PREVENT CHILD ABUSE AMERICA

CALL TO ACTION:
A COMPREHENSIVE PRIMARY PREVENTION AGENDA FOR THE BIDEN-HARRIS ADMINISTRATION
Overview

On January 20, 2021, President-elect Joe Biden will be sworn in as our nation’s 46th president, and Vice President-elect Kamala Harris will make history as the first Black and Indian American and the first woman to serve as vice president. This period of transition to new leadership will take place among a global pandemic and crisis for far too many families. Providing primary prevention strategies, such as voluntary evidence-based home visiting, increasing the economic supports to families, and strengthening family and parent support programs, can reduce the stress that families across the nation are under in these challenging times. If we act now, we’ll make sure that children and families can keep moving forward, even during this difficult time.

Children have tremendous potential—which our society needs—and which we have a shared obligation to nurture and protect. The research is clear that investing in families and providing prenatal and early childhood support improves birth outcomes, child development and educational achievement, and reduces premature mortality, mental illness, violent crime, substance abuse and addiction, and child abuse and neglect.

Injury and violence—spanning from drug overdoses, child abuse and neglect, domestic violence, and many other events—affect people in all stages and from all walks of life and are a critical public health threat to all Americans. Victims of injury and violence suffer physical, mental, and/or emotional health consequences, and society bears its share of the burden through medical expenses, foster care, and work loss costs.

Adverse childhood experiences (ACEs) are traumatic events that occur in childhood. ACEs can include violence, abuse, and growing up in a family with mental health or substance misuse problems. Preventing ACEs could reduce a large number of health conditions:

- Up to 21 million cases of depression
- Up to 1.9 million cases of heart disease
- Up to 2.5 million cases of overweight/obesity

At least 5 of the top 10 leading causes of death are associated with ACEs and are among the top killers for Americans. Indisputably, the future of America depends on what we do for our children today.

We know that injuries and violence share many underlying causes. To better understand and address these relationships, several federal agencies play unique roles in supporting research, as well as developing and disseminating evidence-based programs to prevent injury and violence, including:

- Centers for Disease Control and Prevention (CDC)
- Health Resources and Services Administration (HRSA)
There is a major opportunity for these departments and agencies to work collaboratively with coordinated strategies to prevent injury and violence from occurring in the first place. The recommendations contained in this document address the various needs of existing programs and propose new efforts across the federal government that work to prevent injury and violence. The investments noted are intended to meet the demand that exists to address injury and violence. PCA America is looking forward to working with the Biden-Harris administration to accomplish these critical priorities.
# Prevent Child Abuse America

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Introduction

Prevent Child Abuse America (PCA America) is the nation’s oldest and largest non-profit organization dedicated to the primary prevention of child abuse and neglect. Founded in 1972 on the belief that every child should have an equal opportunity for healthy development and that no child should suffer from abuse or neglect, PCA America advocates for policies and services that strengthen families and communities, promote healthy child development, and prevent child abuse and neglect before it occurs. Additionally, PCA America supports services that improve child well-being through an extensive network of chapters in nearly all 50 states and nearly 600 Healthy Families America (HFA) evidence-based home visiting program sites. Collectively, HFA serves 70,000 children and families who receive personalized in-home support from our HFA program sites, which conduct over 1,000,000 home visits each year.

That’s why we at PCA America think it’s time that policymakers create a national strategy for our children and families. PCA America strongly believes that all families need help and support at some point, and certainly, this is a strategy that starts with a shared vision for the healthy development of our nation’s children.

Strategies that start early to prevent adverse childhood experiences and promote safe, stable, nurturing relationships and environments can make a bigger impact than responding after trauma occurs.

