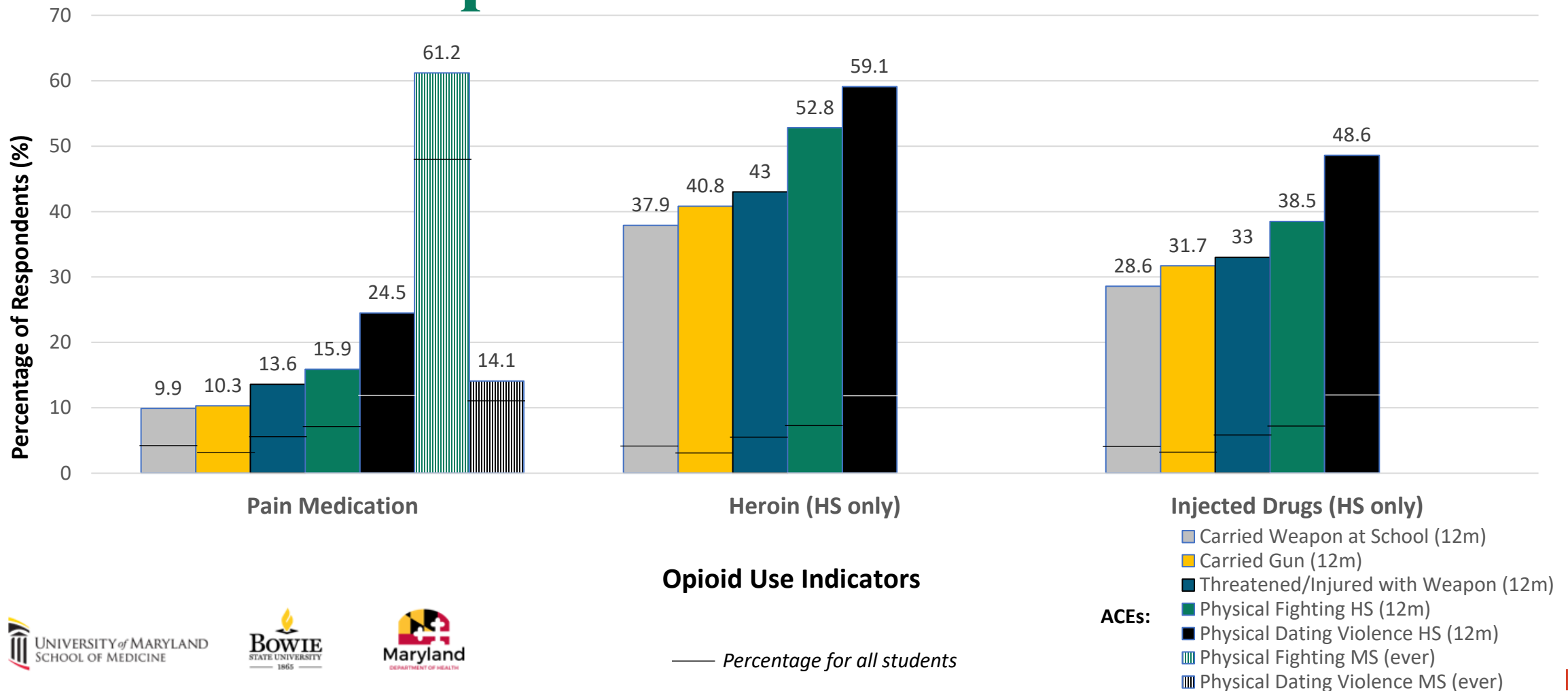
Carrying a gun in the past 12 months is associated with a higher risk of binge drinking by 5.4 times in high school students

Physical fighting use is associated with higher risk of marijuana use by almost 5 times in high school students

