

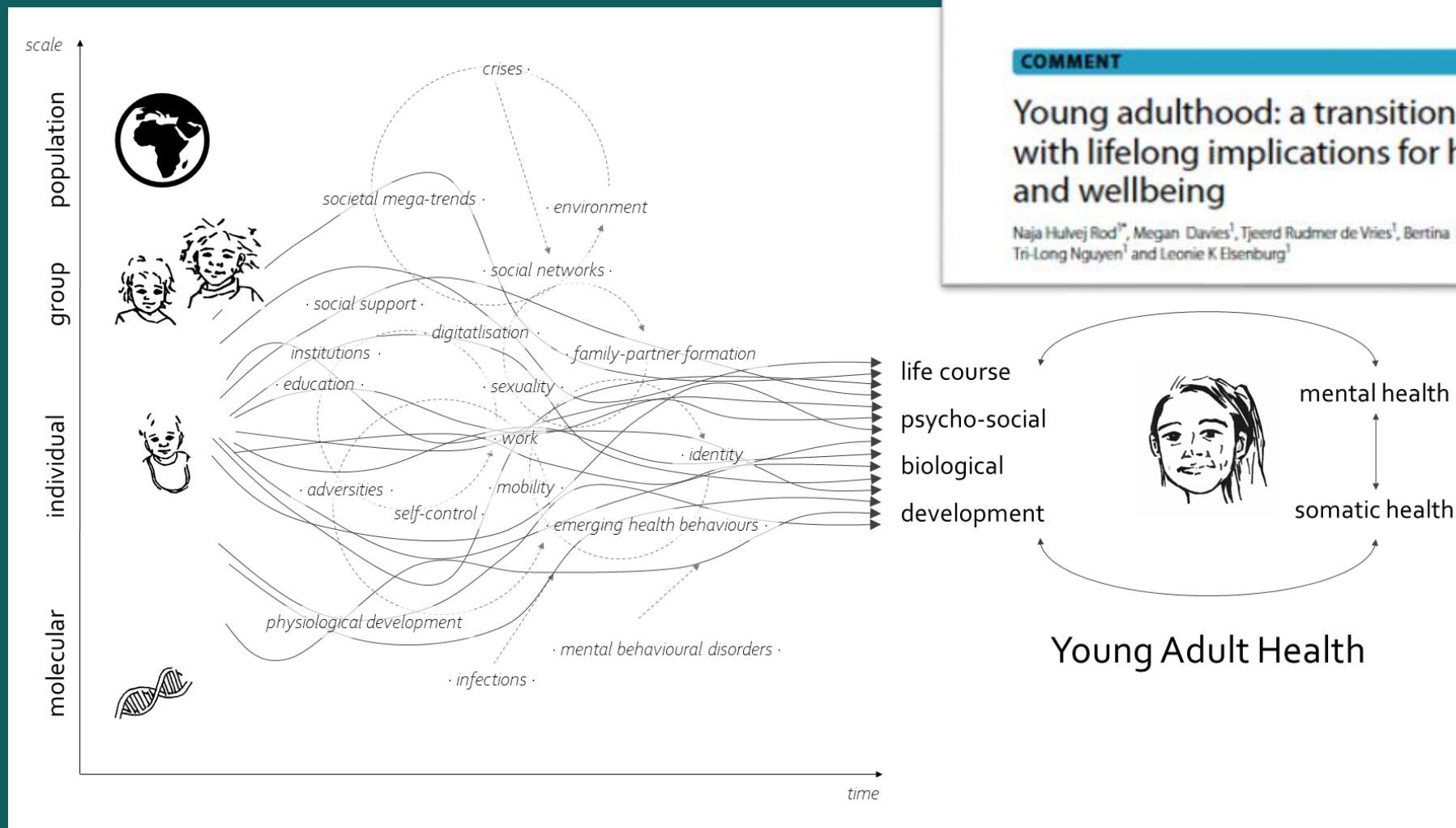
Early life adversity and mental health in young adulthood

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Director, Copenhagen Health Complexity Center



