

Alaska's Most Important Infrastructure:

Improving the Health and Wellness of Families with Young Children



ALL ALASKA
PEDIATRIC
PARTNERSHIP

Goal of a Nation

- To produce a well-educated and healthy adult population that is sufficiently skilled to participate in a global economy and to become responsible stakeholders in a productive society.

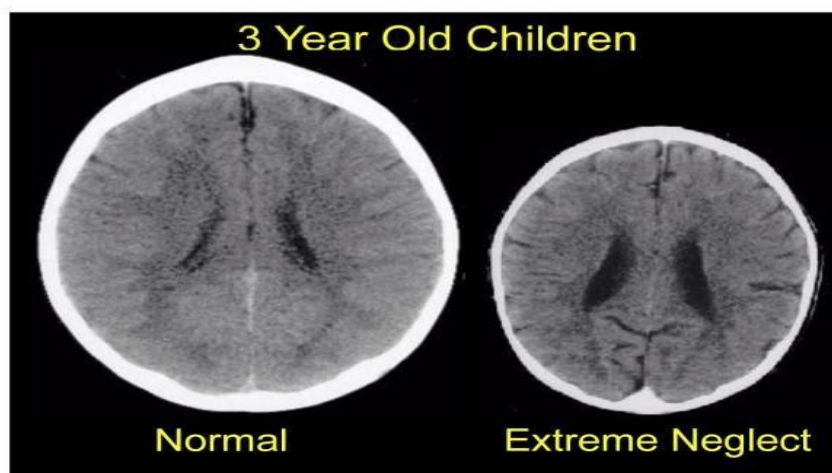
- American Academy of Pediatrics Technical Report—2012
“The Lifelong Effects of Early Childhood Adversity and Toxic Stress”

How Do We Do That

- Use **good science** to make **good investments**
 - Need to invest in evidence-based practices that address complex social, economic, environmental, and developmental issues that influence population-based health disparities



Impact of Neglect



Bruce Perry, MD

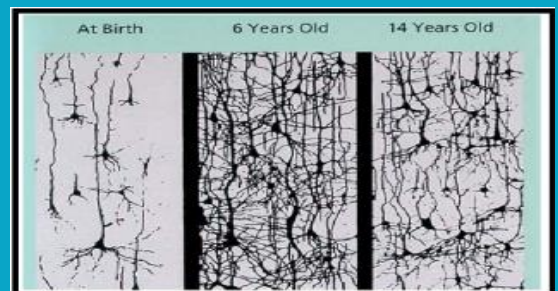
Critical Concepts in Early Brain Development



- Brain growth and plasticity
- Critical periods of sequential development
 - Molecules in the brain that stimulate neural plasticity
- Role of experience

Synapses = Connections

- The human brain is shaped through neuronal connections
- Changes in these connections
 - birth: 50 trillion synapses
 - 1 year: 1,000 trillion
 - 20 years: 500 trillion
- The remodeled brain facilitates efficiency and learning

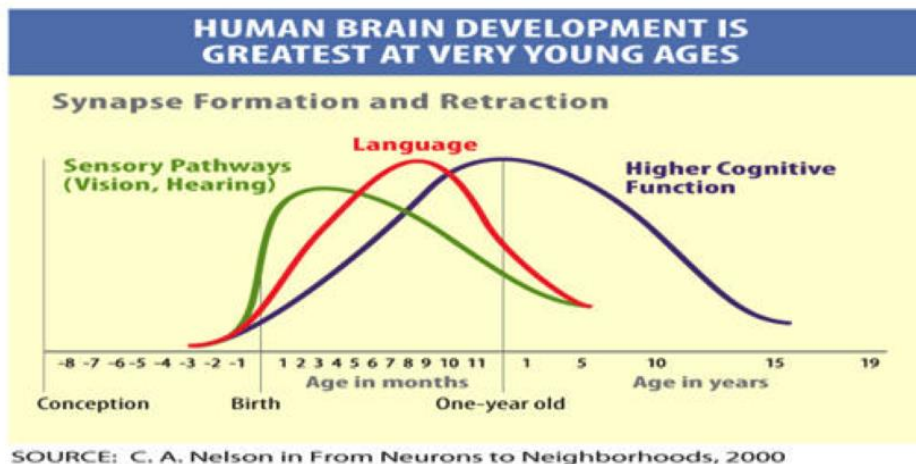


Synaptic Growth and Pruning

- Synaptic pruning occurs in areas that are infrequently used
 - Results in decreased number of synapses between neurons
 - Maximum number of synapses occurs around age 3 y/o
- Allows for improved functionality and efficiency of synaptic transmission in the brain
- **Plasticity (the ability to change your brain) essentially reaches adult levels by age 10 y/o**



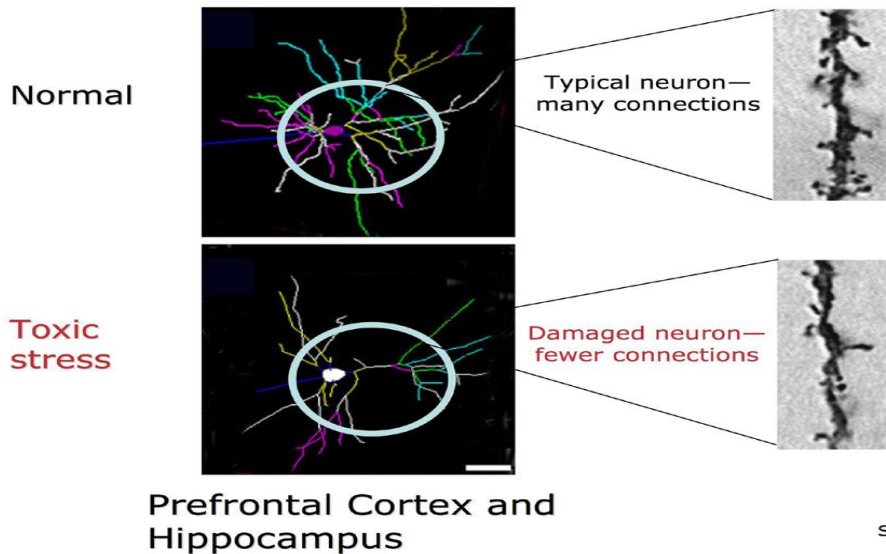
Brain Development as a Measure of Synapse Formation





Center on the Developing Child
HARVARD UNIVERSITY

Persistent Stress Changes Brain Architecture



Sources: Radley et al. (2004)
Bock et al. (2005)

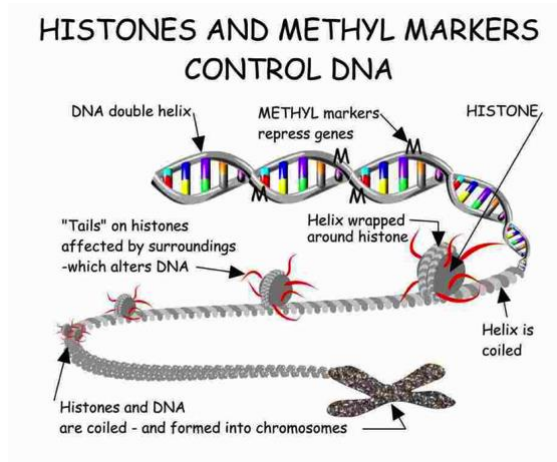
Physiologic Response to Stress in Kids

- Stress without the buffering response of a strong adult relationship causes prolonged, brain-controlled secretion of stress hormones
 - Cortisol, norepinephrine, epinephrine, etc.
- Stress responses are beneficial in the short term with adult support, but can be damaging to health if they occur over long periods of time
 - Constant wear and tear
 - Potentially permanent changes in gene regulation



