



# Pathways to Professional Development

Building Foundations in Infant  
and Early Childhood Mental Health

## **From Adversity to Grit and Greatness: A Webinar Series on Adverse Childhood Experiences (ACEs)**

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Part I: An Overview of ACEs

**Damali M. Wilson, PhD, APRN and Uju Berry, MD, MPH**

# Pathways to Professional Development



**Pathways to Professional Development; Building Foundations in Infant and Early Childhood Mental Health** was developed to build workforce competence and to prepare professionals working in the perinatal and birth to 5 periods

- 30 webinars focused on the foundations of Infant and Early Childhood Mental Health.
  - Provided live virtually
  - Recorded for viewing as LMS modules
- Diagnostic Classification of Mental Health And Developmental Disorders of Infancy and Early Childhood (DC:0-5) offered virtually.
- View all offerings here <https://www.mcsilverta.org/special-initiatives/pathways-to-professional-development/>

The aim is to develop a well prepared and competent workforce trained to **identify** and address mental health concerns early, to **promote** awareness of mental health, to **prevent** long-term problems and to **intervene** to help children stay on developmental track.



# Who we are



These trainings are funded by the New York State Office of Mental Health (OMH) and provided by the New York Center for Child Development (NYCCD) in collaboration with CTAC.

- **New York Center for Child Development** (NYCCD) has been a major provider of early childhood mental health services in New York with a long history of providing system-level expertise to inform policy and support the field of Early Childhood Mental Health through training and direct practice.
- **NYU McSilver Institute for Poverty Policy and Research** houses the Community and Managed Care Technical Assistance Centers (CTAC & MCTAC), and the Center for Workforce Excellence (CWE). These TA centers offer clinic, business, and system transformation supports statewide to all behavioral healthcare providers across NYS.

**NYCCD and McSilver** also run the **NYC Perinatal + Early Childhood Training and Technical Assistance Center (TTAC)** which offers ongoing training and technical assistance for those working during the perinatal period to age 5

<https://ttacny.org/>



# Learning Objectives



- Participants will be able to define and describe ACEs
- Participants will be able to identify potential negative outcomes and impacts of the exposure to ACEs
- Participants will be able to list three resilience/protective factors that emerge in the context of ACEs
- Participants will be able to discuss positive experience as an alternative to ACEs



# Financial Disclosures

None of the planners or presenters for this activity have relevant financial relationship(s) to disclose with ineligible companies.

# Joint Providership

Drs. Wilson and Berry were equally involved in the planning and development of this learning activity.



# The ACE Study



- Conducted 1995 to 1997
- 17,000+ adult participants through a southern California-based insurance provider
- Survey data on childhood experiences (first 18 years of life) + current health status and behaviors



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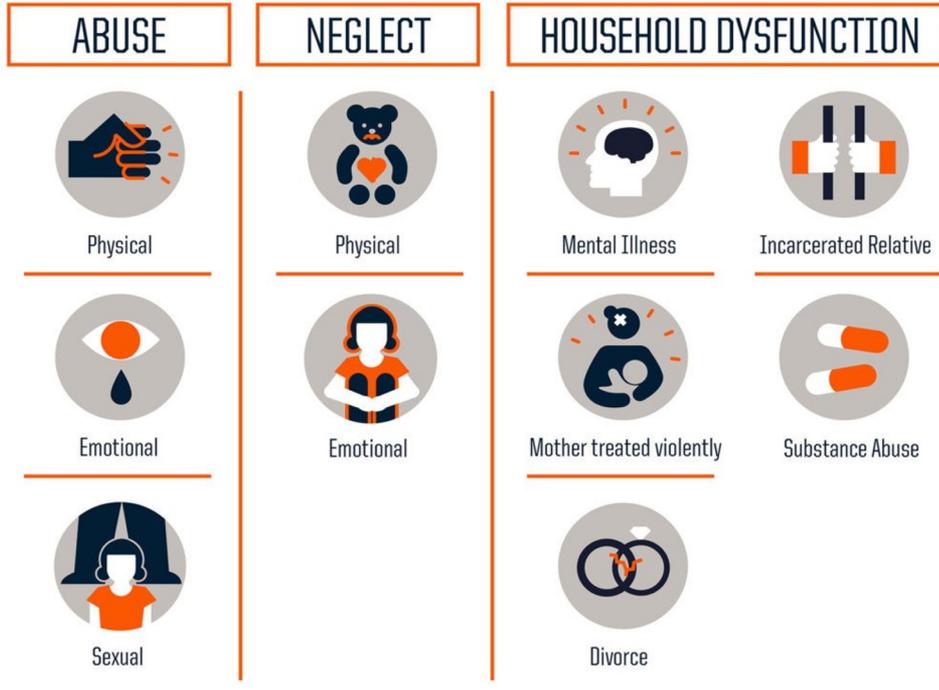
One of the largest studies of childhood abuse and neglect, household challenges, and later life health and well-being



