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## Testimony in Support of HCR 2

*(HCR 2= A concurrent resolution to declare Adverse Childhood Experiences (ACEs) a critical health issue, commit the Legislature to action, and encourage the Governor to direct agencies to assess and report progress on reducing ACEs).*

Good Afternoon Mr. Chairman and members of the Committee. My name is Rick Murdock, former director of the Michigan Association of Health Plans and now Coordinator of the Michigan ACE Initiative for the MAHP Foundation. With me is Lisa Farnum, Managing Director of the MAHP Foundation and the Michigan ACE Initiative.

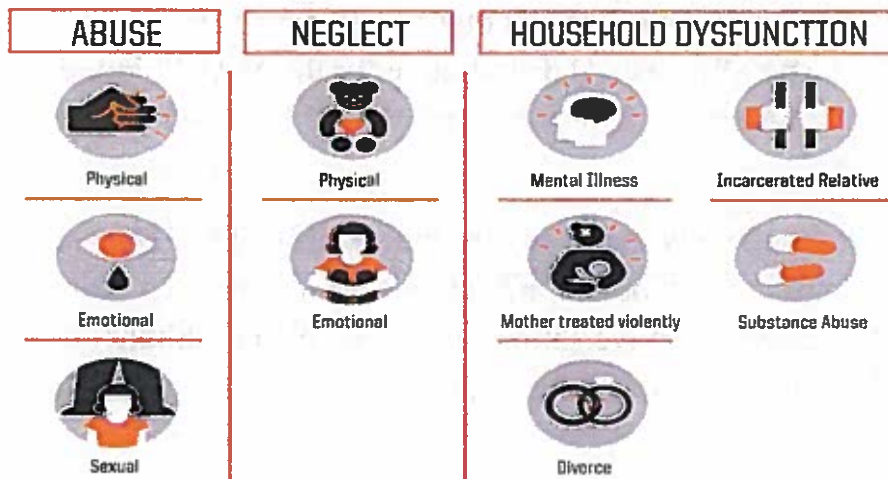
First, we wish to publicly thank you for the sponsorship of House Concurrent Resolution 2 and indicate our strong support for its passage. This resolution appropriately raises the conversation regarding adverse childhood experiences, ACEs, and its future impact of the health status of Michigan's population and as you will see advances one of our policy recommendations.

The Michigan ACE Initiative focuses on creating and sustaining a statewide awareness of the impact of Adverse Childhood Experiences on health care, education, juvenile justice and job performance and creating a statewide coalition to identify appropriate interventions and state policies. We understand that many questions continue to be raised about ACEs and rather than trying to comprehensively address those today in testimony, we are providing a packet of information to provide an overview of the Michigan ACE Initiative.

## Background Information and Recommendations

### What Are ACEs

The ACE study evaluated the following ten categories of childhood adversity and found that ACEs are common across all socio-economic and culture/ethnicity lines; that they are interrelated; that they accumulated and have powerful impact on future health status; and that they tend to be held in the body leading to mental, physical and behavioral problems throughout a person's life. We now also know that ACEs disrupt neurodevelopment, which in turn leads to social-emotional and cognitive adaptations that can then lead to risk factors for major causes of disease, disability, social problems and early death.



### Prevalence in Michigan

According to the most recent Michigan data, as of 2016, **nearly 70% of Michigan's adult population** reported having at least one adverse childhood experience, ACE, and **nearly 1 in 5 adults reported having 4 or more ACEs** as a child. (This data will be updated in through ongoing surveys undertaken by the Michigan Department of Health and Human Services. The key factor is that the more ACEs a person has, the risk of many health and social problems tend to increase. In summary, as the ACE score goes up in a population, the percent of people with these problems also goes up. It is also important to understand that

some of those problems become ACEs for the next generation—thereby perpetuating the cycle of adversity and their attendant problems.

### **ACE Prevention**

The Adverse Childhood Experiences (ACE) study conducted by the U.S. Centers for Disease Control and Kaiser Permanente Health Plan confirmed, with scientific evidence that experiencing adversity (sustained toxic stress) during childhood – such as abuse, neglect and/or growing up with domestic violence, mental illness or other stressors –increases one’s risk of physical, mental and behavioral problems later in life and is therefore considered the most powerful determinant of public health because of the breadth of impacts—from heart disease to homelessness, from depression to violence—all because of the large percent of each of these problems that are attributable to ACEs.

It makes sense then that public policy that focuses on ACE prevention is the greatest opportunity for improving the well-being of human populations and taking action in order to break the ACE cycle.

