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ALASKA STATE LEGISLATURE



REPRESENTATIVE GERAN TARR

HCR3

"Proclaiming April 2017 as Child Abuse Prevention Month; and proclaiming April 10, 2017, as Go Blue Friday"

Sponsor Statement

Child abuse in Alaska is a chronic and devastating problem. In 2014, the Office of Children's Services statistics showed that there were 40,000 allegations of child maltreatment, meaning abuse or neglect of a person under 18 years of age.

Children subject to abuse are more likely to become abusers themselves. They are also 9 times more likely to engage in criminal and other anti-social behavior than children who do not experience neglect. Emotionally and physically, abuse has long-term effects including improper brain formation, an inability to trust, low self-esteem, and an increased vulnerability to post-traumatic stress disorder, sexually transmitted diseases, heart disease, cancer, and depression.

Every child deserves a loving family, a safe home, and the opportunity to grow into an upstanding and responsible member of society. We have to work together to support our children.

This resolution proclaims April 2017 as Child Abuse Prevention Month in an effort to raise awareness of child abuse nationally and in-state. In 1983, the U.S. Legislature proclaimed April the first National Child Abuse Prevention Month to show a commitment to identifying and implementing solutions to end child abuse. As a result, child abuse and neglect awareness activities are promoted across the country during April of each year. Many governors also issue proclamations to encourage initiatives and events in their respective states.

The high rates of child abuse in Alaska must stop, and recognition and an open discussion are ways to assist in breaking this painful cycle. I invite all citizens in Alaska to join me on April 10th, 2017 to wear blue as a symbolic gesture that child abuse will not be tolerated and we stand together in putting an end to the abuse.

Patrick M. Anderson

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Good afternoon Chairman Sponholz and members of the House Health and Social Service Committee.

This is a quote I use from a successful comedian to help others understand that just because we are successful, it doesn't mean we have escaped the ravages of child abuse.

Jerrod Carmichael, Comedian and Actor

“All of my life is just me trying to overcompensate for a poor childhood. I buy a lot of shoes, a lot of sneakers. In fact, the next time you see like a young black guy in new shoes, stop and ask him who hurt you. I'm telling you, every pair of Jordan's comes with a story. Every pair.”

My name is Patrick Anderson, Tlingit/Aleut and licensed as an attorney (inactive) in Alaska. I am a Senior Research Fellow for the Sealaska Heritage institute in the area of childhood trauma and health restoration. I have been engaged in research and advocacy around ADVERSE CHILDHOOD EXPERIENCES (or ACE's) since 2008, when I was the CEO of an Alaska Native Rural Health System. As a consequence of my advocacy, I was invited to serve as members of both the American Indian/Alaska Native Task Force on Suicide Prevention and president of the Native American Children's Alliance (or NACA).

I also suffered 6 ACE's while growing up. According to the original ACE Study, that means I am part of a group with an average 20 year shorter life expectancy than people who have none. And I spent time in the foster care system, both at the Seattle Youth Detention Center, a more terrifying experience than living at home, even given the reasons I was taken from my mother. And in the foster home I stayed in after SYDC, a 6 foot length of garden hose was the method of discipline. The experiences I have had, and there are many more, are the reason I have spent the past 13 years of my life seeking solutions, both through better management, and through addressing the Root Cause of our health and behavioral issues.

NACA is a national organization dedicated to implementation and operation of Child Advocacy Centers (CAC's) in Indian Country. Children who are sexually abused face considerable issues when their case is prosecuted. The pressures of being interviewed, having physical evidence gathered from their body and facing the prospect of testifying are terrorizing events, and we must have services in place that recognize the traumatizing effect of both the criminal act and our systemic response. I have been invited to speak, as President of NACA, about considerations of childhood trauma after sexual assault at the upcoming 33rd International Symposium on Child Abuse in Huntsville, Alabama.

Violence and trauma is also recognized as a huge threat to children worldwide, and has been reported in the United Nations Secretary-General's report on violence against children. Availability of services and mental health treatment is a high priority for the U.N. It should be for our Governor and Legislature as well.

For the long term, the fact is that by being abused, sexually, physically or emotionally, children already have at least one of the 10 Adverse Childhood Experiences (ACE's) that contribute to poor health, negative behavioral and adverse societal issues. For abused children, their likelihood of having multiple ACE's is higher. According to the original study, if you have one, there is an 87% chance you will have a second and a 50% chance you will have 3 or more.

