We are all very familiar with the harm that adverse childhood experiences (ACEs) can do to infants and children, affecting their life course trajectory unfavorably unless preventive strategies to overcome these ACEs are implemented. What we are still learning about is whether differences in the severity of ACEs exist in some racial and ethnic populations versus others. For that reason, Caballero et al. (10.1542/peds.2017-0297) opted to look at the prevalence of ACEs in the Latino population grouped by those whose parents were immigrants to the United States and those who were native-born. The authors looked at national survey data and self-reports from Latino parents of whether or not their 12,162 children were exposed to any ACEs and if so, how many—classifying one or less as "low" and two or greater as "high."

While most immigrant families were found to live in poverty compared to US-native Latino families, 30% of the US-native versus only 16% of the immigrant families reported high levels of ACEs (p<0.001). Moreover the odds of no ACE exposure were better if a child were from an immigrant family than a US-native family. Surprised? Wondering why the data shows less ACEs in the more poverty-stricken Latino immigrants? To gain insight into this study, we asked Drs. Glenn Flores and Juan Salazar from Connecticut Children's Hospital to share their take on these findings in an important and fascinating commentary (10.1542/peds.2017-2842) that accompanies this study. We hope you'll read both and then reflect on whether you find similar results in the Latino patients in your own practice. Feel free to share your own thoughts on this interesting study by responding to this blog, posting a comment with the study on our website or on our Facebook or Twitter sites.