We can ensure that every child has the opportunity to grow up healthy and safe — regardless of race, income, gender, sexuality, religion, disability, or immigration status. We encourage you to be bold in your plan for America’s future. We urge you to enact policies and fund programs that are more than a list of actions for federal, state, and local governments and communities. It should include a blueprint that methodically lays out what constitutes well-being, solutions for how to achieve it, and the funding necessary to make these efforts a priority. These primary prevention priorities are set forth in this “Call to Action: A Comprehensive Prevention Agenda for the Biden-Harris Administration,” which provides specific policy proposals that would invest in our children, families, and their communities to advance their well-being and futures.

It is long overdue that our nation looks toward strategies that improve our return on investment and places a greater emphasis on prevention-related activities that help strengthen and support families across the country.
CALL TO ACTION: A COMPREHENSIVE PRIMARY PREVENTION AGENDA

Executive Branch Actions

I. Reverse Harmful Policies of the Past Administration

**Recommendation 1: End inadmissibility on Public Charge Grounds Rule**

On October 10, 2018, the United States Department of Homeland Security (DHS) published policy changes to the ‘public charge’ rule, enacting changes to current policy and new standards for individuals and families seeking permanent residency, including American-citizen children. This expanded definition penalizes the legal use of public services and programs presently available to immigrant families, such as Medicaid, the Supplemental Nutrition Assistance Program (SNAP), and housing assistance, furthering disparities for those seeking lawful entry into the United States. Penalties for the use of necessary public resources would negatively impact immigrant families, including the long-term adverse impact on the health and well-being of immigrant and American-citizen children already living in the United States.

In particular, the ‘public charge’ rule brings far-reaching negative consequences for families trying to meet their basic needs by seeking public support and services. Fear of using public resources could deter families already residing in the United States, as well as recent United States citizens, from accessing critical programs. Children in immigrant households facing these choices will suffer from the loss of stability and security in their family. Additionally, children with limited access to nutrition, high-quality health care, and safe housing are adversely impacted throughout their lives and the immediate risk of child neglect or abuse increases in the face of such significant family stress.

PCA America is concerned about the long-term negative impact of this policy change on family and child well-being and strongly advises against continuing to implement the policy changes as published, including attempts to add programs such as Children’s Health Insurance Program (CHIP) to the proposed rule change. Equitable access to public resources for all children and families, without fear of reprisal or loss of residency or status, benefits everyone, particularly our most vulnerable, our children.
Recommendation 2: Rescind administration's Executive Order on combating race and sex stereotyping and develop a White House-level Task Force to address issues related to health disparities and racial inequities

We have serious concerns about Executive Order 13950, Combating Race and Sex Stereotyping, signed on September 22, 2020. PCA America has a strong commitment to advancing diversity, equity, and inclusion, and we urge the new administration to immediately rescind this Executive Order (EO). The EO is dangerous because it would ban certain words and concepts from being used in trainings on racial and gender diversity, equity, and inclusion for federal contractors and grantees. It would also have a chilling effect on the work of nonprofits, as we confront systemic racism and gender inequity in our communities. Already, federal agencies have been cancelling and changing trainings on implicit bias and sexual harassment. In the coming weeks, nonprofits that renew federal contracts and grants could see new language that forbids trainings and the use of certain terms such as “implicit bias.”

Among other things, the EO bans the use of certain terms, including “critical race theory,” “white privilege,” “intersectionality,” “systemic racism,” and “unconscious bias” in materials and trainings. Rather than being “divisive concepts,” these are core principles of equity and inclusion developed and confirmed through decades of research and scholarly articles by academics and practitioners that cannot simply be ignored or dismissed.

Additionally, the EO not only raises questions regarding impact and workability across a broad number of contracts and grants administered by various agencies, more importantly, it will upend the progress that organizations have made in advancing racial justice and gender equity work within their organizations, programs, and communities. The EO’s negative ripple effect stands contrary to the mission, goals, and programs of nonprofits and warrants deep concern.