### **Policy Actions To be Taken to Reduce Prevalence and Impact of ACE in Michigan**

1. **A legislative commitment, through the adoption of House and Senate Legislative Resolutions that adopt a firm statement that ACEs constitute a critical health issue in Michigan and commitment through legislative leadership, legislative acts, appropriations, reporting and oversight to strategies to significantly reduce ACEs in Michigan.**
2. **A declaration by the Legislature to identify ACEs as one of the “critical health care issues in Michigan” through amending the Michigan Department of Health and Human Services (MDHHS) Boilerplate. (Amending MDHHS Appropriations Boilerplate)**
3. **An Executive Directive that would require administrating agencies to implement existing programs for adolescents through the” lens” of impacting ACEs; provide annual report and data to the Legislature and public; and develop a longer-term strategy for reducing ACEs in Michigan.**

**Funding Actions To be Taken to Reduce Prevalence and Impact of ACE in Michigan**

4. Dedicate **new funding for Michigan's Children's Trust Fund (\$3.5 Million)** and accompanying MDHHS boilerplate to target these new resources to support local and state organizations for ACEs reduction initiatives.
5. New funding to **support 2-1-1 enhancement for referral to services to address ACEs** with boilerplate in MDHHS bill regarding enhanced 2-1-1, (\$950,000)
6. Increase funding for **Medicaid ESPDT/ACEs related screening reimbursement (\$14.2 million gross)** for Managed care and FFS Medicaid Physician line item with expectation and performance measures that ACE screening rates and referrals will increase.
7. **Sustaining Michigan's Safety Net programs** including current programs for pregnancy, infant mental and physical health; adolescent health services, including behavioral care.



## **MI ACE Initiative**

The Michigan Association of Health Plans Foundation (MAHP Foundation) received funding from the Michigan Health Endowment Fund to support the *Creating Healing Communities: A Statewide Initiative to Address Adverse Childhood Experiences (ACEs) in Michigan*. This initiative is focused on expanding efforts toward statewide awareness of Adverse Childhood Experiences and creating a statewide coalition to recommend development of appropriate interventions, state policy, and to provide for the implementation of Medicaid policy for ACE. This program is aimed at benefitting the health and wellness of Michigan residents.

To date the MI ACE Initiative has trained 132 Master Trainers & presented to over 13,000 individuals on ACE.

For more information please visit the following links:

- [www.miace.org](http://www.miace.org)
- <https://youtu.be/MtuTmDtvGm0> (MI ACE Initiative Video: Building Healing Communities)
- <https://youtu.be/XM4o50q8r5g> (MI ACE Initiative Video: Building Resilience, Healing Communities)
- <https://www.facebook.com/MichiganACE/>

## **MI ACE Initiative Certified Master Trainers (Updated May 21, 2019)**

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# Michigan ACE Initiative

## Stress & Early Brain Development

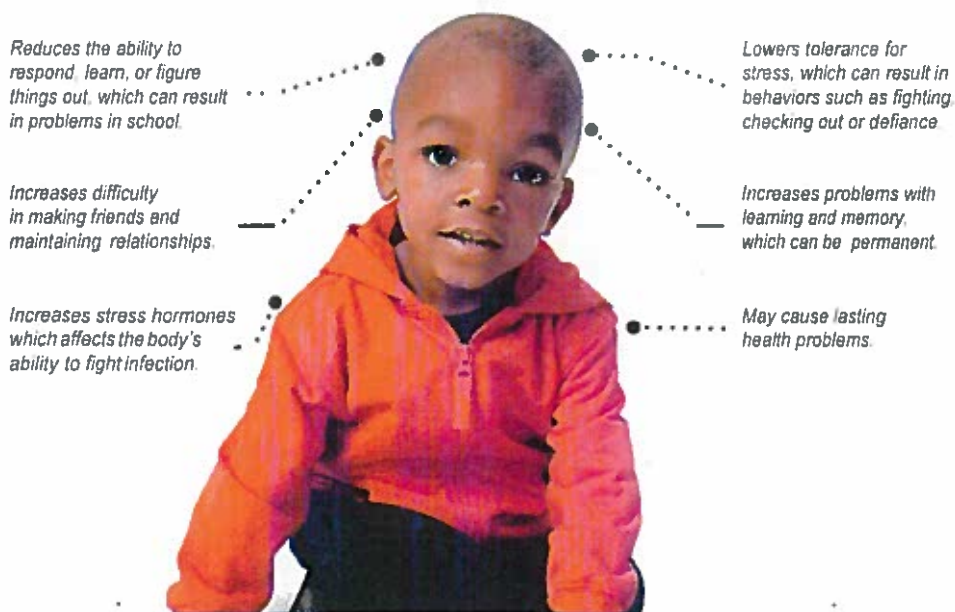
# Understanding Adverse Childhood Experiences (ACEs)

### What are ACEs?

ACEs are serious childhood traumas — a list is shown below — that result in toxic stress that can harm a child's brain. This toxic stress may prevent a child from learning, from playing in a healthy way with other children and can result in long-term health problems.

