

# **The Role of Resilience in Mediating the Association between Adverse Childhood Experiences and Prescription Opioid Misuse among Adults in the United States**

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**Purpose:** Studies have shown some linkage between adverse childhood experiences (ACEs) and prescription opioid misuse. Given that ACEs per se are irreversible, resilience could have protective effects on preventing those with ACEs from health-risk behaviors in adulthood.

**Objectives:** This study aimed to examine how resilience mediates the association between ACEs and adulthood prescription opioid misuse among U.S. adults. **Methods:** Adult respondents (unweighted n=33,613) from the National Epidemiologic Survey on Alcohol and Related Conditions-III (2012-2013) were included in this study. A latent variable was created to measure resilience based on the subdomains of the Connor-Davidson Resilience Scale. Weighted generalized structural equation modeling (GSEM) was utilized to conduct the mediation analysis. The Problem Behavior Theory was used to guide covariate selection. **Results:** The GSEM measurement model estimated latent variable resilience and determined that tolerance of negative effects, self-control, acceptance of change, and spiritual influence were all associated with resilience, holding personal competence constrained for estimation purposes. Respondents with a higher ACE score were more likely to misuse prescription opioids in the past year (OR=1.08; 95% CI: 1.05, 1.13;  $p<0.01$ ), where 40.8% of such association was mediated by resilience (indirect effect OR=1.06). **Conclusion:** Reducing prescription opioid misuse is an essential step in alleviating the current opioid epidemic. Findings suggested that resilience mediated the relationship between ACEs and adulthood prescription opioid misuse. To prevent adults with ACEs from misusing prescription opioids, interventions designed to address ACEs' impact should include behavioral and educational components for enhancing the priority dimensions of resilience.