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Aligning the Georgia Child Abuse & Neglect Prevention Plan with Governor Kemp's Priorities and Initiatives

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ALIGNING THE GEORGIA CHILD ABUSE & NEGLECT PREVENTION PLAN
WITH GOVERNOR KEMP'S PRIORITIES AND INITIATIVES

By

TAYLOR A. JENNINGS

April 3, 2020

Abstract:

This work is a comprehensive issue brief outlines the causes and consequences of child abuse and neglect, how the Georgia Child Abuse & Neglect Plan provides guidance to address those problems, and how child- and family-serving providers and community leaders can operationalize the plan. The purpose of the brief is to align objectives of the Child Abuse & Neglect Plan with the Governor's Priorities to implement prevention in all sectors throughout the state to create safe, stable, nurturing relationships and environments.

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by

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Author's Statement Page

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Issue Brief: Alignment of the Georgia Child Abuse & Neglect Prevention Plan and Governor Kemp's Priorities

In 2019, Prevent Child Abuse Georgia and the Prevention and Community Support Section (PCS) of the Georgia Division of Family and Children Services (DFCS) convened a diverse team of child advocates, experts, and state leaders to update the Child Abuse and Neglect Prevention Plan (CANNP) for the state of Georgia, last released in 1993. With input collected from 25 statewide community meetings, over 800 online survey participants, and state agency leaders, the revised CANPP provides families, communities, organizations, and state decision makers with actionable steps to support Georgia's children and families.

Stakeholder feedback sessions, otherwise referred to as the 25 regional planning sessions or community meetings, were valuable opportunities for the planning team to hear from child- and family-serving providers and community members about their needs and priorities related to child well-being. Table 1 below presents a list of the highest priority CANPP objectives, based on their ranking at the regional planning sessions.

Table 1: Community Ranking of High Priority CANPP Objectives

Objective	Number of regions that ranked the objective as a high priority
1. Increase family economic stability	14
2. Increase family resiliency	13
3. Increase access to early childhood education	12
4. Increase family mental health	11
5. Increase family physical health	11
6. Increase community knowledge and awareness of the societal factors that contribute to child abuse and neglect	8

Overview of Importance of Governor's Priorities

Georgia's 83rd Governor, Brian Kemp, prioritizes business growth, strengthening the rural parts of Georgia, keeping families safe, and "putting Georgians first."[1] Utilizing the Governor's priorities to operationalize an overarching child abuse and neglect plan is important to help secure funding and garner visibility for programs and information. For example, the safe sleep initiative was a top priority of the former First Lady of Georgia, which facilitated its widespread adoption, funding and high visibility through birthing hospitals in Georgia. The more alignment

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[1] Office of Governor Brian P. Kemp (n.d.). Initiatives and Priorities. Retrieved from https://gov.georgia.gov/about-us/initiatives-and-priorities

between governmental priorities and a plan such as the CANPP, the more support the plan's initiatives and strategies are likely to receive.

Aligning priorities with CANPP Objectives

The specific objectives of the state Child Abuse & Neglect Prevention Plan developed based on the planning strategy meetings and champion development sessions can be operationalized in accordance with the Governor's priorities and informed by best-available evidence from numerous sectors. A multidimensional approach, as laid out in the CANPP, has positive implications for all Georgians. The chart below outlines strategies identified in the community meetings and how they align with Governor Kemp's priorities for Georgia.

Table 2. Alignment Between Governor Kemp's Priorities and CANPP Strategies

Governor's Priority	Subsection of Governor's Priority	Aligning CANPP Strategy
Make Georgia #1 for Small Business	Cut obsolete, unnecessarily burdensome, and bureaucratic hurdles for small business	Expand small-business development and support programs
	Develop a skilled workforce to meet current and future needs across the industry spectrum	Increase access to post-secondary-education degrees and certificate programs
		Expand opportunities for youth to explore career options before high-school graduation

Governor's Priority	Subsection of Governor's Priority	Aligning CANPP Strategy
Strengthen Rural Georgia	Increase rural broadband access for economic growth, educational opportunity, and healthcare access	Increase access to evidence-based or research-informed programs for parenting skills and support which help parents/caregivers understand all stages of their child's development.
		Promote access to internet technology for families with young children
		Implement tele-/web-based mental-health and substance-abuse resources in underserved communities and identify other strategies to make services more accessible
		Expand telemedicine services
	Deploy regional strike teams to areas with economic challenges or lessening populations to collaborate with local leaders and seek opportunities for growth	Expand local collaborations and advocacy across sectors (nonprofit, government, faith, business) aimed at strengthening families and developing solutions to local challenges
	Address Georgia's teacher shortage by removing barriers to professional entry and increasing pay	Increase access to post-secondary-education degrees and certificate programs
		Expand opportunities for youth to explore career options before high-school graduation

Governor's Priority	Subsection of Governor's Priority	Aligning CANPP Strategy
Put Georgians First	Lower costs, improve quality, and increase access to quality healthcare in every region	Expand access to affordable health insurance coverage for all Georgians
		Expand community health screenings
		Expand telemedicine services
		Promote evidence-based models of sexual-health education for school-aged children and youth (e.g., Teen Maze, Peer Educators)
	Continue efforts to keep students, teachers, and personnel safe on campus	Implement evidence-based anti-bullying programs and strategies in all schools
		Increase focus on school-safety planning and practices (e.g., active shooter training, increased security technology)
		Promote gun-safety practices and policies
		Increase efforts to ensure school buses are safe (e.g., bus monitors)
	Expand access to mental health resources in schools for children and young adults	Expand school-based health resources (physical and mental)
		Implement tele-/web-based mental-health and substance-abuse resources in underserved communities
		Implement evidence-based anti-bullying programs and strategies in all schools
		Expand trauma-informed practices and resources across the state as well as increase understanding about the prevalence and impact of adverse childhood experiences (ACEs) and adverse community environments.
		Increase accessibility of local, community-based programs and services for substance-abuse recovery treatment
		Shape social norms about mental health and how to recognize and seek help for mental illness/substance abuse
		Expand substance-abuse-prevention programs aimed at school-aged children and youth
		Promote evidence-based behavioral health assessment and treatment models for all ages (e.g., Mental-Health First Aid, Trauma-Informed Care)
		Promote quality standards for providers of prevention programs

Governor's Priority	Subsection of Governor's Priority	Aligning CANPP Strategy
Reform State Government	Expand public-private partnerships and leverage technology to best utilize limited state resources	Increase access to evidence-based or research-informed programs for parenting skills and support which help parents/caregivers understand all stages of their child's development.
		Promote access to internet technology for families with young children
		Implement tele-/web-based mental-health and substance-abuse resources in underserved communities
		Increase community partnerships and collaborations around child abuse prevention

The overarching purpose of this issue brief is to ensure that services available to families and children are aligned with both the Governor's priorities and the objectives of the new CANPP to support safe, stable, nurturing relationships and environments for Georgia's children that reduce the risk for child abuse and neglect. Alignment between the CANPP and the Governor's priorities will support robust implementation of the plan by state leadership and highlight opportunities for service providers to best serve the families and children of Georgia.

Child Abuse and Neglect (CAN) Prevention Overview

CAN and Social Determinants of Health

The conditions that increase risk for CAN do not exist in a vacuum; social determinants of health, conditions in which children and families live, learn, work, and play, as well as socioeconomic factors, environmental factors, parental mental health, physical health, ability levels, and other factors intersect to create risk for child maltreatment in a home.[2] Often, these risk factors build on one another. For example, parents with low levels of education may struggle with employment and economic insecurity, resulting in housing difficulties and high levels of stress. Multiple challenges and stressors often accumulate to create the context for child maltreatment.

The Kids Count Data Book Child Well-being Index (Kids Count) ranked Georgia 38th in the nation in child well-being.[3] This low ranking, though an improvement since the original CANPP was released, is based on factors like poverty, number of low-birthweight babies, and level of

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[2] Bright, M., Knapp, C., Hinojosa, M., Alford, S., & Bonner, B. (2016). The Comorbidity of Physical, Mental, and Developmental Conditions Associated with Childhood Adversity: A Population Based Study. Maternal & Child Health Journal, 20(4), 843–853. https://doi.org/10.1007/s10995-015-1915-7.

[3] Annie E Casey Foundation. (2019). Kids Count Data Book, 2019: State Profiles of Child Well-Being. In Annie E. Casey Foundation. Retrieved from https://www.aecf.org/m/resourcedoc/aecf-2019kidscountdatabook-2019.pdf

pre-K enrollment. In Georgia, over 20 percent of children are living in poverty, placing over a fifth of our state's children at increased risk of experiencing child abuse and neglect.[3]

Poverty can create stressful conditions for all family members. It is difficult to support children without ample financial resources, and it can be highly stressful to be a child living in a household struggling with scarcity. The stress of poverty alone can have negative impacts on a child's academic performance such as lack of focus, and maltreatment[4] can exacerbate these negative outcomes.[5] While poverty does not exclusively cause child abuse and/or neglect, child abuse and neglect case substantiation[6] rates are higher for families with lower total incomes. Children experiencing poverty are also more likely to have behavioral health, cognitive and physical health issues, which can add further to the emotional and financial burden on their families.[5]

Parental substance use and mental health disorders also increase the risk of child abuse and neglect; high levels of parental stress are also associated with child abuse and neglect.[7] Substance use is associated with a higher likelihood of reported physical and emotional abuse and neglect of children in the home.[8] The annual incidence of neglect (reported) was 140% higher for parents reporting substance use compared to those reporting non-use.[8] In light of the current opioid epidemic affecting Georgia and the rest of the country, substance use disorder is a timely and relevant factor increasing risk for child abuse and neglect in the home.

