



The Governor's Office
of Youth, Faith
and Family



Council on Child
Safety and
Family Empowerment



2019 ANNUAL REPORT

FaithandCommunity.AZ.gov



DOUGLAS A. DUCEY
GOVERNOR

STATE OF ARIZONA
OFFICE OF THE GOVERNOR

MARIA CRISTINA FUENTES
DIRECTOR

June 21, 2019

Governor Doug A. Ducey
State Capitol Executive Tower
Phoenix, AZ 85007

Dear Governor,

It has been my pleasure to serve as chair of the Governor's Council on Child Safety and Family Empowerment. I would like to acknowledge the work of the members of the Council and its diverse sub-committees and work groups. Their expertise and passion to serve vulnerable communities across Arizona has made this work possible. In the following report, I am proud to present the outcomes and activities of the Council representing 2018/2019 as well as summary of future projects.

During this last year, the Council received presentations that highlighted Adverse Childhood Experiences (ACEs) and their tremendous negative impact on future lifelong health and opportunities. The Council continued to learn and implement strategies to prevent ACEs in our community by assuring safe, stable, nurturing relationships and environments. Working together, we can help create environments, communities, and an Arizona in which every child can thrive.

It is my hope that our continued efforts and collaborative partnerships concerning ACEs and trauma informed care will improve and better serve our most vulnerable youth and families.

Sincerely,

A handwritten signature in blue ink that reads "Angela Ducey".

Angela Ducey
Chair
Council on Child Safety and Family Empowerment

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COUNCIL PURPOSE AND STRUCTURE

Governor Doug Ducey established the Council on Child Safety and Family Empowerment (CSFE) on July 13, 2015, through Executive Order 2015-08. This Council is administered by the Governor's Office of Youth, Faith and Family (GOYFF). The Council was established on the premise that strong families and youth are the future of Arizona and are of vital importance to our communities and economy. To facilitate this vision, the Council works to align, leverage and coordinate faith-based and community resources to solve challenges faced by our state's vulnerable children and families.

Government plays an important role in providing supportive benefits, goods, and services, but that role is limited. This is why the Council works with both the private and public sectors to serve our communities. Through its work, the Council has broadened the network of support and services for Arizona's most vulnerable children and families by responding to community challenges and providing opportunities for development and growth.

In addition to the five Council meetings a year, Council members serve on subcommittees. The subcommittees meet regularly to address community needs and systemic challenges with the purpose of identifying best practices and providing evidence-based solutions. The Council accomplishes its work through five subcommittees:

AFRICAN AMERICAN CHILDREN AND FAMILIES

Engages the African American population and works to address community specific challenges, such as disproportionality within the foster care system.

OUTREACH

Connects with Arizona's faith-based communities and answers their question, "How can we serve?"

PARTNERSHIPS

Identifies strategic alliances involving public-private cross-sector partnerships and funding sources for child abuse prevention programs.

PREVENTION

Seeks to address the underlying issues that contribute to a child being removed from a home and placed into foster care.

SUPPORT

Identifies and develops strategic training for the communities and adults that interact with children in the foster care system.

COUNCIL MEMBERSHIP

In accordance with Executive Order 2015-08, the Council is comprised of individuals appointed by the Governor who serve at his pleasure without compensation. The following members currently serve on CSFE:

Angela Ducey

Chairperson
First Lady of Arizona

Lorrie Henderson

Jewish Family & Children's
Service

Leslie Reprogle

Agape Adoption Agency of
Arizona

Kathryn Pidgeon Co-

Chairperson
Adopt AZ

Zora Manjencich

Arizona Attorney General's
Office

Marcia Stanton

Phoenix Children's Hospital

Berisha Black

Child Welfare Consultant/
Trainer

Vicki Mayo

Touchpoint Solution

Warren Stewart

Remnant South PHX

Kate Brophy-McGee

Arizona State Senator

Greg McKay

Arizona Department of Child
Safety

Andrea Stuart

Arizona Baptist Children
Services

Jay Cory

Phoenix Rescue Mission

Colleen McNally

Presiding Juvenile Court
Judge, Retired

Torrie Taj

Child Crisis Arizona

Terry Crist

Hillsong Church Phoenix

James Molina

Step Up Arizona

Jeff Taylor

Salvation Army Advisory
Board

Roy Dawson

Arizona Center for African
American Resources

Paul Mulligan

Catholic Charities

Mark Upton

Christian Family Care

Molly Dunn

FosterEd Arizona

Darlene Newsom

UMOM New Day Centers

Richard Yarborough

Pilgrim Rest Foundation

Obed Escobar

Church Alliance

Julie O'Dell

Arizona Department of Child
Safety

Janet Garcia

Casey Family Programs

Katie Odell

AZ 1.27

COUNCIL GOALS, 2018/19

CSFE is a public-private partnership created to support Arizona's children and families. The goal of this Council is to prevent children from entering the foster care system. During this past year, the Council continued to focus its efforts on the overarching objective of reducing and preventing Adverse Childhood Experiences (ACEs).

