





Exposição à violência e a experiências adversas na infância e risco de suicídio na vida adulta

Maria Carmen Viana, MD, PhD
 Departamento de Medicina Social
 Programa de Pós-Graduação em Saúde Coletiva
 Centro de Estudos e Pesquisa em Epidemiologia Psiquiátrica
 Universidade Federal do Espírito Santo

VIOLÊNCIA NO BRASIL

- Principal causa de morte de jovens entre 5 e 19 anos
(MS, 2007)
- UNICEF: 18 mil crianças e adolescentes sejam espancados diariamente no Brasil
- Acidentes e Violências no âmbito doméstico provocam 64,4% das mortes de crianças e adolescentes
(MS/DATASUS, 2007)
- Estatísticas subestimadas ou inexistentes
 - Suicídio
 - Violência não-fatal
 - Violência doméstica
 - Violência contra a criança, a mulher e o idoso

Exposição a Experiências Adversas/Traumáticas na Infância

Pode impactar a criança e afetar profundamente o seu desenvolvimento físico e emocional ao longo da vida
Associada a agravos à saúde física e mental na vida adulta



The slide features a blue header with the title 'Exposição a Experiências Adversas/Traumáticas na Infância'. Below the title, there are two lines of text: 'Pode impactar a criança e afetar profundamente o seu desenvolvimento físico e emocional ao longo da vida' and 'Associada a agravos à saúde física e mental na vida adulta'. The main content area contains two photographs: on the left, a close-up of a baby's face, and on the right, a close-up of an elderly man's face with a long, full white beard. A large, light blue arrow points from the baby's photo to the elderly man's photo, indicating a transition from childhood to adulthood.

Exposição a Experiências Adversas/Traumáticas na Infância

Latency Periods

Time lag between initiation of risk and onset of illness

Adverse Childhood Events

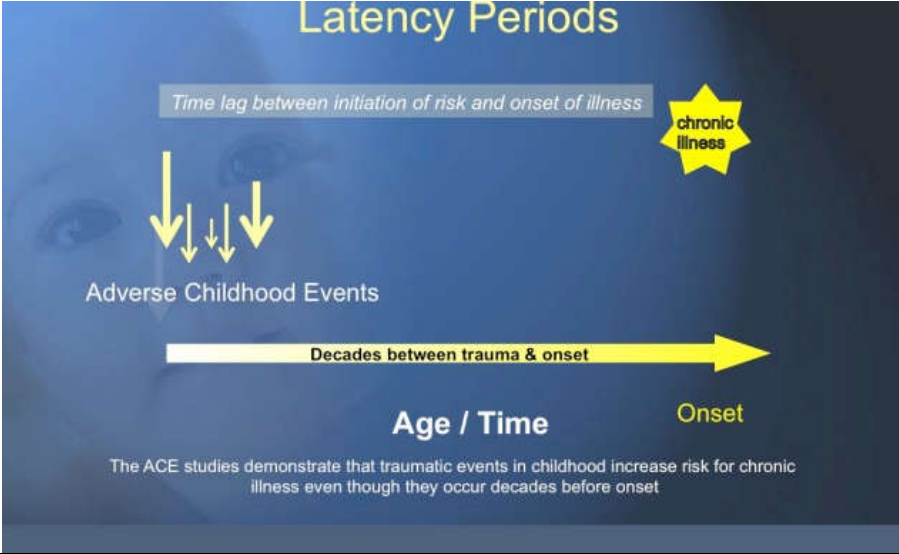
Decades between trauma & onset

Age / Time

Onset

chronic illness

The ACE studies demonstrate that traumatic events in childhood increase risk for chronic illness even though they occur decades before onset



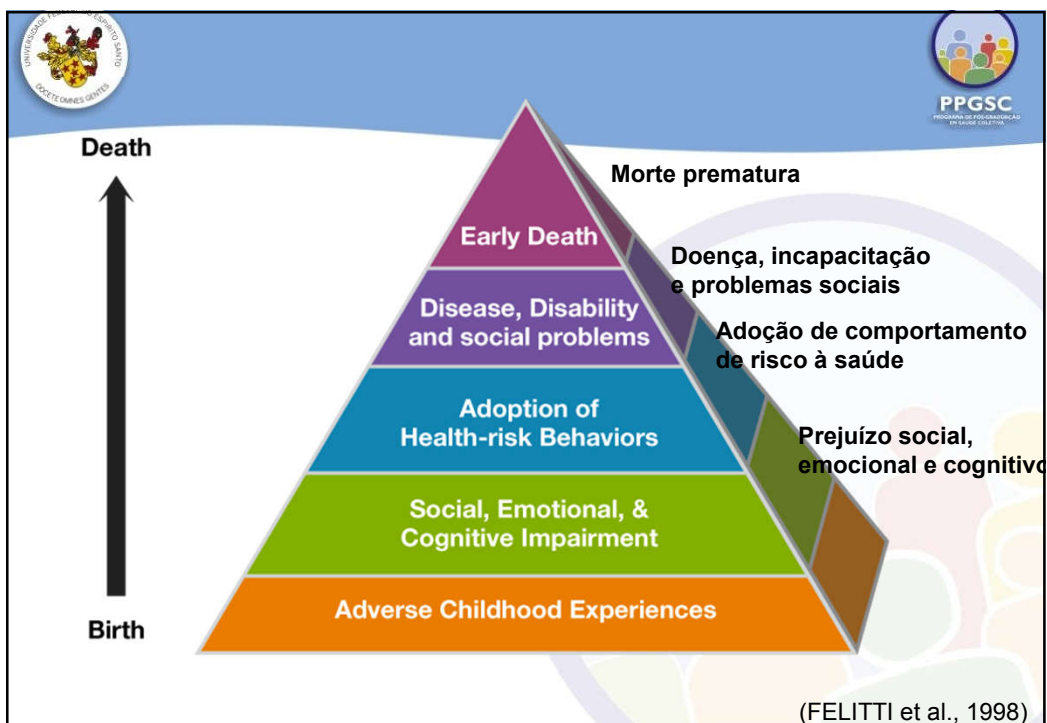
The slide features a blue header with the title 'Exposição a Experiências Adversas/Traumáticas na Infância'. Below the title, there is a diagram titled 'Latency Periods'. The diagram shows a vertical axis for 'Adverse Childhood Events' with four downward-pointing arrows. A horizontal axis represents 'Age / Time', with a long yellow arrow pointing to the right labeled 'Decades between trauma & onset'. A yellow starburst labeled 'chronic illness' is positioned at the end of the timeline, representing the 'Onset'. A text box above the diagram states 'Time lag between initiation of risk and onset of illness'. At the bottom, a caption reads: 'The ACE studies demonstrate that traumatic events in childhood increase risk for chronic illness even though they occur decades before onset'.

