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## Adverse Childhood Experiences and the Risk of Drug Overdose in Adulthood

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## Background

- In the United States, approximately 20 million citizens struggle with substance use disorders (Kelly et al., 2017). In 2020, roughly 92,000 people fatally overdosed from illicit drugs or prescription opioids (National Institute on Drug Abuse [NIDA], 2022).
- Approximately 1 in 4 people with opioid use disorder become involved with the criminal justice system. Following incarceration, these individuals also experience a significantly higher chance of fatal overdose upon release (NIDA, 2020).
- Greater exposure to adverse childhood experiences (ACEs) has been associated with opioid use risk and numerous other negative outcomes including criminal offending, victimization, drug use, drug dependence, and earlier injection drug use (Taplin et al., 2014; Wang et al., 2021).
- ACEs encompass a variety of traumatic events that occur during one's youth. ACEs are primarily grouped into three categories: abuse, neglect, and household dysfunction. These experiences may be physical, mental, emotional, or sexual in nature.
- Exposure to ACEs increases risk of future victimization and antisocial behavior (Connolly, 2019). Some individuals may develop aggressive coping mechanisms or engage in criminal behaviors as a response to traumatic childhood events (Waite et al., 2010).
- Rates of childhood trauma and substance abuse are particularly high amongst incarcerated individuals (Wolff et al., 2009).
- The global rise of the opioid epidemic has intensified the need to better understand, address, and combat factors associated with illicit substance use and addiction.

