

What are Adverse Childhood Experiences (ACEs)?

In the mid-1990s, a large study was launched with support from the Centers for Disease Control to examine the impact of childhood trauma on over 17,000 adults living in California. People were asked about their childhood experiences.

Through this study and countless others, researchers identified nine experiences (listed in the sidebar), called adverse childhood experiences (ACEs), that are common and often occur together. We now know children’s experiences with trauma cuts across state lines, and into rural, suburban, and urban communities. Trauma impacts children in two-parent and single-parent households and across all income levels.

Adverse Childhood Experiences (ACEs)	
(1)	Economic hardship
(2)	Parents divorced or separated
(3)	Parent or guardian died
(4)	Parent or guardian incarcerated
(5)	Domestic violence
(6)	Victim of or witnessed violence
(7)	Household member with a mental illness
(8)	Household member with substance abuse problem
(9)	Child treated unfairly due to race/ethnicity

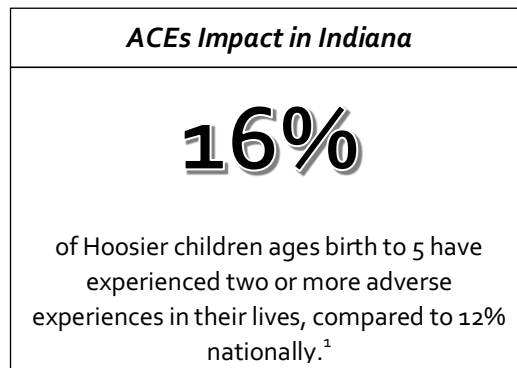
ACEs and Brain Development

Young children’s exposure to traumatic experiences impacts their brain development and long-term health. When children experience severe stress and trauma, neural connections aren’t formed, and their brain development is consequently altered. This can impact their overall development and future academic success. Children who experience significant trauma early on may also have health impacts as adults, such as heart disease, diabetes, and even cancer.

What implications does it have for ELAC work?

Becoming better informed about ACEs and the long-term impact of trauma and stress on children will offer opportunities to discuss collaboration and coordination among programs and services that serve children and families aligning with the ELAC statute Sec. 5. (a) (2). Additionally, information about ACEs, trauma informed care, and well-prepared communities and providers can impact the professional development of pre-service and in-service early childhood educators aligning with the ELAC statute Sec. 5. (a) (3).

As well, ELAC’s 2020 Goal states “ELAC is working to ensure that children ages birth to 8 years and their families have access to affordable, high-quality early childhood education programs that keep children healthy, safe and learning.” In order to keep children **healthy, safe, and learning**, programs will need to meet each child’s individual needs which, in many cases, may include exposure to chronic, toxic stress and trauma. Our state needs to be better prepared with resources, knowledge, and training in all sectors to fully support children and families in overcoming the long-term impact of stress and trauma so that children can be healthy, safe, and ready to learn.



¹ <http://childhealthdata.org/browse/survey/results?q=4783&r=1&g=604&r2=16&a=7293>

How Indiana is Addressing ACEs

Great KIDS make Great COMMUNITIES in Ft. Wayne, IN <http://www.greatkidsallencounty.org/>
Led by the Allen County Superior Court initiative “Great Kids Make Great Communities”, work with ACEs began in 2013-2014 with a mental health series training on trauma and ACEs. During their annual Conference on Youth, national speakers on trauma and ACEs (Jim Sporleder and Dr. Anda) were featured in 2016 and 2017. In 2018, they began the Great Kids Leadership Academy (with funding from the Foellinger Foundation) with a cohort of 40 leaders to engage with national experts and work toward capstone projects.

One Community One Family in Batesville, IN <http://www.onecommunityonefamily.org/>
One Community One Family (OCOF) began focusing on trauma informed care around 2009-2010 when they had received a federal system of care grant. Consultants introduced the idea of trauma informed care and brought training to staff and providers in the area. Hundreds were trained in trauma informed work with a focus on anyone that had contact with youth and families beyond those in the medical field. Through their Project LAUNCH initiative, local primary care staff complete a parent screen (“SEEK” – safe environment for every kid) to help identify those children and families with exposure to ACEs indicators. The local Child Care Resource Network encourages early childhood education programs to complete social – emotional screenings to identify those children more at-risk for impact by trauma and stress.

Ready to Grow St. Joe in South Bend, IN <http://readytogrowstjoe.com/>
Led by the Beacon Health Care System, Ready to Grow St. Joe supports the early childhood community in understanding stress and trauma and its impact on child development and behavior. Through regular presentations and discussions with practitioners from education, child care, mental health, social service, healthcare, etc., Ready to Grow St. Joe works to increase outreach to populations that may currently be experiencing ACEs. Ready to Grow St. Joe’s experience has been unique as it is a community-driven project to bring in ACE Interface whereas that effort is typically a statewide initiative.

Riley Physicians Bloomington, IN

Mary Balle, a Psychiatric and Mental Health Clinical Nurse Specialist, identified a great need for education on ACEs in the Bloomington area. She educated herself on ACEs and presents locally, collaborates with local public schools, and is striving for a conference focused on ACEs with systems of care.

Resources

- Center on the Developing Child at Harvard University. *ACEs and Toxic Stress: Frequently Asked Questions*. Retrieved from <https://developingchild.harvard.edu/resources/aces-and-toxic-stress-frequently-asked-questions/>
- Center on the Developing Child at Harvard University. *InBrief: The Impact of Early Adversity on Children’s Development*. Retrieved on June 28, 2018 from <https://developingchild.harvard.edu/resources/inbrief-the-impact-of-early-adversity-on-childrens-development/>
- Sacks, V., Murphey, D., & Moore, K. (2014). *Adverse childhood experiences: National and state-level prevalence*. Child Trends: Bethesda, MD. Retrieved from https://www.childtrends.org/wp-content/uploads/2014/07/Brief-adverse-childhood-experiences_FINAL.pdf
- Sege, R. & Browne, C.H. (2017). Responding to ACEs with HOPE: Health Outcomes from Positive Experiences. *Academic Pediatrics*, 17, 79-85. Retrieved from: [http://www.academicpediatrics.net/article/S1876-2859\(17\)30107-9/pdf](http://www.academicpediatrics.net/article/S1876-2859(17)30107-9/pdf)
- The Academic Pediatrics devoted the September-October 2017 issue to ACEs:
[http://www.academicpediatrics.net/issue/S1876-2859\(17\)X0002-8](http://www.academicpediatrics.net/issue/S1876-2859(17)X0002-8)