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ADDICTION



Adverse Childhood Experiences and the Origins of Addiction

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October 17, 2011

Government of Alberta

Norlien Foundation

Alberta family wellness initiative

**ADVERSE CHILDHOOD EXPERIENCES
AND THE ORIGINS OF ADDICTION**

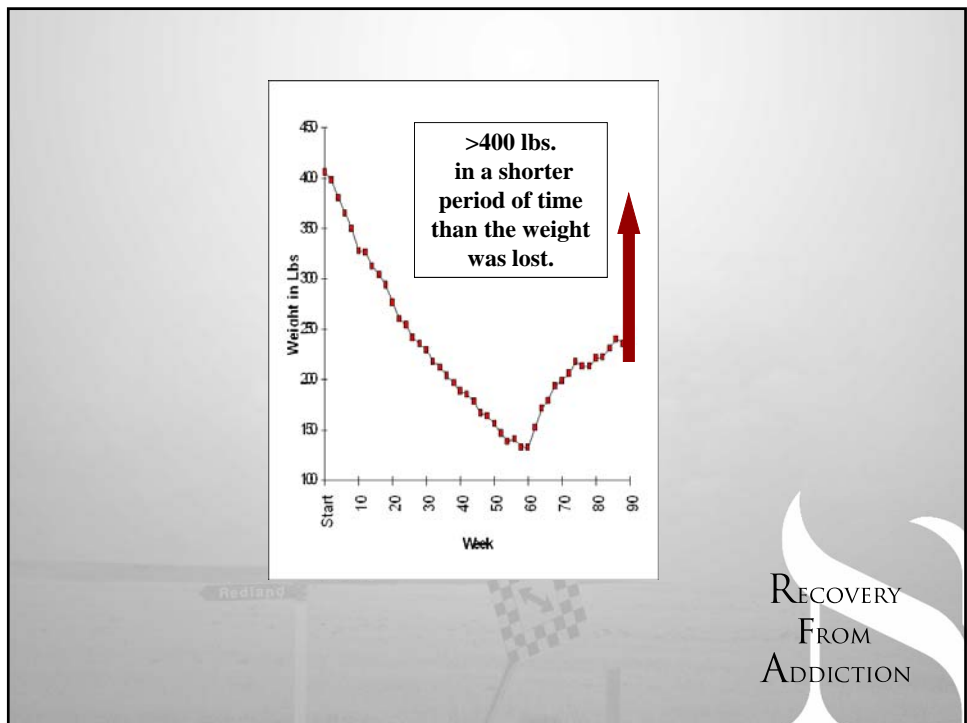
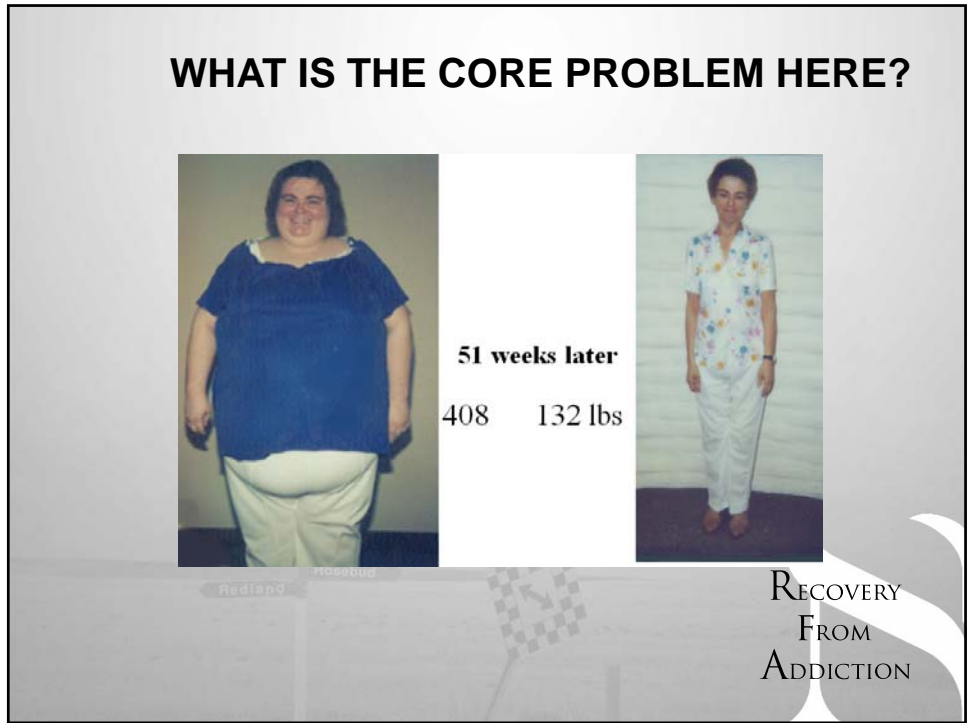


