



Building Healing Behavioral Health Systems:

Trauma-Informed/Healing-Centered Organizational Transformation

Adverse and Positive Childhood Experiences and Behavioral Health among LGBTQ High School Students



Behavioral Health Administration & Universities Partnership



UM SOM Psychiatry Department

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



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- Department of Behavioral Sciences and Services

Maryland Childhood Trauma and ACEs

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:

Key Take Aways



Key Take Aways



- **More LGBTQ students experience all ACEs and fewer LGBTQ students experience most PCEs compared than non-LGBTQ students.**
- **Positive Childhood Experience mitigate the impact of ACEs** on behavioral health challenges by 18-65% and are associated with reducing risk from specific ACEs by 16-86%
- **Having three or more ACEs is associated with increased behavioral health risks among LGBTQ students compared to non-LGBTQ students for**
 - Suicide attempt (LGBTQ 2.5 times, Non-LGBTQ 1.8 times)
 - Ever using methamphetamines (LGBTQ 5.7 times, Non-LGBTQ 3.9 times)

Key Take Aways



- **Over twice as many LGBTQ students report experiencing poor mental health compared to non-LGBTQ students** with Emotional Abuse most highly associated as a risk factor (3 times).
- **Over twice as many LGBTQ students experience depression, over 3 times as many experience suicidal ideation and make suicide plans, and 66% more attempt suicide compared to non-LGBTQ students**
 - Emotional Abuse is most highly associated as a risk factor with depression (3.2 times) and suicidal ideation (3.6 times)
 - Emotional Abuse (3.2 times) and Household Domestic Violence (3.3 times) are most highly associated with making a suicide plan, and
 - Household Domestic Violence is most highly associated with attempting suicide (4.2 times)

Key Take Aways



- **More LGBTQ students report current alcohol, binge drinking, and marijuana use** with Household Domestic Violence associated with the highest risk (2.8-3.5 times)
- **More LGBTQ students have tried illicit substances** with the highest risks associated with Household Domestic Violence (3.7-19.4 times) and Incarceration of a household member (1.6-10.9 times)



Building Healing Behavioral Health Systems:

Focused Data Study Methods



Focused Data Studies

- 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 primarily used publicly available aggregated data to compare Maryland and Nationwide prevalence for youths and adults.
 - Study 2 studied data for Maryland's high school youth.
 - Study 3 studied Maryland's middle school youth data and ACE-like experiences in Maryland's high school and middle school youth.
 - Study 4 performed a deeper dive into
 - gender in middle school and high school students, and
 - sexual orientation for high school students (this report)

Methods: Data Source

- 2021 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

- Differences across LGBTQ and non-LGBTQ students were assessed for ACEs, PCEs, and behavioral health categories and indicators.
- The remainder of the analyses includes only LGBTQ students to understand the impact of each ACE across behavioral health indicators for LGBTQ individuals.
- All findings reported in this analysis are statistically significant unless otherwise stated.

Methods: Defining Concepts in the Data

- This analysis aims to understand the relationship of ACEs and PCEs with Mental Health and Substance Use Indicators for LGBTQ individuals.
- 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 and criteria for identifying LGBTQ individuals and each ACE and PCE

Methods: Identifying LGBTQ Individuals

| |
|-------------------------------------------------------------|
| Q8: Which of the following best describes you? |
| Heterosexual (straight) |
| Gay or Lesbian |
| Bisexual |
| I describe my sexual identity some other way |
| I am not sure about my sexual identity (questioning) |
| I do not know what this question is asking |

OR

| |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Q9: Some people describe themselves as transgender when their sex at birth does not match the way they think or feel about their gender. Are you transgender? |
| No, I am not transgender |
| Yes, I am transgender |
| I am not sure if I am transgender |
| I do not know what this question is asking |

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 |

Methods: Defining Behavioral Health

Mental Health Challenges: Individuals meeting any of the criteria below

| Category | Question | Response |
|--------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|
| Mental Health Quality of Life | 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” |
| Depressive Episode | During the past 12 months, did you ever feel so sad or hopeless almost every day for two weeks or more in a row that you stopped doing some usual activities? | “Yes” |
| Suicidal Ideation | During the past 12 months, did you ever seriously consider attempting suicide? | “Yes” |
| Suicide Plan | During the past 12 months, did you make a plan about how you would attempt suicide? | “Yes” |
| Suicide Attempt | 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 |
|-----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|
| Alcohol Use | During the past 30 days, on how many days did you have at least one drink of alcohol? | More than 2 days |
| Binge Drinking | During the past 30 days, on how many days did you have 4 or more drinks of alcohol in a row, that is, within a couple of hours (if you are female) or 5 or more drinks of alcohol in a row, that is, within a couple of hours (if you are male)? | “One or more days” |
| Marijuana Use | 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 |
|-----------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|
| Prescription Pain Medicine | 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" |
| Cocaine | During your life, how many times have you used any form of cocaine, including powder, crack, or freebase? | "One or more times" |
| Heroin | During your life, how many times have you used heroin (also called smack, junk, or China White)? | "One or more times" |
| Methamphetamines | During your life, how many times have you used methamphetamines (also called speed, crystal meth, crank, ice, or meth)? | "One or more times" |
| Ecstasy | During your life, how many times have you used ecstasy (also called MDMA or Molly)? | "One or more times" |

Methods: ACEs available for Analysis

ACE Surveys

Household ACEs

Kaiser-Permanente^a

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^b

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

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

Methods: Identifying ACEs

- The original Kaiser ACE questions asked if individuals ever experienced each ACE with response options of Yes or No
- ACEs are counted in the YRBS/YTS when the following conditions are met:

| ACE | YRBS/YTS Options | ACE counted if |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|----------------------------|
| <ul style="list-style-type: none">• Emotional Abuse• Household Domestic Violence | Never Rarely Sometimes Most of the Time Always | Most of the time Always |
| <ul style="list-style-type: none">• Household Substance Use• Household Mental Illness• Household Incarceration• Bullied at School• Electronic Bullying | Yes No | Yes |

Methods: ACE Count Threshold for Adverse Health Outcomes

- The original 10-item Kaiser-Permanente ACE study found that an ACE count of 4 or more ACEs is implicated in poor health outcomes in adulthood
- The YRBS/YTS only collects 5 of the original Kaiser-Permanente ACEs, and 2 from the Philadelphia study
- Only the 5 Kaiser-Permanente items in the ACE counts for this analysis.
- Because fewer ACE items are collected in the YRBS/YTS, this analysis uses an ACE count of 3 or more ACEs as a threshold for increased poor outcomes in adulthood.

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.

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

Methods: Measurement of Increased Risk

- 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

- The YRBS/YTS uses 3 or more ACEs (of 5 collected) as a threshold for implications in adult health outcomes instead of the traditional 4 or more ACEs (of the 10 collected) by Kaiser-Permanente. As a result, findings on high ACE counts may or may not be comparable to other, publicly- available research.
- Some adverse outcomes for ACEs may not surface until adulthood. This report includes data collected from high school students. Because individuals may develop mental health or substance use issues after high school, the proportions for behavioral health outcomes will likely increase during adulthood.

Methods: Caveats

- Not all ACEs are collected in the YRBS, and some missing ACE items are known to impact LGBTQ students
 - Philadelphia ACE item: Experiencing Discrimination due to sexual orientation or gender
 - Kaiser ACE item: Sexual abuse
- These missing ACEs may cause LGBTQ individuals to be underrepresented analyses for high ACE (>3) counts

Methods: Caveats

- Generally, ACE counts only include adverse events that occurred in childhood (before the age of 18).
- The YRBS/YTS asks students if they have ever experienced each ACE, without specifying events occurring in childhood, prior to age 18.
 - This analysis includes responses from 1,792 18-year-old students (6.4% of the weighted responses).
- It is possible that some ACEs reported by 18-year-old students were only experienced in adulthood and should not be counted as an adverse *childhood* experience.



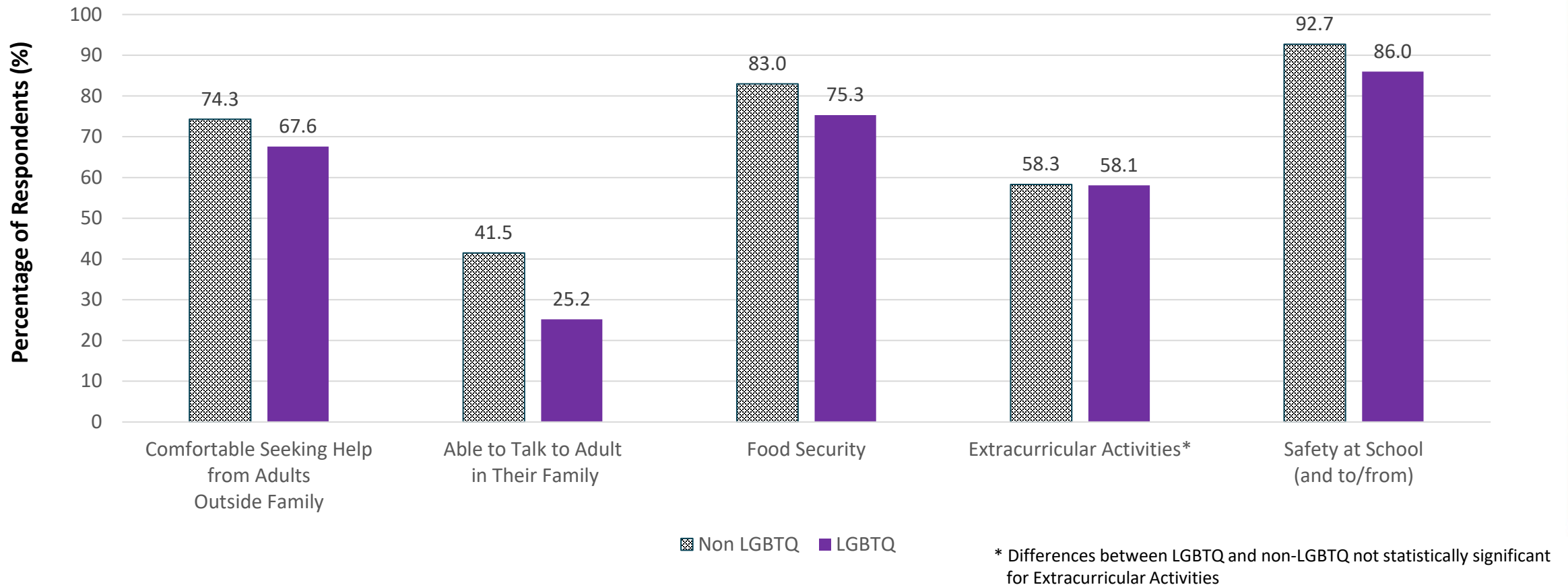
Building Healing Behavioral Health Systems:

Positive Childhood Experiences (PCEs) among LGBTQ Students

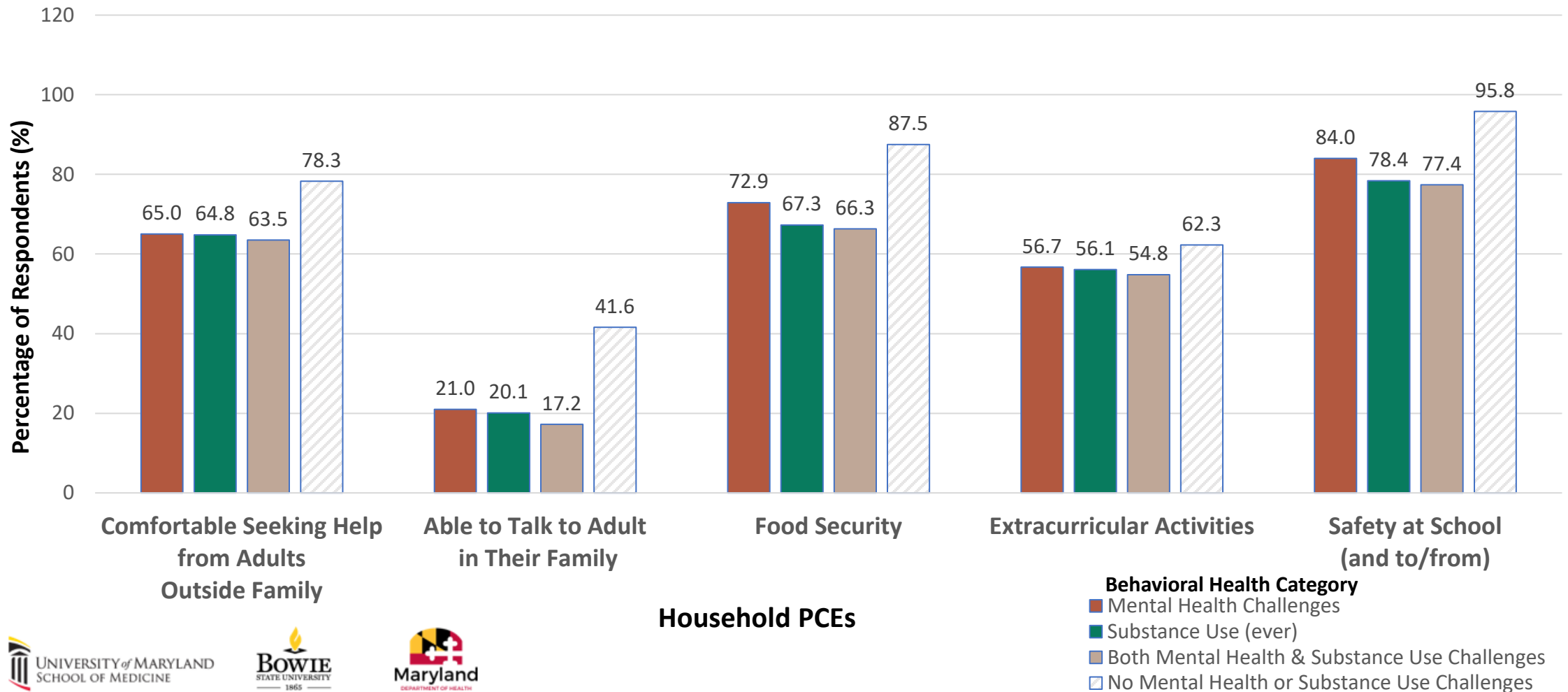


Positive Childhood Experiences (PCEs) and LGBTQ Students

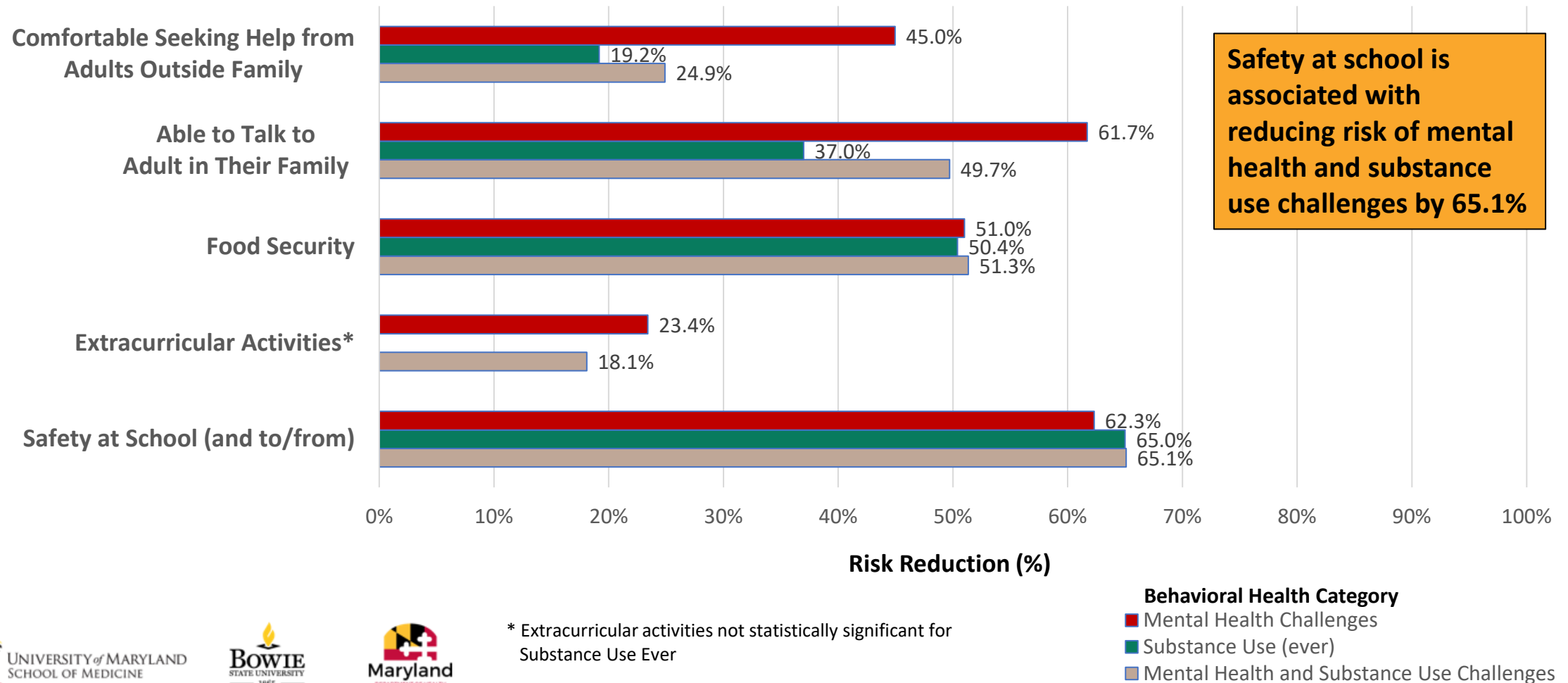
Fewer LGBTQ students experience PCEs compared to non-LGBTQ students