Exposição a Experiências Adversas/Traumáticas na Infância

**Adverse Childhood Experiences Study – ACE
(Estudo das Experiências Adversas na Infância)**

- 17.421 adultos San Diego, Califórnia
 - Experiências adversas:
 - Violência contra a criança (abuso emocional, agressão física recorrente, abuso sexual)
 - Ambiente familiar disfuncional durante a infância (história de encarceramento, mãe tratada com violência, convivência com familiar alcoolista ou usuário de drogas, convivência com familiar com depressão crônica, psicose ou com comportamento suicida, e morte de pai ou mãe)
- Prevalência de situações adversas na infância é muito maior do que se poderia antecipar

Felitti, 1998; Anda et al, 1999; Dube et al, 2001; Dietz et al, 1999; Hillis et al, 2000



Exposição a Experiências Adversas/Traumáticas na Infância




Adverse Childhood Experiences Are Common

Household dysfunction:

Substance abuse	27%
Parental sep/divorce	23%
Mental illness	17%
Battered mother	13%
Criminal behavior	6%

Abuse:

Psychological	11%
Physical	28%
Sexual	21%

Neglect:

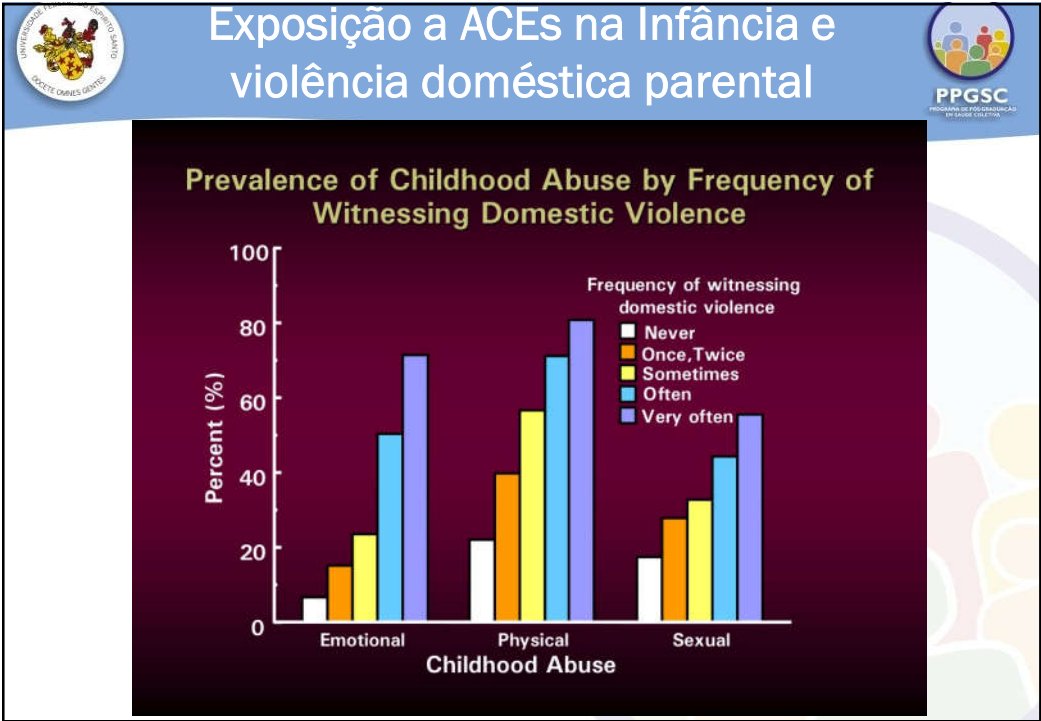
Emotional	15%
Physical	10%

**Adverse Childhood Experiences Score
Complex Trauma--Trauma "Dose"**

Number of individual types of adverse childhood experiences were summed...

ACE score	Prevalence
0	33%
1	26%
2	16%
3	10%
4 or more	16%

Felitti & Anda



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Exposição a ACEs na Infância: múltiplas ocorrências

ACEs tend to come in groups...

	Additional ACEs (%)				
	1	2	3	4	≥5
<i>If you had:</i>					
A battered mother	95	82	64	48	52

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Exposição a ACEs na Infância e comportamento sexual na adolescência

ACE Score and Teen Sexual Behaviors

Behavior	0	1	2	3	4 or more
Intercourse by Age 15	~7%	~13%	~15%	~18%	~27%
Teen Pregnancy	~19%	~21%	~25%	~31%	~41%
Teen Paternity	~15%	~19%	~21%	~25%	~34%

Exposição a ACEs na Infância e violência doméstica



ACE Score and the Risk of Being a Victim of Domestic Violence

Women **Men**



Childhood Experiences Underlie Later Being Raped





ACE Score and Indicators of Impaired Worker Performance




ACE Score and the Risk of Perpetrating Domestic Violence



Felitti & Anda

Exposição a ACEs na Infância: Educação, trabalho e renda




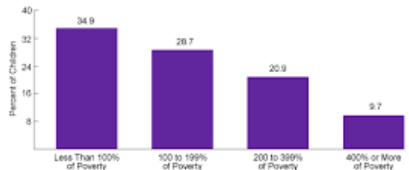


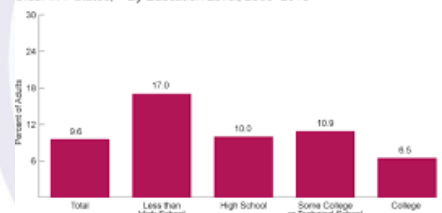
Figure 2. Children Aged 0–17 Years Experiencing Two or More ACEs, by Poverty Status,* 2011–2012



*Based on the U.S. Department of Health and Human Services poverty guidelines, poverty was \$23,050 for a family of four in 2012.

