

Cultivating Utah's Future

Ensuring Safe, Stable, Nurturing,
Relationships and Environments for
all Utah's Children

**2020-2025 State Action Plan for the Primary
Prevention of Child Maltreatment in Utah**



www.health.utah.gov/vipp



Utah Coalition for Protecting Childhood



Utah Department of
Health & Human Services
Population Health

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Suggested citation:

Utah Coalition for Protecting Childhood (2019). Cultivating Utah’s Future: Ensuring Safe, Stable, Nurturing, Relationships and Environments for all Utah’s Children. Salt Lake City, UT: Violence and Injury Prevention Program

Updated February 2023

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Acknowledgements *Thank You*

This plan is the culmination of several years of collaboration and hard work. We would like to take the opportunity to express our sincere gratitude to the following current and former partners:

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Foreward

*If your vision is for a year, plant wheat
 If your vision is for ten years, plant trees
 If your vision is for a lifetime, plant people
 ~Chinese Proverb*

Imagine if you will, a large empty dirt lot. In the corner of the lot propped up against a decrepit shed, are various tools, railroad ties, hoses, sprinklers, envelopes of seeds and bags of bulbs just lying in a heap. You notice that everything your community needs to build a strong, sustainable, community garden is right there in front of you. All that is needed is organization and a sustained effort to begin to benefit from the garden.

Like that vacant lot, we have the tools and the knowledge necessary to ensure that all Utahns are able to grow and thrive. We need to be vigilant and remove the risk factors and barriers that may hinder our efforts but through continued collaboration we will reap the long-term, economical, family, community, education and health benefits from our well-tended community garden. Through this our communities will prosper.

Child maltreatment is a significant public health problem in Utah and has long-term effects on physical and mental health.



Co-Chairs

Deondra Brown
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As co-chairs for the Utah Coalition for Protecting Childhood (UCPC), we are excited to share our 2020-2025 state action plan with you.

UCPC has undergone some exciting changes over the last few years since the Violence and Injury Prevention Program (VIIP) received funding to support the Coalition's work to prevent child maltreatment using the Centers for Disease Control and Prevention's (CDC) Essentials for Childhood framework.

This plan follows the framework of the state violence and injury prevention strategic plan, in order to align our collective efforts to address shared risk and protective factors.

An engaged community with shared goals and visions, can significantly reduce child maltreatment and other harmful, social determinants of health.

We hope you will see the value in sharing our vision to ensure safe, stable, nurturing, relationships, and environments for every Utah kid.



Introduction

Plan the Garden

UCPC Vision: *Utah, where for every child, it's great to be a kid!*

In 2013, the Utah Department of Health (UDOH), the Utah Department of Human Services (DHS), and Prevent Child Abuse Utah (PCAU), applied for funding from the Centers for Disease Control and Prevention (CDC) to implement a child abuse and neglect primary prevention framework called Essentials for Childhood (EfC). Although UTah was not funded, there was interest in continuing the momentum that had developed during planning. These agencies say the opportunity to collaborate and the Utah Coalition for Protecting Childhood (UCPC) was formed in early 2015.

The purpose of this work is to create the conditions in which parents and caregivers can successfully meet the basic needs of the family unit.

Mission:

UCPC members are united behind the common goal to strengthen families and increase the likelihood that all Utah children are thriving in safe, stable, nurturing relationships and environments through the implementation of comprehensive policy and program strategies.

TENETS/CORE BELIEFS

Child maltreatment is preventable. States, businesses, communities, families, and individuals all have a part, both individually and collectively, in reducing risk.

Focusing on primary prevention yields the most significant outcomes. The public health model which emphasizes the linkages and relationships of multiple factors as well as comprehensive evaluation is the most appropriate model to address all levels of the socio-ecological system.

Intervention is still necessary to prevent further abuse and to break the abuse cycle. Breaking the cycle of multi-generational violence is critical to keep the victim from perpetrating.

A collective impact is necessary to achieve the best results. Given the magnitude and complexity of the problem, a shared approach with a common agenda will yield the most success.

Child maltreatment affects society as a whole. Therefore, the solution is to create a supportive community context for children and families in order to prevent or reduce toxic stress.

Adverse childhood experiences (ACE's), have overwhelming psychological and physical effects across the lifespan. Preventing and buffering such experiences is necessary to the prosperity of our state and its citizens.