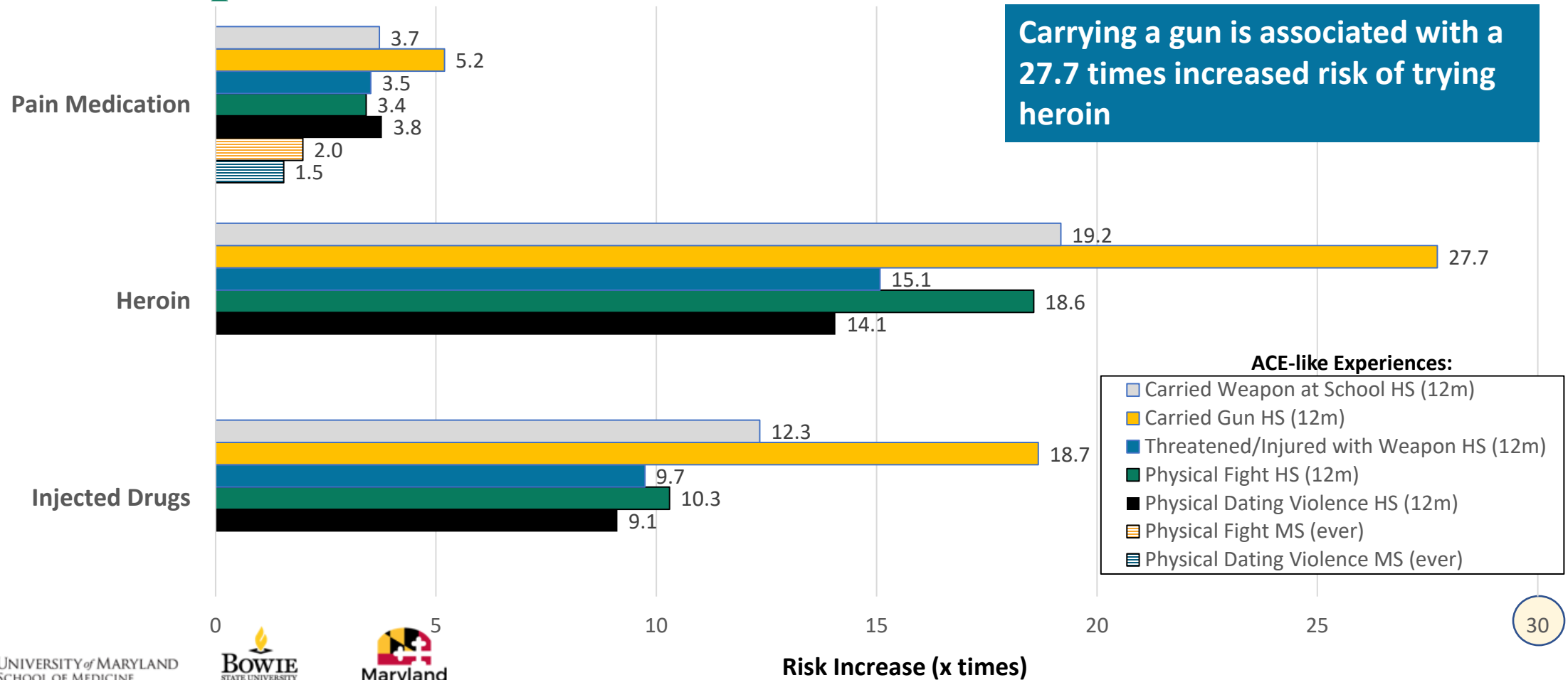
### ACE-like Experience:

- Carried Weapon at School HS (12m)
- Carried Gun HS (12m)
- Threatened/Injured with Weapon HS (12m)
- Physical Fight HS (12m)
- Physical Dating Violence HS (12m)
- Physical Fight MS (ever)
- Physical Dating Violence MS (ever)

