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CHILDREN AFFECTED BY HOUSEHOLD SUBSTANCE USE OR MENTAL HEALTH ISSUES

HOUSEHOLD SUBSTANCE USE AND MENTAL HEALTH ISSUES, ADVERSE CHILDHOOD EXPERIENCES, AND FAMILY RESILIENCE

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Roughly 1 in 8 children in the US live with someone who has substance use and/or mental health issues. These children frequently experience additional adverse childhood experiences (ACEs). However, family resilience may reduce the risk of adverse experiences.

CO-OCCURRING ADVERSE CHILDHOOD EXPERIENCES

ADVERSE CHILDHOOD EXPERIENCES (ACEs)

An ACE is an event that occurs in childhood that is either potentially traumatic or may undermine a child’s sense of safety, stability, and bonding with parents or other caring adults. ACEs can negatively impact a child’s health and well-being, and experts view cumulative ACEs as particularly harmful.¹

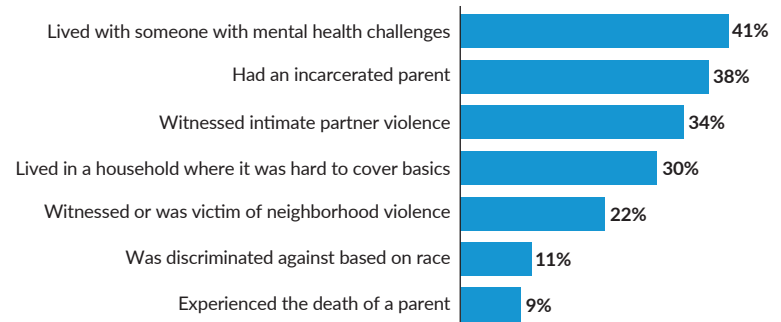
Figure 1 reports the share of children who experienced a given ACE, among those who lived with someone with a substance use issue. Exposure to additional ACEs is common among these children. For example, 41 percent of children exposed to household substance use issues lived with someone with a mental health challenge, 38 percent had an incarcerated parent, 34 percent witnessed intimate partner violence, and 30 percent lived in families who faced difficulties providing basic necessities, such as food or housing.

Figure 2 reports the share of children who experienced a given ACE, among those who lived with someone with a mental health challenge. Additional ACEs are common among children exposed to household mental health challenges. For example, 41 percent of children exposed to a household mental health challenge lived with someone with substance use issues,² 33 percent lived in families who experienced difficulties providing basic necessities, such as food or housing, 27 percent witnessed intimate partner violence, and 24 percent had an incarcerated parent.

FIGURE 1

Household Substance Use Issues Frequently Co-Occur with Additional ACEs

Share of children who experienced a given ACE, among those who lived with someone with substance use issues

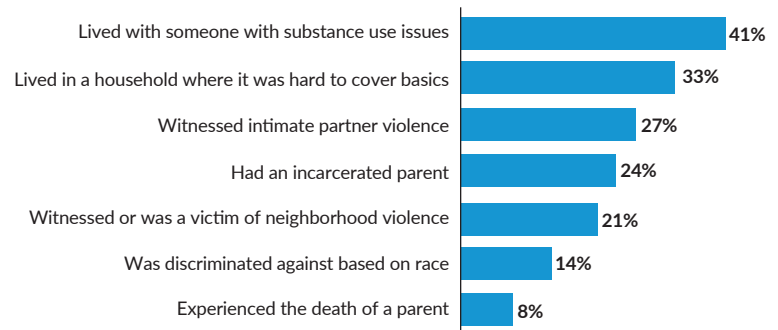


Source: National Survey of Children’s Health (NSCH; two-year dataset, 2019–20). See the About the Data section for more details.

FIGURE 2

Household Mental Health Challenges Frequently Co-Occur with Additional ACEs

Share of children who experienced a given ACE, among those exposed to household mental health challenges



Source: National Survey of Children’s Health (NSCH; two-year dataset, 2019–20). See the About the Data section for more details.

¹ Rebecca E. Lacey, and Helen Minnis, “Practitioner Review: Twenty Years of Research with Adverse Childhood Experience Scores – Advantages, Disadvantages and Applications to Practice,” *Journal of Child Psychology and Psychiatry* 61, no. 2 (2019): 116–30, <https://doi.org/10.1111/jcpp.13135>; Joshua P. Mersky, James Topitzes, Arthur J. Reynolds, “Impacts of Adverse Childhood Experiences on Health, Mental Health, and Substance Use in Early Adulthood: A Cohort Study of an Urban, Minority Sample in the U.S.,” *Child Abuse & Neglect* 37, no. 11 (2013): 917–25, <https://doi.org/10.1016/j.chiabu.2013.07.011>; Edward F. Garrido, Lindsey M. Weiler, and Heather N. Taussig, “Adverse Childhood Experiences and Health-Risk Behaviors in Vulnerable Early Adolescents,” *The Journal of Early Adolescence* 38, no. 5 (2018): 661–80, <https://doi.org/10.1177/0272431616687671>.

² It is a coincidence that the statistics reported at the top of figures 1 and 2 are equal in value (41 percent). The underlying populations are different across figures (denominators), as are the statistics reported (numerators).

FAMILY RESILIENCE

Family resilience is a family's capacity to cope with trauma and hardship. It is thought to help families withstand and recover from difficult life situations. The National Survey of Children's Health (NSCH) survey measures family resilience by asking how families handle adversity, such as how they communicate, work together, stay hopeful, or recognize family strengths. We have defined "higher" family resilience as responding "all or most of the time" to all four family resilience questions and "lower" resilience as any score below "higher."