While we cannot stop transmission of trauma that has already been acquired, we can plan appropriate intervention for children and their parents. The first step to planning for intervention is spreading knowledge about the issue, and adoption of appropriate policy guidance through statutes, regulations and relationships among organizations involved with the care of an abused child. Declaring April as a month to highlight the problems with child abuse is a big step to spreading knowledge about child abuse, and I completely endorse enactment of HCR 3.

I also want you to know that Alaska Natives suffer disproportionately from the impact of child abuse and trauma. Information gathered from the 2013 Behavioral Risk Factor Surveillance System (BRFSS) discovered that Alaska has a rate of ACE's higher than average. For Alaska Natives, 27.9% have 4 ACE's. In the original study, 6% of the population had 4. Another 11% had 5+. I have been working since 2008 to have Alaska Native organizations recognize the huge impact of childhood acquired trauma on our adult population, and to adopt a more compassionate approach to dealing with the problems caused by ACE's. I have also supported HCR 2, addressing ACE's in Alaska, and presented testimony last year during a hearing of this committee. I encourage you to approve HCR 2 along with HCR 3.

As we move forward, I would ask member of this committee to help preserve state and federal programs that address childhood acquired trauma, and to keep an open mind about what is possible. We can have a future with substantially reduced health issues, fewer additions and behavior issues, prison populations, and crime. We can have increased productivity, lowered costs for consumers and greater safety in all aspects of our life. I have been sharing a story of hope and prosperity through addressing the issues that cause childhood trauma since 2008.

Recognizing Child Abuse Prevention Month can help advance that future.

Thank you for considering HCR 3.

July 2013

Disponible en español
https://www.childwelfare.gov/pubs/factsheets/sp_long_term_consequences.cfm

Long-Term Consequences of Child Abuse and Neglect



For fiscal year (FY) 2011, States reported that 676,569 children were victims of child abuse or neglect (U.S. Department of Health and Human Services, 2012). While physical injuries may or may not be immediately visible, abuse and neglect can have consequences for children, families, and society that last lifetimes, if not generations.

What's Inside:

- Factors affecting the consequences of child abuse and neglect
- Physical health consequences
- Psychological consequences
- Behavioral consequences
- Societal consequences
- Resources
- References



Use your smartphone to
access this factsheet online.



Child Welfare Information Gateway
Children's Bureau/ACYF/ACF/HHS
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Email: info@childwelfare.gov
<https://www.childwelfare.gov>

The impact of child abuse and neglect is often discussed in terms of physical, psychological, behavioral, and societal consequences. In reality, however, it is impossible to separate the types of impacts. Physical consequences, such as damage to a child's growing brain, can have psychological implications, such as cognitive delays or emotional difficulties.

Psychological problems often manifest as high-risk behaviors. Depression and anxiety, for example, may make a person more likely to smoke, abuse alcohol or drugs, or overeat. High-risk behaviors, in turn, can lead to long-term physical health problems, such as sexually transmitted diseases, cancer, and obesity. Not all children who have been abused or neglected will experience long-

The Federal Government has made a considerable investment in research on the causes and long-term consequences of child abuse and neglect. These efforts are ongoing; for more information, visit the websites listed below:

Adverse Childhood Experiences (ACE) Study is a collaboration between the Centers for Disease Control and Prevention (CDC) and Kaiser Permanente's Health Appraisal Clinic in San Diego, CA. It is the largest ongoing examination of the correlation between childhood maltreatment and adult health and well-being outcomes. Data are collected from more than 17,000 participants undergoing regular health screenings who provide information about childhood experiences of abuse and neglect. Findings show that certain experiences are risk factors or causes for various illnesses and poor health.

<http://www.cdc.gov/ace/index.htm>

LONGSCAN (Longitudinal Studies of Child Abuse and Neglect) is a consortium of longitudinal research studies on the causes and impact of child abuse and neglect. It was initiated in 1990 with grants from the National Center on Child Abuse and Neglect. The size and diversity of the sample (1,354 children from five distinct geographical areas) enables LONGSCAN researchers to examine the relative impact of various forms of maltreatment, alone and in combination. LONGSCAN studies also evaluate the effectiveness of child protection and child welfare services.