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# ACEs were defined in 3 categories:







- Abuse
  - **Emotional abuse:** A parent, stepparent, or adult living in your home swore at you, insulted you, put you down, or acted in a way that made you afraid that you might be physically hurt.
  - **Physical abuse:** A parent, stepparent, or adult living in your home pushed, grabbed, slapped, threw something at you, or hit you so hard that you had marks or were injured.
  - **Sexual abuse:** An adult, relative, family friend, or stranger who was at least 5 years older than you ever touched or fondled your body in a sexual way, made you touch his/her body in a sexual way, attempted to have any type of sexual intercourse with you.
- Household Challenges
  - **Mother treated violently:** Your mother or stepmother was pushed, grabbed, slapped, had something thrown at her, kicked, bitten, hit with a fist, hit with something hard, repeatedly hit for over at least a few minutes, or ever threatened or hurt by a knife or gun by your father (or stepfather) or mother's boyfriend.
  - **Substance abuse in the household:** A household member was a problem drinker or alcoholic or a household member used street drugs.
  - **Mental illness in the household:** A household member was depressed or mentally ill or a household member attempted suicide.
  - **Parental separation or divorce:** Your parents were ever separated or divorced.
  - **Incarcerated household member:** A household member went to prison.
- Neglect<sup>1</sup>
  - **Emotional neglect:** Someone in your family never or rarely helped you feel important or special, you never or rarely felt loved, people in your family never or rarely looked out for each other and felt close to each other, or your family was never or rarely a source of strength and support.<sup>2</sup>
  - **Physical neglect:** There was never or rarely someone to take care of you, protect you, or take you to the doctor if you needed it<sup>2</sup>, you didn't have enough to eat, your parents were too drunk or too high to take care of

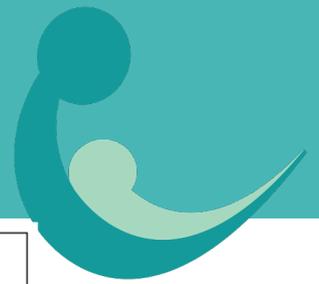
Center for Disease Control, Violence Prevention. (2021, April 6). About the CDC-Kaiser ACE Study: ACEs Definitions. <https://www.cdc.gov/violenceprevention/aces/about.html>



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# ACE Participant Demographics and U.S. Population Demographics



Demographic Information	Percent (N = 17,337) <small>(entire ACE Study sample)</small>	U.S. Bureau of the Census- 1996
<b>Sex</b>		
Female	54.0%	51.1%
Male	46.0%	48.9%
<b>Race/Ethnicity</b>		
White	74.8%	73.6%
Black	4.5%	12.5%
Asian/Pacific Islander	7.2%	3.7%
Hispanic	11.2%	10.8%
Other	2.3%	-
<b>Age (years)</b>		
19-29	5.3%	14.1% *(20-29)
30-39	9.8%	-
40-49	18.6%	-
50-59	19.9%	-
60 and over	46.4%	20% *(55 and over)
<b>Education</b>		
Not High School Graduate	7.2%	13.5%
High School Graduate	17.6%	38.5%
Some College	35.9%	32.1%
College Graduate or Higher	39.3%	13.7%



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# Finding # 1: ACEs were common (n=8,056 for analysis)

**> 50%**

More than half of respondents (52%) reported at least one ACE

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## One-Fourth

Reported  $\geq 2$  ACEs

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## Group Differences

Significantly fewer exposures were found among older persons, white or Asian persons, and college graduates

