

# Adverse and Positive Childhood Experiences in California

## Prevalence of Adverse Experiences Among Children Ages 0-17 (Parent Reported): 2017-2021

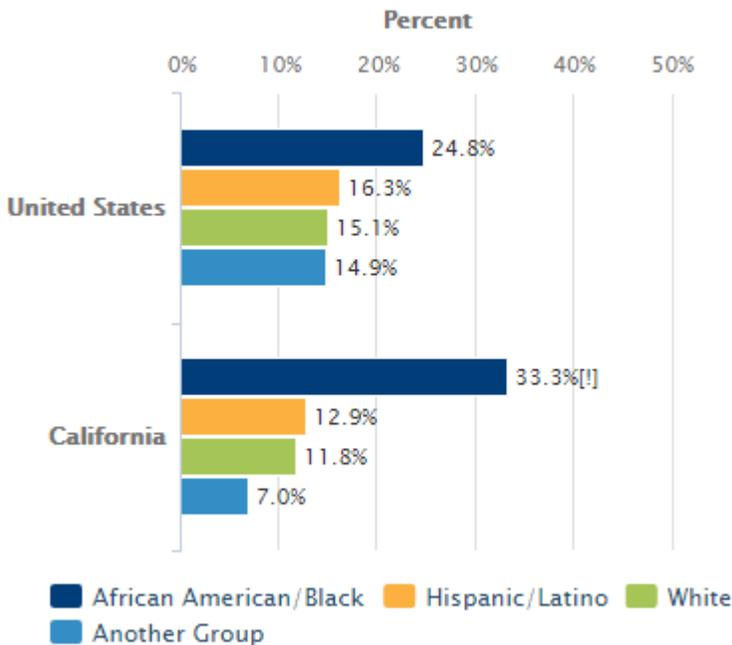
United States	Percent
0 ACEs	61.4%
1 ACE	22.0%
2 ACEs	8.1%
3 ACEs	4.0%
4 or More ACEs	4.5%

California	Percent
0 ACEs	66.0%
1 ACE	21.7%
2 ACEs	6.1%
3 ACEs	3.0%
4 or More ACEs	3.3%

**Definition:** Estimated percentage of children ages 0-17 with and without adverse childhood experiences (ACEs), by number (e.g., in 2024, 3.3% of California children had experienced four or more ACEs).

**Data Source:** U.S. Dept. of Health and Human Services, [National Survey of Children's Health](#) (Dec. 2025).

## Percentage of Children with Two or More Adverse Experiences (Parent Reported), by Race/Ethnicity: 2017-2021



**Definition:** Estimated percentage of children ages 0-17 with two or more adverse childhood experiences (ACEs), by race/ethnicity (e.g., in 2024, 12.9% of Hispanic/Latino children in California had experienced two or more ACEs).

**Data Source:** U.S. Dept. of Health and Human Services, [National Survey of Children's Health](#) (Dec. 2025).

## What It Is

Measures of childhood adversity, resilience, and positive experiences on kidsdata.org originate from four separate data sources and provide a rich and conceptually related perspective on childhood adversity. Taken together, they present a broad framework to look at child adversity across the lifespan and provide useful data to inform and facilitate interventions. However, due to differences in methodology, data from the four sources should not be compared. The data sources are:

- [National Survey of Children's Health \(NSCH\)](#)
- [California Health Interview Survey \(CHIS\)](#)
- [Maternal and Infant Health Assessment \(MIHA\)](#)
- [Behavioral Risk Factor Surveillance System \(BRFSS\)](#)

## Why This Topic Is Important

Both positive and negative childhood experiences influence outcomes over the life course. Research shows that adverse childhood experiences (ACEs)—such as maltreatment, exposure to violence, and growing up with substance abuse or mental health problems at home—can be traumatic and disrupt healthy development. More than one third of children statewide and nationally have had at least one ACE. Early experiences—especially during the critical developmental periods of early childhood and adolescence—affect brain structure and function, which provide the foundation for lifelong learning, emotional development, behavior, and health. The toxic stress associated with traumatic and often prolonged childhood adversity can lead to biological changes that have harmful short- and long-term behavioral, mental, and physical health consequences. For example, adults with ACEs are more likely to experience poor mental health, substance use disorders, infectious or chronic diseases, negative maternal health outcomes, premature mortality, and other wide-ranging health problems when compared with adults not exposed to ACEs. The more ACEs a child accumulates, the greater the risk of poor outcomes, especially if they do not receive buffering supports.