<http://www.iprc.unc.edu/longscan>

NSCAW (The National Survey of Child and Adolescent Well-Being) is a project of the Administration on Children, Youth and Families to describe the child welfare system and the experiences of children and families who come in contact with the system. Survey data are collected from firsthand reports of children, parents, and other caregivers, as well as reports from caseworkers, teachers, and administrative records. NSCAW will continue to follow the life course of these children to gather data about services received during subsequent periods, measures of child well-being, and longer term results for the study population. This information will provide a clearer understanding of life outcomes for children and families involved with child welfare. <http://www.acf.hhs.gov/programs/opre/research/project/national-survey-of-child-and-adolescent-well-being-nscaw-1>

term consequences, but they may have an increased susceptibility.

This factsheet explains the long-term physical, psychological, behavioral, and societal consequences of child abuse and neglect. For more information on abuse and neglect, including definitions, the different types, and the signs and symptoms, read Child Welfare Information Gateway's *What Is Child Abuse and Neglect? Recognizing the Signs and Symptoms*:
<https://www.childwelfare.gov/pubs/factsheets/whatiscan.cfm>

Factors Affecting the Consequences of Child Abuse and Neglect

Individual outcomes vary widely and are affected by a combination of factors, including:

- The child's age and developmental status when the abuse or neglect occurred
- The type of maltreatment (physical abuse, neglect, sexual abuse, etc.)
- The frequency, duration, and severity of the maltreatment
- The relationship between the child and the perpetrator

Researchers also have begun to explore why, given similar conditions, some children experience long-term consequences of abuse and neglect while others emerge relatively unscathed. The ability to cope, and even thrive, following a negative experience is often referred to as "resilience." It is

important to note that resilience is not an inherent trait in children but results from a mixture of both risk and protective factors that cause a child's positive or negative reaction to adverse experiences. A number of protective and promotive factors—individually, within a family, or within a community—may contribute to an abused or neglected child's resilience. These include positive attachment, self-esteem, intelligence, emotion regulation, humor, and independence (Shaffer, 2012).

Physical Health Consequences

The immediate physical effects of abuse or neglect can be relatively minor (bruises or cuts) or severe (broken bones, hemorrhage, or even death). In some cases, the physical effects are temporary; however, the pain and suffering they cause a child should not be discounted.

Child abuse and neglect can have a multitude of long-term effects on physical health. NSCAW researchers found that, at some point during the 3 years following a maltreatment investigation, 28 percent of children had a chronic health condition (Administration for Children and Families, Office of Planning, Research and Evaluation [ACF/OPRE], 2007). Below are some outcomes other researchers have identified:

Abusive head trauma. Abusive head trauma, an inflicted injury to the head and its contents caused by shaking and blunt impact, is the most common cause of traumatic death for infants. The injuries

may not be immediately noticeable and may include bleeding in the eye or brain and damage to the spinal cord and neck. Significant brain development takes place during infancy, and this important development is compromised in maltreated children. One in every four victims of shaken baby syndrome dies, and nearly all victims experience serious health consequences (CDC, n.d.).

Impaired brain development. Child abuse and neglect have been shown to cause important regions of the brain to fail to form or grow properly, resulting in impaired development. These alterations in brain maturation have long-term consequences for cognitive, language, and academic abilities and are connected with mental health disorders (Tarullo, 2012). Disrupted neurodevelopment as a result of maltreatment can cause children to adopt a persistent fear state as well as attributes that are normally helpful during threatening moments but counterproductive in the absence of threats, such as hypervigilance, anxiety, and behavior impulsivity (Perry, 2012). Child Welfare Information Gateway has produced two publications on the impact of maltreatment on brain development.

Supporting Brain Development in Traumatized Children and Youth:

<https://www.childwelfare.gov/pubs/braindevtrauma.pdf>

Understanding the Effects of Maltreatment on Brain Development:

https://www.childwelfare.gov/pubs/issue_briefs/brain_development/brain_development.pdf

Poor physical health. Several studies have shown a relationship between various

forms of child maltreatment and poor health. Adults who experienced abuse or neglect during childhood are more likely to suffer from cardiovascular disease, lung and liver disease, hypertension, diabetes, asthma, and obesity (Felitti & Anda, 2009). Specific physical health conditions are also connected to maltreatment type. One study showed that children who experienced neglect were at increased risk for diabetes and poorer lung functioning, while physical abuse was shown to increase the risk for diabetes and malnutrition (Widom, Czaja, Bentley, & Johnson, 2012). Additionally, child maltreatment has been shown to increase adolescent obesity. A longitudinal study found that children who experienced neglect had body mass indexes that grew at significantly faster rates compared to children who had not experienced neglect (Shin & Miller, 2012).