Adverse Childhood Experiences - ACEs

In 1998, the American Journal of Preventative Medicine published the CDC-Kaiser Permanente Adverse Childhood Experiences (ACEs) study.¹ This was the first research project to look at the effects of multiple types of childhood trauma on adult health and well-being. It still stands as the largest study of its kind. Over 17,000 patients completed the survey. The questions fell into two categories: 1) abuse or neglect, (recurrent physical and/or emotional abuse; sexual abuse; physical or emotional neglect) and 2) household dysfunction (witnessing the abuse of a parent or caregiver; living with an adult with a substance use disorder; having only one parent or no parents in the household; living with someone suffering from chronic depression, mental illness, or suicidal tendencies; having an incarcerated household member or someone who has been institutionalized). The results of this data were then matched with the patient's physical exams, current health status, and self-reported behaviors. The survey participants were followed for 15 years.

The ACEs study revealed an association between trauma experienced in childhood and an increased risk for physical and mental health issues in adulthood. The study also found that adults who experienced childhood trauma faced higher incidences of other problems such as incarceration and employment issues.² Findings from the research included the following three observations:

1. ACEs are common. In this study, 28% of the participants reported physical abuse and 21% reported sexual abuse. Many participants reported experiencing parental separation or divorce or having a parent with a mental illness and/or a substance use disorder.
2. ACEs often occur in clusters. Almost 40% of the participants reported having multiple ACEs and 12.5% experienced four or more. Because ACEs cluster, many subsequent studies have examined the cumulative effects of ACEs rather than the individual impact of each.
3. ACEs have a dose-response relationship with numerous health problems. Researchers discovered that a person's cumulative ACE score had a strong, graded (i.e., doseresponse) relationship to numerous health, social and behavioral problems. Though each individual ACE often resulted in a negative outcome, the impact of multiple ACEs was found to be exponentially greater than that of a solitary traumatic experience.

¹ CDC-Kaiser Permanente, Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults, American Journal of Preventive Medicine, 1998, Vol. 14, p.p. 245–258.

² Jane Ellen Stevens, 2012. <https://acestoohigh.com/2012/10/03/the-adverse-childhood-experiences-study-thelargest-most-important-public-health-study-you-never-heard-of-began-in-an-obesity-clinic/>

Numerous studies on ACEs have been conducted since the original research was published. All have produced similar findings, further validating the association between early traumatic childhood experiences and future health and social challenges.³

Dr. Robert Block, former president of the American Academy of Pediatrics, stated “Children’s exposure to ACEs is the greatest unaddressed public health threat of our time.”⁴ When ACEs are not addressed in children, their risk factors increase for many physical and behavioral health issues in adulthood, such as smoking, obesity, substance abuse, depression, and sexually transmitted diseases (see chart below).

ACE Study Results

CDC – Kaiser ACE Study

	33% Report No ACEs	51% Report 1-3 ACEs	16% Report 4-10 ACEs
	With 0 ACEs:	With 3 ACEs	With 7+ ACEs
Smokes	1 in 16	1 in 9	1 in 6
Alcoholic	1 in 69	1 in 9	1 in 6
IV Drugs	1 in 480	1 in 43	1 in 30
Heart Disease	1 in 14	1 in 7	1 in 6
Attempts Suicide	1 in 96	1 in 10	1 in 5

Impact of ACES on Healthy Child Development

Contemporary scientific research has brought about a paradigm shift in the medical community regarding the impact that ACEs have on a person’s health later in life. It has also shown how these adversities impact a child’s early brain development.⁵ This impact is due to what has been noted as toxic stress. Toxic stress has been defined as “extreme, frequent or extended activation of the body’s stress response without the buffering effect of a supportive adult.”⁶ The normal stress response, also known as the “fight, flight, or freeze” response, is intended as a protective measure in the presence of a perceived threat. A healthy response brings about a brief increase in the heart rate and a mild elevation of adrenaline and cortisol, the stress hormones. This flood of hormones temporarily shuts down the reasoning area of the brain,

³ Brown, Masho, Perera, Mezuk, & Cohen, 2015; Smith, Gotman, & Yonkers, 2016; & Windle et al., 2018

⁴ Georgetown University Center for Child and Human Development, <https://georgetownta.wordpress.com/2015/03/05/who-needs-to-pay-attention-to-the-ace-study/>

⁵ Stevens, 2012.

