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Cumberland County Tackles Child Abuse with Innovative Prevention Plan

Morrisville, NC (April 5, 2018) – Child abuse and neglect impact tens of thousands of North Carolina children each year, with the effects ranging from toxic stress to death. Even when the worst doesn't happen, the consequences of child abuse can impact a child and his or her family and community for the rest of their lives, as evidenced by research into adverse childhood experiences (ACEs).

North Carolina's health and human services systems are dedicated to combating the effects of ACEs by becoming trauma-informed, but the state still spends more than \$2 billion annually on this preventable problem, according to Sharon Hirsch, president and CEO of Prevent Child Abuse North Carolina.

Hirsch, who writes about the problem in the current issue of the *North Carolina Medical Journal*, says that cost includes resources spent by the criminal justice system, education system and health care providers, as well as lost worker productivity, since adults who have experienced adversity tend to suffer from physical and mental illnesses that require them to miss more days of work.

"Imagine if we spent 5 percent more on prevention," she said.

To that end, innovation is happening at the local level. Cumberland County stands out as an example thanks to its creation of a Community Child Abuse Prevention Plan (CCAPP) in 2017. Twenty-two local public and nonprofit agencies helped develop the plan, which provides a framework for improving child abuse prevention. The primary goal of the CCAPP is to reduce childhood maltreatment in Cumberland County by 90 percent by 2030.

Dr. Adam Zolotor, publisher of the NCMJ says, "these types of community initiatives are fundamental to the prevention of abuse and neglect and just the kinds of efforts we are promoting and supporting as part of the North Carolina Institute of Medicines Essentials for Childhood initiative."

The coalition includes members of the military, faith, education, nonprofit and public health communities, many of whose members were galvanized by a series of high-profile cases of child fatalities.

"If you bring people together and ask them to help you solve a problem, they're going to be creative about it," said Hirsch. "In Cumberland County, the process took about 18 months, but it's hard to describe the energy it generated, and the number of people who were willing to come to the table and be part of the solution."

The CCAPP has found success bringing the community together to prevent child abuse, but it's only the beginning. Part of the next step, according to Hirsch, is for other counties to identify – and commit to changing - the difference between resources spent on upstream prevention and downstream consequences.

New Hanover County, which has the highest opioid overdose rate in the country, and Halifax County have each initiated local CCAPPs; Buncombe County is including a prevention goal into its County Health Improvement Plan; and Wake County is beginning a CCAPP process this spring.

"The real work begins as the community invests and implements awareness, programs, and services that go upstream to foster the safe, stable, nurturing relationships and environments that all children need to thrive," Hirsch writes.

To read the full article, "Investing in Community Based Upstream Solutions," by Sharon Hirsch, as well as other NCMJ articles, visit ncmedicaljournal.com.

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