Psychological Consequences

The immediate emotional effects of abuse and neglect—*isolation, fear, and an inability to trust*—can translate into lifelong psychological consequences, including low self-esteem, depression, and relationship difficulties. Researchers have identified links between child abuse and neglect and the following:

Difficulties during infancy. Of children entering foster care in 2010, 16 percent were younger than 1 year. When infants and young children enter out-of-home care due to abuse or neglect, the trauma of a primary caregiver change negatively affects their attachments (ACF/OPRE, 2012a). Nearly

half of infants in foster care who have experienced maltreatment exhibit some form of cognitive delay and have lower IQ scores, language difficulties, and neonatal challenges compared to children who have not been abused or neglected (ZERO TO THREE, 2011).

Poor mental and emotional health.

Experiencing childhood trauma and adversity, such as physical or sexual abuse, is a risk factor for borderline personality disorder, depression, anxiety, and other psychiatric disorders. One study using ACE data found that roughly 54 percent of cases of depression and 58 percent of suicide attempts in women were connected to adverse childhood experiences (Felitti & Anda, 2009). Child maltreatment also negatively impacts the development of emotion regulation, which often persists into adolescence or adulthood (Messman-Morre, Walsh, & DiLillo, 2010).

Cognitive difficulties. NSCAW researchers found that children with substantiated reports of maltreatment were at risk for severe developmental and cognitive problems, including grade repetition (ACF/OPRE, 2012b). In its final report on the second NSCAW study (NSCAW II), more than 10 percent of school-aged children and youth showed some risk of cognitive problems or low academic achievement, 43 percent had emotional or behavioral problems, and 13 percent had both (ACF/OPRE, 2011).

Social difficulties. Children who experience neglect are more likely to develop antisocial traits as they grow up. Parental neglect is associated with borderline personality disorders,

attachment issues or affectionate behaviors with unknown/little-known people, inappropriate modeling of adult behavior, and aggression (Perry, 2012).

Behavioral Consequences

Not all victims of child abuse and neglect will experience behavioral consequences. However, behavioral problems appear to be more likely among this group. According to NSCAW, more than half of youth reported for maltreatment are at risk for an emotional or behavioral problem (ACF/OPRE, 2012b). Child abuse and neglect appear to make the following more likely:

Difficulties during adolescence.

NSCAW data show that more than half of youth with reports of maltreatment are at risk of grade repetition, substance abuse, delinquency, truancy, or pregnancy (ACF/OPRE, 2012b). Other studies suggest that abused or neglected children are more likely to engage in sexual risk-taking as they reach adolescence, thereby increasing their chances of contracting a sexually transmitted disease. Victims of child sexual abuse also are at a higher risk for rape in adulthood, and the rate of risk increases according to the severity of the child sexual abuse experience(s) (Felitti & Anda, 2009; Messman-Morre, Walsh, & DiLillo, 2010).

Juvenile delinquency and adult criminality.

Several studies have documented the correlation between child abuse and future juvenile delinquency. Children who have experienced abuse are nine times more likely to become involved

in criminal activities (Gold, Wolan Sullivan, & Lewis, 2011).

Alcohol and other drug abuse. Research consistently reflects an increased likelihood that children who have experienced abuse or neglect will smoke cigarettes, abuse alcohol, or take illicit drugs during their lifetime. In fact, male children with an ACE Score of 6 or more (having six or more adverse childhood experiences) had an increased likelihood—of more than 4,000 percent—to use intravenous drugs later in life (Felitti & Anda, 2009).

Abusive behavior. Abusive parents often have experienced abuse during their own childhoods. Data from the Longitudinal Study of Adolescent Health showed that girls who experienced childhood physical abuse were 1–7 percent more likely to become perpetrators of youth violence and 8–10 percent more likely to be perpetrators of interpersonal violence (IPV). Boys who experienced childhood sexual violence were 3–12 percent more likely to commit youth violence and 1–17 percent more likely to commit IPV (Xiangming & Corso, 2007).

Societal Consequences

While child abuse and neglect usually occur within the family, the impact does not end there. Society as a whole pays a price for child abuse and neglect, in terms of both direct and indirect costs.

