The prosperity and long-term success of Arizona depends on the healthy development of its children, who will become our future workers, decision-makers and leaders. Family and child well-being are public health issues. Helping families and children to be happy, healthy and resilient helps the community at large.

There are significant costs to society when children and families don’t thrive. On average, the estimated lifetime cost of child maltreatment is about $210,000 for each victim. This cost includes childhood health care costs, adult health care costs and lost productivity.

Some of the best ways to help families are by engaging in activities that increase the protective factors: characteristics or strengths of individuals, families or communities that help reduce risks and negative effects of traumatic or difficult situations.

Protective factors also help to reduce the effects of Adverse Childhood Experience.

**ADVERSE CHILDHOOD EXPERIENCES**

Adverse Childhood Experiences (ACEs) are traumatic events that take place in children’s lives before age 18 that harm their developing brains and bodies so acutely that the effects show up decades later. Arizona has the highest rate in the nation for the percentage of children birth to 17 years who have experienced two or more ACEs.

**ADVERSE CHILDHOOD EXPERIENCES**

- Recurrent physical abuse
- Recurrent emotional abuse
- Contact sexual abuse
- Alcohol and/or drug abuse in the household
- An incarcerated household member
- Someone in the household who was depressed, mentally ill, institutionalized or suicidal
- Mother who was treated violently
- One or no parent
- Emotional or physical neglect

**FIVE FACTS ABOUT ADVERSE CHILDHOOD EXPERIENCES**

1. ACEs are common; nearly two-thirds (64 percent) of adults have at least one.
2. ACEs are associated with adult onset of chronic disease, such as cancer and heart disease, as well as mental illness, addictions, violence and being a victim of violence.
3. ACEs don’t occur alone. If you have one, there’s an 87 percent chance that you have two or more.
4. The more ACEs you have, the greater the risk for chronic disease, mental illness, addictions, violence and being a victim of violence. People with high ACE scores are more likely to be violent, to have more marriages, more broken bones, more drug prescriptions, more depression and more autoimmune diseases.
5. ACEs are responsible for a large portion of: workplace absenteeism, higher costs in health care, emergency responses, mental health issues, child welfare cases and criminal justice incidents.
PROTECTIVE FACTORS
• Parental resilience – Ability to manage stress and maintain functionality when confronted with challenges or trauma.
• Social connections – Relationships with others that provide individuals with emotional support, friendship and advice.
• Knowledge of parenting and child development – Basic understanding of child development including: knowing what children’s needs are at different developmental stages and having appropriate expectations for children.
• Concrete support in times of need – Access to timely support such as monetary assistance, emergency child care assistance or transportation.
• Social and emotional competence of children – Child’s ability to interact in a positive way with others, communicate feelings and self-regulate behavior.

SNAPSHOT OF CHALLENGES FACING ARIZONA’S FAMILIES
• Twenty-four percent of Arizona children are in poverty compared to 19 percent of children at the national level.
• The national average of children in foster care is six per 1,000 children. In Arizona, the rate is ten per 1,000 children.
• According to the National Center for Education Statistics, Arizona’s graduation rate for public high school students was 80 percent, which is less than the U.S. national average which is 84 percent.

SERVICES FOR VULNERABLE AND AT-RISK FAMILIES

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FOR MORE INFORMATION ON THESE SERVICES, VISIT:

The information summarized on this handout is sourced from the 2019 “Strong Families Thriving Children” Background Report edited by Erica Quintana with the Morrison Institute for Public Policy.