Adverse childhood experiences and perinatal distress – a cross sectional study

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Methods

In a cross-sectional questionnaire-based survey, the ACE 10 was used to examine exposure to childhood neglect, abuse and household challenges, among 261 women mid-pregnancy, age: M = 28, SD = 5, range =18-41 attending Redcliffe antenatal clinic between November 2019 and March 2020.

Experience/s of distressing or traumatic event(s) during any perinatal period (e.g. fears around the perinatal period and concerns that they or their infant were in danger), were also collected.

We examined whether women reporting traumatic experiences differed in their ACE scores from those who did not using chi-squared tests and odds ratio (O.R).

Results

Of the 261 women, 101 (39%) reported no ACE, while 60 (23%) reported ≥4 ACE and 25 (10%) reported ≥6 ACE. A total of 111 women reported at least one perinatal traumatic/distressing experience.

Women reporting a score of ≥4 ACE were more likely to report traumatic perinatal experiences than women reporting no ACE (O.R 3.21, CI 95% 1.65-6.26, see Figure). Similarly, women reporting ≥6 ACE were more likely to report perinatal traumatic experiences than women reporting no ACE (O.R. 3.07 (CI 95% 1.27, 7.65).

Conclusions

The odds of antenatal women reporting 4 or more ACE to report high levels of distress and/or traumatic experiences during the perinatal period is threefold greater than those reporting no ACE.

This adds to previous research about the relationship of ≥4 ACE and increased risks for mental health issues and attempted suicide. As suicide is the leading cause of maternal mortality in Queensland, further research is required to determine reasons for this association in the perinatal period and whether alternative or supplementary screening is needed antenatally to identify these women.