FAMILY RESILIENCE AND CO-OCCURRING ACES

For children in families with higher resilience, co-occurring ACEs are often less common compared with children in families with lower resilience.

Figure 3 shows that for children who lived with someone with substance use issues, other ACEs were less common if they lived in a family with higher resilience. For example, 33 percent of children in families with higher resilience who lived with someone with substance use issues also witnessed intimate partner violence. This is compared with 38 percent of their peers in families with lower resilience.

Figure 4 shows that for children who lived with someone with mental health challenges, in most cases other ACEs were less common if they lived in a family with higher resilience. For example, 18 percent of children in families with higher resilience who lived with someone with mental health challenges also witnessed or were a victim of neighborhood violence. This is compared with 27 percent of their peers in families with lower resilience.

SHARE OF CHILDREN LIVING WITH FAMILIES WITH HIGHER RESILIENCE

Most children who lived with someone who had a substance use or mental health challenge also lived in a family with higher resilience.



About 3 in 4 children who have lived with someone with a substance use issue also lived in a family with higher resilience.



About 2 in 3 children who have lived with someone with mental health challenges also lived in a family with higher resilience.

ABOUT THE PROJECT

This research was funded by the US Department of Health and Human Services Office of the Assistant Secretary for Planning and Evaluation under Contract Number #HHSP233201500048I and carried out by NORC and the Urban Institute. The opinions, views, and data expressed in this fact sheet are those of the authors and do not reflect the official position of ASPE or the US Department of Health and Human Services. For more information on this fact sheet, please contact laura.radel@hhs.gov.

To learn more about ACEs and how to prevent their impact, check out the following resources:

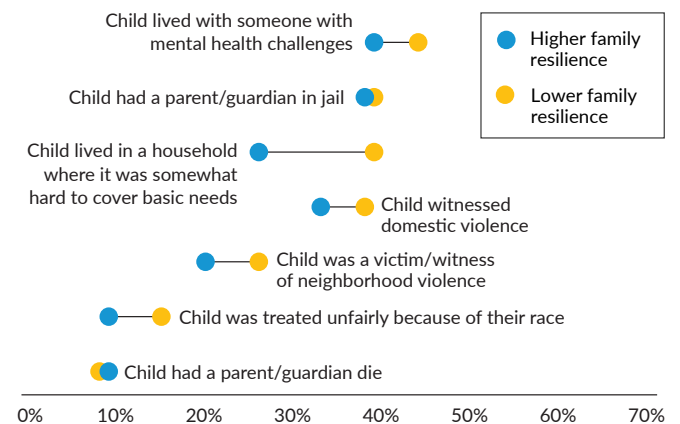
[CDC Resource Materials on Adverse Childhood Experiences](#)

[Preventing Adverse Childhood Experiences: Leveraging the Best Available Evidence](#)

FIGURE 3

Children Exposed to Household Substance Use Issues in Families with Greater Resilience Are Less Likely to Report Other ACEs Shown Here

Share of children who experienced a given ACE, among those who have lived with someone with substance use issues by degree of family resilience

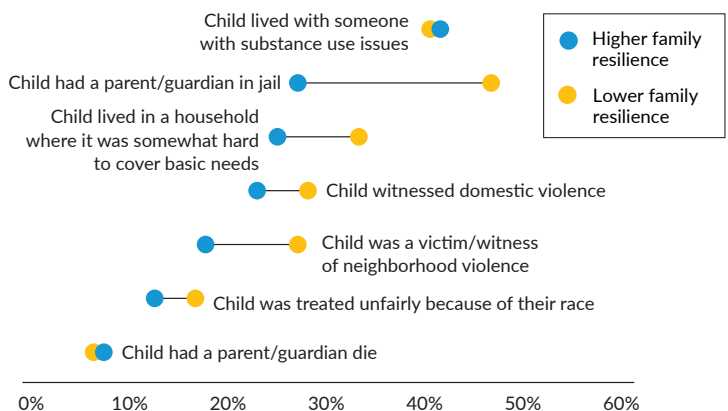


Source: National Survey of Children's Health (NSCH; two-year dataset, 2019–20). See the About the Data section for more details.

FIGURE 4

Children Exposed to Household Mental Health Challenges in Families with Greater Resilience Are Less Likely to Report Other ACEs Shown Here

Share of children who experienced a given ACE, among those who have lived with someone with mental health challenges by degree of family resilience



Source: National Survey of Children's Health (NSCH; two-year dataset, 2019–20). See the About the Data section for more details.

ABOUT THE DATA

This fact sheet uses data from the National Survey of Children's Health (NSCH) 2019–20 combined two-year dataset. The NSCH is a survey conducted by the US Census Bureau and collects a broad range of information about children's health and well-being. The survey is designed to produce representative national- and state-level estimates of prevalence of child and family measures. The survey data were weighted to reflect the demographic composition of noninstitutionalized children and young people from birth to age 17.³

The NSCH survey measures family resilience as a composite measure based on affirmative responses to combinations of the following four survey items: "When your family faces problems, how often are you likely to do each of the following?" (a) Talk together about what to do, (b) Work together to solve our problems, (c) Know we have strengths to draw on, and (d) Stay hopeful even in difficult times. We have defined "higher" family resilience as responding, "all or most of the time," to all four questions, and "lower" resilience is defined as any score lower than "higher."

³ National Survey of Children's Health (two-year combined dataset, 2019–20): STATA dataset, Child and Adolescent Health Measurement Initiative (CAHMI), Data Resource Center for Child and Adolescent Health supported by Cooperative Agreement U59MC27866 from the US Department of Health and Human Services, Health Resources and Services Administration, Maternal and Child Health Bureau, accessed June 22, 2022, <https://childhealthdata.org>.