Low-quality housing environments and housing instability are also risk factors for child abuse and neglect. Housing quality can also impact physical health outcomes, such as asthma.[9] Thus, policies that increase the availability of affordable, quality housing may help reduce rates of child abuse and neglect.[10]

Early child education is another important influence on child well-being as well as development, productivity, and overall well-being across the lifespan. "Those who do not

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[4] Maltreatment: Child maltreatment is any act, intentional or not, that results in harm, the potential for harm, or the threat of harm to a child. The failure to provide for a child's needs or to protect a child from harm or potential harm is also child maltreatment. Child maltreatment can be by a parent, a caregiver or an authorized custodian of the child. Used interchangeably with the phrase "abuse and neglect" in this brief.

[5] Poverty and child health in the United States. (2016). Pediatrics. https://doi.org/10.1542/peds.2016-0339

[6] Case substantiation: The child protective services (CPS) agency believes that an incident of child abuse or neglect, as defined by State law, has happened.

[7] Yang, M., & Maguire, J. K. (2018). Individual and Cumulative Risks for Child Abuse and Neglect. Family Relations, 67(2), 287–301. https://doi.org/10.1111/fare.12310

[8] Kepple, N. J. (2018). Does parental substance use always engender risk for children? Comparing incidence rate ratios of abusive and neglectful behaviors across substance use behavior patterns. Child Abuse & Neglect, 76, 44–55. https://doi.org/10.1016/j.chiabu.2017.09.015

[9] Wu F, & Takaro TK. (2007). Childhood asthma and environmental interventions. Environmental Health Perspectives, 115(6), 971–975. Retrieved from https://search.ebscohost.com/login.aspx?direct=true&AuthType=ip,shib&db=rzh&AN=105847663&site=ehost-live&scope=site

[10] Ports, K., Rostad, W., Luo, F., Putnam, M. & Zurick, E. (2018). The impact of the low-income housing tax credit on children's health and well-being in Georgia. Child Youth Serv Rev. 93: 390-396.

graduate high school earn on average 1.36 times less than those with a college degree and 2.3 times less than those with a bachelor's degree.[11] Many of the same social determinants of health impacting life and health opportunities are the same factors that create or mitigate risk for abuse and neglect. For this reason, measures of child well-being, such as the Kids Count, consider many different dimensions of a child's life. These factors are important determinants of success as children become adolescents and adults.

Georgia: Child Abuse and Neglect

In 2017 in Georgia, over 120,000 reports were made to Child Protective Services (CPS).[12] Although only about 10,000 of those reports result in substantiated (confirmed) cases, research indicates that children investigated for abuse share similar consequential outcomes to those who are officially substantiated victims. Reporting suspected child maltreatment can serve as an important means of preventing further or potential future injury or neglect. The number of reports made is also an important measure of child well-being, as it reflects the larger population of vulnerable children for whom we should be concerned.

Definitions and categories of child abuse and neglect are described below:

Sexual Abuse: Child exploitation for sexual gratification of an adult or older child. One in ten children will experience child sexual abuse before his or her 18th birthday.[13] Child sexual abuse includes acts related to trafficking a person for sexual servitude; an adult does not have to interact with the child for this to be considered abuse.[14]

Physical Abuse: The non-accidental physical injury of a child.[13]

Emotional/Psychological Abuse: Excessive or aggressive behavior that places unreasonable demands on a child, usually occurs as verbal abuse.[13]

Neglect: This is the most commonly reported kind of abuse and can present in complex ways, which providers need to be trained to identify. Unmet basic need is the most obvious form of neglect, but this also includes unmet emotional needs. Dangerous living conditions, such as access to toxic or dangerous items in the home, absence of utilities, or extreme filth, are examples of environmental neglect. Lack of supervision is the last subcategory of neglect. Failure to observe and intervene in the event of a child's

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[11] Torpey, E. (2018). Measuring the value of education. US Bureau of Labor Statistics. Retrieved from https://www.bls.gov/careeroutlook/2018/data-on-display/education-pays.htm

[12] U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau. (2019). Child Maltreatment 2017. Available from https://www.acf.hhs.gov/sites/default/files/cb/cm2017.pdf

[13] Centers for Disease Control and Prevention. (2016). Preventing Child Abuse and Neglect: A Technical Package for Policy, Norm, and Programmatic Activities. Retrieved from https://www.cdc.gov/violenceprevention/pdf/can-prevention-technical-package.pdf

[14] Prevent Child Abuse Georgia. (2019). Mandated Reporter Training Manual.

exposure to dangerous objects or scenarios, like sharp objects or bodies of water, are examples of supervisory neglect.[13,14]

Reporting Child Abuse & Neglect

Georgia saw a 49% drop in substantiated child abuse and neglect cases between 2016 and 2017. This decrease is associated with new laws, policies and practices that went into effect mid-2016. In July 2016, Georgia began collecting and reporting personal information on alleged abusers from substantiated cases in the Child Abuse Registry. DFCS is also moving away from incident-focused responses to comprehensively assessing the safety of the child and needs of the family. Though specific allegations may not be substantiated from a report of child abuse or neglect; DFCS may provide services to families. Therefore, it is also important to note the total number of families receiving services from DFCS continues to increase, despite the drop in substantiated cases.

It is also important to understand DFCS practices when interpreting data. Child abuse and neglect cases are only substantiated or unsubstantiated based on the initial allegation. For example, if a caseworker is investigating a family based on a report of neglect but only finds physical abuse to be occurring, the reported neglect will be recorded as an unsubstantiated case. However, the family will receive the services for the physical abuse the same as if there were an official substantiated case. Additionally, the decision to place children into state custody does not depend on the investigation disposition, but on the safety of the home.

Because of the complex relationship between reporting and investigation versus case substantiation, as well as underreporting, measures of child abuse and neglect can be difficult to capture accurately. The importance of reporting is great, as reports are an indicator of mandated reporter effectiveness and how severe a case may be if one family is reported multiple times.[14]

Child Abuse and Neglect Consequences

Stress due to child abuse and neglect has long-term social, mental and physical health impacts on children as they grow through adulthood. Long-term exposure to high levels of stress or trauma have detrimental physiological impacts.[15] When children experience such stress or trauma, their bodies respond by producing cortisol, exposure to which, over a period of time, can have a host of negative impacts on both development and eventual behavioral, physical and mental health.[16]

Child abuse and neglect are considered adverse childhood experiences (ACEs). ACEs are traumatic events that occur in childhood (0-17 years) including direct experiences as well as

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[15] Centers for Disease Control and Prevention. (2019). ACEs Pyramid. Retrieved from https://www.cdc.gov/violenceprevention/childabuseandneglect/acestudy/about.html
[16] Barlow J. (2014). Excessive stress disrupts the development of brain architecture. Journal of Children's Services, 9(2), 143–153. https://doi.org/10.1108/JCS-01-2014-0006

indirect experiences, like family member incarceration or witnessing domestic violence.[17] In Georgia, 58% of adults surveyed reported ACEs, reflecting that trauma and toxic stress pose a significant threat to the wellness of Georgia's families.[15] There is a graded response to the number of ACEs a person experiences, so those who experience more ACEs are more likely to experience greater negative impacts.[15] In fact, 37% of Georgia adults experience two or more ACEs.[15] Long-term consequences of these adverse experiences include substance use, depression and suicidality, cancer, and increased risk for a number of chronic health conditions.[18] ACEs are also associated with reduced job productivity and increased risk for unemployment among both men and women.[19] These outcomes also disproportionately impact racial and ethnic minority populations, who also experience greater community-level ACEs, such as poor-quality housing, community-level poverty, lack of economic mobility, and community disruption.[20] Immediate consequences, such as trouble focusing in school or processing emotions, can interrupt the educational experiences of children, leading to problems with school success, completing their education, securing meaningful work, and, ultimately, sustaining financial security.[21] As mentioned earlier, poor early and adolescent education outcomes have long ranging impacts on the future health of adults. These may also include barriers to accessing health insurance and health care access, barriers to stable high-quality housing, and higher risk for relationship problems that may all contribute to increased mental and physical health problems.

Another consequence of child maltreatment is that parents who were victims of maltreatment or other ACEs are at increased risk of becoming perpetrators of child maltreatment.[22] The negative health impacts of ACEs, such as substance use or trouble with emotional regulation, may also cause trauma or instability for the children of maltreatment victims. Recognizing the intergenerational cycle of child abuse and neglect provides an important opportunity for interventions to decrease risk for subsequent abuse and neglect. Preventing abuse and neglect at every level of society is paramount to sustaining the health and well-being of Georgia's children.[23]

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[17] Centers for Disease Control and Prevention. (2019). Preventing Adverse Childhood Experiences. Retrieved from https://www.cdc.gov/violenceprevention/childabuseandneglect/aces/fastfact.html

[18] Robert Wood Johnson Foundation (2013). The truth about ACEs. Retrieved from https://www.rwjf.org/en/library/infographics/the-truth-about-aces.html

[19] Liu, Y., Croft, J. B., Chapman, D. P., Perry, G. S., Greenlund, K. J., Zhao, G., & Edwards, V. J. (2013). Relationship between adverse childhood experiences and unemployment among adults from five US states. Social Psychiatry and Psychiatric Epidemiology. https://doi.org/10.1007/s00127-012-0554-1

[20] Ellis, W. (2017). The Soil in which we're Rooted; the Branches on which we Grow. ACEs Connection. Retrieved from https://www.acesconnection.com/blog/the-soil-in-which-we-re-rooted-the-branches-on-which-we-grow

[21] Fang, X., Brown, D., Florence, C. & Mercy, J. (2012). The economic burden of child maltreatment in the United States and implications for prevention. Child Abuse & Neglect. 36: 156-165. https://doi.org/10.1016/j.chiabu.2011.10.006

[22] Pekarsky, A. (2018). Overview of Child Maltreatment. Retrieved from https://www.merckmanuals.com/home/children-s-health-issues/child-neglect-and-abuse/overview-of-child-neglect-and-abuse#v26354907

[23] Camardelle, A. (2019). A Two-generation approach: Solutions to support student parents and their children. Georgia Budget and Policy Institute. Retrieved from https://gbpi.org/2019/a-two-generation-approach/

By focusing on the connection between early trauma and adulthood productivity, health and wellness, researchers are able to inform the decisions of child- and family-serving professionals working in all disciplines. The detrimental effects of child abuse and neglect impact the overall health and economic well-being of our state.

