INTRODUCTION: Adverse Childhood Experiences (ACEs) such as exposure to abuse, household dysfunction, and neglect have been shown to negatively impact adult health outcomes. The Behavioral Risk Factor Surveillance System (BRFSS) captures nationally representative data on behavioral risk factors and chronic disease in the United States and has included ACE items on the survey since 2009. The purpose of this study was to determine whether primary exposure to violence (experiencing physical abuse) and/or secondary exposure to violence (witnessing interpersonal violence in the home) during childhood predicted poor reported health status as an adult.

METHODS: BRFSS data from 2009–12 were included in the study. All analyses were performed using SPSS and SAS. A total of 3,060 individuals were included in the analyses. Descriptive statistics were completed for primary and secondary exposure to violence, race, gender, and health status. Univariate and multivariate logistic regression analyses predicting poor health were completed for the following predictor variables: race, gender, primary and secondary exposure to violence. Age, race, and gender were controlled for in the final model. Odds ratios and 95% confidence intervals were reported.

RESULTS: Poor health was reported by 24% of the sample, 25.2% of the sample reported exposure to primary violence, and 27.3% reported exposure to secondary violence. Individuals who were exposed to primary violence were 79% (OR: 1.79, CI 1.45–2.20) more likely to report poor health status and those exposed to secondary violence were 48% (OR: 1.48, CI 1.20–1.81) more likely to report poor health compared to those who were not exposed to these types of violence. Individuals exposed to primary and secondary violence during childhood were over 2.5 times more likely to report poor health (OR: 2.52, CI 2.00–3.17).

CONCLUSIONS: These data suggest that exposure to violence during childhood negatively impacts health status in adulthood.