

The relationship between childhood socioeconomic position and Adverse Childhood Experiences (ACEs)

What was the research about?

This research set out to better understand the relationship between the socioeconomic circumstances in which children are raised and their risk of experiencing Adverse Childhood Experiences (ACEs). The research was conducted with colleagues at NHS Health Scotland and NHS Greater Glasgow and Clyde.

Background

ACEs refer to stressful events experienced during childhood such as abuse (physical, emotional or sexual), neglect (physical or emotional) or other 'household adversities' (e.g. living in a household where there is domestic abuse, substance use/addiction, parental separation, mental illness, or parental imprisonment). ACEs are associated with a greater risk of experiencing a range of negative outcomes in later life including physical and mental illness, relationship difficulties, violent behaviour, self harm, substance use and even early death. They have been shown to have a cumulative effect: the greater the number of ACEs a child experiences, the greater the risk of experiencing one or more of these negative outcomes.

These associations have been shown within a substantial body of evidence. We also know that the prevalence of ACEs is high: one recent study estimated that just under half the adult population in England had experienced at least one ACE, and other research has suggested a similar prevalence rate in the USA. As a result, ACEs have become a policy priority for many governments, including in Scotland.

However, there has been considerably less discussion and policy focus on what causes ACEs – and in particular on the role of childhood socioeconomic position (SEP) in understanding and addressing them. This is important, given that many of the negative outcomes discussed above are also influenced by poverty and other socioeconomic factors. The aim of this research was to better understand this by means of a detailed examination of the evidence.

What did we do?

We carried out a systematic review of the published literature (academic journal articles, papers, reports) on the topic. We looked for studies published since 1998 (when a key American study, which has influenced much of the subsequent research on ACEs, was produced) which explicitly examined the relationship between childhood SEP and the risk of experiencing ACEs. We assessed the quality of all the studies, extracted all relevant data from them, and then combined and summarised the results.

What did we find?

Although a vast amount of research has been published in recent years on the topic of ACEs, remarkably few of these studies have examined the relationship with childhood SEP. We found more evidence of this relationship in the (largely American) literature on the topic of 'child maltreatment'. Although this is a more specific issue, the definition overlaps considerably with 'standard' definitions of ACEs used in different studies. However, even including those maltreatment-based analyses, we only found 35 'relevant' papers (i.e. ones which matched our search inclusion criteria). We assessed 18 of these studies to be of high quality.

Despite these limitations, the key finding from the review was that virtually all the evidence published to date shows a clear relationship between the socioeconomic circumstances in which children are raised and their risk of experiencing ACEs or maltreatment. Clear associations were shown between childhood SEP and ACEs/maltreatment in the vast majority of studies. The evidence of this was shown to hold true across different countries, different measures of SEP and ACEs, and the age at which ACEs are measured.

Two studies highlighted in our review are mentioned here as brief, illustrative, examples of what we found. First, a large study of all children born in Western Australia over a 15-year period showed that those born in the most disadvantaged neighbourhoods were over 14 times more likely to experience childhood adversity (defined as neglect and abuse) than those in the least disadvantaged areas. Second, in a national sample of Scottish children, those living in the poorest 20% of households were almost 12 times more likely to experience three or more ACEs by the age of eight compared with those in the highest 20% of households.

What does this mean?

The association between childhood SEP (e.g. poverty) and ACEs is clear – but is also under-researched. Importantly, this suggests that the role of SEP in childhood is not embedded into the understanding of what causes ACEs in much of the recent research – and the related policy discussions.

Given the predicted rise of child poverty in Scotland to almost 40% by 2031, policy and practice must continue to support those currently affected by ACEs **and** also prevent further adversity by addressing poverty and socioeconomic inequality.

This further emphasises the importance of ensuring the targets and commitments contained in the Child Poverty (Scotland) Act 2017 are met.

Where can I get more information?



Access the full systematic review: <https://jech.bmj.com/content/73/12/1087>



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Search 'ACEs' at www.gcph.co.uk