PCA America makes racial equity a priority and underlying theme in all issues that we engage in. We believe that it is not possible to properly address the root causes of the stresses that often lead to child abuse and neglect without working to outright dismantle the root causes of societal systemic and structural racism and discrimination. Racism manifests itself and directly affects communities of color in numerous ways, and includes discrimination in housing, education, the justice system and economic mobility or lack thereof, among others. These historical discriminatory practices directly impact children and families and are intertwined with familial stress. All of PCA America’s programs and efforts, such as Healthy Families America, our evidence-based home visiting program, work to promote racial and health equity for all families.

With respect to the issue of health disparities and racial inequities in the United States, PCA America believes that to be truly successful, we must actively dismantle the root causes of stress and anxiety that can lead to child abuse, including systemic, structural racism and
discrimination. Communities of color have long experienced disparities and inequities related to equal access and quality of care, which have contributed to high rates of morbidity and mortality in these communities. The issue of racial and economic equity and civil rights justice is one of the key issues you address in your platform. You highlight your administration’s plan to increase economic, housing, educational, and business opportunities for everyone, particularly for racial minorities who have been historically cut off and given far less opportunity for success. **PCA America applauds these ideas and also recommends the development of a White House-level task force to study and begin addressing issues such as cultural and historical bias surrounding racial inequity and health disparities.**

**Recommendation 3: End Zero Tolerance and Family Separation immigration policies**

As a nation, we must set the highest standard possible in our unwavering pursuit to prevent the abuse and neglect of children. PCA America recognizes the proven science surrounding toxic stress and the lifelong negative consequences trauma can have on a child and their brain development. Data overwhelmingly demonstrates that putting a child in a confusing and frightening situation, away from their parents or caregivers, can and will lead to long-term, negative health outcomes. Despite the June 2018 emergency declaration of an end to immigration policies that lead to familial separation, more than 2,000 unaccompanied children have been expelled from the United States. **PCA America strongly recommends an immediate cessation of all policies that lead to unnecessary family separation, including federal immigration policies.** PCA America is extremely pleased to see your pledge to “immediately reverse the Trump Administration’s cruel and senseless policies that separate parents from their children at our border.”

**II. Cross Cutting**

**Recommendation 4: Establish a White House Office on Children and Youth and a White House Conference on Children and Youth**

Children, youth, and families are at a time of crisis across the nation as the health, economic, and social impacts of the COVID-19 pandemic take a heavy toll. This crisis compounds the glaring disparities that have existed in this country for centuries. We are at a unique crossroads, presented with an opportunity to rebuild better systems and create more prosperous futures for ALL of our nation’s children with an eye toward promoting long-term racial, ethnic, and socioeconomic equity. To realize this opportunity and reimagine our systems for optimal health, **PCA America recommends the establishment of a White House Office on Children and Youth, and a Conference on Children and Youth to elevate the needs of children, youth, and families.**
In concert with the President, Vice President, Cabinet Secretaries, and Congress, the office would host a White House Conference on Children and Youth, create a national children’s strategy and children’s budget, and, ultimately, drive long-term outcome improvement for the nation’s children and youth. Well over half of states across the United States and numerous peer countries have implemented children’s cabinets, ombudsmen, and other coordinated structures that have elevated the needs of children and youth, and positively impacted health and well-being outcomes. The office would also develop and advance an aspirational yet achievable vision, including the related outcomes, goals and metrics, to make measurable progress toward rebuilding systems for children.

**Recommendation 5: Create a White House-level task force that will identify an overarching strategy for preventing child abuse and neglect and a national commitment to well-being**

We must rethink child welfare by creating the conditions for strong, thriving families where children are free from harm. A national commitment to well-being will work across the public, private and philanthropic sectors to assist jurisdictions in developing more just and equitable systems that benefit all children and families and break harmful intergenerational cycles of trauma and poverty. Now is a time to urgently build a child and family well-being system that propels families to grow and thrive together and help ensure all children, Black, Brown and Indigenous families who have been overrepresented in our systems, have the opportunities they need and deserve to thrive while preventing child maltreatment and unnecessary family separation.