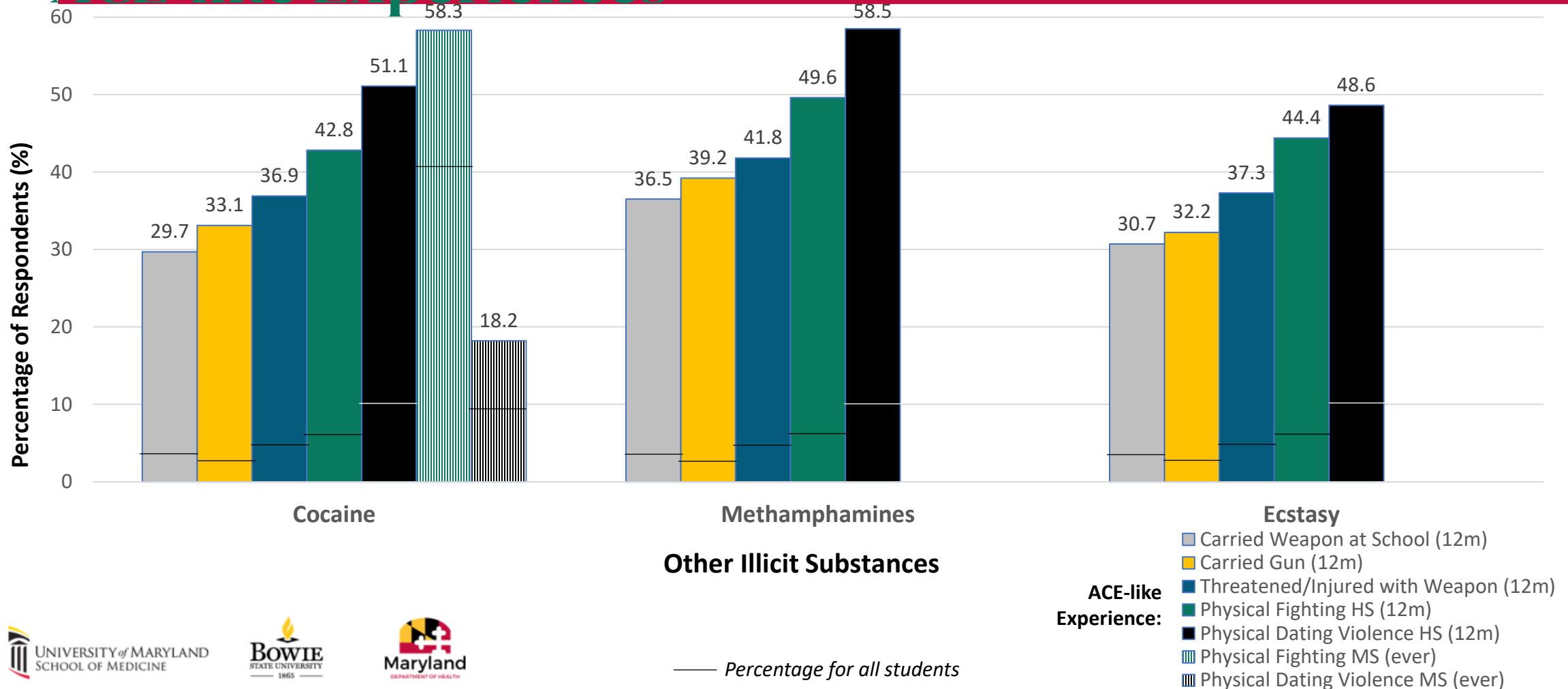
# Opioid Use (ever) and ACE-like Experiences