Preventing child maltreatment is a realistic and attainable goal. There is enough evidence on what works (addressing risk and protective factors) that we can prevent child maltreatment from occurring through smart investments.

The most significant years for preventing maltreatment are 0-5.



Utah Profile

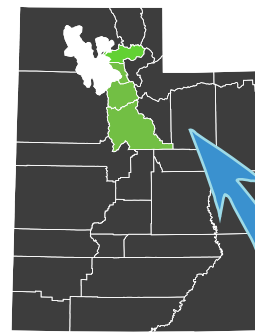
POPULATION

RACE AND ETHNICITY¹⁰

77.8% White, non-Hispanic
14.4% Hispanic, Latino
2.7% Asian
2.6% Two or more races
1.5% American Indian or Alaskan Native
1.5% Black or African American
1.1% Native Hawaiian or other

29 Counties

3.34 million population¹



75% live here¹

Fastest growing state in the nation²

DEMOGRAPHICS

RELIGION⁹

73% Christian
22% No religion
4% Non-Christian faith
2% Don't know



Claim membership in The Church of Jesus Christ of Latter-Day-Saints (Mormons)⁷

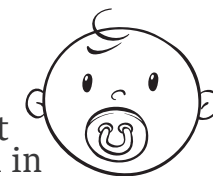


Most persons per household, 3.09⁵



11th most educated state⁴

Youngest population in the U.S.³

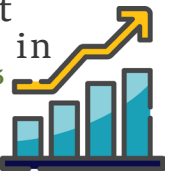


ECONOMY

SOCIAL CLASS⁸

49% Middle class
27% Upper class
24% Lower class

2nd strongest job growth in the U.S.⁵



Women earn a median .74 cents for every dollar a man makes in the beehive state, ranked 46th in the nation.⁶



6.1% of Utah children are living with intergenerational Poverty⁷

Median income³

U.S. \$65K


Utah \$74K


Child Maltreatment in Utah

Each year in Utah there are nearly 10,000 substantiated cases of child maltreatment ⁴⁴

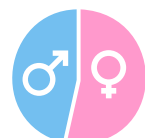
Victim demographics

 **54%** of identified child maltreatment victims were female

 **2x** higher rates of maltreatment among children under the age of 1

 **2x** higher rates of reported child maltreatment among African Americans and American Indian

Perpetrator demographics

 **54%** of child maltreatment perpetrators were female

 **80%** of perpetrators were between 18-44 years old

 **67%** of perpetrators were a parent of the victim

Percentage of FY 2020 confirmed cases by allegation type

Child endangerment	21.6%
Domestic violence related	20.7%
Sexual abuse	14.3%
Other neglect*	11.8%
Other**	10.1%
Physical abuse	9.9%
Emotional abuse	5.5%

* Other neglect: abandonment, educational neglect, failure to protect, failure to thrive, sibling/child at risk
 **Other: fetal exposure, non-supervision, medical neglect, dealing in materials harmful to a child, human trafficking, lewdness, and sexual exploitation

Caregiver risk factors

- Alcohol abuse
- Drug abuse
- Financial problems
- Domestic violence

Social Determinants of Health

Social determinants of health (SDoH) are the conditions in which people live, learn, work, worship, and play. The World Health Organization and Healthy People 2030 both identify SDoH as significantly affecting health outcomes.¹¹ For children, addressing these social determinants require reducing stress, discrimination, and increasing opportunity and equality. SDoH are the non-medical factors that exist outside traditional healthcare that impact a person's immediate and long-term health. Healthy People 2030 identifies five key areas that make up the factors that determine health.

A 2021 meta-analysis of research related to the social determinants of child maltreatment identified the key determinants associated with increased risk of child abuse and neglect⁴⁷.

- Poverty
- Parental educational attainment
- Housing instability
- Lack of health insurance

A 2010 international study on social determinants of child maltreatment concluded there is “a need to break the “invisibility” and social acceptance of child abuse by advocating for policies, laws, and services for prevention and response, in addition to educational campaigns aimed at changing social norms and individual attitudes that are harmful to children.”¹²

“...our zip code affects our health more than our genetic code” ~Karen DeSalvo, M.D.