Federal, state, and local governments and tribes should better coordinate child abuse and neglect, childhood violence prevention and early intervention approaches among themselves and with non-governmental organizations, particularly as it relates to school/community and public/private sector coordination. In addition, the federal government should include incentives in relevant federal grant applications for states and localities to demonstrate collaboration in service delivery. Federal agencies should be required to coordinate their grant-making, research, and programmatic work related to child abuse and trauma, when feasible, and promote two-generation solutions. The federal government should also partner with child- and family-serving federal agencies, jurisdictions, and their diverse community stakeholders. This partnership would refine and prove the concept, relying heavily on primary and secondary prevention efforts to ensure a full continuum of supports to strengthen community protective factors, lift the voice of families, enhance parental protective capacities, and mitigate associated risk factors.

**PCA America recommends the creation of a White House task force to identify specific child abuse and neglect prevention goals, make recommendations on how federal agency resources can be used to meet those goals, and provide guidance to state and local partners.** The task force should develop recommendations to reduce child abuse and neglect for federal, state, and local agencies, and private sector and nonprofit organizations,
including recommendations to implement a comprehensive national strategy and develop guidelines for the type of information that should be tracked to improve interventions to prevent child abuse and neglect.

**Recommendation 6:** Use bully pulpit and initiate a public awareness campaign that focuses on prevention of child abuse and neglect, the effects of trauma on children, and available resources

Broad-based public awareness campaigns, such as those to reduce cigarette smoking or increase the use of seatbelts in cars, have contributed to significant changes in behavior. In that same vein, we must work to change accepted norms, behaviors, and beliefs concerning child abuse and neglect, childhood trauma, and violence. Doing so will require not just raising awareness and knowledge among practitioners, but also empowering community groups to conduct education and organizing efforts. Federal, state, and local governments and tribes should support public education and engagement campaigns to increase awareness of the adverse effects of childhood exposure to violence and trauma and educate the public about community-based programs and solutions. The campaigns should describe actions that people can take to prevent harm and promote effective solutions. Strategies to reduce child abuse and neglect can range from a focus on individuals, families, and relationships to broader community and societal change. This range of strategies is needed to better address the interplay between individual-family behavior and broader neighborhood, community, and cultural contexts. **We recommend the White House, in coordination with states, conduct a mass media campaign that highlights the impact of ACEs and helps to reduce the stigma attached to those who seek professional help and resources.**

**Recommendation 7:** Declare child abuse and neglect a public health emergency by the U.S. Surgeon General

Public health is what we, as a society, do collectively to assure the conditions in which all people can be healthy. The focus of public health is on the health, safety, and well-being of entire populations. A public health approach also emphasizes input from diverse sectors including health, education, social services, justice, policy, and the private sector. We believe and recommend that child abuse and neglect should be declared a public health emergency by the U.S. Surgeon General. The United States needs a systematic approach to creating and sustaining public and political will for investment in healthy child development. This approach starts with a shared vision for America’s children, recognizing the interconnectedness and shared root causes of violence and early life adversity. Along with the U.S. Surgeon General’s declaration of child abuse and neglect as a public health issue, **PCA America recommends that federal agencies, especially the Department of Health and Human Services, Centers for Disease Control and Prevention (CDC), Administration for Children and Families (ACF), Health Resources and Services Administration (HRSA), Substance Abuse and Mental Health Services Administration (SAMHSA), Department of**
Education, Department of Housing and Urban Development, Department of Labor and Department of Justice, include in their focus a holistic public health approach in an effort to decrease the unacceptably high incidence of child abuse and neglect and violence targeted at children and families in our nation.