⁶ Sara B. Johnson, et al., The science of early life toxic stress for pediatric practice and advocacy, 131 PEDIATRICS 319 (2013), available at <http://pediatrics.aappublications.org/content/131/2/319.full>.

switching the mind into the instinctive survival mode. After the threat is gone, the stress hormone levels go down and the brain returns to its normal reasoning capacity.

When a child lives in an adverse or abusive situation without the support of a healthy adult relationship, stress hormones remain at an elevated level, which negatively affects the child's immune, neuroendocrine and nervous systems.⁷ Living under toxic stress during the early years of life can result in epigenetic changes (producing chemical reactions at the cellular level responsible for activating/deactivating genes).⁸ These chemical modifications can negatively impact normal development cellular level, and can be passed down from one generation to another. Toxic stress has been shown to stunt brain development in young children in a way that leads to both cognitive and emotional challenges. However, science has also shown it is possible to mitigate these challenges by learning to respond or react to toxic stress differently so that epigenetic changes can be reversed - meaning that no situation is hopeless.

Trauma Informed Care – A Calculated and Coordinated Response

A recent survey determined that over 30% of Arizona's children, ages 0-17 years, have two or more ACEs.⁹ Based on this survey and the scientific evidence concerning early childhood trauma, CSFE firmly believes that a strong response to prevent and reduce ACEs in Arizona's youth population is a priority in order to support the Governor's vision for Arizona to be the number one state in which to live, work, play, recreate, visit, do business and get an education. Increasing public awareness of ACEs has the potential to improve the health of all children in our state. Focusing on prevention can provide the support families need to prevent children from entering foster care. Improving the way we respond to our citizens through a trauma-informed approach can help mitigate the effects of toxic stress and break generational cycles driven by ACEs.

Experts in the field have determined that developing trauma-informed systems around children is a primary means of reducing ACEs and the effects of childhood trauma. The Substance Abuse and Mental Health Services Administration (SAMHSA) defines trauma-informed care as, "a strengths-based service delivery approach that is grounded in an understanding of and responsiveness to the impact of trauma, that emphasizes physical, psychological, and emotional safety for both providers and survivors, and that creates opportunities for survivors to rebuild a sense of control and empowerment."¹⁰ A trauma-informed approach or program includes each of the following elements: 1) realizing the prevalence of trauma; 2) recognizing how trauma affects all individuals involved with the program, organization or system, including its own workforce; 3) responding by putting this knowledge into practice; and 4) resisting re-traumatization.¹¹

⁷ Danese & McEwen, 2012.

⁸ Harris, Nadine B., 2018.

⁹ America's Health Rankings study, Adverse Childhood Experiences by State rankings.

<https://www.americashealthrankings.org/explore/health-of-women-and-children/measure/ACEs/state/AZ>

¹⁰ SAMHSA's Center for the Application of Prevention Technologies (2018).

¹¹ Ibid.

SAMHSA recommends a preventative response to ACEs by 1) increasing awareness of ACEs among state agencies and community organizations that deal with child abuse and foster care, emphasizing the relevance of ACEs beyond these systems and across disciplines, and 2) selecting and implementing evidence-based programs and strategies designed to address ACEs including efforts focused on reducing intergenerational transmission of ACEs.¹² The Council will continue to focus on educating Arizonans concerning ACEs and trauma-informed care. Activities in the upcoming year will be conducted through this lens with the intent to strengthen Arizona's children and families as well as providing additional support to families caring for foster and adoptive children.

COUNCIL ACTIVITIES

5th Annual Statewide ACEs Summit

Governor Doug Ducey and First Lady Angela Ducey joined over 400 national, regional and local leaders in December 2018 in Phoenix, AZ for the 5th Annual Arizona ACEs Summit, an event focused on promoting trauma-informed care to best treat those who have experienced Adverse Childhood Experiences (ACEs). The summit shared proactive and trauma-informed methods to mitigate the lifelong effects of traumatic childhood experiences caused by abuse, neglect or household dysfunction. The desired outcome of the annual statewide summit is for Arizona communities to be better equipped to implement policies, procedures and practices to prevent re-traumatization of individuals who have experienced ACEs.