# Finding #2: ACEs were linked to each of the adult health risk behaviors and diseases that were studied

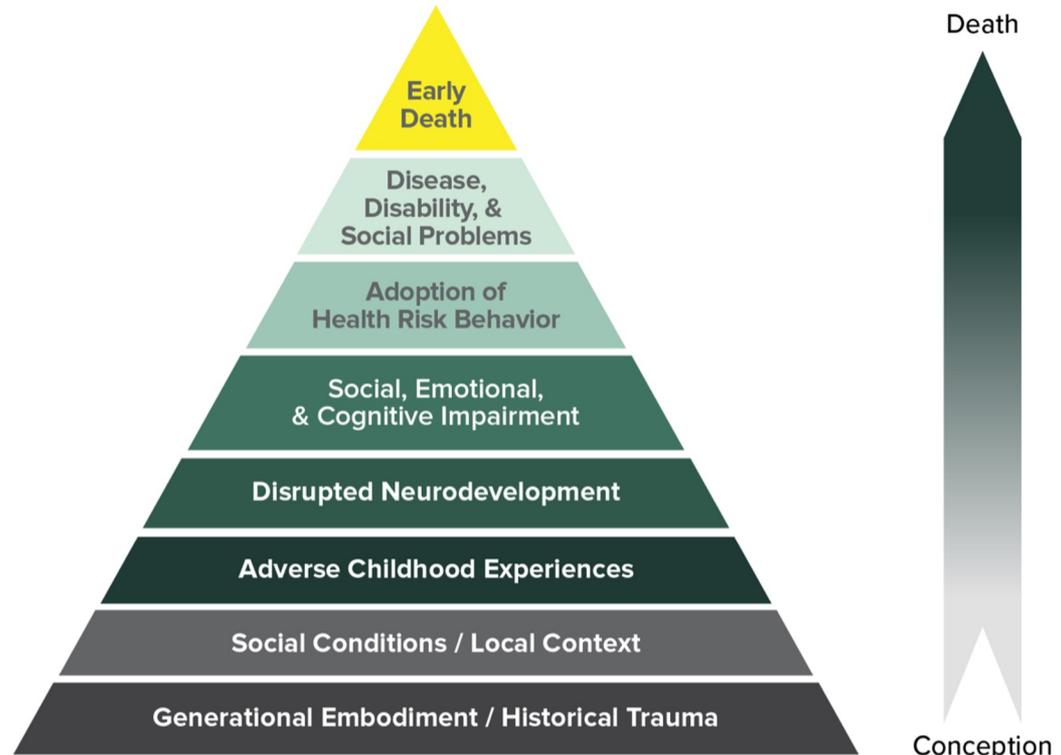
Those who had experienced four or more ACEs, compared to those who had experienced none, had:

- a 4- to 12-fold increased risks for alcoholism, drug abuse, depression, and suicide attempt;
- a 2- to 4-fold increase in smoking, poor self-rated health,  $\geq 50$  sexual intercourse partners, and sexually transmitted disease;
- a 1.4- to 1.6-fold increase in physical inactivity and severe obesity

# Finding #3: ACEs can have lasting impacts

- Associated with presence of adult diseases: ischemic heart disease, cancer, chronic lung disease, skeletal fractures, liver disease
- Among those with no ACEs, 56% had none of the 10 risk factors whereas only 14% of persons with  $\geq 4$  categories of childhood exposure had no risk factors
- Only 1% of those with no childhood exposures had four or more risk factors, whereas 7% of persons with  $\geq 4$  ACEs had four or more risk factors

# The ACE Pyramid



Mechanism by which Adverse Childhood Experiences Influence Health and Well-being Throughout the Lifespan

