WHAT ARE ADVERSE CHILDHOOD EXPERIENCES (ACES)?

Adverse childhood experiences are serious childhood traumas. The ACE study¹ asked about people's exposure to 10 specific trauma experiences from the ages of 0 to 18 years and found that exposure to these experiences are possible risk factors for toxic stress and can lead to negative physical, developmental, and behavioral health outcomes, including a shortened lifespan.

How ACEs Influence Health



Source: Centers for Disease Control and Prevention

How are pediatricians in California addressing ACEs?

Beginning January 1, 2020, pediatricians in California will screen millions of children for traumatic experiences. Medi-Cal providers can receive reimbursement for conducting ACEs screenings on their patients. California has identified the PEARLS as the screener to utilize in pediatric care (flip to the back for more information on PEARLS).



WHY SCREEN ACES IN PRIMARY CARE?

The primary-care setting provides great opportunity for health promotion and disease prevention. Therefore, utilizing a screening tool for ACEs in primary care can be crucial in identifying children at-risk for later problems. In addition, for children experiencing these negative effects, they might benefit from a referral to mental health counseling and other treatments that can prevent the lifelong health effects of childhood trauma.

RESOURCES

¹ Felitti, V. J., Anda, R. F., Nordenberg, D., Williamson, D. F., Spitz, A. M., Edwards, V., . . . Marks, J. S. (1998). Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults: The Adverse Childhood Experiences (ACE) Study. *American Journal of Preventive Medicine*, 14(4), 245-258.

²The PEARLS can be downloaded here: https://www.acesaware.org/screen/screening-tools/

THE PEDIATRIC ACES AND RELATED LIFE-EVENTS SCREENER (PEARLS)²

WHAT IS THE PEARLS SCREENING TOOL AND HOW DO I USE IT?

- The PEARLS is composed of 10 questions from the original ACE Study by Felitti and Anda on various types of abuse, neglect, and household dysfunction.
- There are also questions that are related to bullying, racism, community violence, involvement with foster care, and food or housing insecurity.
- You can present the screening tool to the patient and/or caregiver during their visits. You can start using it as early as infancy and at regular intervals from there, as it is an ongoing assessment of the child's experiences.

WHAT VERSION OF THE PEARLS SHOULD I USE?

There are different versions of the PEARLS based on the child's age:

- Child: Parent or caregiver reports on a child's (age 0-11) experience (17 questions)
- Teen: Parent or caregiver reports on a teen's (age 12-19) experience (19 questions)
- Teen Self-Report: Teen (age 12-19) self-reports on their own experiences (19 questions)

For adolescents, a PEARLS tool is completed by *both* the patient and the parent/caregiver. If the scores are different, the higher score is the one used for treatment planning.

How can I score the PEARLS?

The ACE total score refers to the first 10 questions only. Scoring can be done in 1 of 2 ways:

- Number only: Respondents count the number of experiences that have happened to their child or themselves and *write down the total number only*.
- Identified experiences: Respondents specify which experience(s) happened to their child or themselves by choosing "yes" or "no" for each question.

WHAT DOES THE SCORE MEAN?

- The higher the ACE score total, the greater the risk for poorer health outcomes.
- With a score of 4 or more ACEs, consider seeing the family more regularly and check in to see if the child is struggling emotionally, socially, or academically.
- If the family identifies that the child is struggling, consider a referral to a mental health provider.

WHERE CAN I LEARN MORE ABOUT ACES?

 More information on the ACEs screening, how to utilize in in the primary care setting, and the reimbursement process can be found at www.ACEsAware.org