"We must do everything we can to protect Arizona's most vulnerable. I'm proud of the shared efforts taking place across our state to develop and implement forward-thinking trauma-informed care. Together, we have the ability to prevent and reduce the impact of childhood trauma and secure a brighter and more resilient future for our children, families and communities."

- Governor Ducey

The 2019 summit provided attendees the opportunity to participate in workshops led by national and state experts who have been instrumental in shaping Arizona's current trauma-informed care practices. Attendees also had the opportunity to share and discuss how to build upon current successes to continue improving Arizona's response to ACEs and trauma.

"The health and creativity of a community is renewed each generation through its children. The family, community, or society that understands and values its children thrives-- the society that does not is destined to fail. I am confident particularly with the support of the governor and the governor's wife and all of this senior leadership that you're going to make change. It's gonna take places like this who have the intention. In this state there are many, many, many good initiatives underway that are helping."

- Dr. Bruce Perry

¹² Ibid.

Arizona is committed to reducing the number of citizens who experience ACEs by providing the support necessary to create happier and healthier communities statewide. State agencies, including Arizona's Department of Health Services and the Arizona Department of Child Safety, have partnered to reduce and mitigate the impact of ACEs through trauma-informed care and worked closely together to support the planning of the 5th annual ACEs summit.

"Advancing progress in the area of trauma-informed care can play a big role in helping to prevent and mitigate the impact of Adverse Childhood Experiences. I want to express my appreciation for all of the community groups, nonprofits and faith-based organizations that have partnered with us to support vulnerable children and strengthen Arizona families."

- First Lady Angela Ducey

State Agency Partner Activities

Arizona is committed to ensuring trauma informed care becomes the standard for supporting children and families across Arizona. Through continued efforts and collaborative partnerships, Arizona is working to improve and better serve our most vulnerable youth and families through a trauma informed lens. State agencies are vital to the success of expanding this work in a number of sectors, including: child welfare, health, behavioral health, corrections, and education. Following are examples of the efforts within state agencies in 2018/19:

Department Of Child Safety (DCS)

- Implemented in May 2018, the DCS *Workforce Resilience – Peer Support Program* is focused on supporting and enhancing the well-being of employees, "our most valuable asset". The program addresses the high-stress nature of social work, which can quickly lead to burnout and contribute to high employee turnover if not adequately addressed. In order for DCS employees to continue to engage with children and families in a kind and compassionate way, they must have a safe space for processing toxic stress that stems from being involved in difficult case-related or personal events, this program provides that safe space. Approximately 40 DCS employees across the state have volunteered to provide confidential and timely resource to aid fellow DCS employees with the unique challenges of their roles and the impact it can have on personal and professional lives. Through January 2019, the program has provided 481 supportive responses to DCS employees. In addition the program has provided pre-incident training to DCS professional to help identify toxic stress and seek resources for healing.
- *Safety Science - Systemic Critical Incident Review Process*: DCS has adopted new processes to assist in a continued shift towards a culture that is intentional about creating safe and secure environments to support employees engaged in important child welfare work. When a critical incident occurs, DCS has committed to reducing the trauma staff feel around the adverse event through the use of theories and methods from contemporary safety science with components of forensic interviewing to engage staff through a trauma informed lens. Between fiscal years 2016 and 2018, this process has been utilized 106 times and has transformed DCS' communication strategy around the critical incident process.

- *DCS Victim Services Unit:* Implemented in 2018, this 8 person unit was created to safeguard victims' rights for children in DCS care. Victim Services Liaisons are assigned to cases to ensure that children's rights are protected and to ensure there is regular communication between DCS case managers and law enforcement agencies (including prosecutorial agencies). The unit advocates for specific rights for crime victims, including the right to have their voice heard in court, to be treated with dignity and respect, and to refuse an interview or deposition with the accused and the accused's defense counsel.

Governor's Office of Youth, Faith & Family (GOYFF)

- With support from Arizona's federal State Targeted Response grant, GOYFF contracted with Prevent Child Abuse Arizona and the Arizona ACEs Consortium to provide trauma informed care training to substance abuse coalitions and providers across the state. In-person training was provided to 20 community coalitions and an online training platform was created for post-training access. In addition Arizona Department of Corrections received training for 75 counselors, chaplains, educators, and community corrections officers.
- With support from Arizona's State Opioid Response (SOR) grant, GOYFF supported expansion of Triple P (an evidence based, trauma informed program) for clients of domestic violence shelters; parents working towards reunification with their children who are in the care of DCS; and incarcerated parents. Existing providers that serve each of the three target populations within one or more of the geographic "hotspots" identified as having the highest rates of opioid-related deaths were prioritized. These included the greater metro Phoenix and metro Tucson areas, as well as rural Mohave, Yavapai, Pinal, Gila, Navajo, Yuma and Coconino counties. 40 providers were engaged and recruited to be trained as Triple P practitioners to serve parents in at least one of the three target populations. It is estimated each practitioner will be able to serve approximately 25-30 families per year. In addition, online access to Triple P has been arranged for up to 115 families who may be difficult to access for in-person sessions (e.g., incarcerated parents).