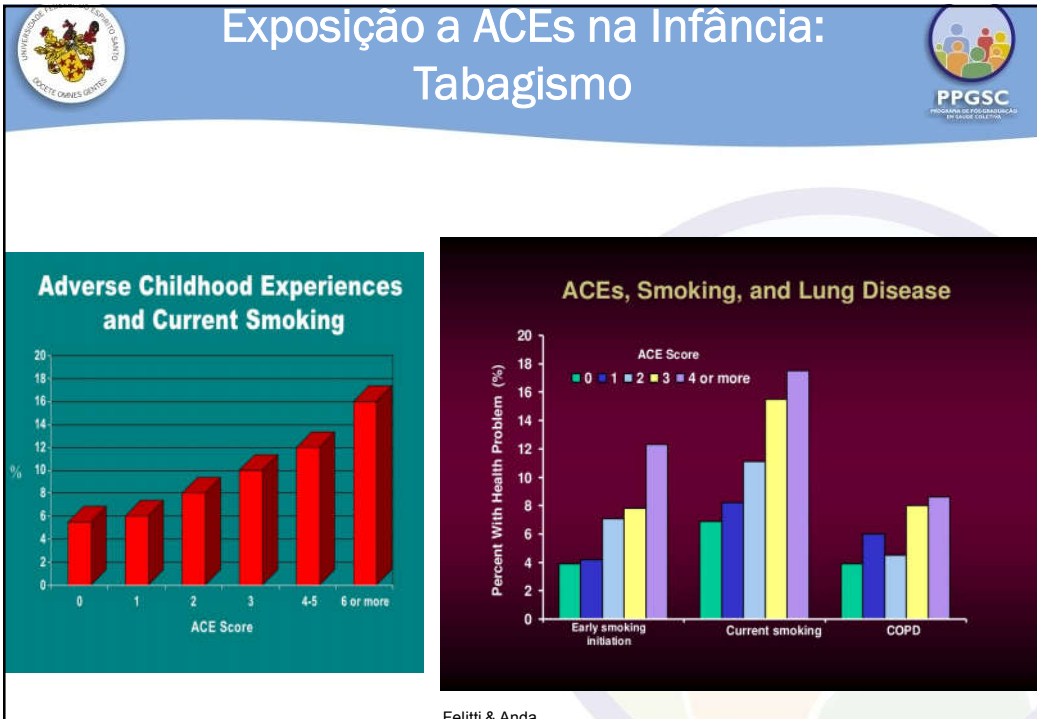
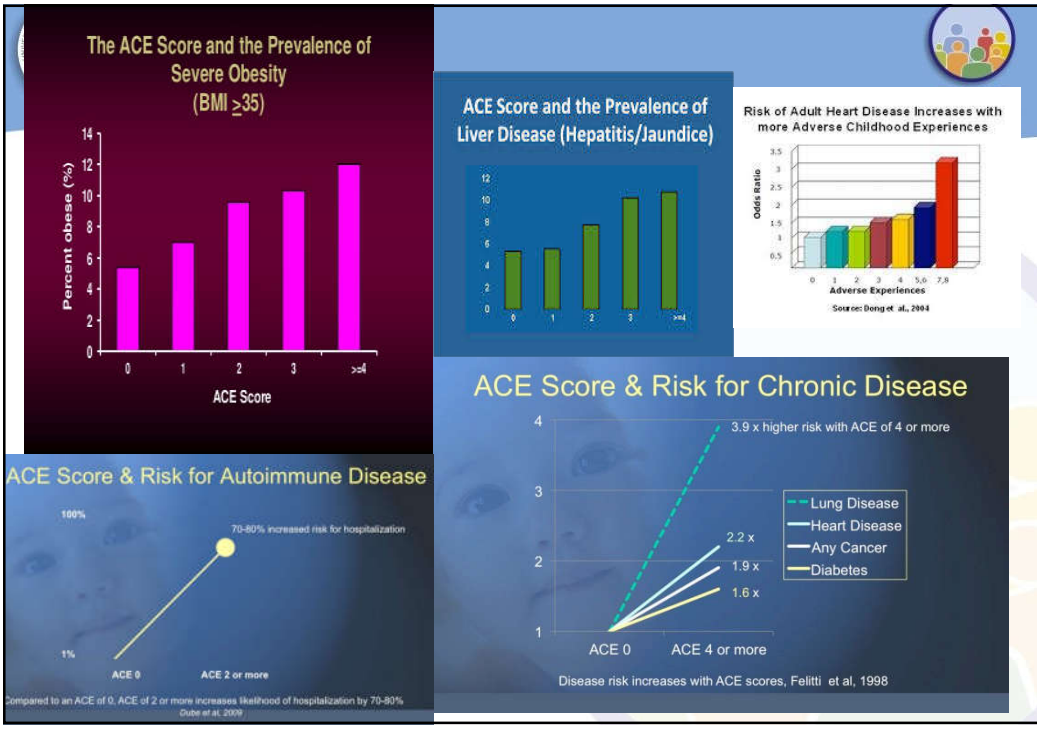
Source: Health Resources and Services Administration, Maternal and Child Health Bureau, and Centers for Disease Control and Prevention, National Center for Health Statistics, National Survey of Children's Health. Analyzed by the Health Resources and Services Administration's Maternal and Child Health Bureau.

