

**Testimony of
Judy King, MSW, Director of Family Support Programs
Washington State Department of Children, Youth, and Families
Hearing on “Strengthening Prevention and Treatment of Child Abuse and Neglect”**

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Introduction

Good afternoon, Civil Rights and Human Services Subcommittee Chair Bonamici, Ranking Member Comer, and members of the Subcommittee. Thank you for the opportunity to testify on “Strengthening Prevention and Treatment of Child Abuse and Neglect.”

I serve as the Director of the Family Support Programs Division for Washington state’s newest agency, the Department of Children, Youth and Families. My Division leads our state’s child abuse prevention strategy, home visiting system development, early intervention, therapeutic and trauma-informed child care, health, and early childhood mental health.

I also serve as the Community-Based Child Abuse Prevention (CBCAP) Washington State Lead, the Executive Director of the Washington State Chapter of Prevent Child Abuse America, and sit on the Board of Directors of the National Alliance for Children’s Trust and Prevention Funds.

Thanks to CBCAP, Washington state served 1,698 parents and 2,153 children in FY 2018 with family support services in 12 out of 39 counties. We still have a long way to go in reaching all of the children and families who could benefit from CBCAP services and systems-building efforts, but that task would be significantly more difficult and less effective without CBCAP funding.

CBCAP grants provide critical support for locally-driven services that are essential to building healthy and thriving communities and strong families. CBCAP also supports key systems work focused on policy and practice development across the many state and local partners in prevention.

In 2017, the federal government funded CBCAP at \$39 million across the 50 states engaged in primary and secondary prevention work. The average funding received by states is 53 cents per child per year. Historically, CBCAP is the main federal investment in primary prevention for the *entire country*.

Why Prevention Matters

According to research from the Centers for Disease Control and Prevention (CDC), in the United States, at least one in seven children experience child abuse and/or neglect annually.¹ Studies show that the *total lifetime economic burden associated with child maltreatment is approximately \$2 trillion*.² This economic burden rivals the cost of high-profile public health epidemics such as strokes and type 2 diabetes.

¹Fortson B, Klevens J, Merrick M, Gilbert L, Alexander S. (2016). Preventing Child Abuse and Neglect: A Technical Package for Policy, Norm, and Programmatic Activities. Atlanta, GA: National Center for Injury Prevention and Control Centers for Disease Control and Prevention (CDC)

²Cora Peterson, Curtis Florence, Joanne Klevens. "The Economic Burden of Child Maltreatment in the United States." Child Abuse & Neglect The International Journal 86 (2018): 178-183. The National Center for Injury Prevention and Control Centers for Disease Control and Prevention (CDC).

These costs include childhood health care costs, adult medical costs, loss of productivity, child welfare costs, criminal justice costs, and special education costs. When we fail to prevent abuse and neglect from occurring in the first place, it has tremendous consequences for the child, the family, our communities, and our nation. Greater focus on prevention now yields significant cost reduction later, saving taxpayers from long-term, costly interventions while simultaneously improving outcomes for children and families.

Healthy child development is a foundation for community and economic development, as capable children become the foundation of a prosperous and sustainable society. We know that when we support parents in their critical responsibilities to help their children become healthy, successful citizens, these are the most effective decisions we can make.

What is Prevention?

To prevent child maltreatment, we must put science into action. Maltreatment and other adverse childhood experiences are linked to adult illness and early preventable death—such as cancer, cardiovascular disease, lung disease, and diabetes. The mechanisms between childhood trauma and adult disease are believed to lie in the increased rate of mental and behavioral health challenges that can impact health—depression, anxiety, serious mental illness, smoking, and substance abuse. At a population level, we see chronic health effects and serious psychosocial effects present in communities and these effects may be observed decades later, according to researchers in epigenetics and resiliency. We also know we can protect or buffer children from abuse and neglect by building protective factors in families and communities. Protective factors are conditions in families and communities that, when present, increase the health and well-being of children and families. We must strive to create environments where families get the support they need before the harm occurs, which supports children on a positive trajectory to reach their full potential in school and in life.

This is where CBCAP comes in. To be effective in supporting children and families, communities identify collaborative opportunities among the organizations that touch families' lives. Prevention requires a highly-integrated, multi-systemic public health approach.

As Associate Commissioner of the Children's Bureau and Acting Commissioner for the Administration on Children, Youth and Families Jerry Milner said:

Our challenge and opportunities lie in working across systems, be that the medical system, the mental health and substance abuse treatment provider systems, our schools, law enforcement, community organizations and all other stakeholders that come in contact with vulnerable families and providing them the support they need to stay healthy and strong. A community-based approach requires a few things. It's important to understand what life is like for families in their specific communities. What are they struggling with? What resources are available? Are there cultural practices or norms that are unique? These are all things that are known at the local level and can make a key difference in the effectiveness of interventions. The aim is to become a system to which people turn for help, not seek to avoid. There's also good reason to believe that if services were offered in more accessible, less threatening ways, by people and in places that may be familiar, such as through the auspices of a community center or a church, parents may be more likely to seek help on their own and benefit from the supports available to them. We need to resolve the problems that lead to the increased need for foster care placement.³

³"Trump's Top Child Welfare Official Speaks" The Chronicle of Social Change, November 6, 2017.

