



Prevent Child Abuse New York™

Testimony at the Joint Legislative Budget Hearing on Health

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Thank you for the opportunity to submit testimony today. I am Tim Hathaway, Executive Director of Prevent Child Abuse NY (PCANY).

PCANY is the only private, nonprofit agency serving the entire state whose single mission is to prevent child abuse in all its forms. All of our work is centered in **prevention and strengthening families**. To us, “strengthening families” means decreasing parental stress, increasing the Protective Factors¹ surrounding children, and increasing familial bonds to build resilience. ***Our work is rooted in a belief in families and the knowledge that, given adequate and appropriate resources, all families can thrive.***

PCANY provides three primary services in Albany and statewide. Our **community awareness** efforts increase understanding of how individuals can use the Protective Factors Framework to help prevent child maltreatment. Specific programs include the Parent Helpline and the Pinwheels for Prevention Campaign.

Our **training and technical assistance** efforts provide professionals and communities with the knowledge, skills and resources to contribute to the creation of strong, healthy, and supportive environments for families and children. We provide Healthy Families New York Home Visiting certification and run the New York State Parenting Education Partnership, Enough Abuse Sexual Abuse Prevention, Community-based Strengthening Families and Child Abuse Prevention courses. In addition, we provide direct staff consulting and mini grants to organizations that are implementing prevention strategies. Our Resilience Leadership and Learning Institute, launched last year, provides comprehensive training and consultation for first responders, direct care providers, and administrators across the State.

Finally, our **policy and advocacy** work drives initiatives, at both the state and local levels, to improve systems that impact children and families. We advocate for evidence-based policy solutions that strengthen families, such as maternal, infant, and early childhood home visiting; early care and education; and family economic stability.

¹ <https://cssp.org/wp-content/uploads/2018/11/About-Strengthening-Families.pdf>

Paramount to the lens through which we view our work is the concept of **prevention**. The risk of child abuse and neglect is decreased by supporting families with an ‘upstream’ approach. Providing concrete support in times of need, equipping parents/caregivers with knowledge about child development, and building parental resilience are Protective Factors that can reduce the incidence of Adverse Childhood Experiences (ACEs) in a child’s life. Furthermore, supporting families from the beginning and during times of need can overall reduce interactions with the social service and child welfare systems – such as entry into foster care and family court.

PCANY supports meaningful investments in what is often called primary prevention– interventions designed to prevent negative outcomes at the root cause before they begin, a proactive (opposed to reactive) effort.

To that end, our budget request this year includes:

- **Investment of \$175M in home visiting** that lays the foundation for universal access
- **Restoration of \$200,000 for ParentChild+ home visiting and \$200,000 for Docs for Tots/Help Me grow**, as well as an **increase of \$300,000** for each program
- **Clarification of provisions regarding Adverse Childhood Experiences (ACEs) screening/reimbursement**
- **Support for Paid Family Leave**

Maternal, Infant, and Early Childhood Home Visiting

These free, voluntary programs are research-based and proven to decrease the risk of child abuse, improve health outcomes, and increase school readiness. Home visiting also addresses the specific needs of immigrant families and encourages fatherhood engagement. **Unfortunately, NYS programs currently only serve 3% of young children in low-income families and 6% of all young children.** (²*Early Childhood Home Visiting Data Snapshot; Schuyler Center for Analysis and Advocacy; September 2020*)

In December 2022, the federal government passed a year-end funding package that included reauthorization of the Maternal, Infant, Early Childhood Home Visiting (MIECHV) program. In addition to doubling the set-aside for tribal home visiting and instituting flexibility for telehealth and virtual home visiting, MIECHV received a funding increase for the first time ever: double the federal investment in the program and phased-in federal matching, which requires a 25% state match. ***Although these provisions do not begin until FY2024, we urge NYS to consider the impact increased funding can have on the statewide home visiting infrastructure.***

The Healthy Families New York (HFNY) program received an \$11M investment last year. HFNY services will be offered in every county with these expansion dollars. In addition to this monumental step, the \$200,000 investment in ParentChild+ in the

² *Early Childhood Home Visiting Data Snapshot; Schuyler Center for Analysis and Advocacy; September 2020*

Executive Budget last year ensured that the program could continue operating in the State, and even expand its reach to share curriculum and training with home-based child care programs. **PCANY urges restoration of this \$200,000 line item for ParentChild+, to support further expansion and continue initiatives. We also elevate the request of ParentChild+-- an additional \$300,000 this year to further expand access and professional development opportunities.**

In a similar vein, **we request restoration of the \$200,000 for Help Me Grow** (administered by Docs for Tots), along with an **increase of \$300,000 to expand that program**, which compliments home visiting and other early childhood initiatives.