Direct costs. The lifetime cost of child maltreatment and related fatalities in 1 year totals \$124 billion, according to a study funded by the CDC. Child maltreatment is

more costly on an annual basis than the two leading health concerns, stroke and type 2 diabetes (Xiangming, Brown, Florence, & Mercy, 2012). On the other hand, programs that prevent maltreatment have shown to be cost effective. The U.S. Triple P System Trial, funded by the CDC, has a benefit/cost ratio of \$47 in benefits to society for every \$1 in program costs (Mercy, Saul, Turner, & McCarthy, 2011).

Indirect costs. Indirect costs represent the long-term economic consequences to society because of child abuse and neglect. These include costs associated with increased use of our health-care system, juvenile and adult criminal activity, mental illness, substance abuse, and domestic violence. Prevent Child Abuse America estimates that child abuse and neglect prevention strategies can save taxpayers \$104 billion each year. According to the Schuyler Center for Analysis and Advocacy (2011), every \$1 spent on home visiting yields a \$5.70 return on investment in New York, including reduced confirmed reports of abuse, reduced family enrollment in Temporary Assistance for Needy Families, decreased visits to emergency rooms, decreased arrest rates for mothers, and increased monthly earnings. One study found that all eight categories of adverse childhood experiences were associated with an increased likelihood of employment problems, financial problems, and absenteeism (Anda et al., 2004). The authors assert that these long-term costs—to the workforce and to society—are preventable.

Prevention Practice and Strategies

To break the cycle of maltreatment and reduce the likelihood of long-term consequences, communities across the

country must continue to develop and implement strategies that prevent abuse or neglect from happening. While experts agree that the causes of child abuse and neglect are complex, it is possible to develop prevention initiatives that address known risk factors.

For more information, visit Information Gateway's Preventing Child Abuse and Neglect web section:
<https://www.childwelfare.gov/preventing/>

Trauma-Informed Practice

While the priority is to prevent child abuse and neglect from occurring, it is equally important to respond to those children and adults who have experienced abuse and neglect. Over the past 30 years, researchers and practitioners have developed a better understanding of the effects of trauma. More has been done in the way of developing supports to address these effects, build resiliency, and, hopefully, prevent further trauma. Trauma-informed practice refers to the services and programs specifically designed to address and respond to the impact of traumatic stress. The importance of this approach has become especially evident in the child welfare system, as a majority of children and families involved with child welfare have experienced some form of past trauma. When human service systems recognize and respond to the impact of trauma and use this knowledge to adapt policies and practices, children, youth, and families benefit (Wilson, 2012).

The National Child Traumatic Stress Network strives to raise the standard of care and improve access to services for

traumatized children, their families, and communities: <http://www.nctsn.org/>

For more information on trauma-informed practice, visit Information Gateway's Treatment and Trauma-Informed Care web section: <https://www.childwelfare.gov/responding/trauma.cfm>

Summary

There is a significant body of ongoing research on the consequences of child abuse and neglect. The effects vary depending on the circumstances of the abuse or neglect, personal characteristics of the child, and the child's environment. Consequences may be mild or severe; disappear after a short period or last a lifetime; and affect the child physically, psychologically, behaviorally, or in some combination of all three ways. Ultimately, due to related costs to public entities such as the health-care, human services, and educational systems, abuse and neglect impact not just the child and family, but society as a whole. Therefore, it is imperative for communities to provide a framework of prevention strategies and services before abuse and neglect occur and to be prepared to offer remediation and treatment when necessary.

Resources on Child Welfare Information Gateway

Child Abuse and Neglect

<https://www.childwelfare.gov/can/>

Definitions of Child Abuse and Neglect

<https://www.childwelfare.gov/can/defining/>

Preventing Child Abuse and Neglect

<https://www.childwelfare.gov/preventing/>

Reporting Child Abuse and Neglect

<https://www.childwelfare.gov/responding/reporting.cfm>

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U.S. Department of Health and Human Services
Administration for Children and Families
Administration on Children, Youth and Families
Children's Bureau





OFFICE OF THE GOVERNOR BILL WALKER

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SEXUAL ASSAULT AWARENESS MONTH

March 30, 2016

WHEREAS, every Alaskan, regardless of age, race, culture, or status deserves to live free from harm and fear of sexual assault or abuse, and no one has the right or authority to force, coerce, threaten, or manipulate anyone into sexual activity; and

WHEREAS, between 2010 and 2014, the Alaska State Troopers responded to 2.452 sexual abuse of a minor offenses and responded to and/or investigated 4.283 sexual assault offenses; and

