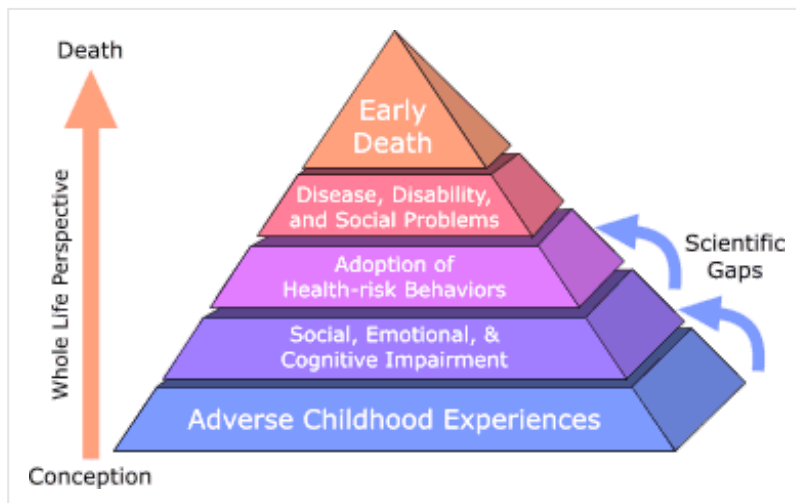


## The ACE Pyramid

The ACE Pyramid represents the conceptual framework for the study. During the time period of the 1980s and early 1990s information about risk factors for disease had been widely researched and merged into public education and prevention programs. However, it was also clear that risk factors, such as smoking, alcohol abuse, and sexual behaviors for many common diseases were not randomly distributed in the population. In fact, it was known that risk factors for many chronic diseases tended to cluster, that is, persons who had one risk factor tended to have one or more other risk factors too.



Because of this knowledge, the ACE Study was designed to assess what we considered to be “scientific gaps” about the origins of risk factors. These gaps are depicted as the two arrows linking Adverse Childhood Experiences to risk factors that lead to the health and social consequences higher up the pyramid. Specifically, the study was designed to provide data that would help answer the question: “If risk factors for disease, disability, and early mortality are not randomly distributed, what influences precede the adoption or development of them?” By providing information to answer this question, we hoped to provide scientific information that would be useful for developing new and more effective prevention programs.

The ACE Study takes a whole life perspective, as indicated on the orange arrow leading from conception to death. By working within this framework, the ACE Study began to progressively uncover how adverse childhood experiences (ACE) are strongly related to development and prevalence of risk factors for disease and health and social well-being throughout the lifespan.



[http://www.cdc.gov/24-7/?s\\_cid=24-7\\_012](http://www.cdc.gov/24-7/?s_cid=24-7_012)



<http://vetoviolence.cdc.gov/evidence/##%26panel1-1>