KØBENHAVNS UNIVERSITET

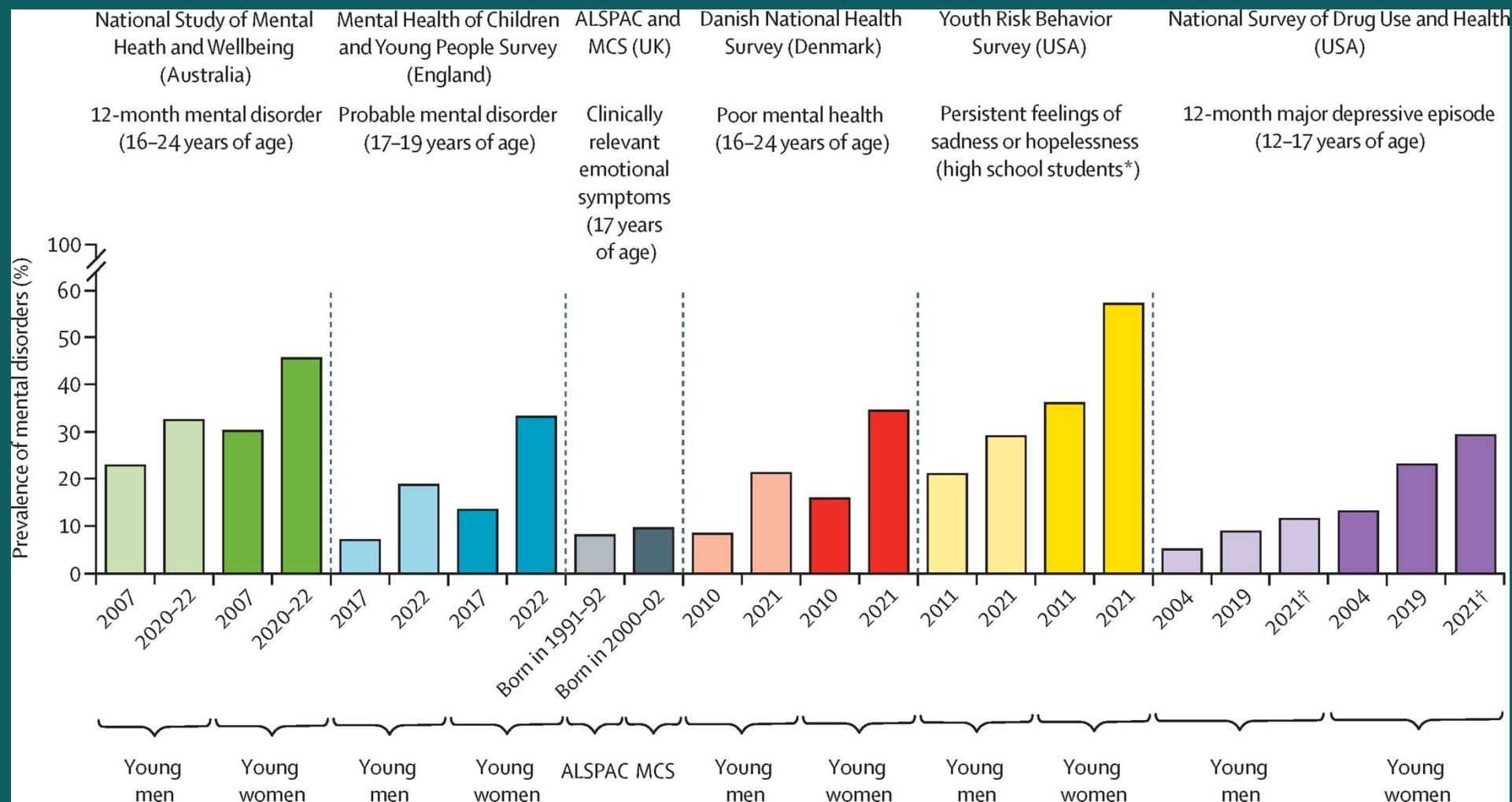
UNDERSTANDING HEALTH ACROSS TIME AND SCALE



Public health is challenged

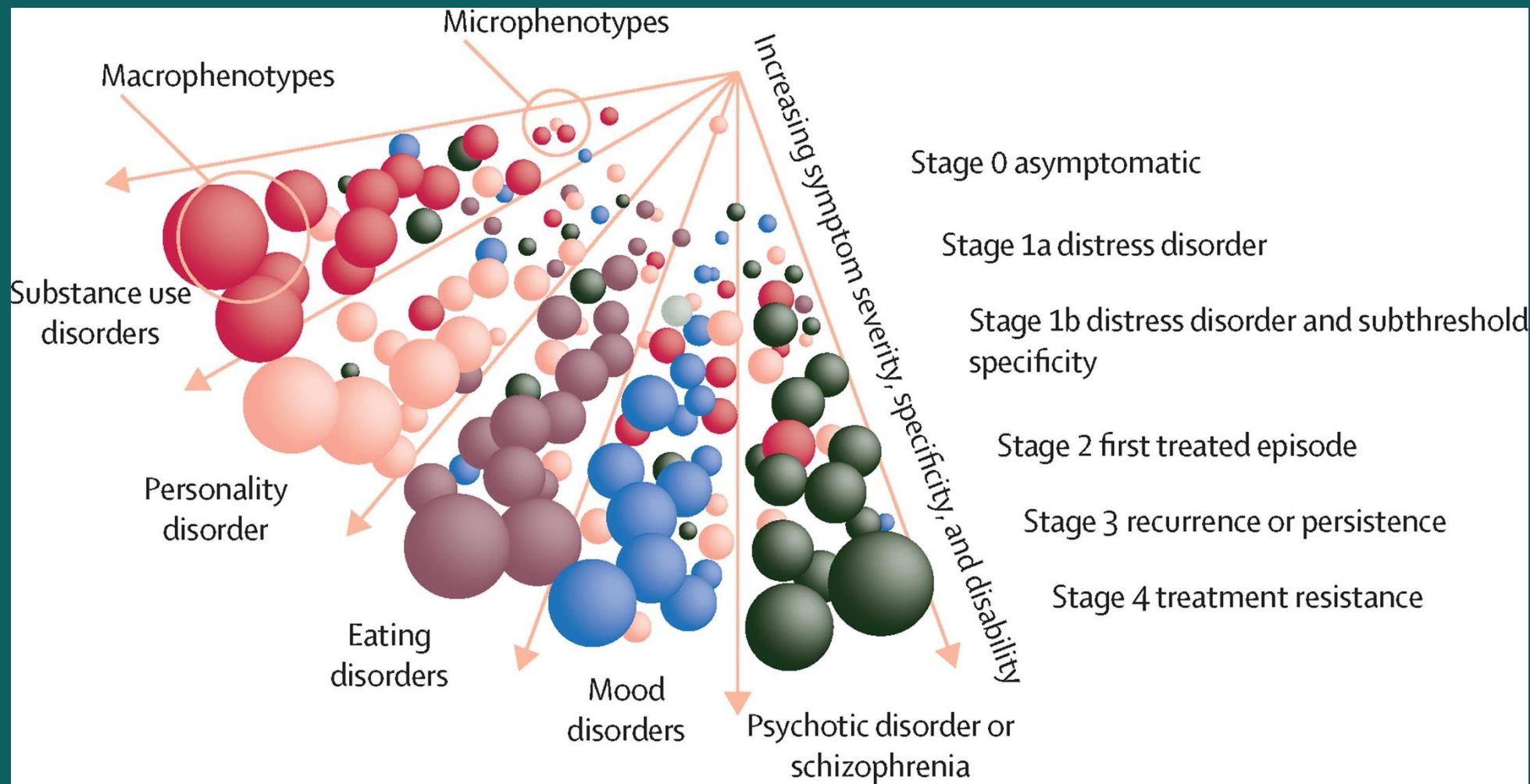


MENTAL HEALTH in YOUNG ADULTS



The *Lancet Psychiatry* Commission on youth mental health 2024

MENTAL HEALTH in YOUNG ADULTS



The *Lancet Psychiatry* Commission on youth mental health 2024

CHILDHOOD ADVERSITY

Adverse childhood experiences cluster, interact and accumulate in individuals, in families and over time