# ACE-like Experiences and Increased Risk with Opioid Use (ever)

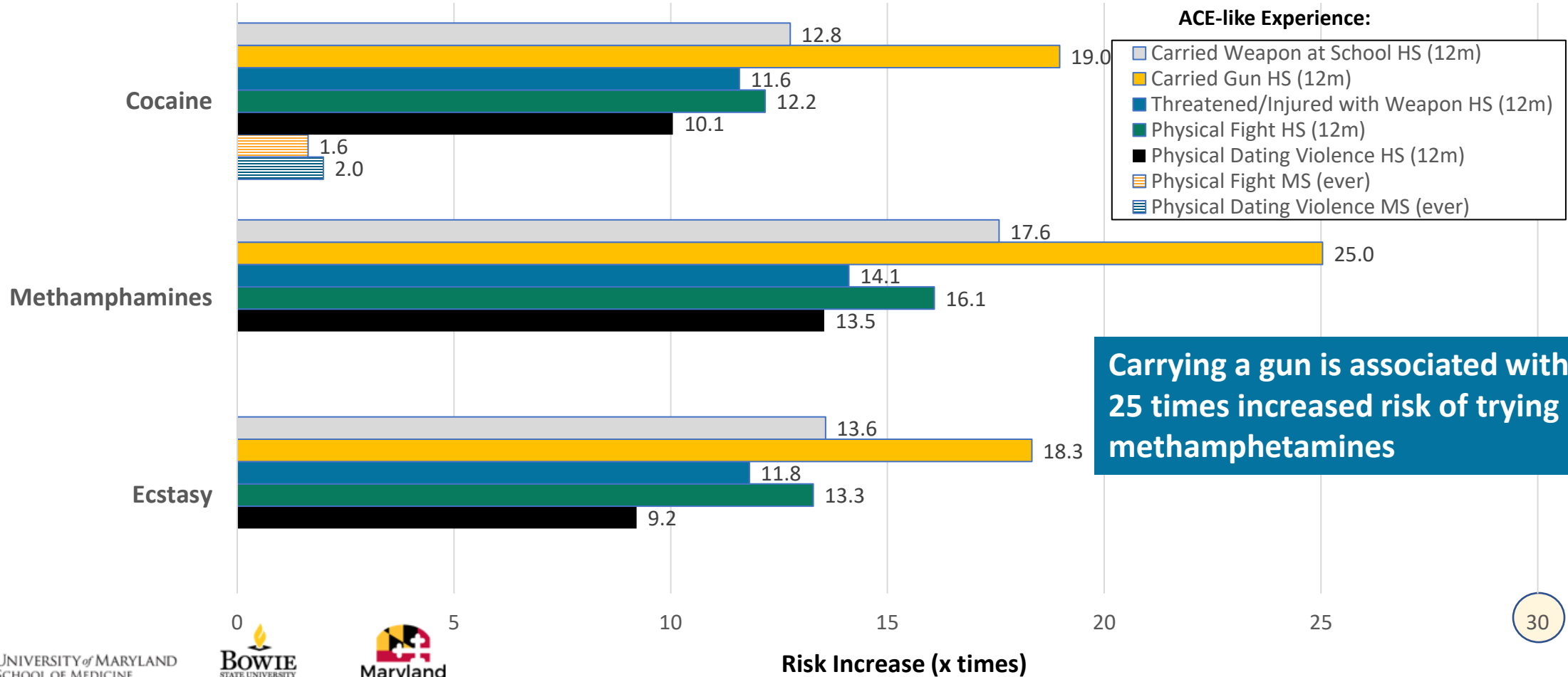


# Other Illicit Substance Use (ever) and ACE-like Experiences





# ACE-like Experiences and Increased Risk with Other Illicit Substance Use (ever)





# Building Healing Behavioral Health Systems:

Summary of Behavioral Health Impact by ACE-like Experience



# Summary of Behavioral Health Impact by ACE: Carried a Weapon on School Property (High School Only)



**4%**  
of high school students  
**Carried a Weapon**  
on school property  
In the past 12 months

Students who have experienced emotional abuse are **4.3 times** more likely to experience **Substance Use Challenges**



They are **3 times** more likely to **Attempt Suicide**



**Safety at School (and to/from)** is associated with decreased risk of carrying a weapon on school property for individuals with behavioral health challenges by

**79%**



# Summary of Behavioral Health Impact by ACE: Carried a Gun Anywhere (High School Only)

Students who carried a gun are

**5.4 times**

more likely to experience  
**Substance Use Challenges**



**3.6%**

of high school students

**Carried a Gun**

in the past 12 months

excluding target practice or hunting



They are also **28 times**  
more likely to  
**try heroin**



**Safety at School (and to/from)** is associated with decreased risk of carrying a gun for individuals with behavioral health challenges by

**83%**



# Summary of Behavioral Health Impact by ACE: Threatened or Injured with a Weapon on School Property (High School Only)



Students who are threatened or injured with a weapon are

**3.6 times**  
more likely to experience  
**Both Mental Health and  
Substance Use Challenges**



**6%**  
of high school students were  
**Threatened or Injured  
with a Weapon**  
on school property  
(past 12 months)



They are also **4.6 times**  
more likely to  
**Make a Suicide Attempt**

**Safety at School (and  
to/from)** is associated with  
decreased risk of being  
threatened or injured with a  
weapon for individuals with  
behavioral health challenges  
by

**83%**

# Summary of Behavioral Health Impact by ACE: In a Physical Fight on School Property (High School only)

High school students who were in a physical fight are

**2.6 times**

more likely to experience  
**Both Substance Use and Mental Health Challenges**



**Safety at School (and to/from)** is associated with decreased risk of physical fighting on school property for individuals with behavioral health challenges by

**77%**



**7%**

of high school students were in a

**Physical Fight**

on school property  
(past 12 months)



They are **4 times** more likely to **make a suicide plan** and **15 times** more likely to **try heroin**



# Summary of Behavioral Health Impact by ACE: In a Physical Fight at Any Location (Middle School only)

Middle school students who were  
in a physical fight are

**2.6 times**

more likely to experience  
**Both Substance Use and Mental  
Health Challenges**



**47%**

of middle school students  
were in a

**Physical Fight**

at any location (ever)



They are **2.6 times** more likely to  
**attempt suicide** and **3.8 times**  
more likely to **use marijuana**