What is Community-Based Child Abuse Prevention (CBCAP)?

CBCAP grants, which are authorized under Title II of the Child Abuse Prevention and Treatment Act (CAPTA) provide critical supports and strategic system-building efforts to change the context in which families live and provide the right supports at the right time. This includes parental skills-building, voluntary home visiting programs, self-help programs, coordination and connection with mental health and substance use services, and other family support services. CBCAP grants, which are structured to leverage local and private funds, are currently funded at only \$39 million per year—half of the federal authorization cap of \$80 million for all 50 states. The average funding states receive is **53 cents per child**—falling short of the funding necessary to prevent child abuse before it occurs.

CBCAP in Washington

Washington state's newest cabinet-level agency, the Department of Children, Youth, and Families (DCYF), was established as a result of recommendations from a Blue Ribbon Commission focused on creating a system to better support children and families, leveraging science and community capacity with a relentless focus on preventing child abuse and neglect. Combining the strengths of an early learning department and child welfare services into one unified agency offers an opportunity for a laser focus on children growing up safe and healthy—thriving physically, emotionally, and educationally, nurtured by family and community. Launched in July 2018, DCYF is poised to accomplish this by partnering with state and local agencies, tribes, and other organizations in communities committed to these outcomes.

Brain science tells us that laying a strong foundation early in life critically impacts healthy development. Science also tells us that addressing trauma at the individual, family, and community levels allows us to prevent bad things from happening, promote strengths in children and families, and intervene early.

Within DCYF, the Strengthening Families Washington team (SFWA) serves as the child abuse prevention arm and leads all CBCAP work. CBCAP is designed to support primary and secondary prevention programs and system initiatives that reduce the incidence of child abuse and neglect, ensure optimal child health and development, and increase protective factors in families and communities. These attributes serve as buffers to Adverse Childhood Experiences (ACEs), helping parents find resources, support, or coping strategies that allow them to parent effectively, even under stress.

In our everyday work, we notice important factors affecting children and families. We identify the tremendous stress, pressure, and uncertainty that leaves parents feeling alone, unconnected, and ashamed. We focus on building capacity and connections in communities so families have access to supports that help them be strong. We provide ready access to services and support networks to meet their most pressing needs and instill hope for a bright future for their children. This is what we want for all of our children: that all children, irrespective of race or income, have the opportunity for success in school and in life.

Local Services to Strengthen Families

In 2018, DCYF provided CBCAP funding to communities with a focus on quality, capacity-building, and sustainability for local prevention programs. Eleven local programs provided direct services to families, meeting a fraction of the need among Washington state communities with total funding of \$290,991. This represents only 6 to 9 percent of the annual applications received to provide evidence-based and evidence-informed programs made up of small grants of up to \$30,000 per program.

Programs funded in Washington state are typical of programs funded by CBCAP in other states throughout the country. DCYF funds programs where parenting coaches work with families to develop effective positive discipline approaches that are matched to child needs and developmental stages. Parents help their children understand and express emotions, set clear expectations, and improve family communication. This helps to strengthen parenting competencies and promote effective strategies for managing children's challenging behaviors. One of Washington state's funded sites offers classes in Spanish, which was an identified gap in their community. For families that have struggled with prior trauma related to violence, chronic stress, or homelessness, we fund an evidence-based intervention that helps families heal by fostering strong parent-child attachment, building skills to better regulate emotions and decreasing fear-based discipline practices. In a remote area of our state a local non-profit is adapting a model that has shown effectiveness in a large metropolitan area to support new mothers. The rural gatherings emphasize early attachment, adjusting to life with a new baby, and getting connected with other parents. This organization has intentionally provided concrete supports for families including food assistance, transportation and diapers. In the same rural community parents with toddlers or preschoolers learn about building social-emotional skills and early literacy skills in a parenting group tailored to meet their needs. With 29 federally recognized tribes in Washington state several of our funded programs are implementing curricula designed specifically for American Indian/Alaska Native families living on tribal lands or in large urban areas.

Across the various programs, parents often tell us they want to parent differently than they were parented. This takes learning, unlearning, and a great amount of practice. Services provided to new moms and expectant fathers build confidence and nurture parent-child attachment as they are rapidly adjusting to their new roles. CBCAP funding offers a unique opportunity to work with trusted community partners and implement specialized approaches that have promising results with specific populations. Washington state joins partners nationwide to build strong evaluation practices and build capacity to report how programs build protective factors with participating families.