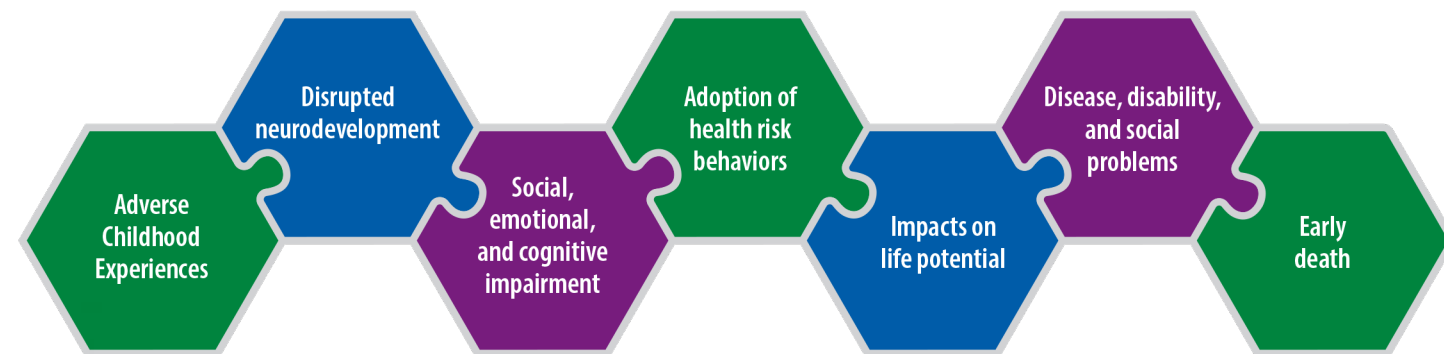
Adverse and Positive Childhood Experiences

Adverse childhood experiences (ACEs) are traumatic events experienced during childhood. They include verbal, physical, or sexual abuse, as well as family dysfunction (such as a family member who is incarcerated, mentally ill, or suffers from a substance abuse disorder; domestic violence; or absence of a parent because of divorce, death, or separation). According to Utah data, 63% of Utah adults have reported experiencing and or being exposed to at least one ACE growing up. (citation: <https://ibis.health.utah.gov/ibisph-view/indicator/view/ACEs.Type5.html>) ACEs are associated with negative health behaviors and outcomes later in life and the more ACEs a person has experienced, the more likely they are to experience those negative health behaviors and outcomes.

Utah adults have reported experiencing and or being exposed to at least one ACE growing up. Direct ACEs include childhood exposure to physical, sexual, or verbal abuse. Environmental ACEs include childhood exposure to adults with mental illness or substance use problems living in the household, divorce, incarceration, or witnessing domestic violence.

Analysis of the data found children exposed to environmental ACE's *only* were more at risk for substance use (smoking and binge drinking) compared to those exposed to direct ACEs only. Direct ACEs were not associated with adults' use of tobacco or alcohol, but were associated with fair or poor health, depression, and obesity. Environmental ACEs were associated with adults' use of tobacco, binge drinking, fair or poor health, and depression.¹⁵

Positive childhood experiences (PCEs) are experiences in childhood that build a child's sense of belongingness and connection. Research shows that PCEs predict positive outcomes, including a child's good health (now and in adulthood) and success in school. PCEs also help buffer the negative effects of ACEs, meaning that even if a child has experienced hard things, like witnessing domestic violence, being bullied, losing a parent, or even abuse, experiencing PCEs can protect children from developing long-term negative effects from these traumas.⁴⁶

