

Crowley, D. M., Connell, C. M., Noll, J., Green, L., Scott, T., & Giray, C. (2021). Legislating to Prevent Adverse Childhood Experiences: Growth and Opportunities for Evidence-Based Policymaking and Prevention. *Prevention Science*, 23(2), 181–191. <https://doi.org/10.1007/s11121-021-01292-x>

What we know

Adverse childhood experiences (ACEs) are potentially traumatic events that occur before a child is 18. The past twenty years have produced research that shows an association between the number of ACEs experienced and poor health later in life and even early death. Although the term ACE is now widely understood, and the potential dangers to physical and mental health known, it is still unclear how or if ACE language is being used by state legislators to create laws to raise awareness of, prevent, screen for, or treat ACEs and their negative effects.

What this study adds

Over the past 20 years, 425 pieces of legislation that specifically use ACE terminology have been introduced across the US. Less than 20 bills using ACE language were introduced in the 2012 legislative session; that number grew to 148 in the 2019 session. Currently, there are over 100 state laws that specifically use ACE language enacted across the US. Legislators who identify as female, are affiliated with the democratic party, and have some graduate education were more likely to sponsor, co-sponsor, and vote in favor of legislation with ACE language. Legislators who spoke out against forms of family violence were more likely to support legislation with ACE language. However, legislators were less likely to vote for ACE legislation if they spoke out against divorce and parental separation.

What this means for practice or policy

Using ACE terminology in explaining childhood trauma provides an easily understood concept that can be translated into legislation in the US. Also, these findings provide insight into which legislators are likely to champion ACE legislation. The authors propose several ways advocates, scholars and policy makers can use this information. For instance, researchers can engage directly with legislative officials and discuss not just ACEs as a cumulative risk, but how particular ACEs and combinations of ACEs may pose specific risks to child health and wellbeing. It is also recommended that policy makers broaden discussions of ACEs to consider their causes in order to help further prevention efforts.

How we know this is a good study

This study conducted a mixed-method analysis of all state bills introduced in the US over the past twenty years (this included over 1.2 million bills), as well as congressional office communications (over 14 million public statements) and legislative voting records (over 1.1 million votes). The source of the bill, the committee to which the bill was referred, and whether the bill was executed were all captured. Bills that directly referenced ACEs were coded as ACE-related bills. A conservative definition was taken to avoid over-counting bills and focused on those that referenced ACEs explicitly. The relationship between legislative members' public debate of ACEs and policymaking behavior was modeled with an analysis of group office communications and voting records.