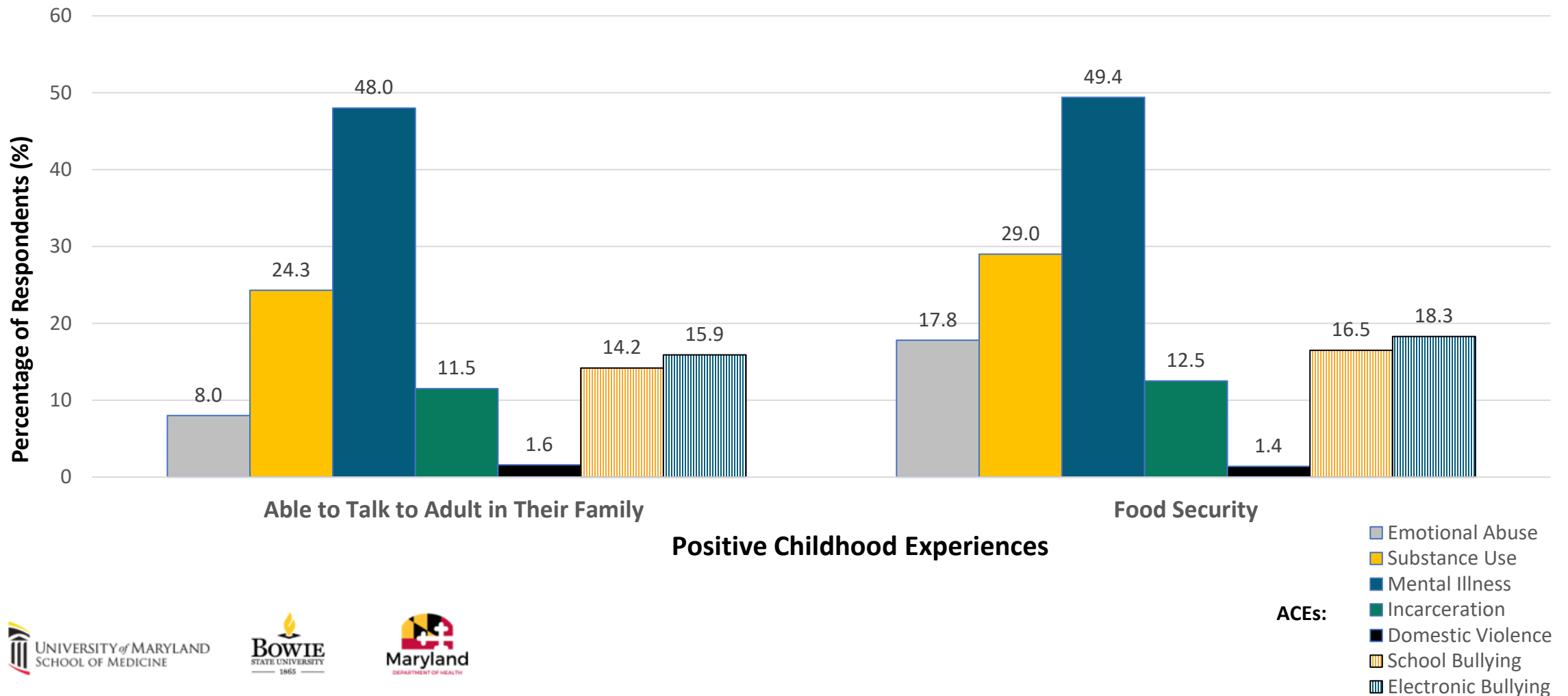
PCEs and Behavioral Health Challenges in LGBTQ Students



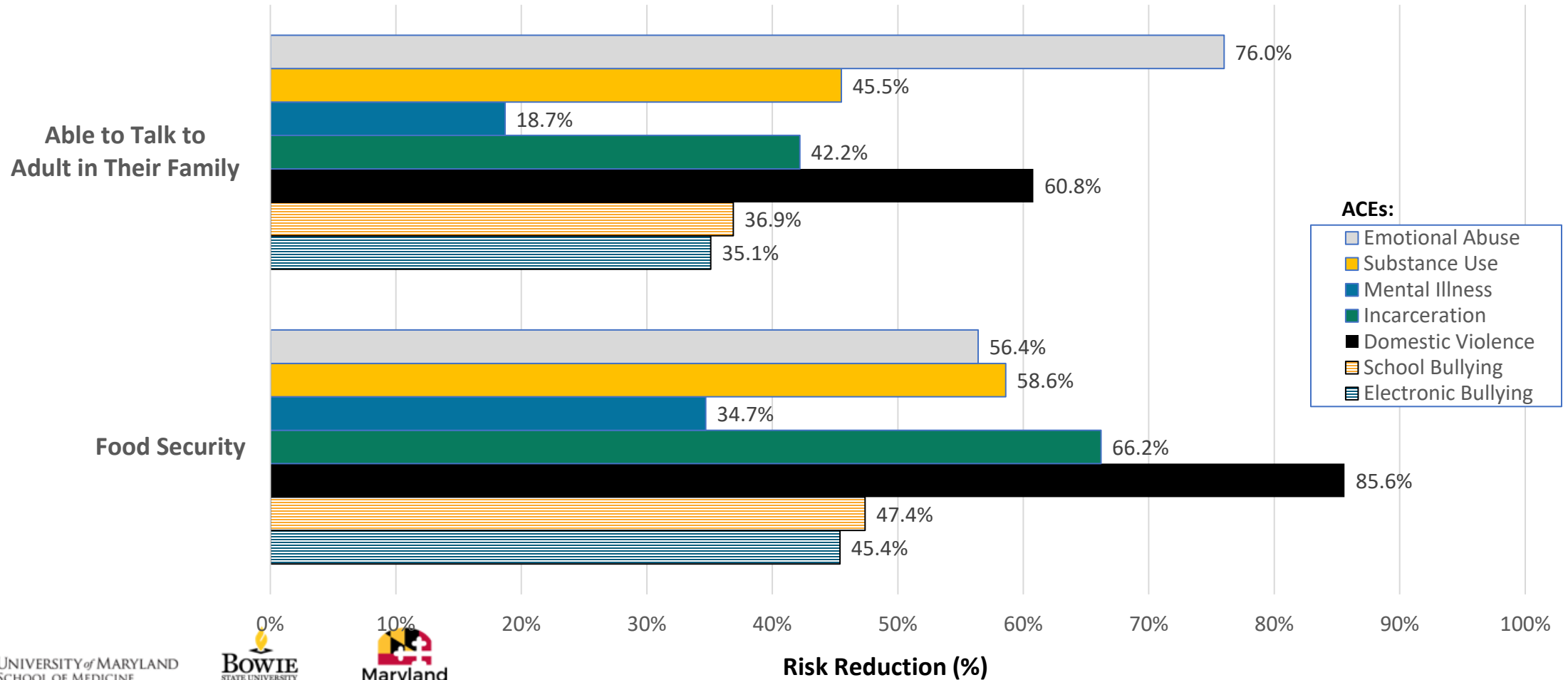
PCEs Reduce Behavioral Health Risks for LGBTQ Students



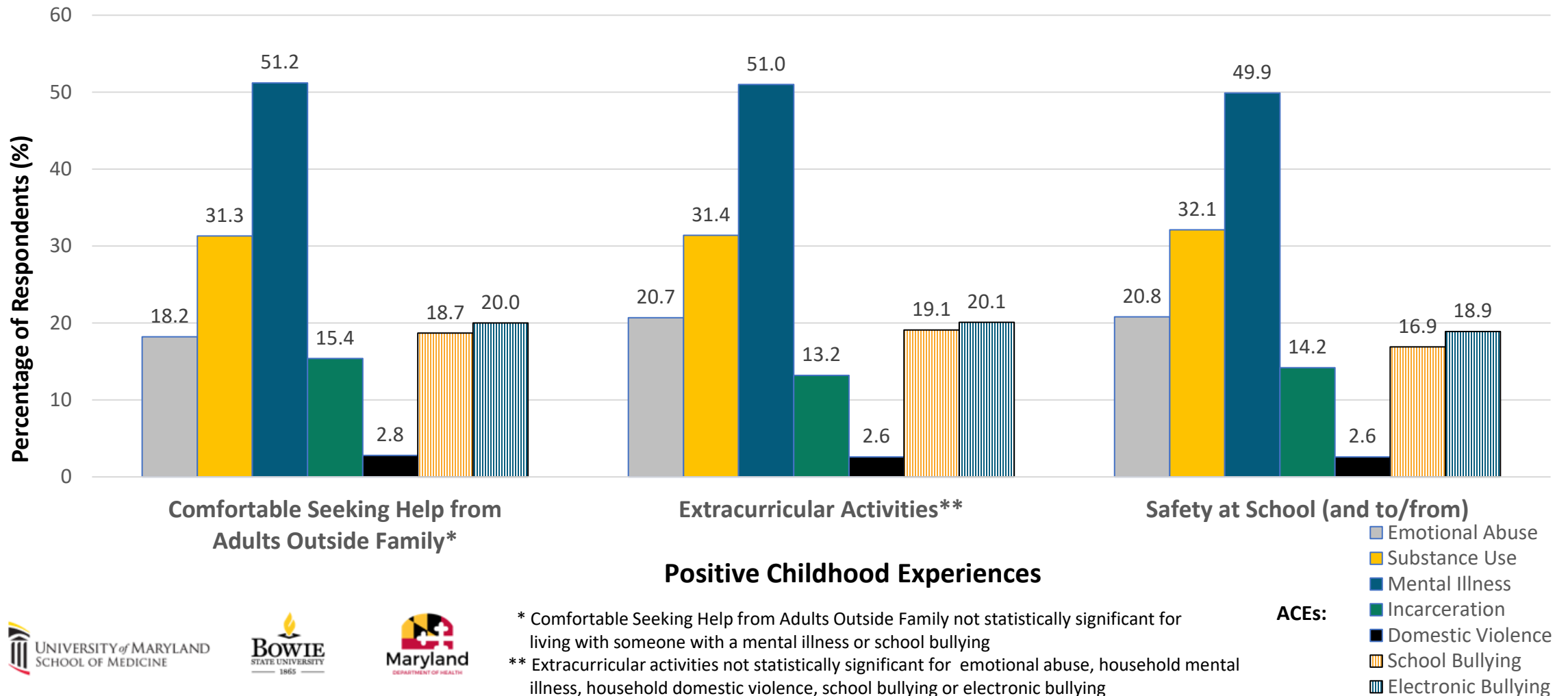
Household PCEs and ACEs in LGBTQ Students



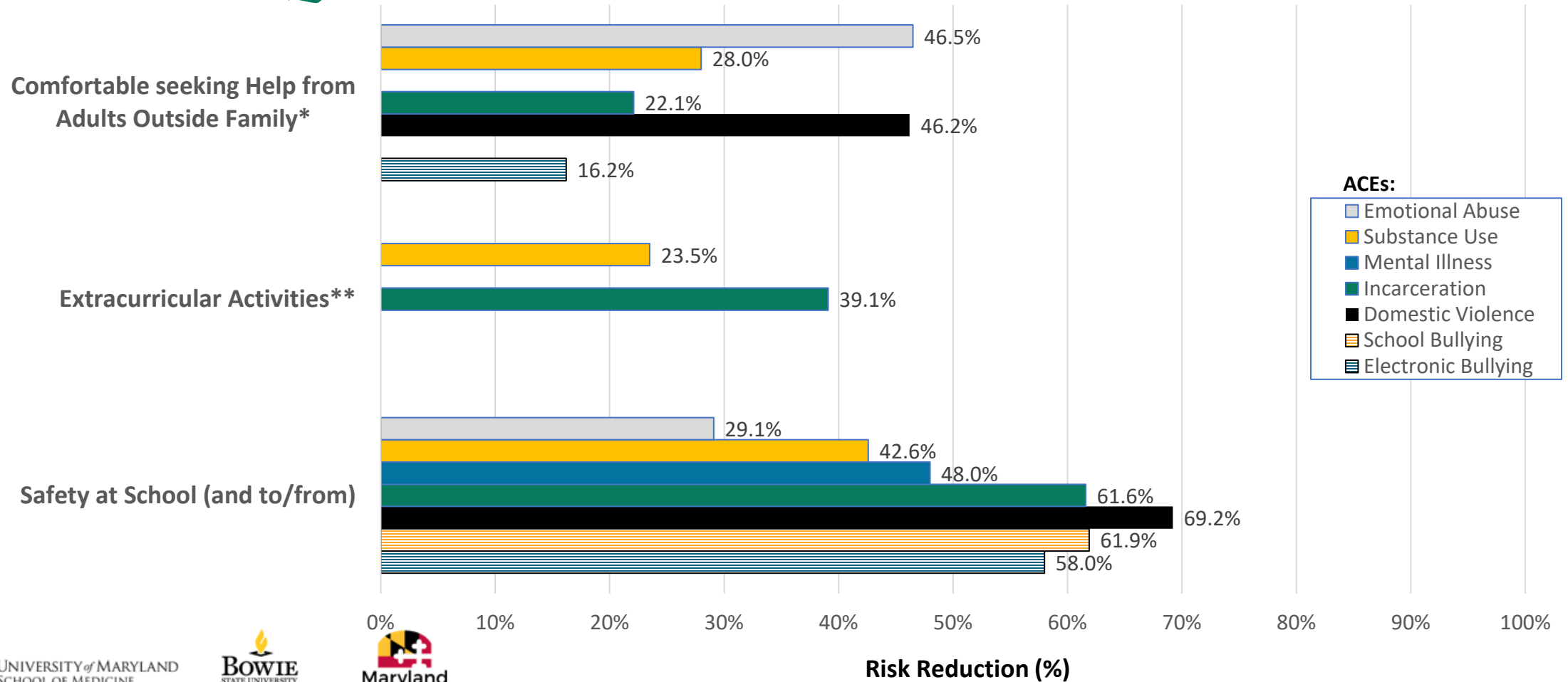
PCEs Reduce Risk from Household ACEs for LGBTQ Students



Community PCEs and ACEs in LGBTQ Students



PCEs Reduce Risk from Community ACEs for LGBTQ Students



* Comfortable Seeking Help from Adults Outside Family not statistically significant for living with someone with a mental illness or bullied on school property

** Extracurricular activities not statistically significant for emotional abuse, household mental illness, household domestic violence, school bullying or electronic bullying