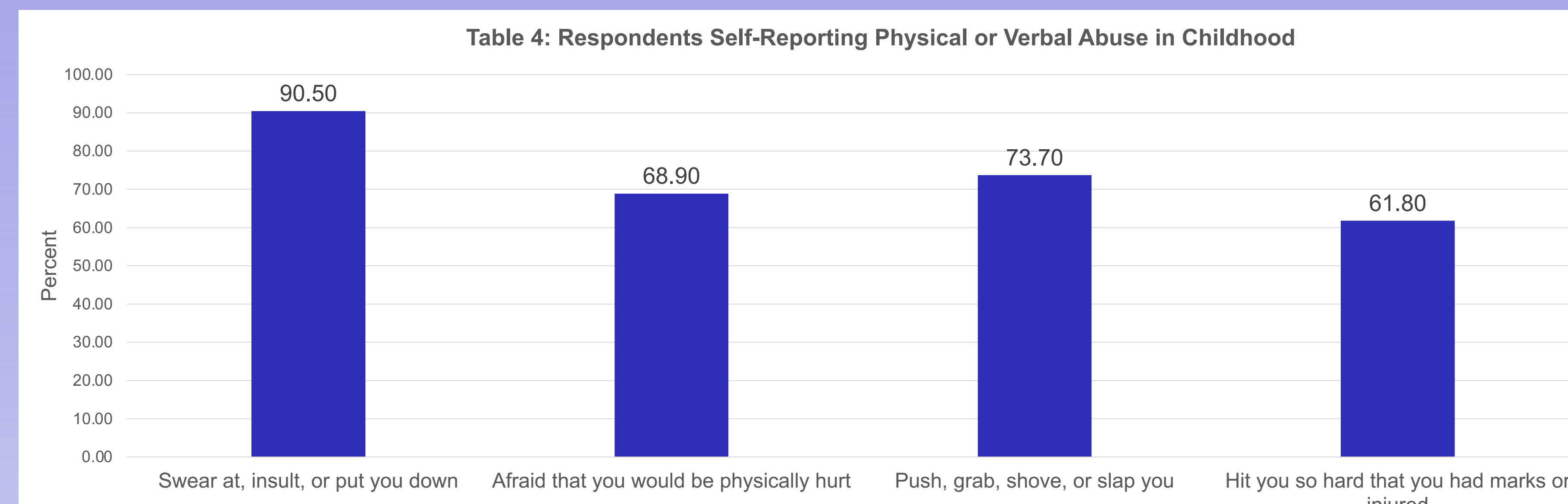
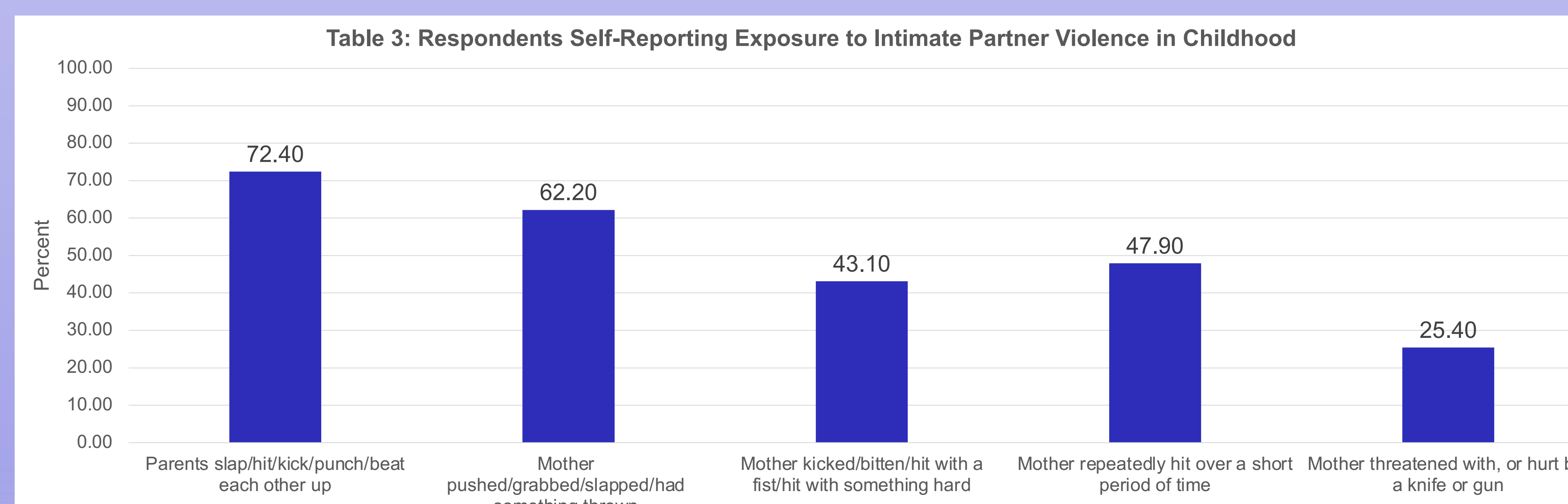
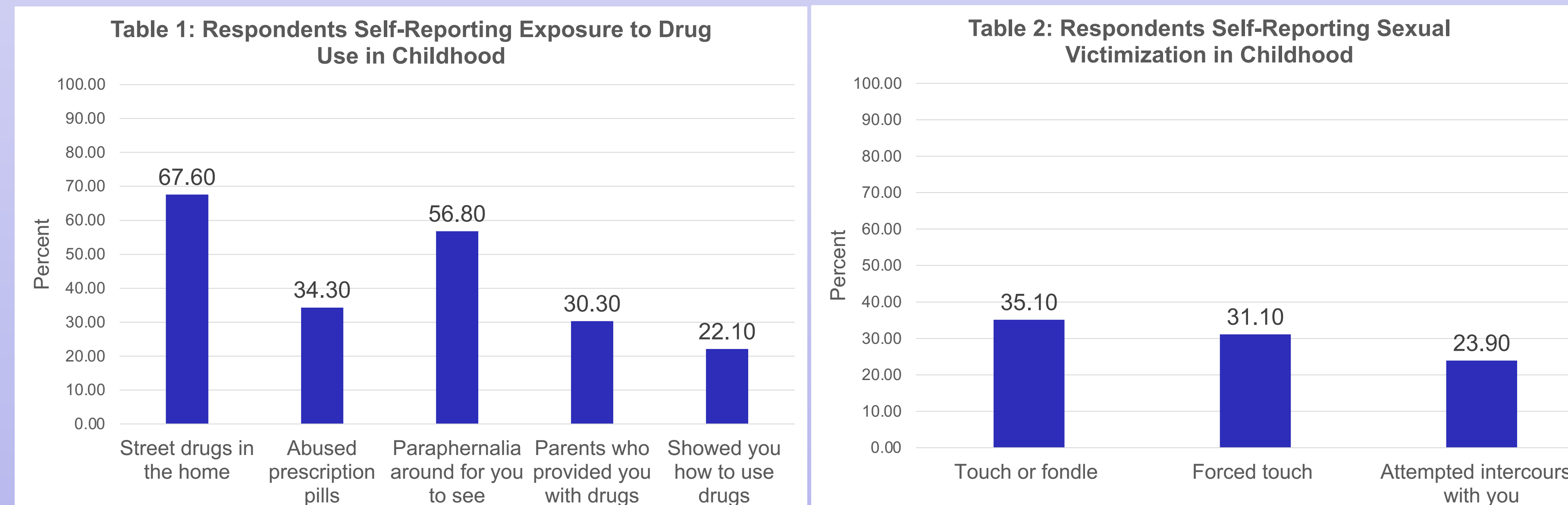
## The Current Study

- The current study presents preliminary descriptive results from an ongoing longitudinal study examining the impact of correctional-based residential substance abuse treatment programs and reentry programs on criminal offending, substance use, as well as nonfatal and fatal overdose.
- Specifically, this study examines exposure to ACEs, drug use history, and nonfatal drug overdose amongst incarcerated individuals.