Because abuse and neglect victims are at increased risk for a number of negative health and life outcomes throughout their lives, this can generate significant financial costs to the state and its citizens. An economic analysis in 2011 estimated that the lifetime costs for a single victim is nearly $227,000.[21] These costs include short- and long-term health care, the child welfare system, criminal justice system, special education, and productivity losses.[21] In 2015, Georgia had 21,757 children with substantiated cases of maltreatment. Based on these estimates, these 21,757 children would be expected to generate almost $5 billion in total costs across their lifetimes. Every opportunity to reduce child abuse and neglect has significant potential for cost savings. If we prevent just one child abuse or neglect victim, we are saving almost a quarter million dollars over that child's lifetime in costs to the state and society.[21]

Child Abuse and Neglect Prevention

Child abuse and neglect prevention falls into three stages based on when the intervention or activities are targeted. These include primary, secondary, and tertiary prevention. Activities focused on creating the context to support children and families are considered primary prevention, while secondary prevention addresses families and communities at high risk for child abuse and neglect. Tertiary prevention aims to reduce the harm caused by an incident of child abuse and/or neglect that has already taken place.

In addition to the stages of prevention, there are different levels of society at which prevention can be targeted. From smallest to largest scale, they include supporting safe, stable, nurturing family relationships, creating supportive communities and environments, and providing necessary societal commitments and investments. Examples are outlined in Table 2 for each stage of prevention, at each level, including some current Georgia programs that exist to prevent child abuse and neglect.
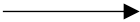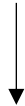
Utilizing all levels and stages of prevention is important. While it is necessary to provide resources and support to children who are victims of abuse and/or neglect, it is equally important to address the upstream social factors affecting families that increase the risk for maltreatment. This is also reflected in the professional and community member feedback collected across regional stakeholder meetings that prioritized factors like family economic stability, access to early childhood education and education quality as well as the importance of improving family mental and physical health. Integrating these priorities while building a community context for well-being is an optimum strategy to address the risks of child

maltreatment and improve the experiences of families throughout the state.[24,25] The CANPP is intended as a valuable resource for operationalizing prevention across many sectors. Table 2 outlines the existing model for child abuse and neglect prevention as illustrated by Prevent Child Abuse Georgia.[26]

[24] Child Welfare Gateway. (n.d.). Ecological framework for prevention. Retrieved from https://www.childwelfare.gov/topics/preventing/overview/framework/ecological/

[25] Centers for Disease Control and Prevention. (2015). The Social-Ecological Model: A Framework for Prevention Violence Prevention|Injury Center|CDC. Retrieved from https://www.cdc.gov/violenceprevention/publichealthissue/social-ecologicalmodel.html

Table 3: Overarching Perspectives of Child Abuse and Neglect Prevention[26]

Type of Prevention: ➡	Primary Prevention: *Awareness-raising for general public, service providers and decision-makers with the aim to stop child abuse and neglect before they occur*	Secondary Prevention: *Activities for communities that have risk factors associated with child maltreatment, such as poverty, parental substance abuse, young parental age, parental mental health concerns, and parental or child disabilities*	Tertiary Prevention: *Focus on families where maltreatment has already occurred (indicated) to reduce the negative consequences of the maltreatment and to prevent its recurrence*
Level of prevention: ⬇			
Safe, Stable, Nurturing Family Relationships	-Caregivers seeking resources through 1-800-CHILDREN helpline. -Caregivers attending parenting classes. -Caregivers finding support among each other by attending a Parent Café.	-Home visiting programs such as Parents as Teachers, Nurse Family Partnership, and Healthy Families. -Georgia parenting education programs such as Triple P or Nurturing Parent. -Substance use treatment or behavioral health services for parents prior to an incident of abuse/neglect.	-Therapy for children who have experienced sexual abuse (Child Advocacy Centers of Georgia). -Home visiting or parent education programs like SafeCare. -Substance use treatment or behavioral health services for parent/caregiver reported to DFCS.
Supportive Communities & Environments	-Raise awareness and advocate for family-friendly policies. -Family Connection Partnerships improve health and well-being for families. -Community and professional training such as Darkness to Light: Stewards of Children, Second Step Social Emotional Learning Curriculum in schools, Strengthening Families Georgia, and Connections Matter.	-Organizations are trained on their role as mandated reporters and are able to correctly respond to and report suspected abuse to prevent further harm from occurring. -Georgia Family Support Network.	-Abuse/domestic violence support groups and resources are available to individuals within their communities. -Laws put into place to protect those who have experienced abuse (domestic violence or human trafficking protections for example).
Societal Commitments & Investments	-Accessible healthcare, including mental health and substance use treatment. -Housing stability and affordability. -High quality childcare is accessible. -Businesses offer paid maternity and paternity leave.	-Childcare subsidies for families (CAPS). -Food and nutritional programs for women and young children (WIC). -College grants based on income.	-Funding to services for victims of crimes such as therapy, housing, or crisis support. -Drug and criminal justice reform. -The Families First Prevention Service Act.

[26] Prevent Child Abuse Georgia. 2019. Strategies are Needed at Every Level. Retrieved from https://abuse.publichealth.gsu.edu/prevention-model/

Overview of the Plan

What Is A State CANPP and How Can It Be Used?

A state Child Abuse and Neglect Prevention Plan is designed to provide effective approaches to reducing child abuse and neglect, promote statewide models of cooperation, decrease duplication of efforts, and increase efficiency in delivery of services. Recognizing the need for cross-sector and cross-agency collaboration, the CANPP provides a comprehensive, coordinated approach. It will enable us to capture the comprehensive impact of primary, secondary, and tertiary prevention efforts from state, regional, and local agencies and organizations and provide a framework to ensure accountability and charting where we are, where we need to be, and when we have reached our goals.

According to the 2009 Child Maltreatment Prevention Environmental Scan of State Public Health Agencies, 40 states reported that the prevalence of child maltreatment influenced the ways that their agencies set priorities.[27] Of the 21 states that reported having a statewide prevention plan for child maltreatment, 76% of them (16 agencies) reported being involved in their development and implementation.[27] The state of Illinois, for example, submits their plan annually in early October.[28] The plan includes descriptions of services and programs currently utilized to meet goals and addresses current and new issues as well as next steps.

Colorado and South Carolina collaborated to form the Child Maltreatment Prevention Framework for Action Planning, which both states publish in lieu of a state CANPP.[29] Another framework championed by Colorado is the state's Family-Friendly Workplace Toolkit, which considers practices that support families, such as providing a livable wage in accordance with the cost of living in the state, comprehensive healthcare, paid leave policies, and additional policies supporting caregiving responsibilities of employees.[30]

Maryland has successfully involved state government in child abuse and neglect prevention and created a policy communication page to convey the importance of integrating ACE awareness into policy and practice.[31] Similarly, Rhode Island and Indiana have created useful policy briefs to demonstrate the importance of children's health issues, specifically infant early development and the family's impact on this phase of life.[32]

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[27] Centers for Disease Control and Prevention Foundation. (n.d.). Findings from the 2009 Child Maltreatment Prevention Environmental Scan of State Public Health Agencies. Retrieved from https://www.cdc.gov/violenceprevention/pdf/PHLI_CM_environmental_scan-a.pdf

[28] Illinois Department of Children and Family Services. (2018). 2018 Child Abuse and Neglect Prevention Plan.

[29] Chapin Hall at the University of Chicago. (2017) Framework for Prevention Planning. Retrieved from https://cantasd.acf.hhs.gov/wp-content/uploads/Framework_for_Prevention_Planning-FINAL-10-5-17.pdf

[30] Colorado Department of Public Health & Environment. (2017). Family-Friendly Workplace Toolkit. [PDF file] Retrieved from https://docs.google.com/file/d/1-RNdawNQSYx3tOhgq0frAZfSlYUEcj5k/view

[31] Maryland Essentials for Childhood. (2019). The Adverse Childhood Experiences (ACE) Study & Maryland's ACE Prevalence. [PDF file]. Retrieved from https://mdessentialsforchildhood.org/wp-content/uploads/2019/02/2019-ACEs-MD-Policy-Maker-Overview-FINAL.pdf

[32] Rhode Island Kids Count. (n.d.). Rhode Island KIDS COUNT Issue Briefs. Retrieved from http://www.rikidscount.org/Data-Publications/Issue-Briefs

Georgia's Prior (1993) Plan

In 1993, the first and only previous Georgia statewide Child Abuse and Neglect Prevention Plan was established. This original plan reflects many of the current values of the child abuse and neglect prevention field, such as the importance of strengthening families and communities, the need for prevention to span the different levels of influence, and that children are to be valued. The plan also breaks down preventive actions that can be taken, sorted by prevention levels (primary, secondary, tertiary) and by age group (infancy through adolescence). Despite the age of the plan, it still aligns with many of the priorities identified in stakeholder feedback sessions. Based on the Kids Count, Georgia has improved in state rankings since development of the original CANPP. In 1990, Georgia's overall child well-being ranking was 49th out of 50 states. The original plan was implemented in 1993, and in 2019 Georgia was ranked 38th in the nation. The state plan has been an important guide to focus the efforts of child- and family-serving entities throughout the state since its conception.

The Purpose of the Plan

The purpose of the statewide Child Abuse & Neglect Prevention Plan is to guide a comprehensive, coordinated, multi-sector path to prevention. It will also serve as a means of accountability for charting where Georgia is, needs to be, and when established goals have been reached. This continual accountability was not successfully executed for the older CANPP. The inclusion of a clear plan for monitoring and tracking in the new plan will address this limitation.

The new plan includes goals that are more operational than those in the previous plan. Prioritizing prevention as early as possible is a high priority for improving child and family health throughout Georgia. There is a sharper focus on supporting contexts for healthy childhoods and making safe, stable, and nurturing options the most easily accessible in the updated plan. These goals were adapted from the original 1993 plan by a collective of subject matter experts and child-serving organization members. The new goals are listed below.