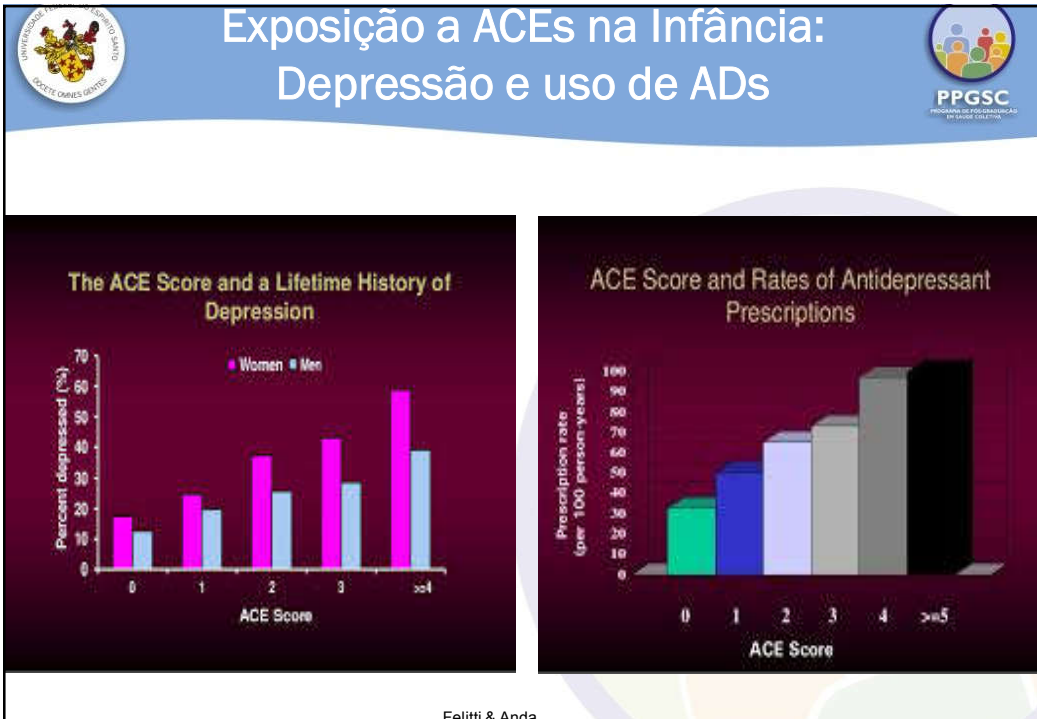
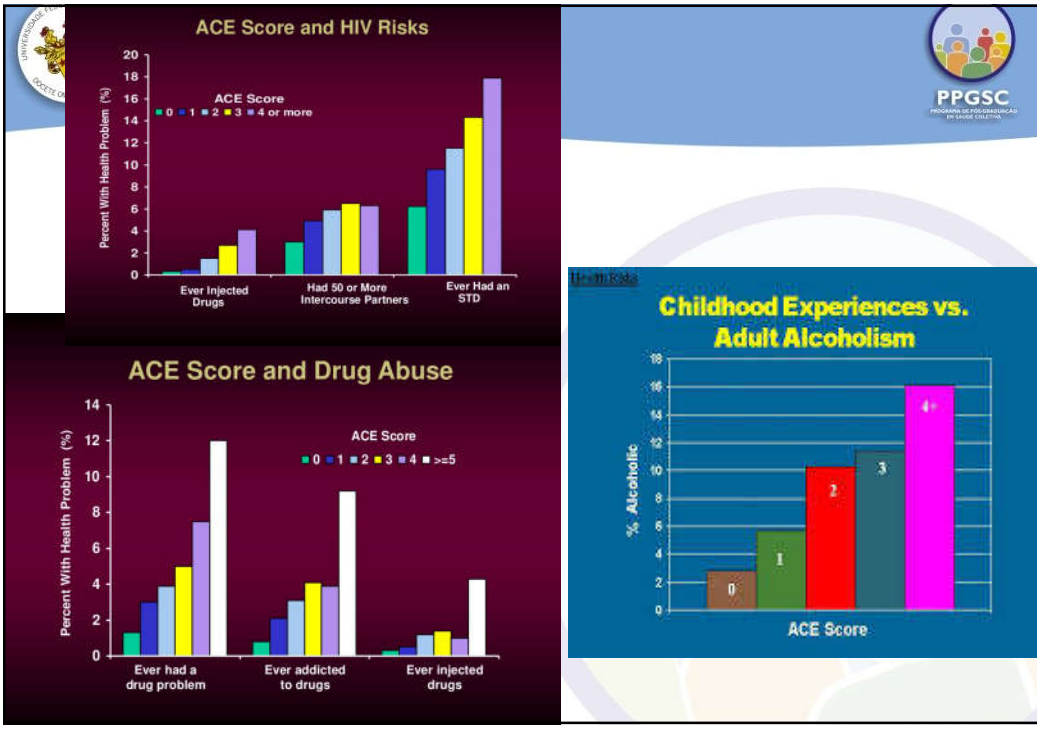
Five or More Adverse Childhood Experiences* Among Women Aged 18 and Older in 7 States,** By Education Level, 2009–2010



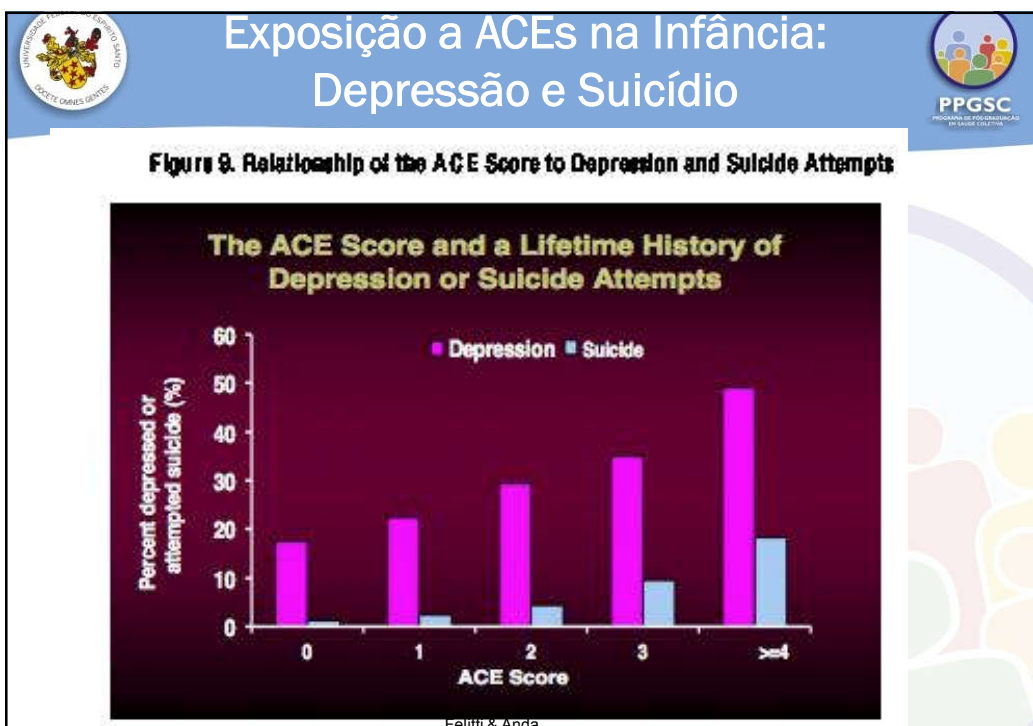
*Report of five or more types of adverse experiences that occurred prior to 18 years of age (types listed in previous figure). **Arkansas and Louisiana contributed data in 2009 and DC, Hawaii, Nevada, Vermont, and Wisconsin contributed data in 2010.

Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System, 2009–2010. Analysis conducted by the Maternal and Child Health Bureau.