... and they are like to affect health and wellbeing throughout the life course

DANLIFE COHORT

Life histories



2+ million people nationwide

Childhood adversity
Hospitalizations
Prescriptions
Social and cognitive data
Conscription data
Air pollution

www.danlife.ku.dk

PATTERNS of childhood adversity

Material deprivation

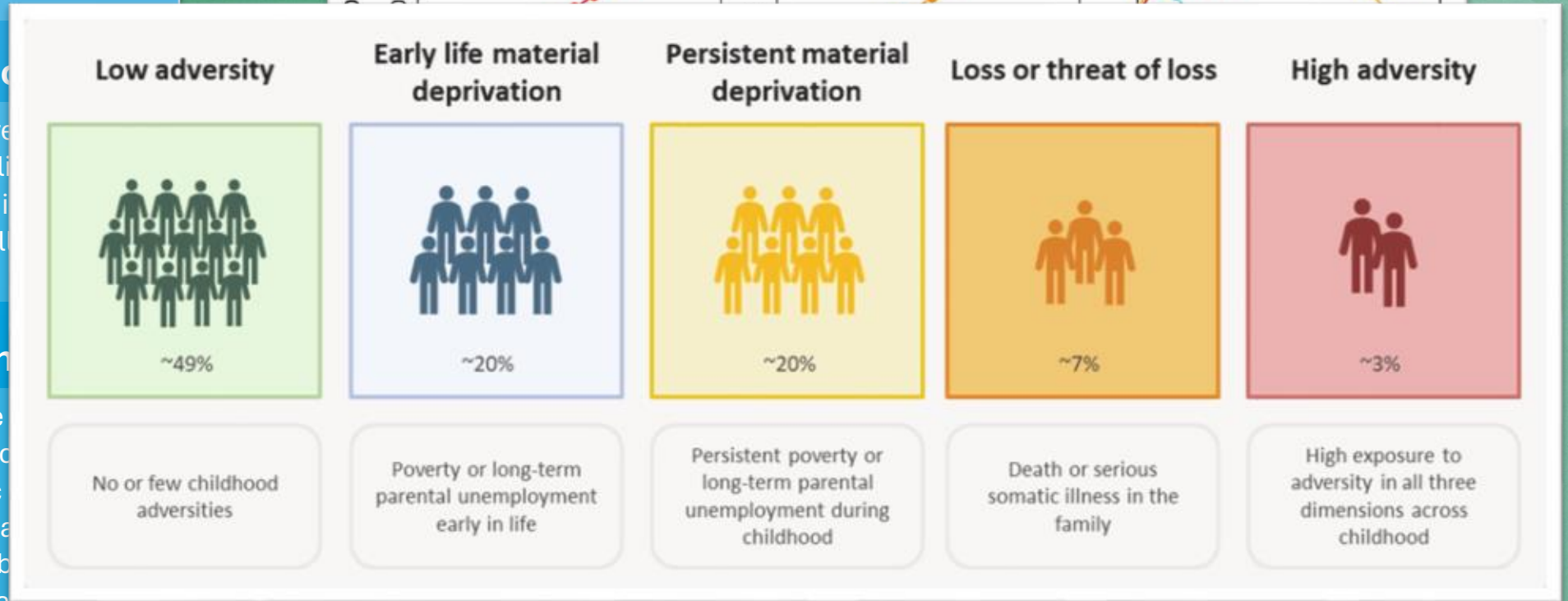
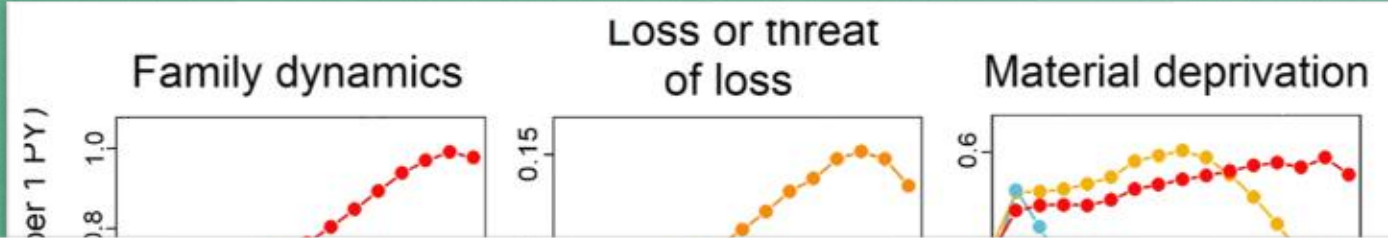
Family poverty
Long-term unemployment

Loss and threat of loss

Death of a parent
Death of a sibling
Parental somatic illness
Sibling somatic illness

Family dynamics

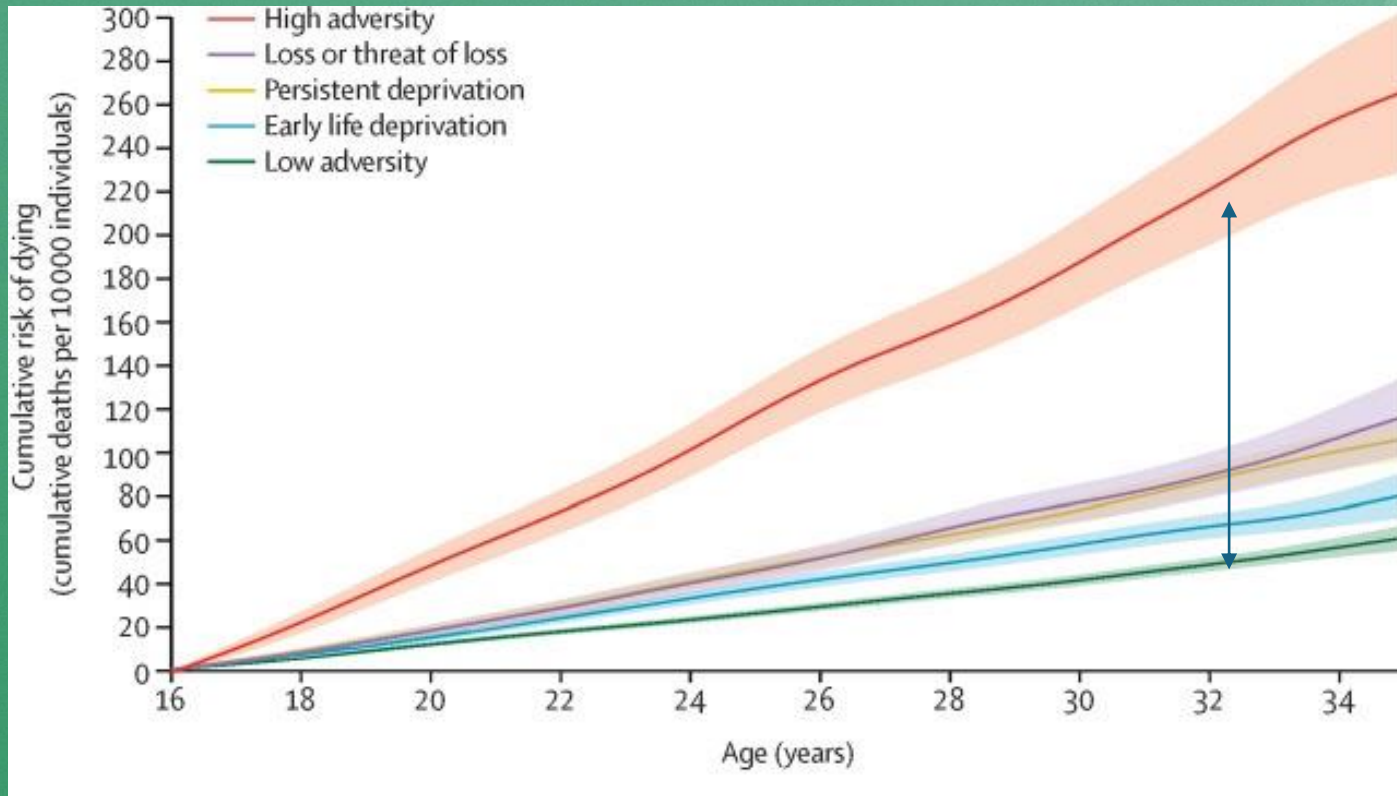
Foster care
Parental psychiatric illness
Sibling psychiatric illness
Parental alcohol abuse
Parental drug abuse
Maternal separation



