



**Adverse Childhood Experiences (ACEs)
Centers for Disease Control and Prevention (CDC)
National Center for Injury Prevention and Control
FY 2025 Labor HHS Appropriations Bill**

	FY 2023	FY 2024	FY 2025 President's Request	FY 2025 TFAH
Adverse Childhood Experiences (ACEs)	\$9,000,000	\$9,000,000	\$30,000,000	\$32,500,000

Background: Adverse childhood experiences (ACEs) are potentially traumatic events that occur in childhood such as neglect, experiencing or witnessing violence, or having a family member attempt or die by suicide. ACEs also include aspects of a child’s environment that can undermine their sense of safety, stability, and bonding, such as living in a household where a parent or caregiver is negatively affected by substance use or an ongoing mental health condition. ACEs can have long-lasting effects on an individual’s lifelong health and opportunity. A recent Centers for Disease Control and Prevention (CDC) study of 2011-2020 survey data from across the United States found that around two thirds of adults reported at least one ACE, and one in six reported four or more ACEs.¹ As the number of ACEs an individual experiences increases, the risk for negative health outcomes like asthma, diabetes, cancer, and poor mental and behavioral health (like anxiety, depression, substance misuse, and suicide) across the lifespan also increases. Importantly, a 2021 review also found an association between ACEs and the development and severity of substance use disorder.² Prevention of ACEs could have significant benefits: CDC estimates that the prevention of ACEs could avoid 21 million cases of depression and 1.9 million cases of heart disease among adults.³

CDC recognizes that creating and sustaining safe, stable, nurturing relationships and environments for all children and families can prevent ACEs and help children reach their full health and life potential. Achieving these outcomes requires evidence-based strategies to help children thrive, including strengthened economic supports to families, the promotion of social norms against violence, and family-centered treatment services to lessen the impact of ACEs.⁴ CDC takes a comprehensive approach to preventing ACEs and their negative impacts by building the evidence base through supporting innovative research and evaluation, promoting

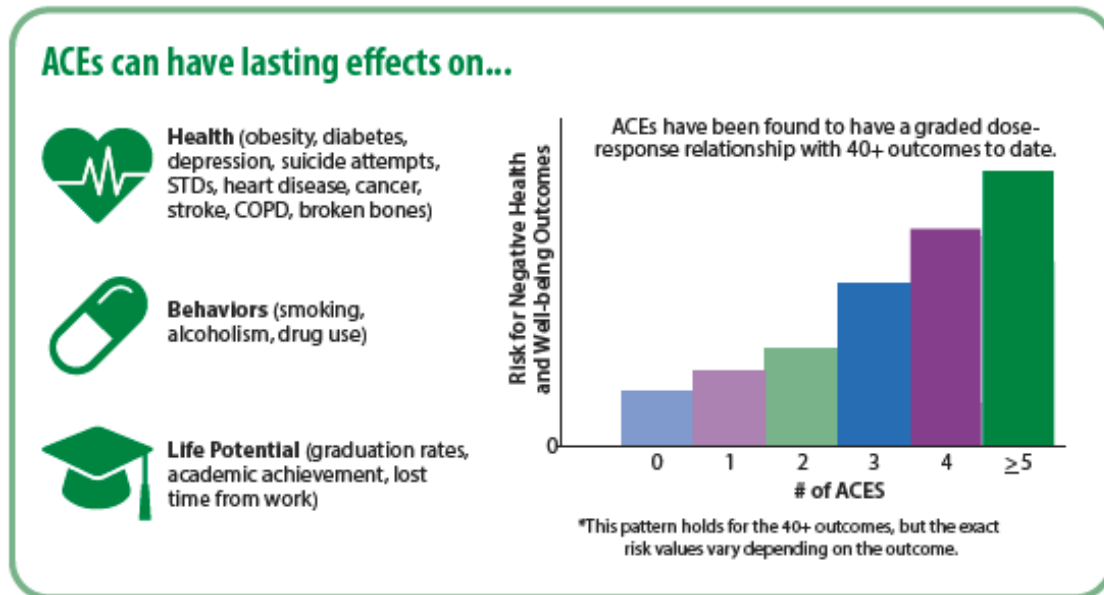
¹ Swedo E, et al., “Prevalence of Adverse Childhood Experiences Among U.S. Adults — Behavioral Risk Factor Surveillance System, 2011–2020,” *Morbidity and Mortality Weekly Report*, 72(26):707-715, June 30, 2023.

² Leire L, et al., “Adverse Childhood Experiences (ACEs) and Substance Use Disorder (SUD): A Scoping Review,” *Drug and Alcohol Dependence*, 221:1-10, April 1, 2021.

³ Preventing Adverse Childhood Experiences. In Centers for Disease Control and Prevention, Violence Prevention. <https://www.cdc.gov/violenceprevention/aces/fastfact.html> (accessed December 14, 2023).