From a collaborative effort between
Kaiser Permanente and
the Centers for Disease Control

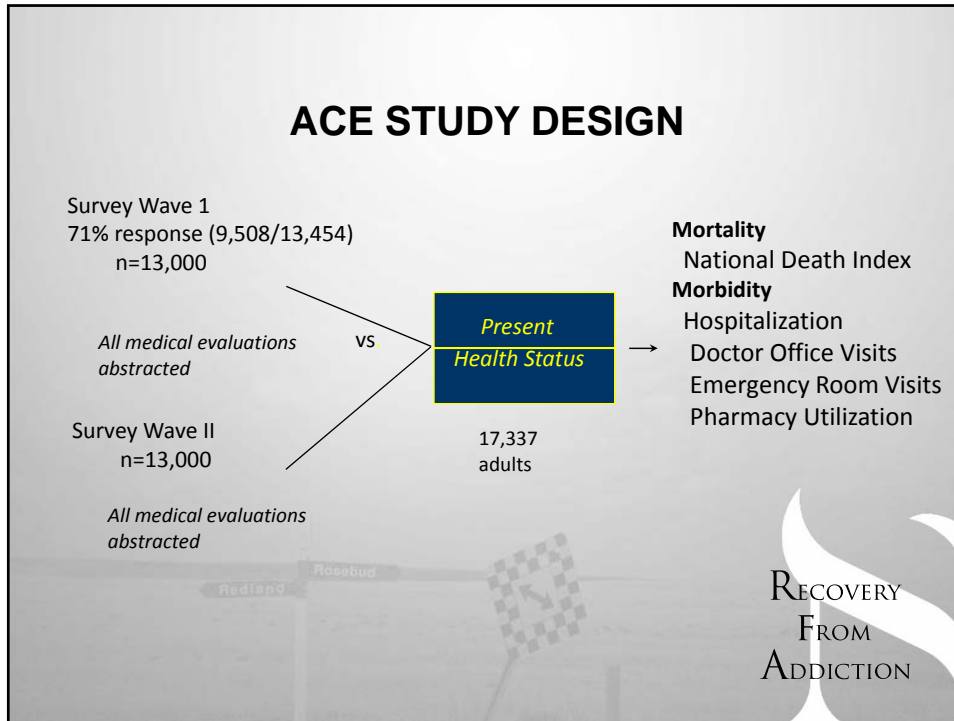
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PREVALENCE OF ADVERSE CHILDHOOD EXPERIENCES

Abuse, by Category	Prevalence (%)
Psychological (by parents)	11%
Physical (by parents)	28%
Sexual (anyone)	22%
Neglect, by Category	
Emotional	15%
Physical	10%
Household Dysfunction, by Category	
Alcoholism or drug use in home	27%
Loss of biological parent < age 18	23%
Depression or mental illness in home	17%
Mother treated violently	13%
Imprisoned household member	5%

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THE ADVERSE CHILDHOOD EXPERIENCES (ACE) STUDY

Summary of Findings:

- Adverse Childhood Experiences (ACEs) are common, threatening, & often denied.
- ACEs have a profound effect on later addiction, health risks, disease, and death.
- This combination makes ACEs the leading determinant of the health and social well-being of our nation, and the major factor underlying the addictions.

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THE ACE STUDY AND ADDICTION

The origins of the 17,337 person ACE Study lie in addiction. Its outcomes studied 4 different types of addiction:

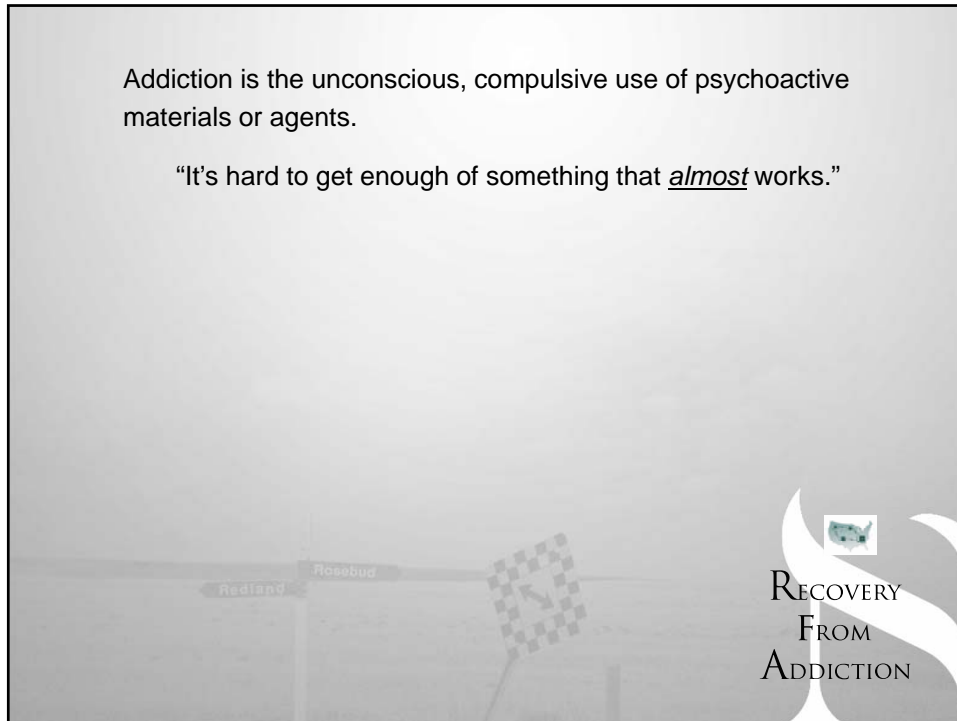
- Food
- Alcohol
- Nicotine
- IV drugs

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Addiction is the unconscious, compulsive use of psychoactive materials or agents.

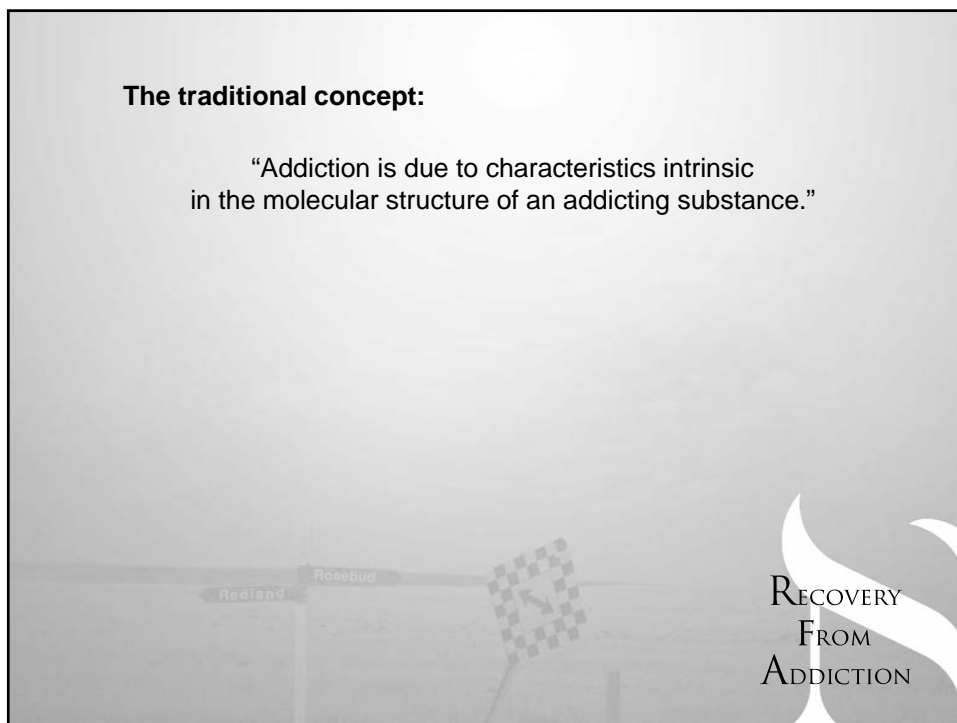
“It’s hard to get enough of something that almost works.”



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The traditional concept:

“Addiction is due to characteristics intrinsic in the molecular structure of an addicting substance.”



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The ACE Study shows that:

Addiction highly correlates with characteristics intrinsic to that individual's life experiences, particularly in childhood.