Goals of the new CANPP:

- Goals for Families:
    - All parents and caregivers have the skills and tools to meet the physical, intellectual, and emotional needs of their children.
    - All children have the tools, skills, and support needed to meet their potential.
    - All families have equitable access to culturally responsive services and resources in their communities to meet their needs.
    - Families are engaged in prevention-planning and evaluation efforts.
- Goals for Systems/Governments
    - All community, commerce, and state systems have integrated policies, training, programs and budgets that promote family and child well-being.

- o Systems collaborate and cooperate in planning and implementing a comprehensive continuum of prevention services including but not limited to strengthening economic supports to families, implementing family-friendly policies, and providing quality care and education.
      - o Permanent and adequate financial resources are equitably allocated to develop and maintain prevention strategies.
      - o All services and supports to children and families utilize trauma-informed, strength-based practices to intervene to lessen harms and prevent future risk.
- Goals for Society
      - o All Georgia citizens are accountable for the protection and well-being of our children.
      - o Prevention is valued as essential and achievable with collective action.
      - o Society invests in children early and throughout their lives.
      - o Georgia has increased equitable opportunities and access to services and resources that foster child well-being.
      - o Social norms reflect a culture that supports and sustains safe, stable, nurturing relationships and environments.

These reflect adaptations to the original plan's goals. Most noticeably, the new goals have been rewritten in a way that supports equitable access to services and supports. Access to and quality of services should be meeting the specific needs of families, some of whom require unique care, services, or supports. The updated plan reflects families' diverse structures and demographics. Concrete examples have been added to some of these revised goals to help clarify, such as the systems and societies sections. Commerce has also been added as a sector for a more inclusive multidisciplinary approach to CAN prevention and represent the varying prevention levels outlined by Prevent Child Abuse Georgia in Table 2.

The Revision and Methodology of the Plan

In May 2019, Director Tom Rawlings of the Division of Family and Children Services (DFCS) convened a meeting of child-serving state agencies and influential statewide organizations and coalitions to discuss updating Georgia's Child Abuse and Neglect Prevention Plan. Each entity identified a champion to participate in strategic planning conversations and internally communicate progress and requests. After a Champions kick-off session in July 2019, 25 planning sessions (as noted above) took place across the 14 DFCS regions — 14 sessions with service providers and professionals, and 11 sessions with parents, caregivers, local leaders (government, civic/community, faith, and business), and community members in August–September 2019. Approximately 635 individuals took part in the sessions. At the same time, two surveys aimed at similar audiences were shared statewide, in both physical and digital (webform) formats, with 801 surveys submitted. Six strategic objectives and 50 strategies were identified during the 14 provider and 11 community planning sessions.

While there was a high volume of feedback and input throughout the regional sessions, the data collected has some important limitations. Representation of professionals and service providers (525 at 14 meetings) was higher than that of community and family members (110 at 11 meetings). Some community member meetings received so few RSVPs that the professional and community member meetings were combined for efficiency. Another limitation of the process was that the discussion was primarily centered on low-income children and families that will benefit from an updated CANPP; however, the primary stakeholder groups included in community member informational sessions and survey responses were mostly middle-income.

Objective 1: Increase Family Economic Stability
Planning Team Highlights: Transportation – Telemedicine – Skill-based Education

It is evident how closely aligned the goals of sector leaders are; state government, local organizations, agencies, business owners, among countless others are in search of actionable work to combat child abuse and neglect in the state. Strengthening the state's economic activity and workforce, for example, is a means to reducing CAN risk among Georgia's families. Both the CANPP and Governor Kemp prioritize support for small business, economic stability, and implementing life **skills training** for school age children. Increased support for small businesses can also increase economic stability for families, which is one of the key levers of CAN prevention activities that also supports Georgia's overall business environment.

In addition to supporting conditions for business operation and economic stability for families, fostering business-friendly economic activity in the state could bolster rural areas of Georgia. A lack of local childcare centers and supportive resources is a barrier for families in rural areas of the state. Accessible healthcare centers, education institutions, and work opportunities may be limited for these citizens. These limitations to workforce development and business activity may negatively impact the well-being of children in rural families. To strengthen both the rural economy and rural families, addressing **transportation**, such as increasing public transit, (to health, education and employment centers) can facilitate growth in these locales. In the same vein, investments in **telemedicine** and telework may be viable solutions to the logistical barriers that inhibit access and growth in rural areas. By increasing digital and logistical options to access important institutions, Georgia's providers and state leaders can support rural economies while also laying the groundwork for safe and stable families. When full-time employment provides a living wage, the stressors of financial insecurity are reduced. Reducing the stressors for low income families by raising wages and supplementing income through measures such as tax credits would lead to a decline in overall child maltreatment, particularly neglect.[33]

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[33] Puls, H. T., Hall, M., Anderst, J. D., Leventhal, J. M., & Chung, P. J. (2020). Insurance Coverage for Children Impacts Reporting of Child Maltreatment by Healthcare Professionals. Journal of Pediatrics. https://doi.org/10.1016/j.jpeds.2019.09.073

Child abuse and neglect case substantiation rates are higher among families with lower total incomes. This over-representation in the child welfare system can be connected with stress incurred by a lack of resources that can make parenting extremely difficult.[5] Children experiencing poverty are also more likely to have behavioral, cognitive and physical health issues, which can add to the emotional and financial burden on their families.[5] Toxic stress brought about by poverty can also impact brain development, which may increase academic challenges and create other barriers to completing high school; physical illness resulting from poor-quality housing and lack of available transportation may also interrupt education and decrease positive social and financial outcomes.[5]

Future generations depend on educational opportunities to become skilled members of the workforce. Overall, children from families with lower levels of education have less employment security.[23] Approximately 170,000 Georgia families have parents without any postsecondary educational credentials; in 80,000 Georgia families with children, parents don't have a high school diploma or GED; and more than 500,000 children live in families where the parent lacks secure employment.[23] These are low rankings compared to other states' economic well-being and outcomes for children and families.[23] Increasing access to workforce development programs prior to high school graduation may serve to mitigate these burdens to families and the state as a whole by ensuring more secure employment opportunities.

Housing security is another important determinant of health affecting child well-being and level of educational attainment. Secure housing supports well-educated high school graduates, thus high-performing members of the workforce. The connection between children living in secure, high-quality housing and graduating high school is related to environmental factors in the home. Children living in poor-quality housing are more likely to experience illnesses like asthma, which can keep a child out of school for many days of the school year and these absences can decrease the likelihood that the child will graduate from high school.[34] Addressing housing stability in Georgia mitigates the harm of both child maltreatment and poorer educational outcomes for families. For example, one study "found that poor housing quality was most consistently associated with children's and adolescents' development, including worse emotional and behavioral functioning and lower cognitive skills."[34]

Low income families, particularly in urban areas, are more likely to be living in substandard housing with structural problems, including moisture intrusion, poor ventilation, and associated mold and pest-related problems. These families are also the least likely to have the means (money and education) by which to remediate such problems.[35] Often they also lack access to information regarding the extent of health problems associated with indoor asthma hazards and appropriate remediation responses.

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[34] Coley, R. L., Leventhal, T., Lynch, A. D., & Kull, M. (2013). Relations between housing characteristics and the well-being of low-income children and adolescents. Developmental Psychology. https://doi.org/10.1037/a0031033

[35] Evans, G. W., & Kantrowitz, E. (2002). Socioeconomic Status and Health: The Potential Role of Environmental Risk Exposure. Annual Review of Public Health. https://doi.org/10.1146/annurev.publhealth.23.112001.112349

Georgia's Opportunity:

Georgia does not currently have a state-level earned income tax credit (EITC). If a Georgia Work Credit were implemented, those who benefit from the federal EITC would be eligible for a state-level match, meaning nearly 1.1 million families would benefit from the state-level income tax credit.[36] The Georgia Work Credit is a ten percent refundable tax credit that would reduce tax bills for working families that struggle to make ends meet because of low-wage jobs.[36] Currently, the federal EITC serves nearly 2.6 million Georgians, of which 1.2 million are children.[36] These Georgians would be eligible for the Georgia Work Credit if implemented, meaning 1.2 million children would receive further financial support, reducing their risk for child abuse and neglect.[36]

The Georgia Work Credit has the potential to boost local economies, and specifically to support small businesses, a function of tax credits that the federal-level EITC has demonstrated.[36] Small businesses are more successful when families in their communities have more disposable income, and small business support is a priority of Georgia's Governor. Children whose families receive the Georgia Work Credit benefit twofold: firstly, they are financially supported. Secondly, their parents experience a reduced risk for perpetrating child abuse and neglect as a result of increased financial stability.[36] The local economy boost may also impact business owners and their families directly by supporting their incomes.

Objective 2: Increase Family Resiliency[37]
Planning Team Highlights: Parent Education – Family-friendly Practices – Creative Partnerships

Strong families are the foundation of strong communities and states. Resilience is cultivated by instilling protective or harm-reducing factors through means such as parenting classes and social connections.[22] With or without backgrounds of trauma or adversity, resilient adults prove better employees and parents.[21] Increasing the availability of evidence-based **parenting skills education** should be a priority as new federal funds (FFPSA) are available through the Georgia Division of Family and Children Services. Many evidence-based parenting programs such as SafeCare (National Headquarters in Georgia) have shown a $21.60 return for every $1 invested in the program.[38] Through increased availability and access to parenting skill development programs based on best-available evidence, Georgia's working parents can contribute further to both their professional and domestic responsibilities.

In rural areas, creative local problem solving, and the **collaboration of community leaders** may mitigate population declines and help integrate new family-friendly business practices to support the local workforce. Supportive communities can foster resilience in

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[36] Georgia Work Credit. (n.d.) Georgia Work Credit Would Boost State Economy, Working Families. Retrieved from https://georgiaworkcredit.org/about-eitc/

[37] Resilience is defined as the capacity for successful adaptation in the face of adversity.