# Newer Insights?



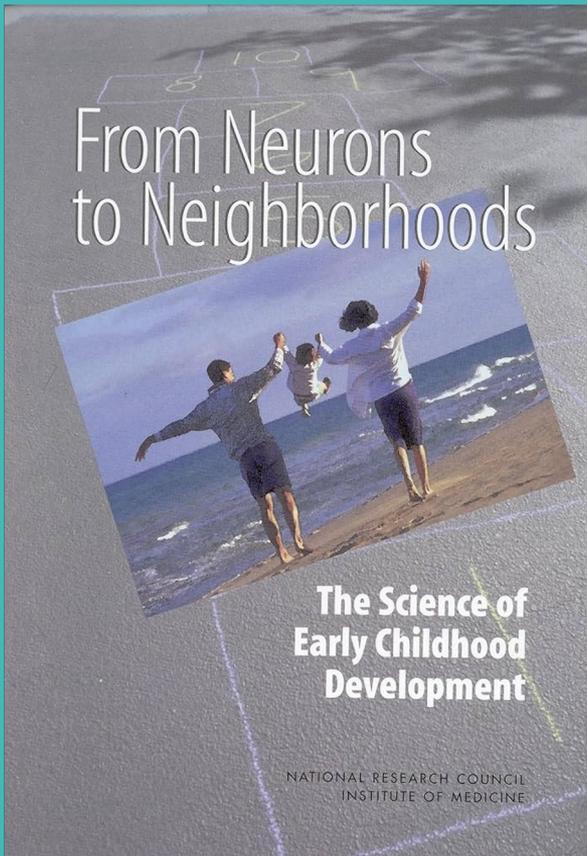
In a 2019 systematic review and meta-analysis of the CDC-Kaiser ACE scale researchers found:

- Females reported more ACEs than males
- Non-white race/ethnicity, low education, and low socioeconomic status significantly associated with reporting an ACE
- the more ACEs one has, the higher odds of negative outcomes
- more studies on psychosocial/behavioral health outcomes than medical outcomes

**Take away: ACEs are relevant to many fields**

*Petrucelli, K., Davis, J., & Berman, T. (2019). Adverse childhood experiences and associated health outcomes: A systematic review and meta-analysis. Child Abuse & Neglect, 97, 104127*





 Center on the Developing Child  
HARVARD UNIVERSITY

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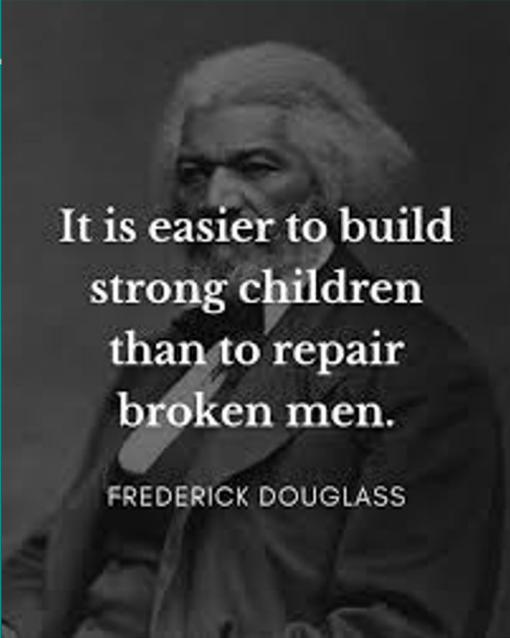
## Mission and Vision



**The mission of the Center on the Developing Child is to leverage the power of science in pursuit of better, more equitable outcomes for young children facing adversity.** We do this through a unique



# The Power of Prevention



It is easier to build  
strong children  
than to repair  
broken men.

FREDERICK DOUGLASS

## Social Determinants of Health



Social Determinants of Health  
Copyright-free

Healthy People 2030

# Changing Trajectories

## Parent/Caregiver-Child Engagement

Serve and return interactions—responsive, interactive, back-and-forth exchanges between a child and a caring adult



# Changing Trajectories

## Mindfulness

Linked to increased resilience. In youth, proven to improve mental health symptoms, behavior and quality of life, and coping.

Also, improved school functioning



<https://youtu.be/Adg-S2hY07w?si=JBjVewOKMdBZzmEZ>

► Mindfulness (N Y). 2023 Jan 31;14(3):637–647. doi: [10.1007/s12671-022-02063-7](https://doi.org/10.1007/s12671-022-02063-7)

### **Mindful Movement Intervention Applied to at Risk Urban School Children for Improving Motor, Cognitive, and Emotional-Behavioral Regulation**

[Laura C Rice](#)<sup>1,2</sup>, [Alyssa C Deronda](#)<sup>1</sup>, [Sylee Kiran](#)<sup>1</sup>, [Kate Seidl](#)<sup>3</sup>, [Kerianne Brown](#)<sup>1</sup>, [Keri S Rosch](#)<sup>1,5</sup>, [Martha James](#)<sup>4</sup>, [Stewart H Mostofsky](#)<sup>1,2,5,8\*</sup>