**Food Security**

is associated with decreased  
risk of physical fighting for  
individuals with behavioral  
health challenges by

**31%**

# Summary of Behavioral Health Impact by ACE: Experienced Physical Dating Violence (High School only)

High school students who experienced physical dating violence are



**5.4 times**  
more likely to experience  
**Both Mental Health and  
Substance use Challenges**



**11%**  
of high school students who  
date experienced  
**Physical Dating Violence**  
(past 12 months)

They are **4.2 times**  
more likely to **make a suicide plan**  
and **14 times**  
more likely to **try heroin**

**Safety at School (and  
to/from)** is associated with  
decreased risk of physical  
dating violence for individuals  
with behavioral health  
challenges by

**71%**



# Summary of Behavioral Health Impact by ACE: Experienced Physical Dating Violence (Middle School only)



**10.6%**

of middle school students who  
date experienced  
**Physical Dating Violence**  
(ever)

Students who experience physical  
dating violence are **2 times**  
more likely to experience  
**Both Mental Health and  
Substance use Challenges**



They are **2.6 times**  
more likely to **make a suicide attempt**  
and **3.8 times**  
more likely to **use marijuana**



**Food Security** is associated  
with decreased risk of  
physical dating violence for  
individuals with behavioral  
health challenges by

**33%**



# Building Healing Behavioral Health Systems:

Summary of Behavioral Health Findings and ACE-like Experiences



# Summary of Findings

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- More students with behavioral health challenges experience all ACE-like experiences than students without behavioral health challenges.
- Almost all relationships across ACE-like experiences, PCEs and behavioral health indicators were statistically significant, showing a strong relationship of the impact of ACE-like experiences and PCEs on behavioral health in middle school and high school students.



# Summary of findings: Positive Childhood Experiences (PCEs) and ACE-like Experiences

- PCEs are associated with reducing risk introduced by specific ACE-like Experiences by up to 13% in high school students over the past 12 months and 54% in middle school students ever
  - The highest proportion of high school students experiencing PCEs also experienced physical dating violence within the past 12 months (9%-13%).
  - The highest proportion of middle school students experiencing PCEs report ever having been in a physical fight (51%-54%).
- Physical fighting is the ACE-like experience most impacted by PCEs (26-83%), and Safety to and From School is the PCE most impacting ACE-like experiences (71-83%).



# Summary of findings:

## Mental Health Indicators and ACE-like Experiences

- More high school students with physical dating violence within the past 12 months reported experiencing all mental health indicators than any other ACE-like experience.
- More middle school students ever having been in a physical fight reported having experienced all mental health indicators than any other ACE-like experience.
- Specific ACE-like experiences are associated with increasing risk for mental health challenges by up to 4.2 times.
- Physical dating violence within the past 12 months was most often highly associated with poor mental health in high school students (2.1 times) and middle school students (1.4 times).
- Physical dating violence in high school students was most strongly associated with mental health challenges (3.6-4.2 times), with the exception of suicide attempt, which was most strongly associated with carrying a gun at 3.9%.
- Middle school students ever being in a physical fight were most strongly associated with mental health challenges (1.8-2.2 times)

# Summary of findings:

## Current Substance Use and ACE-like Experiences

- More high school students with physical dating violence in the past 12 months (19-23%) reported experiencing current substance use indicators than any other ACE-like experience.
- More middle school students ever having been in an physical fight (69-76%) reported experiencing current substance use indicators than any other ACE-like experience.
- Specific ACE-like experiences are associated with increasing risk for current alcohol or marijuana use by 2.3 to 5.4 times.
- Carrying a gun in high school strongly associated with higher risk of high school students' current substance by 4.4 – 5.4 times.
- Physical fighting is most strongly associated with current marijuana use in high school (4.8 times) and middle school (3.8 times).

## Summary of findings:

# Lifetime Pain Medication Misuse and ACE-like Experiences

- Physical dating violence within the past 12 months in high school (25%) and physical fighting ever in middle school (61%) were the most frequently reported ACE-like experience with pain medication misuse.
- Specific ACE-like experiences are associated with increased risk for ever misusing pain medications by 1.5-5.2 times.
- Carrying a gun over the past 12 months is most strongly associated for high school students with trying non-prescribed pain medications at 5.2 times more likely.
- Physical fighting ever for middle school students is most strongly associated for middle school students with trying non-prescribed pain medications at 2 times more likely.