[38] Washington State Institute for Public Policy. (2019). SafeCare Child Welfare Benefit-cost methods. Retrieved from http://www.wsipp.wa.gov/BenefitCost/Program/160

families, reducing normalized child abuse and neglect. Norms that support children and family well-being throughout a community lead to family-friendly policies and practices, which are a form of primary community-level child abuse and neglect prevention.[26] Promoting **evidence-based family-friendly business policies** (e.g., paid sick time, paid parental leave following the birth of a new baby, release time to attend parent–teacher conferences, on-site childcare). A byproduct of these offerings may be the ages of the children who benefit. Practices that support school-aged children help to develop members of the workforce who will actively contribute to a community over time and participate in problem solving to improve the community for families, children and business.

Currently in Georgia:

Adverse childhood experience (ACE) awareness: While the impact of adverse childhood experiences is more increasingly known throughout Georgia's child- and family-serving professionals, the original study is limited to family experience. Community-level trauma was not included in the original study and not all family- and child-serving work is currently focusing on addressing this type of adversity. The "Pair of ACEs" emerging now includes adverse childhood experiences and adverse *community environments*.[39] Since child abuse is such a multifaceted problem, understanding this greater context is key to increasing resilience in Georgia's children and its communities.

More recently is also a rise in awareness and understanding of the importance of resilience and Positive Childhood Experiences (PCEs).[40] Resilience is the ability to bounce back from tough situations. PCEs can build resilience in children and families. Positive Childhood Experiences (PCEs) are associated with supporting positive mental health outcomes with a graded response between quantity of PCEs and quality of mental health, and they build resilience that can mitigate the harm of ACEs. Proactively promoting PCEs may reduce adult mental health and behavioral problems, even in the concurrent presence of ACEs.[40]

Objective 3: Increase Access to Early Childhood Education
Planning Team Highlights: Literacy – Parental Employment Security – Economic Return

Early childhood education is one of the most impactful opportunities to support a child's healthy development. The rate of brain development in early life is one million connections per second, which means that nurturing development in the first years of life is key to growth and learning success throughout the life course.[41] The more support provided for early brain development, the stronger Georgia's children will be as students, employees and people.[5] The

[39] Reidy, C. (2018). WEBINAR: How to Use the 'Pair of ACEs' to Build Community Resilience. Retrieved from https://www.acesconnection.com/blog/webinar-how-to-use-the-pair-of-aces-to-build-community-resilience
[40] Bethell, C., Jones, J., Gombojav, N., Linkenbach, J., & Sege, R. (2019). Positive Childhood Experiences and Adult Mental and Relational Health in a Statewide Sample. JAMA Pediatrics. https://doi.org/10.1001/jamapediatrics.2019.3007
[41] Better Brains for Babies. (2018). Retrieved from http://www.bbbgeorgia.org/brainConnections.php

return on investment of high-quality early child education is estimated to be between $4-$9 per dollar invested.[42] Early investment in children not only leads to educational attainment in children, but greater career opportunities and success for adults and families, saving dollars on the state's social spending.[42]

There is a particular need for early child education and childcare businesses to strengthen rural Georgia. Rural parts of the state are often difficult areas for accessing both child care and early child education. By increasing the density of early education and care centers in rural Georgia, working parents will have increased access to childcare during working hours. In tandem with this outcome, the future of the area's workforce becomes more fruitful, as children who are educated from a young age develop the cognitive and behavioral skills to become productive citizens.[42]

A noteworthy benefit of early childhood education is increased **early literacy** rates. A child's language development begins in his or her first year of life, which highlights the importance of early education's impact on literacy of elementary, middle and high school-aged children.[43] Among disparate groups of young children (0-3), those who hear more unique words fare more successfully in their later lives. Parents, caregivers and early educators who create a language rich environment for children are key in fostering brain development and academic preparation.[44] In fact, environments that provide developmentally appropriate learning experiences, and opportunities for social play have been shown to compensate, to some degree, for the effects of stress on the brain.[45] Unfortunately, there is evidence to demonstrate an association with parental employment levels with the development of their children's vocabularies at this early ages. Parents earning higher incomes tend to have children with more unique words in their vocabularies; the opposite is true for parents with lower incomes.[46]

Additionally, students who read well at a young age experience fewer barriers to completing high school. Children who do not graduate high school are 63 times more likely to become incarcerated than their graduated counterparts.[47] In all regions of the state, increasing

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[42] Karoly, L. (2016). The economic returns to early childhood education. The Future of Children. 26(2) Retrieved from : https://files.eric.ed.gov/fulltext/EJ1118537.pdf ; https://eric.ed.gov/?id=EJ920516

[43] Harvard University, Center for the Developing Child. (2011). Retrieved from https://developingchild.harvard.edu/resources/inbrief-the-science-of-early-childhood-development/

[44] Sanders, L. M., Federico, S., Klass, P., Abrams, M. A., & Dreyer, B. (2009). Literacy and child health A systematic review. Archives of Pediatrics and Adolescent Medicine. https://doi.org/10.1001/archpediatrics.2008.539

[45] Dinehart, L. H., Katz, L. F., Manfra, L., & Ullery, M. A. (2013). Providing Quality Early Care and Education to Young Children Who Experience Maltreatment: A Review of the Literature. Early Childhood Education Journal. https://doi.org/10.1007/s10643-012-0553-6

[46] Greenwood, C. R., Carta, J. J., Walker, D., Watson-Thompson, J., Gilkerson, J., Larson, A. L., & Schnitz, A. (2017). Conceptualizing a Public Health Prevention Intervention for Bridging the 30 Million Word Gap. Clinical Child and Family Psychology Review. https://doi.org/10.1007/s10567-017-0223-8

[47] Hernandez, D. J. (2011). Double jeopardy: How third grade reading skills and poverty influence high school graduation. Annie E. Casey Foundation. https://doi.org/10.1080/02568543.2012.711801

availability and access to early childhood education are clear solutions to deficiencies across academic, economic and social areas. Participation in early child education during the first three years of life is positively correlated with early mathematics and reading skills for children from impoverished environments.[45] Similarly, enrollment in preschool programs was associated with reduced levels of physical aggression for children whose mothers reported low levels of education.[45] In addition to academic instruction, benefits of involvement with an early childcare program include: lower retention rates (repeated grades); **reduced dependency on public welfare systems**; reduced involvement in the criminal justice system; improved long-term health.[48]

Georgia's Early Care industry employs 67,507 people who work in a variety of jobs; Additionally, every 100 jobs in early care generates an additional 26 jobs in other industries.[48] This translates to a $4.7 billion annual investment in the Georgia economy. Every $1 spent in early care and education industry generates one additional dollar in short term positive economic activity.[48] **Parents** with children enrolled in early care and education are also less likely to miss work, more likely to earn more income to support their family and to **remain employed** at higher rates. Children who are enrolled in early care programs have the potential to gain between $9,166 and $30,851 more in lifetime earnings than other adults their age who did not receive similar care.[48]

In addition to more successfully sustaining meaningful employment, parents who utilize early child education are less likely to be at high risk for perpetration of child abuse or neglect. For instance, an ECE program can reduce the risk of abuse and neglect by ensuring the safety of its children, reducing parental stress, providing role models, and offering childcare relief and a system of support.[45] In one study, caregivers of children enrolled in Head Start or Early Head Start (EHS) programs were found to use less harsh discipline and a wider array of positive strategies to cope with parent–child conflict compared to caregivers who did not receive these childcare services. EHS children were also found to be less aggressive and have more positive parent–child interactions than their peers who were not in EHS.[45]

Georgia's Opportunity:
CAPS (Children and Parent Services) can offer resources that will sustain positive development through a child's lifetime, but currently there is a gap in coverage. The CAPS program provides scholarships that help some low-income working families in Georgia afford child care. The CAPS Program covers a set reimbursement rate based on the type of care, location, and age of child minus the amount the family is responsible for, known as the family fee, which is capped at 7% of a family's annual income.[49] According to Georgia Early Education Alliance for Ready Students, only 14.8% of income-eligible children receive a CAPS scholarship.[49] A program like this is a

[48] Voices for Georgia's Children. (2018). The Economics of Early Care in Georgia. Retrieved from https://georgiavoices.org/wp-content/uploads/2019/10/4.-Economics-of-Early-Care-in-GA-07.18.18.pdf
[49] Georgia Early Education Alliance for Ready Students. (2019). CHILDCARE AND PARENT SERVICES (CAPS): HELPING WORKING GEORGIANS AFFORD CHILD CARE. Retrieved from http://geears.org/wp-content/uploads/GEEARS_CAPS_TwoPager_FINAL.pdf

valuable support for families, but the coverage gap means that there is more work to be done. Expanding funding for this crucial program to a larger group of Georgia families would make a positive impact on access to early education. More funding could allow more children to be served with access to the early childcare and education that would support them and their families.

Objective 4: Increase Family Mental Health
Planning Team Highlights: Substance Use – School-based Resources – Increased Access to Trauma-informed Care

Mental health resource provision has been addressed in both the Governor's priorities and in the CANPP as an objective with numerous strategies, particularly a focus on integrating trauma-informed care across service providers in the state. **Trauma-informed care** is defined by the "four Rs" and organizations, programs or systems that are trauma-informed can be described as follows: "*realizes* the widespread impact of trauma and understands potential paths for recovery; *recognizes* the signs and symptoms of trauma in clients, families, staff, and others involved with the system; and *responds* by fully integrating knowledge about trauma into policies, procedures, and practices, and seeks to actively *resist* re-traumatization."[50] Mental health and behavioral health challenges, including substance use and bullying, can influence family stability and safety, work productivity, healthcare spending and violence victimization. Increasing availability of evidence-based mental health programs through schools, community resources and telemedicine channels would help to facilitate a healthy, productive state.