ALL ALASKA
PEDIATRIC
PARTNERSHIP

Epigenetics



ALL ALASKA
PEDIATRIC
PARTNERSHIP

Epigenetics in Rats

- Rat mothers who groom and lick their pups during the first week of life have pups that have a less vigorous response to stress as adults than mothers who don't groom well
 - Appears to be caused by DNA methylation and histone changes in stress-related genes
- Stressed rat mothers with bad nurturing behavior have pups with poor cognitive skills as adults and persistent changes in stress-related gene expression



ALL ALASKA
PEDIATRIC
PARTNERSHIP

Childhood Epigenetic Changes

- Kids raised in institutional environments (Romanian orphanages)
 - Epigenetic changes in regions of brain development
- Adults exposed to abuse as kids:
 - 997 different genes had methylation patterns that were different than from adults who were not abused
 - Genes were involved with cell signaling pathways, brain development, immune function, stress regulation, etc
 - Similar results from adults from the foster care system, adults exposed to violence as kids, adults exposed to neglect as kids...



How Do These Epigenetic Changes Affect Stressed Kids

- Structural brain changes: Smaller hippocampus (memory), smaller corpus callosum (connections between the hemispheres of the brain), smaller prefrontal cortex (reasoning, emotional control), larger amygdala (anxiety and release of stress hormones from the pituitary)
- Inflammation/immunological changes: C-reactive protein, stress cytokine levels elevated in adults with history of early adversities
- Endocrine changes: Dysregulation of stress hormones, decreased oxytocin



Epigenetics Passed from Moms to Children

- Fetal exposure to maternal stress influences future stress responses in a negative way through epigenetics
 - Moms who are stressed (stressful event—famine, increased anxiety, depression) during pregnancy are more likely to have kids with:
 - Preterm birth
 - Poor emotional coping skills
 - Decreased cognitive abilities
 - Increased fear response to stimuli
 - Increased anxiety
 - Decreased immune function
 - Autism
 - Lots of others....



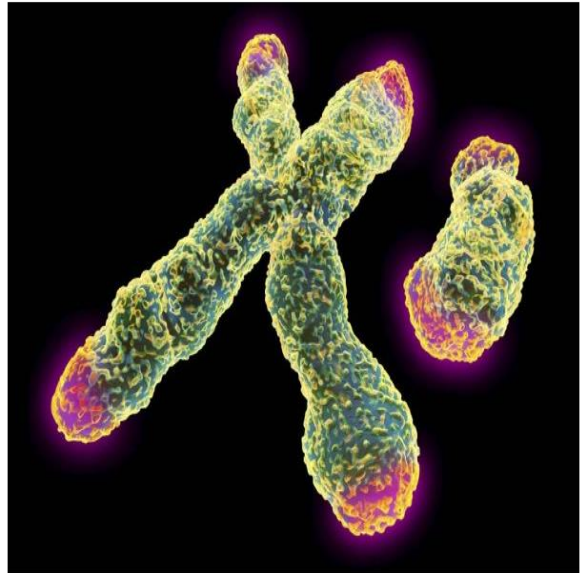
Epigenetics Passed from Dads to Sons

- Offspring of Civil War prisoners (4600 kids)
 - Sons—died earlier
 - Sons born before the war didn't have any mortality differences
 - Daughters—unaffected
- Seems to occur through transmitted RNA molecules rather than methylation or histone modification



Telomeres and Stress

- Telomeres appear to be impacted by trauma in childhood
 - Adults exposed to trauma as a child had shortened telomeres
 - Marker of accelerated ageing and disease



Pasleka/Photo Researchers Inc.



ALL ALASKA
PEDIATRIC
PARTNERSHIP

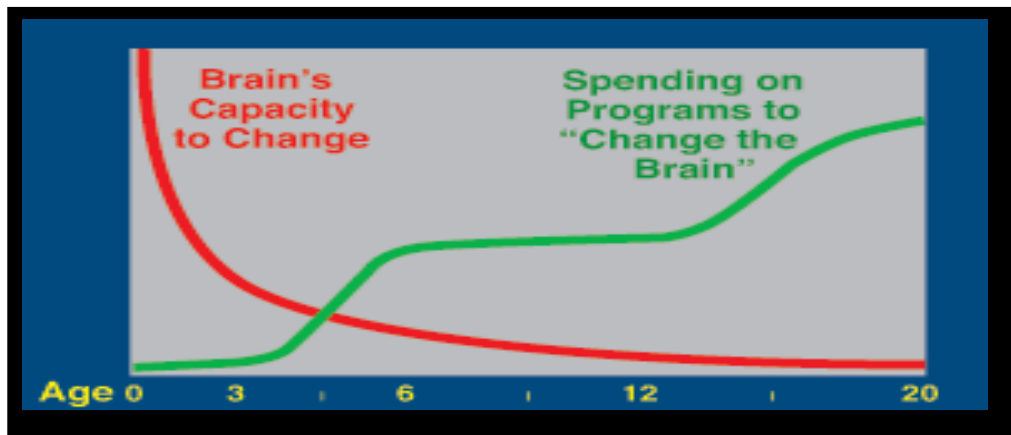
But These Epigenetic Effects Can Be Reversed

- Prevention programs that result in improved family function and better parenting skills result in:
 - Reversal of epigenetic changes in young children
 - Reverses the brain changes seen in adulthood
 - Improved health outcomes
 - Decreased mental health issues
 - Decreased costs

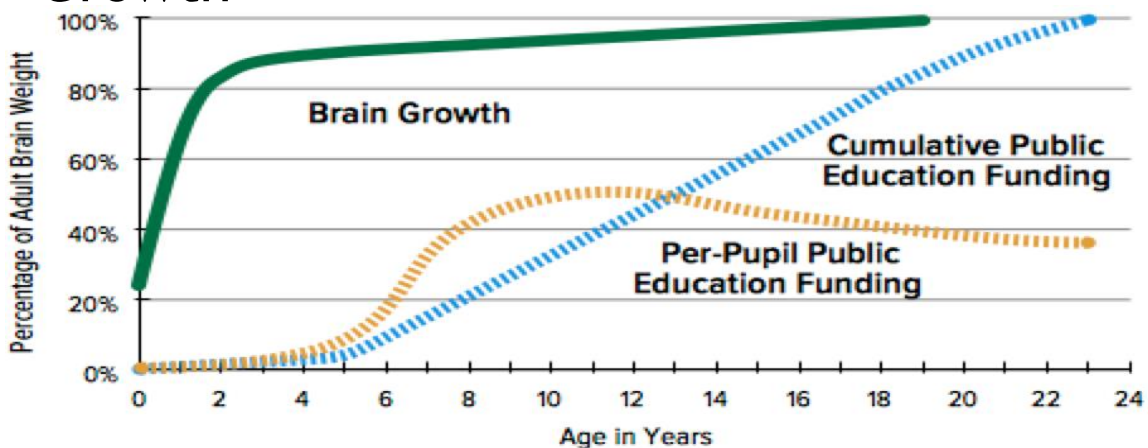


ALL ALASKA
PEDIATRIC
PARTNERSHIP

Public Investment in Children by Age



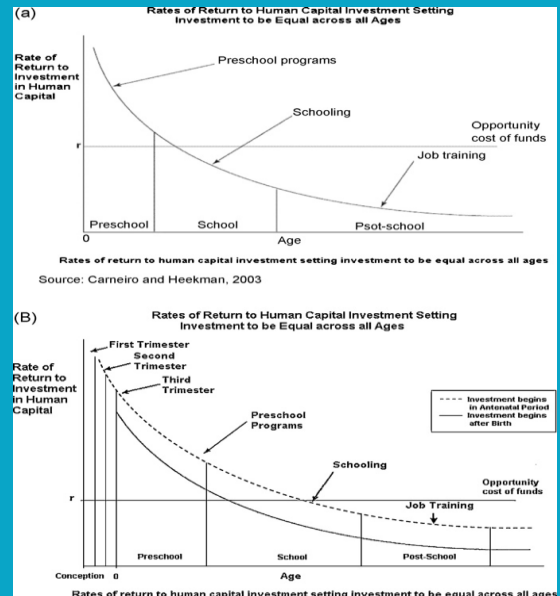
Public Investment in Children by Brain Growth