Legislative Branch Actions

I. Department of Education

**Recommendation 8: Support increased funding to provide greater access to affordable, high-quality child care and early childhood education**

High-quality early childhood programs promote safe and nurturing family environments and focus on the physical, social, and emotional development of young children. This is especially important for children in families with less access to resources, who often face greater obstacles to success. Investing in high-quality early childhood education is one of the most effective ways to break the pervasive cycle of poverty and ensure equal opportunity for all. In fact, there is an estimated cost-benefit ratio of approximately $7 for every $1 invested in high-quality early childhood experiences for at-risk children. Children who are able to participate in early childhood education programs grow to be healthier, graduate from high school and college at higher rates, and are employed at higher levels in the workforce. We were so pleased to read that in your campaign platform you plan to “ensure access to high-quality, affordable child care and offer universal preschool to three and four year olds through greater investment, expanded tax credits, and sliding-scale subsidies.” **PCA America recommends dramatically increased investment in child care (at least $50 billion to keep the industry solvent through the pandemic and recession) and early education, particularly for low- and middle-income families.**

**Recommendation 9: Provide for a trauma-sensitive and coordinated process of responding to and reporting child abuse and neglect for all child-serving professionals**

States and other accrediting bodies should support and encourage initial training and ongoing professional learning of child-serving professionals (including teachers, school counselors, school nurses, social workers, bus drivers, lunch personnel, school administrators, principals, pediatricians/clinicians, behavioral/mental health professionals, law enforcement officials, and juvenile justice personnel) that focuses on how to recognize and respond to children’s exposure to violence and other challenges (such as poverty, homelessness, and neglect) that could result in trauma. Further, this needs to be done through a coordinated and trauma-sensitive manner of responding to and reporting child abuse and neglect.
The instruction should be informed by child and adolescent development research, including effects that ACEs have on brain development, protective factors, and how to build resiliency. Federal agencies should provide resources and technical assistance so that all child-serving professionals can receive appropriate pre-service training, in-service and/or continuing education, and support related to youth violence and trauma.

The federal government should support these efforts both financially and by disseminating evaluation findings regarding best practices. Further, the federal government should provide financial support for professional societies and associations to develop and disseminate standards for providing comprehensive specialized supports for children. **PCA America recommends coordination across agencies to develop a framework of mandatory reporting that includes training on implicit bias, identification of family need (to avoid child welfare referral), and pushes forward the need for "mandatory supporters" versus mandatory reporters of child abuse and neglect.**

** Recommendation 10: Fund legislation to better equip states, nonprofit educational agencies and caregivers to increase awareness and prevention activities to prevent child sexual abuse**

Legislation should fund and require states to train all educational personnel, including teachers, principals, paraprofessionals and aids, bus drivers, janitorial staff, and other school leaders, on ways to prevent, recognize, and report the suspicion of child sexual abuse. Any policy should include core principles including: 1) providing funding, 2) required training for both adults and children, and 3) any training or education should be required to meet an evidentiary standard.

Additionally, the funding legislation should allow nonprofit educational agencies to use funding for child sexual abuse awareness and prevention programs or activities, such as programs or activities designed to provide trauma-informed and developmentally and age appropriate instruction for students and all educational personnel in child sexual abuse prevention. It should also provide information to parents and caregivers of students about child sexual abuse awareness and prevention, including how to protect a child from being sexually abused in person and/or on any technological communication devices. **PCA America recommends funding be provided to better equip states, nonprofit educational agencies, and parents or guardians with awareness and prevention supports targeted towards preventing child sexual abuse.**
II. Department of Health and Human Services

CHILD AND FAMILY WELL-BEING

**Recommendation 11:** Reauthorize and increase funding for the Maternal, Infant, and Early Childhood Home Visiting Program

The federal government should support states, local jurisdictions, and tribes in providing parents, legal guardians, and other caregivers the resources necessary to help their children thrive. A multi-generational approach to comprehensive and evidence-based services promotes positive parenting, reduces inequities, enhances family cohesion, and interrupts the cycle of intergenerational trauma.