Public Awareness

Another key prevention strategy is to build public awareness in an effort to reduce risk and create safe behaviors based on the best evidence available. Washington state has three ongoing public awareness campaigns which are widely integrated across our systems: Infant Safe Sleep, Speak Up When You're Down (Perinatal Mood Disorders/Postpartum Depression), and Have a Plan (Abusive Head Trauma Prevention). Washington state provides a statewide large-scale distribution as part of our birth registry system. 92 percent of the state's parent population (89,000 births per year) receive this information. Social workers, primary care providers, and early learning providers share safe sleep information to prevent infant fatalities related to unsafe sleep practices. We are now just days away from Child Abuse Prevention Month. In April, Prevent Child Abuse chapters, Trust and Prevention Funds, and CBCAP programs participate in a unified platform, the "Pinwheels for Prevention" campaign, to ignite and inspire everyday actions among parents, communities, and providers to ensure all children have a great childhood.

Perinatal Mental Health Community Capacity Building

Another of DCYF's specific efforts focuses on destigmatizing and reducing barriers that prevent families from seeking treatment for mental health issues. This effort includes building on the multi-systemic work to support Perinatal Mood and Anxiety Disorder (PMAD) awareness. These efforts include broad training for community members and partners on the unique characteristics of perinatal mood disorders, building resource guides and support groups. Besides creating

potentially life-threatening risks for moms, the effects of PMAD on maternal and family functioning can seriously undermine a child's healthy development if not treated properly. One mom in our state shared the important impact a support group had on her after she lost her job following the birth of her child due to lack of paid leave. These stresses caused anxiety and depression as she had to navigate the Supplemental Nutrition Assistance Program (SNAP), WIC, and other resources for the first time and she experienced challenges finding mental health service providers that would take Medicaid.

CBCAP Systems of Prevention Work

CBCAP state leaders work across systems to create conditions that better support families. In Washington state, the CBCAP partnership with the Temporary Assistance for Needy Families (TANF) program has fostered a strong two-generation approach informed by brain science to leverage funding for home visiting, parenting education, and skills-building for families receiving TANF benefits.⁴

Success in education and employment is coupled with support for the important role of parenting in breaking the intergenerational cycle of poverty.⁵ Working with partners in the corrections system has shaped an innovative approach to the reintegration of incarcerated parents into their communities with support for parenting and life skills.⁶ Current work in our new agency will help establish stronger early learning supports for families that have experienced complex trauma so that child care providers have access to wraparound supports for families and early childhood mental health consultation to support the well-being of children and their teachers.

CBCAP in Other States

This is just one example of how a state uses its CBCAP funding. Being fortunate to be part of Prevent Child Abuse America's 50-state chapter network and the National Alliance of Children's Trust and Prevention Funds, I am keenly aware of the great work being done around the country and in each of your own states.

The flexibility in CBCAP provides states with the ability to choose programs that make sense for their communities and to implement evidence-based, evidence-informed, and promising approaches. CBCAP awardees have the flexibility to tailor their program to serve the specific needs of their communities, identify target populations, and select which service delivery models best meet state and local needs.

These states are evaluating programs, measuring outcomes, meeting fidelity, and adhering to implementation science. They are working with evidence-based family life skills training programs to improve parenting skills, enhance family relationships, and increase children's social and life skills. They are working to increase resilience and reduce risk factors for substance abuse, aggression, depression, delinquency, and school failure as well as reduce child abuse and neglect by strengthening bonds between parents and children and increasing the use of positive parenting skills.

⁴[Cross-System Collaboration to Better Support Babies in Washington: Strengthening Partnerships Between Temporary Assistance for Needy Families and Home Visiting Systems](#)

⁵<https://www.clasp.org/publications/report/brief/tanf-and-first-year-life-making-difference-pivotal-moment>

⁶<https://cantasd.acf.hhs.gov/wp-content/uploads/Unlikely-Partnership-TK.pdf>

States need the flexibility to use federal funds to help families sooner—before serious danger arises or harm occurs. Washington state has taken this monumental step and is seeing new opportunities in the partnership between early learning, child welfare, and juvenile rehabilitation.

Statistics show, in 29 reporting states, that only 12.2 percent of the child abuse and neglect fatalities were known to Child Protective Services (CPS) in the five years immediately preceding the deaths.⁷ Extrapolated, that would suggest that 88.8 percent of those child abuse and neglect deaths were of children *never reported to CPS*. What this means is that we can't ensure the safety of our nation's children through monitoring after the fact. We must reform our systems placing value and emphasis on primary prevention strategies.