With the groundwork of these investments already in place, **PCANY reiterates our overarching vision of home visiting in NYS: a formalized system of universally-offered home visiting.** States like Oregon and New Jersey have already passed legislation to create universal newborn home nurse visitation programs and Arkansas recently introduced legislation. A universal approach aims to eliminate the stigma associated with “risk factors” and “eligibility.” **We are thankful to the Black, Hispanic, Puerto Rican, and Asian Caucus for including our request of \$175M to implement universally-offered home visiting in its Peoples Budget this year. We understand that this is a large fiscal commitment and would encourage the Legislature to take a first step by convening insurers from across our State to discuss why this investment makes good economic sense.**

Healthy Steps

PCANY supports the investment of an additional \$12M in Healthy Steps, which will build on the expansion from last year. An evidence-based program which integrates children’s mental health with pediatric practices, Healthy Steps is an example of service integration to better support families and youth. PCANY encourages the State to consider other opportunities to streamline services and referral processes, such as providing materials about home visiting to healthcare providers to discuss with parents during well-child visits in the first few years of life.

Adverse Childhood Experiences (ACEs)

PCANY was encouraged by the inclusion in the Executive Budget of provisions to require pediatric health care providers to provide a parent, guardian, or custodian with materials and education about ACEs, the importance of Protective Factors, and the availability of services for children and families impacted by ACEs. We agree that such materials—provided they are in a culturally-responsive manner and in the native language of the parent/caregiver—are important. This provision originated two years ago in what ultimately became budget language to update New York State’s mandated reporter training. The NYS Office of Children and Family Services (OCFS) unveiled the new training earlier this month. Each module now includes handouts on a variety of topics, including ACEs/Protective Factors, implicit bias, and the identification of child abuse virtually. Furthermore, in the current statute, Local Department of Social Service (LDSS) agencies are required to make materials available to educate parents, guardians, custodians, etc. about adverse childhood experiences, protective factors,

and ability of services for children at risk from experiencing ACEs.³ PCANY acknowledges the existence of many thorough educational materials, including those developed by local districts and those developed for the statewide mandated reporting training, and the potential that they may be used in conjunction with or as inspiration for materials designed for pediatric health care providers. **We encourage coordination between ACEs materials specifically designed for pediatricians on the local and statewide levels to ensure continuity and avoid duplication of effort. We welcome the opportunity for future discussion.**

We also see an opportunity in the expansion of Medicaid to enhance screening for ACEs. We elevate two reminders – ACEs do not define children and families, but rather remind us of both the importance of prevention and the need to invest holistically in healthcare and social services. We cannot screen for ACEs without a plan in place for referrals to these services and to community supports. **This is where primary prevention comes in.** Communities need access to flexible funding to support those community-identified, family strengthening initiatives that help to build Protective Factors around children and their families. **We urge the State to make a substantial investment in children, families, and communities by creating the Child and Family Wellbeing Fund (information on the Fund, which sits at the human services table, is attached).**

Paid Family Leave

The risk of child abuse and maltreatment increases when parents are under stress and not supported. Worrying about work or providing food and clothing are everyday realities for many parents. Children and families thrive in conditions that prioritize their wellbeing. Expanding paid family leave policies allows parents protected, paid time off without jeopardizing job security. PCANY supports the provisions to build on New York's paid family leave law to offer State employees 12 weeks of fully paid parental leave.⁴

PCANY also supports S.2821/A4053 and the belief that New York's Paid Family and Medical Leave Program can better serve New Yorkers by:

- Raising the benefit levels for workers' own health needs and paid family leave
- Protecting workers' jobs during medical leave
- Meeting the needs of today's workforce by creating portable paid family leave benefits
- Adopting an inclusive family definition

Closing

PCANY is encouraged by some provisions in the Executive Budget, but we assert that certain components must be executed properly. The economic return on investment and the ripple effects of bold investment in strengthening and supporting children and families can bring us to the cusp of meaningful systems change. **We know that child**

³ <https://legislation.nysenate.gov/pdf/bills/2021/a3006c> page 87

⁴

<https://preventchildabuse.org/wp-content/uploads/2021/11/PCA-America-Paid-Family-Leave-One-Pager-11-17-21.pdf>

abuse and neglect is preventable if we invest in programs that support and strengthen families. We think that's money well spent.