WHEREAS, during 2015, Children's Advocacy Centers saw a total of 2,026 children; according to Alaska Children's Alliance, 33 percent of the cases were boys; and

WHEREAS, sexual abuse of children happens in families, churches, recreational centers, schools, youth sports leagues, and other places where our children gather. The most common relationship between victims and a suspect in a sex crime case is a friend or acquaintance; and

WHEREAS, victims of sexual assault often experience emotional, physical, and psychological trauma as a result. Survivors also often suffer from anxiety, depression, phobias, low self-esteem, post-traumatic stress disorder, and/or changes in eating and sleeping habits and are at risk for substance abuse; and

WHEREAS, all Alaskans need to be committed to the prevention of sexual assault through vigilance, awareness, and intervention.

NOW THEREFORE, I, Bill Walker, GOVERNOR OF THE STATE OF ALASKA, do hereby proclaim April 2016 as:

Sexual Assault Awareness Month

in Alaska, and ask all Alaskans to take a stand against sexual assault everywhere in our state – to speak up about suspicious activity, to not look the other way when Alaskans are mistreated, to show support to victims so they may regain their dignity, to show compassion for survivors as they heal, and to become role models to our younger generations to end the cycle of sexual assault.

Dated: March 30, 2016

2/15/2017

Sexual Assault Awareness Month – Office of the Governor

Our purpose is to energize Alaska's spirit through self-determination and resource stewardship to improve the life of every Alaskan. Find out more about our ***Core Values and Vision*** (*pdf*).

SAFER COMMUNITIES
RESOURCE
DEVELOPMENT
ECONOMIC SECURITY

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CHILD ABUSE PREVENTION AND AWARENESS MONTH

March 30, 2016

WHEREAS, Alaska's children have a right to be safe and be given the opportunity to thrive, learn, and grow to their full potential, benefitting theirs and the next generation; and

WHEREAS, Alaskans must be educated and informed about protecting children from abuse, providing safe environments, recognizing "grooming" behaviors of abusers, having an age-appropriate personal safety discussions, helping children choose trusted adults to answer questions and provide help, and what to do if abuse is suspected; and

WHEREAS, child abuse and the effect of observing violence in the home creates adverse childhood experiences that can leave psychological, emotional, and physical effects with lifelong consequences for victims and survivors of abuse; and

WHEREAS, families and communities can come together to create a strong, healthy support network by: providing safe and nurturing homes free of violence, abuse, and neglect, extending helping hands to children and families in need, and providing safe child-friendly activities outside the home; and

WHEREAS, child abuse and neglect can be prevented by supporting and strengthening Alaska's families, making meaningful connections and partnerships between schools, professional health services, faith-based organizations, businesses, law enforcement, tribal governments and organizations; and

WHEREAS, among the many individuals and organizations that support Alaska's children, the State of Alaska Office of Children's Services and the Alaska Children's Trust work every day to support the well-being of Alaska's children and youth and to prevent child abuse and neglect throughout the state.

NOW THEREFORE, I, Bill Walker, GOVERNOR OF THE STATE OF ALASKA, do hereby proclaim April 2016 as:

Child Abuse Prevention and Awareness Month

in Alaska, and encourage all Alaskans to create a safe and nurturing environment for children, encourage friends and neighbors to value the safety of children, and give support to individuals and organizations that provide services to at risk and abused children.

Dated: March 30, 2016

Mission Statement

Our purpose is to energize Alaska's spirit through self-determination and resource stewardship to improve the life of every Alaskan. Find out more about our ***Core Values and Vision*** (*pdf*).

SAFER COMMUNITIES
RESOURCE
DEVELOPMENT
ECONOMIC SECURITY

Office of Governor Bill Walker

3rd Floor, State Capitol
PO Box 110001
Juneau, AK 99811
Phone: (907) 465-3500
Fax: (907) 465-3532

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STATE OF ALASKA



Executive Proclamation by *Governor Sean Parnell*

WHEREAS, every child is entitled to love, care, security, and protection from abuse, exploitation, and neglect. As Alaskans, we will protect our children's inalienable rights to life, liberty, and the pursuit of happiness; and

WHEREAS, child abuse is one of our society's most serious public health problems, affecting millions of children nationwide and thousands here at home. Sadly, over 90 percent of child abuse is perpetrated by people that the children know, love, and trust; and