PATTERNS of lifelong vulnerability

Childhood social adversity (family poverty, unemployment, disease, abuse) cluster in families and can lead to a markedly higher risk of mortality before age 35

Mortality



>4 times higher risk

PATTERNS of lifelong vulnerability



Bertina Kreshpaj
Epidemiologist

Association between childhood adversity, health, social, and justice systems in Denmark: a nationwide cohort study

Bertina Kreshpaj, Leonie K. Eberburg, Signe Hald Andersen, Tine Rasmussen, Kirsten Thorpe

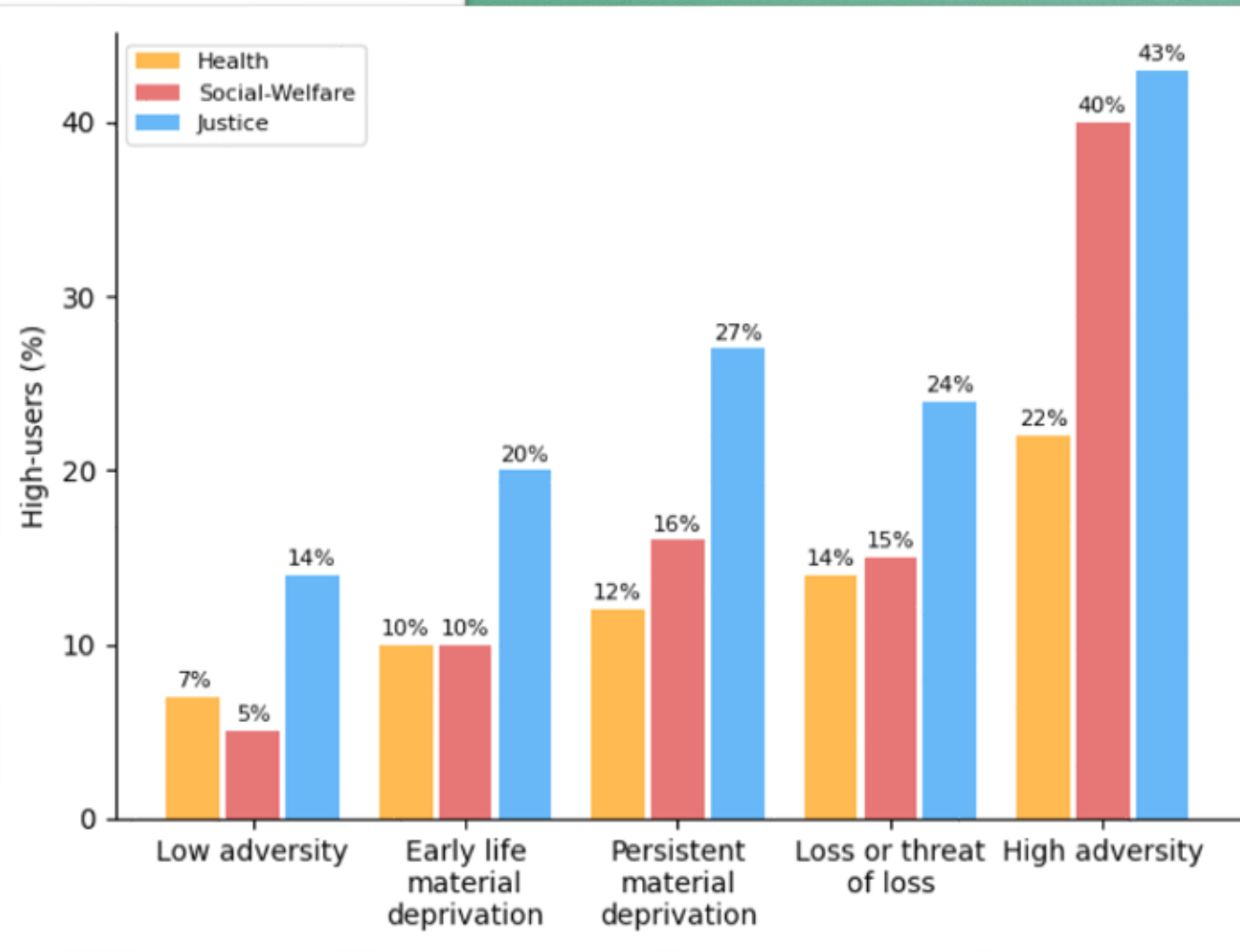
Summary

Background Childhood adversities can negatively affect health and social outcomes. We evaluated the association between adversity in childhood and use of public services in early adulthood, health, social welfare, and justice.