Arizona Health Care Cost Containment System (AHCCCS)

- In FY 2018, over 2700 behavioral health staff received 8 hours of training on ACEs and trauma-informed care and 160 primary care providers received 4 hours of education on ACEs and trauma-informed care.
- With support from Arizona's federal Targeted Investments grant, AHCCCS contracted with the ACEs Consortium and the Arizona Trauma Institute to develop and provide trauma-informed training and screening tools for pediatricians and primary care physicians who serve children in the child welfare system. Participating pediatricians and primary care physicians are financially incentivized to become trauma-trained and to conduct screening and referral to approved trauma-trained behavioral health providers. As of March 2019, there were 125 trained and participating primary care provider sites across the state.
- Also supported through Arizona's federal Targeted Investments grant, AHCCCS contracted with Southwest Human Development to develop and provide developmentally

appropriate service delivery and evidence-based program delivery for trauma-informed care to behavioral health providers who serve children in the child welfare system. Participating behavioral health providers are financially incentivized to become trauma trained and conduct developmentally appropriate trauma-informed service delivery. As of March 2019, there were 128 trained and participating behavioral health provider sites across the state.

- Pediatric Behavioral Health Program participants are utilizing evidence based practices and coinciding case management approaches for trauma-informed care. Children ages 0-5 are assessed with Early Childhood Service Intensity Instrument (ECSII) to determine the intensity of services needed to assist with their emotional, behavioral, and/or developmental needs and to inform service recommendations.
- Pediatric Primary Care Program participants are utilizing evidence based protocols for children/youth who screen positive for ACEs.
- Efforts focused on the opioid epidemic: AHCCCS is working to raise awareness on the connection between ACEs/trauma and Opioid Use Disorder. Much of this work involves creating outreach material for the public, medical providers, criminal justice, and behavioral health providers to help identify trauma and mental health disparities among individuals with Opioid Use Disorder (OUD). AHCCCS is working on an effort to use ACE screens in pain management, PCPs and health centers prior to prescribing opioids as well as encouraging non-opioid alternatives as front-line for all individuals, but in particular for this population. In addition, AHCCCS is working to educate and train pain management PCPs and health centers on recognizing the role of chemical coping for trauma among individuals receiving opioid medication who are at high-risk for overdose. The long-term vision for the latter is to encourage integrated care (medical and behavioral health) models for this population. AHCCCS is also doing an assessment of current utilization of trauma-informed services as part of the OUD treatment plan and encouraging all OUD providers to include trauma-informed services as part of their treatment of OUD.
- Efforts within Maternal Care include: 1) Trauma-informed care and ACEs have been included in Maternal Child Health/Early Periodic Screening & Diagnostic and Treatment (MCH/EPSDT) Quality meetings; 2) Trauma-informed care concepts have been incorporated within AHCCCS policy for Systems of Care for Adults and Children; 3) ACEs and traumatic events have been incorporated into the Working with the Birth Through Five Tool; 4) Trauma Informed Care concepts have been built into the AHCCCS 2018 State Plan to end suicide; 5) Trauma Informed Care concepts have been incorporated in AHCCCS 2018 Learning Opportunity training sessions; 6) Cenpatico Integrated Care, Health Choice Integrated Care, and Mercy Maricopa Integrated Care are addressing Trauma Informed Care as part of their provider/staff training; and 7) a Quality Caregiver Initiative has been designed to bring trauma-informed trainings and developmentally appropriate services to the caregivers of children in foster care.

Department Of Health Services (DHS)

- DHS has committed to be a trauma informed agency

- DHS has incorporated ACEs as an element in its statewide health assessment and reports on Arizona data of ACEs occurrences in the clients they serve.
- With support from GOYFF and AHCCCS, DHS is developing statewide guidelines for trauma-informed care and developing training opportunities in the health field.
- In 2018, DHS trained over 600 staff members working in Women, Infants, and Children (WIC) clinics across Arizona to provide knowledge and tools that support moms and pregnant women - improving their resiliency and increasing protective factors to mitigate Adverse Childhood Experiences.
- Over 800 home visiting professionals providing in-home services to at-risk families were trained on the role childhood trauma can play in adult disease and how to mitigate the impact of trauma and ACEs at the September 2018 Statewide Strong Families Home Visiting Conference.

