

# ADVERSE CHILDHOOD EXPERIENCES POLICY AND PROGRAM REVIEW

## Project Background

Adverse Childhood Experiences (ACEs) are potentially traumatic events such as abuse, neglect, and household dysfunction that occur during childhood (before age 18) and have a negative and lasting impact on future health and functioning.<sup>1</sup> Approximately 42% of children in Arizona have experienced one or more ACEs.<sup>2</sup>

The Arizona Department of Health Services collaborated with the Morrison Institute for Public Policy to (1) identify ACEs that are challenges in Arizona (2) review policies and programs in the state related to those ACEs and (3) identify policies and programs in other states that aim to reduce or mitigate ACEs. **For this review, we focused on the top six ACEs that are challenging in Arizona compared to other states.**

Highlighted policies and programs were selected based on a variety of factors including recommended practices based on literature, experts, and effectiveness of programs according to evaluations or randomized control trials. The policy review, while not comprehensive, seeks to highlight some of the effective, unique, and innovative policies and programs that states are employing to reduce or mitigate the impact of ACEs.

Top Six Most Challenging Adverse Childhood Experiences in Arizona Compared to National Average	Arizona	Nation
Child's parents have been divorced or separated	25%	23%
Child's family found it hard to cover the basics, like food or housing, on family's income: Combined responses "somewhat often hard to get by" and "Very often hard to get by"	13%	12%
Child has lived with someone who was mentally ill, suicidal, or severely depressed	10%	8%
Child had a parent or guardian who served time in jail	8%	7%
Child has witnessed domestic violence	6%	5%
Child has been a victim of or witnessed neighborhood violence	6%	4%

Source: Child and Adolescent Health Measurement Initiative. "2020-2021 National Survey of Children's Health (NSCH) data query." Data Resource Center for Child and Adolescent Health supported by the U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA), Maternal and Child Health Bureau (MCHB). [www.childhealthdata.org](http://www.childhealthdata.org).

# Poverty

## Arizona's Rank

13<sup>th</sup>\*

\* Highest compared to other states

### Policies and Programs

#### Safety Net

*Temporary Assistance for Needy Families (TANF):* **Arizona** has some of the lowest benefit amounts and strictest requirements in the nation for families to qualify for TANF. Additionally, **Arizona** spends 11% of TANF funds on providing basic assistance to families, compared to the national average of 23%.<sup>3</sup>

*Expanded Earned Income Tax Credit (EITC) Programs:* 31 states and D.C. offer a state EITC in addition to the federal EITC, with most offering a fully refundable EITC. **Arizona is not one of them.**<sup>4</sup>



#### Small-scale Cash Transfer Programs

*THRIVE Cash Transfer in Washington, D.C.:* Participants received \$5,500 over 5 months. Evaluation results showed the cash transfers provided a significant boost to recipient's financial stability. Participants reported being able to pay rent and pay for basic needs like food, medical expenses, and utilities, and reported improved mental well-being and reduced stress levels.<sup>5</sup>

*Baby's First Years: Unconditional Cash Transfer:* In a randomized control trial in four urban U.S. cities, mothers received an unconditional cash gift of \$333 per month. As a result of this cash transfer, researchers found that mothers increased spending on infants by purchasing items like books, diapers, and children's clothing, and spent more time in early learning activities with their infants.<sup>6</sup>



#### Employment

*Paid Family and Medical Leave:* According to the National Conference of State Legislatures, 11 states offer paid family and medical leave.<sup>7</sup> **Arizona** voters passed Proposition 206 in 2016 to guarantee employees a minimum of one hour earned sick time for every 30 hours worked.<sup>8</sup> In 2023, Governor Hobbs changed family leave for all eligible state employees allowing for 12 weeks paid leave following the birth of a child or placement of adoptive or foster child and increased accrual of sick leave from 40 hours to 480 hours maximum per year.<sup>9</sup>



#### Childcare

*Cost Modeling for Childcare Reimbursement Rates:* New Mexico and D.C. use cost modeling to set daycare reimbursement rates for state childcare subsidies. Cost modeling allows for states to account for all factors that affect childcare businesses such as rent and utilities, compensation and benefits, staffing requirements and ratios, and local costs of living.<sup>10</sup>



#### Housing

*Outreach to Landlords:* To help encourage landlords to participate in the Housing Choice Voucher program, local governments can provide incentives. For example, the Housing Authority of **Maricopa County** and **Phoenix, Mesa, Chandler** housing authorities offer \$500-\$2,000 bonuses for each unit rented to a tenant who holds a voucher.<sup>11</sup>



#### COVID-19 Programs

*Childcare Infrastructure:* \$1.3 billion in funding to **Arizona** benefitted almost 3,000 childcare providers. When stabilization dollars end, more than half of recipients reported they would have to raise tuition.<sup>12</sup>