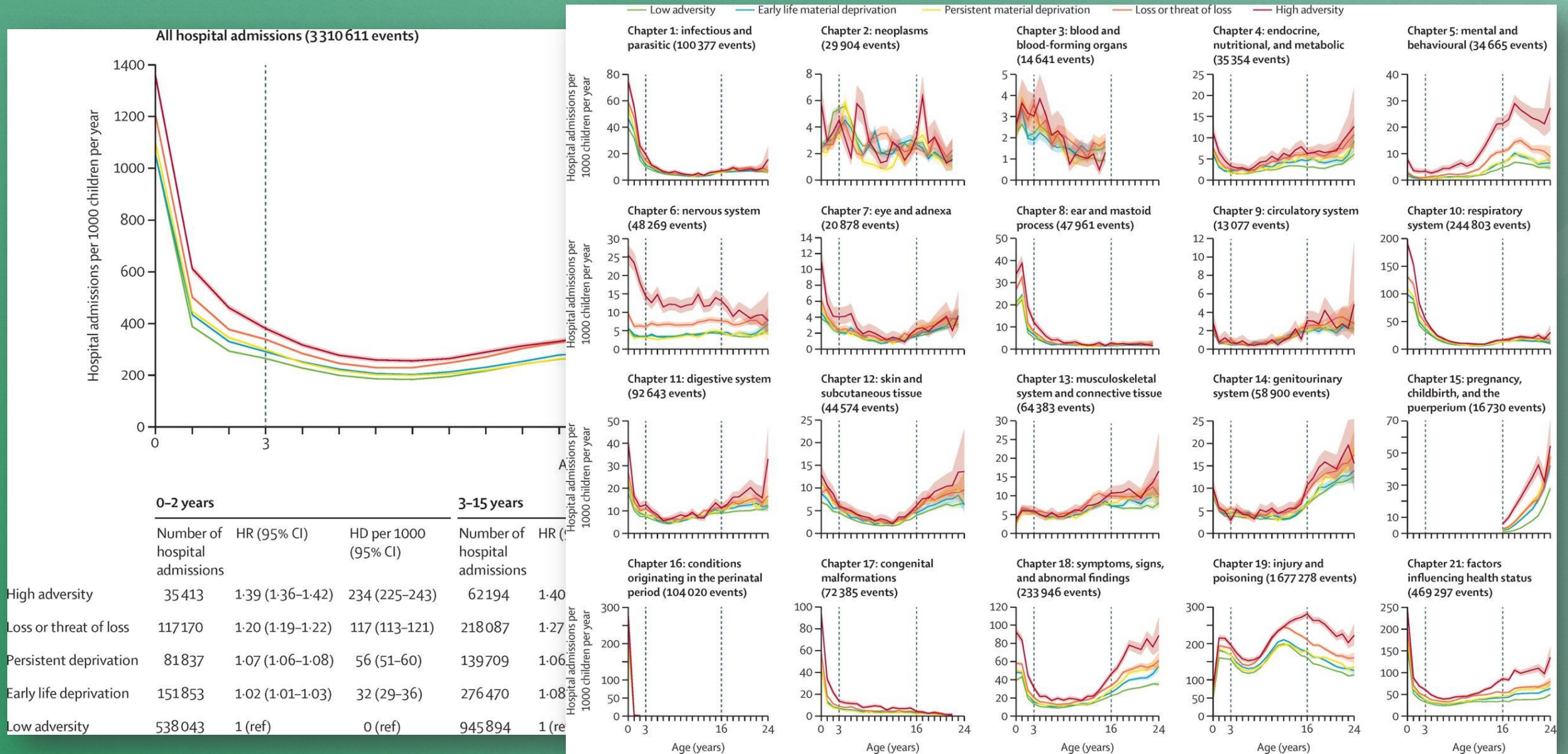
Methods We used Danish nationwide registry data on individuals born between 1998 and 2021. We evaluated annual exposure to adversity during childhood across three dimensions—material deprivation, loss or threat of loss within the family, and high adversity. We defined high-intensity users of each public service system as those above the 90th percentile in terms of hospital visits (health system), welfare system, and whether or not they were convicted for a crime (justice system) between 18–40 years. We analysed the proportion of high-intensity users of each public service system by trajectory group. Logistic regression was used to assess whether the proportion of high-intensity users differed by trajectory group relative to the low-adversity group, with adjustment for sex, birth origin, and maternal age at time of birth.

Findings Of the 567 035 individuals in the cohort, 273 616 (48.3%) were in the low-adversity group, 100 959 (17.8%) were in the early-life material deprivation group, 100 959 (17.8%) were in the loss or threat of loss group, and 20 396 (3.6%) were in the high-adversity group. Adversity was associated with a markedly higher risk of belonging to the high-intensity user group for all three public service systems. Specifically, low proportions of the low-adversity group were high-intensity users of the health system (19 675 [7.2%]), social welfare system (13 681 [5.0%]), and justice system (13 681 [5.0%]). In comparison, those in the high-adversity group were significantly more likely to be high-intensity users of the health system (4685 [23.0%]; adjusted odds ratio 2.81 [95% CI 2.71–2.91]), social welfare system (8.88 [8.50–9.27]), and justice system (3681 [42.6%]; 3.62 [3.50–3.75]).