Department of Economic Security (DES)

- DES, in partnership with Southwest Human Development, is leading the way in Arizona's expulsion prevention efforts through the Southwest Human Development Preschool Expulsion Program. The program equips caregivers with needed skills and strategies to respond effectively to challenging behaviors through a series of trainings on expulsion prevention. Participants learn how understanding child development, attachment, trauma reaction and support of children's developing self-regulation skills can help reduce and prevent expulsion of children from birth to 12 years old.
- Trauma Informed Care was introduced into DES Child Care Subsidy programs in June 2017. 2017 data showed that 32% of Arizona children received support through DES child care subsidies. 2018 data showed an increase to 40% of Arizona children receiving DES child care subsidies. For FY19/20, DES's budget proposal requested an additional \$56 million to expand child care subsidy, increasing access for low-income families and foster parents - ultimately increasing stability and safety for this vulnerable population.

Arizona Department of Education (ADE)

- ADE has focused on Dr. Bruce Perry's evidence based Neurosequential Model in Therapeutics (NMT) and research which has shown that education of caregivers of children impacted by ACEs can improve the caregiver's ability to better participate in the child's treatment plan, decrease caregiver frustration and anxiety related to a child's behavior, and increase the child's progress through treatment.
- With funding provided for behavioral health services in schools, ADE is working with Dr. Perry to create a unified approach to incorporate NMT in educational settings to engage parents, caregivers, treatment staff and school counselors together to support children impacted by trauma and adverse childhood experiences.

Maricopa County Courts

- Launched in 2012, Cradles to Crayons (C2C) is a collaborative project of Maricopa County Courts with strong judicial leadership and coordination of appropriate and convenient services for both children and their families that aims to improve outcomes for high-risk infants, toddlers and their families. C2C provides trauma-informed therapy,

"coached" parent-child visits, and other services for children and their parents so that judges, child protective services case managers, attorneys and treatment providers can make better-informed decisions about their future as a family.

- From July 2011 through 2014, court data shows a 35% increase in the achievement of legal permanency within 12 month for high-risk infants and toddlers, in spite of a 55% increase in the number of infants and toddlers entering out of home care over the same time period. In addition, court data showed a significant decrease in the median time to permanency for infants and toddlers through reunification and adoption.

Department of Correction (DOC)

- DOC is participating in the expansion of Triple P - Positive Parenting Program to formerly incarcerated parents. Triple P is an evidence-based, multi-tiered and multi-disciplinary program that provides support and education for parents, families, and other people who are caring for children. Because the program is delivered through the lens of trauma informed care, it maximizes the likelihood that dysfunctional cycles within families are interrupted, and trajectories are shifted toward improved aspects of overall health and well-being.

COUNCIL MEETING PRESENTATIONS

During the past year, the Council received presentations from issue-area experts on topics related to Adverse Childhood Experiences (ACEs), trauma informed care, and the prevention of childhood abuse and neglect. The Council continued to learn and implement strategies to prevent ACEs in our community by assuring safe, stable, nurturing relationships and environments. This understanding has helped facilitate the Council's efforts to ensure that trauma informed care and the prevention of ACEs become the standard for supporting children and families across Arizona. These presentations included:

- protective factors of evidence-based parenting programs and home visitation programs with nurses;
- data concerning the prevalence of and negative impacts resulting from preschool expulsions;
- substance abuse, Neonatal Abstinence Syndrome, and the opioid epidemic and the state's response; and
- how agency's response to critical incidents to better support staff and coach staff in their decision making

A complete summary of council presentations can be found on website

<http://faithandcommunity.az.gov/faith-and-community/faith-and-community/council-child-safety-and-family-empowerment>

COUNCIL SPECIAL RECOGNITIONS

It is the privilege of the Council to recognize extraordinary contributions made by individuals, families, organizations and congregations that work to provide safety and well-being for Arizona's most vulnerable populations. The Council considers nominations for recognition

throughout the year and incorporates formal recognition into its regular Council meetings, where nominees are presented with a certificate of appreciation, have a photo opportunity with Council chairs, and their accomplishments are celebrated.

This report highlights the five nominees who were selected and celebrated during 2018/2019. The Council would also like to acknowledge and extend its gratitude for every person, family, and organization that fights for the future of Arizona's children and families.