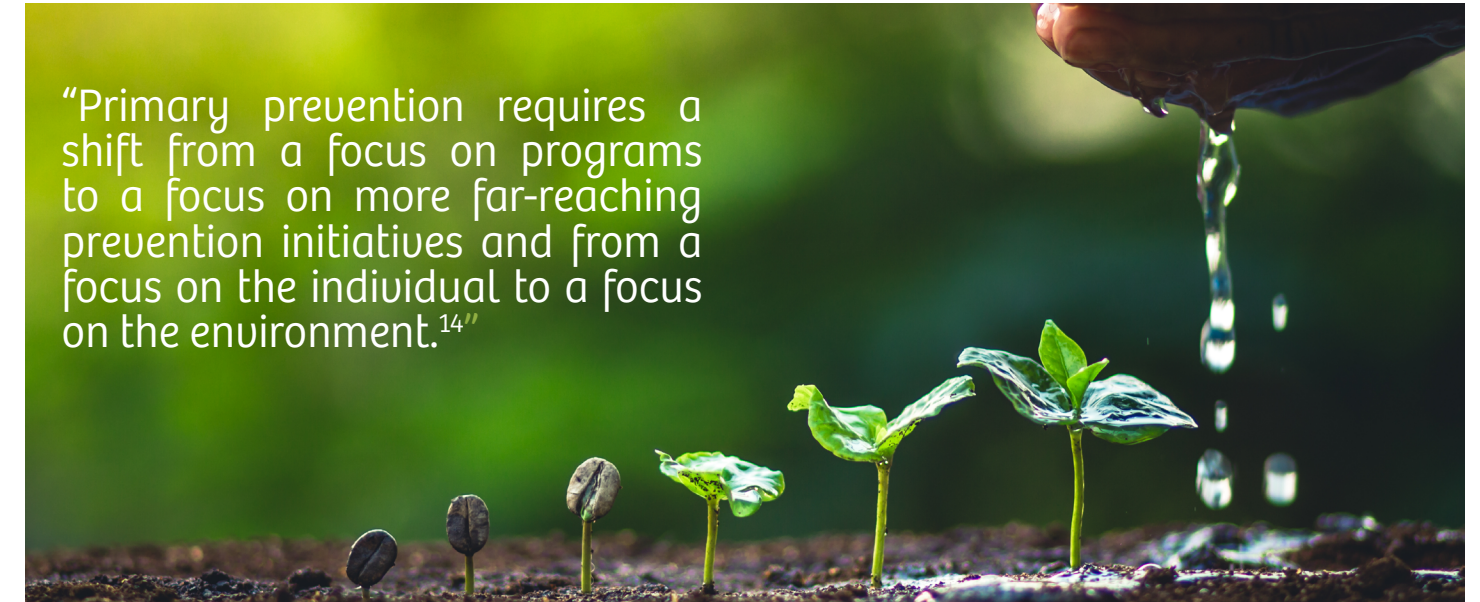


Credit: "Preventing Adverse Childhood Experiences (ACEs): Leveraging the Best Available Evidence". Centers for Disease Control and Prevention.



Risk and Protective Factors

Prepare the Soil



"Primary prevention requires a shift from a focus on programs to a focus on more far-reaching prevention initiatives and from a focus on the individual to a focus on the environment."¹⁴

UPSTREAM APPROACH TO PREVENTION

In 2012, the Utah Legislature passed the Intergenerational Poverty (IGP) Mitigation Act which led to the establishment of the Intergenerational Welfare Reform Commission.¹⁴ The goal of the commission was: "To reduce the number of Utah families in the cycle of poverty, improving their quality of life and helping them become economically stable." This as well as many other stated goals of the IGP align with UCPC's goals to reduce the risk of child maltreatment.

In 2014, the Centers for Disease Control and Prevention released the document, "Connecting the Dots: An Overview of the Links Among Multiple Forms of Violence." This document showed the connections between different types of violence and the root causes or risks shared between them. Since that time, the Utah Coalition for Protecting Childhood has been working toward a shared risk and protective factor strategic approach to prevent child maltreatment.

The shared risk and protective factor approach is based on the best available evidence and gives us the opportunity to streamline and scale up our primary prevention power by breaking down the "silos" that have traditionally kept us focused on each type of violence separately. Working this way (soiled as opposed to collectively) limits our ability to leverage and coordinate resources for population-level impact.

The belief that people need only to "pull themselves up by the bootstraps" drawing upon some heroic strength of character is erroneous and harmful. The idea that seeking help through government assistance, early intervention,

and other similar programs foster a dependency on the government has been disproven¹⁵. In fact, studies show that early intervention programs, such as SNAP, TANF, and child care assistance have a nearly 10 to 1 return for every dollar the government spends by improving school performance and decreasing teen pregnancy and substance abuse among other things. Sustaining a social safety net does not create dependency but builds resilience instead¹⁶. As a state, we can help shift the narrative away from individual culpability to one that engages the community and draws upon multiple solutions to promote safe, stable, nurturing relationships and environments for all children.

Using data, the essentials for childhood framework, the Adverse Childhood Experiences Technical Package, and the Child Abuse and Neglect Technical Package as guides, we have chosen four strategies on which to focus our efforts. They are to

- Strengthen economic supports to families.
- Provide quality care and education early in life.
- Enhance parenting skills to promote healthy child development.
- Intervene to lessen harms and prevent future risk.