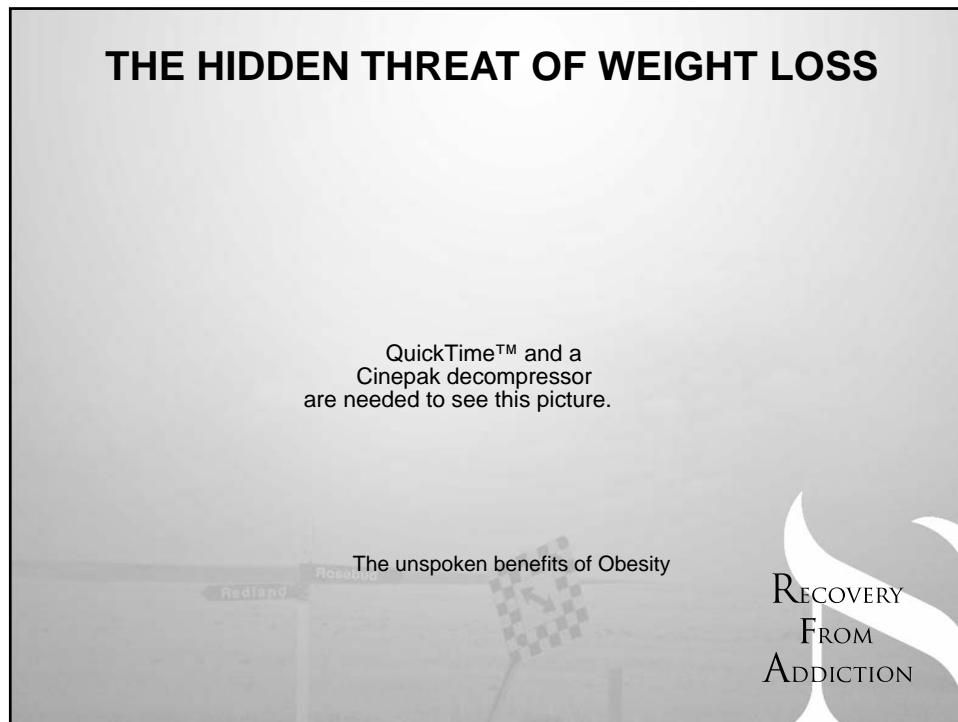
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EXAMPLES OF ADDICTION

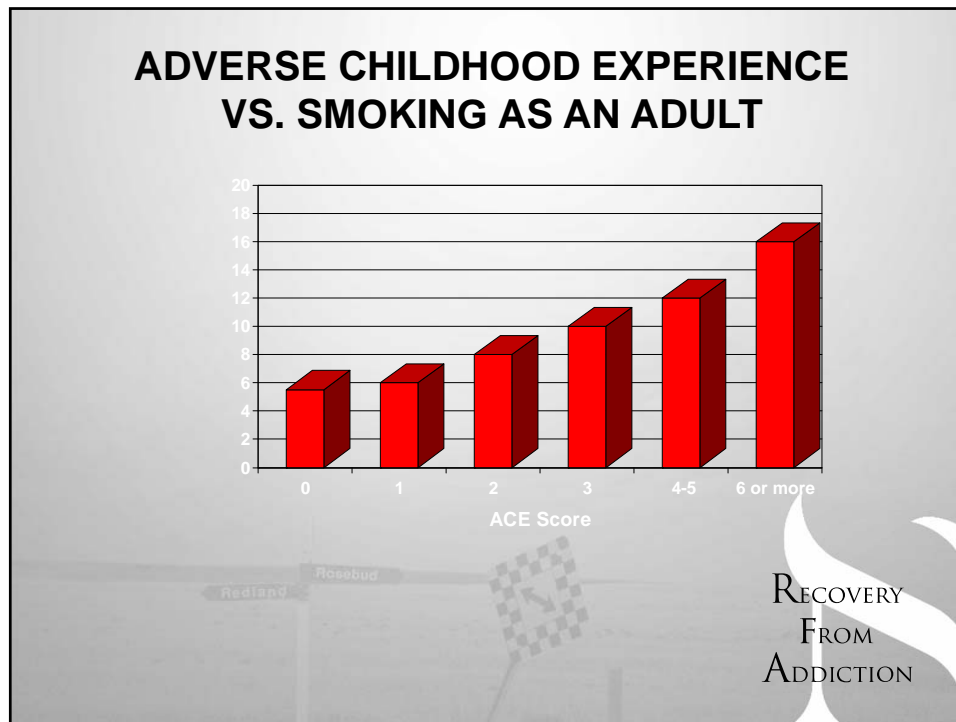
- Commonly understood examples of addiction are the compulsive use of nicotine, alcohol, methamphetamine, and heroin.
- More subtle examples are compulsive eating, sex, gambling, or shopping.