⁴ *Adverse Childhood Experiences (ACEs) Prevention: Resource for Action*. Atlanta: Centers for Disease Control and Prevention, 2019. https://www.cdc.gov/violenceprevention/pdf/ACEs-Prevention-Resource_508.pdf (accessed December 14, 2023).

data innovation, and identifying strategies and building capacity to prevent ACEs across the country.⁵ In 2019, CDC released *Adverse Childhood Experiences (ACEs) Prevention: Resource for Action*, a collection of strategies and approaches based on the best available evidence for preventing ACEs and mitigating their consequences.⁶



Source: CDC, *Adverse Childhood Experiences (ACEs) Prevention: Resource for Action*⁷

Impact: In 2020, CDC launched funding for the Preventing Adverse Childhood Experiences: Data to Action (PACE: D2A) cooperative agreement. In 2023, CDC launched funding for the next iteration of this programmatic initiative: Essentials for Childhood: Preventing Adverse Childhood Experiences through Data to Action. These programs were designed to build state-wide capacity to collect and learn from ACEs data, implement strategies to prevent ACEs from occurring, and use data to inform prevention and intervention actions. Using CDC PACE:D2A funding, the Michigan Public Health Institute, in partnership with the Michigan Department of Education and Department of Health and Human Services, improved awareness and understanding of ACEs in the state to help identify populations with the highest need and focus community prevention resources.⁸ In another example, the Georgia Department of Public Health implemented ACEs-specific prevention strategies across the state and used ACEs data to increase early childhood home visitations. In addition, the Connecticut Office of Early Childhood trained early childhood home visitation providers on ACEs risk and protective factors and expanded efforts to understand ACEs among high school students. CDC has also provided funding to tribes and tribal organizations to increase capacity to collect ACEs data and use this information to inform prevention efforts.

⁵ *Adverse Childhood Experiences Prevention Strategy FY2021-FY2024*. Atlanta: Centers for Disease Control and Prevention, September 2020. https://www.cdc.gov/injury/pdfs/priority/ACEs-Strategic-Plan_Final_508.pdf (accessed December 14, 2023).

⁶ *Adverse Childhood Experiences (ACEs) Prevention: Resource for Action*. Atlanta: Centers for Disease Control and Prevention, 2019. https://www.cdc.gov/violenceprevention/pdf/ACEs-Prevention-Resource_508.pdf (accessed December 14, 2023).

⁷ *Id.*

⁸ Preventing Adverse Childhood Experiences: Data to Action (PACE:D2A). In *Centers for Disease Control and Prevention, Violence Prevention*. <https://www.cdc.gov/violenceprevention/aces/preventingace-datatoaction.html> (accessed December 18, 2023).

CDC currently supports 12 recipients, including public health organizations in 11 states and one tribal nation, in building their ACEs surveillance infrastructure and implementing ACEs prevention strategies.⁹ CDC supports two additional tribal recipients with funding to build their capacity to access, collect, and analyze new and existing ACEs and positive childhood experiences (PCEs) surveillance data within their communities. Recipients use this data to identify evidence-based prevention strategies and approaches to ensure safe, stable, and nurturing relationships and environments for all children.

Increased funding for CDC's innovative work would:

- **Expand work to additional sites.** In 2023, CDC funded 12 recipients, including public health organizations in 11 states and one tribal nation, to build ACEs surveillance infrastructure and implement ACEs prevention strategies as part of the Essentials for Childhood: Preventing ACEs through Data to Action program. There was great interest in the grant announcement, with more than 30 applicants. Additional funding in FY25 would provide an opportunity to fund additional recipients or expand support to existing recipients.
- **Build and sustain understanding of ACEs.** Recipients of CDC funding will build or enhance awareness, analysis, and application of ACEs-related data. These activities will directly inform and tailor ACEs prevention activities in communities.
- **Implement comprehensive strategies.** With stronger data, funded recipients will improve their understanding of the burden of ACEs in their communities and engage in proven strategies to prevent ACEs from occurring through engagement with multi-sector partners.
- **Support the Behavioral Health Coordinating Unit (BHCU).** In the FY23 omnibus appropriations bill, Congress urged CDC to “establish a program that leverages existing CDC activities dedicated to adolescent mental health to improve adolescent mental wellbeing, with a focus on culturally responsive prevention and early intervention.” In response, CDC established the BHCU. Allocating \$2.5 million for the BHCU within the overall \$32.5 million amount for the ACEs program would support CDC efforts to develop a national strategy to address the linkages between adolescent mental health and ACEs, substance use and overdose, and suicide.

Recommendation: TFAH urges the Committee to provide \$32.5 million in FY 2025 to expand CDC's groundbreaking work focused on ACEs. This funding increase would enable CDC to expand innovative ACEs surveillance and prevention activities to up to 30 new states, territories, localities, and tribes, as well as support the work of the BHCU. The increased funding would address the large demand for this novel and important work and provide critical investments in primary prevention of the more than 40 negative behavioral health outcomes associated with ACEs.

⁹ *Id.*; Essentials for Childhood: Preventing Adverse Childhood Experiences through Data to Action. In *Centers for Disease Control and Prevention, Violence Prevention*. <https://www.cdc.gov/violenceprevention/aces/EfC-PACE-datatoaction.html> (accessed December 14, 2023).