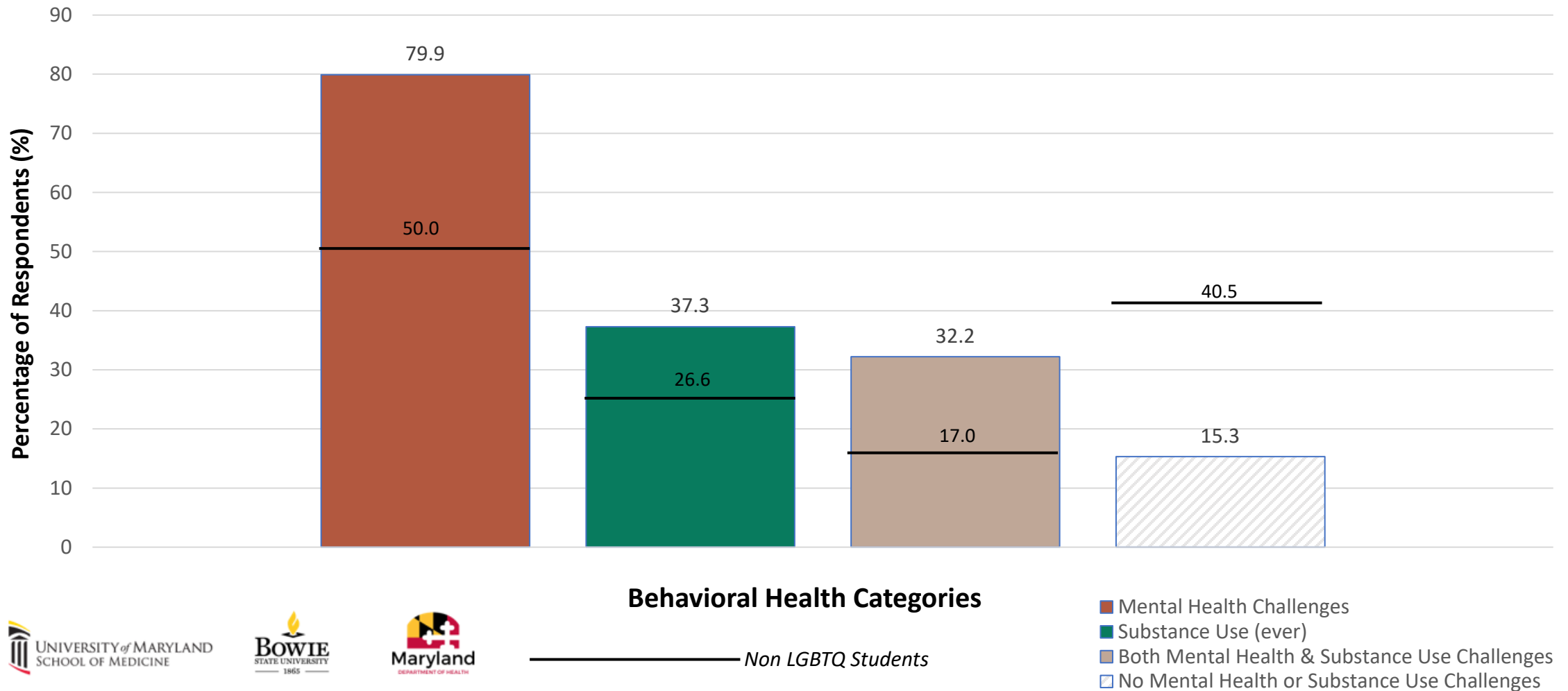


Building Healing Behavioral Health Systems:

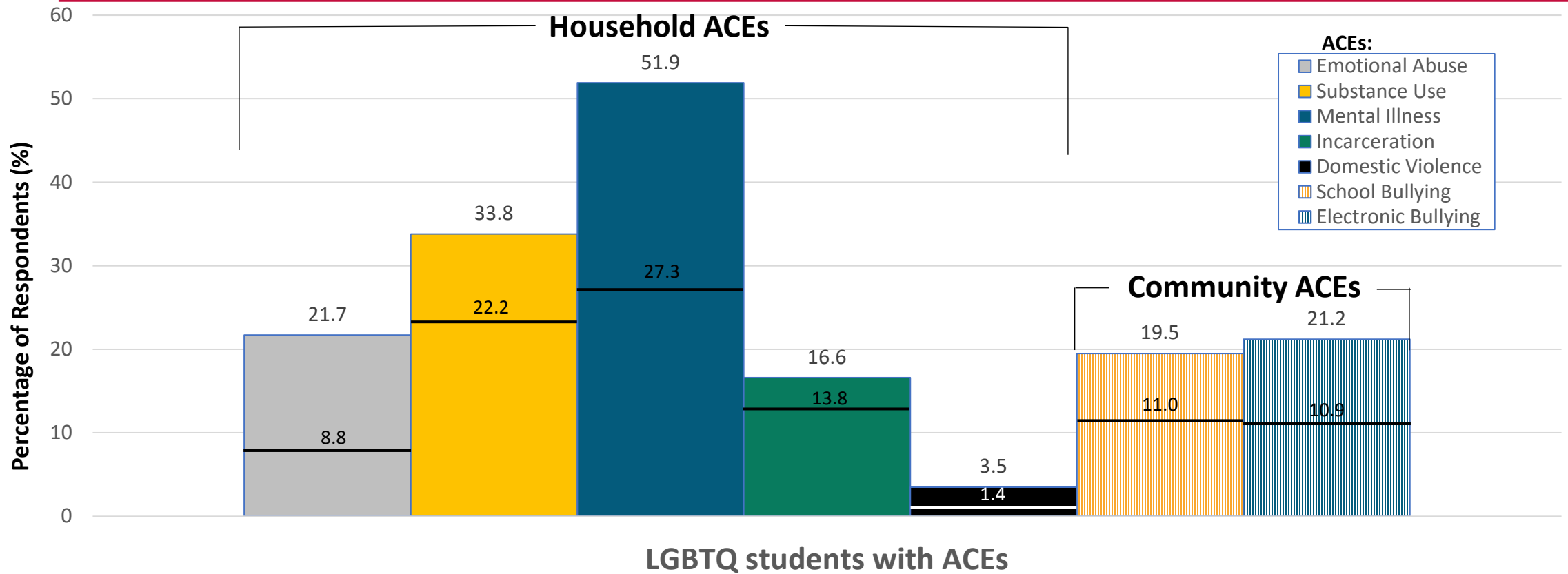
Behavioral Health Categories and
Adverse Childhood Experiences
for LGBTQ Students



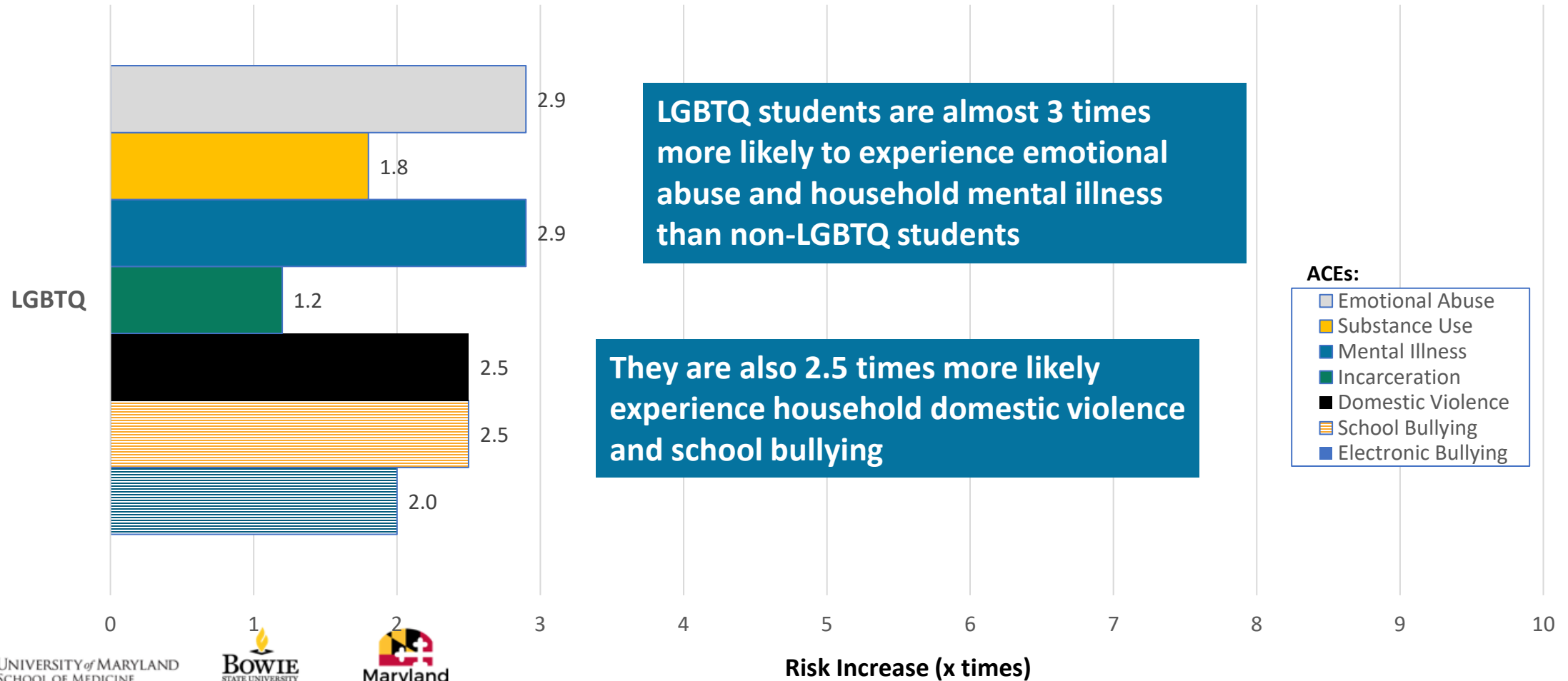
Behavioral Health and LGBTQ High School Students



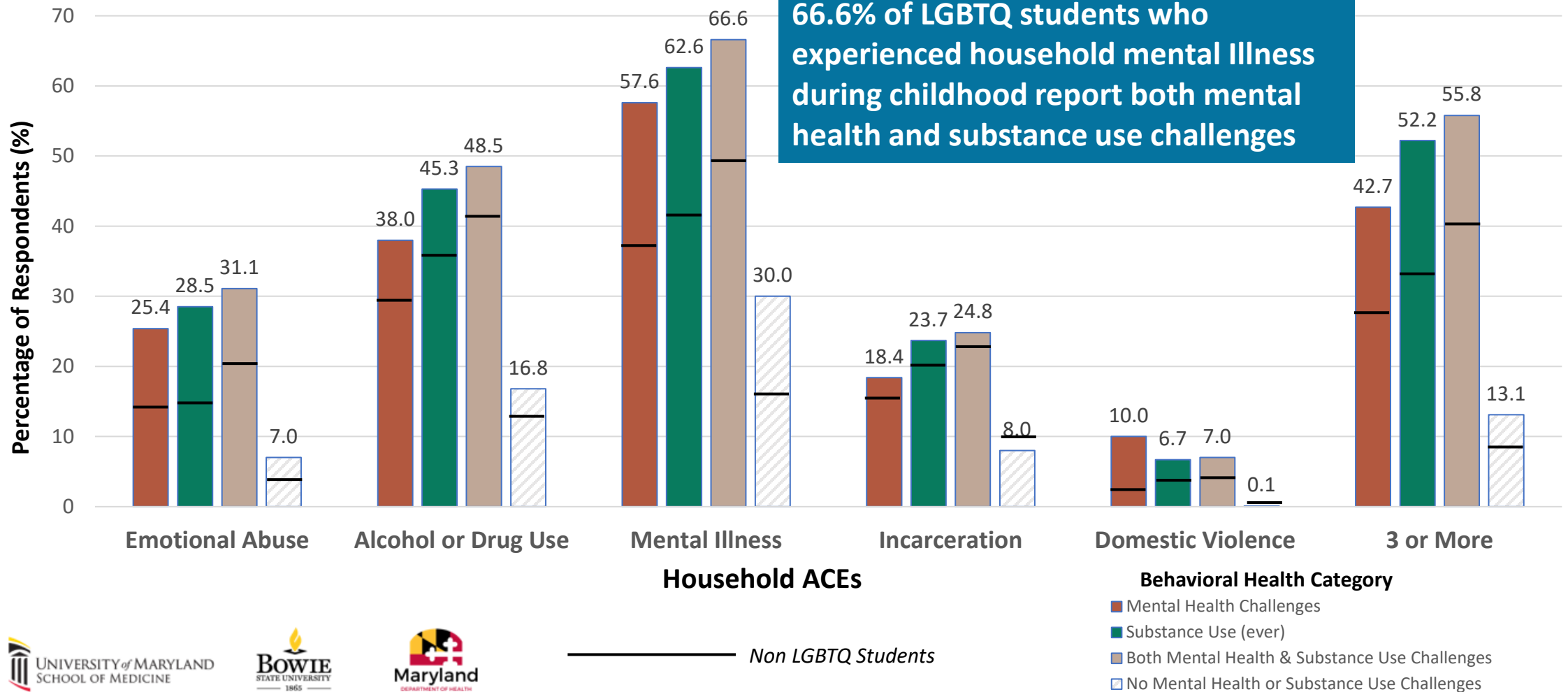
ACEs among LGBTQ High School Students



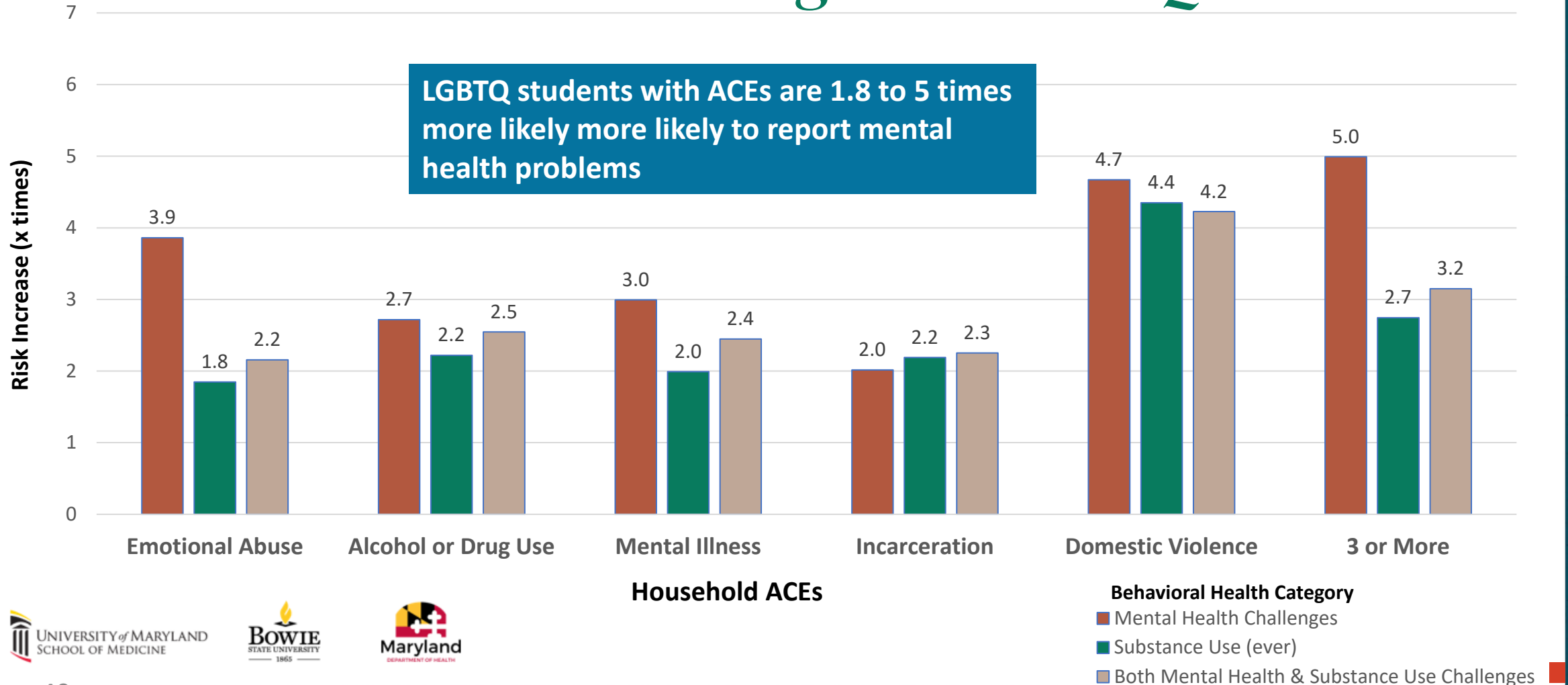
LGBTQ students are more likely to experience ACEs