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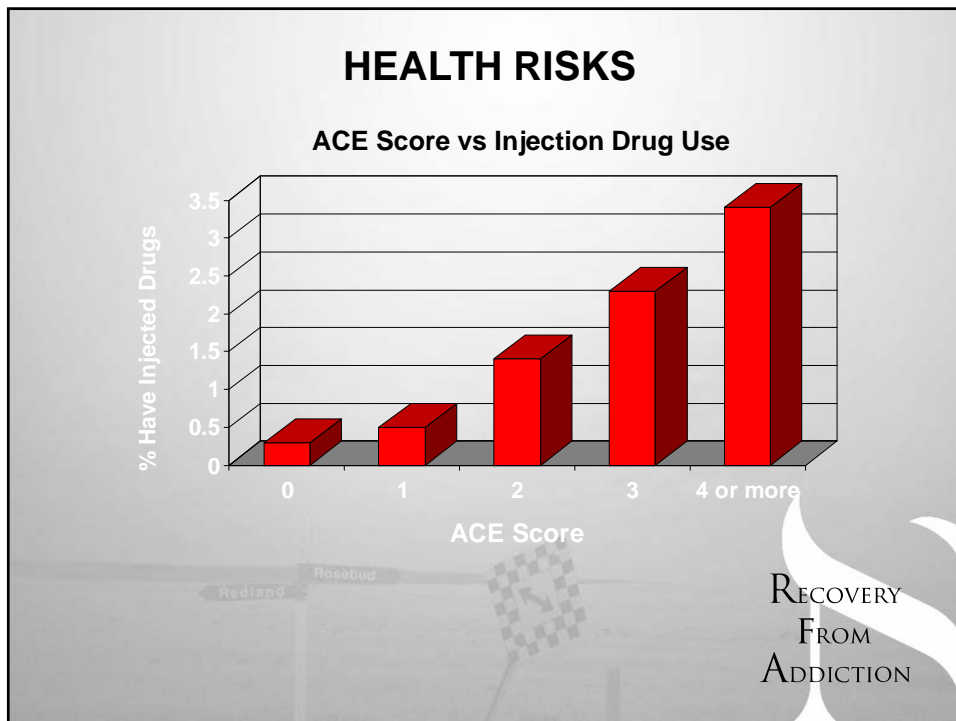
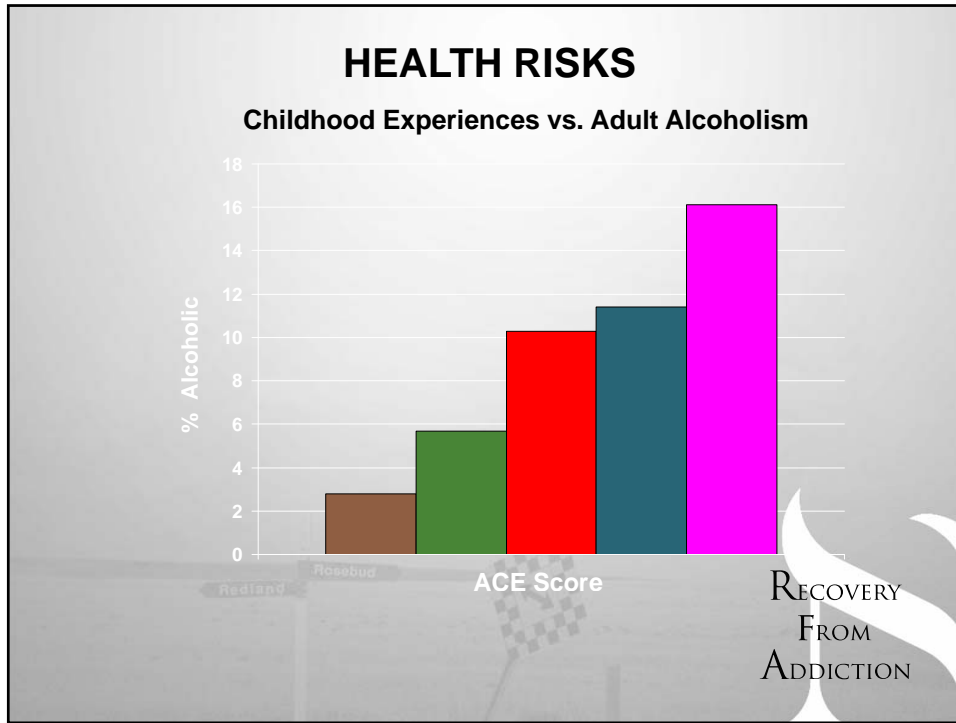
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IV DRUG USE IN AMERICA

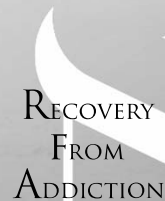
- 78% of iv drug use in women is attributable to adverse childhood experiences.
- ACE Scores in America have been constant over the 20th century.
- Illicit narcotic use in America has been constant over the 20th century, in spite of hundreds of billions of dollars spent in the Drug War.