*Unemployment Benefits:* Expanded unemployment benefits helped prevent 1.4 million children from falling below the poverty line during the COVID-19 pandemic.<sup>13</sup>

*Supplemental Nutrition Assistance Program (SNAP):* Expanded benefits provided recipients with an additional \$95 per month and helped decrease child poverty by 14% across the U.S.<sup>14</sup>

*Rental Assistance:* The \$25 billion distributed to increase housing stability during COVID-19 provided financial assistance and helped to prevent evictions.<sup>15</sup>

*Child Tax Credit:* Increases in the Child Tax Credit provided families with anywhere between \$2,000-\$3,000 for children up to 17. This expansion prevented 3.7 million children from falling into poverty.<sup>16</sup>



# Neighborhood Violence

Arizona's Rank

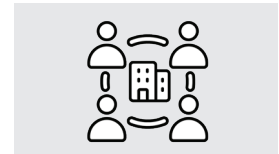
4<sup>th</sup>\*

\* Highest compared to other states

## Policies and Programs

### Community Anchor Points

*Family Resource Centers:* Many municipalities across **Arizona** have family resource centers, but community members expressed their desires for more resource hubs.<sup>17</sup> Along with the Glendale Strong Family Network, the Glendale Elementary School District repurposed an unused school building into a hub where community members can access services. In the first year of operation, **5,609** households were provided food boxes, **607** families attended classes or events, and **281** clients were assisted in filing tax returns. The recent co-location of the City of Glendale Crisis Assistance Program has already boosted numbers served and increased community presence.<sup>18</sup>



### Prevention Programs

*Good Behavior Game:* This classroom based program helps children learn about social expectations and self-regulation of undesirable behavior in a group setting. Demonstrations in Baltimore City, Maryland and Eugene, Oregon showed that participants in the GBG treatment group had lower rates of Antisocial Personality Disorder, compared with control participants at the 14-year follow up. A cost-benefit analysis showed \$31.19 in benefit for every dollar spent on the program.<sup>19</sup>



# Mental Health

Arizona's Rank

17<sup>th</sup>\*

\* Highest compared to other states

## Policies and Programs

### Increase Access

*Integrating Mental Health and Physical Health:* The Willow Birth Centers in **Phoenix** and **Mesa** have integrated mental health services into its midwife practice and 91% of patients at the centers reported they preferred having mental health integrated into the perinatal experience.<sup>20</sup>

*Increase Mental Health Workforce:* In 2022, **Arizona** established a loan repayment program to help behavioral health providers repay their student loans. This aligns with recommendations made in a Deloitte report to help increase the workforce and improve mental health access.<sup>21</sup> Similarly, Minnesota offers loan repayment to mental health workers who agree to a three-year state contract.<sup>22</sup> Washington appropriated \$1.5 million in 2021 to increase its mental health workforce by creating paid apprenticeship programs to increase services in rural communities.<sup>23</sup>



### Postpartum Screening

*Home Visiting with Cognitive Behavioral Therapy:* Moving Beyond Depression can help mothers with postpartum depression engage more fully with home visiting services to realize the positive health outcomes and parenting practices that home visiting programs provide.<sup>24</sup>

*Depression in Dads:* The American Academy of Pediatrics published a call to action to screen new fathers for postpartum depression. Maternal and paternal depression are highly correlated and compound the impact on children.<sup>25</sup>



# Divorce

## Arizona's Rank

14<sup>th\*</sup>

\* Highest compared to other states

### Policies and Programs

#### Improved Relationships

*New Beginnings Program:* This program seeks to improve the parent-child relationship while reducing interparental conflict. The program was recently adapted to be offered online. The online version of the program led to significantly reduced interparental conflict, improved parenting, and a reduction in children's mental health problems.<sup>26</sup> Although not officially adopted by any municipalities, some **Arizona** and Indiana judges are court-ordering parents to participate in the program.<sup>27</sup>



# Domestic Violence

## Arizona's Rank

15<sup>th\*</sup>

\* Highest compared to other states

### Policies and Programs

#### Housing

*Safe and Affordable Housing:* Emergency domestic violence (DV) shelters are typically the first step in accessing resources for more long-term solutions. Survivors are allowed to stay for 30-60 days. 1,973 children in **Arizona** stayed in a DV emergency shelter in fiscal year 2022.<sup>28</sup>

Transitional housing allows survivors to stay for longer periods of time (1-2 years). In fiscal year 2022, 315 children lived in transitional housing in **Arizona**.<sup>29</sup>

Permanent housing is difficult to secure. Landlords may turn away survivors out of concern for risk to other tenants. In some cases, women may have moved multiple times to escape an abuser and accumulate poor rental histories.<sup>30</sup>