According to The Center of Excellence for Children's Behavioral Health, about one in five children (under age 18) suffer from a "diagnosable" mental health disorder.[51] These concerns, if left unaddressed, can cause children and youth to struggle to succeed by impairing academic performance, inducing maladaptive behavioral patterns that lead to truancy and disciplinary action, and creating cumulative, long-term detrimental impacts.[51] Assessing mental health at a young age, through screening and early intervention, can identify and prevent poor academic, behavioral and disciplinary outcomes that can have cumulative and long-term consequences throughout the lifespan of the child.[51]

Addressing poor mental health in children and young adults increases safety for those populations, stability for their families, and promotes productive contributions to society.[51]Identifying mental health complications early in the child's life can also open a more longstanding window of opportunity for successful intervention with mental health specialists,

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[50] Substance Abuse and Mental Health Services Administration. (2014). SAMHSA's concept of trauma and guidance for a trauma-informed approach. HHS Publication No. (SMA) 14-4884. U.S. Department of Health and Human Services.

[51] Center of Excellence for Children's Behavioral Health. (2018). The Georgia APEX program annual evaluation report. Retrieved from https://gacoeonline.gsu.edu/files/2018/03/Apex-Year-2-Evaluation-Report_Final.pdf

family support, and coping skill development to mitigate negative outcomes and prevent intergenerational cycles of poor mental health.

Part of **school-based mental health** support involves addressing and reporting school bullying. Keeping children, teachers and staff safe on campus is a priority held by Governor Kemp and identified in the CANPP. Bullying is a problem for victims and for teachers who may become responsible for intervention.[52] In order to support the mental health of students and to eliminate bullying as a barrier for teacher recruitment, bullying interventions and standards for reporting bullying are crucial areas that aid in preventing child abuse and neglect, negative student mental health outcomes, and may serve as an opportunity to identify if a child is experiencing some form of dysfunction in his or her home. Additionally, it was found that poor maternal mental health was associated with higher odds of bullying victimization.[53]

Treating **substance use** disorders is another category of behavioral health treatment that contributes to preventing child abuse and neglect and to the overall well-being of Georgia citizens. Implementing 24-hour/mobile/local detox and treatment facilities in areas where a hospital or similar center is not conveniently located would improve outcomes like overdose and overdose-related death and may be feasible, accepted by and useful to those in treatment for substance use.[54]

Like most health behaviors, the age at which a person engages in the behavior has implications for future behavior; the younger that a person initiates substance use, the greater the risk for developing a substance use disorder.[55] While it remains important to screen and treat other age groups for opioid use, research on age of initiation of opioid use indicates the necessity to screen school-age children and intervene early on drug use.[56]

Both serious parental mental health complications and substance use in parents are considered adverse childhood experiences, as they can lead to a toxic stress or a trauma

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[52] van Verseveld, M. D. A., Fukkink, R. G., Fekkes, M., & Oostdam, R. J. (2019). Effects of Antibullying Programs on Teachers' Interventions in Bullying Situations. A Meta-Analysis. Psychology in the Schools, 56(9), 1522–1539. Retrieved from https://search.ebscohost.com/login.aspx?direct=true&AuthType=ip,shib&db=eric&AN=EJ1230639&site=eds-live&scope=site

[53] Shetgiri, R., Lin, H., & Flores, G. (2013). Trends in risk and protective factors for child bullying perpetration in the United States. Child Psychiatry And Human Development, 44(1), 89–104. https://doi.org/10.1007/s10578-012-0312-3

[54] Guarino, H., Acosta, M., Marsch, L. A., Xie, H., & Aponte-Melendez, Y. (2016). A Mixed-Methods Evaluation of the Feasibility, Acceptability, and Preliminary Efficacy of a Mobile Intervention for Methadone Maintenance Clients. Psychology of Addictive Behaviors. https://doi.org/10.1037/adb0000128

[55] Schepis, T. S., & Hakes, J. K. (2017). Age of initiation, psychopathology, and other substance use are associated with time to use disorder diagnosis in persons using opioids nonmedically. Substance Abuse, 38(4), 407–413. https://doi.org/10.1080/08897077.2017.1356791

[56] Compton, W. M., Jones, C. M., Baldwin, G. T., Harding, F. M., Blanco, C., & Wargo, E. M. (2019). Targeting youth to prevent later substance use disorder: An underutilized response to the us opioid crisis. American Journal of Public Health. https://doi.org/10.2105/AJPH.2019.305020

response for children in the home. Mental health and substance use disorders can create high levels of stress that may cause long-term damage within a family. Along with the reduced trauma and increased health benefits of preventing negative mental health outcomes, primary, secondary, and tertiary prevention keep Georgia's children and families safe, promote positive economic outcomes and a high-quality workforce, and keep social and healthcare spending low. Between 2012 and 2016, the opioid crisis was associated with an increase of 50 percent in 6 states, one of which was Georgia.[57]

Georgia's Opportunity:
Georgia established a service and payment parity law for health insurance payers, which requires private payers to reimburse telemedicine services in the same way as in-person services. Telehealth expansion would give physical and mental health care access to many living in rural Georgia. Telehealth access is of particular importance for mental health services because of the nature of the services. Some apps and private companies are exemplifying how successful telehealth can be used to provide mental health services.[58] Given the access barriers experienced by many rural communities, telehealth services are an important opportunity to expand mental health and substance use treatment services. To ensure the benefits of this law are accessible in all areas of Georgia, broadband throughout the state will be necessary. Broadband expansion would support both the health of Georgians and small business in the state, both of which are priorities of Governor Kemp. The benefits of telehealth are a motivator for expansion of broadband in rural Georgia.

During the construction of this brief, Spring 2020, Georgia is using telehealth heavily, as is the rest of the world. During the Coronavirus outbreak, it is important that providers be able to accomplish their goals with the families they serve while maintaining social distancing practices. From screening for cases of Coronavirus in those who call the Georgia hotline and report symptoms to conducting child welfare scans, telehealth is proving to be of utmost importance to keep people safe.[59]

Objective 5: Increase Family Physical Health
Planning Team Highlights: Insurance System – Decreasing Workforce Burdens – Ongoing Medical Care for Children –
Additional focus on sexual health education

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[57] Radel, L., Baldwin, M., Crouse, G., Ghertner, R., & Waters, A. (2018). Substance use, the opioid epidemic, and the child welfare system: key findings from a mixed methods study. ASPE Research Brief. Retrieved from https://aspe.hhs.gov/system/files/pdf/258836/SubstanceUseChildWelfareOverview.pdf

[58] Langarizadeh, M., Tabatabaei, M. S., Tavakol, K., Naghipour, M., Rostami, A., & Moghbeli, F. (2017). Telemental health care, an effective alternative to conventional mental care: A systematic review. Acta Informatica Medica. https://doi.org/10.5455/aim.2017.25.240-246

[59] Hirt, S., Ball, A., & Wedell, K. (2020, March 23). *Children more at risk for abuse and neglect amid coronavirus pandemic, experts say.* USA Today. https://www.usatoday.com/story/news/investigations/2020/03/21/coronavirus-pandemic-could-become-child-abuse-pandemic-experts-warn/2892923001/

Access, availability, and cost are several barriers to seeking or receiving medical care. Obtaining affordable health insurance, securing transportation to a facility, and paying for care or copays are some specific examples. When families are healthy and children have a consistent source of care, their physical health and the health of their families improves.

Access to affordable **insurance coverage** is one of the most important influences on access to health care. One way states have successfully increased coverage for low-income and at-risk families is through Medicaid expansion. Nearly two million of Georgia's residents rely on Medicaid for vital health services, almost all of which are children, elderly, or disabled, meaning they are vulnerable populations.[60]

While vulnerable populations are most commonly covered, there are many people who are not. Pregnant women whose income does not exceed 200% of the federal poverty level (FPL) limit are a special group of Medicaid beneficiaries. They receive coverage through Right from the Start Medicaid (RSM) during their pregnancies, but only for 60 days following the birth of their children.[61] Sixty days is a brief period in the postpartum experience for both mother and her child, and much of the recovery from varying types of births may take even longer. Georgia was ranked 50 out of 50 states by Amnesty International's Maternal Mortality Ranking.[62]

Georgians between 100-400% of the federal poverty level (FPL) who do not receive Medicaid or insurance benefits through an employer are eligible for subsidies through the Health Insurance Marketplace, but way still face high costs for medical services. Those who are earning less than 100% FPL face significant challenges without access to Medicaid, as they are not eligible for subsidized health insurance on the Marketplace. Georgia's decision to not expand Medicaid leaves many low-income adults in the coverage gap. Georgia also has one of the highest rates of uninsured children with an estimated 217,000 uninsured, the majority of whom are eligible for PeachCare or Medicaid.[63] Based on evidence from other states, expanding Medicaid for adults has also shown to increase the number of children who are enrolled.

Expanding Medicaid will improve beneficiaries' abilities to sustain meaningful employment and recover from injury and illness in order to return to work. The economic

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[60] Harker, L. (2017). Medicaid Helps Millions of Georgians, State's Bottom Line. Retrieved from https://gbpi.org/2017/medicaid-helps-millions-georgians-states-bottom-line/

[61] Georgia Department of Human Services. (n.d.) Right From The Start Medicaid (RSM) - The RSM Medicaid Program available through the Division of Family and Children Services (DFCS). [PDF file]. Retrieved from https://dhs.georgia.gov/sites/dhs.georgia.gov/files/related_files/document/DFCS.RSM%20Medicaid%205.12.pdf

[62] Amnesty International. Deadly Delivery. (n.d.). *Appendix A.* [PDF File]. Retrieved from https://www.amnestyusa.org/files/pdfs/deadlydelivery.pdf

[63] Voices for Georgia's Children. (2020). Two ways to get kids covered. Retrieved from https://georgiavoices.org/wp-content/uploads/2020/02/18.-Two-Ways-to-Get-More-Kids-Covered-2020.pdf?9d7bd4&9d7bd4

benefits include a healthy, productive workforce and reduced reliance on social services. The Commonwealth Fund estimates close to $260 billion in lost productivity each year resulting from health issues; this includes absences while employed, productivity decreasing while present at work, and premature withdrawal from the workforce.[64] Affordable access to health insurance coverage is critical for both the health, productivity, and financial stability of Georgia families.