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- Addiction is understandable as the unconscious, compulsive use of psychoactive materials in response to the stress of life experiences, typically dating back to childhood.
- These life experiences are very likely to be lost in time, and protected by shame, by secrecy, and by social taboos against exploring certain aspects of human experience.



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WHAT IS THE CORE PROBLEM?

- Why is treatment so difficult?
- Why are long-term results so often poor?
- Is it because treating someone's attempted solution may be threatening and cause flight from treatment. Are we treating the smoke, but not the fire?



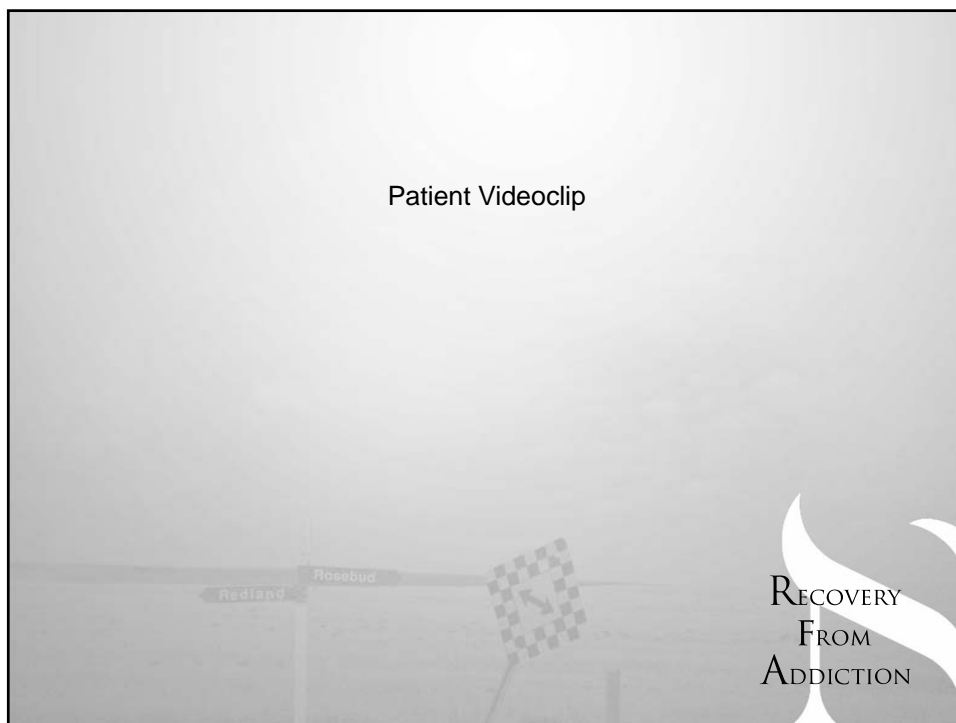
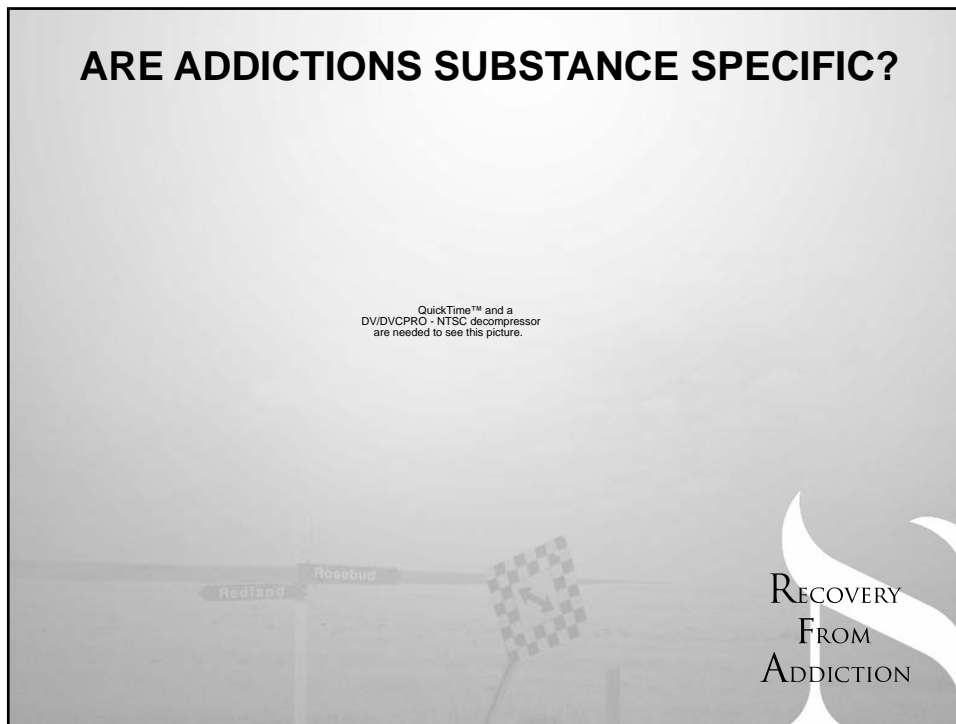
HEROIN USE IN A WAR ZONE