These strategies, widely adopted across sectors, offer the best-researched opportunities to affect change and protect Utah children from abuse, neglect, and other childhood adversities. We all play a role in creating the best possible conditions and environments in which to raise our children.



Strategies

Plant the Garden

1 Utah Children are Poverty Free and Thriving

STRENGTHEN ECONOMIC SUPPORT TO FAMILIES

Far too often, Utahns living below the federal poverty level miss out on tax credits and childcare subsidies that can help provide a stronger, more stable economic foundation for their families and increase their health and longevity ^{24, 25, 26}. Federal data shows that 1 out of every 4 eligible Utahns fails to file for and benefit from the Earned Income Tax Credit (EITC). This also means any tax filers with children are potentially missing out on the Child Tax Credit (CTC), the Child and Dependent Care Credit, and may even impact their ability to access childcare subsidies.

The Earned Income Tax Credit (EITC) is concentrated among the lowest earners, with nearly all of the credit going to households in the bottom three quintiles of the income distribution.¹⁸

Research on EITC shows the following:

- EITC encourages single people and primary earners in married couples to work.¹⁹
- EITC can free up resources for childcare expenses by decreasing the amount of taxes owed.²⁰
- Single mothers, especially those with low wages, are more likely to be employed and experience an increase in earnings when they receive EITC.²¹
- Single mothers receiving EITC are more capable of paying for childcare and, thus, can get and maintain a job.²²

Family-friendly work policies (FFWP) such as flex-time, telecommuting, maternity/paternity leave, family medical leave, on-site/near-site child care, employee tuition, and generous health and dental policies lend to a healthy community. Unfortunately, far too many Utahns lack access to FFWP. These policies have been shown to benefit employers and employees alike and are sure to benefit Utah as well.

- FFWP are better for family stability and for children, thus improving the outlook for the next generation of families and workers.
- They allow more people to get and stay employed, thus contributing to workplace and community stability and wellness.
- Family-friendly policies are fairer to employees and encourage upward mobility and employee retention²³.

APPROACH 1

Improve utilization of existing governmental supports for those who qualify

1. Increase the number of eligible families receiving available tax credits and childcare subsidies
 - a. Conduct social media and outreach campaigns to educate the public and families on the state and federal EITC, the federal child tax credit, and available childcare subsidies available through the Department of Workforce Services to increase participation.
 - b. Increase awareness among child/family serving organizations of the benefits of federal and state supports such as tax credits and childcare subsidies, so they can help the families they serve access these important determinants of economic stability.
2. Assess Utah-specific policy opportunities to provide support to struggling families
 - a. Provide data and education to partners, policymakers, and legislators on the benefit of implementing policies that will increase the number of families benefiting from filing for the state or federal EITC.
 - b. Educate legislators on the importance of making the new Utah state EITC refundable, ensuring increased economic stability for families with children under the age of .³



APPROACH 2

Improve access and uptake of Family-Friendly Work Policies

1. Increase implementation of family-friendly work policies across Utah
 - a. Promote the findings from Utah's statewide assessment of working parents about their family-friendly workplace policy preferences.
 - b. Use data from the statewide assessment to provide outreach and education to business leaders, policymakers, and legislators on the benefits of implementing policies that afford employees more flexibility.

These strategies align with strategies/recommendations of the following agencies' plans:

VIPP: Improve the socioeconomic conditions for Utahns

IGP: Increase uptake in the federal Earned Income Tax Credit (EITC)
Implement policies to support non-custodial parents

DHS: Implement prevention and early intervention strategies to reduce risk, trauma, and intergenerational cycles of isolation and suffering

OUR: Encourage and enable more flexible and inclusive workplaces
Encourage businesses to implement family-friendly and inclusive policies
Identify and invest in priority services and infrastructure needs that impact SHOD

VIPP: Violence and Injury Prevention Program at the Utah Department of Health. IGP: Intergenerational Poverty Commission at the Department of Workforce Services. DHS: Department of Human Services, OUR: One Utah Roadmap



2

Utah Parents Seek and Accept Parenting Support

ENHANCE PARENTING SKILLS TO PROMOTE HEALTHY CHILD DEVELOPMENT

Between birth and the age of five, a child’s brain develops faster than at any other time in their lives. This early development builds a springboard for a child’s ability to learn and succeed in school and life. Both positive experiences and experiences of adversity, in and out of the home, determine how the child’s brain develops, shaping health and opportunity across the lifespan²⁷. Significant disadvantages in the lives of Utah children can undermine their development, limit their future economic and social mobility, and thus threaten the vitality, productivity, and sustainability of our state