Econometrics of Early Intervention & Prevention

- Funding early interventions provides the largest possible return on investment

Doyle et al. (2009) Investing in Early Human Development. In: Economics and Human Biology v7:pp1-6



Costs of Child Abuse: USA

- Over \$124 billion in costs/year (Fang et al., 2012)
- Lifetime cost per victim of nonfatal child maltreatment is **\$210,012**:
 - \$144,360 productivity losses
 - \$6,747 criminal justice costs
 - \$32,648 childhood health care costs
 - \$10,530 adult medical costs
 - \$7,999 special education costs
 - \$7,728 child welfare costs

A Common Language to Explain Development

10 adverse childhood experiences surveyed:

1. Physical abuse
2. Sexual abuse
3. Emotional abuse
4. Emotional neglect
5. Physical neglect
-
6. Witness domestic violence
7. Mental illness in home
8. Family member incarcerated
9. Alcohol/drug problems
10. Parental separation or divorce



ALL ALASKA
PEDIATRIC
PARTNERSHIP

ACEs: Prevalence data

• Prevalence of ACEs in study group:

- Sexual abuse = 21%
- Domestic violence in childhood home = 13%
- Substance abuse in home = 28%
- Parental separation or divorce = 24%
- Physical abuse = 28%
- Emotional neglect = 15%
- Emotional abuse = 11%
- Physical neglect = 10%
- Mental illness in home = 20%
- Criminal household member = 5%

M Dong et al. (2003) Child Abuse and Neglect v27, pp 625-639.



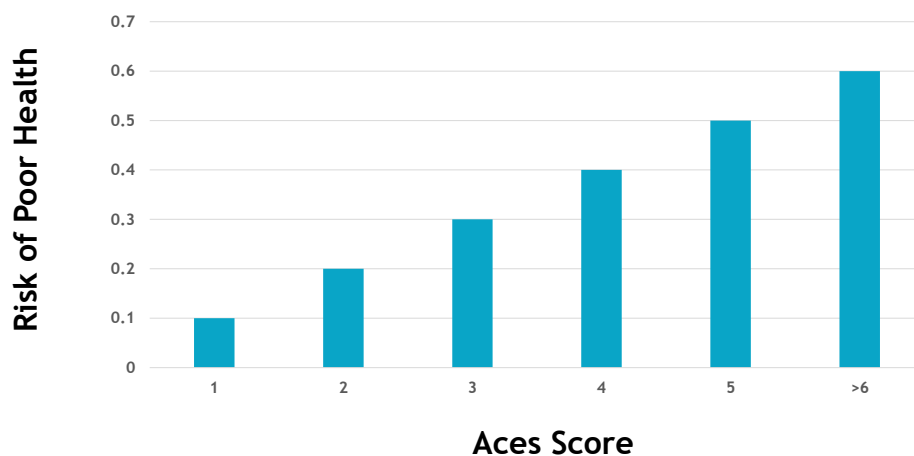
ALL ALASKA
PEDIATRIC
PARTNERSHIP

ACEs: Adult Health

- Key finding:
 - About 2/3rd of those surveyed reported at least one ACE.
 - The 1/3 of participants with no reported ACEs were consistently healthier across all measures.



ACEs Score = Dose Response



Health Measures Now Linked to Adverse Childhood Experiences Score

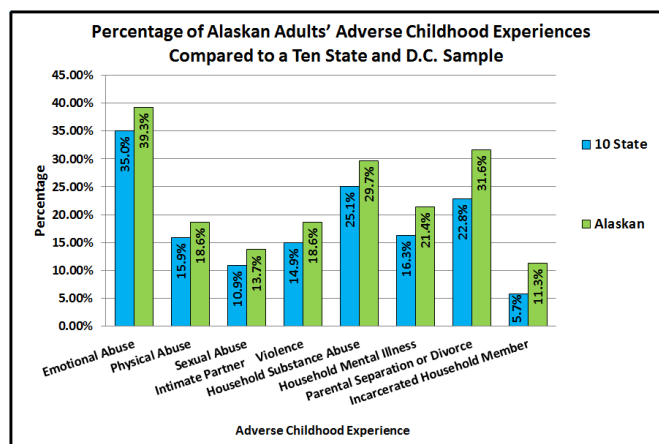
► Stepwise increased risk for:

- Heart disease
- Asthma
- Diabetes
- Cancer
- COPD
- Skeletal fractures
- Sexually transmitted diseases
- Liver disease
- Autoimmune disorders
- Osteoarthritis
- Smoking
- Alcohol abuse
- Over eating and obesity
- Illicit drug use
- Promiscuity
- IV drug use
- Clinical depression

► And

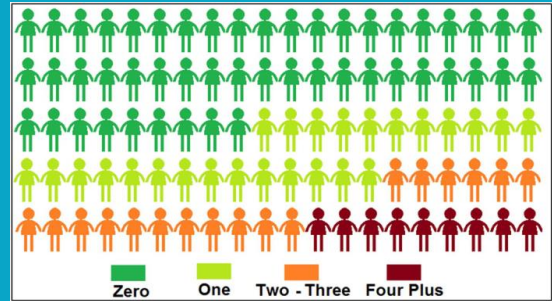
- Autobiographical memory disturbance
- Poor anger control
- Relationship problems
- Employment problems
- Early age at first intercourse
- Teen pregnancy
- Unintended pregnancy
- Teen paternity
- Fetal death
- Suicide
- Domestic violence
- Anxiety disorders
- Hallucinations
- Sleep disturbances
- Chronic pain
- Headaches
- Early death

ACEs: Alaska vs. 10 States



Alaska ACEs in Children

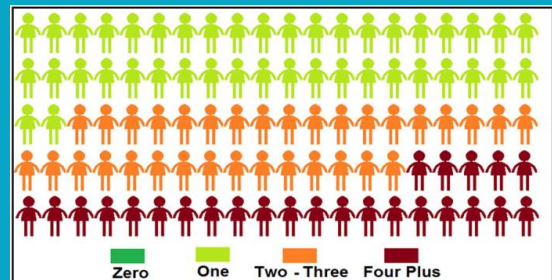
- Alaska Children and Youth ACEs in the General Population



Advisory Board on Alcoholism
and Drug Abuse
abada
amhb
Alaska Mental Health Board