Household ACEs and Behavioral Health among LGBTQ Students

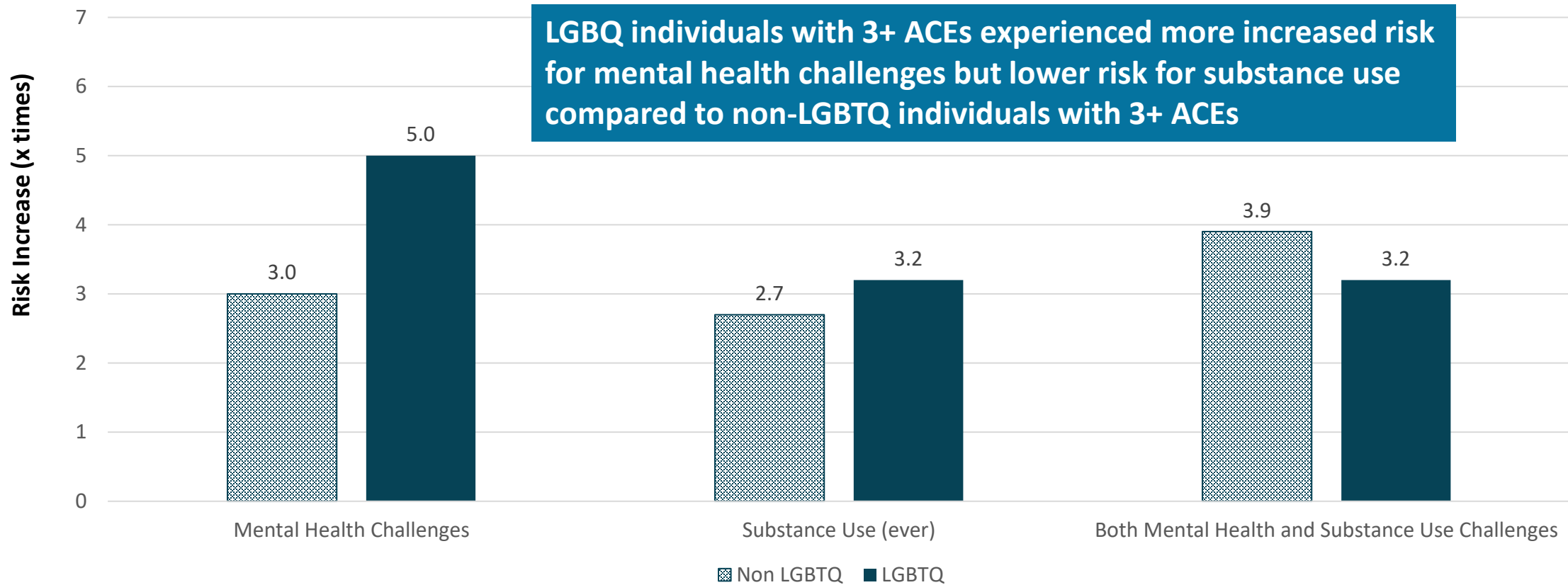


Household ACEs Increase Risk of Behavioral Health Challenges for LGBTQ Students

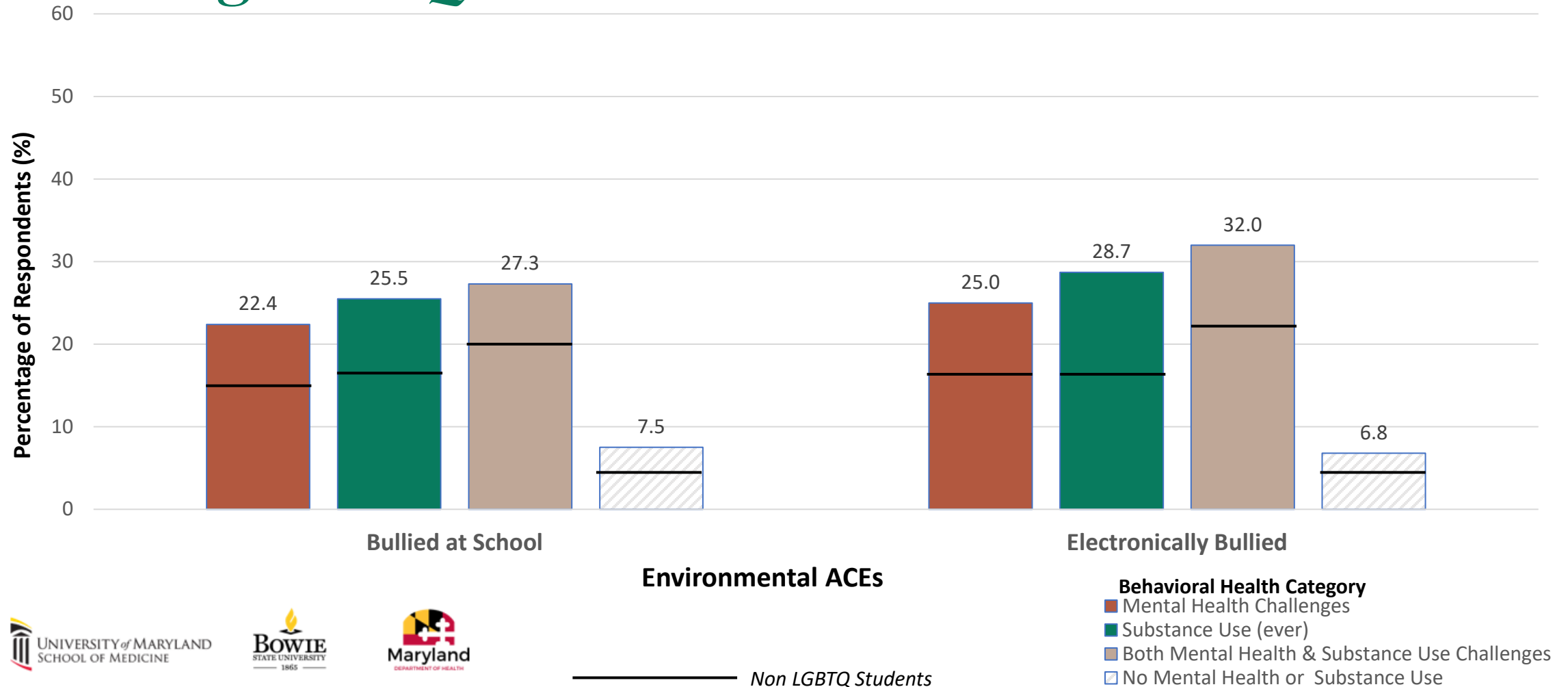


3+ ACEs and Behavioral Health Risks and LGBTQ

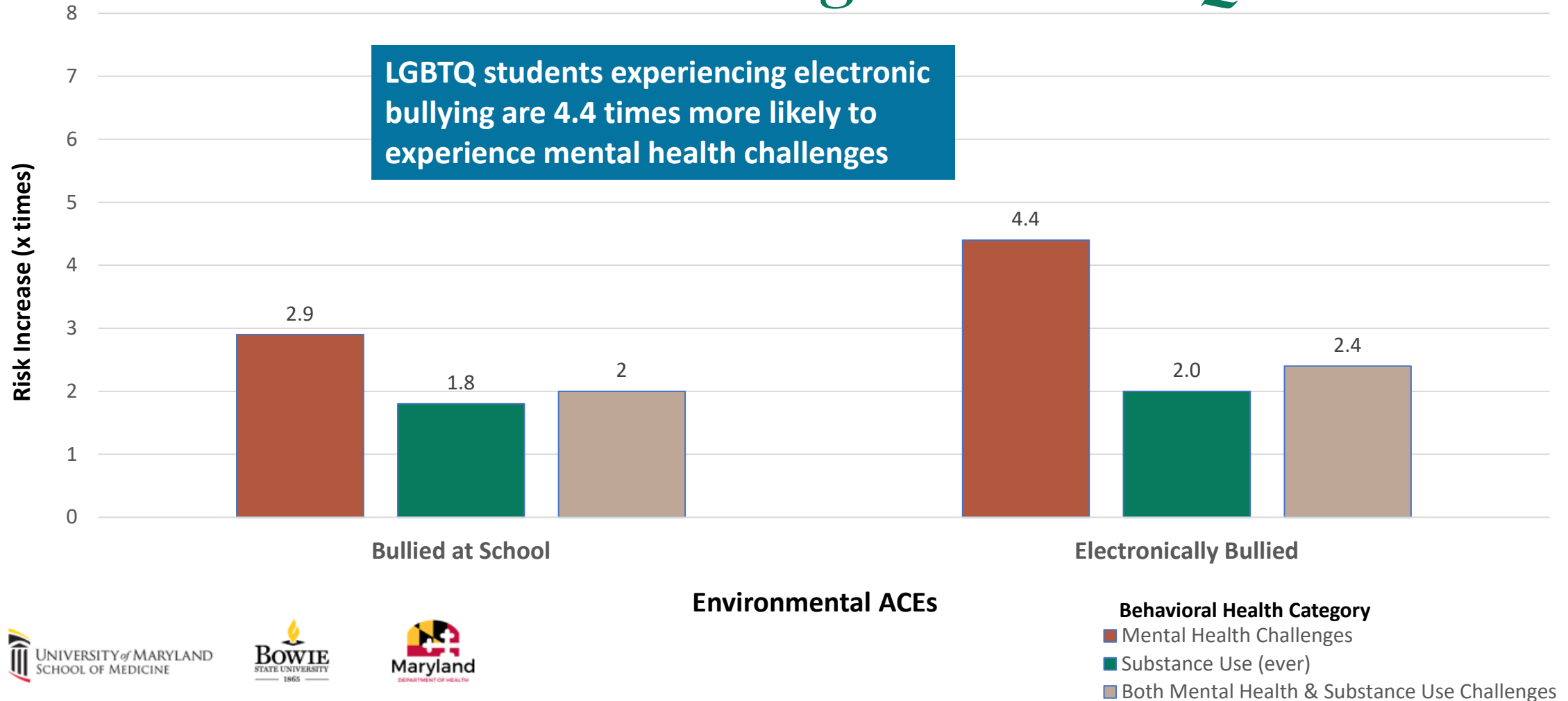
Individuals with 3+ ACEs are more likely to experience mental health challenges



Community ACEs and Behavioral Health among LGBTQ Students



Community ACEs Increase Risk of Behavioral Health Challenges for LGBTQ Students





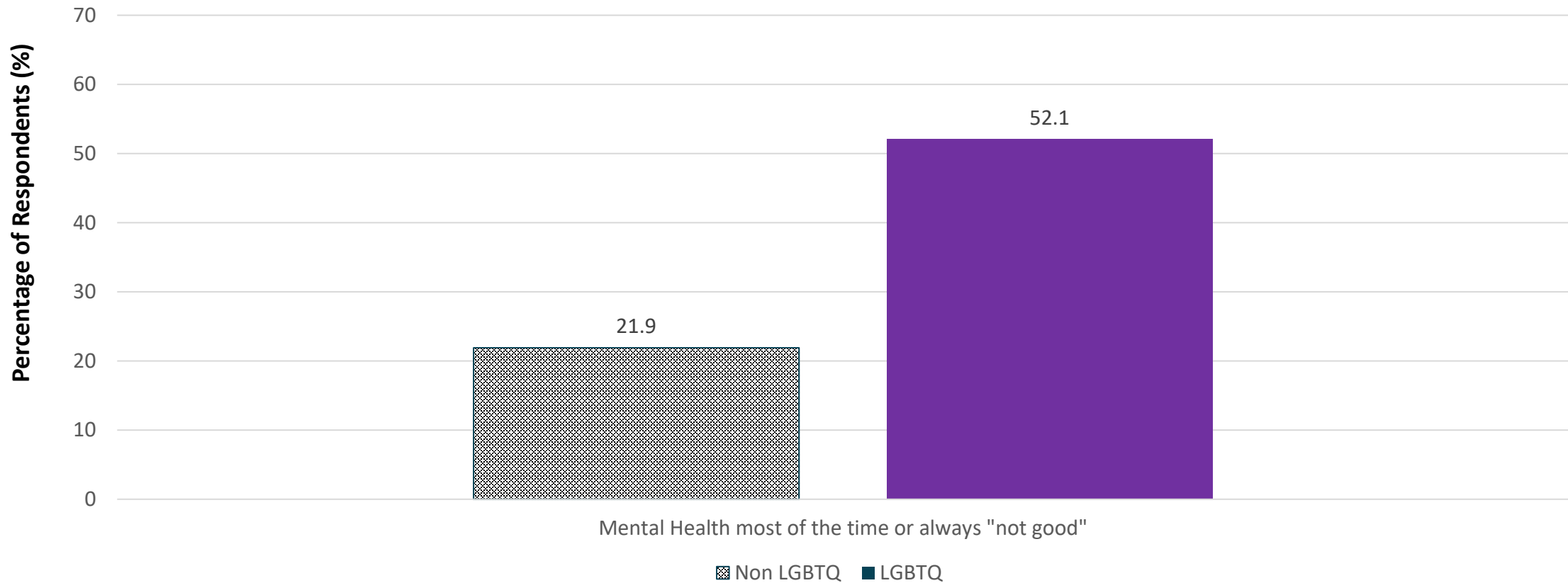
Building Healing Behavioral Health Systems:

Mental Health Indicators and
Adverse Childhood Experiences
for LGBTQ Students

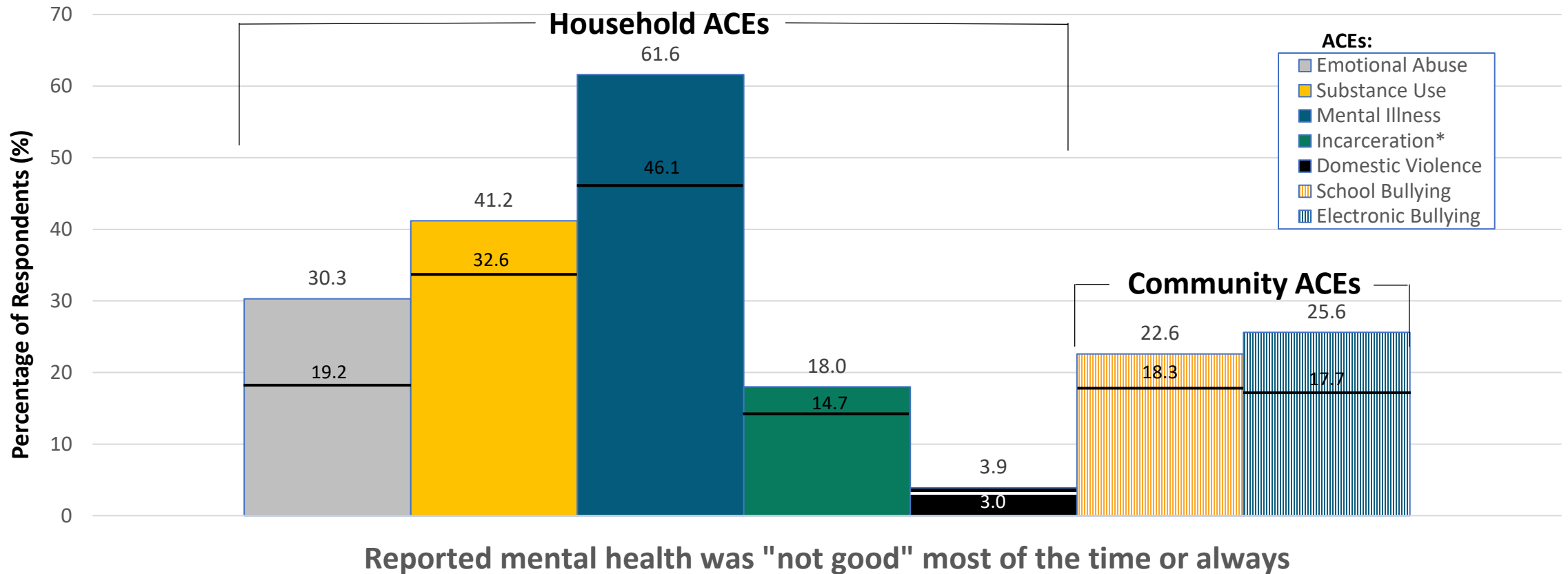


Poor Mental Health and LGBTQ Status

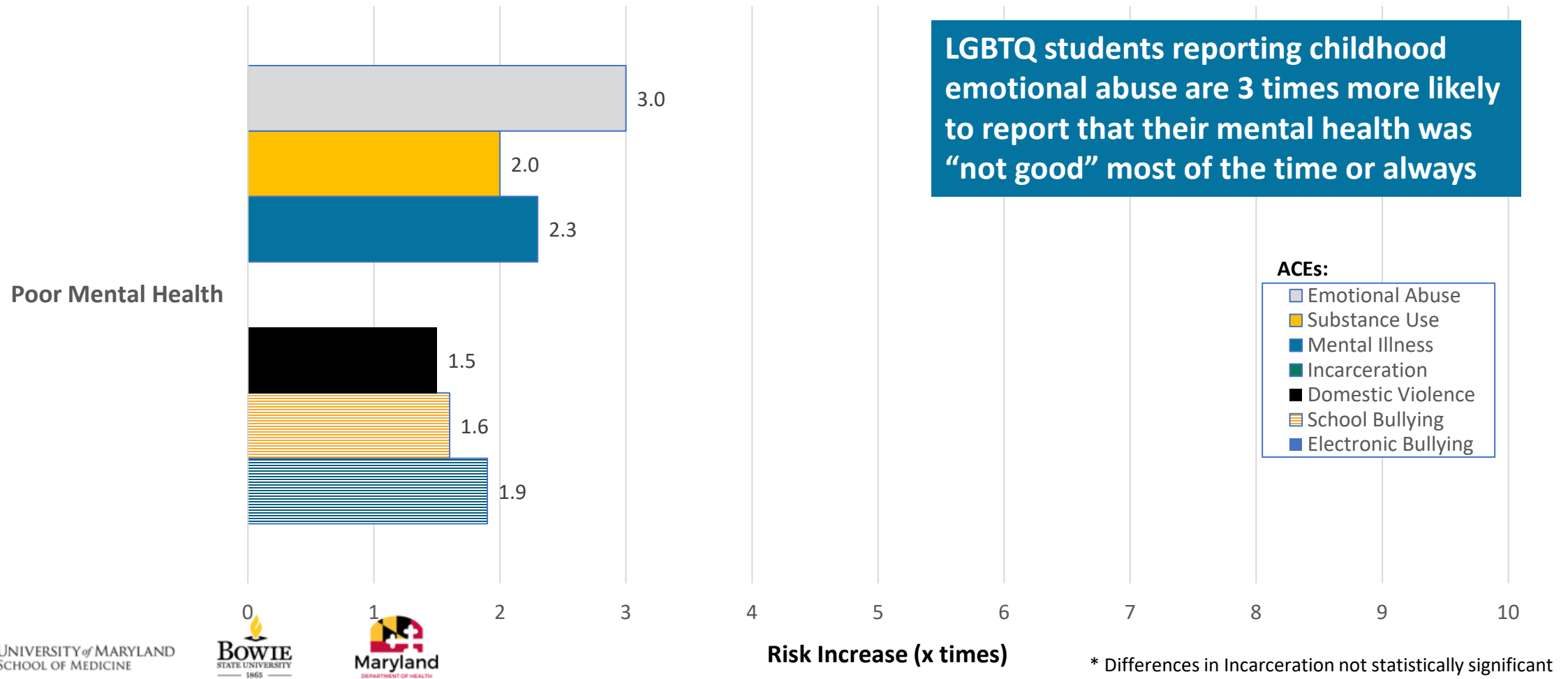
More LGBTQ individuals experience poor mental health



Poor Mental Health and ACEs for LGBTQ

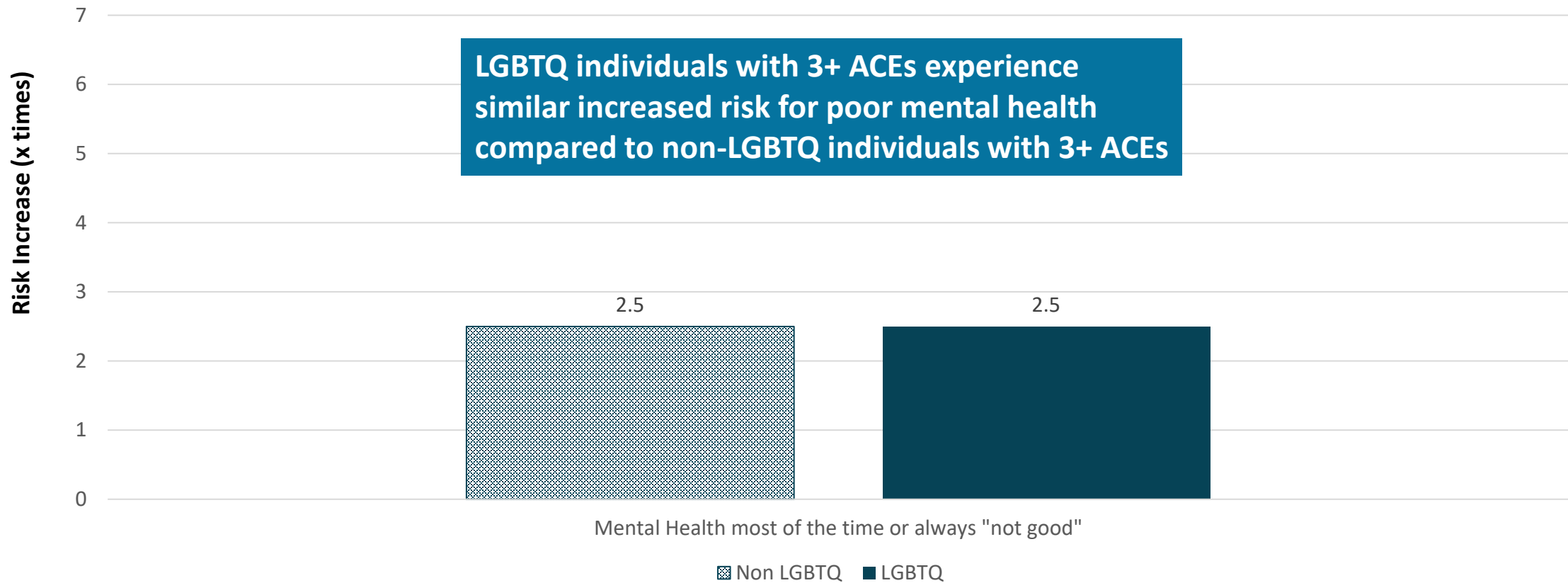


ACEs Increase Risk of Poor Mental Health for LGBTQ



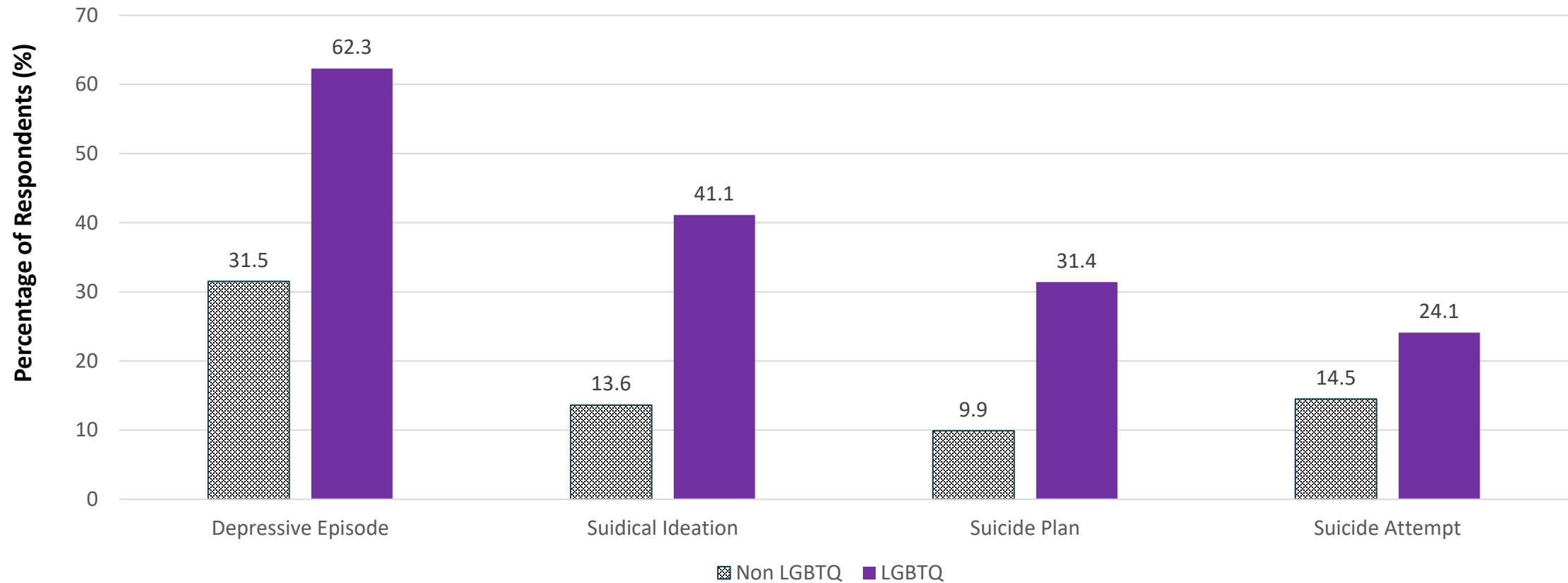
3+ ACEs and Poor Mental Health and LGBTQ

All students with 3+ ACEs are more likely to experience poor mental health

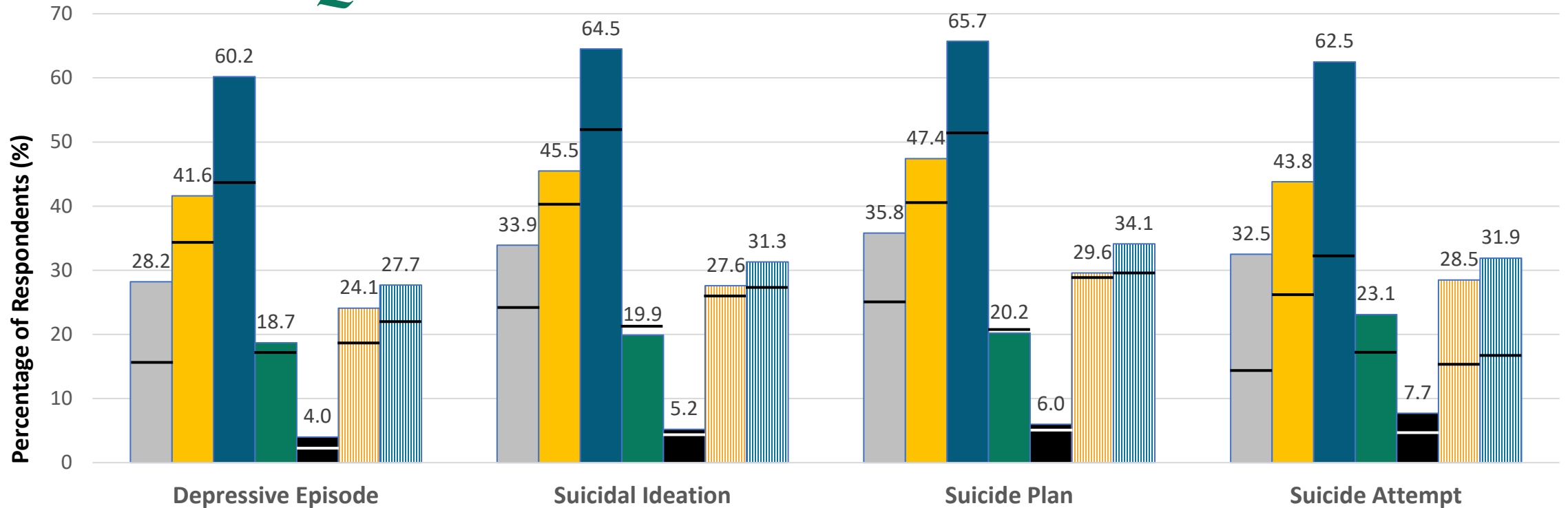


Mental Health Indicators and LGBTQ Students

More LGBTQ individuals experience each mental health indicator



Mental Health Indicators and ACEs for LGBTQ Students

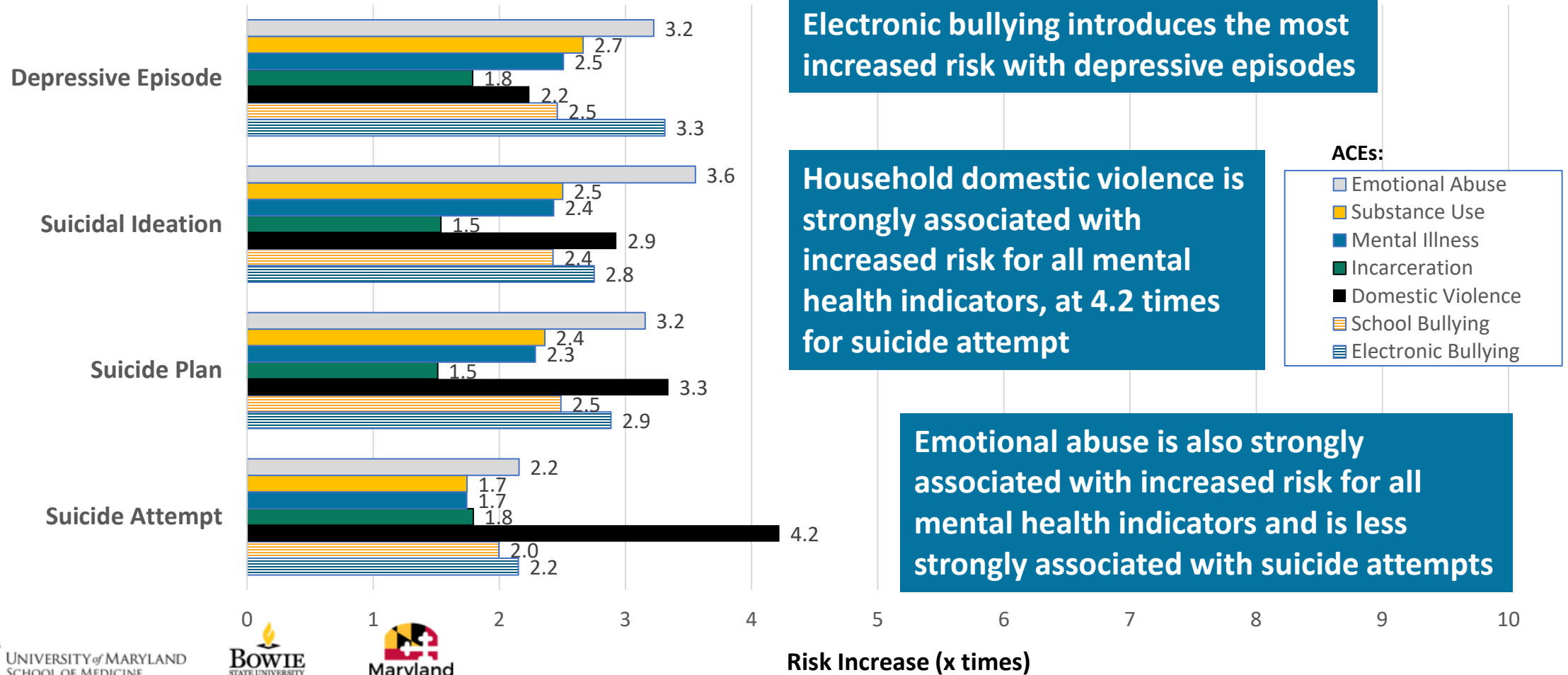


Mental Health Indicators

- ACEs:**
- Emotional Abuse
 - Substance Use
 - Mental Illness
 - Incarceration
 - Domestic Violence
 - School Bullying
 - Electronic Bullying

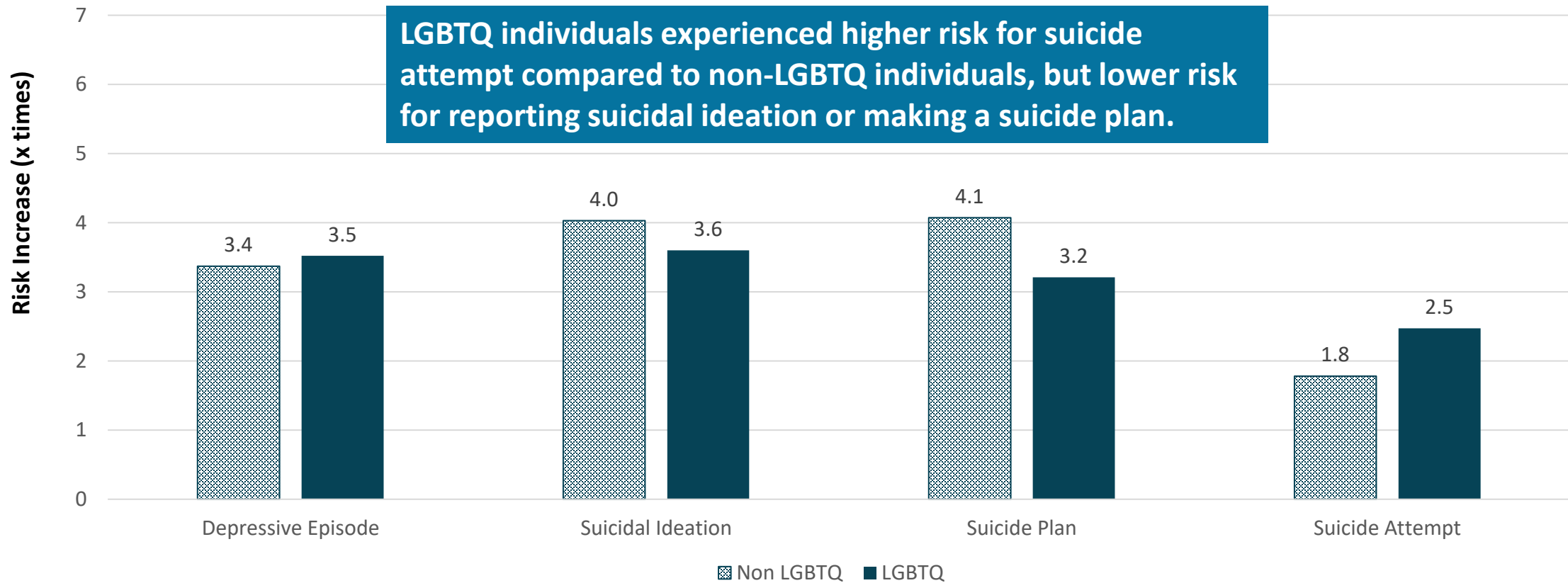
Non LGBTQ Students

ACEs Increase Risk of Mental Health Challenges for LGBTQ Students



3+ ACEs and Behavioral Health Risks and LGBTQ

All students with 3+ ACEs are more likely to experience behavioral health challenges