Felitti & Anda



Exposição a ACEs na Infância e Suicídio

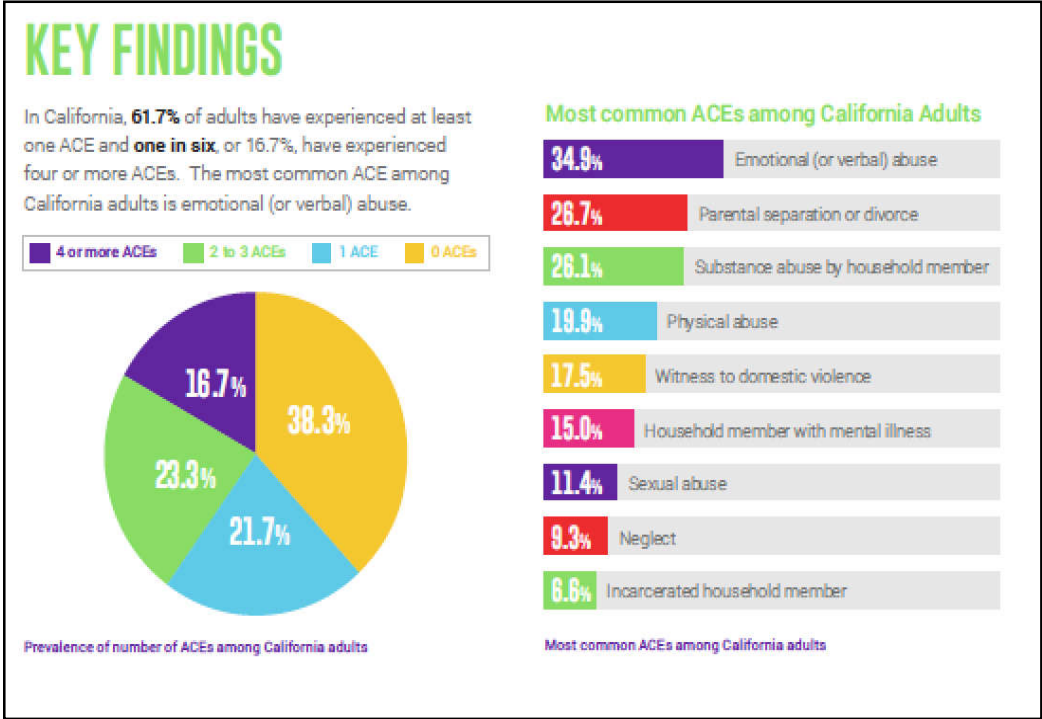
Prevalência TS na vida: 3,8% (N=662 pessoas)

ACE Score	Percent attempted (%)
0	~1
1	~2
2	~4
3	~9
>=4	~18



(Dube, Anda, Felitti et al., 2001)

Table 2. Prevalence and Risk of a Lifetime History of Attempted Suicide by Category of Adverse Childhood Experience*

Adverse Experience Category	Ever Attempted Suicide	
	Prevalence, %	Odds Ratio (95% CI)
Emotional abuse		
No	2.5	1.0
Yes	14.3	5.0 (4.2-5.9)
Physical abuse		
No	2.2	1.0
Yes	7.8	3.4 (2.9-4.0)
Sexual abuse		
No	2.4	1.0
Yes	9.1	3.4 (2.9-4.0)
Battered mother		
No	3.1	1.0
Yes	9.0	2.6 (2.2-3.1)
Substance abuse in home		
No	2.6	1.0
Yes	7.0	2.1 (1.8-2.5)
Mentally ill household member		
No	2.6	1.0
Yes	9.6	3.3 (2.8-3.9)
Parents separated/divorced		
No	3.0	1.0
Yes	6.6	1.9 (1.6-2.2)
Incarcerated family member		
No	3.5	1.0
Yes	10.8	2.5 (2.0-3.2)

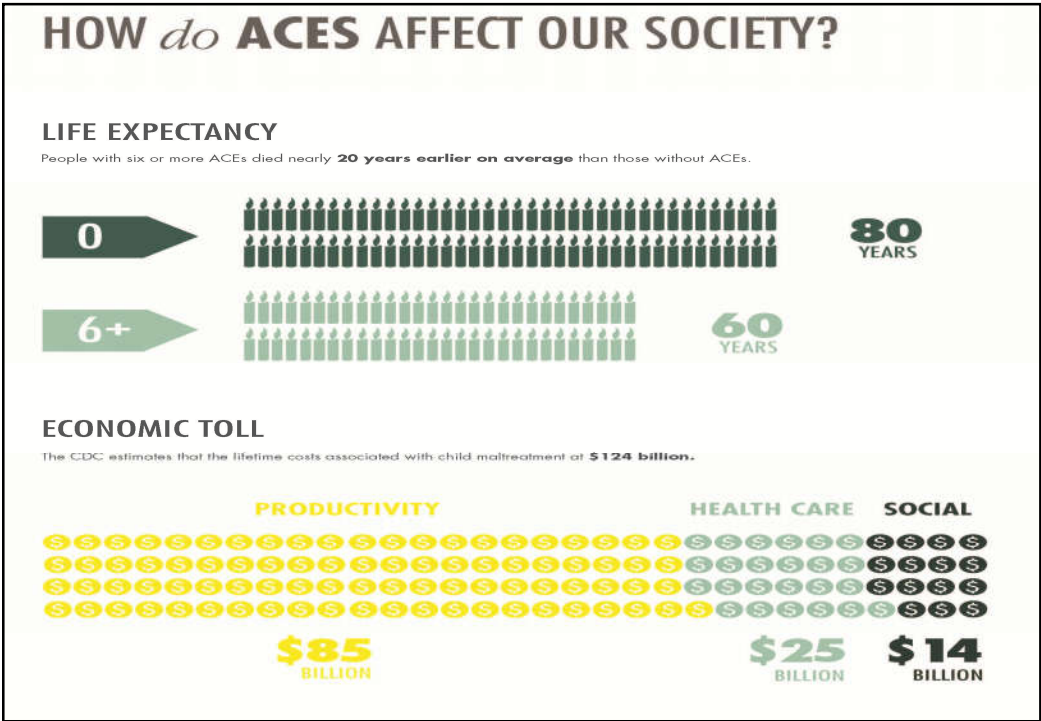
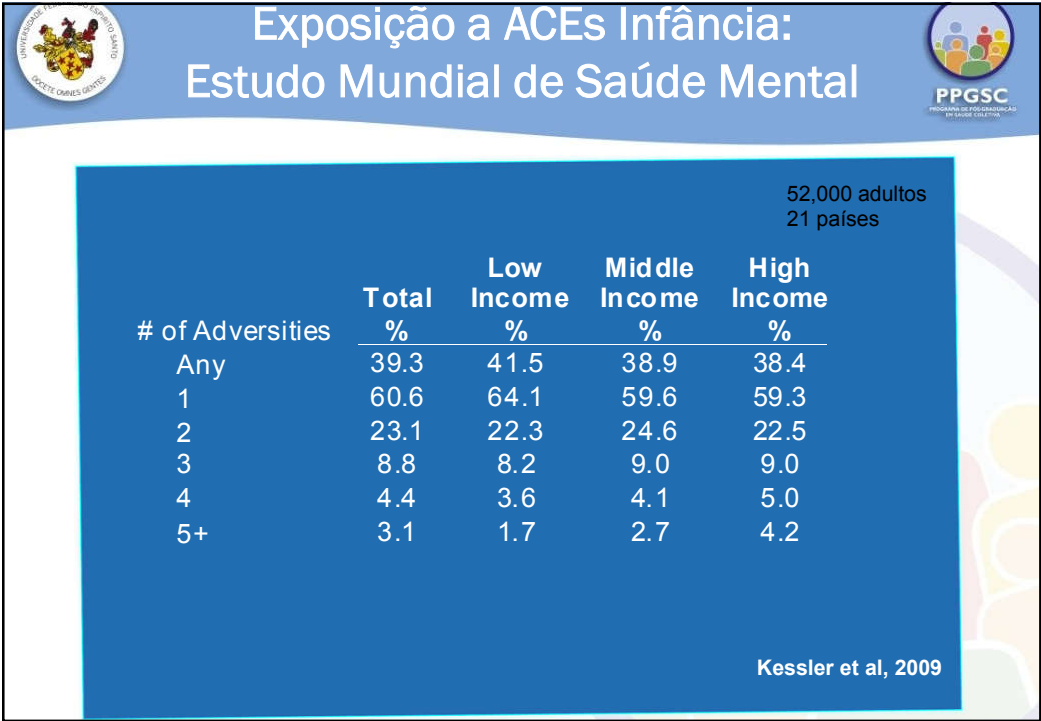