*Sojourner Center:* Sojourner Center in **Phoenix** is unique in accepting DV survivors and their pets. Only about 10% of DV shelters in the U.S. accept pets. The Sojourner Center also has an onsite preschool that uses trauma-informed design principles.<sup>31</sup>



#### Economic Security

*Temporary Assistance for Domestic Violence Survivors (TA-DVS):* Oregon established the TA-DVS program for survivors that uses TANF money to provide short-term cash assistance to survivors. The program allows survivors to receive up to \$1,200 in a 90-day period to help them with emergency needs. The typical TANF requirements are waived. Oregon also co-located DV advocates within the Department of Health Services.<sup>32</sup>



#### Services for Abusers

*Achieving Change Through Value-Based Behavior:* This program is delivered in group format and focuses on building emotional and behavioral skills for adults who engaged in aggressive behavior with their partners. One study with 725 men in Ramsey County Minnesota found that abusers who completed ACTV were significantly less likely to have subsequent DV-related convictions when compared to abusers who received the Duluth intervention.<sup>33</sup>



#### Prevention Programs

*Teen Dating Violence:* Dating Matters, developed by the Centers for Disease Control and Prevention, is a teen dating prevention model focused on teaching 11-14 year old teens healthy relationship skills. Students who participated reported 8.4% lower teen dating violence perpetration, 9.8% lower victimization, and 5.5% lower use of negative conflict resolution strategies.<sup>34</sup>



Another program called The Fourth R: Strategies for Healthy Teen Relationships, teaches personal safety and injury prevention. Boys participating in the intervention were three times less likely to report using violence with a partner when compared to boys in the control condition.<sup>35</sup>

# Parental Incarceration

## Policies and Programs

### Arrest

*Child-sensitive Arrest Policies:* New York City passed a law in 2019 to ensure child-sensitive arrest policies. The law details guidance and training to make an arrest less traumatic like determining whether a child is present, handcuffing and questioning parents not in the presence of children.<sup>36</sup>

*Explaining Arrest to Children:* Communities in Connecticut developed materials and a field guide to provide police officers with trauma-informed approaches for speaking with children at the time their parent is arrested.<sup>37</sup>



### Sentencing

*Alternative Sentencing:* Washington passed a law allowing judges to divert parents of minor children away from incarceration to community supervision, treatment, and programming.<sup>38</sup> Oregon's Family Sentencing Alternative Pilot Program allows parents to be diverted to community supervision instead of incarceration for non-violent crimes. Similar programs exist in four other states (California, Illinois, Massachusetts, Tennessee).<sup>39</sup>



### Incarceration

*Parenting Inside Out:* Minnesota, Wisconsin, and Oregon have used this parenting skills program to introduce positive parenting skills, teach child development, and healthy family dynamics. Inmates are able to have interactive visits with children involving crafts and activities. Longitudinal evaluations demonstrate that program participants have lower recidivism rates one year post release, have lower rates of substance abuse, increased parental participation, and better adjustment when compared to peers who did not participate.<sup>40</sup>

*Residential Parenting Program:* Washington implemented this program allowing mothers with 30 months or less left on sentences to keep their babies with them. Mothers and infants are housed in a special unit. Recidivism for program participants was lower than for the general female prisoner population. Children who co-resided in a prison nursery had lower mean anxious or depressive behaviors compared to children separated from their mother at birth due to incarceration.<sup>41</sup>

*Free Calls for Inmates:* Connecticut passed a law in 2021 to make calls from correctional facilities free. The law prevents the state from collecting revenue from communication services and prevents visits from being replaced by communication technology.<sup>42</sup>



### Re-Entry

*Employment and Rehabilitation Services:* In 2017 the **Arizona** Department of Economic Security partnered with the Department of Corrections to help inmates within 90 days of release acquire skills during an 8-week program to develop resumes, participate in mock interviews, and obtain employment counseling. Of the inmates who graduate from the program, 48% obtain employment.<sup>43</sup>

*Work and Gain Education and Employment Skills Program (WAGEES):* Colorado created a reentry grant program to offer case management, vocational training and education to help people transition to the community following incarceration. Formerly incarcerated individuals hold leadership positions in WAGEES community organizations. Program evaluations show significant reductions in recidivism rates for WAGEES participants.<sup>44</sup>

*Reentry Specialists:* Camden County, New Jersey created a network of peer reentry specialists to help improve outcomes for people being released from jails or prisons. Resource fairs staffed with reentry specialists helped formerly incarcerated individuals obtain library cards, access legal support, reschedule court hearings, and submit applications to receive state benefits.<sup>45</sup>



# Using This Information

The information presented here is meant to highlight policies or programs that are being used to reduce or mitigate the impacts of ACEs in Arizona and across the country. These options are meant to inform and facilitate dialogue regarding ways to address the impacts of ACEs in Arizona. Researchers did not attempt to determine feasibility or cost of implementation for the policies and programs.

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