



To: The Honorable Chair, Delegate Shane E. Pendergrass and members of the Health and Government Operations Committee
From: Melissa S. Rock, Birth to Three Strategic Initiative Director
Re.: **HB 628: Health Occupations—Primary Care Providers- Adverse Childhood Experiences Screening**
Date: February 26, 2020
Position: **SUPPORT**

The Center for Disease Control (CDC) defines Adverse Childhood Experiences (ACEs) as:

potentially traumatic events that occur in childhood (0-17 years) such as experiencing violence, abuse, or neglect; witnessing violence in the home; and having a family member attempt or die by suicide. Also included are aspects of the child's environment that can undermine their sense of safety, stability, and bonding such as growing up in a household with substance misuse, mental health problems, or instability due to parental separation or incarceration of a parent, sibling, or other member of the household.ⁱ

Exposure to ACEs can interrupt healthy brain development and have a negative impact on adult health and well-being. As the CDC explains, "evidence confirms that these exposures can increase the risks of injury, sexually transmitted infections, including HIV, mental health problems, maternal and child health problems, teen pregnancy, involvement in sex trafficking, a wide range of diseases and the leading causes of death such as cancer, diabetes, heart disease, and suicide."ⁱⁱ

HB 628 creates a grant program for primary care providers to screen for ACEs. By doing these screenings, families can be provided support services to counter the impact these ACEs could have on adult health and other negative outcomes which have been found to be connecting to experiencing ACEs. **We urge this committee to issue a favorable report on HB 628 to help prevent ACEs and provide buffers for their negative impacts when children are exposed to ACEs.**

ⁱ Center for Disease Control: National Center for Injury Prevention and Control & Division of Violence Prevention, "Preventing Adverse Childhood Experiences (ACEs): Leveraging the Best Available Evidence" (2019) at p.7.

ⁱⁱ Id.