Alaska ACEs in Children

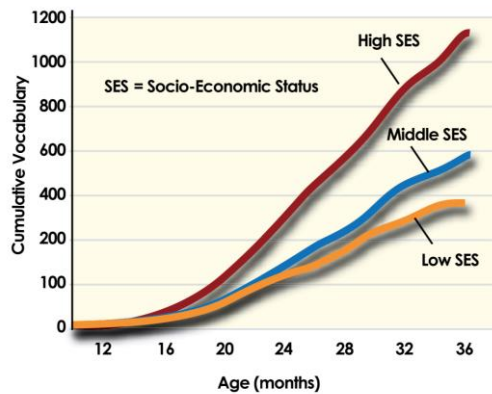
- Alaskan Children and Youth ACEs for those who Experienced Low Income



Advisory Board on Alcoholism
and Drug Abuse
abada
amhb
Alaska Mental Health Board

Disparities in Vocabulary Development

Disparities in Early Vocabulary Growth

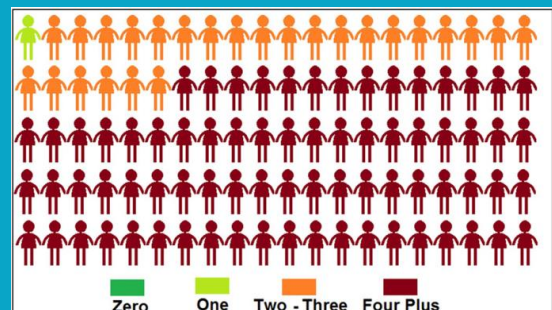


Source: Hart, B., & Risley, T. (1995). *Meaningful differences in the everyday experiences of young American children*. Baltimore, MD: Brookes.



Alaska ACES in Children

- Alaskan Children and Youth ACEs for those who Witness Domestic Violence



Intimate Partner Violence and Child Maltreatment

- 8.4% of Alaska moms report some form of intimate partner violence during the 12 months prior to or during pregnancy
 - >60% of children born to these moms experienced a report to OCS
- And.....intimate partner violence was present in 19.6% of children who had an OCS report



ALL ALASKA
PEDIATRIC
PARTNERSHIP

Jared Parish—State of Alaska

Maternal Stress and OCS Referrals

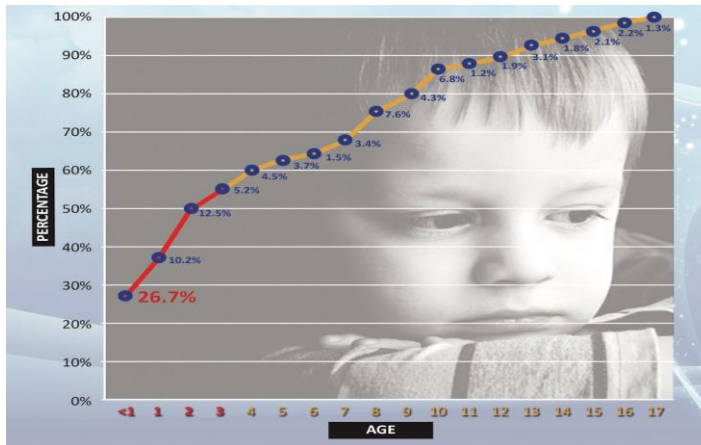
- Before 7 y/o, half of all children born to moms with 4 or more stressors are reported for child maltreatment

Stressors:

1. Being homeless
2. Husband/partner went to jail
3. Being in a fight
4. Loss of job even though wanted to keep working
5. Husband/partner lost job
6. Argued with husband/partner more than usual
7. Close family member very sick or hospitalized
8. Separated/divorced
9. Moved to a new address
10. Husband/partner said they didn't want pregnancy
11. Has a lot of bills couldn't pay
12. Someone close had problem with drinking/drugs
13. Someone close died

Jared Parish—State of Alaska

Age When US Kids Accumulate Half of Their Lifetime ACEs



Costs

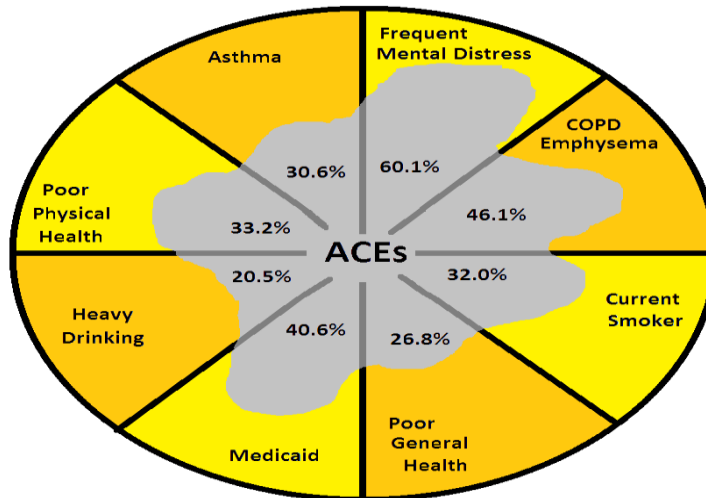
Alaskan adults who report four or more ACEs compared to Alaskan adults who report zero ACEs.

- 49% more likely to be unemployed
- 274% more likely to be unable to work
- 92% more likely to earn less than \$20,000 annually

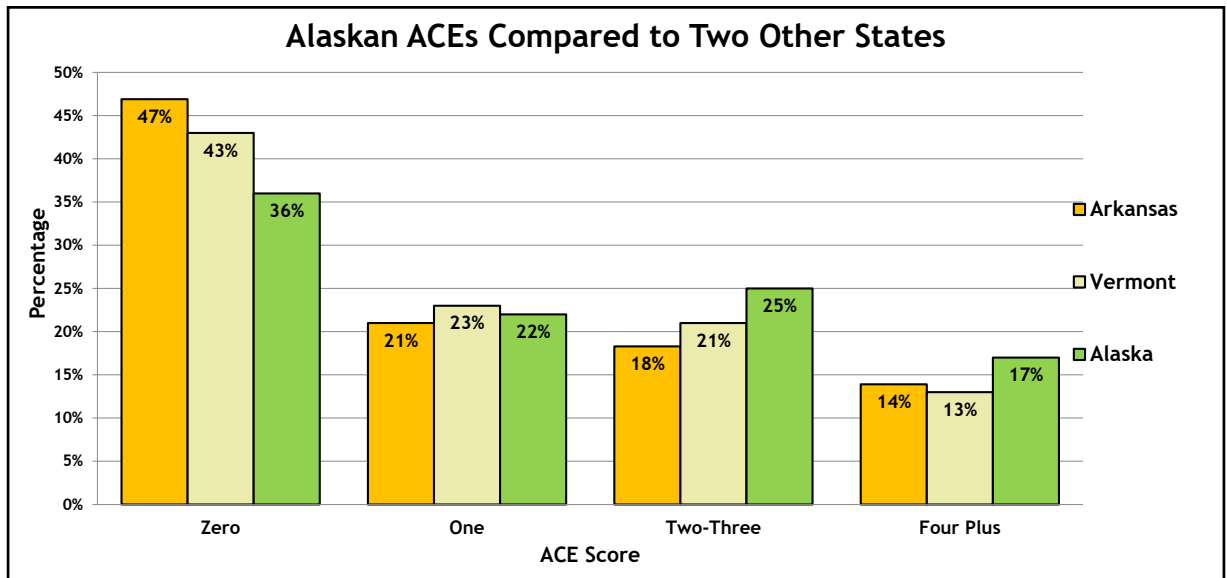
Source: 2013 Alaska Behavioral Risk Factor Surveillance System, Analysis by Alaska Mental Health Board/Advisory Board on Alcoholism and Drug Abuse Staff