WHEREAS, the devastating impacts of emotional, physical, sexual, and verbal child abuse go beyond the immediate traumas, often lasting well into adulthood. Studies have shown that victims of childhood abuse are at high-risk for chronic mental and physical health issues such as depression, eating disorders, substance abuse, obesity, heart disease, and more. They are also more likely to act violently in dating relationships and to develop poor emotion-coping mechanisms; and

WHEREAS, the trauma of living in a violent home can be just as harmful to a child as being physically or sexually abused. For example, research suggests that continually experiencing feelings of fear and insecurity will alter the normal development of a child's brain, leading to anxiety, difficulties in focusing, and aggressive behaviors; and

WHEREAS, social acceptance of myths about family violence and child abuse silences victims and encourages public denial about the true nature of this tragic epidemic. Raising awareness about the enormity of the issue is the first step in changing these harmful social norms; and

WHEREAS, further steps to reduce child abuse and neglect may include providing nurturing, safe, and supportive environments; aiding and supporting victims and at-risk families; and holding offenders fully accountable for their actions; and

WHEREAS, by working together, we can stem the tide of abuse in our great state, strengthen our families and communities, and ensure that Alaska's children enjoy brighter futures and grow to their full potential as healthy, productive citizens.

NOW, THEREFORE, I, Sean Parnell, Governor of the State of Alaska, do hereby proclaim April 2014 as:

Child Abuse Prevention and Awareness Month

in Alaska, and call upon all Alaskans to dedicate their energies to preventing child abuse and to support efforts to ensure the safety of every child. Please report any instances of known or suspected child abuse and neglect by immediately calling 911 or your local police department, along with the Office of Children's Services at 1-800-478-4444. Together, we will continue our efforts to provide safe homes and strong families throughout Alaska.

Dated: February 11, 2014



Sean Parnell

Sean Parnell, Governor
who has also authorized the
seal of the State of Alaska to
be affixed to this proclamation.

Alaska

- Home
- Services
- Locations**
- News & Events
- Patients & Visitors
- Healthy Alaska
- Giving
- Why Choose Providence

- Pay My Bill
- Alaska C.A.R.E.S.
- CARES Team
- Forensic Nursing Services
- Our Donors
- Our Wish List
- Parents & Prevention
- Resources
- Safety Tips for Kids

Facts About Child Sexual Abuse

According to the Child Welfare League of America, Alaska consistently has one of top 5 rates of child abuse in the United States:

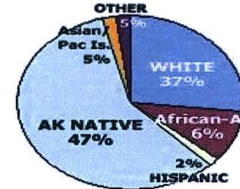
- For every 1,000 children in Alaska, 42.2 were victims of abuse. That means that every year, approximately 8,000 children in Alaska are physically or sexually abused. This only represents reported cases that result in substantiation or indication of abuse. Numbers of unreported cases may be much higher.

Other Facts About Child Sexual Abuse:

- It is not usually a violent act. It is more typically a gradual process of sexualizing (or grooming) the relationship between the child and abuser over time.
- It is a violation of the child's very nature, which is to be vulnerable, curious, trusting, and dependent. Because trickery, manipulation, deceit, coercion, secrecy, threats, play, or bribery are part of child sexual abuse, a disruption to the child's normal development can occur and increase the risk of problems in childhood and adult life.
- Child sexual abuse usually occurs without a witness. Often, there isn't outward physical evidence, so it can be difficult to detect.
- Child sexual abuse does not impact all children in the same way.
- Multiple episodes of sexual abuse are very common.
- Even if a child was sexually abused only once, it was still a violation to that child.
- Supportive adults and counseling for the child and family can help with coping and starting a healing process.

Ignoring, minimizing, denying, hoping it will go away, or not talking about it does not help a child cope, begin a healing process, and continue to develop in healthy ways.

Abuse in Alaska



- 47% Ak Native
- 37% White
- 6% African-American
- 5% Asian Pacific Island
- 2% Hispanic
- 5% Other

Stay Connected

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BRISTOL BAY NATIVE ASSOCIATION

P.O. BOX 310
DILLINGHAM, ALASKA 99576
PHONE (907) 842-5257

April 9, 2015

Tribal Councils
Served by BBNA:

Aleknagik

Dear Editor:

Chignik Bay

It's sad that Alaska's rate of child abuse ranks among the highest in the nation. It seems higher in rural Alaska and remote places because we know each other. And it's no different in Bristol Bay.