# Stress

## Positive Stress

A normal, brief reaction essential for healthy development. Supportive relationships help buffer against a child's stress response

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## Tolerable Stress

More severe, longer-lasting reactions that activate the body's alert systems. If buffered by time or relationships, body systems can recover

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## Toxic Stress

Occurs when a child experiences intense, frequent, prolonged adversity without supports to buffer



*Center on the Developing Child. (2025) Key Concepts: Toxic Stress. Harvard University.  
<https://developingchild.harvard.edu/key-concept/toxic-stress/>*

# Nature vs. Nurture



# Youth Well-Being and the ABCD Study

- Data analyzed from the baseline wave (2016-2018) of the Adolescent Brain Cognitive Development (ABCD) Study
- Diverse sample of adolescents across the US (n = 11,878)
- Exploring the relationship between multidimensional profiles of objective well-being (i.e., health, connectedness, safety, support, learning, executive functioning) and youth-reported subjective well-being

*Wilson, D. M., Gilreath, T. D., Sharps, P., Gonzalez, R., Flint, J. R., & Lindsey, M. A. (in review). Profiles of Youth Well-Being in the Adolescent Brain and Cognitive Development (ABCD) Study: Associations of Objective and Subjective Correlates in Early Adolescents*





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# 1

## “High connectedness and overall executive functioning”

(HCOF; N=8245, 69.5%)

- few sleep and school challenges, stressors or mental health symptoms
- participation in physical activities/sports + non-physical activities or hobbies, and connection to parents

# 2

## “Stress and trauma/low executive functioning”

(STLE; N=1933, 16.2%)

- less sleep
- academic and behavioral school challenges
- reported traumatic life events + parent reporting that their life is stressful
  - low EF

# 3

## “Poor mental health/low agency”

(MHLA; N=1278, 10.8%)

- lowest agency
- highest likelihood of depressed, anxious, or both

## “Trauma/sleep disturbance with adaptive coping”

(TAC; N=412, 3.5%)

- second highest traumatic life events
  - sleep disturbance
- high physical activities, agency, and peer connections

# 4

Resilience—  
the capacity to successfully adapt to challenges that threaten  
function, survival, or development—  
is dynamic and multi-systemic

## The impact of storytelling on building resilience in children: A systematic review

[Chandra Ramamurthy](#), [Peixin Zuo](#), [Gregory Armstrong](#), [Karl Andriessen](#) 

First published: 12 December 2023 | <https://doi.org/10.1111/jpm.13008> | [VIEW METRICS](#)



*education  
sciences*

*Review*

## Educational Programs to Build Resilience in Children, Adolescent or Youth with Disease or Disability: A Systematic Review

Martín García-Parra <sup>1,\*</sup> , Francisca Negre <sup>2</sup>  and Sebastià Verger <sup>2</sup> 

# ACE Screening and You

Helps clinical teams move toward prevention

Identify individuals at high risk who may benefit from additional assessment and interventions

Scores do not predict individual outcomes, but screening provides the opportunity to intervene earlier

Incorporating enjoyable daily self-care like hobbies, relaxation, and personal reflection establishes strong habits that support long-term wellbeing.

# Pediatric ACEs and Related Life Events Screener (PEARLS)



Three versions based on age and respondent. Total of 17-19 questions (10 ACE categories and seven to nine SDOH categories):

- PEARLS child tool, ages 0–11 years, to be completed by a caregiver
- PEARLS adolescent tool, ages 12–19 years, to be completed by caregiver
- PEARLS for adolescent self-report tool, ages 12–19 years, to be completed by the adolescent
- For Medicaid-enrolled children under the age of 21, reimbursement is available yearly

# Adverse Childhood Experience Questionnaire for Adults

Self report tool for people 18 years and older

Total of 10 questions related to categories of ACEs

- For Medicaid-enrolled adults 21 to 65 years, reimbursement is once per lifetime.

**Adverse Childhood Experience Questionnaire for Adults**  
California Surgeon General's Clinical Advisory Committee

aces aware  
SCREEN. TREAT. HEAL.