Currently, however, evidence-based home visiting and MIECHV program funding reaches only an estimated 3% of families in need. MIECHV is the cornerstone of evidence-based public policy and has widespread bipartisan support. The program builds upon decades of scientific research that shows a positive return on investment to society and taxpayers through improved health, education, and employment outcomes, while reducing mental health, special education, and criminal justice costs and dependence on welfare and involvement with child protective services.

In addition to the benefits of evidence-based home visiting more broadly, PCA America is concerned about recent studies demonstrating the high incidence of maternal mortality among women of color and firmly believes that voluntary evidence-based home visiting is an important tool to address this serious health issue. Evidence-based home visiting empowers, educates, and builds resiliency in mothers facing a variety of adverse circumstances that affect their health in the perinatal period and into their child’s early years. Evidence-based home visiting provides supports that impact positive changes for families and provides a practical tool for combatting the unacceptable rate of maternal mortality and morbidity.

Enacted in 2010 as part of the Affordable Care Act, MIECHV has been funded at $400 million annually since 2013. Based on pre-pandemic estimates, this funding reaches three to five percent of eligible families each year. PCA America **applauds your campaign pledge to double home visiting funding. To reach more eligible families and meet anticipated increased need brought on by the COVID-19 pandemic, PCA America and the national Home Visiting Coalition recommends scaling up MIECHV over the next five years with increases of $200 million annually, arriving at $1.4 billion by 2027.**

**Recommendation 12:** Modify Medicaid and extend services to ensure children and their parents receive necessary health services

Decades of research have demonstrated that the parent-child dyad and the environment of the family—which includes all primary caregivers—are at the foundation of children’s well-being and healthy development. PCA America recommends modifying Medicaid and child
welfare financing formulas to extend services to parents to address their own need. These would include improved guidance to be given to states regarding the use of Medicaid for wrap-around services, including evidence-based home visiting, where it is permitted and clearer guidance for what can be used to fund services such as evidence-based home visiting services, mental health treatment, substance abuse screening and treatment, and health screenings.

Additionally, the connection between community organizations and programs like the Early Periodic Screening, Diagnosis, and Treatment (EPSDT) Program should be improved. This child health component in Medicaid is required in every state and designed to improve the health of low-income children by financing appropriate and necessary pediatric services. Questions have been raised regarding whether it has been fully implemented and about challenges faced at the state implementation level. The Office of Inspector General at the U.S. Department of Health and Human Services (HHS) indicates that health screenings have increased (nationally) from 56% in 2006 to 63% in 2013, but are well below the HHS required goal of 80% participation. In nine states 76% of eligible children did not receive a single screening. Overall, 32 million children are eligible for the mandated screenings and medically necessary services to correct and ameliorate health conditions.

PCA America recommends clearer guidance be provided on the allowance of Medicaid use to fund services such as evidence-based home visiting. Further, the EPSDT program could be reviewed and expanded to allow screenings for parents and/or caregivers, and allow for the inclusion of screenings for social determinants of health such as maternal depression, household violence, and substance abuse.

** Recommendation 13: Expand funding for the Child Abuse Prevention and Treatment Act**

The Child Abuse Prevention and Treatment Act (CAPTA) is the only federal legislation exclusively dedicated to preventing, assessing, identifying, and treating child abuse and neglect—the continuum of child maltreatment services and supports. Community Based Child Abuse Prevention Grants (CBCAP) provide funding to all 50 states for the sole purpose of preventing child abuse and neglect, including key services like state helplines, voluntary evidence-based home visiting programs, parent support programs, distribution of food and medication, family resources centers, child care, respite care services, services specific to domestic violence, and coordination and connection with mental health and substance misuse services, among others. Additionally, CBCAP supports community-based services that are trusted by families, and its infrastructure helps to ensure that funding gets to the communities that need it most. Very few resources are allocated to the prevention of child abuse and neglect, and, instead, large sums of money are spent each year on child welfare services, often after child maltreatment has occurred. Nearly $30 billion is spent a year on child welfare services, yet CBCAP services—the largest dedicated federal source for primary prevention funding for child abuse and neglect—is funded at a substantially lower rate of just
under $56 million a year. **PCA America recommends a comprehensive finalized reauthorization and increased funding for CAPTA to $540 million annually, divided into $270 million for Title I State Grants and $270 million for CBCAP Grants. We also strongly recommend that the Department of Health and Human Services make an adjustment to allow for an increase in the minimum grant allotment to less populated states.**