Early discontinuation of work or termination can lead to financial insecurity for families. Heads of household who suffer from **job insecurity** as a result of illnesses put their families' stability at risk. Individuals facing job insecurity may qualify for and utilize such initiatives as SNAP, WIC, unemployment, etc. There is overlap in the determinants of increased CAN risk and the determinants of relying on social services, as children who live in poverty experience heightened risk for child abuse and neglect.[5, 65]

In addition to keeping the workforce covered, expanding insurance access or offering benefits through employment help to prevent child maltreatment. When children receive some form of coverage, multiple benefits are reaped. The children, firstly, are more likely to receive care that is affordable to their families, meaning they can more easily be treated for injury and illness. Secondly, children with insurance coverage were found to utilize medical services more frequently, which leads to an increase in child maltreatment reporting.[33] And finally, **ongoing care** and a relationship with a primary care physician can reduce both the harms caused by maltreatment and reduce the risks of future maltreatment.[33]

A significant barrier to children's medical care is accessibility. In rural Georgia especially, the need for mobile health centers, community health screenings and telemedicine is high. Expanding equitable access to medical care across all regions of Georgia means creatively addressing these logistical issues to strengthen communities and families. Disparities in access to care in rural areas contribute to the lack of family care that some Georgians face. To close the gap between the "Two Georgias" (Georgia with accessible care and Georgia without accessible care) DPH identified key gaps in care: [66]

- o 6 counties had no family medicine physician
- o 31 counties had no internal medicine physician
- o 63 counties had no pediatrician
- o 79 counties had no OB/GYN
- o 66 counties had no general surgeon

[64] Besen, E., & Pransky, G. (2014). Trajectories of productivity loss over a 20-year period: an analysis of the National Longitudinal Survey of Youth. Scandinavian Journal of Work, Environment & Health, 40(4), 380.
[65] Flaherty, E., Legano, L., Idzerda, S., Flaherty, E. G., Sirotnak, A. P., Budzak, A. E., … Palsuci, V. J. (2019). Ongoing pediatric health care for the child who has been maltreated. Pediatrics. https://doi.org/10.1542/peds.2019-0284
[66] Georgia Department of Public Health. (2017). State health improvement plan. Retrieved from https://dph.georgia.gov/sites/dph.georgia.gov/files/GADPH%20SHIP%202017%20FINAL.PDF

Education is another key lever in improving the physical health of Georgia's children. Some forms of sexual education in schools serve as preventive factors for potentially compounding negative health impacts of child abuse and neglect later in life.[67] Evidence-based health education is by nature a physical health education but can also mitigate the negative impacts of child maltreatment victimization. Child maltreatment victims are more likely to struggle with self-regulation and this can translate into their sexual health behaviors as adolescents.[68] For instance, victims of neglect are found to have associated risk for casual sexual activity, increased number of sexual partners and a younger age at first intercourse, which have all been identified as sexual risk behaviors.[68] School-based sexual education programs, especially those that are trauma-informed and include material exclusively based on healthy sexuality, are an intervention for these at-risk children or children who have experienced child sexual abuse already.[67, 69] These types of healthy sexuality education help students regain autonomy and cultivate positive experiences, mitigating the negative impact of child maltreatment discussed above.[67]

Georgia's Opportunity:

Nearly two million Georgia residents rely on Medicaid for vital health services, almost all of whom are children, elderly, or disabled, meaning they are vulnerable populations.[60] Despite the high percentage of children who are insured in the state, there is are 217,000 children who remain uninsured despite their widespread eligibility for PeachCare or Medicaid. Expanding Medicaid in the state of Georgia will improve the workforce's capacity sustain meaningful employment and recover from injury and illness in order to return to work. Eliminating productivity loss resulting from health issues could save the state millions of dollars.[64] In addition, parents who work consistently rely less on the social services provided by the state, and decrease their children's risks for neglect.[5,65] Increasing access to healthcare for more families will also help to decrease maltreatment risk by offering ongoing care to children, protecting them further against abuse and/or neglect.[33] Decreasing this risk means that the future generation will be less likely to experience maltreatment and can avoid the trauma caused by it, growing up to be less reliant on social services as well.[15,17,18] Expanding Medicaid to cover more Georgians is an investment in the health of current parents and children and the future workforce in the state.

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[67] Pennsylvania Coalition Against Rape. (N.d.). Healthy Sexuality Education As Child Sexual Abuse Prevention. Retrieved from https://pcar.org/sites/default/files/resource-pdfs/healthy_sexuality_education_as_child_sexual_abuse_prevention.pdf

[68] Thibodeau, M.-E., Lavoie, F., Hébert, M., & Blais, M. (2017). Pathways Linking Childhood Maltreatment and Adolescent Sexual Risk Behaviors: The Role of Attachment Security. Journal of Sex Research, 54(8), 994–1005. https://doi.org/10.1080/00224499.2017.1316816

[69] Centers for Disease Control and Prevention. (2020). Risk and Protective Factors. Retrieved from https://www.cdc.gov/violenceprevention/childabuseandneglect/riskprotectivefactors.html

Objective 6: 6. Increase community knowledge and awareness of the societal factors that contribute to child abuse and neglect

Planning Team Highlights: Interdisciplinary approach to addressing CAN – Risks – Burden

Amidst all of the work that needs to be done to prevent child abuse and neglect, knowledge is the beginning of action. Families and communities would benefit from learning about the **risks and protective factors** for child abuse and neglect, as well as the outcomes, consequences, and **burdens** incurred upon society. Protective factors that are shown to decrease a child's risk for abuse and/or neglect victimization include a supportive family environment, parental employment, access to health care and social services, and communities that support parents, among others.[69] The foundational knowledge that parents and caregivers need to improve their parenting skills and understand the impact of child abuse and neglect can be provided in an evidence-based parenting skills training. Another pathway to knowledge may be through a parental outreach campaign from schools. Forming **creative alliances** to utilize the state's resources in the most effective and efficient manners begins with educating communities about child abuse and neglect.

Increasing community awareness of child abuse and neglect, its determinants, and its consequences has been shown to change how people think about the causes or conditions that increase the risk for trauma or maltreatment and about who can help prevent them; shift the focus from individual to community responsibility of prevention; and reduce stigma about seeking help with parenting, substance use, depression or suicidality.[70] Ultimately, increasing awareness of CAN helps whole communities promote safe, stable, nurturing relationships and environments where children live, learn, work and play.

Improving awareness of child abuse and neglect, including determinants and consequences, means more than reiterating that it is a problem and bad for children.[71] The quality of the messaging surrounding child abuse and neglect must be improved, meaning that ingrained narratives about parental failure, criminal behavior or a misunderstood governmental system may need to be dismantled. This type of messaging allows the public to overlook the types of prevention that simply bolster family well-being. Supporting parents and families at the community and societal level is an area that needs attention from the public. Upstream prevention, specifically, would be an area of opportunity in messaging and increasing community awareness.

Georgia's Opportunity:

The common knowledge that child abuse is a problem for children is only a starting place for community awareness of child abuse and neglect. Moving forward to enhance awareness about child abuse and neglect <u>prevention</u> means a focus on initiatives in the state like mandated

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[70] Centers for Disease Control and Prevention. (2019). Vital Signs: Adverse Childhood Experiences. Retrieved from https://www.cdc.gov/vitalsigns/ACEs/

[71] Centers for Disease Control and Prevention. (2019). Essentials for Childhood, Creating Safe, Stable, Nurturing Relationships and Environments for All Children. Retrieved from https://www.cdc.gov/violenceprevention/pdf/essentials-for-childhood-framework508.pdf

reporter training, ACE awareness, and family-building initiatives such as Strengthening Families Georgia. These initiatives aim to prevent abuse and neglect at all stages of prevention. With a more thorough understanding that child abuse and neglect prevention means focusing on child and family well-being (even before an instance of abuse or neglect occurs), these initiatives will more effectively operate across disciplines.

When service providers, policymakers, community leaders and caregivers understand that child well-being and abuse and neglect prevention are the same goal, program adoption, implementation and expansion can occur. Adapting public-facing messages about what causes child abuse and neglect and how far-reaching its consequences are can create space for important initiatives to work within all sectors in Georgia to create safe, stable, nurturing relationships and environments.

Conclusion

A state prevention plan can provide effective approaches to decreasing child maltreatment, promote statewide models of cooperation, decrease duplication of efforts, and increase efficiency in delivery of services. It will enable agencies, community members, and organizations to capture the comprehensive impact of primary, secondary, and tertiary prevention efforts from state, regional, and local agencies and organizations. It will provide a means of accountability for charting where prevention is, needs to be, and when the state has reached the goals laid out by the plan. This plan will be a reliable guide to implementing prevention across multiple sectors, which is a key lever in enacting prevention at all stages. Primary prevention is receiving more emphasis in public health with the passage of the Families First Prevention Service Act, and this plan parallels this emphasis. Focusing on social determinants of health and child well-being in all sectors is a complicated process, but this plan helps to bring a unified Health in All Policies lens to child abuse and neglect prevention.

It should also be noted that this brief was completed during the COVID-19 pandemic. During the quarantine phase, families are losing employment and lost childcare through mass school and care center closure. This is a season of strain on many families in Georgia, and risk factors for child abuse and neglect – like parental stress, economic instability and housing insecurity – increase during times of crisis.[59] Services that families rely on may now be conducted digitally, if they are being conducted at all, and telemedicine is proving to be an important tool for many providers. Improving the baseline of child abuse and neglect prevention is important during times where families are more stressed than normally. The Georgia CANPP can help the state's families, both during crisis and during times of peace.

