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## Using The ACE Study in Pediatric Settings: Who, What, Where, When and How?

*To apply for this fellowship, please go to the Stoneleigh website and complete the individual application. Send the completed application to ISF. Contact: Martha Davis at [info@instituteforsafefamilies.org](mailto:info@instituteforsafefamilies.org) or (215) 843-2046*

The Institute for Safe Families (ISF) is a Philadelphia non-profit organization whose mission is to strengthen families to create healthy, nurturing environments that promote the positive development of children and prevent family violence before it happens. In the last five years, ISF has been in the forefront of identifying how early trauma can affect the full development of children and impede their ability to become capable, happy and productive adults. ([www.instituteforsafefamilies.org](http://www.instituteforsafefamilies.org))

A major program area that ISF will address over the next five years is how to operationalize the ACE (Adverse Childhood Experience) Study information in child-serving agencies, particularly pediatric settings. In 2012, ISF will convene and facilitate the newly forming Philadelphia ACE Task Force, which will be comprised of health care providers, academics, community-based service providers, researchers from around the region and several national experts.

The ACE Study began in 1995 and is an ongoing study designed to examine the childhood origins of many of our nation's leading health and social problems. This study is one of the largest of its kind and one of the most important public health studies ever launched. The ACE Study has demonstrated that childhood adversity appears to determine the likelihood of the ten most common causes of adult death in the United States. This study underscores the relationship of childhood abuse, neglect, domestic violence, and other related experiences on health throughout the lifespan. The findings are consistent with recent discoveries about the neurobiology of stress and the effect of stress on the developing brain.

ISF is seeking a Stoneleigh Emerging Leader Fellow with knowledge and interest in children's public health issues to: 1) participate on, and periodically report to, the Philadelphia ACE Task Force; and 2) conduct a national assessment and a subsequent written report that documents the various uses, utility and outcomes of using the ACE Study in pediatric settings. ISF is interested in translating the science and findings of the ACE study into pediatric practices in our region and beyond. To achieve this, the Stoneleigh Emerging Leader Fellow would investigate the following: **WHO** is using the ACE study in pediatric settings—pediatricians, nurses, other staff? Are they screening children, their caregivers or both? Which groups and prominent individuals are promoting the use of the ACE Study information in a practice setting? What is the position of the American Academy of Pediatrics on this issue? **WHAT** assessment tools are being used in pediatric settings to screen for ACEs? Are they validated instruments? What is the actual intervention? What kind of data is being collected? Is it part of the electronic medical record? **WHERE** is the ACE information being gathered—children's hospitals, private pediatric practices, community health centers, ambulatory pediatric clinics, family medicine settings? **WHEN** is the ACE information being assessed for—during well baby visits, emergency room visits, immunizations? **HOW** is the information from the assessment and intervention being used? Has anyone published their findings? What are the major outcomes being tracked? How should this information be used to inform public policy?

The ACE Study calls for an integrated approach to intervene early with children who are growing up being abused, neglected, witnessing domestic violence, or living with substance abusing, mentally ill, or criminal household members. All of these childhood stressors are interrelated and often co-occur. Prevention and treatment of one ACE frequently can mean that similar efforts are needed to treat multiple persons in affected families. Pediatric visits are windows of opportunities to focus on health promotion by putting greater attention on reducing toxic stress in early childhood.

Candidates should have a master's degree (e.g. in public health, social work, public policy) and possess excellent writing and research skills, as well as have an ability to work creatively and independently.