Our relationships and experiences—even those in childhood—can affect our health and well-being. Difficult childhood experiences are very common. Please tell us whether you have had any of the experiences listed below, as they may be affecting your health today or may affect your health in the future. This information will help you and your provider better understand how to work together to support your health and well-being.

**Instructions:** Below is a list of 10 categories of Adverse Childhood Experiences (ACEs). From the list below, please place a checkmark next to each ACE category that you experienced prior to your 18<sup>th</sup> birthday. Then, please add up the number of categories of ACEs you experienced and put the *total number* at the bottom.

1. Did you feel that you didn't have enough to eat, had to wear dirty clothes, or had no one to protect or take care of you?	<input type="checkbox"/>
2. Did you lose a parent through divorce, abandonment, death, or other reason?	<input type="checkbox"/>
3. Did you live with anyone who was depressed, mentally ill, or attempted suicide?	<input type="checkbox"/>
4. Did you live with anyone who had a problem with drinking or using drugs, including prescription drugs?	<input type="checkbox"/>
5. Did your parents or adults in your home ever hit, punch, beat, or threaten to harm each other?	<input type="checkbox"/>
6. Did you live with anyone who went to jail or prison?	<input type="checkbox"/>
7. Did a parent or adult in your home ever swear at you, insult you, or put you down?	<input type="checkbox"/>
8. Did a parent or adult in your home ever hit, beat, kick, or physically hurt you in any way?	<input type="checkbox"/>
9. Did you feel that no one in your family loved you or thought you were special?	<input type="checkbox"/>
10. Did you experience unwanted sexual contact (such as fondling or oral/anal/vaginal intercourse/penetration)?	<input type="checkbox"/>
<b>Your ACE score is the total number of checked responses</b>	

Do you believe that these experiences have affected your health?  Not Much  Some  A Lot

Experiences in childhood are just one part of a person's life story.  
There are many ways to heal throughout one's life.

Please let us know if you have questions about privacy or confidentiality.

5/5/20



## Benefits of Screening for ACEs

Screening can mitigate toxic stress and improve health outcomes

aces aware.org

## Why screen

Routine and universal Adverse Childhood Experiences (ACEs) screening helps clinical teams provide more effective and equitable health care. Screening results can be used to provide targeted clinical interventions, as well as offer greater compassion, patience, and the opportunity for relational healing.

ACE screening has been successfully integrated into a wide range of clinical settings, including pediatric primary care, adult primary care, family medicine, and women's health and prenatal care.



► **Services to Address ACEs and More Information**

If you or a loved one has experienced ACEs, services may be available in your community. Please visit: [ocfs.ny.gov/ACEs](https://ocfs.ny.gov/ACEs).



Scan this QR code, and it will take you directly to the website to learn about additional information regarding ACEs (adverse childhood experiences) and how to find services to help.



Capital View Office Park  
52 Washington Street, Rensselaer, NY 12144  
[ocfs.ny.gov](https://ocfs.ny.gov)

**Statewide Central Register Toll Free Telephone Number**  
**1-800-342-3720**

**If you are deaf or hard of hearing, call TDD/TTY at**  
**1-800-638-5163** or

**Video Relay System provider call**  
**1-800-342-3720**

**NYS Project Hope**  
Emotional Support Helpline to talk to a crisis counselor:  
**1-844-863-9314**

"... promoting the safety, permanency, and well-being of our children,  
families, and communities. ..."

Pursuant to the Americans with Disabilities Act, the New York State Office of Children and Family Services will make this information available in an appropriate format upon request.

Pub. 5222 (03/2022)

# ACEs

## Understanding adverse childhood experiences (ACEs)



Visit these important websites to find out helpful information:

**OCFS website** - <https://ocfs.ny.gov>;

**OMH website** - <https://omh.ny.gov>; **DOH website** - <https://www.health.ny.gov>;

**OTDA website** - <https://otda.ny.gov>; **OASAS website** - <https://oasas.ny.gov>

## The Rose that grew From Concrete

Autobiographical

Did u hear about THE rose that grew from a crack  
in the concrete

Proving NATURE'S LAWS wrong it learned 2 walk  
WITHOUT HAVING FEET

Funny it seems BUT By Keeping its DREAMS  
it learned 2 BREATHE fresh air

LONG LIVE THE rose that grew from concrete  
when NO ONE else even cared!



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# Thank You For Joining Us!



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