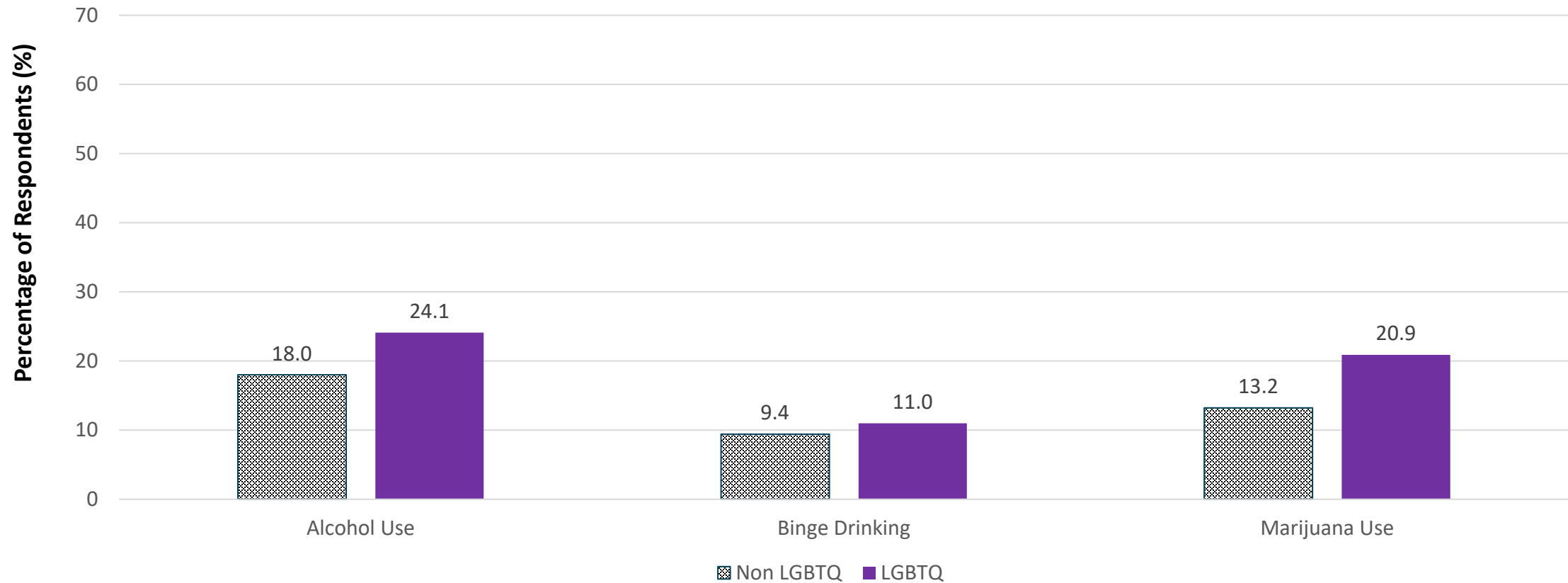
Building Healing Behavioral Health Systems:

Substance Use and
Adverse Childhood Experiences
for LGBTQ Students

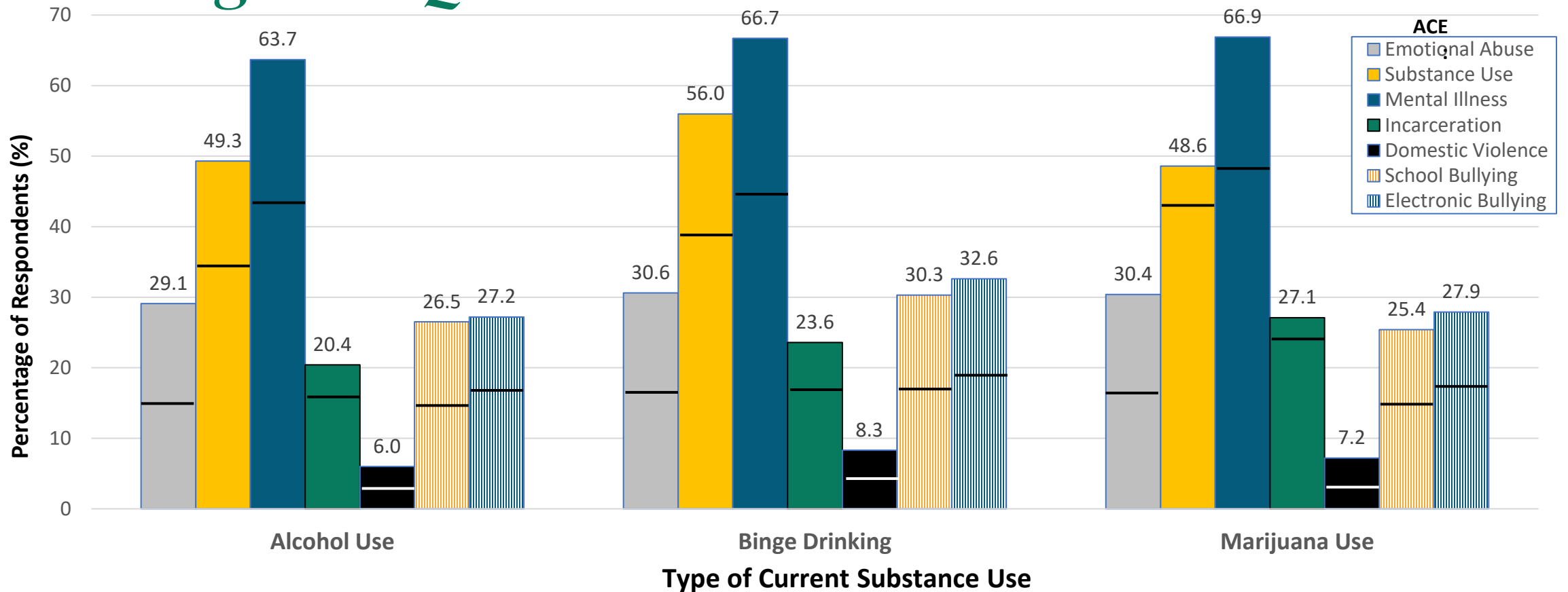


Current Substance Use and LGBTQ Students

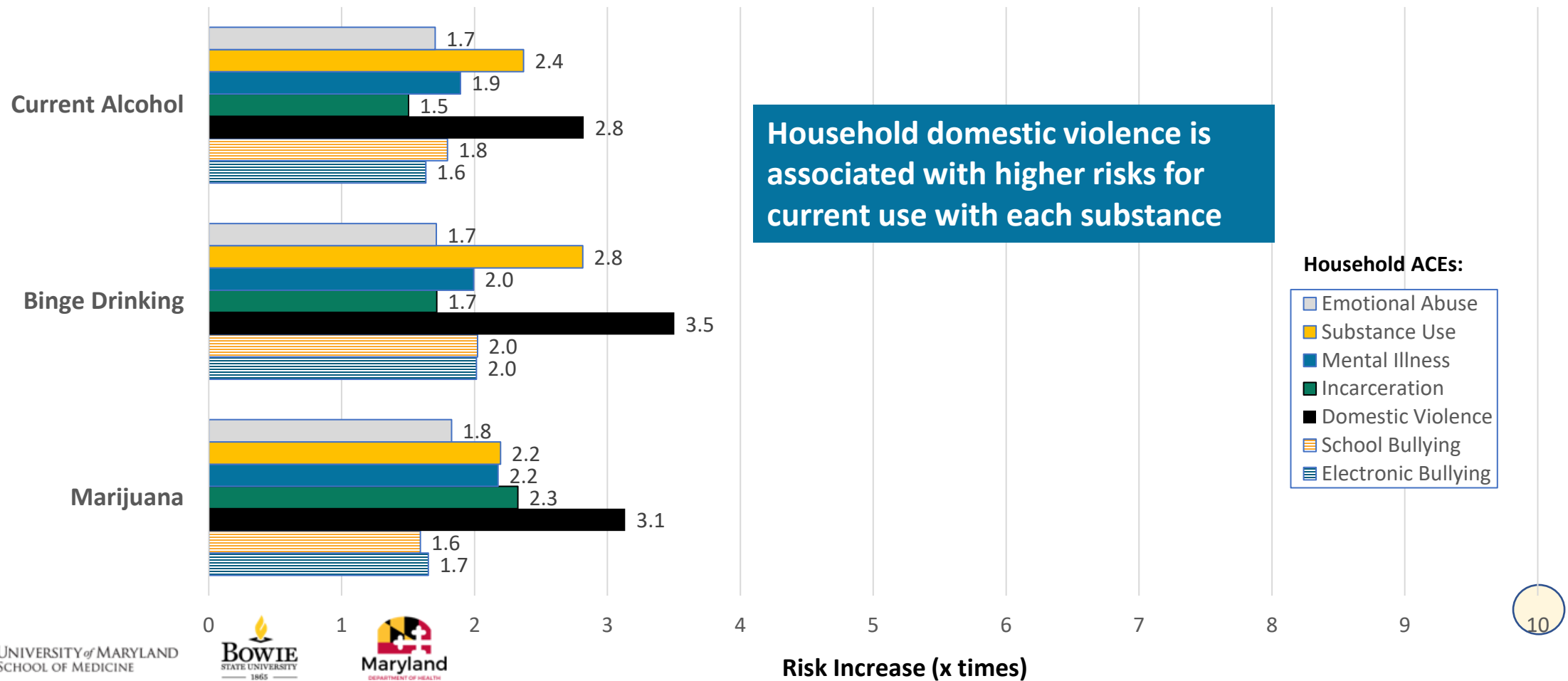
More LGBTQ individuals currently use substances



Current Substance Use and ACEs among LGBTQ Students

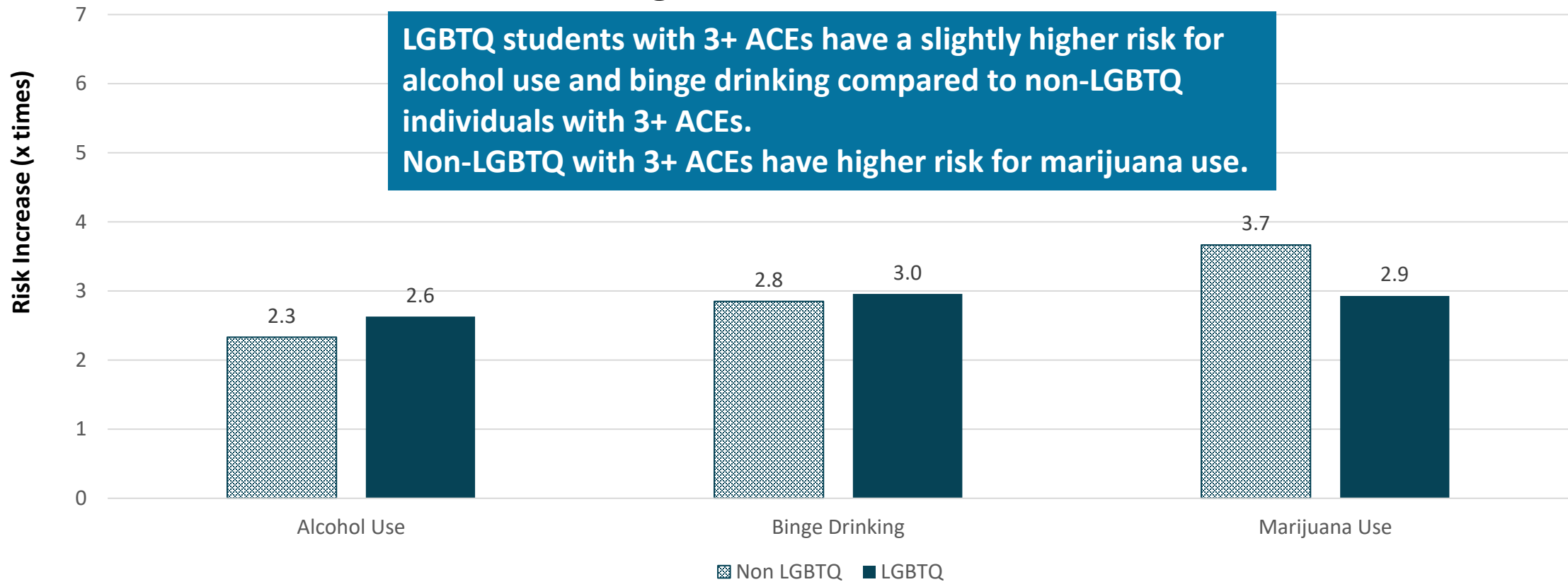


ACEs Increase Risk of Current Substance Use for LGBTQ Students



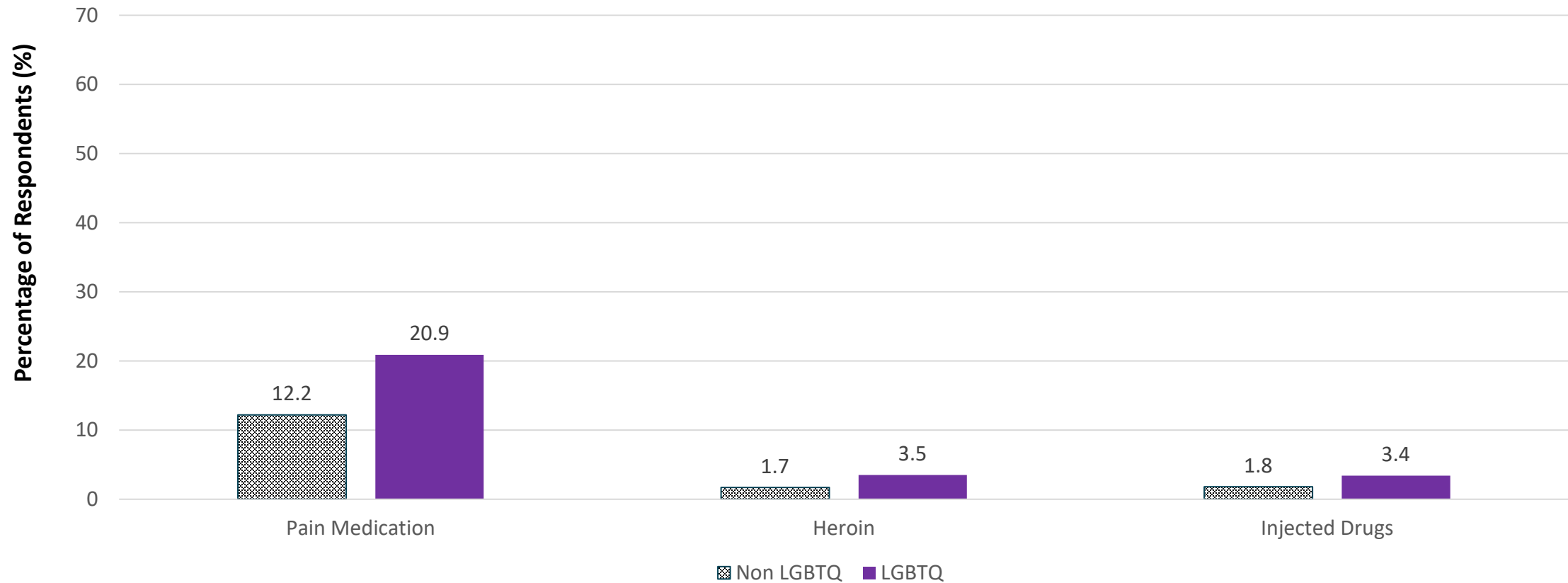
3+ ACEs and Current Substance Use Risks for LGBTQ

