

New Jersey

ACEs Initiatives and Actions

As knowledge about the science of adverse childhood experiences (ACEs) spreads, ACEs initiatives have launched in all 50 U.S. states and the District of Columbia. Hundreds of cross-sector collaboratives are educating and engaging organizations and policymakers about ACEs science. In turn, these organizations are implementing trauma-informed and resilience-building practices and policies based on ACEs science; many legislatures are passing resolutions and/or bills.

Highlights

In 2018, the Robert Wood Johnson Foundation, through the [NJHI Upstream Action Acceleration Initiative](#) will provide two-year \$100,000 grants to support existing cross-sector coalitions to communities to adopt and implement “upstream” environmental-, policy- and systems-change strategies, and accelerate their work to improve community health. Areas of focus include ACEs; engaging new sectors such as business, library, law enforcement; using data and resources; and transportation.

The [Greater Newark Healthcare Coalition](#) established care coordination, trauma screening and treatment, professional development, and data integration as part of the national [Advancing Trauma-Informed Care Initiative](#).

Hopeworks 'N Camden, a certified [Sanctuary](#) organization that has integrated practices based on ACEs science, uses a trauma-informed approach while teaching web design and other skills to help youth ages 14-23 return to school or find meaningful work. [Since 2014, its Youth Healing Team has trained 900 people](#) about ACEs science.

The NJ Department of Children and Families committed to becoming a trauma-informed organization in 2015, [issued recommendations](#), and set up [Taming Trauma](#), and ACEs science training project provided by the [Trauma Institute of New Jersey](#).

In 2016, the Cape Regional Wellness Alliance issued a three-year [Blueprint for Action](#) to reduce ACEs and their impact in Cape May County. The Trenton Health Team created a [Trenton Trauma-Informed Care Learning Community](#) under the guidance of the National Council for Behavioral Health.

State Initiative

No state initiative was identified.

Local Initiatives

[Cape Regional Wellness Alliance](#), [Resilient Youth of Somerset County](#)

Legislation (Sources include NCSL)

No legislation was identified.

Find links and add your updates to all initiatives and legislation at www.bit.ly/ACEsInitiatives

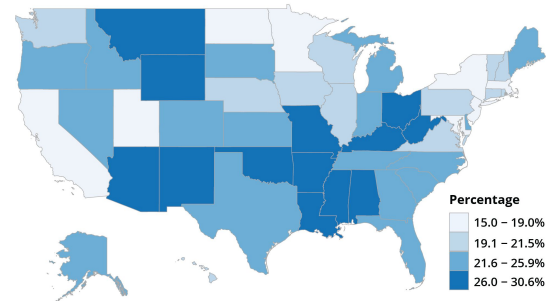


18.1%
NJ*

21.7%
USA

Percent of children with 2 or more ACEs

NJ ranks 8th in the US for lowest percentage of children with ACEs scores of 2 or more.



CAHMI (Child & Adolescent Health Measurement Initiative) surveys parents or guardians about their children ages 0-17.

Percentage of children aged 0-17 yrs. who experienced two or more of the following:

- Hard to get by on income (somewhat or very often)
- Saw or heard violence in the home
- Victim/witness of neighborhood violence
- Lived with anyone mentally ill, suicidal, or depressed
- Lived with anyone with alcohol or drug problem
- Parent/guardian divorced or separated
- Parent/guardian died
- Parent/guardian served time in jail
- Often treated or judged unfairly due to race/ethnicity

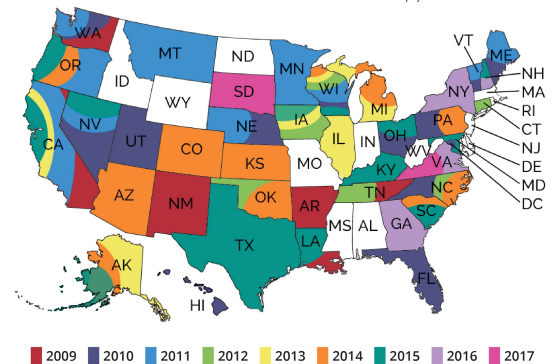
Citation: Bethell, CD, Citation: Bethell, CD, Davis, MB, Gombojav, N, Stumbo, S, Powers, K. Issue Brief: A national and across state profile on adverse childhood experiences among children and possibilities to heal and thrive. Johns Hopkins Bloomberg School of Public Health, October 2017.

www.cahmi.org/projects/Adverse-childhood-experiences-aces

* State Range: 15.0% – 30.6%

States Collecting ACEs Data 2009 – 2017

Source: CDC National Center for Injury Prevention & Control



The ACEs module of Behavioral Risk Factor Surveillance Survey (BRFSS) data comes from interviews with adults about their experiences to age 18. BRFSS is sponsored by the CDC and other federal agencies.