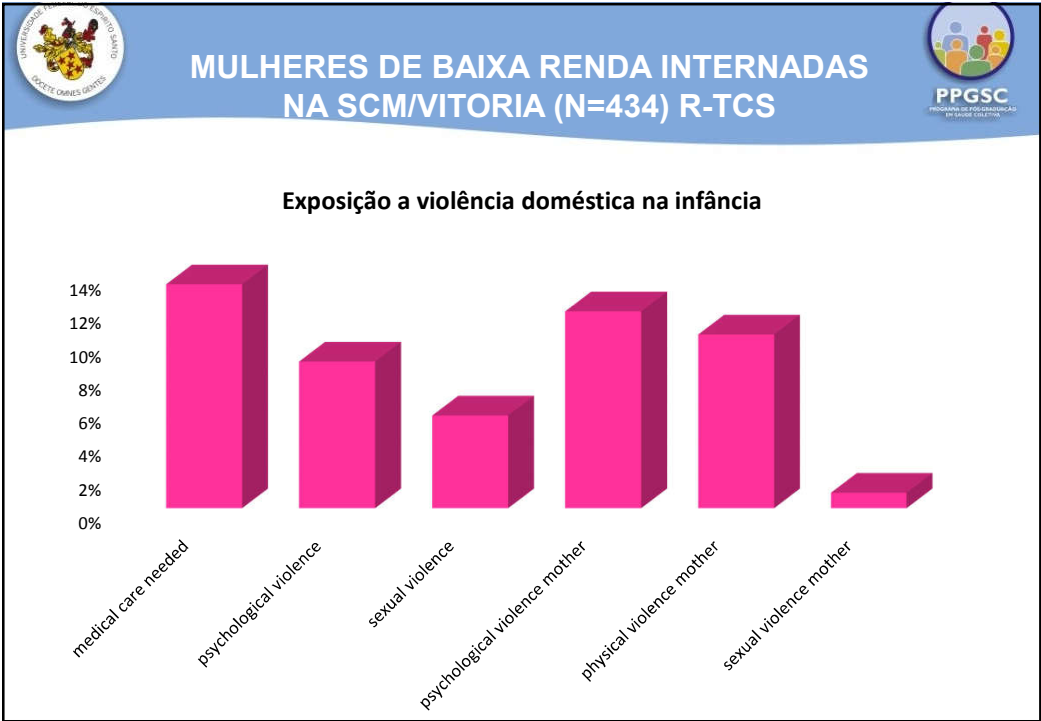
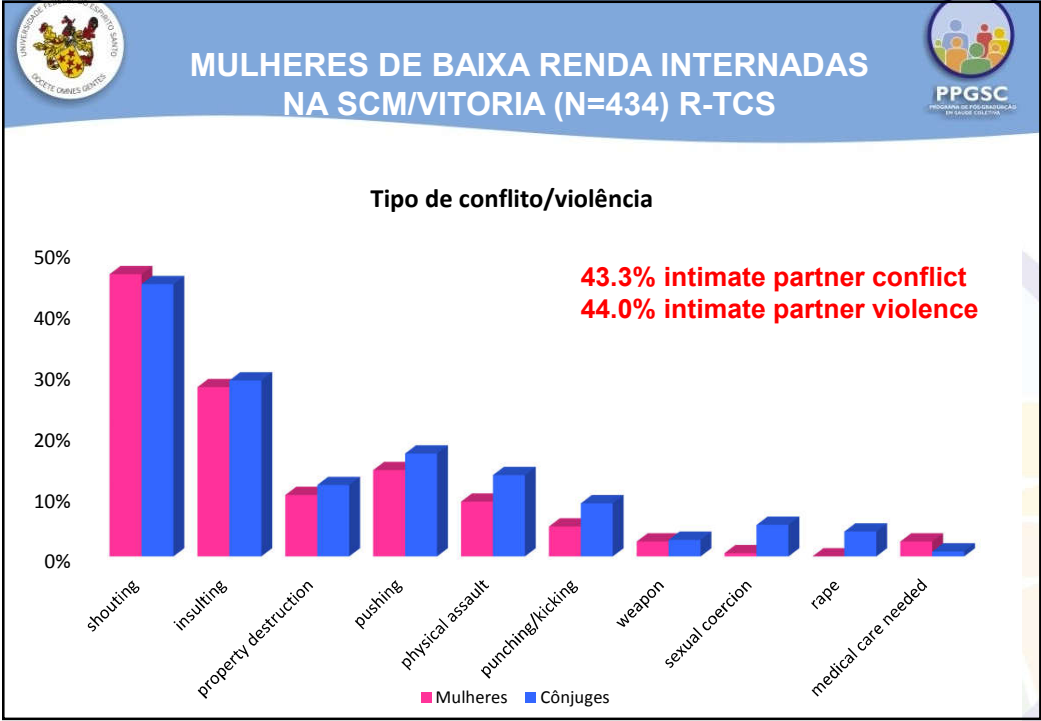
Exposição a ACEs Infância: Estudo Mundial de Saúde Mental