All students with 3+ ACEs are more likely to experience current substance use challenges

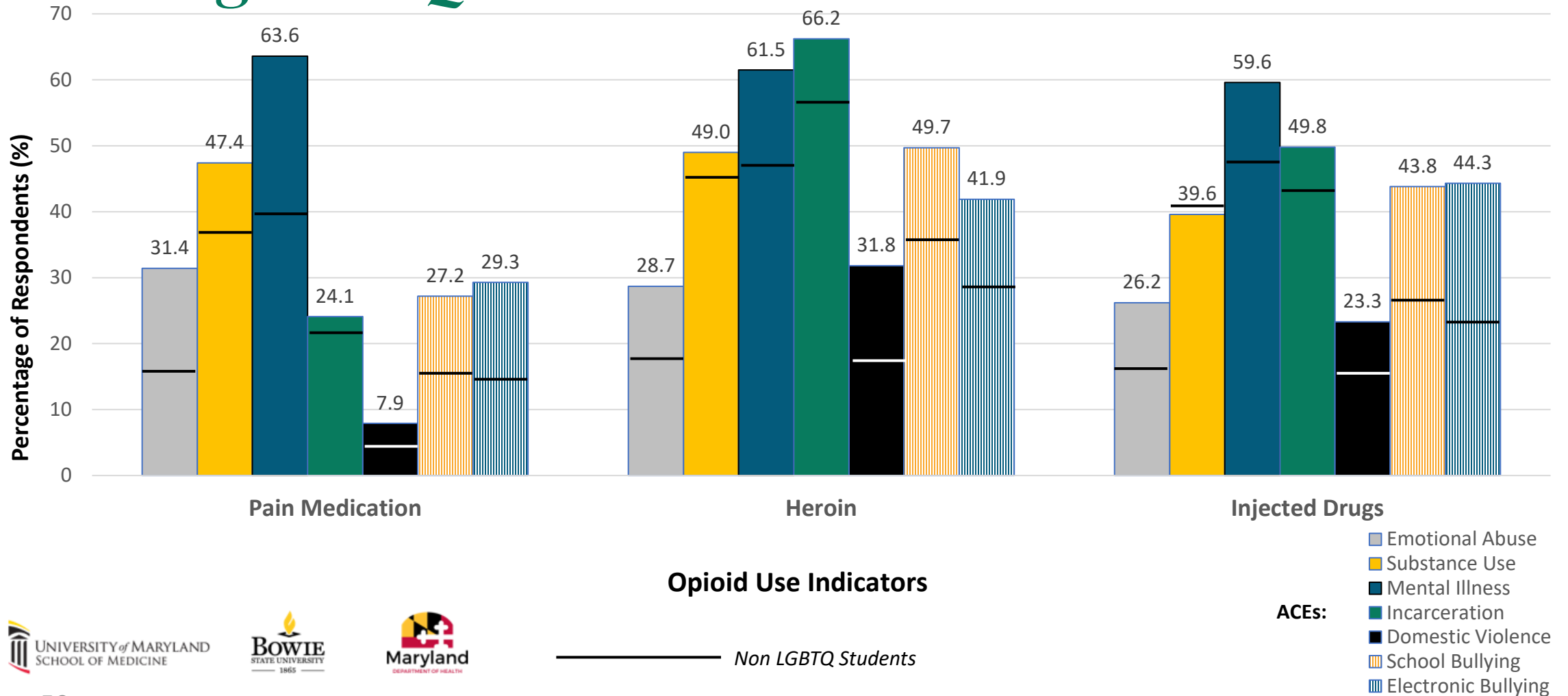


Opioid Use (ever) and LGBTQ Students

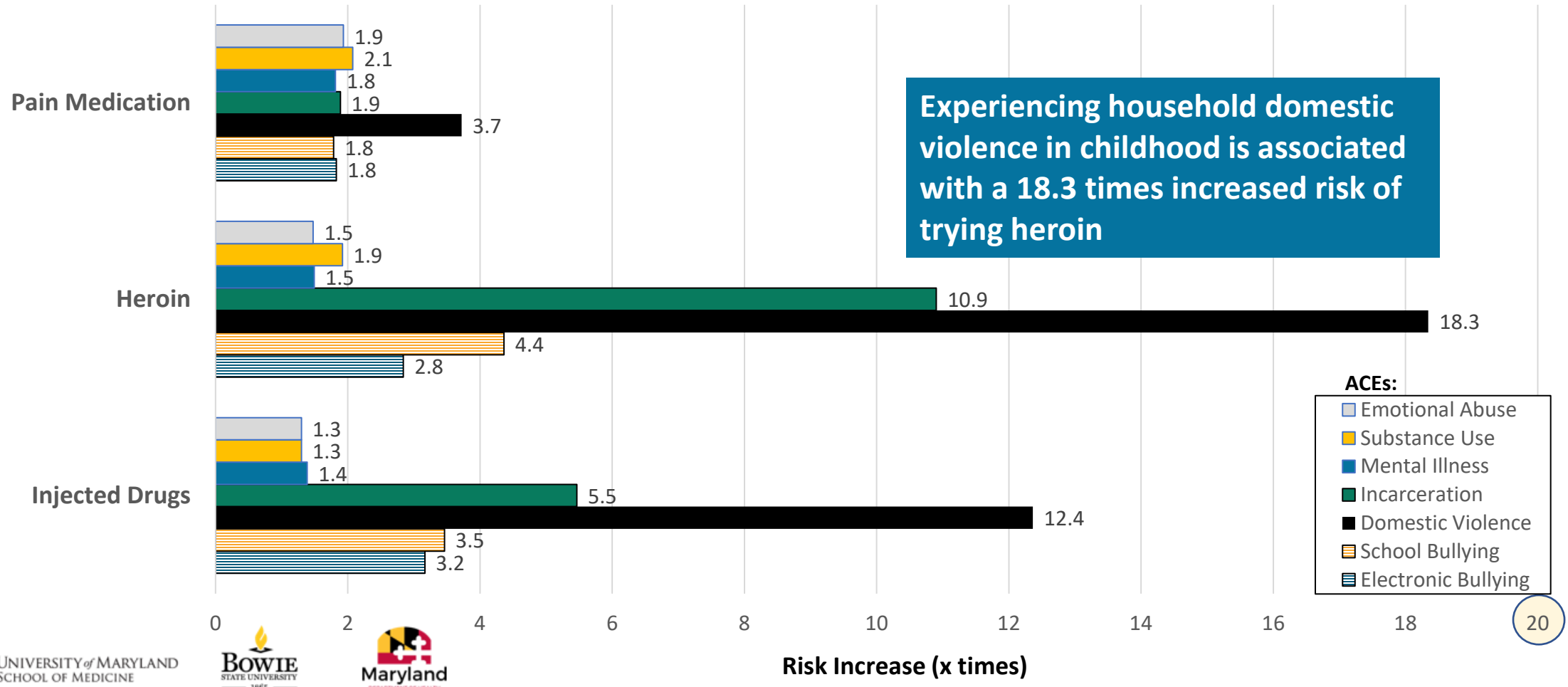
More LGBTQ individuals have tried opioids



Opioid Use (ever) and ACEs among LGBTQ Students



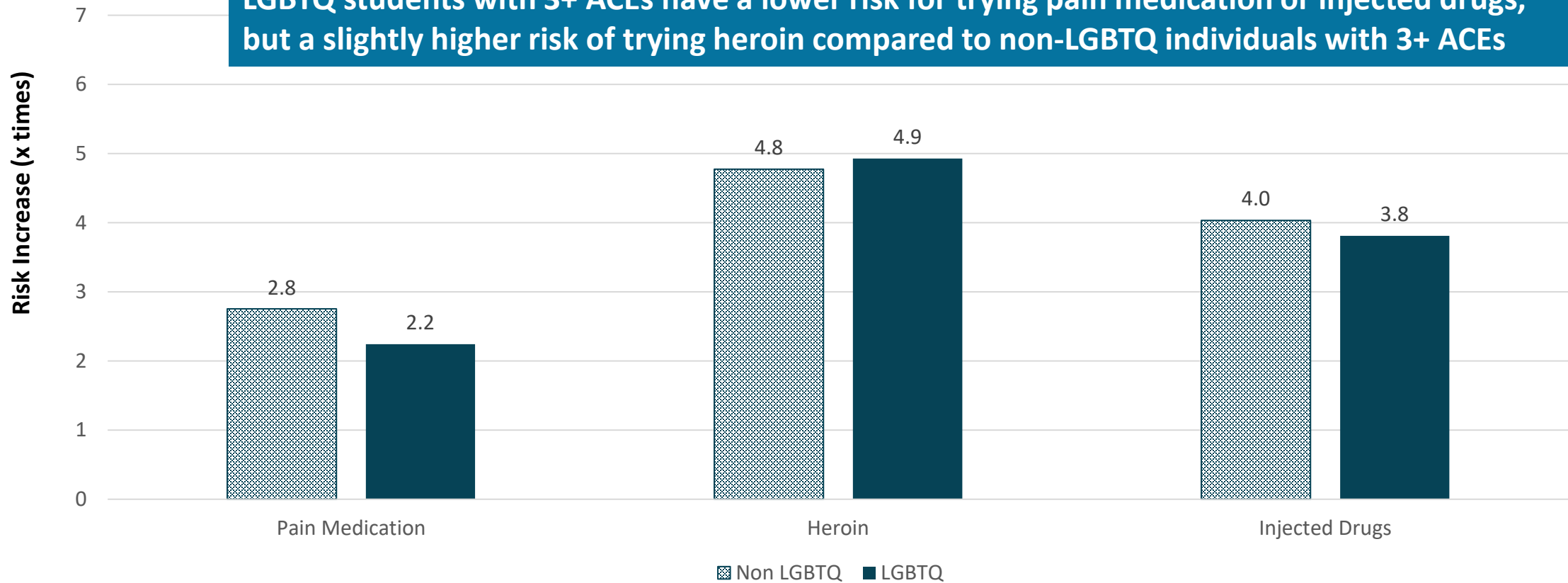
ACEs Increase Risk of Opioid Use (ever) for LGBTQ Students



3+ ACEs and Opioid Use (ever) Risks for LGBTQ

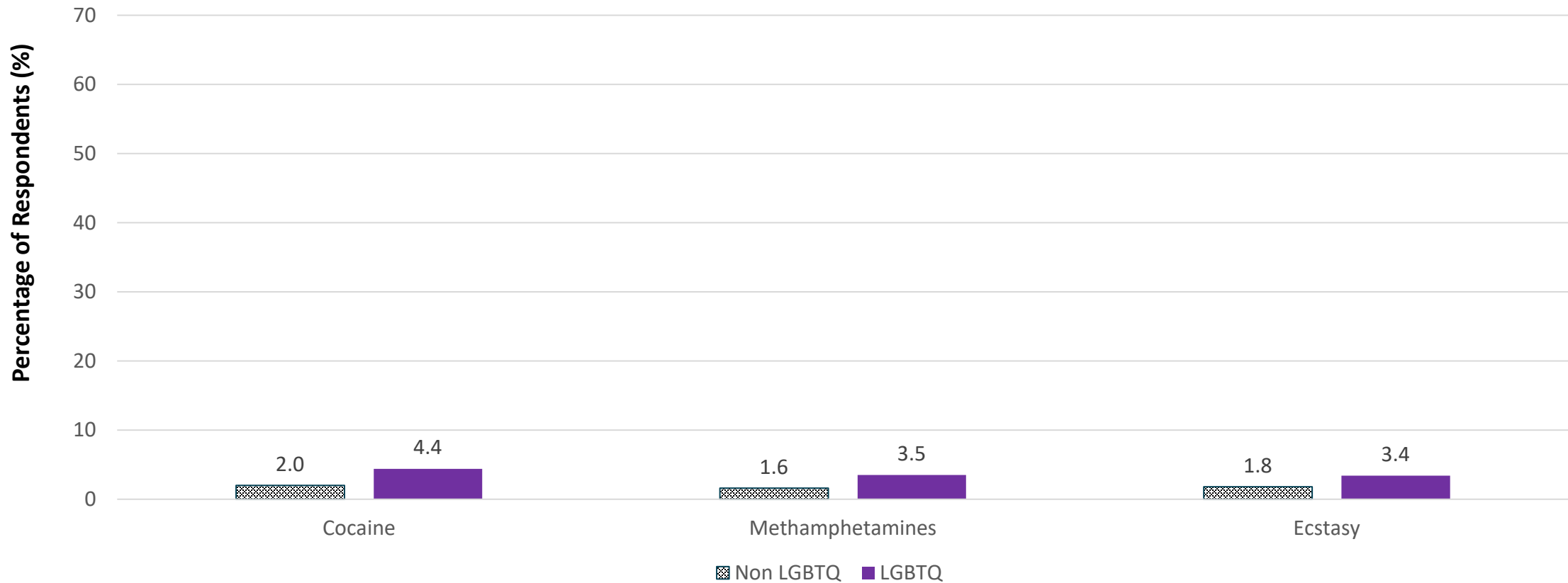
All students with 3+ ACEs are more try opioids

LGBTQ students with 3+ ACEs have a lower risk for trying pain medication or injected drugs, but a slightly higher risk of trying heroin compared to non-LGBTQ individuals with 3+ ACEs

