

When Parents Have Experienced Their Own Adverse Childhood Experiences, What are the Effect on Their Children?

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Our journal and others have published a myriad of studies on the deleterious effects of adverse childhood experiences (ACEs) on the developmental and physical well-being of infants and children. But what about the generational effect on offspring of parents who experienced ACEs growing up? Two studies we are early releasing this week shed some light on answering this question. First Racine et al. ([10.1542/peds.2017-2495](#)) present the results of their examination of maternal ACEs on the

development of their offspring in terms of biologic risk of the infant due to mother's health risk in pregnancy as well as psychosocial risk due to maternal stress during and after pregnancy. The authors followed almost 2000 women and their infants in a prospective longitudinal cohort. The pregnant mothers completed self-report questionnaires defining their own psychosocial risks and how they viewed their infants at 4 months of age, and then at 12 months of age completed a developmental questionnaire. The results of their study suggested that the prime contributor to developmental issues in infants was the psychosocial risks brought to pregnancy as a result of maternal ACEs.

To make the point even more about the role of maternal and paternal ACEs contributing to infant outcomes, Folger et al. ([10.1542/peds.2017-2826](#)) opted to study parental ACEs and share with us their results in a retrospective cohort study being early released this week in our journal. The authors looked at the relationship between self-reported parental ACEs experienced as parents were growing up and whether developmental delay was identified when a child of these parents with or without ACEs reached 24 months of life. The results of their analysis are quite concerning in that they show that there is an 18% increase in the suspected risk of developmental delay for each maternal or paternal ACE identified in reviewing data on over 300 mother-child dyads and 122 father-child dyads. Developmental areas that were negatively

impacted, if there were parental ACEs, included problem solving, communication, and personal and social motor skills.

So what does this mean for those of us who see the children of parents who might have experienced ACEs?

Do we normally ask about parental ACEs? Should we be doing so? To answer these questions, we invited Dr. James Hudziak, professor of child psychiatry and pediatrics, who is a staunch advocate for pediatricians helping to care for parental wellness as well as the wellness of their children, to provide some commentary on this study ([10.1542/peds.2018-0232](#)). His wise words encourage us to ask about parental ACEs and to be prepared to help parents regain their parenting strengths during pregnancy or after a child is born, which in turn can prevent the intergenerational effect on development as seen in both the Racine and Folger studies. Read both studies and the commentary, and we suspect you will do more to better understand the role of parental ACEs in the growth and development of the patients in your practice.

- [Systematic Review of Pediatric Health Outcomes Associated with Adverse Childhood Experiences \(aces\)*](#)
- [Adverse Childhood Experiences Among Hispanic Children in Immigrant Families Versus US-Native Families](#)
- [Adverse Childhood Experiences and Adult Well-Being in a Low-income, Urban Cohort](#)
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