During those early years, children spend most of their time at home with parents and caregivers. Parents who have limited parenting skills or are themselves experiencing toxic stress have more difficulty providing the care and nurturing that is needed for children to have safe, stable, nurturing relationships and environments³⁴. Sometimes parents are parents fighting their own trauma histories, mental health struggles depression, or other health problems. Sometimes they are worrying about homelessness or putting food on the table, These financial risk factors may make find it difficult to appropriately react to a whining toddler or a demanding preschooler, or even an older child or teen struggling with learning and/or behavior problems in adolescence²⁸. All of these are risk factors for child abuse and neglect.

Learning how to cope with adversity is an important part of a child’s healthy development. While moderate, short-lived stress responses in the body can promote growth, toxic stress is the strong, unrelieved activation of the body’s stress management system in the absence of protective adult support. Without caring adults to buffer children, the unrelenting stress caused by extreme poverty, neglect, abuse, or even severe maternal depression during pregnancy can weaken the architecture of the developing brain, with long-term consequences for learning, behavior, and both physical and mental health. The capacity to adapt and thrive despite adversity is in part developed through the interaction of supportive relationships, (positive childhood experiences), and a willingness to seek help for both emotional and concrete support in times of need.²⁹

APPROACH 1

Expand Early Childhood Home Visitations

1. Increase access to home visitation programs for eligible families
 - a. Continue and expand partnership with the Utah Home Visiting Program to explore ways to expand the number of families able to access home visiting services statewide.
 - b. Increase awareness of the importance of home visiting programs to long-term health and opportunity outcomes, and encourage increased funding to expand home visiting to all communities across the state.

APPROACH 2

Support Parent Education and Growth

1. Increase awareness of and access to evidence-based parent training programs for families in need.
 - a. Partner with Help Me Grow, the Home Visiting Program, the Prevent Child Abuse Utah, the Division of Child and Family Services, and other relevant partners to enhance evidence-based parent training programs
 - b. Decrease misconceptions that lead to the use of physical discipline and educate on positive parenting alternatives for caregivers using new Utah data

APPROACH 3

Encourage Social Norms to Promote Quality Connectedness for Youth and Caregivers

1. Conduct a statewide campaign to educate about the importance of social connectedness at the interpersonal, societal, and community levels.
2. Create and administer population-specific toolkits to improve connectedness at the interpersonal, community, and societal levels.

These strategies align with strategies/recommendations of the following agencies’ plans:

- VIPP: Encourage social norms that promote safety and health
- IGP: Support parents as first teachers
- DHS: Implement prevention and early intervention strategies to reduce risk, trauma, and intergenerational cycles of isolation and suffering
- OUR: Engage a multiple-touch support framework for parents and caregivers (medical systems, doctors and nurses, churches, other governmental and private institutions) to help every family successfully prepare children for education success
Enhance safety and increase resources for prevention education and support services for survivors of domestic and sexual violence

VIPP: Violence and Injury Prevention Program at the Utah Department of Health. IGP: Intergenerational Poverty Commission at the Department of Workforce Services. DHS: Department of Human Services, OUR: One Utah Roadmap

3

Provide Quality Care and Education Early in Life

PROVIDE QUALITY CARE AND EDUCATION EARLY IN LIFE

According to the American Academy of Pediatrics, quality early education and child care for young children improve outcomes and enhance school readiness.³⁵ Families who depend on childcare in order to be able to work and provide for their families sometimes have to make difficult compromises depending on the family’s resources. These compromises can impact the quality of the care their children receive and can sometimes lead to dangerous situations for their children. Research shows that quality childcare experiences can lead to better outcomes for children for their entire lives⁴⁸.