In a study of 898 American soldiers in Vietnam, each of whom acknowledged using heroin daily for at least the prior 30 consecutive days, upon return to the US, 95% were no longer using heroin at 10 month follow-up. *No treatment* was received.

Robins LN, et al. Arch Gen Psychiatry 1975; 32: 955-61



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TREATMENT FAILURES

What can we learn from those who can't
give up an addiction?

Is the wrong thing being treated?



A COMBAT VETERAN



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“My greatest failure was in believing that the weight issue was just about weight. It’s not. It’s about not handling stress properly. It’s about sexual abuse. It’s about all the things that cause other people to become alcoholics and drug addicts.”

— Oprah Winfrey

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A NEW SIGHT

Many adult public health problems and chronic diseases are determined decades earlier, in childhood - not by diseases of childhood as once was the case, but by life experiences.

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A PUBLIC HEALTH PARADOX

What are conventionally viewed as Public Health problems are often personal solutions to long-concealed adverse childhood experiences.

"It's hard to give up something that almost works."



Describing them as “bad habits” or “self-destructive behavior” hides their revealing functionality.



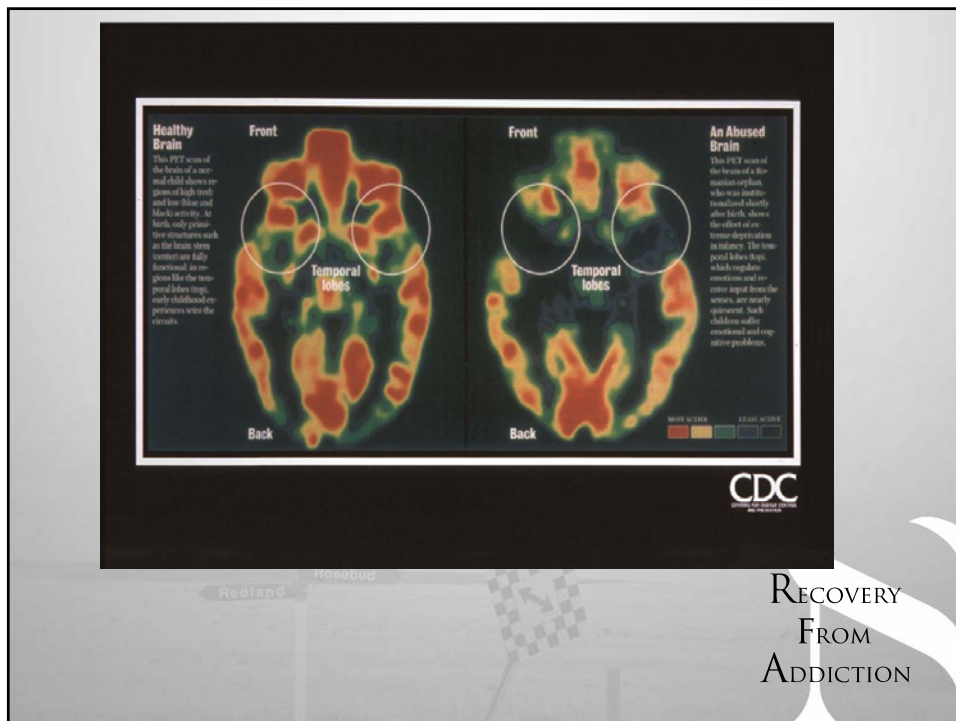
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How and why do

Adverse Childhood Experiences exert their influence throughout life?

