Protective Factors and Adverse Childhood Experiences (ACES)

The prevalence of depression has significantly increased since 2016 among youth. Adverse Childhood Experiences (ACEs)* are a risk factor for depression.

*ACEs are potentially traumatic events before age 18, including abuse, neglect, parental incarceration, among others.

Minnesota youth reported 4 or more ACEs in 2019.*

4,742

*This is likely an undercount, as not all Minnesota youth take the Minnesota Student survey.

Percent of youth with depressive symptoms

Youth with four or more ACEs were more likely to experience depressive symptoms.

Number of ACEs

0 1 2 3 4+

28.9% 61.4% 67.5% 76.9%

Depression can have lasting impact on youth.

39.5% of Minnesota students in grades 8, 9 and 11 shared they experienced depressive symptoms in 2019.

Depressive symptoms include:
• Feelings of being down or hopeless.
• Little interest or pleasure in doing things.

Untreated, depressive symptoms in youth can lead to emotional, behavioral, and overall health problems that affect youth in many areas of their lives, including academic troubles and substance use.

Protective factors work as a buffer against negative effects of ACEs.

Protective factors help protect us from negative health outcomes.

Examples of protective factors:
• Support from family/neighbors
• Feeling empowered
• Positive identity
• Safe school or neighborhood
• Access to youth-based programs

Youth with high ACEs and high protective factors were less likely to experience depressive symptoms.

Low protective factors (and high ACEs), 69% chance of depressive symptoms.

High protective factors (and high ACEs), 14.1% chance of depressive symptoms.

High protective factors reduce risk of depressive symptoms by 80% for youth with high ACEs.

Analysis used Patient Health Questionnaire-2 (PHQ-2) (PDF).

All analyses were conducted using the 2019 Minnesota Student Survey, which is a statewide survey of all public schools administered every 3 years.

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