Chignik Lagoon

Chignik Lake

Clarks Point

Curyung

Egegik

We live in small communities and see cuts and bruises on children and grandchildren. We rarely ask what caused them. Cuts heal and bruises fade, but emotional scars are invisible and last a lifetime.

Ekuk

Ekwok

Igiugig

Iliamna

We should never get used to child abuse or tolerate it. It shouldn't ever become so normal that we first cringe then shrug it off and go on with our lives.

Ivanof Bay

Kanatak

King Salmon

A few years ago, more than 50 hearings were held in our 31 communities developing the Bristol Bay Vision proclaiming our unity. Countless people said the foundation of their lives is strong, safe, and healthy families. I imagine people across the State feel the same way. Every child deserves to feel safe in their communities, in their homes, and with their friends and families.

Kokhanok

Koliganek

Levelock

Manokotak

Naknek

New Stuyahok

Thanks to Rep. Geran Tarr and many co-sponsors of HCR7, April is Child Abuse Prevention Month and Friday, April 10, 2015 is "Go Blue Friday" to raise awareness of child abuse.

Newhalen

Nondalton

Pedro Bay

Perryville

So let's join together and wear blue on Friday, April 10. Let's spend some time this month on finding out about prevention and prevention activities. Let's do our part to raise awareness and help to end child abuse.

Pilot Point

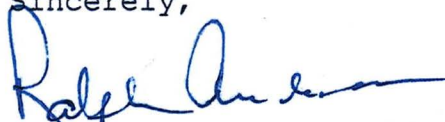
Port Heiden

Portage Creek

South Naknek

Sincerely,

Togiak



Twin Hills

Ralph Andersen, President & CEO
BRISTOL BAY NATIVE ASSOCIATION

Ugashik

March 24, 2015

Representative Geran Tarr

Room 409 Capitol Building

Juneau Alaska 99801

The Alaska Early Childhood Advocacy Group recognizes and supports HOUSE CONCURRENT RESOLUTION NO. 7, Proclaiming April 2015 as Child Abuse Prevention Month in the state of Alaska. Our group represents Alaska AEYC, Alaska Head Start Association, Alaska Infant Learning Program Association, Best Beginnings, Parents as Teachers State Office and thread. As Early Education Advocates we understand that successful early education depends upon partnerships with children's families and communities. We understand, and value the importance and complex characteristics of children's families and communities. We use this understanding to create respectful, reciprocal relationships that support and empower families, and involve all families in their children's development and learning.

We will be collaborating with other professionals and participating in activities throughout the month of April in honor of child abuse and prevention.



Margaret Bauer

Chair AECAG



Fiscal Note

State of Alaska
2017 Legislative Session

Bill Version: HCR 3
Fiscal Note Number: _____
() Publish Date: _____

Identifier: HCR3
Title: APRIL 2017: CHILD ABUSE PREVENTION
MONTH
Sponsor: TARR
Requester: House H&SS

Department:
Appropriation:
Allocation:
OMB Component Number: 0

Expenditures/Revenues

Note: Amounts do not include inflation unless otherwise noted below. (Thousands of Dollars)

	FY2018	Included in	Out-Year Cost Estimates				
	Appropriation Requested	Governor's FY2018 Request	FY 2019	FY 2020	FY 2021	FY 2022	FY 2023
OPERATING EXPENDITURES	FY 2018	FY 2018					
Personal Services							
Travel							
Services							
Commodities							
Capital Outlay							
Grants & Benefits							
Miscellaneous							
Total Operating	0.0	0.0	0.0	0.0	0.0	0.0	0.0

Fund Source (Operating Only)

None							
Total	0.0	0.0	0.0	0.0	0.0	0.0	0.0

Positions

Full-time							
Part-time							
Temporary							

Change in Revenues

None							
Total	0.0	0.0	0.0	0.0	0.0	0.0	0.0

Estimated SUPPLEMENTAL (FY2017) cost: 0.0 *(separate supplemental appropriation required)*
(discuss reasons and fund source(s) in analysis section)

Estimated CAPITAL (FY2018) cost: 0.0 *(separate capital appropriation required)*
(discuss reasons and fund source(s) in analysis section)

ASSOCIATED REGULATIONS

Does the bill direct, or will the bill result in, regulation changes adopted by your agency?
If yes, by what date are the regulations to be adopted, amended or repealed?

Why this fiscal note differs from previous version:

Initial version.

Prepared By: Representative Spohnholz Phone: (907)465-4940
House Health and Social Services Committee Date: 03/03/2017