

# The Effects of Childhood Trauma across the Lifespan

## *Do childhood adverse events effect physical health in adults?*

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An adverse childhood experience (ACE) is an experience varying in severity, often chronically occur within a child's social environment causing harm/distress. Altering both the psychological and physical development of the child, leaving long lasting effects (World Health Organisation, 2013).

### Literature Review:

- ACE causes change to the physiological structure of the brain via the chronic arousal of a stress response leading to the activation of an underlying pathophysiological response linked to many disease processes (Leitch, 2017). Resulting in the disruption of both neuroendocrine, immune, nerve, and cellular function, also increasing inflammatory mediators (American Academy of Paediatrics, 2014).
- ACE leads to higher rates of heart disease, cancer, chronic lung disease, skeletal fractures and liver disease in adulthood and life expectancy is suggested to be 20 years lower (Leitch, 2017).
- ACE causes behavioural adaptations that manifest in the form of high-risk behaviours, antisocial mannerisms and deviance. With unhealthy coping machines often presenting in increased alcohol, drug, obesity and tobacco use. (World Health Organisation, 2013).
- Those who experienced ACE are more likely to provide an unstable home environment for their own children. Creating a negative cascade established in early life leading to poor health lifestyles and high-risk health behaviours which results in the manifestation of chronic illness (Kalmakis & Chandler, 2014)
- A higher level of bonding with family and environment has been shown to reduce the risk of chronic disease in adulthood by half (American Academy of Paediatrics, 2014).

### Key facts:

In New Zealand every year the Ministry for Vulnerable Children receives more than 150,000 reports of concern relating to children and their welfare (Unicef New Zealand, n.d).

The effects of ACE are subjective, each child is effected differently (Unicef New Zealand, n.d).

### Recommendations:

- Early intervention during the critical stages of a child's development where ACE are most damaging.
- Targeting both the child and the parents via education, support and intervention from both a government and primary level.
- Nurse-client partnerships, both community and hospital-based intervention programs and legislation is needed to raise awareness and provide information and education to the public to protect children (World Health Organisation, 2013).
- Multidisciplinary education on how to approach, monitor and intervene, providing professional skill and knowledge (World Health Organisation, 2013).

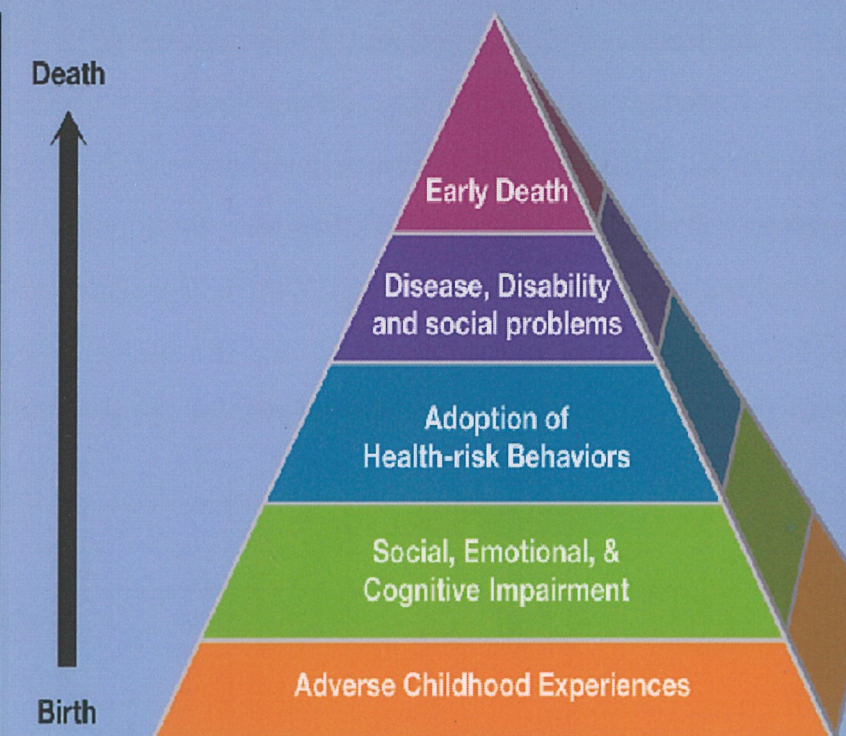


Figure 1: Understanding ACE (2018)

### Conclusion:

ACE are a predisposing factor for chronic conditions, health risk behaviours and premature death. Having knowledge surrounding ACE gives an insight into health across the lifespan and the foundations of physical health. Allowing for manipulation and intervention to prevent future damage. Increasing both health and life expectancy from an early age, allowing a break in the chain of adversity and intergenerational disparity that leads to poor physical health in adults.



For the purpose of this assignment, I have chosen to present my evidence-based research in the form of a poster. Presenting the information in a clear and concise way that is visually appealing to educate and raise awareness surrounding my clinical issue. This poster is intended to target both the general population and healthcare professionals. Providing evidenced-based research and recommendations that may indicate the need for further research and interest. Posters are one of the main forms seen to be vital in information/knowledge transfer and retention (Ilic & Rowe, 2013). Posters are a quick, effective way to convey information in a non-threatening way. Posters allow the information to be presented clearly and allows for simplicity, which proven to be more appealing and more likely to be read and observed by onlookers (University of Edinburgh, 2015). The ability to display a poster in public place allows to a talking point and for a person’s own interpretation (Ilic & Rowe, 2013). This can often spark an interest or further education around the issue, and is a quick effected way of raising an issue and promoting positive change (Schneider & Whitehead, 2013). The use of formatting and ensuring the flow of the information presented in the poster allows for the targeting of all academic groups.

PECOT category	Information relating to question	Explanation
Population	The population of my question is adults who as children have experienced adverse events.	I have chosen this population as I would like to look at the distinct correlation between childhood adverse experiences and the effect on physical health in adults
Exposure (intervention)	Adults who have experienced ACE.	I will be looking at articles that have researched whether or not adverse experiences in childhood have a relationship to physical health.
Comparison / Control	How those who have experienced adverse events as children have poor physical health outcomes compared with those who have not.	It will be interesting to see the comparison of physical health between those who have experienced ACEs and those who have not.
Outcome	The outcome of my research will highlight the link between ACE and the relationship this has to physical health in adulthood, allowing us to look at what can be done to improve health outcomes.	If ACE does have a negative effect on physical health in adulthood, then through evidence-based practice we can look at how these effects can be reduced and addressed within the healthcare sector.
Time	N/A	N/A

(Jackson 2006).

References

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University of Edinburgh. (2015). Presentations and posters. Retrieved from [http://www.ed.ac.uk/institute-academic-development/postgraduate/taught/ learning -resources/presentations](http://www.ed.ac.uk/institute-academic-development/postgraduate/taught/learning-resources/presentations)