## Summary of findings: Lifetime Heroin and Injected Drugs and ACE-like Experiences

- Physical dating violence within the past 12 months in high school was the most frequently reported ACEs with trying heroin (59%) and injected drugs (49%).
- Specific ACE-like experiences for high school students are associated with increasing risk for trying heroin or injected drugs 9.1-27.7 times.
- High school students carrying a gun over the past 12 months is most strongly associated with trying
  - heroin (27.7 times)
  - injected drugs (18.7 times).



## Summary of findings:

### Lifetime Other Illicit Substance Use and ACE-like Experiences

- Physical dating violence in the past 12 months was the most frequently reported ACE-like experience for high school students who tried cocaine (51%), methamphetamines (59%) or ecstasy (49%).
- Ever participating in a physical fight was the most frequently reported ACE-like experience for middle school students who tried cocaine (58%)
- Specific ACE-like experiences are associated with increasing risk for ever trying other illicit substances 1.2-25 times.
- Carrying a gun in the past 12 months for high school students is most strongly associated with higher risk trying illicit substances (18-25 times) followed by carrying a weapon at school (13-18 times)



# Building Healing Behavioral Health Systems:

Potential Action Steps



# Potential Action Steps: Behavioral Health Organizations

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- Develop a comprehensive approach to foster trauma informed organizational policies and practices in behavioral health. This would include activities such as:
  - Completing a Trauma Informed Organizational Assessment
  - Using data to inform programming and practices
  - Partnering with people with lived experience
  - Promoting Trauma-Informed screening for ACE-like experiences in high-risk groups and providing appropriate counseling and supports.

# Potential Action Steps: Professional Support and Development



- Build a trauma informed workforce that is trained to promote positive well-being for the entire workforce.
- Provide training and professional development for public behavioral health workforce clinicians and administrators around trauma, ACE-like experiences, PCEs and related topics such as anti-racism, protective factors, and the impact of trauma on families.



# Potential Action Steps: Positive Childhood Experiences (PCEs)



- Disseminate what we know about PCEs to influence policies across systems to increase PCEs as a prevention strategy.
- Promote awareness on the impact of positive childhood experiences to mitigate ACE-like experiences.
- Develop resources for people providing direct services on how they can support families in creating opportunities for facilitating positive experiences.
  - Such as connecting parents/caregivers to programs that help support healthy development like the Nurse Family Partnership Program and Early Head Start programs

# Potential Action Steps: Interventions

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- Target behavioral health interventions for individuals with physical fighting and physical dating violence at the earliest ages, including:
  - Providing interventions such as Functional Family Therapy and Multisystemic Therapy help engage youth's network of support and reduce risk for violent behaviors, substance use, and more and help promote protective factors.
  - Offering anger management and conflict resolution skills
  - Educating students to identify physical dating violence and available resources if dating violence occurs
  - Promoting meeting basic needs, such as food security, as a prevention strategy to mitigate risk of being exposed to physical fighting and physical dating violence.

# Potential Action Steps: Interventions

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- Include assessment of ACE-like experiences, such as physical dating violence, carrying weapons or being threatened by weapons in both mental health and substance use behavioral health settings.
- Offer education, referrals and interventions for preventing or mitigating risks for physical violence in behavioral health settings, such as the Strengthening Families Program
- Offer trauma-focused treatment options following exposure to violence or another traumatic event, such as Trauma-Focused Cognitive Behavioral Therapy.
  - Schools can offer Cognitive Behavioral Intervention for Trauma in Schools (CBITS) to help reduce barriers to treatment access.



# Potential Action Steps: Beyond Behavioral Health Systems



- Address community social problems that contribute to ACE-like experiences, such as physical fighting, physical dating violence, and carrying a weapon.
  - Improvements to household financial security through earned income tax credits and child tax credits
  - Increase access to safe & affordable housing
  - Increase food security
- Increase connection among youth and caring adults such as teachers, coaches, neighbors
  - This can be done through mentorship programs, such as Big Brothers Big Sisters of America (BBBS) and the availability of additional free and low-cost extracurricular activities



# Potential Action Steps: Beyond Behavioral Health Systems



- Incorporate interventions and prevention efforts across a broad array of service organizations including behavioral health, educational system, domestic violence, child and adult protective services, community outreach organizations, and more.
  - School-based programs aimed at developing skills to prevent violence & engage in healthy behaviors, such as the Good Behavior Game, Promoting Alternative THinking Strategies (PATHS), and Positive Action
  - Community outreach efforts aimed at mediation of conflict, promoting nonviolence and providing community supports. Examples include Cure Violence and Safe Streets Baltimore.