As Associate Commissioner Milner noted:

Tweaking what we have in place won't solve the problems...We need to change the focus of child welfare to primary prevention of maltreatment and unnecessary removal of children from their families. We can only break the cycle of family disruption and maltreatment by addressing the root causes of those situations.⁸

It is our belief that all parents can use support across the ever-changing periods of development, especially during the perinatal period when children are at the highest risk for maltreatment.

Research shows that the protective factors are linked to a lower incidence of child abuse and neglect and build family strengths and a family environment that promotes optimal child and youth development—this work is being done by CBCAP grantees successfully across the nation.

Reforms in the child welfare system need to include a primary prevention approach to child abuse and neglect. Those elements include reducing poverty, expanding parenting support services, addressing disparities, implementing coordinated multi-disciplinary efforts, and building evaluation capacity. If the current approach is modified by including preventative strategies, a deliberate reduction of child abuse and neglect becomes attainable. Efforts at the federal, state, and local levels need to address quality with the same emphasis as availability and accessibility. However, there are barriers to this success.

Unmet Need

Washington state receives more than \$1 million in requests we cannot meet each year. In FY 2017, we received 54 funding requests for community prevention programming, but we were only able to fund four new programs. Washington state is fortunate that our leaders have worked together to create efficiencies and to stretch these valuable dollars. However, as you have heard in my testimony, creating a robust community system of support for all families, service delivery, coordination, and prioritization of prevention is the only way to reduce the number of families who reach the point of needing the attention of the public child welfare and protection services.

In a recent analysis, we identified 23 small locales with the highest rates of abuse or neglect. In a strong system of prevention, we would work closely with each community and build community-driven interventions. This targeted universalism approach, where we can work to

⁷Children's Bureau, Administration for Children & Families, DHHS. "Child Maltreatment Report 2014." Published January 25, 2016.

⁸ "Trump's Top Child Welfare Official Speaks" The Chronicle of Social Change, November 6, 2017.

enrich the services available in communities at known risk, is prevention at its best, and it requires resources.

State Awards Vary Greatly

Utah has a population of approximately 3.2 million with a population-based allocation of CBCAP dollars of \$293,277 (2017). This amounts to *9 cents per person* in the state for family strengthening/prevention-based services through CBCAP/CAPTA.

South Dakota has a population of approximately 850,000 with a population-based allocation of CBCAP dollars of \$200,000 (the minimum amount any state receives). This amounts to *24 cents per person* in the state.

Funding can be used to improve the safety and stability of families by enhancing the capacity of communities to offer broad-based family and parental supports; continually improving systems through data analysis, aligning strategies across sectors to address barriers and create efficiencies; implementing and supporting strategic collaborations with traditional family-serving agencies and non-traditional partners; and engaging in multidisciplinary coordinating, monitoring, and reporting on strategies and outcomes.

Building Systems and Capacity, Evaluation, Evidence-Based (EB) and Evidence-Informed Approaches, Interdisciplinary Strategies, Implementation Science

The current approach for CBCAP funding allows states and communities to build new cross-system partnerships to advance policy and practice based on community experiences, local and state level data, and well-established and emerging research on child abuse and neglect prevention. CBCAP serves as a catalyst for—and an important supplement to—other related policy areas, including early childhood development, broad parenting supports, health care, mental health, substance abuse, jobs, and upward mobility, among many others.

By creating integrated networks of child and family services, communities have the resources to invest in infrastructure that link at all levels. Establishing these connections can help create the framework for the Family First Prevention Services Act (FFPSA), the SUPPORT Act, and other existing federal policies.

Programs in Washington state as well as across the country include a range of evidence-based and evidence-informed programming. In concert with the CBCAP requirements, states utilize CBCAP funds to both build capacity in communities and to implement rigorous programs and understand its impact on the families served. Flexibility in funding allows for continuing with these critical functions and continuing to innovate to meet the ever-changing needs of populations in the communities we partner with.

Conclusion

As you think about CAPTA reauthorization, picture this: it hasn't been reauthorized since 2010. I urge you to think about the children and think about what science tells us and what we know.

What Will it Take to Get There?

The involvement of health care and public health agencies and professionals is vital to safety for children. Well-coordinated interagency efforts are essential. We must change our current system so that it strengthens the resiliency of families as our primary intervention and gives children what they need to thrive.

The pursuit of the goal of strengthening families is through primary prevention, strong and responsive communities, collaborative efforts among organizations and groups whose work affects outcomes in child welfare, and increasing the well-being of children and families.

Every parent wants to be a good parent, they just need the tools to help get them there. Families describe this work as raising their children with opportunities to achieve their hopes and dreams. I say it helps families live their best lives. I appreciate Congress placing a high value on the importance of families.

Thank you for the opportunity to appear before you today. I appreciate your time and attention and I look forward to addressing any questions you may have.