

Key Hearing Issues

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Adverse Childhood Experiences

What are Adverse Childhood Experiences?

Adverse childhood experiences (ACEs) are traumatic experiences that occur in childhood before the age of 18. The CDC recognizes 10 specific experiences that are defined as ACEs. ACEs include experiencing violence, abuse, or neglect, witnessing violence in the home, and having a family member attempt or die by suicide. ACEs also include aspects of the child's environment that undermine a sense of safety, stability, or parental bonding. Studies on ACEs and adult health outcomes show that as ACEs increase, so does the risk of negative health outcomes, adverse impacts on learning, unhealthy coping methods, and involvement in the criminal justice system.

- Children in New Mexico may face further exposure to toxic stress due to historical and ongoing trauma related to multi-generational poverty and systemic racism. According to the Annie E. Casey Foundation, New Mexico ranks 49th in economic wellbeing with 30 percent of children living in poverty.
- In New Mexico, as many as one in seven children have experienced three or more ACEs. Nationally, one in 10 children have experienced three or more ACEs. Additionally, New Mexico has a below average rate of children experiencing no ACEs.

How ACEs Influence Health



Source: Centers for Disease Control and Prevention

How Can Adverse Childhood Experiences Be Prevented and Mitigated?

A growing body of research has made it increasingly apparent that ACEs can be prevented or the consequences mitigated by implementing evidence-based strategies. These strategies include:

- Strengthening economic supports to families through child tax credits, childcare subsidies, living wages, affordable housing developments, and paid parental leave policies;
- **Supporting parent stress reduction** through paid parental leave policies, skill-based parenting classes, and teaching developmentally appropriate behavioral expectations;
- **Ensuring a strong start for children** through effective home visiting models, affordable high-quality childcare, preschool programs, and family engagement;
- **Intervening to lessen harm** through enhanced access to primary care services, mental health services, school counseling and implementation of restorative justice practices;
- **Connecting youth to meaningful activities** through mentoring programs, after-school programs, tutoring, and summer learning activities.



What Has New Mexico Done to Address Adverse Childhood Experiences?

The Legislature has invested in evidence-based strategies to prevent and mitigate the consequences of ACEs. Examples of these investments include:

- **Early Childhood Education Funding** in New Mexico has grown from \$135.6 million in FY12 to \$507.8 million in FY22. Research shows expanding access to early childhood education is a promising pathway to reduce ACEs and mitigate their harmful effects. Home visiting programs fall under New Mexico's early childhood education funding and employ nurses, social workers, early childhood educators, and other trained professionals to visit families at home during pregnancy and early childhood. These programs have been found to reduce the likelihood of child abuse and neglect.
- **Childcare Assistance** is a subsidy program for families with children between the ages of 3 weeks to 14 years-old. Research suggests access to affordable, high-quality childcare can reduce child behavior problems, parental stress, and rates of child abuse and neglect. Utilizing federal emergency funds available through the American Rescue Plan, the Early Childhood Education and Care Department raised the income eligibility for childcare assistance from 200 percent of the federal poverty level, or \$53 thousand a year for a family of four, to 350 percent of the federal poverty level, or \$92 thousand a year for a family of four.
- State Earned Income Tax Credit (EITC) provides an additional benefit to low-income taxpayers by reducing state income tax liability. These tax credits are commonly used to support the economic security of low-income working families. Research suggests they encourage workforce participation and increase earnings. This can reduce parental stress and decrease the prevalence of ACEs. New Mexico is one of 20 states that has implemented a state-level EITC in additional to the federal EITC.
- **Paid Sick Leave** established through the *Healthy Workplaces Act* requires most employers to provide employees paid sick leave for circumstances related to an employee's or an employee's family's health or wellbeing. Although paid sick leave is related to family-friendly work policies, paid parental leave in addition to paid sick leave leads to better outcomes and research shows can prevent ACEs by reducing parental stress and protecting families from lost income.

How Are Other States Addressing ACEs?

To improve the lives of families and reduce the societal costs of ACEs, policymakers nationwide are exploring a variety of policies to prevent and mitigate childhood trauma.

- <u>Illinois</u> introduced a grant program to provide resources to schools to implement alternatives to discipline that include restorative-justice practices, mental health supports, and teacher training on trauma-informed approaches.
- <u>New York</u> requires ACEs training for child care providers that focuses on understanding trauma and nurturing resiliency.
- Connecticut enacted a law allowing school-based health centers to extend hours and provide services to students who do not reside in the school district where a health center is located.
- <u>Utah</u> authorized grants to provide targeted school-based mental health supports, including trauma-informed care and employment of a school counselor or social worker
- Nine states plus the District of Columbia provide a paid family leave program. <u>California</u> was the first state to authorize paid family leave and the legislation provides up to six weeks of wage replacement benefits to workers.