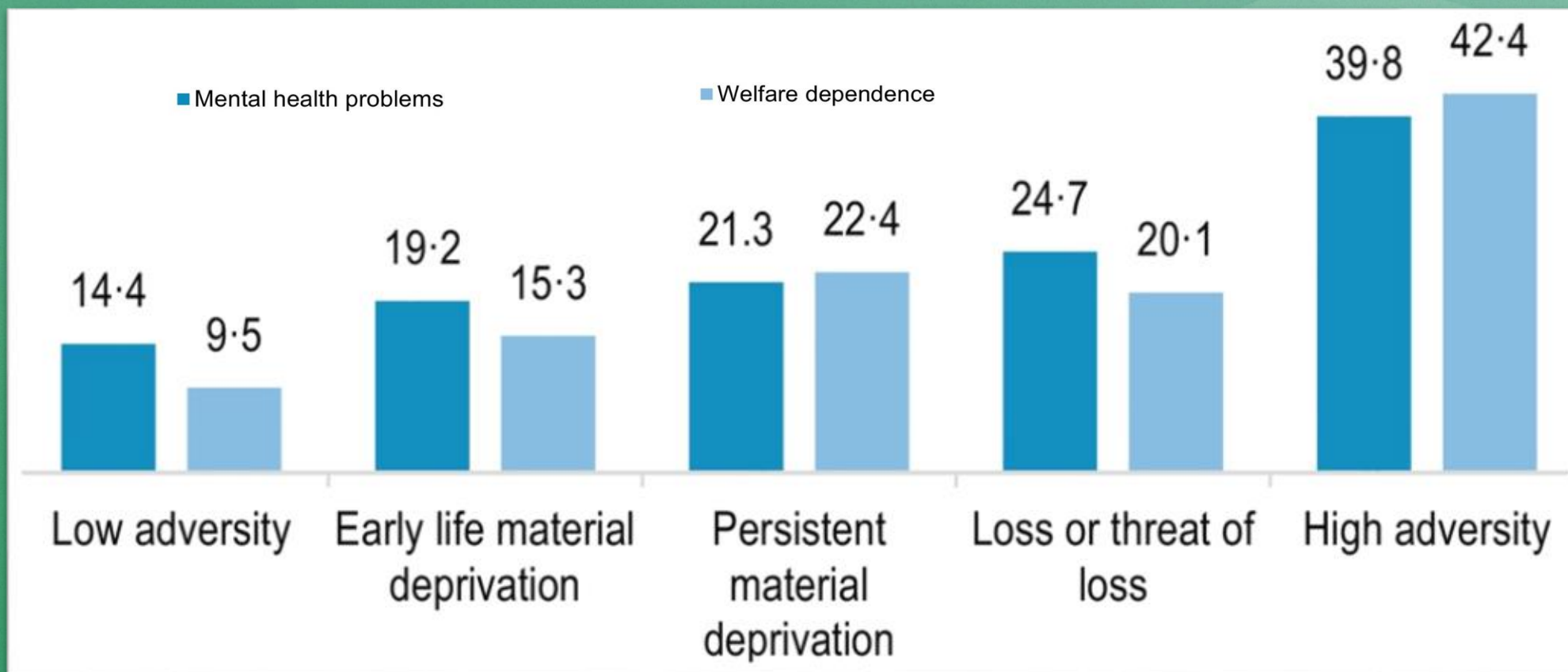
Interpretation There were long-term effects of childhood adversities on the association of high-intensity users among individuals who experienced childhood adversity already present in childhood need to be addressed, with prioritisation of resources in need of assistance.



MECHANISMS: childhood health conditions

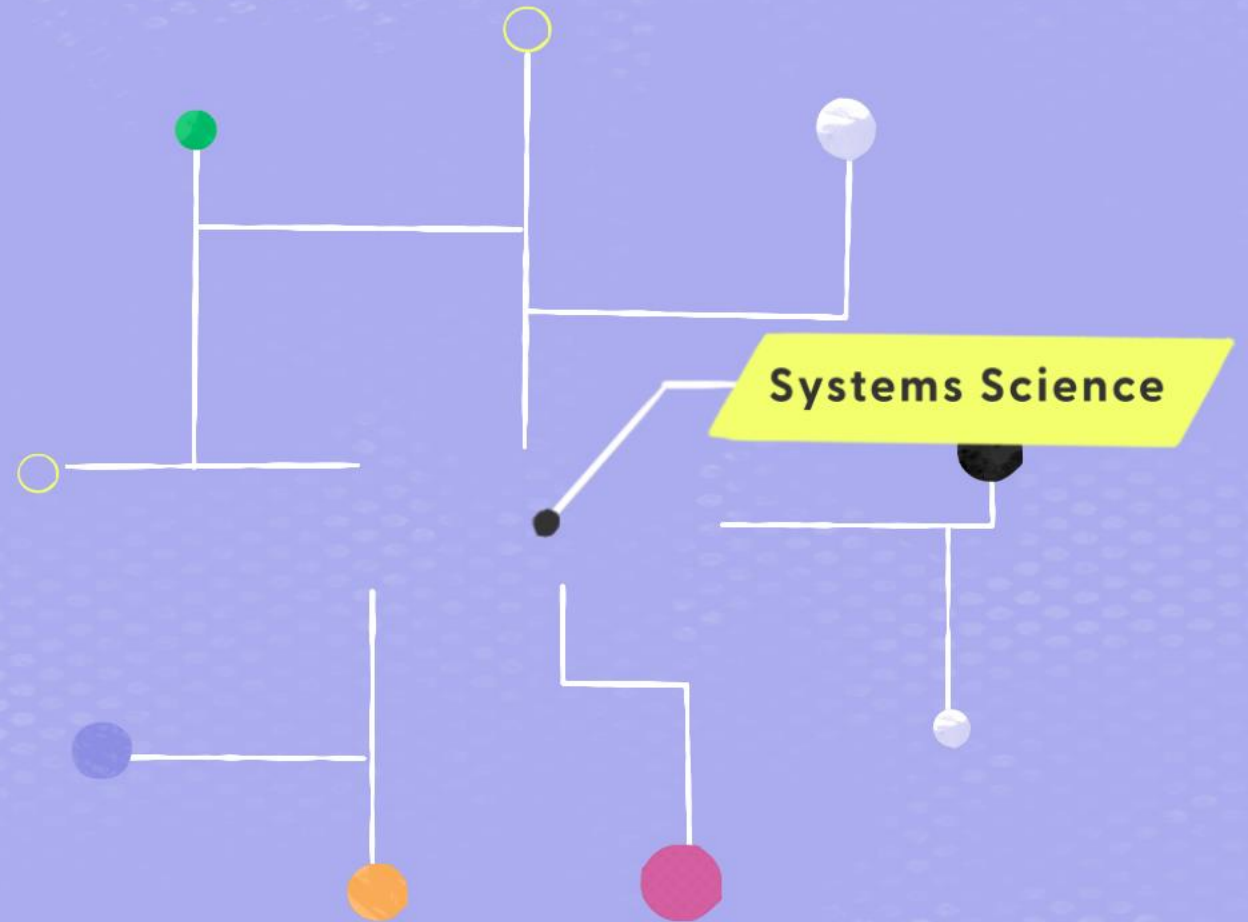


MENTAL HEALTH PROBLEMS (age 16-24) and SOCIAL WELFARE DEPENDENCE (age 25-30)