**Recommendation 14: Increase funding for child abuse prevention programs in the Centers for Disease Control and Prevention**

Adverse childhood experiences, or ACEs, are defined as traumatic events that occur in childhood (0–17 years), including experiences like violence, abuse or neglect, witnessing violence in the home, having a family member attempt or die by suicide, or growing up in a household with substance misuse and mental health problems. ACEs are linked to chronic health problems, mental illness, and substance misuse in adulthood. Preventing ACEs could reduce a large number of health conditions, including up to 21 million cases of depression and 1.9 million cases of heart disease, and impact education, employment, and earnings potential. **PCA America recommends a concerted governmental effort to decrease the high incidence of adverse childhood experiences by substantively investing in the Center for Disease Control and Prevention’s Division of Violence Prevention, which incorporates items such as child sexual abuse prevention research, ACEs, and the Essentials for Childhood Framework.**

We request $33 million for the Essentials for Childhood framework to expand from seven funded states to all 50 states, which we hope to achieve incrementally; costs include 50 states, Washington D.C., and seven territories for $33 million.

We urge Congress to make it a priority to include $10 million in funding for the CDC to expand research for the development, evaluation, and dissemination of child sexual abuse prevention practices, including the thoughtful development and rigorous evaluation of primary prevention interventions for child sexual abuse.

**Recommendation 15: Expand place-based strategies and fully fund Thriving Families, Safer Children**

The U.S. Children’s Bureau, Casey Family Programs, the Annie E. Casey Foundation and Prevent Child Abuse America® are partnering to launch a national effort to prove it is possible to fundamentally rethink child welfare by creating the conditions for strong, thriving families where children are free from harm. This first-of-its-kind effort — Thriving Families, Safer Children: A National Commitment to Well-Being — will work across the public, private and philanthropic sectors to assist jurisdictions in developing more just and equitable systems that benefit all children and families and break harmful intergenerational cycles of trauma and poverty.
Thriving Families will help select jurisdictions move from traditional, reactive child protection systems to systems designed to proactively support child and family well-being and prevent child maltreatment and unnecessary family separation. This multiyear commitment will provide resources and support from the four partners and other relevant child and family-serving federal agencies, jurisdictions, diverse community stakeholders and the public, private, faith based and philanthropic sectors to create more just, equitable and humane child and family well-being systems. Work will focus on creating and enhancing networks of community-based supports and aligning government resources to provide a full prevention continuum that strengthens community protective factors and parental protective capacities and mitigate associated risk factors.

In addition, prevention strategies that include place-based initiatives allow communities to align and integrate cross-system efforts. Initiatives that have shown promise and have current funding streams that are being implemented through rigorous evidence-based and evidence-informed models include the Promise Neighborhoods programs and Project Launch initiatives. They aim to target high-risk communities and transform them by increasing access to support services. The plans must include a proposal to expand, enhance, or modify an existing network of programs and services centered on strategies and elements with measurable outcomes. Such plans should include indicators of need and/or a needs assessment. Further, these plans should also leverage resources and be selected based on availability of existing neighborhood assets and services that significantly increase the proportion of children and families served by the complete continuum. Finally, these assets and services must be taken to scale over time. PCA America recommends increased funding and expansion of similar place-based prevention programs, and pilot projects.

