



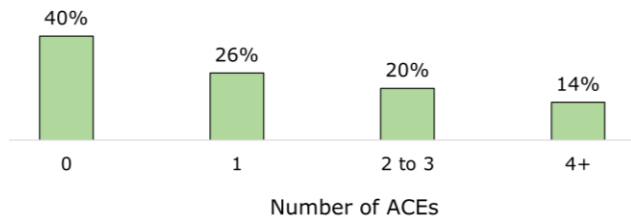
Adverse Childhood Experiences (ACEs) and Mental Health

Wisconsin Pregnancy Risk Assessment Monitoring System (PRAMS): 2023

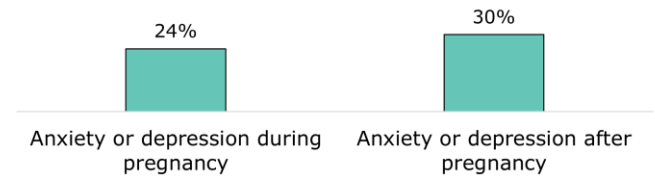
Childhood trauma and mental health

ACEs are very stressful events or circumstances that happen during childhood. They can have significant effects on physical health, mental health, development, and social functioning. Without support, people can continue to be impacted by ACEs throughout their lives, including during pregnancy. People with ACEs are at greater risk of poor mental health throughout and after pregnancy, which can place significant strain on new families.¹

ACE count among Wisconsin mothers, 2023
Percent of mothers



Mental health among Wisconsin mothers, 2023
Percent of mothers



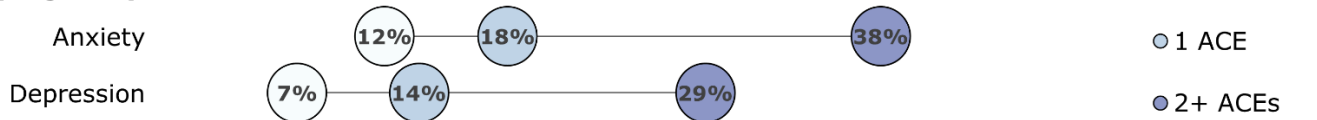
The more ACEs someone has, the greater their risk for poor health outcomes. In Wisconsin, **60% of mothers* have more than one ACE**. Mental health challenges are also relatively common. **Four out of every 10 mothers** experience depression or anxiety during or after (based on symptoms) pregnancy. Mothers who have experienced childhood adversity are more likely to experience depression and anxiety. Experiencing a higher number of ACEs makes it more likely to experience mental health challenges. Mothers who have experienced two or more ACEs are significantly more likely to experience symptoms of depression and anxiety before, during, and after pregnancy.

Depression and anxiety by ACE count among Wisconsin mothers, 2023
Percent of mothers