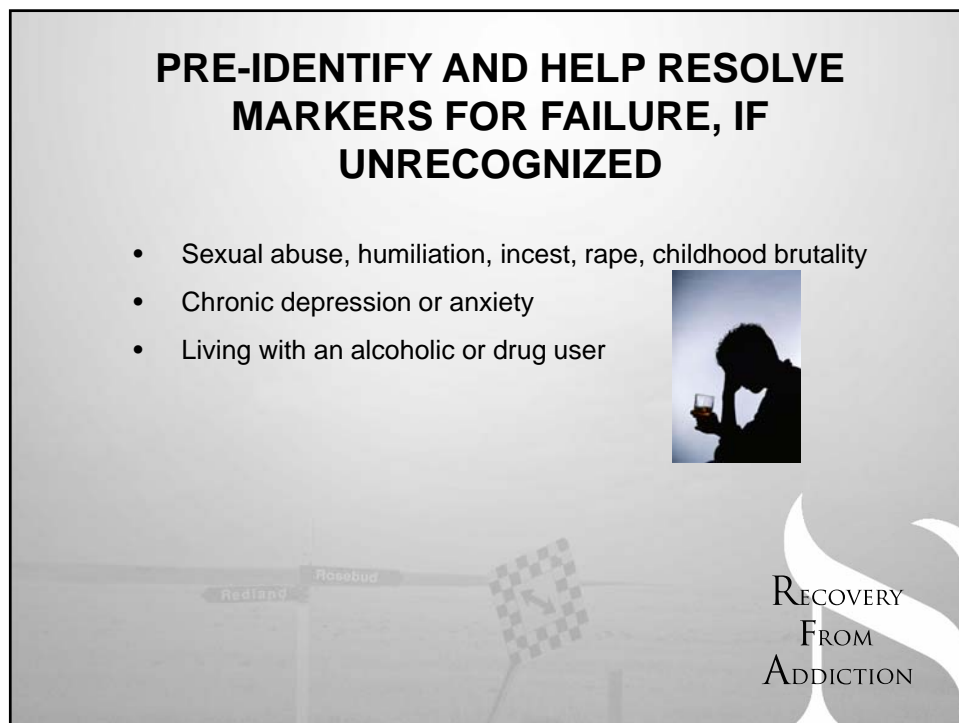
Why is treatment so difficult?

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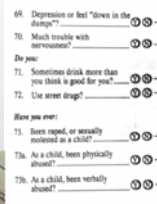
THERAPEUTIC STEPS

1. Understand the basic problem for which addiction is the unconsciously attempted solution.
2. Focus on this in supportive group work.
3. Provide long-term support.

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AN INDIVIDUAL, POPULATION-BASED HEALTH APPRAISAL SYSTEM: A BIOPSYCHOSOCIAL CONCEPT

- Comprehensive history (**not** symptom-initiated) obtained at home by detailed questionnaire, better by Internet.



69. Depression or feel "down in the dumps"? 0-100-
70. Much trouble with "nervousness"? 0-100-
Do you:
71. Sometimes drink more than you think is good for you? 0-100-
72. Use street drugs? 0-100-
Have you ever:
73. Been raped, or sexually mistreated as a child? 0-100-
74a. As a child, been physically abused? 0-100-
74b. As a child, been verbally abused? 0-100-



Includes childhood trauma Questions

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INTERVENTIONS

Unconventional Questions of Demonstrated Value

- Have you ever lived in a war zone?
- Have you been a combat soldier?
- Who in your family has committed suicide?
- Who in your family has been murdered?
- Who in your family has had a nervous breakdown?
- Were you molested as a child?
- Have you ever been held prisoner?
- Have you been tortured?
- Have you been raped?

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Sometimes, when speaking isn't easy, Art helps:



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EFFECT OF INTERVENTIONS

Benefits of Incorporating a Trauma-oriented Approach

Biomedical evaluation: (Control group)	11% reduction in DOVs in subsequent year. (700 patient sample)
Biopsychosocial evaluation: (Trauma-oriented approach)	35% reduction in DOVs in subsequent year. (>120,000 patient sample)

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WHAT CAN WE DO TODAY?

- Routinely seek a history of adverse childhood experiences from all patients/clients/inmates, by questionnaire.
- Acknowledge their reality by asking, "How has this affected you later in your life?"
- Use existing systems to help with current problems.
- Develop systems for primary prevention.

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FINAL INSIGHTS FROM THE ACE STUDY

- Adverse childhood experiences are common but typically unrecognized.
- Their link to major problems later in life is strong, proportionate, and logical.
- They are the nation's most basic public health problem.
- It is comforting to mistake intermediary mechanism for basic cause.
- What presents as the 'Problem' may in fact be an attempted solution.
- Treating the solution may threaten people and cause flight from treatment.
- Change will be resisted by us in spite of enormous benefits.

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A CLOSING THOUGHT

QuickTime™ and a
Cinepak decompressor
are needed to see this picture.

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FURTHER INFORMATION

www.AceStudy.org

Medline/PubMed, Google (Anda or Felitti as author)

VJFMDSDCA@mac.com

www.HumaneExposures.com (3 Important Books)

www.CavalcadeProductions.com (Documentary DVDs)

"Licit and Illicit Drugs." Brecher; 1973, Little Brown



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