ACEs take an economic toll on society, as well, with annual costs of ACEs-related adult health problems estimated at \$1.5 trillion in California and \$14 trillion nationally. Conversely, positive childhood experiences (PCEs)—such as safe, supportive relationships with family and

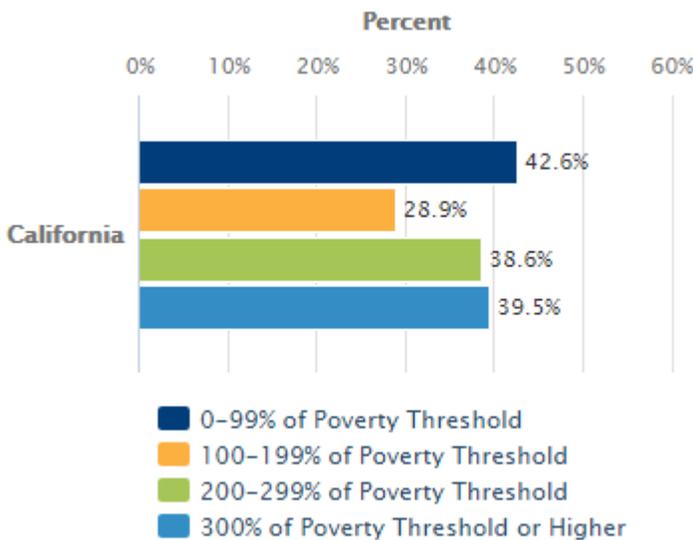
**Prevalence of Positive Childhood Experiences Among Youth Ages 12-17, by Type: 2022**

California	Percent
Can Talk to Family About Feelings	48.2%
Feel Supported by Family During Difficult Times	72.6%
Feel Safe and Protected by an Adult at Home	90.1%
At Least Two Non-Parent Adults Take Genuine Interest	58.3%
Feel Supported by Friends	71.9%
Feel a Sense of Belonging in School	60.6%
Enjoy Participating in Community Traditions	47.4%

**Definition:** Estimated percentage of children ages 12-17 with positive childhood experiences (PCEs), by type (e.g., in 2022, 58.3% of California youth ages 12-17 always or most of the time had at least two adults other than their parents take genuine interest in them).

**Data Source:** *Number of positive childhood experiences (PCEs) - Teens: The California Health Interview Survey, 2022.* Tabulation by the California Dept. of Public Health, Injury and Violence Prevention Branch (Jun. 2025).

**Percentage of Youth with Six or More Positive Childhood Experiences, by Income Level: 2022**



**Definition:** Estimated percentage of children ages 12-17 with and without positive childhood experiences (PCEs), by income level and number of PCEs (e.g., in 2022, among California youth ages 12-17 living at or above 300% of their federal poverty threshold, 60.5% had five or fewer PCEs).

**Data Source:** *Number of positive childhood experiences (PCEs) - Teens: The California Health Interview Survey, 2022.* Tabulation by the California Dept. of Public Health, Injury and Violence Prevention Branch (Jun. 2025).

friends—are linked to better mental and physical health in adulthood. Emerging research suggests that PCEs can strengthen resilience (i.e., the process of adapting well in the face of adversity), promote positive outcomes, and help offset the harmful effects of adversity. Fostering PCEs, providing young people access to resources and services, and supporting the development of their adaptive skills together make up key resilience factors. These assets, because they seldom occur in isolation, often accumulate and lead to multiple, intergenerational benefits—e.g., research suggests that PCEs may be transmitted from parents to their children.

**How Children Are Faring**

Childhood adversity is common, and many children experience multiple adverse circumstances or events that can threaten their lifelong well being. One of the most timely assessments of childhood adversity comes from the National Survey of Children's Health (NSCH), in which parents report on the current status of their children ages 0-17. NSCH estimates from 2024 show that, from birth until the time of survey, 39% of U.S. children had been exposed to one or more adverse childhood experiences (ACEs). In California, more than 1 in 3 children (34%) had at least one ACE, around 1 in 8 (12%) had two or more ACEs, and 1 in 30 (3%) had four ACEs or more. Statewide and nationally, African American/Black and Hispanic/Latino children are more likely to have two or more ACEs than their white peers.

Positive childhood experiences (PCEs) also are common. According to estimates from the 2022 California Health Interview Survey (CHIS), a majority of California adolescents ages 12-17 had—always or most of the time—at least two adults other than their parents take genuine interest in them (58%), felt a sense of belonging at school (61%), felt supported by friends (72%), felt supported by family during difficult times (73%), and felt safe and protected by an adult at home (90%). Almost 2 in 5 adolescents (38%) had at least six of the seven PCEs asked about in the survey. These youth were less likely to have ACEs than their peers with five or fewer PCEs.

*View references for this text and additional research on this topic:*

<https://www.kidsdata.org/topic/95/childhood-adversity-resilience-and-positive-experiences/summary>



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