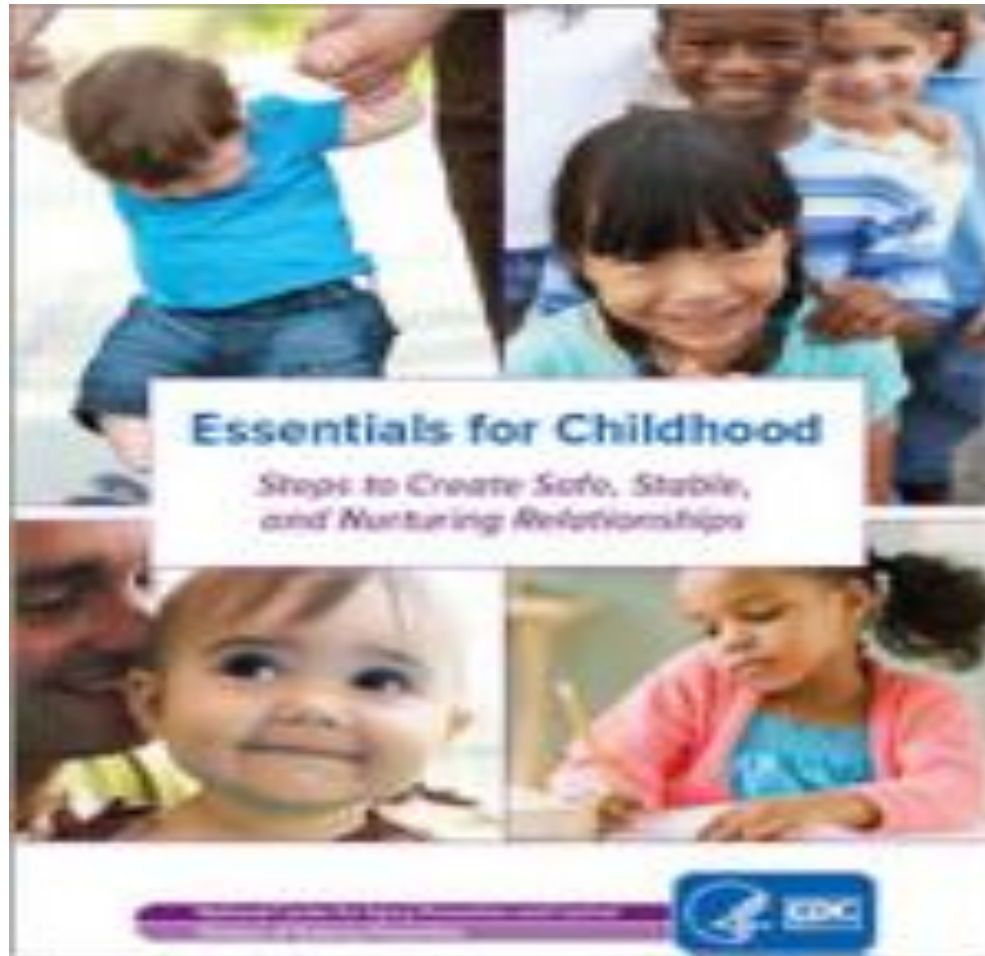


# Essentials for Childhood



# Background

- ◆ **Child Maltreatment has been identified as a significant worldwide health problem.**
- ◆ Maltreatment of a child: physical abuse, sexual abuse, emotional abuse and neglect which results in harm, potential harm, or threat of harm to a child.



- *ACE Study*
- *Triple P (South Carolina) trial*
- *PURPLE (North Carolina) trial*
- *Knowledge to Action*
- *Child Maltreatment Surveillance pilots*
- *Public Health Leadership Initiative*
- *Essentials for Childhood*

# Centers for Disease Control & Prevention

- ◆ Child Maltreatment Prevention is a CDC Injury Center Priority.
- ◆ Significant resources have been dedicated to defining and researching the problem as well as the solution.



# Essentials for Childhood (E4C)

CDC's strategic direction for preventing child maltreatment by promoting safe, stable, and nurturing relationships and environments

for children

(SSNRs & Es)



# Safety, Stability, Nurturing

- ◆ **Safety:** The extent to which a child is free from fear & secure from physical or psychological harm within their social & physical environment.
- ◆ **Stability:** The degree of predictability & consistency in a child's social, emotional, & physical environment.
- ◆ **Nurturing:** The extent to which a parent/caregiver is available & able to sensitively respond to & meet the needs of their child.



*Safe, Stable,  
Nurturing  
Relationships  
Influence Early  
Brain  
Development  
& Buffer  
Adverse  
Childhood  
Experiences*

- ◆ Healthy development depends on the quality & reliability of young children's relationships with the important people in their lives.
- ◆ Nurturing, responsive interactions build healthy brain architecture that provides a strong foundation for future learning, behavior & health.
- ◆ SSNRs & Es can provide a buffer for ACEs.





*Essentials for  
Childhood is  
the broad  
“umbrella”  
for all of our  
child  
maltreatment  
prevention  
work*

- ◆ Safe, Stable, Nurturing Relationships & Environments is the CDC’s strategic direction and
- ◆ The vision for what we want for all children.