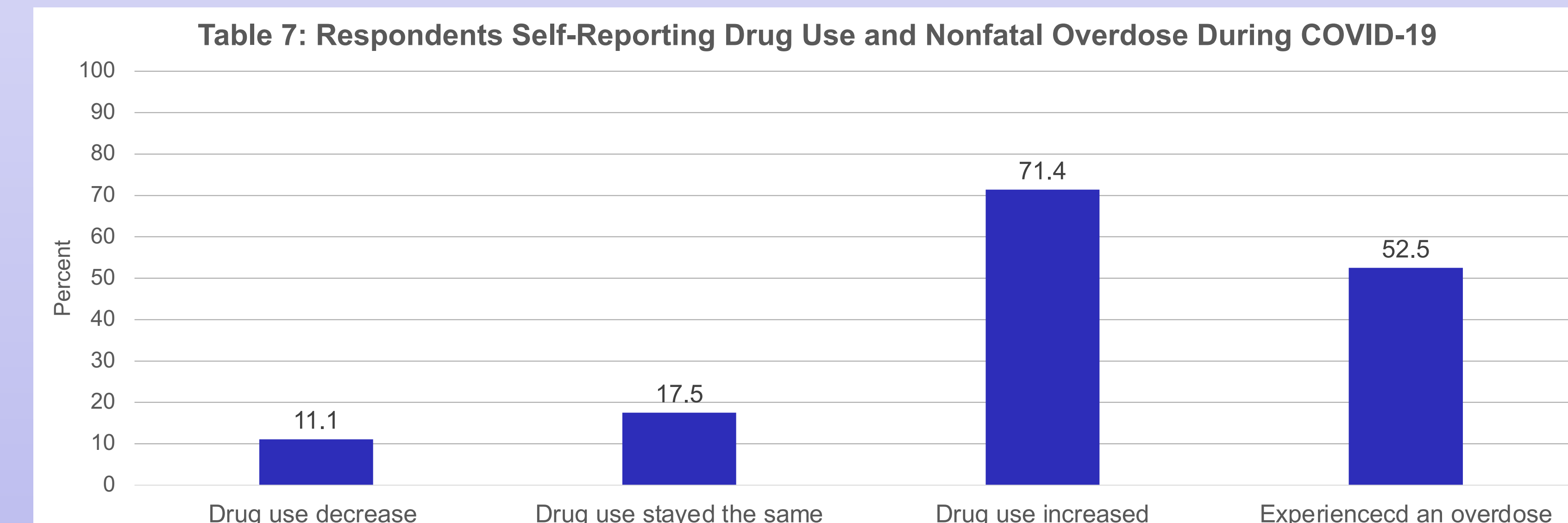
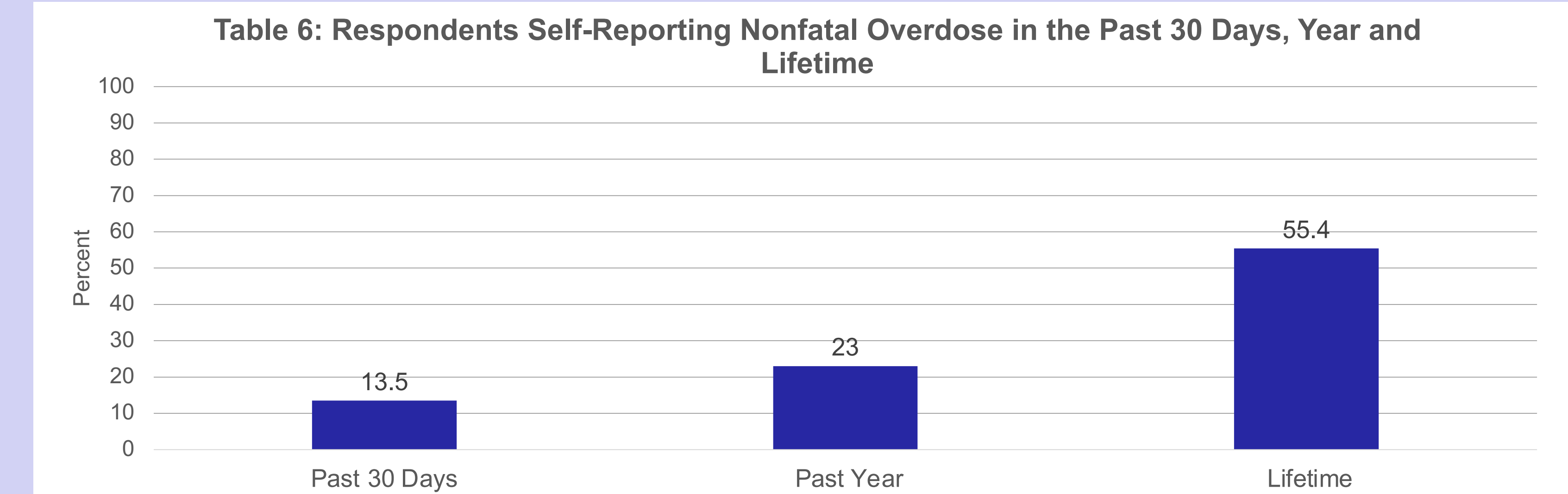
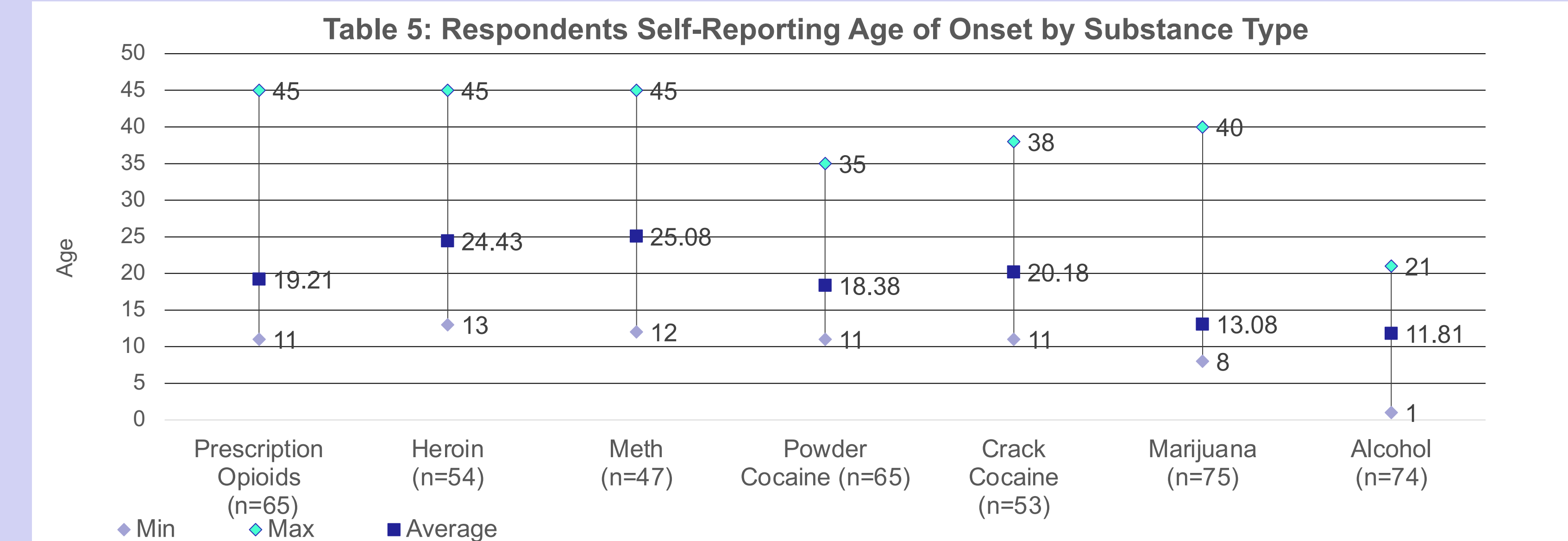
## Methodology

- Participants in this study were recruited from a local jail's substance abuse and addiction recovery program.
  - Eligibility: 18 or older, participation in recovery program
  - Response rate = 100%
- Participants were asked to complete a self-report survey measuring drug use history, drug nonfatal overdose history, adverse childhood experiences, negative life events, mental health disorders, treatment history, and demographics.
- The sample includes 77 participants:
  - Age (mean 37.21, SD 8.57), white (64.9%), male (61%), employed (part or full) (50.6%), housing prior to jail (58.4% living with family, 24.7% living with friends, 9.1% living in recovery housing, 18.2% living on the streets), married (9.1%), GED or higher (81.6%), have children (65.3%)

## Results



## Results



## Conclusions/Discussion

- Results indicate that ACEs are highly prevalent amongst incarcerated individuals. These findings highlight the need for strategies aimed at preventing and treating ACEs in adults.
- High rates of overdose amongst incarcerated people suggest that treatment programs should focus on preventing overdose as well as substance use.
- Residential substance abuse treatment (RSAT) programs have been shown to reduce recidivism, and they may also help prevent overdose upon release.
- The current study presents preliminary results from an ongoing longitudinal study. T2 and T3 data will examine the impacts of RSAT programs and explore reentry and recovery obstacles upon reentry.

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