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6. [Definition]

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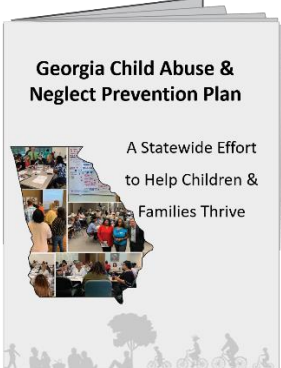
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Appendix 2: Communication Materials

CANPP Social Media Samples

Press day lead-up

Date	Social Art	Download Image	Content
3/15		Download link	In Summer 2019, Prevent Child Abuse Georgia and the Prevention and Community Support Section of Georgia DFCS held planning sessions in the 14 DFCS regions. Learn more about the new plan today!
4/1		Download link	Child abuse and neglect prevention takes a lot of participation from a lot of people. From education to transportation, everyone can make a difference for the children in Georgia. Take a look at the new plan **here** to learn more about abuse & neglect prevention!
(Day before plan release)		Download link	April is Child Abuse Prevention Month! For the first time since 1993, the state's plan for child abuse and neglect prevention has been updated. Grab your pinwheels and head to the Capital Building to hear about the new Child Abuse and Neglect Prevention Plan! Happy April!

We Went on the Road to Hear From You- Then What?

In Summer 2019, Prevent Child Abuse Georgia and the Prevention and Community Support Section of Georgia DFCS held planning sessions in the 14 DFCS regions, some for professionals and some for community members. In total, 25 of these sessions were held, where more than 650 people were able to offer feedback to guide the new state Child Abuse and Neglect Prevention Plan. Now the plan is ready to be utilized! To learn more about the new plan (and how we can use it to improve the lives of children and families, visit the full document **here!**

The State Child Abuse & Neglect Prevention Plan

Child abuse and neglect prevention takes a lot of participation from a lot of people. With the newly updated child abuse and neglect prevention plan for the state of Georgia, we now have guidance on how to integrate all sectors to positively impact children and families across the state. From education to transportation, everyone can make a difference for the children in Georgia. Take a look at the new plan **here** to learn more about abuse & neglect prevention!

Child Abuse Prevention Month is Here – So is the new Child Abuse and Neglect Prevention Plan!

April is Child Abuse Prevention Month! For the first time since 1993, Georgia's plan for child abuse and neglect prevention has been updated. Based on feedback gathered from community members and child- and family- serving professionals in Georgia, the plan combines strategies identified at the community level and has also been updated to offer a comprehensive approach to prevention, with more equitable opportunities for children to thrive in safe, stable, nurturing relationships and environments. Grab your pinwheels and have a look at the new Child Abuse and Neglect Prevention Plan. Happy April!

Press day invitation if the event is open. This can be added to any or all of these newsletter blurbs or social and will serve as a placeholder until the date is solidified.

If you'd like to see how the plan intersects with Georgia policy, come to the CANPP Press Day

Where: Capitol Building
When: April ##th, 2020 at #:##pm

ATLANTA, GA—April 1, 2020 – A new statewide Child Abuse and Neglect Prevention Plan will be released at Georgia's capitol building in April 2020. The plan has been updated for the first time since 1993 by Prevent Child Abuse Georgia and the Prevention and Community Support section of the Georgia Division of Family and Children Services (DFCS).

The plan's goal is to prevent child abuse at all levels of society through interdisciplinary cooperation across all of Georgia. "Child abuse and neglect prevention must take place across all sectors, so input from all sectors is vital, and this updated plan represents how partnership in prevention is not only possible, but necessary to improve the well-being of Georgia's children ," said PCA Georgia Director, Julia Neighbors J.D.

The two organizations partnered to update the state's outdated plan and integrated feedback from members of the communities and child- and family-serving professionals. Community planning sessions were held throughout the state to garner feedback from nearly 650 individuals (525 service providers, 110 parents/community members) and surveys were also completed by 801 Georgians from 158 counties.

# # #

About Prevent Child Abuse Georgia
Prevent Child Abuse (PCA) Georgia is a state chapter of Prevent Child Abuse America and is housed within the School of Public Health at Georgia State University's Mark Chaffin Center for Healthy Development (since January 2012). PCA Georgia provides statewide direction to build safe, stable, nurturing relationships and environments to prevent child abuse and neglect.

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A Vision for Child and Family Well-Being

GEORGIA'S CHILD ABUSE & NEGLECT PREVENTION PLAN

Georgia's Vision for Prevention

All Georgia's children and families have equitable opportunities to thrive in safe, stable, connected, and nurturing communities where they live, learn, work, and play.

- **Economic Stability**
- **Family Resilience**
- **Early Childhood Education**
- **Mental Health**
- **Physical Health**
- **Awareness**

The Plan Then & Now

The original plan in 1993, and the new plan in 2020- both aim to prevent child abuse and neglect.

The plan now reflects a more equitable approach than it did previously.

Plan Development

The Prevention and Community Support section of the Georgia Division of Family and Child Services and Prevent Child Abuse Georgia surveyed the state, collecting input from over 1,000 Georgians.

Moving Forward

Objectives laid out in the plan are intended to help child- and family service providers, community members, families, and businesses create and sustain nurturing environments for healthy families.

CORE strategies to strengthen Georgia's Families

Economic Stability for Families

- Expand transportation solutions linked to employment and post-secondary education
- Expand safe and decent affordable housing for families that are working, studying, or have a disabled head of household
- Expand small-business development and support programs

20% of children are living in poverty ($25,000/year for a family of four)

An area for opportunity:
Earned income tax credit (EITC) is not in place at the state level in Georgia. A state-level Georgia Work Credit would benefit 1.1 million families.
Over 500,000 children live in families where the parent lacks secure employment. **Workforce development programs** prior to high school graduation mitigate burdens to families and the state as a whole by ensuring more secure employment opportunities.

Family Resilience

- Increase availability of evidence-based or research-informed programs for parenting skills and support
- Shape social norms around positive parenting and family help-seeking in times of need
- Promote evidence-based family-friendly business policies

Georgia ranked **38th** in the nation for family and community

An area for opportunity:
Resilience is the ability to push through and bounce back from tough situations. Growing research shows the impact community and **relational wealth** plays in the resilience of families. Georgia is focusing on evidence-based programs that could merit funding from The Families First Prevention Services Act to help keep families together and kids out of foster care. Learn more at BlueprintFamilyFirst.org

Early Childhood Education

- Increase **access** to quality-rated centers or family-based education across the state
- Shape social norms around the life-long impact of early-childhood education
- Expand transportation access for children enrolled in pre-school

HALF of 3 and 4-year-olds in Georgia don't attend Pre-K

An area for opportunity:
Decades of research show those who attended preschool have greater social emotional competence, higher graduation and employment rates, and reduced incarceration rates. The return on investment (ROI) estimates range between $4 to $9 in net benefits per $1 spent on quality preschool programs, making it the best ROI when it comes to education.

Children and Parent Services (CAPS) provides childcare subsidies to low-income working families, but there is limited funding; only an estimated 14.8% of income-eligible children in Georgia receive a CAPS scholarship. Expanding eligibility for this crucial program to a more broad group of Georgians could make a positive impact for early education for Georgia's children.

Family Mental & Physical Health

- Increase accessibility of local, community-based programs and services for substance abuse recovery treatment
- Expand school-based mental health resources
- Implement tele-/web-based mental-health and substance-abuse resources in underserved communities
- Expand access to affordable insurance coverage for everyone
- Expand transportation resources linked to accessing community health
- Expand telemedicine services

7.4% of Georgia's kids don't have health insurance and **22%** have a parent who is not insured.

An area for opportunity in overall health:

Georgia is working to best structurally allow for telehealth. Telehealth expansion would give physical and mental health care access to many living in rural Georgia. To ensure the benefits of telehealth reach all areas of Georgia, broadband throughout the state will be necessary. This measure would support both the health of Georgians and small business in the state, both of which are priorities of Governor Kemp. Telehealth expansion could bring care to the 60 counties without a pediatrician or to the 76 without an OB/GYN care provider. Expanding care through telemedicine means care for children and families living in rural Georgia.

Community Awareness of Child Abuse & Neglect

- Increase community partnerships and collaborations around child abuse prevention
- Increase community awareness of the incidence of, long-term impact of childhood abuse and neglect, and how to accurately recognize and report suspected cases
- Promote evidence-based public policies that promote and provide funding for prevention of child abuse and neglect

An area for opportunity:

Adverse childhood experiences (ACEs) studies have brought light to the short and long-term impacts of trauma on children in recent years. Integrating this knowledge into prevention efforts and trauma-informed care must be the next step. Some practices in schools and medical establishments reflect these improvements to create protective factors and foster safe, stable, nurturing relationships and environments. Anything that strengthens families can be part of child abuse and neglect prevention. While it's important to understand these problems, it's just as important to understand how to prevent them!

Prevent Child Abuse
Georgia

Georgia ranks 1st in the nation for small business, but 38th for child well-being

Safe, Stable, Nurturing Relationships and Environments

Child abuse and neglect is not caused by a single factor but by multiple factors related to the individual, family, community, and society at large. Environments that are violent, lack accessible and effective community resources, and are disproportionately affected by poverty or unemployment are variables that contribute to child abuse and neglect. True child abuse and neglect prevention starts with the health and well-being of the family. True prevention is anything that promotes a strong family.

Georgia ranked 40th in the country in economic well-being	Georgia ranked 34th in the nation in education
Georgia ranked 38th in the country for family and community	Georgia ranked 34th in the nation in overall child health

What can you do?

A family-first agenda for child abuse and neglect prevention in Georgia is impossible without you. Consider what you can do to help to reach the goals of the state child abuse & neglect prevention plan to create safe, stable, nurturing relationships and environments for the families and children of Georgia.

Visit **PCAGeorgia.org** to check out the plan. You can also reach out to Prevent Child Abuse Georgia at PreventChildAbuseGA@gsu.edu to learn more about child abuse prevention efforts going on in our state!