Ms. Janet Garcia - Individual

On September 13, 2018, the Council recognized council member Janet Garcia for her years of service to children and families in Arizona. Janet has been an integral player in achieving positive outcomes for abused and neglected children and families in AZ for decades. As Senior Director for Casey Family Programs, Janet is responsible for the operation of the Arizona Field Office as well as overseeing Casey's system improvement work in Arizona and New Mexico. Previously, Janet served at the Valley of the Sun United Way for five years, developing and overseeing programs for children birth to age 5. In addition, Janet served as Deputy Director in the Governor's Office for Children, Youth and Families, leading the Division for Children, Division for Women's Substance Abuse Prevention, and Division of Youth Development and School Readiness. Janet has also served as Executive Director of Tumbleweed Center for Youth Development where she led the creation of a continuum of services for runaway, homeless and troubled youth in Arizona.



Peter and Julie Bartolini - Family

On November 8, 2018, the Council recognized community members Peter and Julie Bartolini for their service to foster children in Arizona. The Bartolinis have shown unconditional love, acceptance, and grace to children in their care for 11 years, ensuring that their immediate needs were met while planning a strong foundation for their future.

Julie and Peter are to be commended for their child-centered service which is evidenced through their continued connection and support for many of their former foster children as well as their biological families. During their time as licensed foster parents, the Bartolinis were actively involved in the foster care and adoption community, teaching pre-service training classes for prospective foster parents, as well as “Grace Based Parenting” classes through Christian Family Care. Julie Bartolini served on Christian Family Care’s Performance Quality Improvement committee. In addition, the Bartolini’s have served as leaders in the Foster Care Support Group at Scottsdale Bible Church and Peter has been an integral support in the Scottsdale Bible Church’s Royal Family Kids Camp.



Ms. Denise Bressette - Family

On January 10, 2019, the Council recognized community member Denise Bressette for her service to foster children in Arizona. Denise has provided a loving home for more than 60 children placed in her care through Child Crisis Arizona over 32 years. These children in need came to Denise from both Arizona’s Division of Developmental Disabilities and the Department of Child Safety. Denise is to be commended for her exemplary level of commitment to each child she has cared for, both while they are in her home, as well as her continued dedication long after they have left her care. The impact of her contributions can perhaps best be felt through the words of her nomination, Denise is a shining example of the ripple effects that one person’s actions can have on keeping children safe, families strong, and the community committed to helping those who need it the most. Her continued dedication as a caregiver, advocate, friend, and parent, has changed children’s lives, many of whom are now adults, and look to Denise for inspiration.



Ms. Victoria Gray - Individual

On March 14, 2019, the Council recognized community member Victoria Gray for her dedication to helping kinship families become licensed foster parents. As a grandparent, Victoria knows first-hand what sacrifices are made to ensure the well-being of children. Victoria is the founder of GrayNickel, Inc., a local non-profit, and manages the KinshipHelp55 program which strives to ensure there are no financial hardships for families who are willing to provide safe, stable and loving homes to family members who are involved with Arizona's Department of Child Safety. KinshipHelp55 strives to connect families to services that are needed in the first days after placement which are often the most critical, stressful and overwhelming time for kinship families. In addition, Victoria aides kinship families in acquiring the state benefits that are available to help support the relative children in their care. Victoria is well-connected to the kinship community and serves as a Steering Committee Member for Arizona Grandparent Ambassadors, an advocacy and support network for grandparents who are raising their grandchildren; is part of Arizona Duet's Grandparent Dream Team and Advisory Team; and is a member of the Arizona Kinship Coalition. In 2017, Victoria received the 2017 International Generations United Grandfamilies Award. She has advocated for many years at the AZ Capitol with State Representatives and Senators to enact change.



Ms. Emily Jenkins - Individual

On May 7, 2019, the Council recognized Emily Jenkins for her dedication to helping Arizona children and families impacted by trauma. Emily has served for 11 years as the President and CEO of the Arizona Council of Human Service Providers, a member association of 111 agencies that provide behavioral health, child welfare, and juvenile justice services. Members employ over 30,000 staff, operate more than 700 facilities, and serve almost 1 million children, adults, and families throughout the state. Emily and the Council have been instrumental on many legislative and administrative policy efforts in Arizona including Medicaid Restoration, reform and restructuring of the Board of Behavioral Health Examiners, creation of the Department of Child Safety, and RBHA and Arizona Complete Care transitions to integrated care. She has been instrumental in the creation of the Behavioral Health Interpreter Academy (ensuring Spanish speaking interpreters are trained and available), as well as bringing the Neurosequential Model in Caregiving training program to foster, kinship, and adoptive parents. Emily also serves as chair for the Department of Child Safety's Community Advisory Committee.