Population Attributable Risks in Alaska



Source: Alaska data from the 2013 Alaska Behavioral Risk Factor Surveillance System, Alaska Department of Health and Social Services, Division of Public Health, Section of Chronic Disease Prevention and Health Promotion, Graphic: AMHB/ABADA

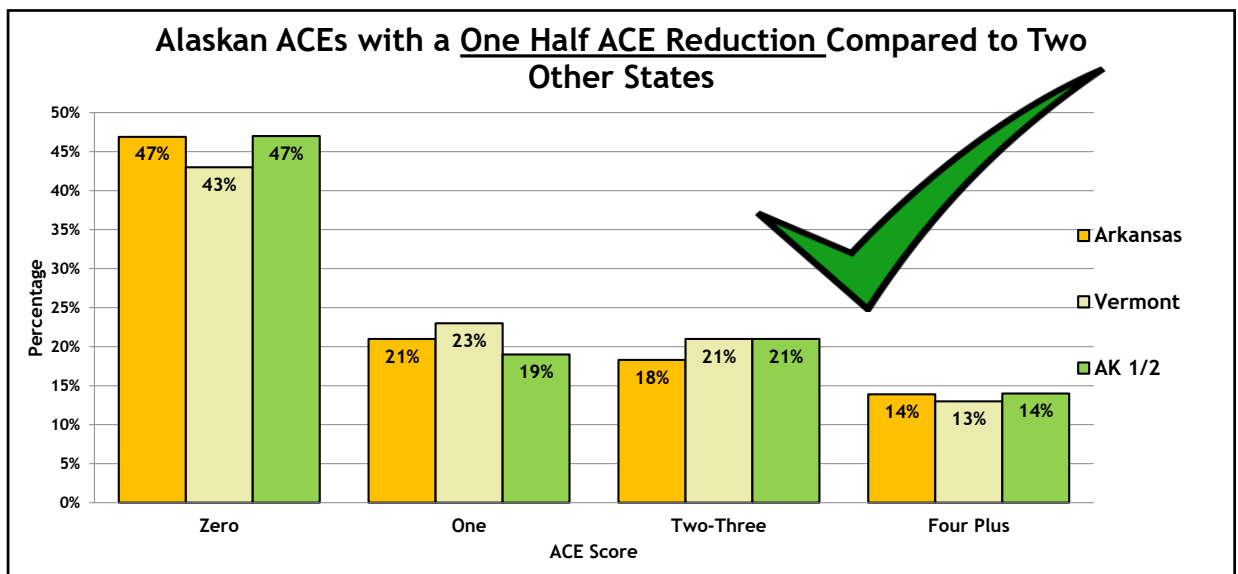


http://healthvermont.gov/research/brfss/documents/2010_data_brief_ace.pdf
<http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5949a1.htm>



Advisory Board on Alcoholism and Drug Abuse





http://healthvermont.gov/research/brfss/documents/2010_data_brief_ace.pdf
<http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5949a1.htm>



Reducing Alaska's ACE Score by ½ Point

- If we just look at the reduction of
 - Obesity
 - Adult Medicaid recipients
 - Smoking
 - Binge drinking
 - Diabetes
 - Arthritis
- *Alaska will save \$90 million annually*



What Does \$90 Million Buy in Alaska?

- 258 three bedroom homes in Anchorage (average price \$347,000)
- 915 kindergarten teachers (wages only \$66,384 + 40%) \$97,938
- 846 police officers (wages only \$75,672 + 40%) \$105,941
- 518 mechanical engineers (wages only \$123,600 + 40%) \$173,040
- 339 pediatricians (wages only \$189,000 + 40%) \$264,600
- Office of Children's Services - General Funds 2016 - Operations
- All of the Behavioral Health State Medicaid Costs + \$18 million
- The General Funds for the Department of Commerce, Community & Economic Development + The Department of Labor & Workforce Development
- 103,307 Flights from Ketchikan to Barrow in July (\$868)
- Boeing 737-800 + \$17 million for fuel and crew.

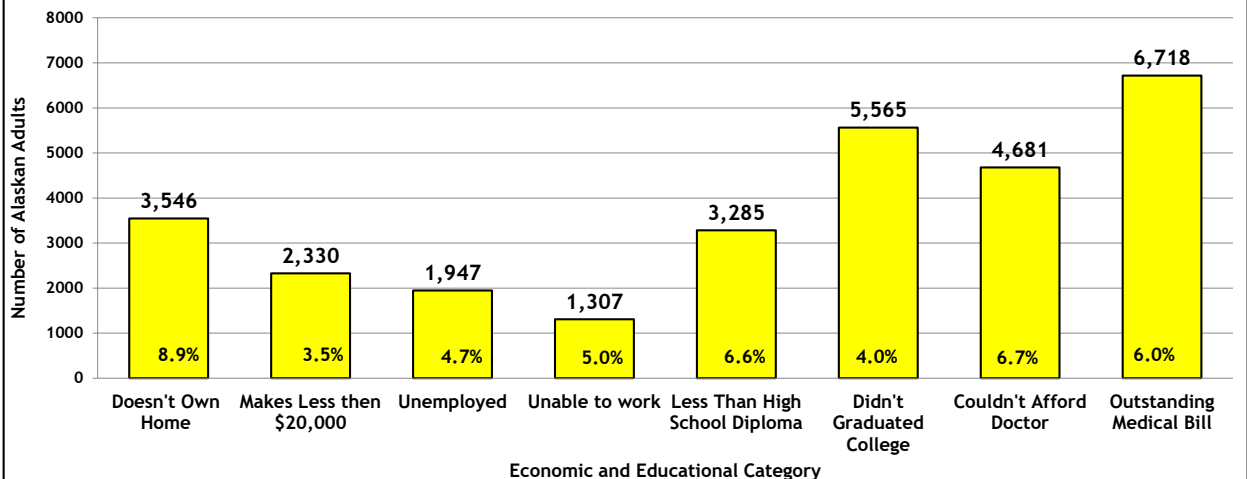
Pick One!