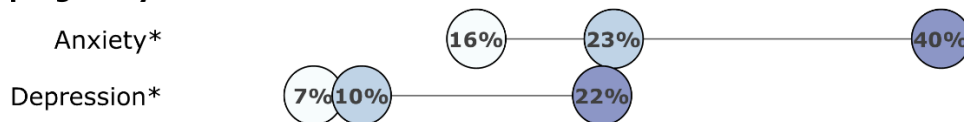
Before pregnancy



During pregnancy



After pregnancy



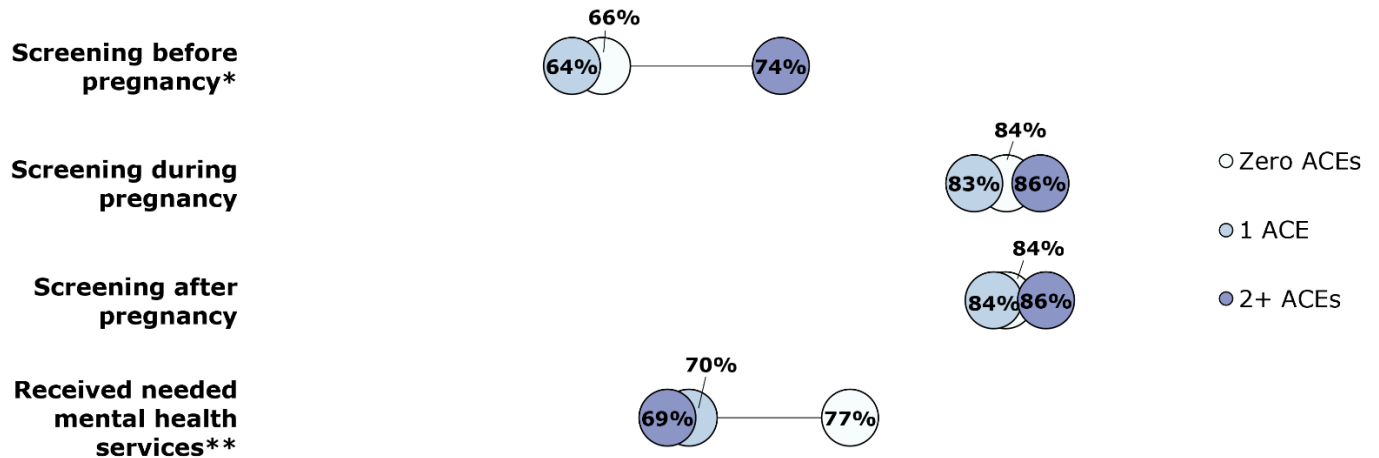
*Based on self-reported postpartum symptoms

*The population represented in these data include women, gender non-conforming people, and transgender men who have the ability to become pregnant and give birth.

Mental health screening and services

Mental health screening is recommended during preconception, perinatal, and post-partum care.² In Wisconsin, 68% of mothers are screened before pregnancy, and 85% of mothers are screened during pregnancy and after pregnancy. Screening for depression and anxiety does not vary significantly based on ACEs. Mothers with different ACE counts are screened for mental health difficulties at similar rates. Mothers with two or more ACEs are more likely to need mental health services (like counseling, medication, or support groups) after delivery than those with none (48% versus 17%). However, access to mental health services does not differ significantly by ACE count.

Mental health screening and services by ACE count among Wisconsin mothers, 2023
Percent of mothers



*Among those who had a healthcare visit in the 12 months before pregnancy

**Among those who needed mental health services

What does this mean in practice?

Higher levels of depression and anxiety among mothers with childhood adversity emphasizes the importance screening for mental illness throughout and after pregnancy. Identifying patients who are struggling with mental health can help ensure they receive vital support and services. It may be helpful for providers to screen pregnant patients for ACEs as well. Early understanding of ACEs history could ensure patients who are more likely to have depression or anxiety get support. Thirty-four percent of mothers who do not get needed mental health services say that they do not know where to go. Prenatal visits are also an opportunity for providers to share resources with patients who may be at greater risk. Research indicates that pregnant patients are receptive both to ACEs screening and receiving information about coping with stress.³

1 Bowers, K., Ammerman, R. T., Ding, L., Yolton, K., Frey, J. R., & Folger, A. T. (2025). Combined effects of life course maternal psychosocial experiences on perinatal mental health. *Public health*, 242, 244–249. <https://doi.org/10.1016/j.puhe.2025.03.005>

2 American College of Obstetrics and Gynecologists. (n.d.) *Patient Screening*. <https://www.acog.org/programs/perinatal-mental-health/patient-screening>

3 Watson, C., Wei, J., Varnado, N., Rios, N., Staunton, M., Ferguson, D., & Young-Wolff, K. C. (2022). Pregnant women's perspectives on screening for adverse childhood experiences and resilience during prenatal care. *Psychological trauma : theory, research, practice and policy*, 14(8), 1299–1303. <https://doi.org/10.1037/tra0001166> This report was made possible by the CDC (Centers for Disease Control and Prevention) under the non-research cooperative agreement CDC-RFA-CE21-2101: Core State Injury Prevention Program (Core SIPP) through the National Center for Injury Prevention and Control. The contents of this publication are solely the responsibility of the authors and do not necessarily represent the views of the CDC.