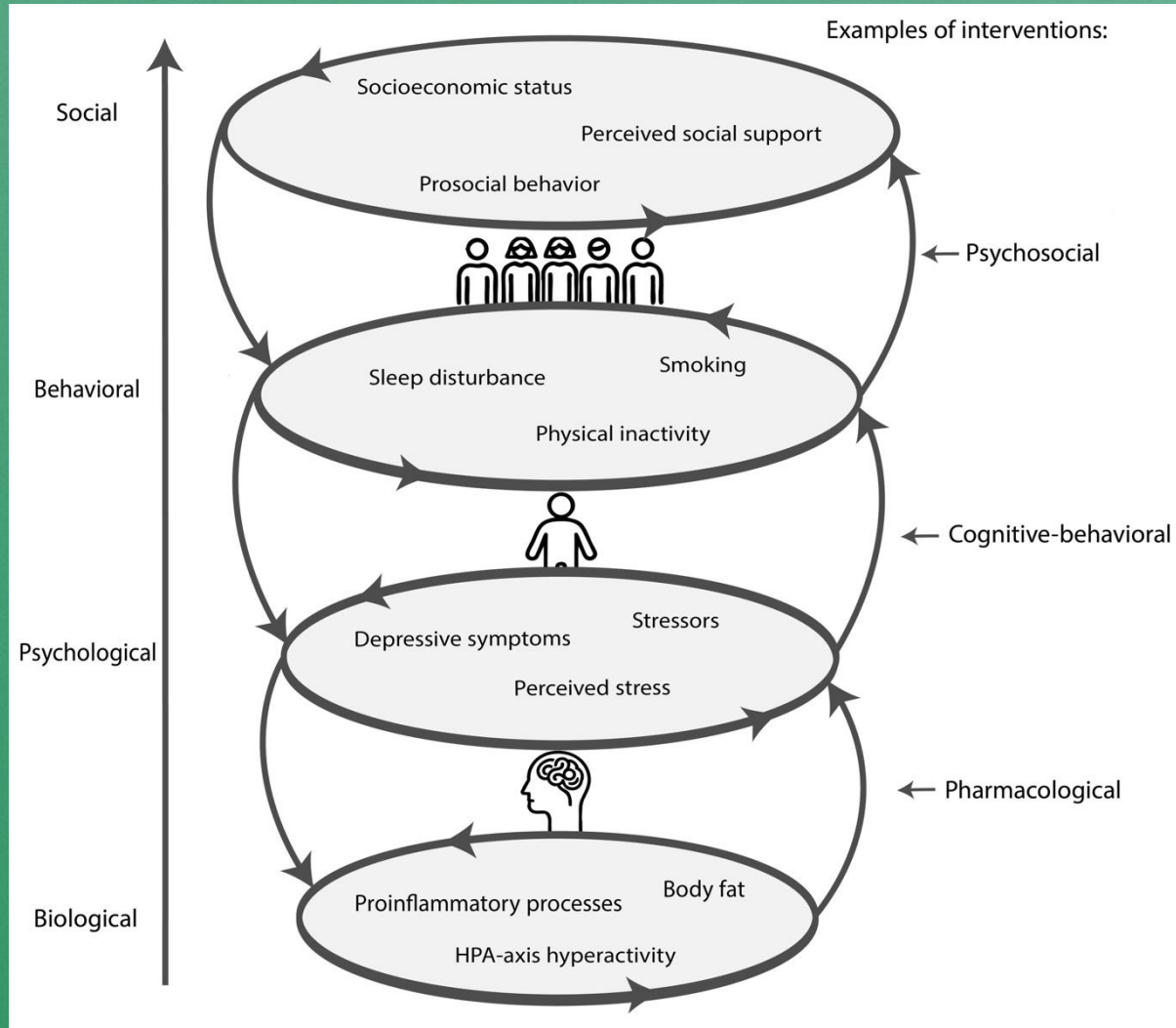




Public Health



CAUSAL LOOP DIAGRAMS



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<https://doi.org/10.1093/ije/dyae091>

Education Corner

IEA
 International Epidemiological Association

OXFORD

Education Corner

Mapping complex public health problems with causal loop diagrams

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npi | complexity

Article

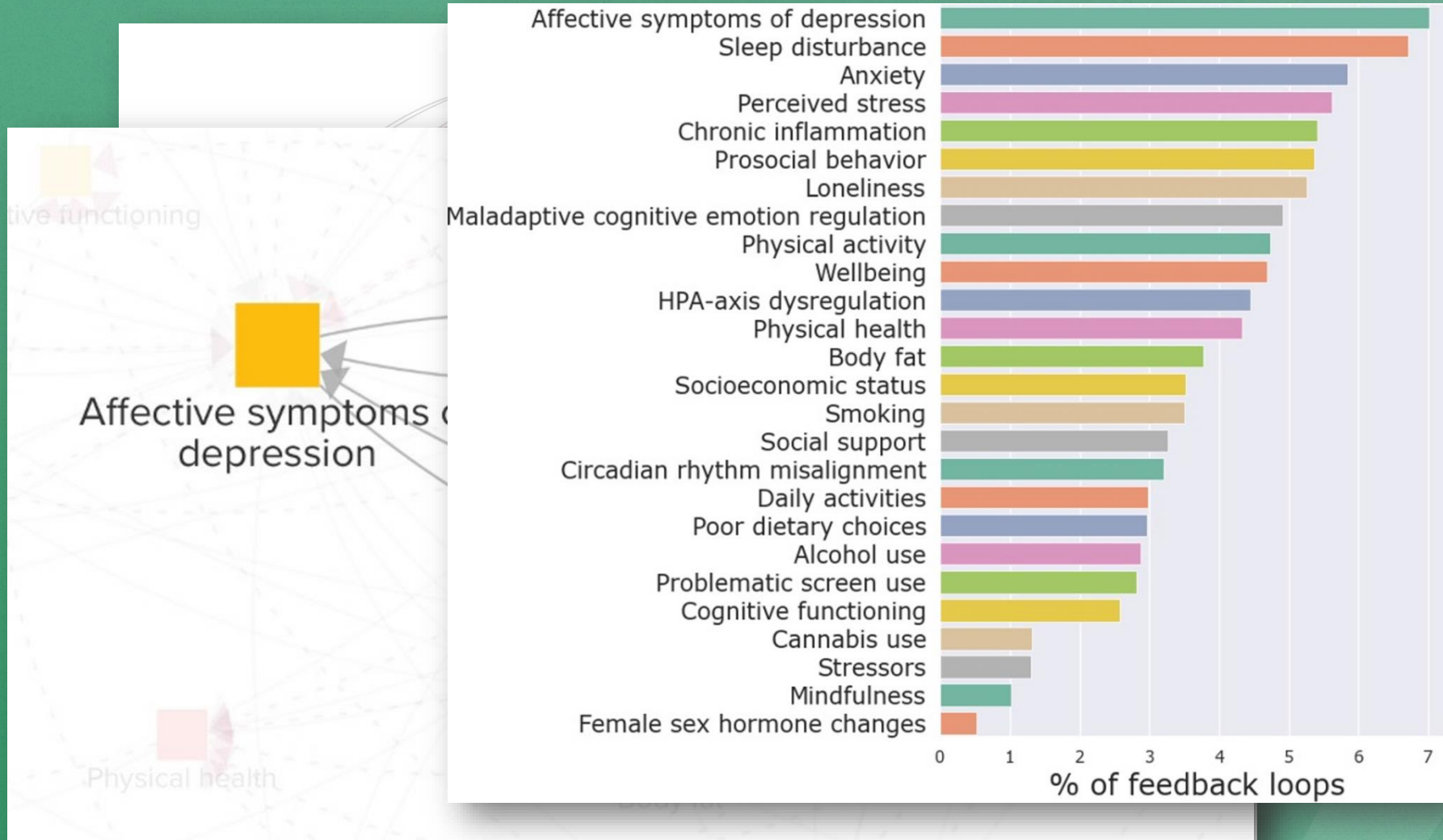
<https://doi.org/10.1038/s44260-024-00017-9>