Children who have endured trauma show more positive learning and social-emotional growth when childcare and early childhood education programs meet high-quality standards. The U.S. Department of Health & Human Services’ Office of Child Care defines a quality rating and improvement system (QRIS) as “a systemic approach to assess, improve, and communicate the level of quality in early and school-age care and education programs. Similar to rating systems for restaurants and hotels, QRIS awards quality ratings to early and school-age care and education programs that meet a set of defined program standards.³⁶”

Family involvement in children’s early learning benefits children, parents, teachers, and program quality in many interrelated ways. These include child social and emotional competence, parental effectiveness, and educational program enrichment.³³

APPROACH 1

Increase preschool enrichment

1. Increase awareness of and participation in affordable, quality preschool options through organizations like Waterford Upstart and Head Start
 - a. Educate business owners and engage employers as part of the information pipeline to connect working parents to affordable, quality preschool programs

APPROACH 2

Increase uptake of Social Emotional Learning (SEL) in all educational settings

1. Increase parental engagement in SEL within the school setting.
2. Provide parents with the support and education they need to understand and implement SEL principles within their homes.
3. Partner with the Utah State Board of Education to increase awareness of the long-term benefits of SEL on child health, education, and opportunity outcomes across the lifespan.

APPROACH 3

Improve the quality of child care through licensing and accreditation

1. Support the Department of Workforce Services, Office of Childcare, and other partners working to improve the implementation of a Quality Rating and Improvement System (QRIS) for all childcare programs.
 - a. Educate business owners and engage employers as part of the information pipeline to connect working parents to affordable, quality childcare

These strategies align well with strategies/recommendations of the following agencies' plans:

VIPP: Encourage social norms that promote safety and health

IGP: Continue investment in improving early childhood program quality

DHS: Improve outcomes through individual and family involvement, inter agency collaboration, public/private alliances and community support

OUR: Provide more support for childcare offices and programs, including a review of licensing requirements

VIPP: Violence and Injury Prevention Program at the Utah Department of Health. IGP: Intergenerational Poverty Commission at the Department of Workforce Services. DHS: Department of Human Services. OUR: One Utah Roadmap.

4

Utah Families Get the Help They Need When They Need it

INTERVENE TO LESSEN HARMS AND PREVENT FUTURE RISK

One in four children experience some type of child maltreatment during their lives. The consequences of child maltreatment are serious and life-altering. Some children who suffer maltreatment die or are seriously injured. (e.g. burns, broken bones, intracranial bleeding) while others suffer from emotional and psychological problems such as PTSD, depression, or anxiety.³⁷ Childhood maltreatment also increases the likelihood a child will engage in risky behaviors such as smoking, alcohol and illicit drug misuse, early initiation of sexual activity, and promiscuity, among others. Chronic diseases, including ischemic heart disease, liver disease, and chronic obstructive pulmonary disease are also more prevalent in child abuse survivors.³⁹

Child maltreatment and other childhood adversities also have impacts on educational outcomes such as:

- Increased likelihood of below-average language and literacy skills, attention problems, and social problems in kindergarten.³⁸
- decreased cognitive scores at age 8.³⁹
- increased risk of dropping out of school.⁴⁰

We only now begin to see the consequences of trauma at the population level with elevated costs over the lifespan affecting the major healthcare and social service systems in America. In response to this, some health systems have implemented the Safe Environment for Every Kid (SEEK) program in the family practice and pediatric setting. SEEK has been shown to reduce child maltreatment. Specifically, families participating in SEEK:

- Had significantly fewer reports to child protective services than families who received services as usual (13.3% and 19.2% respectively).
- Reported fewer occurrences of severe physical assault.
- Were more likely to adhere to medical care, and ensure their children had timely immunizations.⁴¹
- Less reported maternal psychological aggression and fewer maternal physical assaults.⁴²

Addressing individual, family, and community trauma requires a comprehensive, public health approach that includes a widespread commitment to changing the practices, policies, and culture of an entire system or organization to respond better to the needs of trauma survivors. According to the Substance Abuse and Mental Health Services Administration (SAMHSA), this helps survivors "rebuild a sense of control and empowerment."⁴³ Implementing a trauma-informed approach (TIA) demonstrates an understanding of how to recognize and respond to the impact of traumatic stress in ways that promote healing and avoid retraumatization.⁴⁵

APPROACH 1

Enhanced Primary Care

1. Encourage Primary Care Physicians to add the Safe Environment for Every Kid (SEEK) to their practice.
 - a. Work with Medicaid and pediatricians currently implementing SEEK to explore feasibility of applying for an 1115 waiver for medicaid cost reimbursement of implementation of the SEEK program in all medical systems statewide.
 - b. Provide data and education to primary care physicians and pediatricians on the benefits of integrating the SEEK model into their practice.