	<b>Reactive Approach to Child Maltreatment Prevention</b>	<b>Proactive Approach to Child Maltreatment Prevention</b>
<b>What is the “REAL” problem?</b>	<b>Bad Parents</b>	<b>Lack of formal/informal societal support of parents &amp; access to new information</b>
<b>Who created it?</b>	<b>Genetics, upbringing, substances, parental choice, etc.</b>	<b>Short-term vision, outdated theories on raising children, declining communities</b>
<b>Who solves it?</b>	<b>CPS, police, foster parents, parents fixing themselves, etc.</b>	<b>Community leaders, friends &amp; neighbors, healthcare systems, faith groups, doctors, schools, etc.</b>
<b>How?</b>	<b>Rescue children, punish parents, etc.</b>	<b>New info about development, more social interactions and parent support, reinforcement of positive behaviors</b>



# Increasing Effectiveness

- ◆ Moving from Isolated Impact:
  - ◆ Multiple organizations each working to address social problems independently
- ◆ To Collective Impact:
  - ◆ Higher performing approach to large scale social impact



# Goal Areas

- 1) Raise Awareness & Commitment to Support SSNRs & Es and Prevent Child Maltreatment
- 2) Use Data to Inform Solutions
- 3) Create the Context for Healthy Children & Families through Norms Change & Programs
- 4) Create the Context for Healthy Children & Families through Policies.



**39%**  
OF CHILD  
ABUSE CASES  
OCCUR IN  
THE FIRST FOUR  
YEARS OF A  
CHILD'S LIFE.



**80%**  
of child  
abuse fatalities  
were children younger  
than four years of age<sup>3</sup>

**A GOOD  
HOME VISITING PROGRAM  
CAN CUT THIS NUMBER  
IN HALF.<sup>2</sup>**

*Home visiting is a voluntary program that matches parents with trained professionals to provide information and support during pregnancy and throughout a child's first few years.*

**\$210,012**

lifetime cost of one victim of child abuse and neglect due to the adverse health, social, and economic consequences of maltreatment<sup>4</sup>



**3.3million**

number of children reported as abused and neglected in 2008<sup>5</sup>



**\$124  
billion**

total lifetime economic burden of child maltreatment in the United States for all children abused or neglected in 2008<sup>6</sup>



**EFFECTIVE HOME VISITING WORKS**

**Child abuse prevention**

Home visiting programs can **reduce by half** the rate of child abuse and neglect and involvement with Child Protective Services.<sup>7</sup>

**Better birth outcomes**

Pregnant mothers who received a home visit during the first four months of their pregnancies had **75% fewer low birthweight babies** than those who didn't receive a visit.<sup>8</sup>

**School achievement**

Children who received home visits were **56 percent more likely to graduate from high school** than children who didn't receive home visits.<sup>9</sup>

# Raise Awareness & Commitment

- ◆ Adopt the vision of assuring SSNRs & Es for every child & preventing child maltreatment
- ◆ Raise awareness in support of the vision
- ◆ Partner with others to unite behind the vision



- *BRFSS ACEs Module*
  - *Inform program & policy goals*
  - *Connect ACEs and SES*
- *Child Death Review Data*
  - *Annual reports- education about risk factors and prevention opportunities*
- *CM Surveillance System*

## Use Data

- ◆ Build a partnership to gather and synthesize relevant data
- ◆ Review existing data
- ◆ Identify and fill critical data gaps
- ◆ Use the data to support other actions steps





e-Fan  
nersh  
Helping First-Time Parents



HEAD START

The Period of  
**PURPLE**  
Crying®



Parents as Teachers



# Norms Change & Programs

- ◆ Community norm that we all share responsibility for the well-being of children
- ◆ Positive community norms about parenting programs & acceptable parenting behaviors
- ◆ Implement EBPs



- **Business**
  - Flexible work schedules
  - Family leave
- **Hospital**
  - Educating new parents on AHT
- **Child Care**
  - Quality ratings
  - Eligibility levels

# Policies

- ◆ Identify and assess which policies may positively impact the lives of children & families
- ◆ Provide decision makers & community leaders with information on the benefits of evidence-based strategies & rigorous evaluation



# What Brings Us Together AND Why E4C?



- *California*
- *Colorado*
- *Massachusetts*
- *North Carolina*
- *Washington*

# Funding

## E4C: SSNRs & Es

- ◆ Five year competitive award
- ◆ Year 1 – Strategic Planning
- ◆ Years 2-5 – Implementation of the State Plan
- ◆ Division of Public Health – Required grantee
  - ◆ Multiple partners and stakeholders





# E4C Outcomes

- Coordinate & manage existing & new partnerships with other child maltreatment prevention organizations and ***non-traditional partners***;
- Work with partners to identify strategies across sectors;



# E4C Outcomes

- Identify, coordinate, monitor & report on the strategies implemented by multi-sector partners;
- coordinate improvement processes for multi-sector partners to refine strategies; and
- establish state-level impact of these efforts.





 CHILD MALTREATMENT  
**prevention**  
LEADERSHIP TEAM

**NCPH**  
North Carolina  
Public Health

**Prevent Child Abuse**  
North Carolina