

**I**n 2013, the Centers for Disease Control and Prevention (CDC) launched Essentials for Childhood, a framework designed to help communities create safe, stable, and nurturing relationships and environments (SSNRs and Es).

The CDC defines child maltreatment as “all types of abuse and neglect of a child under the age of 18 by a parent, caregiver, or another person in a custodial role that results in harm, potential for harm, or threat of harm to a child.” This includes physical abuse, sexual abuse, emotional abuse, and/or neglect.<sup>1</sup> In North Carolina, during 2013-2014, over 128,000 children were referred to local department of social services agencies for suspected abuse or neglect. Of these, more than 36,000 children were recommended to receive additional services.<sup>2</sup> In 2012, 28 children in North Carolina died as a result of abuse or neglect by a parent or caregiver.<sup>3</sup> In addition, child maltreatment has a significant financial impact on our medical and social services systems, with total lifetime costs for one year of child maltreatment cases estimated at approximately \$124 billion nationwide, and \$210,000 per victim.<sup>4</sup>

The North Carolina Institute of Medicine (NCIOM), in collaboration with the North Carolina Department of Health and Human Services Division of Public Health (NCDPH), convened a statewide Task Force on Essentials for Childhood in order to develop a collective, evidence-based state plan for reducing child maltreatment and securing child and family well-being for our state.

## **The Task Force on Essentials for Childhood**

In early 2014, the NCIOM, in collaboration with NCDPH, convened a statewide Task Force on Essentials for Childhood, charged with studying and developing a collaborative, evidence-based, systems-oriented, public health-grounded initiative to address the issue of child maltreatment prevention and family well-being in North Carolina. Chaired by Kenneth A. Dodge, PhD, founding director of the Duke Center for Child and Family Policy, and Katherine V. Pope, vice chair and program and policy committee co-chair of the Board of Directors for PCANC, the Task Force on Essentials for Childhood sought to develop an integrated, comprehensive strategic plan to coordinate and prioritize the services, programs, and policies that will build on New Directions for North Carolina, a previous statewide plan for the prevention of child maltreatment, which was published in 2005 by the NCIOM. The Task Force explored work currently underway in North Carolina and examined ways to expand upon and enhance this work.

In 2005, the NCIOM, in collaboration with Prevent Child Abuse North Carolina, convened a statewide Task Force on Child Abuse Prevention. Funded by The Duke Endowment and led by the Honorable Carmen Hooker Odom, then-Secretary of the North Carolina Department of Health and Human Services, and Marian Earls, MD, FAAP, then medical director of Guilford Child Health, Inc., the Task Force was comprised of 51 additional members



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representing entities directly involved in children and family welfare. The Task Force's primary goal was to develop a statewide plan that focused on preventing maltreatment before it occurs, and it issued 37 recommendations to enhance the capacity of North Carolina state- and community-based agencies to strengthen families and prevent child maltreatment. The culmination of the work is a report entitled *New Directions for North Carolina: A Report of the North Carolina Institute of Medicine Task Force on Child Abuse Prevention*.

The NCIOM revisited the Task Force recommendations in 2008 and found that progress had been made on implementing 75% of the original 37 recommendations in areas including public health leadership, mobilization of public-private partnerships, shared decision making, and increased replication of evidence-based programs.<sup>5</sup> Examples of fully-implemented recommendations included the establishment of a Child Maltreatment Prevention Leadership Team in 2006, which is dedicated to a public health approach to prevention; the creation of several work groups, including the Alliance for Evidence-Based Family Strengthening Work Group, which seeks to increase the number of evidence-based, effective programs available to children and families; and increased training of childcare providers to better understand and to assist parents in understanding stages of child development and age appropriate child behavior.

In addition, North Carolina progressed in changing the narrative around child maltreatment prevention, moving the conversation to prevention of maltreatment rather than reaction after the fact. Stakeholders built important but limited infrastructure to support the implementation of evidence-based programs to support children and families, and established new partnerships across different disciplines and sectors to focus on prevention.

While additional progress has been made since 2008, we still face many challenges and recognize substantial work is needed for the primary prevention of child maltreatment in North Carolina, as well as for improving the physical, social, and emotional well-being of all children and families. The NCIOM sought to build upon this work with the 2014 Task Force on Essentials for Childhood.

The Task Force on Essentials for Childhood was comprised of 48 members, including representatives from the North Carolina Department of Health and Human Services, the North Carolina Department of Public Safety, the North Carolina General Assembly, health care providers, community-based service organizations, early child care and education, universities, and youth and parent organizations. The Task Force met 10 times from January to December 2014.

The Task Force used the four goals of the CDC's Essentials for Childhood Framework as an organizing structure for this work, and applied principles of collective impact to the Task Force process. The four goals of the CDC's Essentials for Childhood are:

1. Raise awareness and commitment to promote safe, stable, nurturing relationships and environments and prevent child maltreatment
2. Use data to inform actions
3. Create the context for healthy children and families through norms change and programs
4. Create the context for healthy children and families through policies

The Task Force on Essentials for Childhood was supported by a multidisciplinary Steering Committee comprised of senior program level staff from the North Carolina Department of Health and Human Services, including the Division of Public Health and the Division of Social Services, Benchmarks, North Carolina Partnership for Children, The Duke Endowment, and Prevent Child Abuse North Carolina. The Steering Committee met on a monthly basis between scheduled Task Force meetings and assumed responsibility for planning Task Force meetings, identifying issues of relevance for the Task Force, and arranging speakers to present expert research at Task Force meetings.

## Organization of This Report

This report examines the scope of the issue of child maltreatment in North Carolina, the lifelong effects of adverse childhood experiences and trauma, and the importance of working with state, local, and other stakeholders to promote safe, stable, and nurturing relationships and environments. The report examines the ways in which North Carolina is working to address the four goals of the CDC's Essentials for Childhood and recommends action steps to enhance this work, implementing a collective impact framework.

This report contains seven chapters:

Chapter One: Introduction

Chapter Two: Overview: Child Maltreatment, Adverse Childhood Experiences, and the Socio-ecological Approach to Child Maltreatment Prevention

Chapter Three: Raise Awareness and Commitment to Promote Safe, Stable, and Nurturing Relationships and Environments and Prevent Child Maltreatment

Chapter Four: Use Data to Inform Actions

Chapter Five: Create the Context for Healthy Children and Families through Norms Change and Programs

Chapter Six: Create the Context for Healthy Children and Families through Policies

Chapter Seven: Conclusion and Outline of Task Force on Essentials for Childhood Recommendations

Appendix: Suggested Collective Impact Infrastructure

### References

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