

May 7, 2024

Chair Pavliga, Vice Chair White, Ranking Member Brewer and members of the House Behavioral Health Committee:

Thank you for the opportunity for the Health Policy Institute of Ohio (HPIO) to submit interested party testimony for HB 352 to establish the Adverse Childhood Experiences (ACEs) study commission.

HPIO is a non-partisan and independent health policy research organization. Our mission is to advance evidence-informed policies that improve health, achieve equity and lead to sustainable healthcare spending in Ohio. HPIO's work is grounded in data and evidence, and we view health very broadly, paying considerable attention to factors outside of the healthcare system that influence our health.

HPIO has conducted a considerable amount of analysis on ACEs over the past five years. We commend the sponsors of HB 352, because childhood adversity is a complex and common issue that can be addressed through action in the private and public sectors, including through legislation.

ACEs exposure is linked to poorer health and well-being throughout a person's life, potentially leading to disease, disability and even early death. Emotional abuse, sexual abuse and living in a household with someone who has a substance use disorder, mental health condition, or who is incarcerated are ACES that can have the most significant health impacts in our state.

Our analysis also determined the extent to which several harmful health behaviors and negative health outcomes can be attributed to ACEs exposure. For example, we found that if exposure to ACEs was eliminated, an estimated 36% of depression diagnoses, 33% of smoking and 24% of asthma could be prevented among Ohioans.

ACEs exposure also results in high direct and indirect costs to individuals, families and society at large. For example, more than \$10 billion in annual statewide public and private healthcare spending on depression, asthma, COPD, smoking and excessive drinking can be attributed to ACEs exposure. We know that ACEs also lead to lost productivity and considerable costs to other systems, including the children services and criminal justice systems.

ACEs also have a negative influence on educational outcomes. Research shows that ACEs disrupt brain development, potentially making it more difficult

for children to access the parts of their brains necessary for self-regulation, impulse control and more abstract and critical thinking. Children also need to be physically and emotionally healthy to perform well academically.

HPIO's analysis identified 12 evidence-informed policies and interventions that are cost effective and likely to affect those ACEs that have the most significant health impacts (referenced earlier).

The 12 strategies are listed in the graphic below our testimony. We also analyzed the extent to which these strategies are already being implemented throughout the state and made recommendations for how implementation could be enhanced or expanded.

Ohio's approach has several strengths. For example, Ohio offers Triple P, a parent, caregiver and family skills training program to all Ohio families. There is also a drug court operating in every county. Additionally, the state has a strong foundation on which to build for:

- Early childhood education and home visiting
- School-based violence prevention education
- Social and emotional learning standards
- The trauma-informed care regional collaboratives and available training

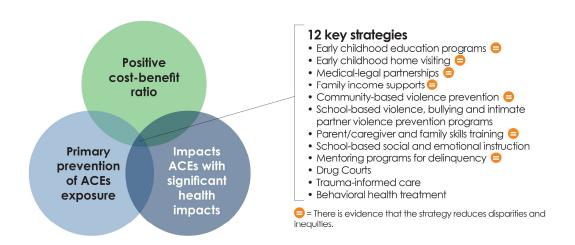
In terms of challenges, funding challenges were common for nearly all 12 strategies. For example, we were unable to identify any dedicated statewide funding for mentoring programs. Workforce shortages were also a common challenge, especially among early childhood care and education professionals, prevention educators and mental health professionals.

HPIO would be happy to partner with members of the study commission to explore what legislative actions could strengthen the implementation of these and other strategies.

In the previous hearing, there was a question about why Ohio performs worse on ACEs prevalence compared to other states. HPIO's 2024 Health Value Dashboard offers some valuable insights. Ohio ranks near the bottom when compared to other states on many of the factors that influence our health. Some of these factors are also associated with an increased risk of ACEs. For example, Ohio ranks near the bottom of states on adult depression, adult and

child poverty, food insecurity, unemployment and incarceration, just to name a few.

Thank you, Chair Pavliga and members of the committee, for accepting our testimony on HB 352. I would welcome any questions you may have.



<sup>\*</sup> Medical-legal partnerships integrate legal services into healthcare settings, including hospitals and behavioral health clinics.

<sup>\*\*</sup> Parent, caregiver and family skills training programs strengthen family relationships and support parents and caregivers by increasing understanding of child development and positive behavioral management strategies

<sup>\*\*\*</sup>Drug courts are a type of specialized docket that serve as an alternative to standard courts and are used to mitigate the prolonged effects of drug and alcohol use on the lives of adults and children.