

Using traumatic childhood experiences to understand substance use

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Some people are more likely to develop substance use disorders than others. Medical University of South Carolina researchers wondered whether adverse childhood experiences (ACEs), such as abuse or

neglect, could be one reason why.

They asked men and [women](#) participating in substance use research to complete an ACE questionnaire and to provide details on their use of four substances: tobacco, alcohol, cocaine and opioids.

The MUSC study was led by Aimee McRae-Clark, Pharm.D., professor of Psychiatry and Neuroscience, and neuroscience doctoral candidate Erin Martin. They reported their findings in *The American Journal of Drug and Alcohol Abuse*.

Participants with a history of a diverse array of ACEs were more likely to develop some kind of substance use disorder and to relapse after treatment. Women, who reported more frequent and varied ACEs, were more likely to use drugs such as cocaine or opioids.

"People with more ACEs are more likely to present with SUD and have a negative treatment experience," said Martin.

What are ACEs?

ACEs are [traumatic events](#) that occur during childhood, such as witnessing violence, being abused or neglected or experiencing household dysfunction.

According to the Centers for Disease Control and Prevention, people with ACEs have a higher potential for not only poorer mental and [physical health](#), but also worse educational experiences, employment opportunities and socio-economic statuses. The more ACEs people experience, the higher their risk for problems in adulthood. This includes SUD.

"SUDs don't occur in a vacuum," said Martin. "The use of more highly

stigmatized drugs may be associated with worse childhoods."

Experience matters

Martin and McRae-Clark found that people who experience more kinds of ACEs were more likely to use drugs such as cocaine or opioids.

People with opioid use disorder were more likely to have experienced household dysfunction, such as the incarceration or death by suicide of a parent. However, those with cocaine use disorder were more likely to have experienced emotional or [physical abuse](#).

Users of tobacco and cannabis, however, were not as likely to have had as many ACEs as their cocaine and opioid using counterparts. Martin and McRae-Clark think this may be due to perceived risk. People with more ACEs are more likely to engage in risk-taking behavior, and cannabis and tobacco may not be perceived as risky.

"Stigma may play a role," said McRae-Clark.

They also saw differences between men and women. Women reported ACEs more often than men, including reporting ACEs, such as [sexual abuse](#), as many as four times more than men. This greater burden of ACEs could explain why women are more vulnerable to a phenomenon called telescoping, or rapidly progressing from [drug](#) use to drug addiction.

Better treatment

Current SUD treatments are tailored to the substance, not to the person, McRae-Clark explained. Treatments that fail to consider all of the necessary information about a person's SUD can lead to disappointing

results.

"There is so much work to be done," she said. "There is no one-size-fits-all model."

Martin and McRae-Clark explained that understanding SUDs in greater detail, including the role ACEs played in their development, could allow for more comprehensive, effective and empathic approaches to treatment and prevention.

"ACEs can inform future treatment directions," said McRae-Clark. "Trauma-focused interventions are important."

More information: Erin L. Martin et al, Differential prevalence of Adverse Childhood Experiences (ACEs) by gender and substance used in individuals with cannabis, cocaine, opioid, and tobacco use disorders, *The American Journal of Drug and Alcohol Abuse* (2023). [DOI: 10.1080/00952990.2023.2171301](https://doi.org/10.1080/00952990.2023.2171301)

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