APPROACH 2

Increased Policies Implementing a Trauma Informed Approach

1. Lessen harms through increasing trauma-informed practices at the system, state, and community levels.
 - a. Support Trauma Informed Utah in their efforts to make Utah a trauma-informed state.
 - b. Work with community and state-level partners to develop a plan for implementing trauma-informed approaches across the state.

APPROACH 3

Increase opportunities to diversify funding for community-based prevention services

1. Assess Children's Trust Fund programs in other states to identify alternative funding sources.
2. Educate policymakers and legislators of the importance of funding for CAN prevention services at the community level.

We believe these strategies align well with strategies/recommendations of the following agencies' plans:

VIPP: Encourage social norms that promote safety and health

IGP: Support parents as first teachers

DHS: Support families and individuals in their homes, schools, workplaces, and communities for sustainable success

VIPP: Violence and Injury Prevention Program at the Utah Department of Health. IGP: Intergenerational Poverty Commission at the Department of Workforce Services. DHS: Department of Human Services

Get Involved

Reap the Harvest

How can you help in the primary prevention of child maltreatment, adverse childhood experiences, and opioid misuse/overdose?

Individual	Organization	State/local Government
Partner with us by joining UCPC.	Offer family friendly work policies such as paid maternity/paternity leave.	Work on Policies that improve the socioeconomic conditions of families in order to have the largest impacts on health.
Follow UCPC's social media and invite other to follow.	Implement equitable pay policies.	Assess how Medicaid can support primary prevention.
Educate clients, family, and friends about the importance of filing their taxes and getting the right help so that they can benefit from free tax filing (Tax Help Utah), the Earned Income Tax Credit (EITC), the child tax credit, and other applicable credits.	Become a "trauma-informed" organization.	Become a trauma-informed city, county, or state.
Educate clients, friends, and family about available parenting supports so that they can understand their child's development and provide health-promoting positive parenting.	Assess institutional racism and other health inequities within your organization.	Implement a Quality Rating Improvement Scale (QRIS) for childcare providers.
Volunteer for an early head start or other preschool enrichment programs, become a "Big Brother/Sister", to just reach out to support parents and kids in your community.	Provide on site daycare, backup child-care coverage, or a subsidy to help cover costs of child-care.	Offer more on-site child care in government office buildings.
Become a childcare provider, offering quality care for low-income families.	Sponsor a World Cafe for parents to foster peer-to-peer learning and sharing.	
Become educated on topics that contribute to or prevent child maltreatment such as training on connectedness, bystander intervention, health equity/bias, and the social determinants of health.	Model a good work/life balance as management.	
Continually raise awareness on topic known to contribute to or protect against child maltreatment, ACE's, and opioid misuse (economic stability, family friendly work policies, home visiting, social emotional learning, trauma-informed practices).	Get personal. Provide opportunities for personal connections with employees and their families.	
Volunteer to provide tax help to low-income filers with utahtaxhelp.org .	De-stigmatize the use of Employee Assistance Programs (EAP) by encouraging their use.	



Conclusion

Because...

- child maltreatment is a public health issue affecting society as a whole
- child maltreatment is an adverse childhood experience (ACE)
- ACE's disproportionately affect minority children (children of color, LGBTQ, low income)
- Ace's are linked to poor psychological and physical health outcomes later in life
- Prevention is a realistic and obtainable goal
- Intervention is still necessary to prevent harm
- and to break the cycle of abuse

THE UTAH COALITION FOR PROTECTING CHILDHOOD WILL USE...

- our partnerships
- our expertise
- data
- Funding
- families

TO MAKE

UTAH

where for every child, it's great to be a kid!

by

- strengthening economic supports to Utah families
- changing social norms to support parents and positive parenting
- ensuring quality care and education early in life
- enhancing parenting skills to promote healthy child development
- intervening to lessen harms and prevent future risk

so that all Utahns...

are poverty free and thriving

- understand and practice positive parenting
- have access to quality care and education early in life
- have access to parent support when needed
- who interface with the child welfare system, feel supported

WHICH WILL

- Increase the number of Utah children thriving in safe, stable, nurturing relationships and environments
- Strengthen economic security for low income families in Utah
- Decrease the rate of adverse childhood experiences among Utahns
- Decrease the rate of opioid misuse/overdose among Utahns
- Decrease Utah's rate of child abuse and neglect

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