COUNCIL SUBCOMMITTEE REPORTS

Five subcommittees regularly convene to support the goals of the Council. Accomplishments within fiscal year 2018/19 include:

- identifying ways to expand awareness of ACEs and the need for trauma-informed care
- developing statewide outreach strategies
- supporting the growth of services to meet family needs and prevent out-of-home placements
- engaging with the Arizona Collective Impact Initiative to prevent abuse and improve outcomes for Arizona families
- continuing support of the Child Abuse License Plate Donation Grant
- convening targeted focus groups to identify gaps in services for vulnerable communities

African American Children and Families Subcommittee Report

Chaired by Mr. Roy Dawson, the African American Children and Families Subcommittee (AACF) was formed to address the disproportionate representation of African American children within the foster care system. Disproportionality also exists in the incidence of ACEs experienced by children of color. Nationally, 61% of black non-Hispanic children and 51% of Hispanic children have experienced at least one ACE, compared to 40% of white non-Hispanic children and 23% of Asian non-Hispanic children.¹³ AACF has been utilizing SAMHSA's Strategic Prevention Framework to identify critical issues affecting children and families involved in the child welfare system, with a special emphasis on the needs of the African American community in Arizona.

The sub committee's goals for 2018/2019 were to: 1) Conduct listening sessions in the African American community; 2) Expand knowledge in areas the sub committee is focused on, both internal to the Council and to new external audiences; and 3) Joining with DCS to establish a broad representation of agencies to address disproportional in a key geographical areas in the state.

Outreach Subcommittee Report

The Outreach Subcommittee is co-chaired by Katie O'Dell and Jenica McMaster with the goal of engaging Arizona's faith-based communities to provide an answer to, "How can we (the faith-based community) serve?" in response to children and families impacted by the child welfare system. Central to answering this question is the need to increase awareness and understanding of ACEs among the faith-based community, and the importance of using appropriate trauma-informed programs and strategies designed to mitigate the impact of ACEs on a child's future.¹⁴

¹³ ChildTrends, LLC. The prevalence of adverse childhood experiences, nationally, by state, and by race or ethnicity. 2017. Retrieved from <https://www.childtrends.org/publications>

¹⁴ SAMHSA's Center for the Application of Prevention Technologies (2018)

The sub committee's goals for 2018/2019 continued to be grounded in SAMHSA's recommendations for how best to respond to ACEs, specifically the utilization of innovative strategies that aid others in selecting and implementing programs and strategies designed to address ACEs and increase trauma-informed systems of care.

Partnerships Subcommittee Report

Chaired by Janet Garcia, the mission of the Partnership Subcommittee is to identify and cultivate strategic alliances to support the work of the Council including public-private, cross-sector partnerships and funding sources.

The sub committee's goals in fiscal year 2018/19 continued to be grounded in SAMHSA's recommendation to emphasize the relevance of ACEs across systems and disciplines.¹⁵ This is accomplished by incorporating ACEs awareness and the importance of trauma-informed care among professionals working at both state and community levels through two primary efforts: the Child Abuse Prevention License Plate Fund, and the Arizona Collective Impact Initiative.

Prevention Subcommittee Report

The Prevention Subcommittee is chaired by Ms. Vicki Mayo and co-chaired by Ms. Ginger Ward. Its primary purpose is to build prevention awareness and support for families needing assistance with the goal of avoiding involvement with DCS. The sub committee analyzes data and conducts research to understand family situations that have required involvement by DCS and removal of children from the family home. They then seek to address these issues by identifying and offering solutions that are trauma-informed and ACEs aware.

Support Subcommittee

The Support Subcommittee is chaired by Berisha Black and co-chaired by Andrea Stuart. It's goal is to identify and develop strategic training for the communities and adults that interact with children in the foster care system. The subcommittee approaches its work by considering, "What do families tell us they need?" and is grounded in a key SAMHSA recommendation to incorporate efforts focused on reducing intergenerational transmission of ACEs.

The sub committee's goals for 2018/2019 included: 1) promotion of trauma-informed training for every person who functions as a caregiver in the foster care system, including kinship caregivers, group homes, and licensed foster parents; and 2) to develop a mechanism to survey agencies that come in contact with the foster community in order to assess the availability of training on trauma and ACES for caregivers.

¹⁵ Ibid