<http://live.laborstats.alaska.gov/occ/alloccs.cfm#L>

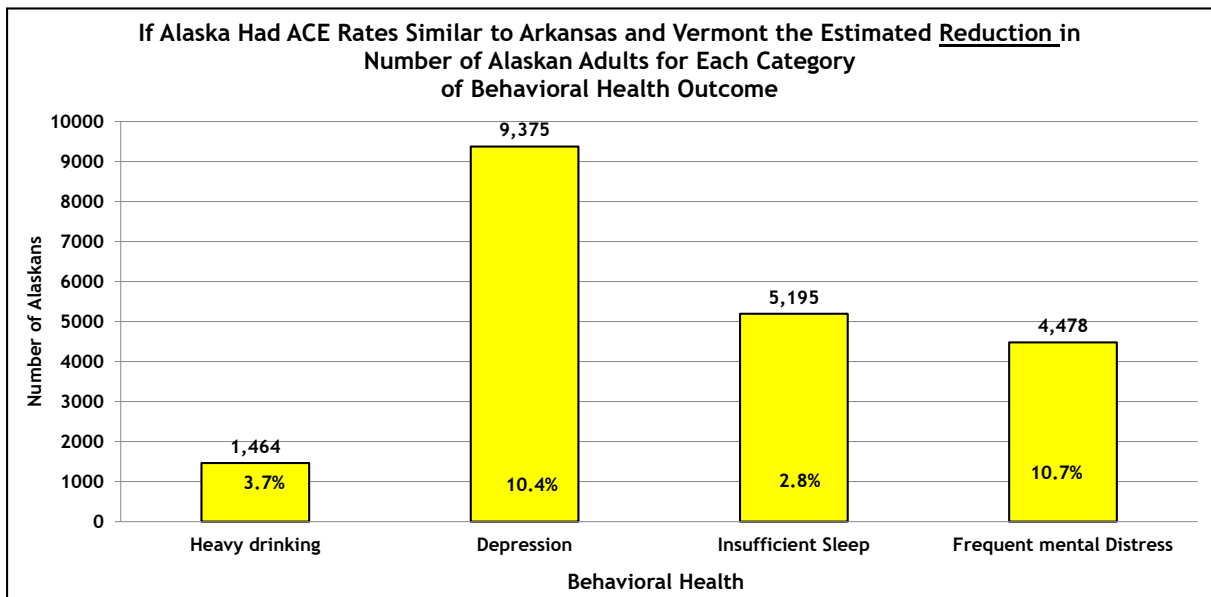


If Alaska Had ACE Rates Similar to Arkansas and Vermont the Estimated Reduction in Number of Alaskan Adults for Each Category of Economic and Educational Outcome



Calculations based on 2013 Alaska BRFSS data conducted by the Alaska Mental Health Board and Advisory Board on Alcoholism and Drug Abuse Staff





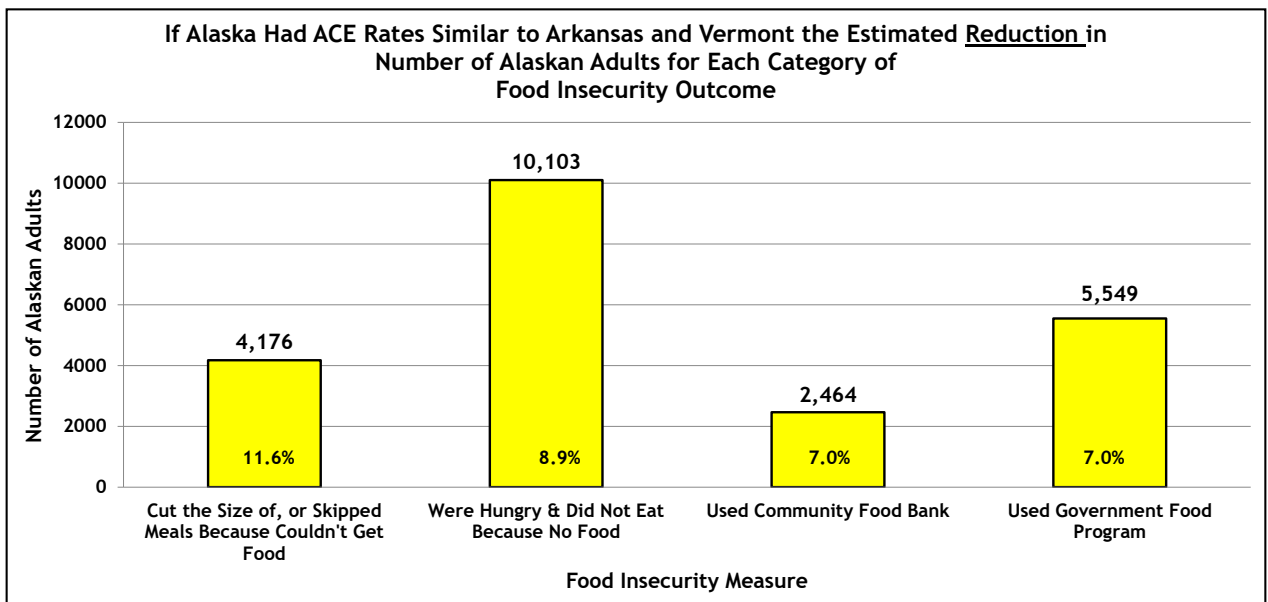
Advisory Board on Alcoholism and Drug Abuse

abada

amhb

Alaska Mental Health Board

Calculations based on 2013 Alaska BRFSS data conducted by the Alaska Mental Health Board and Advisory Board on Alcoholism and Drug Abuse Staff



Advisory Board on Alcoholism and Drug Abuse

abada

amhb

Alaska Mental Health Board

Calculations based on 2013 Alaska BRFSS data conducted by the Alaska Mental Health Board and Advisory Board on Alcoholism and Drug Abuse Staff



How Do We Identify These Kids?



What We're Really Talking About Is Trauma-Informed Care

- This means we ask the question, “Let’s have a conversation....” rather than “What’s wrong with you?”
 - This fundamentally changes the way we interact with people
 - Changes a interaction with a family from “I must fix you” to “I will listen to you”



Behaviors Associated with Early Childhood Trauma

• Ages: 0-2

- Dysregulated eating, sleeping patterns
- Developmental regression
- Irritability, sadness, anger
- Poor appetite, low weight gain
- Increased separation anxiety, clinginess

- https://www.ecmhc.org/tutorials/trauma/mod3_1.html
- <https://www.samhsa.gov/child-trauma/recognizing-and-treating-child-traumatic-stress>

• Ages 3-6

- Increased aggression
- Somatic symptoms
- Sleep difficulties/nightmares
- Increased separation anxiety
- New fears
- Increased distractibility/high activity level
- Increased withdrawal/apathy
- Developmental regression
- Repetitive talk/play about the event
- Intrusive thoughts, memories
- Absenteeism

Parent Screening Questionnaire

- One-page questionnaire, completed by the parent
- Targets risk factors that jeopardize children's health, development and safety
- Administered at selected well-child visits
- Free, available in 4 languages
- <https://www.seekwellbeing.org/the-seeking-parent-questionnaire->

SEEK
Supporting Emotional and Emotional Knowledge

Parent Questionnaire (PQ)

Dear Parent or Caregiver: Being a parent is not always easy. We want to help families have a safe environment for kids. So, we're asking everyone these questions. They are about problems that affect many families. If there's a problem, we'll try to help.

Please answer the questions about your child being seen today for a checkup. If there's more than one child, please answer "yes" if it applies to any one of them. This is voluntary. You don't have to answer any questions you prefer not to.

Today's Date: ____/____/____ Child's Name: _____

PLEASE CHECK

<input type="checkbox"/> Yes	<input type="checkbox"/> No	Do you need the phone number for Poison Control?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	Do you need a smoke detector for your home?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	Does anyone smoke tobacco at home?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	In the last year, did you worry that your food would run out before you get money or Food Stamps to buy more?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	In the last year, did the food you bought just not last and you didn't have money to get more?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	Do you often feel your child is difficult to take care of?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	Do you sometimes find you need to hit/slap your child?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	Do you wish you had more help with your child?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	Do you often feel under extreme stress?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	In the past month, have you often felt down, depressed, or hopeless?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	In the past month, have you felt very little interest or pleasure in things you used to enjoy?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	In the past year, have you been afraid of your partner?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	In the past year, have you had a problem with drugs or alcohol?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	In the past year, have you felt the need to cut back on drinking or drug use?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	Are there any other problems you'd like help with today?

Please give this form to the doctor or nurse you're seeing today. Thank you!