# Potential Action Steps: Beyond Behavioral Health Systems



- Implement initiatives to promote safer environments to/from and at school to mitigate risks introduced by ACE-like experiences
  - Physical and social environment changes such as increased street lighting, community green spaces, community clean-ups, and other community events
  - Continue and expand initiatives such as the Safe Routes to School Program
- Educate the public about the relationships between ACE-like experiences and behavioral health challenges.
- Increase awareness of relationship violence in education and school-based programs
  - Implement programs such as The Fourth R and The Youth Relationships Project
- Increase funding for trauma-informed school mental health professionals to help address student behavioral health needs within the school system

# Potential Action Steps: Beyond Behavioral Health Systems



- Incorporate behavioral health screenings with interventions for youth experiencing “behavioral” problems such as physical fighting or carrying a weapon
- Provide referrals to appropriate evaluation and treatment for both mental health and substance use challenges for youth with ACE-like experiences
- Create resources, such as infographics, to share this information with parents and families along with strategies to assist students

# Potential Action Steps: Data to Action Toolkit

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- Integrate this report into the Building Healing Behavioral Health Systems (BHBHS) Data-to-Action toolkit

<https://www.healingsystemsdata.org/>







Please contact us! :)

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# Methods: Identifying Individuals with Behavioral Health Challenges

Mental Health
Mental Health Quality of Life
Depressive Episode
Suicidal Ideation
Suicide Plan
Suicide Attempt

Substance Use (ever)
Any Current Substance Use
Prescription Pain Medicine
Cocaine
Heroin*
Methamphetamines*
Ecstasy*



Current Substance Use
Alcohol Use
Binge Drinking*
Marijuana Use

\*available in YRBS/YTS High School data only



# Methods: Defining Behavioral Health

**Mental Health Challenges:** Individuals meeting any of the criteria below

Category	Question	Response
<b>Mental Health Quality of Life</b>	During past 30 days, how often was your mental health not good? (Poor mental health includes stress, anxiety, and depression.)	“Most of the Time” or “Always”
<b>Depressive Episode</b>	During the past 12 months, did you ever feel so sad or hopeless almost every day for <b>two weeks or more in a row</b> that you stopped doing some usual activities?	“Yes”
<b>Suicidal Ideation</b>	During the past 12 months, did you ever <b>seriously</b> consider attempting suicide?	“Yes”
<b>Suicide Plan</b>	During the past 12 months, did you make a plan about how you would attempt suicide?	“Yes”
<b>Suicide Attempt</b>	During the past 12 months, how many times did you actually attempt suicide?	1 or more

# Methods: Defining Behavioral Health

**Current Substance Use:** Individuals meeting any of the criteria below

Category	Question	Response
<b>Alcohol Use</b>	During the past 30 days, on how many days did you have at least one drink of alcohol?	More than 2 days
<b>Binge Drinking*</b>	During the past 30 days, on how many days did you have <b>4</b> or more drinks of alcohol in a row, that is, within a couple of hours (if you are <b>female</b> ) or <b>5</b> or more drinks of alcohol in a row, that is, within a couple of hours (if you are <b>male</b> )?	“One or more days”
<b>Marijuana Use</b>	During the past 30 days, how many times did you use marijuana?	“One or more days”

# Methods: Defining Behavioral Health

**Substance Use Ever:** Individuals meeting current substance use or any of the criteria below

Category	Question	Response
<b>Prescription Pain Medicine</b>	During your life, how many times have you taken prescription pain medicine without a doctor's prescription or differently than how a doctor told you to use it?	"One or more times"
<b>Cocaine</b>	During your life, how many times have you used any form of cocaine, including powder, crack, or freebase?	"One or more times"
<b>Heroin*</b>	During your life, how many times have you used heroin (also called smack, junk, or China White)?	"One or more times"
<b>Methamphetamines*</b>	During your life, how many times have you used methamphetamines (also called speed, crystal meth, crank, ice, or meth)?	"One or more times"
<b>Ecstasy*</b>	During your life, how many times have you used ecstasy (also called MDMA or Molly)?	"One or more times"