Research conducted in the mid-1990s tailored to the exploration of adverse events that prevail in childhood. Adverse events describe the occurrence, regardless of frequency, of negative events that arise primarily within a person’s family system. The types of adverse events are identified based on the particular impact, such as physical, emotional, or sexual harm. Subsequent research has introduced variations of psychological, physiological, and psychosocial implications based on adverse childhood experiences (ACE) exposure. Previous descriptive research has helped identify the relationship between adverse childhood experiences and adulthood adversity, but little is known of direct correlations between adult stress and coping mechanisms concurrent with ACE vulnerability. The purpose of this study was to explore the relationship that exists among ACE, stress-related behaviors, and coping mechanisms. A total of 110 adult participants on a college campus in Western Kentucky completed a survey that inquired about socio-demographics, stress-related behaviors, positive coping mechanisms, and exposure to adverse childhood experiences. The ACE questionnaire, previously devised in another research study, was utilized to score the occurrence of events from zero to all ten events taking place on an individual basis. For the purpose of ethical practice and protection of participants, the Institutional Review Board approved the study and consent was given prior to active participation. Data derived from the current study demonstrated a correlation between ACE and a higher occurrence of stress-related behaviors and a decrease prevalence of positive coping mechanisms. Using SPSS, Pearson’s correlation was computed at $r = 0.538$ and significance of less than $<0.01$ between the average occurrence of stress-related behaviors and ACE occurrence. Stress-related behaviors were identified in a series of six similar questions that ask the frequency of participation in a behavior when experiencing stress. The most common stress-related behavior was isolation with a mean value of 1.8 and standard deviation of 1.0. Of the 110 participants 69.1% were females, 89.1% were between ages 18-24, and only 33.6% of the total sample did not report an adverse childhood experience. Based on the sensitivity of the survey questions derived from the Adverse Childhood Experience questionnaire, the validity of results in the event of false or unreported disclosure to personally inquisitive questions may have altered study findings. The study findings are essential to addressing modifiable risk factors that precipitate negative health outcomes in adulthood that can lead to early mortality.

Title:
Childhood Adversity That Impacts Coping and Stress in Adulthood

Keywords:
Adulthood, Adverse Childhood Experiences and Nursing Care

References:

Abstract Summary:
The study findings are essential to addressing modifiable risk factors that precipitate negative health outcomes in adulthood that can lead to early mortality based on exposure to adverse childhood experiences.

Content Outline:
Introduction/ Background

- CDC Kaiser-Permanente ACE Study Findings: discuss initial pilot study that identified the prevalence of adverse childhood experiences
- Psychosocial impacts of adverse childhood experiences: concurrent display of atypical behaviors that impede an adults ability to thrive sufficiently
- Neurobiological and psychological implications of early exposure to adverse experiences: How the body and mind manifest negative responses to stressful, adverse events in life prior to adulthood

Problem

- Discuss increased prevalence of psychological disorders, addictions, and destructive behaviors that impact the wellbeing of an adult concurrent of ACE exposure

Methods


6. Adverse Childhood Experiences and chronic hypothalamic-pituitary-adrenal activity

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• Describe in detail the means in which data was collected
• Include potential limitations of method and data collection

Results

• Sample size, percentage of male or female and age sub-groups
• Statistical significance of findings: describe aspects of coping and stress-related behaviors that was either support or disproven
• Correlations between socio-demographics and ACE, stress-related behaviors, and coping mechanisms

Implications

• How findings will affect clinical aspects of providing adequate care with the inclusion of adverse event exposure
• Discuss screening and preventative measures applicable to adults on college campuses

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Professional Experience: As the primary investigator for this research data collection, qualifications include the ability to recognize and understand components of research after receiving formal nursing research education in understanding variables, outcomes, and how to identify measurable correlations. Competent comprehension related to psychosocial aspects of human life and flourishing that relates to this research topic was acquired in Bachelor level program studies of nursing and psychology.

Author Summary: Knowledge in the field of psychology at a baccalaureate degree level was acquired prior to entering nursing. As an aspiring health professional, the goal is to utilize a psychology background and professional nursing degree to become a psychiatric mental-health nurse practitioner (PMHNP) at the doctoral level while continuing to research behavioral psychology. The ultimate career prospect is to make an impact in vulnerable communities that require the healing force of nursing holism.