### How do ACEs affect health?

Through stress, frequent or prolonged exposure to ACEs can create toxic stress, which can damage the developing brain of a child and affect overall health.



### Adverse Childhood Experiences can include:

- Emotional abuse
- Physical abuse
- Sexual abuse
- Emotional neglect
- Physical neglect
- Mother treated violently
- Household substance abuse
- Household mental illness
- Parental separation or divorce
- Incarcerated household member
- Bullying (by another child or adult)
- Witnessing violence outside the home
- Witness a brother or sister being abused
- Racism, sexism, or any other form of discrimination
- Being homeless
- Natural disasters and war

**A Survival Mode Response** to toxic stress increases a child's heart rate, blood pressure, breathing and muscle tension. Their thinking brain is knocked off-line. Self-protection is their priority. In other words:

**"I can't hear you! I can't respond to you! I am just trying to be safe!"**

### Exposure to childhood ACEs can increase the risk of:

Adolescent pregnancy  
Alcoholism and alcohol abuse  
Depression  
Heart disease  
Illicit drug use

Intimate partner violence  
Liver disease  
Multiple sexual partners  
Sexually transmitted diseases (STDs)

Smoking  
Suicide attempts  
Unintended pregnancy

## The good news-Resilience Brings Hope!

### What is Resilience?

Resilience is the ability to return to being healthy and hopeful after bad things happen. Research shows that if parents provide a safe environment for their children and teach them how to be resilient, the effects of ACEs are reduced.

### Resilience trumps ACEs!

Parents, teachers and caregivers can help children by:

- Gaining an understanding of ACEs
- Creating environments where children feel safe emotionally and physically
- Helping children identify feelings and manage emotions
- Creating a safe physical and emotional environment at home, in school and in neighborhoods

### What does resilience look like?

#### 1. Having resilient parents

Resilient parents who know how to solve problems, who have healthy relationships with other adults who build healthy relationships with their children

#### 2. Building attachment and nurturing relationships

Adults who listen and respond patiently to a child in a supportive way and pay attention to a child's physical and emotional needs

#### 3. Building social connections

Having family, friends and/or neighbors who support, help and listen to children

#### 4. Meeting basic needs

Providing children with safe housing, nutritious food, appropriate clothing and access to health care and good education

#### 5. Learning about parenting and how children grow

Helping children interact in a healthy way with others, manage their emotions and communicate their feelings and needs

#### 6. Building social and emotional skills

Understanding how parents can help their children grow in a healthy way and what to expect from children as they grow

### Resources

[www.miace.org](http://www.miace.org)

[www.mahp.org/foundation](http://www.mahp.org/foundation)

Resilience Trumps ACEs

[www.resiliencestrumpsaces.org](http://www.resiliencestrumpsaces.org)