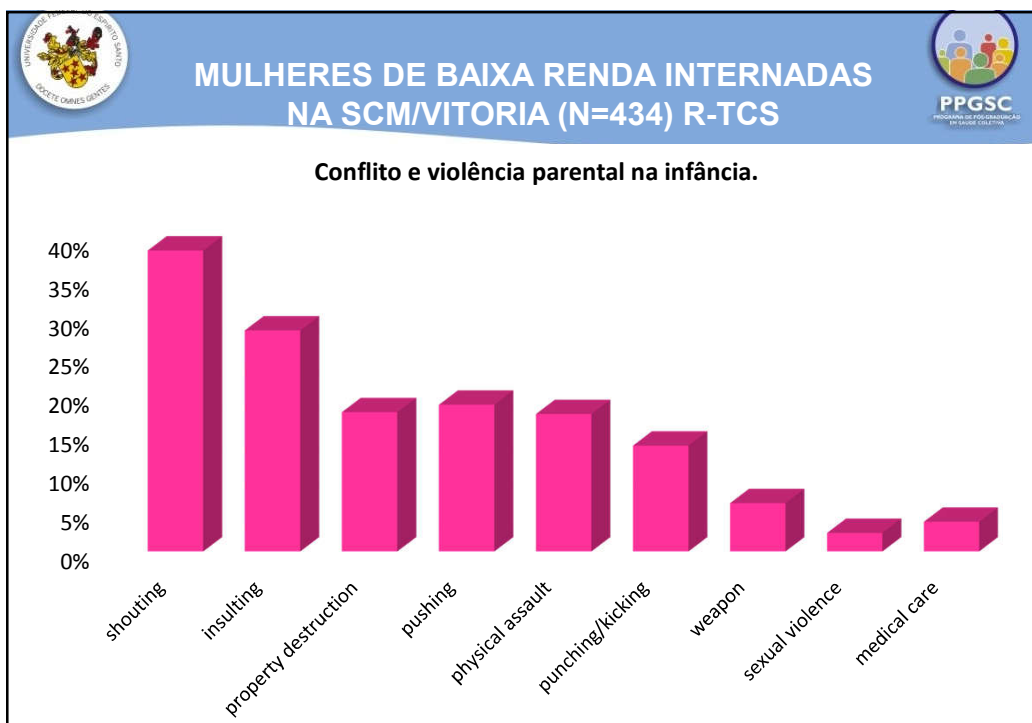
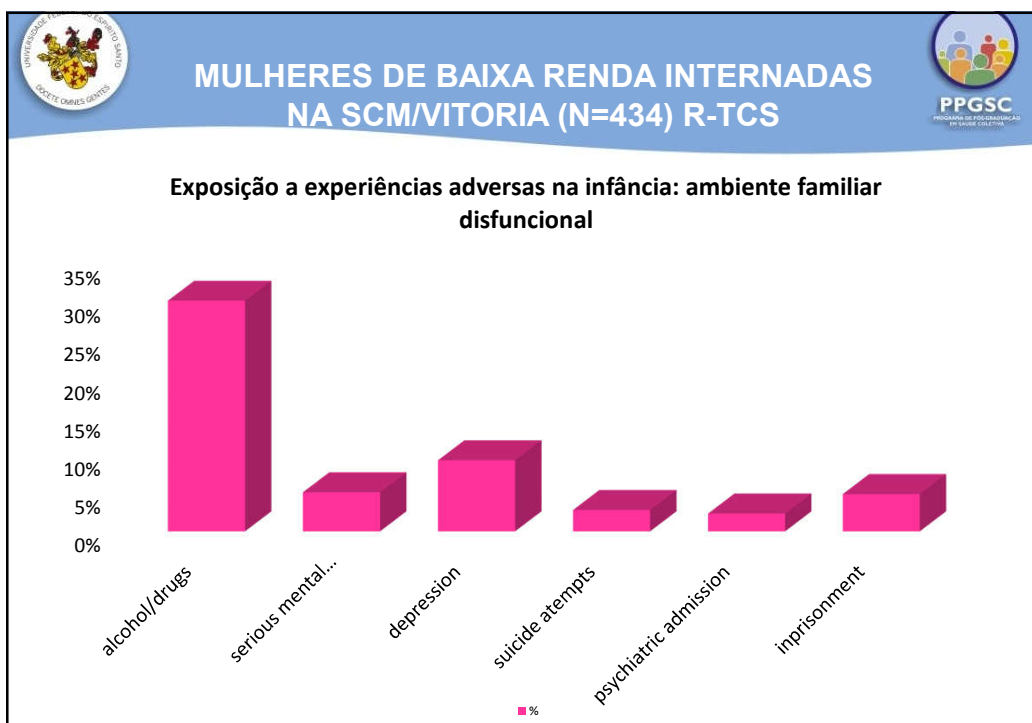




	Total %	Low %	Mid %	High %	
I. Interpersonal loss					52,000 adultos 21 países
Parent died	12.1	14.3	11.9	11.0	
Parent divorce	7.1	4.4	5.2	10.1	
Other parent loss	5.4	9.5	4.0	4.0	
II. Family psychopathology					
Parent mental illness	6.0	6.2	6.7	5.3	
Parent substance	4.4	3.2	5.0	4.5	
Parent criminal	2.9	1.9	3.1	3.4	
Family violence	7.0	5.3	7.1	7.8	
III. Abuse and neglect					
Physical abuse	8.3	10.1	10.8	5.3	
Sexual abuse	1.5	1.2	0.6	2.4	
Neglect	4.6	4.2	5.2	4.4	
IV. Other childhood adversities					
Physical illness	3.3	3.5	2.4	3.9	
Economic adversity	3.5	1.3	2.9	5.2	
Any adversity	39.3	41.5	38.9	38.4	

Kessler et al, 2009










ACES E SUICÍDIO: SP MEGACITY




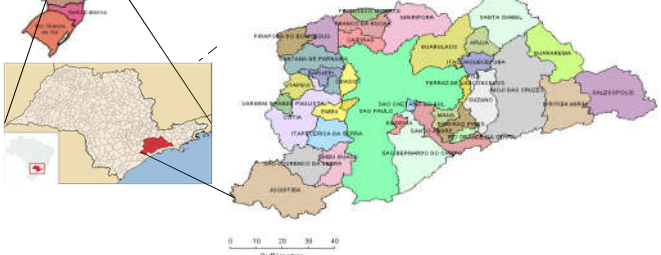
N=5.037
FR= 81,3%
População Adulta Residente

RESEARCH ARTICLE
Do Childhood Adversities Predict Suicidality? Findings from the General Population of the Metropolitan Area of São Paulo, Brazil


Bruno Mendonça Colítho^{1*}, Laura Helena Andrade¹, Guilherme Borges², Geilson Lima Santana¹, Maria Carmen Viana³, Yuan-Pang Wang¹


1 Section of Psychiatric Epidemiology – LIM-23, Department and Institute of Psychiatry, University of São Paulo Medical School, São Paulo, SP, Brazil; 2 División de Investigaciones Epidemiológicas y Sociales, Instituto Mexicano de Psiquiatría (IMP), Mexico, D.F., Mexico; 3 Department of Social Medicine Post-Graduate Program in Public Health, Health Sciences Center, Universidade Federal do Espírito Santo, Vitor ES, Brazil