CRITICAL FAMILY ECONOMIC SUPPORT SYSTEMS

 Recommendation 16: Support Family Medical and Sick Leave for workers

Paid family medical and sick leave policies help working people care for a new child without jeopardizing their economic security and are significantly associated with reductions in hospitalizations for abusive head trauma, higher rates of successful breastfeeding and maternal health, and lower rates of family stressors and risk factors. Studies show that paid leave improves worker retention and reduces turnover costs citing that new mothers who take paid leave are more likely than mothers who take unpaid leave or no leave to be working again after childbirth and return to the same employer. PCA America applauds your “Build Back Better Platform,” wherein you propose 12 weeks of paid medical and family leave. **PCA America recommends substantive federal laws that provide family medical and sick leave for workers. This would include providing at least 12 weeks of paid medical and sick leave with reimbursement levels that allow for all families, including those with low incomes, to take advantage of the policy.**
**Recommendation 17: Mitigate child poverty**

One in five babies and toddlers in the U.S. live with families whose incomes are below or near the poverty line. Our persistently high level of child poverty proves we are not doing enough to ensure that every child has a fair shot at success. Moreover, due to COVID-19 and significant rises in unemployment and poverty, 25% of children nationally are projected to experience food insecurity. The National Academies of Sciences, Engineering, and Medicine released a landmark consensus study on child poverty that confirms that child poverty is a solvable problem when there is the political will to address it. **PCA America recommends that our nation’s economic policies target the goal of improving the financial circumstances of the high percentage of children living in poverty in the United States.**

Stress associated with food insecurity, living in impoverished neighborhoods or in dilapidated housing, unstable job security, and lack of affordable child care can have an impact on a parent’s ability to raise their children. According to the National Alliance of Children's Trust and Prevention Funds, "The effect of poverty supersedes all other risk factors of child neglect. A lack of adequate resources in any of the essential dimensions diminishes the family's ability to carry out its mission. Without adequate income, the likelihood of getting necessary healthcare, good housing, adequate education, or any other opportunities diminishes substantially. The resulting tension increases the likelihood of instability in relationships among family members, further decreasing the family's ability to maintain an optimal environment for healthy development." That is why it is imperative there is research to outline these risks and to help study and identify solutions to combat the impacts it has on child abuse and neglect.

**Recommendation 18: Support substantive funding in any Covid-19 stimulus package similar to the House passed HEROES Act**

Support one-time emergency funding of $1 billion for Community Based Child Abuse Prevention (CBCAP) grants and $100 million for the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) program in a Covid-19 Stimulus Package.

We urge you to consider the needs of children, one of the most vulnerable populations in this crisis. Parenting itself is a challenge. And circumstances undoubtedly determine just how difficult it can be as a parent—even without the added stress of uncertainty, social isolation, job loss or reduction in wages, or inadequate food and shelter.

As parents continue to experience lost wages due to reduced work hours, lack of childcare, or budgets being stretched, parental stress increases. Access to concrete supports can be instrumental in lowering familial stress and incidence of child abuse and neglect. For these reasons, we urge you to support the incorporation of policies in any COVID-19 economic stimulus package that increase the economic self-sufficiency of families and alleviate some parental stress, which will assist towards establishing more stable households and augment key factors that protect children.
Additional key investments in prevention services for families is essential to supporting communities by allowing for greater service delivery to address the needs of vulnerable families at the state and community levels.

Among many critical items in coronavirus emergency relief funding, PCA America strongly recommends the inclusion of one-time emergency funding $1 billion for CBCAP grants and $100 million for evidence based home visiting and the MIECHV program. PCA America greatly appreciates the support for substantive COVID-19 emergency funding you have demonstrated in your campaign platform.¹

¹ PCA America participated in the creation of policy recommendations included in both the Safe, Healthy, and Ready to Learn: Policy Recommendations to Ensure Children Thrive in Supportive Communities Free From Violence and Trauma and Injury and Violence Prevention Network's Prevention Plan and the federal Commission to Eliminate Child Abuse and Neglect Fatalities Report and adapted some of our recommendations from these joint efforts of leading national and state organizations.