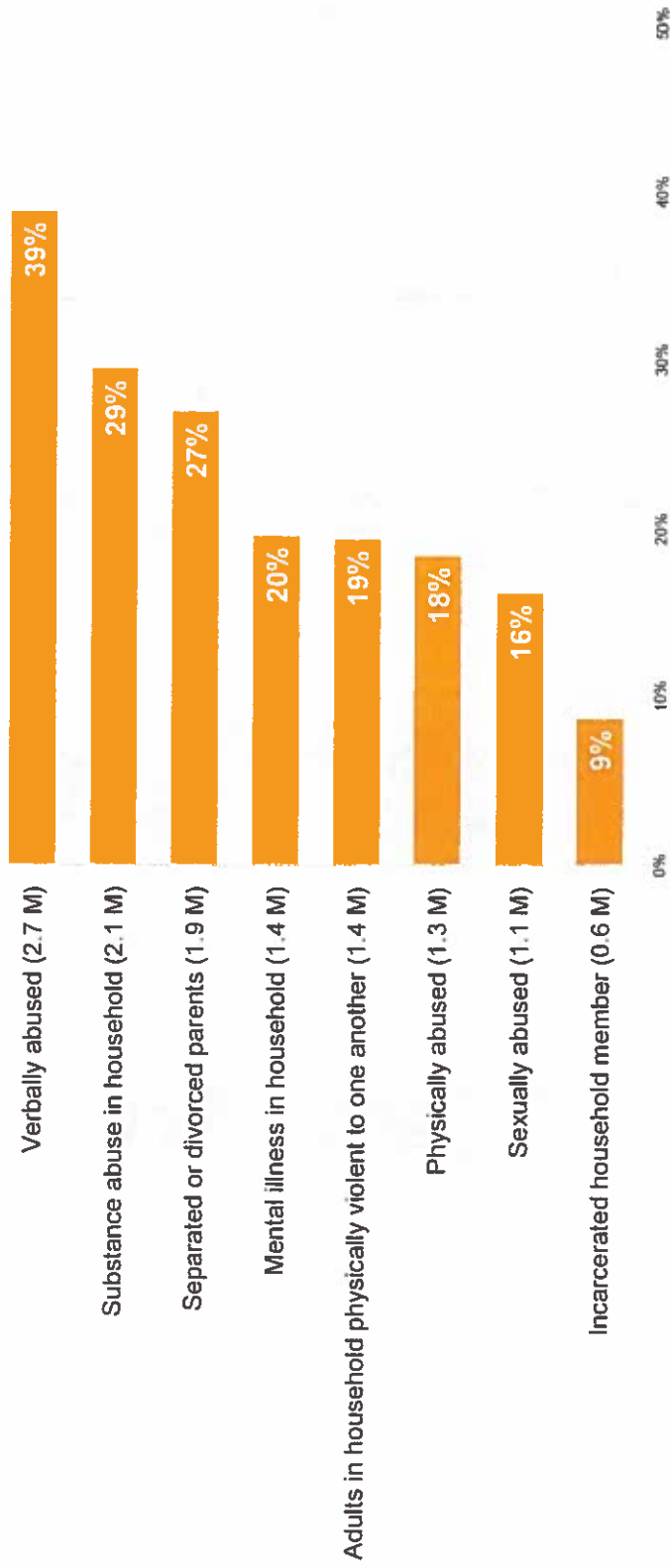
CDC Adverse Childhood Experiences (ACE) Study

[www.cdc.gov/ace/about.htm](http://www.cdc.gov/ace/about.htm)

*The MAHP Foundation received funding from the Michigan Health Endowment Fund to support the Creating Healing Communities: A Statewide Initiative to Address Adverse Childhood Experiences (ACEs) in Michigan. [Learn more here.](#)*



## Prevalence of Individual ACEs Among Michigan Residents (2016)



Data Source: Michigan Behavioral Risk Factor Surveillance System, 2016

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## Percent of Michigan Population by ACEs Load (2016)



Data Source: Michigan Behavioral Risk Factor Surveillance System, 2016

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# THE TRUTH ABOUT ACEs

## WHAT ARE THEY?

ACEs are  
ADVERSE  
CHILDHOOD  
EXPERIENCES

The three types of ACEs include

### ABUSE



Physical



Emotional



Sexual

### NEGLECT



Physical



Emotional

### HOUSEHOLD DYSFUNCTION



Mental Illness



Incarcerated Relative



Mother treated violently



Substance Abuse

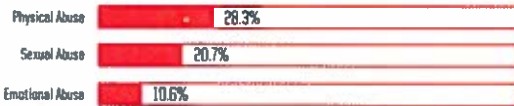


Divorce

## HOW PREVALENT ARE ACEs?

The ACE study\* revealed the following estimates:

### ABUSE



### NEGLECT

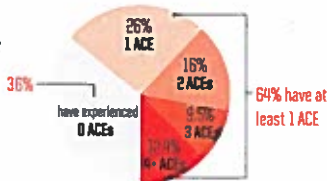


percentage of study participants that experienced a specific ACE

### HOUSEHOLD DYSFUNCTION

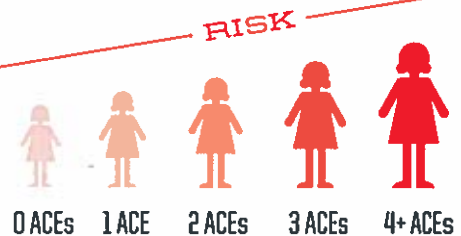


Of 17,000 ACE study participants:



## WHAT IMPACT DO ACEs HAVE?

As the number of ACEs increases, so does the risk for negative health outcomes



Possible Risk Outcomes:

### BEHAVIOR



### PHYSICAL & MENTAL HEALTH

