

ACEs Initiatives and Actions

As knowledge about the science of adverse childhood experiences (ACEs) spreads, ACEs initiatives have launched in all 50 U.S. states and the District of Columbia. Hundreds of cross-sector collaboratives are educating and engaging organizations and policymakers about ACEs science. In turn, these organizations are implementing trauma-informed and resilience-building practices and policies based on ACEs science; many legislatures are passing resolutions and/or bills.

Highlights

The Nebraska Children and Families Foundation with a key partner Prevent Child Abuse Nebraska, invests in children from birth to young adulthood with initiatives that are focused on preventing ACEs. The Nebraska Child Abuse Prevention Fund Board, created in 1986 by the State Legislature is integrating a two-generational approach to help maltreated children and are institute trauma screening. The Nebraska Department of Education released a report Trauma and Schools.

Bring Up Nebraska is a community-led effort, instead of the usual "top down" approach to prevention services. Communities have the best understanding of their own needs and resources. By working in community collaboratives, LOCAL partners identify and coordinate resources in new ways for affordability and sustainability. The focus of Bring Up Nebraska is on building the community's capacity to solve its own problems and be accountable to each other.

PRAMS The Nebraska Pregnancy Risk Assessment Monitoring System (PRAMS) is an ongoing statewide survey that asks mothers about their experiences and behaviors before, during, and after pregnancy. Their report on ACEs and prevention of intergenerational trauma is here.

State Initiatives

Nebraska Children and Families Foundation, Nebraska Child Abuse Prevention Fund Board , Bring Up Nebraska

Local Initiatives

No cross-sector city or county ACEs initiatives were identified.

Legislation

LB 552, creates the Children's Connection program, a partnership between behavioral health and K-8th grade schools to identify children with social and emotional difficulties and provide services.

LB998, creates the Collaborative School Behavioral and Mental Health Program. which aims to aid students who are suffering from behavioral or mental health problems by providing them with preventative care or treatment as needed.

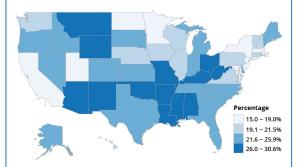
Find links and add your updates to all initiatives and legislation at www.bit.ly/ACEsInitiatives



19.9% NE* 21.7% USA

Percent of children with 2 or more ACEs

NE ranks 14th in the US for lowest percentage of children with ACEs scores of 2 or more.



CAHMI (Child & Adolescent Health Measurement Initiative) surveys parents or guardians about their children ages 0-17.

Percentage of children aged 0–17 yrs. who experienced two or more of the following:

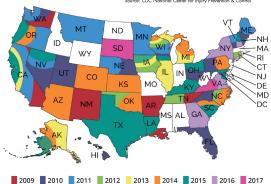
- Hard to get by on income (somewhat or very often)
- · Saw or heard violence in the home
- · Victim/witness of neighborhood violence
- Lived with anyone mentally ill, suicidal, or depressed
- Lived with anyone with alcohol or drug problem
- Parent/guardian divorced or separated
- Parent/guardian died
- Parent/guardian served time in jail
- Often treated or judged unfairly due to race/ethnicity

Citation: Bethell, CD, Citation: Bethell, CD, Davis, MB, Gombojav, N, Stumbo, S, Powers, K. Issue Brief: A national and across state profile on adverse childhood experiences among children and possibilities to heal and thrive. Johns Hopkins Bloomberg School of Public Health, October 2017.

www.cahmi.org/projects/Adverse-childhood-experiences-aces

* State Range: 15.0% - 30.6%

States Collecting ACEs Data 2009 – 2017 Source: CDC National Center for Injury Prevention & Control



The ACEs module of Behavioral Risk Factor Surveillance Survey (BRFSS) data comes from interviews with adults about their experiences to age 18. BRFSS is sponsored by the CDC and other federal agencies.