©2012, University of Maryland School of Medicine

Survey of Well-Being of Young Children

- Comprehensive screening instrument for children under 5. Forms available for each recommended well-child visit recommended by the AAP.
- Targets developmental milestones, social-emotional development, and family risk factors.
- Free; available in 3 languages
- theswyc.org

FAMILY QUESTIONS		Yes	No		
1	Does anyone smoke tobacco at home?	<input type="radio"/>	<input type="radio"/>		
2	In the last year, have you ever drunk alcohol or used drugs more than you meant to?	<input type="radio"/>	<input type="radio"/>		
3	Have you felt you wanted or needed to cut down on your drinking or drug use in the last year?	<input type="radio"/>	<input type="radio"/>		
4	Has a family member's drinking or drug use ever had a bad effect on your child?	<input type="radio"/>	<input type="radio"/>		
5	In the past month was there any day when you or anyone in your family went hungry because you did not have enough money for food?	<input type="radio"/>	<input type="radio"/>		
Over the past two weeks, how often have you been bothered by any of the following problems?					
	Not at all	Several days	More than half the days	Nearly every day	
6	Having little interest or pleasure in doing things?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7	Feeling down, depressed, or hopeless?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8	In general, how would you describe your relationship with your spouse/partner?	No tension <input type="radio"/>	Some tension <input type="radio"/>	A lot of tension <input type="radio"/>	Not applicable <input type="radio"/>
9	Do you and your partner work out arguments with:	No difficulty <input type="radio"/>	Some difficulty <input type="radio"/>	Great difficulty <input type="radio"/>	Not applicable <input type="radio"/>

copyright © www.theswyc.org 2013



Center for Youth Wellness ACE-Q

- Available for young kids and teens

CYW Adverse Childhood Experiences Questionnaire (ACE-Q) Child

To be completed by Parent/Caregiver

Today's Date: _____ Child's Name: _____ Date of Birth: _____
 Your Name: _____ Relationship to Child: _____

Many children experience stressful life events that can affect their health and wellbeing. The results from this questionnaire will assist your child's doctor in assessing their health and determining guidance. Please read the statements below. Count the number of statements that apply to your child and write the total number on the line provided.

Please DO NOT mark or indicate which specific statements apply to your child.

1) Of the statements in Section 1, HOW MANY apply to your child? Write the total number in the box.

Section 1. At any point since your child was born...

- Your child's parents or guardians were separated or divorced
- Your child lived with a household member who served time in jail or prison
- Your child lived with a household member who was depressed, mentally ill or attempted suicide
- Your child saw or heard household members hurt or threaten to hurt each other
- A household member ever was or was threatened to be physically hurt
- Your child lived with a household member who was in a way that made your child afraid that he or she might be physically hurt
- Someone touched your child's private parts or asked your child to touch their private parts in a sexual way
- More than once, your child went without food, clothing, a place to live, or had no one to protect him/her
- Someone pushed, grabbed, slapped or threw something at your child OR your child was hit so hard that your child was injured or had marks
- Your child lived with someone who had a problem with drinking or using drugs
- Your child often felt unsupported, unloved and/or unprotected

2) Of the statements in Section 2, HOW MANY apply to your child? Write the total number in the box.

Section 2. At any point since your child was born...

- Your child was in foster care
- Your child experienced harassment or bullying at school
- Your child lived with a parent or guardian who died
- Your child was separated from his/her primary caregiver through deportation or immigration
- Your child had a serious medical procedure or life-threatening illness
- Your child often saw or heard violence in the neighborhood or in his/her school neighborhood
- Your child was often treated badly because of race, sexual orientation, place of birth, disability or religion

Four Questions—Gets Almost Everything

- Has anything really stressful happened to your child since the last time I saw you?
- How has that affected your child's behavior?
 - Corollary question: How has this event and any changes in your child's behavior affected you?
- What have you done that's really fun with your child since the last time I saw you?
- Give me three words that describe your child to you



Ok....so screening is positive...



Just Screening is Pretty Effective

- Studies suggest that screening alone for ACEs can improve health and reduce both ER (11%) and sick office visits (31%)
 - Just talking about past experiences with a respected provider relieves stress and improves physical and mental health
 - Suggests that screening should start immediately, but.....providers are nervous



If a Traumatic Stressor Is Identified:

- Assess for child and family safety
- Provide education/guidance about behavior management, routines and daily living activities to promote recovery and sense of safety
- Refer to social work, child protection, domestic violence team, etc, if needed
 - Behavioral health/social work embedded into all clinics
- Alaska Child Trauma Center
- Help Me Grow Alaska



Resilience to ACEs

- *The most important protective resource to enable a child to cope with exposure to violence is a strong relationship with a competent, caring, positive adult, often a parent—but doesn't have to be!*



Resilience— Ordinary Magic

- *With the support of good parenting by either a parent or other significant adult, a child's cognitive and social development can proceed positively even with adversity*



So....Where Is the Best Place to Focus Society Efforts to Improve Family Health

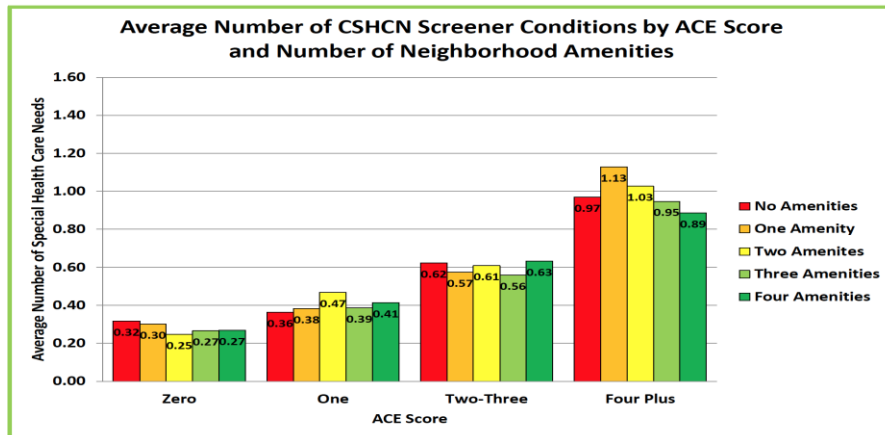
- Data from the National Survey on Children's Health (2011-12) combining ACEs data with chronic child health outcomes, and overlaying environmental changes to see if there is an effect



Effect of Neighborhood Amenities on Child Health

1. Sidewalks
2. Parks
3. Recreational Center
4. Library

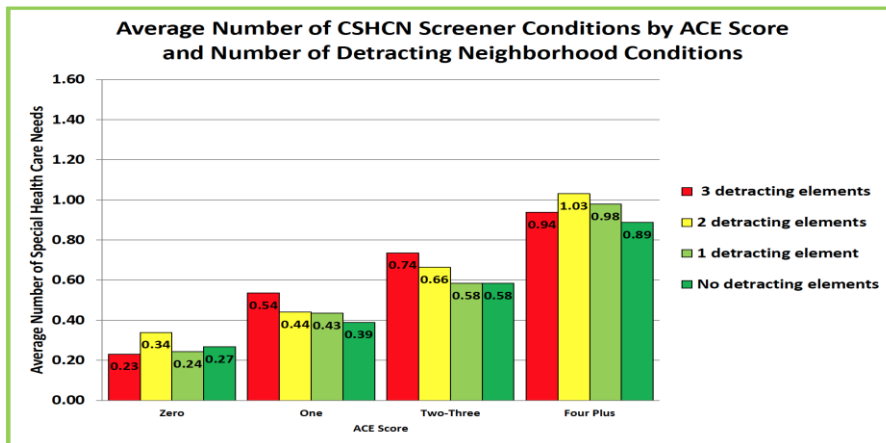
Effect of Neighborhood Amenities on Child Health