Triangulation for causal loop diagrams: constructing biopsychosocial models using group model building, literature review, and causal discovery

Jeroen F. Uleman^{1,*}, Maartje Luijten², Wilson F. Abdo³, Jana Vyrastekova⁴, Andreas Gerhardt⁵, Jakob Runge^{6,7}, Naja Hulvej Rod^{1,7} & Maaike Verhagen^{1,7}

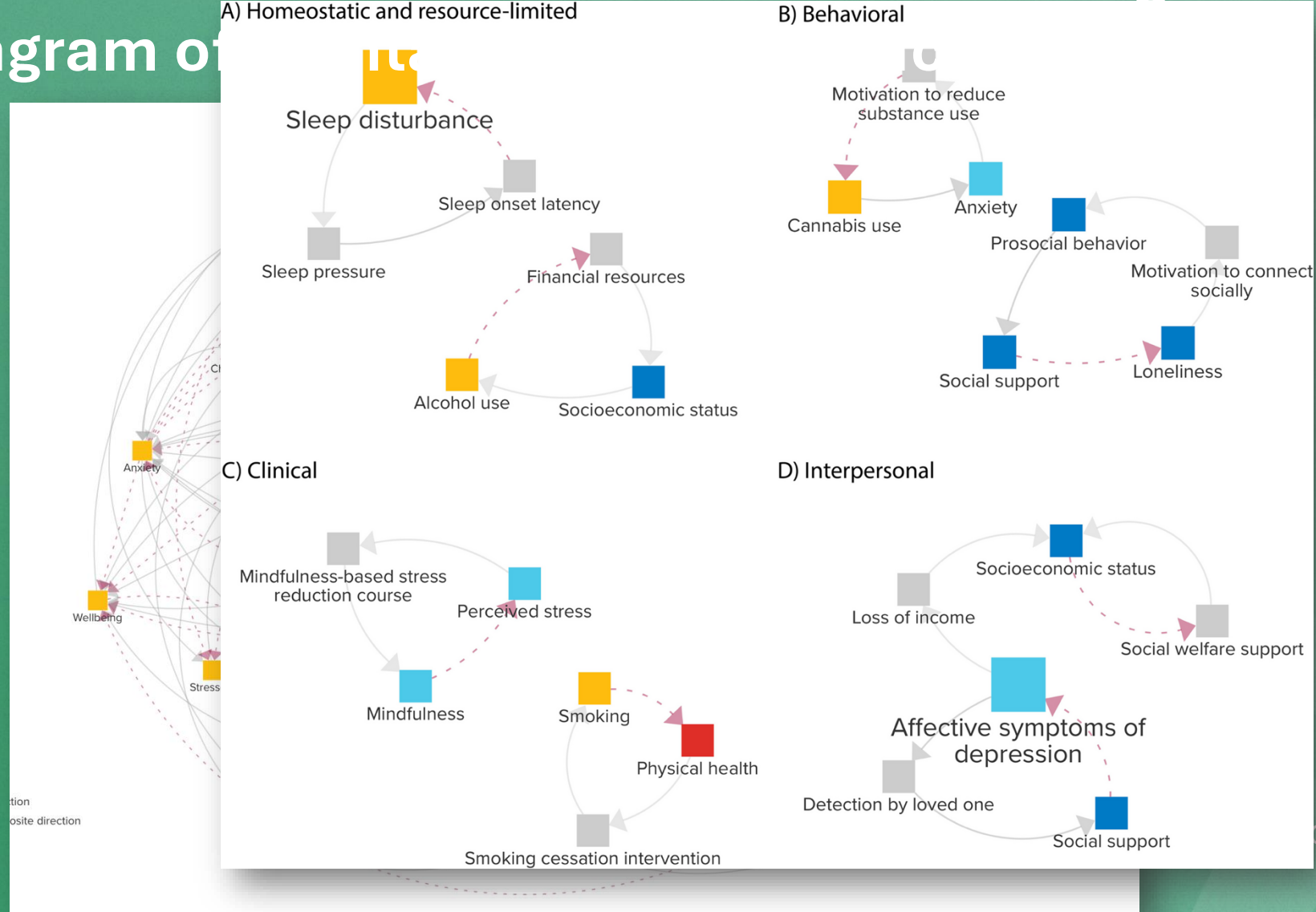
Check for updates

YOUNG ADULT SLEEP MODEL: an evolving causal loop diagram of mental health dynamics



Jeroen Uleman
Computational scientist

YOUNG ADULT SLEEP MODEL: an evolving causal loop diagram of



Jeroen Uleman
computational scientist

Project funding



Center funding

Med støtte fra
TrygFonden

Website: healthcomplex.dk

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