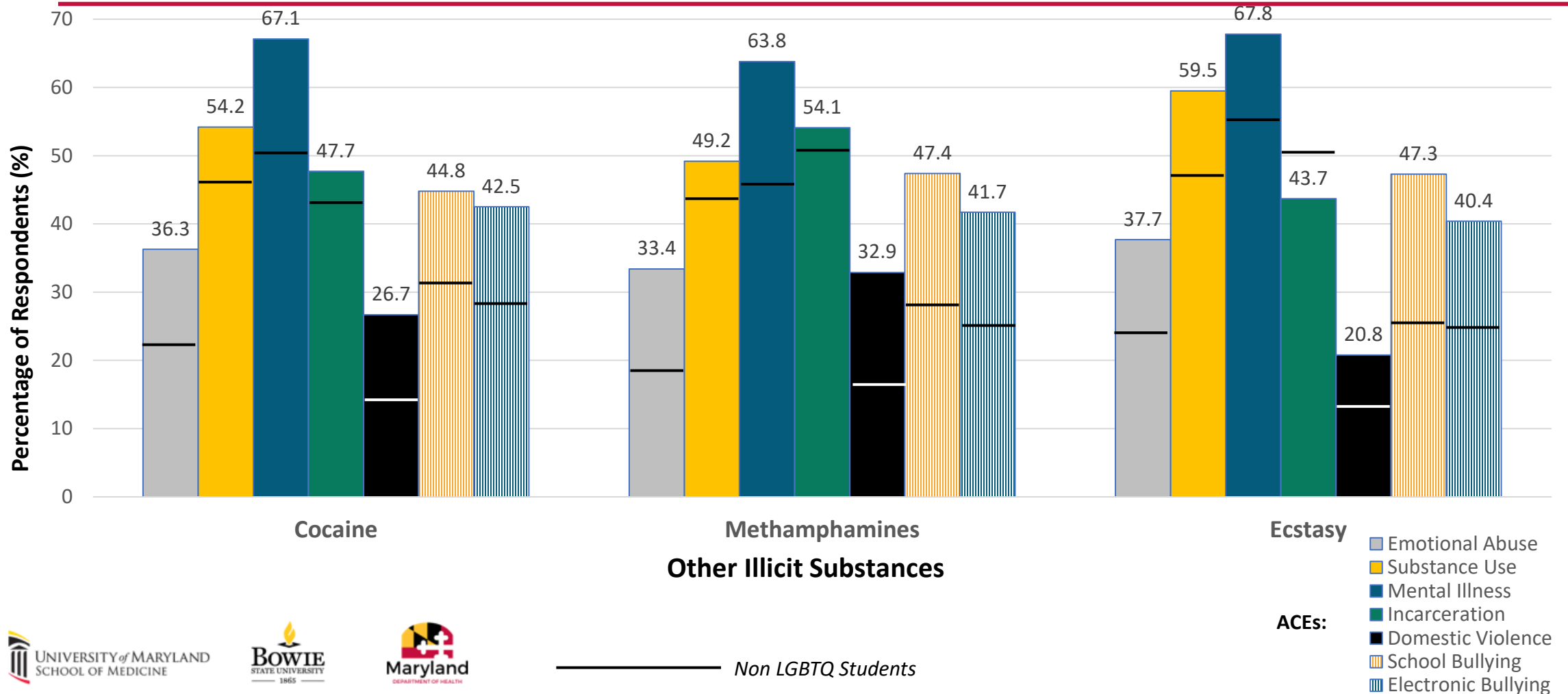


Other Illicit Substance Use (ever) and LGBTQ Students

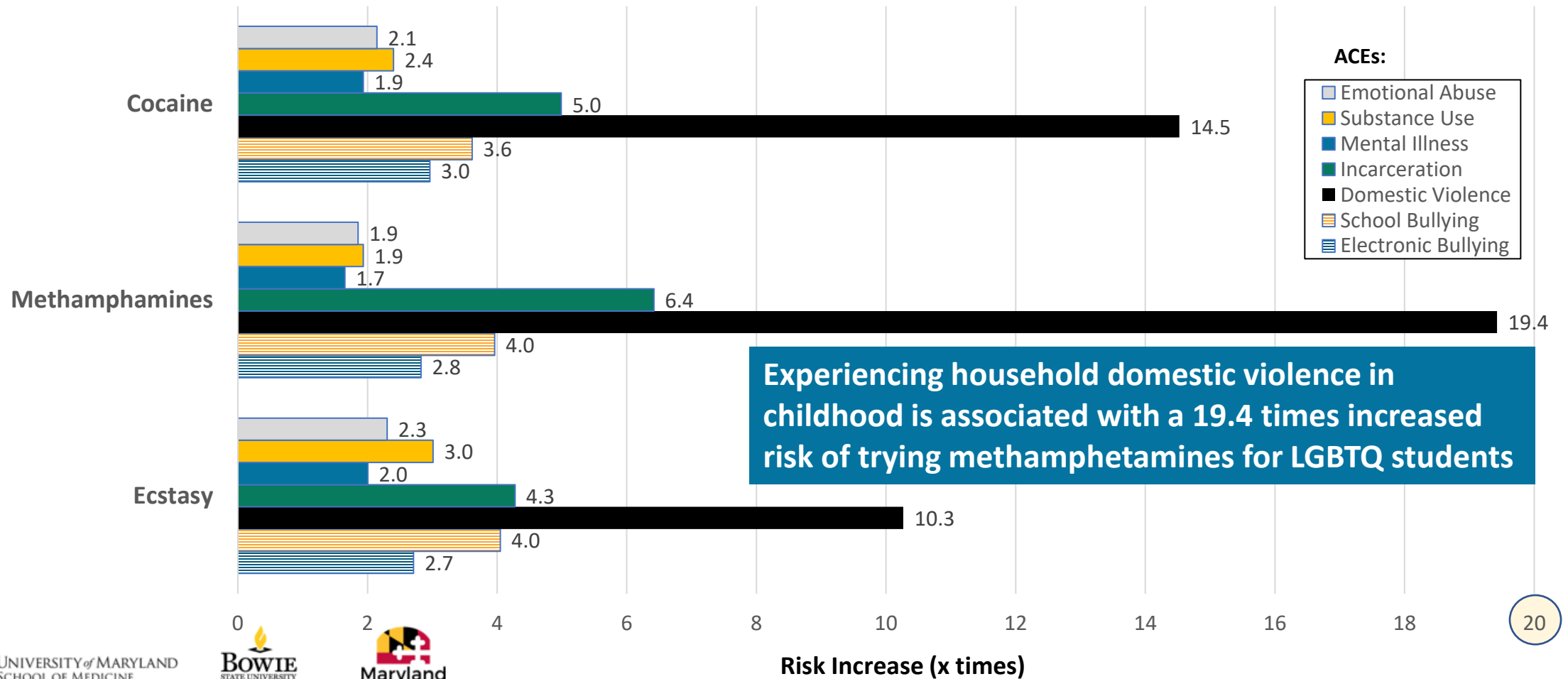
More LGBTQ individuals have tried other illicit substances



Other Illicit Substance Use (ever) and ACEs



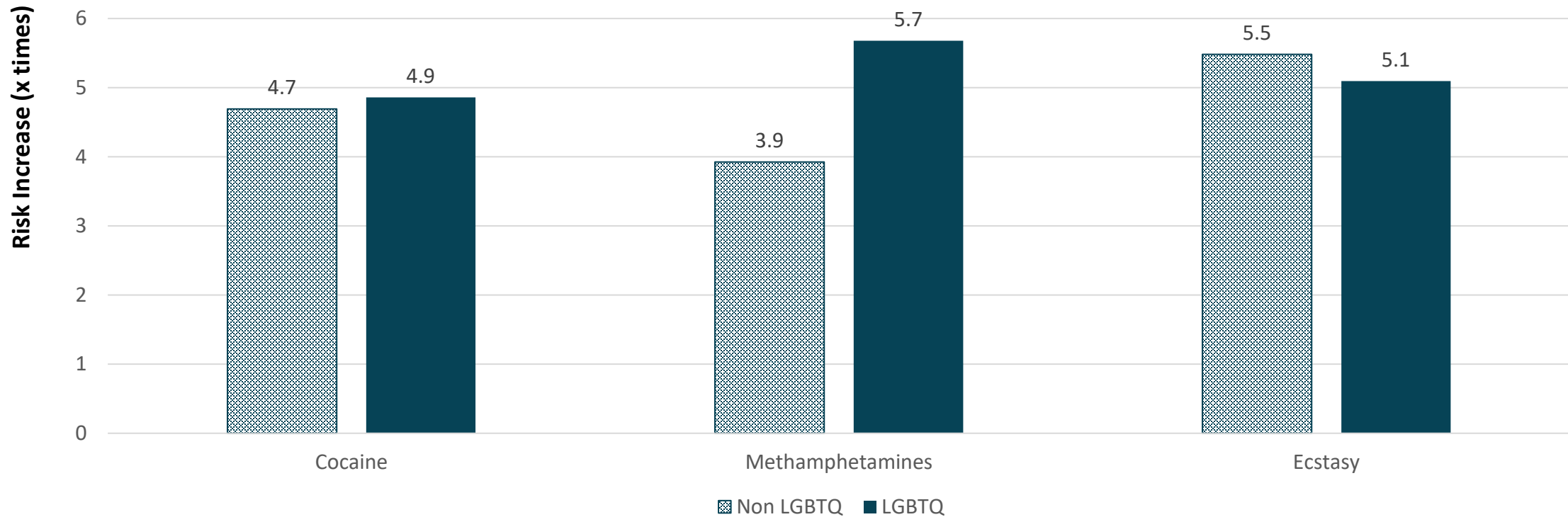
ACEs Increase Risk of Other Illicit Substance Use (ever) for LGBTQ Students



3+ ACEs and Other Illicit Substance Use (ever) Risks for LGBTQ Students

All students with 3+ ACEs are more try other illicit substances

LGBTQ students with 3+ ACEs have a higher risk for trying other cocaine and methamphetamines, but a slightly lower risk of trying ecstasy compared to non-LGBTQ individuals with 3+ ACEs





Building Healing Behavioral Health Systems:

Summary of Behavioral Health Impact by ACE for LGBTQ High School Students



Summary of Behavioral Health Impact for LGBTQ Students by ACE: Emotional Abuse



22%
of LGBTQ students
experienced
Emotional Abuse

LGBTQ students who have experienced emotional abuse are **3.9 times** more likely to experience **Mental Health Challenges**



The Ability to Talk to a Member of Their Family is associated with a decreased risk with emotional abuse for LGBTQ students by

76%

Summary of Behavioral Health Impact for LGBTQ Students by ACE: Household Substance Use



LGBTQ students with household substance use are **2.7 times** more likely to experience **Mental Health Challenges**

34%
of LGBTQ students
live with
Household Substance Use



Food Security is associated with decreased risk with household substance use for LGBTQ students by

59%

Summary of Behavioral Health Impact for LGBTQ Students by ACE: Household Mental Illness



52%
of LGBTQ students
live with
**Household Mental
Illness**

LGBTQ students with household
mental illness are **3 times**
more likely to experience
Mental Health Challenges



**Both Safety At (to/from)
School and Food Security** is
associated with decreased
risk with household mental
illness for LGBTQ students
by

48%

Summary of Behavioral Health Impact for LGBTQ Students by ACE: Household Incarceration



17%
of LGBTQ students
experience
Household Incarceration

LGBTQ students with household incarceration are **2.3 times** more likely to experience **Both Substance Use and Mental Health Challenges**



They are also **11 times** more likely to **try Heroin**



Food Security is associated with decreased risk with household incarceration for LGBTQ students by

62%

Summary of Behavioral Health Impact for LGBTQ Students by ACE: Household Domestic Violence



Although only **3.5%** of LGBTQ students experience **Household Domestic Violence** the impact on behavioral health is substantial

LGBTQ students with household domestic violence are

4.7 times more likely to experience **Mental Health Challenges**



They are **18 times** more likely to **try heroin**

and **19 times** more likely to **try methamphetamines**



Food Security is associated with decreased risk with household domestic violence for LGBTQ students by

86%

Summary of Behavioral Health Impact for LGBTQ Students by ACE: School and Electronic Bullying



20%
of LGBTQ students experience
School Bullying



21%
of LGBTQ students experience
Electronic Bullying

LGBTQ students who are electronically bullied are

4.4 times
more likely to experience
Mental Health Challenges



LGBTQ students who experience school bullying are **4.4 times** more likely to
Try Heroin



Safety at School (and to/from) is associated with decreased risk with school and electronic bullying for LGBTQ students by

58-62%



Building Healing Behavioral Health Systems:

Summary of Behavioral Health Findings



Summary of Findings for LGBTQ Students

- LGBTQ students experience fewer PCEs and more ACEs than non-LGBTQ students
- Almost all relationships across ACEs, PCEs and behavioral health indicators were statistically significant, showing a strong relationship of the impact of ACEs and PCEs for LGBTQ high school students.
- A higher proportion of LGBTQ students experience mental health and substance use challenges, but more non-LGBTQ students experienced both mental health and substance use challenges

Summary of Findings for LGBTQ Students: PCEs and Behavioral Health

- PCEs are associated with reducing risk of behavioral health challenges
 - Mental Health Challenges 23-62% reduction
 - Substance use (ever) 19-65% reduction
 - Both Mental Health and Substance Use Challenges 18-65% reduction
- The highest proportion of individuals experiencing PCEs also experienced Household Mental Illness (48%-51%)

Summary of findings for LGBTQ Students:

Positive Childhood Experiences (PCEs) and ACEs

- PCEs are associated with reducing risk introduced by specific ACEs up to 86%
- Household Domestic Violence is the ACE most impacted by PCEs (86%), and Food Security is the PCE most impacting ACEs (35-86%)
- The Ability to Talk to a Member of Their Family decreased the most risk for emotional abuse (76%)
- PCEs decrease risk from Domestic Violence
 - Food security showed the most decreased risk with domestic violence (85.6%)
 - Safety at school (and to/from) reduced risk for domestic violence at 69.2%

Summary of findings for LGBTQ Students: Mental Health Indicators and ACEs

- Over twice as many LGBTQ students reported experiencing poor mental health compared to non-LGBTQ students
- Emotional Abuse was most often highly associated with poor mental health (3 times)
- Specific ACEs are associated with increasing risk for mental health challenges for LGBTQ students, with domestic violence introducing the most risk for suicide attempts in LGBTQ students at 4.2 times

Summary of findings for LGBTQ Students:

3 or more ACEs

- Having three or more ACEs is associated with an increased risk of adverse behavioral health outcomes for LGBTQ individuals
 - Mental Health Challenges at 5 times
 - Substance use (ever) at 3.2 times
- Non-LGBTQ students experience higher risk for both Mental Health and Substance Use Challenges at 3.9 times
- Having three or more ACEs is associated with an increased risk of adverse mental health and substance use outcomes for LGBTQ individuals by 2.5-5.7 times.
- Non-LGBTQ students have higher risk for suicidal ideation and making a suicide plan, but LGBTQ students have the highest risk for making a suicide attempt.

Summary of findings for LGBTQ Students: Current Substance Use and ACEs

- More LGBTQ individuals with Household Mental Illness (64-67%) reported experiencing all current substance use indicators than any other ACE, followed by Household Substance Use (49-56%).
- Specific ACEs are associated with increasing risk for current alcohol or marijuana use by up to 3.5 times
- Household Domestic Violence is most strongly associated with higher risk of LGBTQ students' current substance use for all substances by 2.8-3.5 times.

Summary of findings for LGBTQ Students:

Lifetime Opioid Use and ACEs

- Household Mental Illness (60-64%), Substance Use (40-49%), and Incarceration (24-66%) were most frequently reported ACEs with opioid use
- Although Household Mental Health was most frequently reported with Pain Medication (64%) and Injected Drugs (60%), Household Incarceration was most frequently reported with Heroin (66%).
- A higher proportion of individuals using heroin (42-50%) or injecting drugs (44%) reported Bullying than those using pain medication (27-29%)
- Specific ACEs are associated with increasing risk for ever using opioids by up to 18.3 times
- Household Domestic Violence is very strongly associated with higher risk of opioid use, with heroin use at 18.3 times more likely.
- Household Incarceration is also strongly associated with trying heroin (10.9 times) and injecting drugs (5.5 times)

Summary of findings for LGBTQ Students: Lifetime Other Illicit Substance Use and ACEs

- Household Mental Illness (64-68%), substance use (49-60%) and incarceration (44-54%), and were most frequently reported ACEs with other illicit substances
- Specific ACEs are associated with increasing risk for ever using other illicit substances by up to 19.4 times
- Household Domestic Violence is strongly associated with higher risk of illicit substance use (10.3– 19.4 times more likely), with methamphetamines risk at 19.4 times more likely.
- Household Incarceration is also strongly associated with trying illicit substances (4.3 – 6.4 times more likely)



Building Healing Behavioral Health Systems:

Potential Action Steps



Potential Action Steps: PCEs



- Disseminate what we know about PCEs to influence policies across systems to increase PCEs as a prevention strategy for LGBTQ individuals including:
 - Offering adult mentoring for LGBTQ children
 - Ensuring food security
 - Improving safety at and to/from school
- Develop resources for people providing direct services on how they can support families in creating opportunities for facilitating positive experiences with LGBTQ children.
Example resource: [LGBTQ Family Acceptance](#)

Potential Action Steps: PCEs and ACE



- Offer interventions to improve communication in households with emotional abuse and domestic violence
- Ensure that households experiencing domestic violence and incarceration have sufficient food security
- Promote supportive relationships outside of family for households with emotional abuse and domestic violence.
- Screen for exposure to harassment, bullying, abuse and discrimination related to LGBTQ+ identity

Potential Action Steps: Mental Health



- Performing mental health screening for LGBTQ individuals to connect individuals with services early.
- Provide psychoeducation on suicide prevention for LGBTQ who have high ACE scores and report depression with particular emphasis on suicide prevention even if the individual does not report suicidal ideation or planning.
- Make LGBTQ+ affirming supports and interventions available in schools, and inpatient and community treatment settings. Example interventions: [Project Youth AFFIRM](#); [AFFIRM Caregiver – The National SOGIE Center](#)

Potential Action Steps: Substance Use



- Perform substance use screening for LGBTQ youths for current alcohol and marijuana use.
- Screen LGBTQ individuals who have experienced household domestic violence or incarceration for illicit substance use.
- Provide psychoeducation on substance use and addiction to LGBTQ individuals using substances and offer referrals to treatment as appropriate.

Potential Action Steps: Interventions



- Offer interventions such as DBT for emotional regulation in response to electronic bullying to potentially reduce suicidal thoughts, planning, and attempts
- Target behavioral health interventions for individuals with Household Domestic Violence at the earliest ages, including:
 - Anger management and conflict resolution skills;
 - Promoting meeting basic needs, such as food security, as a prevention strategy to mitigate risk of being exposed to domestic violence.

Potential Action Steps: Beyond Behavioral Health Systems



- Address community social problems that contribute to ACEs.
- Incorporate interventions across a broad array of service organizations including behavioral health, educational system, domestic violence, child and adult protective services, community outreach organizations, and more.
- Explore how to incorporate effective interventions with agencies where these domains are under their purview.

Potential Action Steps: Data to Action Toolkit



- 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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