Effect of Neighborhood Detracting Elements on Child Health

1. Litter or garbage about
2. Dilapidated housing
3. Broken windows or graffiti

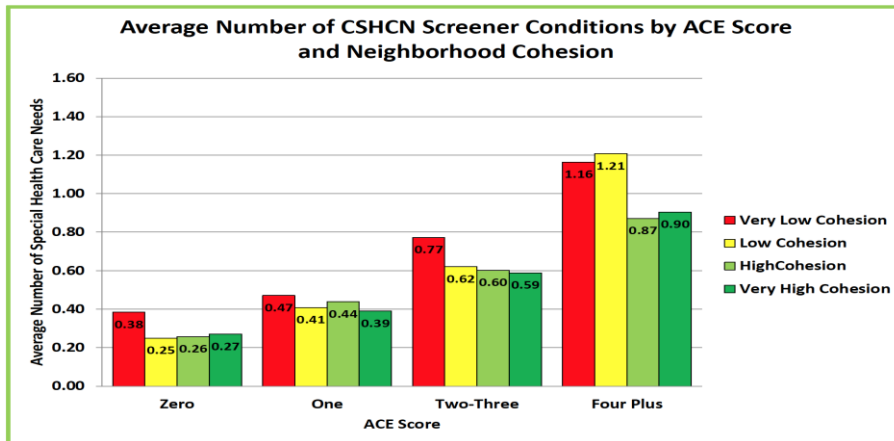
Effect of Neighborhood Detracting Elements on Child Health



Effect of Neighborhood Cohesion on Child Health

1. People help each other out
2. People watch each others children
3. People to count on
4. Adults I can trust

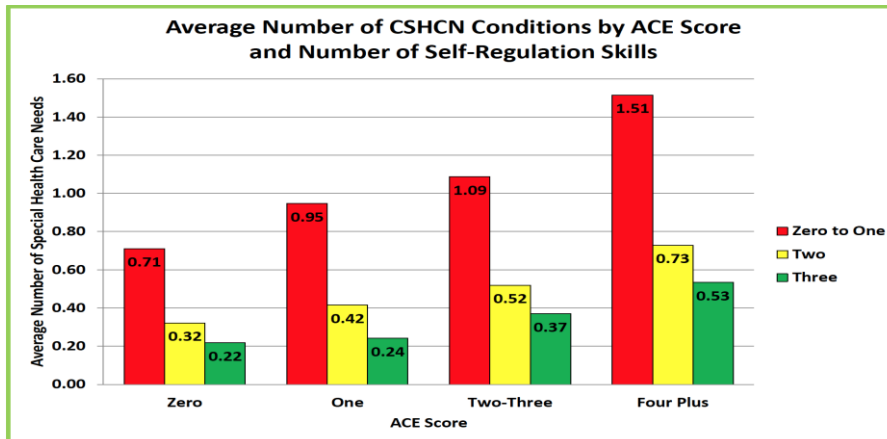
Effect of Neighborhood Cohesion on Child Health



Effect of Self-Regulation Skills on Child Health

1. Finishes tasks and follows through on commitments
2. Stays calm and in-control when facing a challenge
3. Shows interest and curiosity in learning new things

Effect of Self-Regulation Skills on Child Health



Keys to Resiliency

- Providing supportive adult-child relationships
- Scaffolding learning so the child builds a sense of self-efficacy and control
- Helping strengthen adaptive skills and self-regulatory capacities
- Using faith and cultural traditions as a foundation for hope and stability

Self-Regulation: ARC Framework

- **Attachment**
 - Caregiver affect management
 - Attunement
 - Consistent response
- **Regulation**
 - Identification
 - Modulation
 - Expression
- **Competency**
 - Executive function
 - Self development
- **Alaska Child Trauma Center**—training available for organizations to implement ARC
 - <https://www.acmhs.com/programs-services/child-family-services/alaska-child-trauma-center>



Strengthening Families

- **5 Protective Factors**
 - Parental Resilience
 - Social Connections
 - Knowledge of Parenting and Child Development
 - Concrete Support in Times of Need
 - Social-Emotional Competence of Children

<http://dhss.alaska.gov/ocs/Documents/families/Toolkit.pdf>

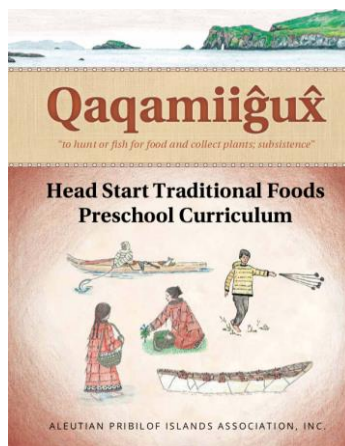


Foundations of Healthy Development

- Healthy relationships
 - Consistent
 - Nurturing
 - Protective
- Healthy environment
 - Free from toxins
 - Safe and active exploration
- Healthy nutrition
 - Breastfeeding support
 - Maternal nutrition**
 - Traditional diet



APIA Head Start



ALL ALASKA
PEDIATRIC
PARTNERSHIP

Building an Agenda for Families

- Universal screening for Social Determinants of Health to identify families at risk
 - <https://www.texaschildrens.org/sites/default/files/uploads/documents/83176%20BRIEF%20Social%20Determinants%20of%20Health%20Policy%20Digital.pdf>
- Support systems of Primary Care and Behavioral Health
 - [Medicaid](#)
 - [Alaska 1115 Waiver](#)
- Child care and early education
 - [Universal, high-quality child care](#)
 - [Alaska SB 6](#)
- Family economic stability
 - [Employment support for parents](#)
 - [Paid parental leave](#)
 - [Flexible work hours to attend school activities](#)



Building an Agenda for Families

- Support food security for families
 - [The Children's Lunchbox](#)
 - [Food Bank of Alaska](#)
- Support programs that train caregivers and parents to care for their children
 - [Strengthening Families and Parenting Programs](#)
- Support affordable, high-quality childcare for all families so that parents may work without compromising their child's development
 - [Thread](#)
- Support the development of trauma-informed schools
 - [Transforming Schools: A Framework for Trauma Informed Practice in Alaska](#)
 - [Juneau Trauma-Informed Schools Pilot Project](#)
- Support a safe place for kids to go after school
 - [Campfire Alaska](#)



Building an Agenda for Families

- Community development
 - Housing
 - Environmental protection
- Support improved mental health services for families in all areas of Alaska
 - Judge Vanessa White's Family Court in Palmer
 - Alaska Child Trauma Center
- Support safe housing for families
- Support a living wage and ongoing training for teachers, Head Start workers, and childcare workers
- In general.....
 - Intensive intervention and support for families at high risk of experiencing toxic stress!!!



Basically....

Families with young children are THE infrastructure of Alaska, and there's nothing more important to Alaska's successful future





Finally....

- I didn't grow up having role models, I grew up having people I didn't want to be like and seeing situations I'd never want to be in. Not all of us are dealt the right cards, but that doesn't mean you can reshuffle your deck for a better outcome.

Thank you!!!

Matthew Hirschfeld MD/PhD

Board Chair

All Alaska Pediatric Partnership

mhirschfeld@scf.cc

www.a2p2.org