* brunomendoncacoelho@yahoo.com.br





Pesquisa sobre Saúde, Bem-estar e Estresse





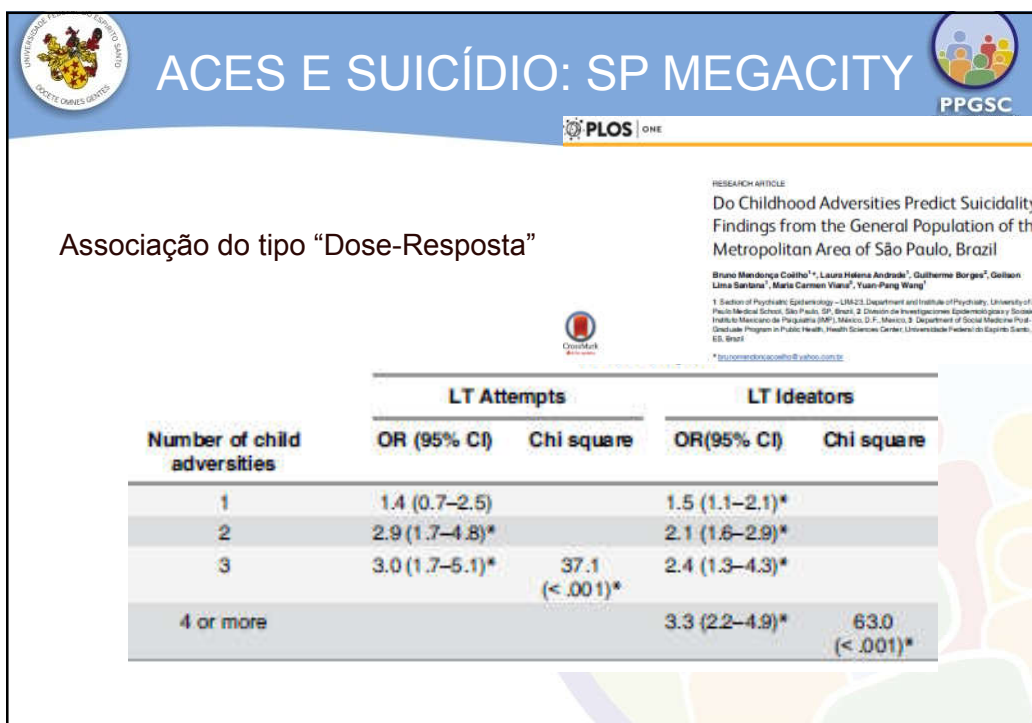
ACES E SUICÍDIO: SP MEGACITY



- > 50% alguma ACE
- ACEs:
 - Abuso físico
 - Abuso sexual
 - Violência doméstica
- Tanto preditores de ideação suicida quanto de tentativas de suicídio
- Doença grave com risco de vida: só de tentativas
- Adversidade econômica: só de ideação

Total sample^{2,3}

Effect	LT Attempts		LT Ideators	
	Bivariate model OR (95% CI)	Multivariate model OR (95% CI)	Bivariate model OR (95% CI)	Multivariate model OR (95% CI)
Physical Abuse in childhood	2.4 (1.7-3.5)*	2.0 (1.4-2.9)*	2.1 (1.6-2.9)*	1.9 (1.5-2.6)*
Sexual Abuse in childhood	3.1 (1.1-8.5)*	2.1 (0.8-5.6)	2.0 (1.0-3.9)*	1.3 (0.7-2.4)
Neglect in childhood	1.8 (1.1-2.9)*	1.3 (0.8-2.1)	1.4 (1.0-2.0)	1.0 (0.7-1.5)
Parent Died in childhood	1.1 (0.7-1.5)	1.0 (0.7-1.5)	1.2 (0.9-1.5)	1.1 (0.8-1.4)
Parent Divorced in childhood	1.4 (0.7-2.9)	1.3 (0.6-2.7)	1.3 (0.8-1.9)	1.1 (0.7-1.8)
Other Parent Loss in childhood	1.3 (0.6-2.7)	1.1 (0.6-2.3)	1.3 (0.8-2.2)	1.1 (0.7-1.8)
Family Violence in childhood	1.8 (1.2-2.7)*	1.4 (0.9-2.1)	1.7 (1.3-2.4)*	1.4 (1.0-1.9)*
Physical Illness in childhood	3.1 (1.1-8.5)*	2.6 (1.0-6.8)*	1.6 (0.7-3.9)	1.4 (0.7-2.7)
Economic Adversity in childhood	2.4 (1.0-6.0)	2.0 (0.9-4.9)	3.7 (2.1-6.6)*	3.1 (1.8-5.6)*





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CONCLUSÕES

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- Associações significativas entre a exposição e o grau de exposição a experiências adversas na infância e diferentes agravos à saúde e comportamentos de risco na vida adulta
 - início precoce de tabagismo
 - Gravidez indesejada/gravidez na adolescência
 - Doenças sexualmente transmissíveis
 - Doenças cardiovasculares
 - Diabetes
 - Obesidade
 - Abuso e dependência de álcool
 - Abuso de drogas
 - Comportamento violento e re-vitimização
 - Depressão
 - Ideação suicida
 - Tentativas de suicídio
 - SUICÍDIO?**

Felitti, 1998; Anda et al, 1999; Dube et al, 2001; Dietz et al, 1999; Hillis et al, 2000; Kessler, 2009; Coelho, 2016

CONCLUSÕES

Exposição à violência e a experiências adversas na infância

- ✓ Importante problema de saúde pública e de direitos humanos (OMS, 2006)
- ✓ Afeta parcelas significativas da população da maioria dos países e culturas
- ✓ Morbimortalidade direta, porém com maior frequência envolve danos emocionais, cognitivos e comportamentais
- ✓ Prejuízo no desenvolvimento pessoal, com impacto negativo no desempenho acadêmico, desenvolvimento profissional e renda
- ✓ Importante determinante social de agravos à saúde e inequidade social
- ✓ **É PREVENÍVEL!!!**

(OMS, 2006; Clemons et al., 2003; Mello et al, 2009; Felitti 1998; Anda 1999; Dube 2001; Scoot 2010; Alves 2013)




ACKNOWLEDGEMENTS



São Paulo Megacity Mental Health Survey
PIs: Maria Carmen Viana
Laura Andrade



CEPEP/UFES
Evandro Coutinho
Flavia Garcia Pereira
Mariane França
Maria Cristina Alochio
Ana Paula Araújo Faria
Daniela Alves
Lara Onofre Ferriani
Caroline Almeida





FACITEC – Prefeitura Municipal de Vitória

WHO WMH Surveys Consortium

São Paulo State Secretary of Justice

We declare no conflicts of interest



thank you for your attention!

maria carmen viana
mcviana6@gmail.com

