# Washington State House of Representatives Office of Program Research

BILL ANALYSIS

## **Human Services & Early Learning Committee**

### **HB 1925**

**Brief Description**: Informing new parents about adverse childhood experiences.

Sponsors: Representatives Dolan, Doglio, Jinkins, Paul, Ryu, Walen, Pollet and Davis.

#### **Brief Summary of Bill**

- Requires the Department of Health (DOH) to provide parents with information about adverse childhood experiences (ACEs) and develop related training for community health workers and providers.
- Directs the DOH to implement a pilot program with one or more local clinics or organizations to screen for ACEs.

**Hearing Date**: 2/13/19

Staff: Dawn Eychaner (786-7135).

#### **Background:**

#### Department of Health.

The Department of Health (DOH) administers the Child Profile Health Promotion System (Child Profile), a program that mails age-specific information to parents of children up to the age of 6. The materials include age-specific reminders for parents about well-child checkups, immunizations, and other information.

#### Adverse Childhood Experiences.

Adverse childhood experiences (ACEs) are indicators of severe childhood stressors and family dysfunction experienced before the age of 18 that can negatively impact physical and behavioral health across the lifespan. The ACEs indicators include:

- child physical, sexual, and emotional abuse;
- child emotional or physical neglect;

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- alcohol or other substance abuse in the home;
- mental illness, depression, or suicidal behaviors in the home;
- incarceration of a family member;
- witnessing intimate partner violence; and
- parental divorce or separation.

An individual's ACEs score is the total sum of the different ACEs indicators experienced by that person during childhood and is used to assess cumulative childhood stress.

#### **Summary of Bill:**

#### Resources for Parents.

The DOH must identify videos, printed material, and other parent support tools and resources that promote safe, stable, and nurturing relationships and environments and make these resources available on a website that is accessible in the five most commonly spoken languages in the state. The DOH must promote the website with provider organizations and government agencies and encourage the use of videos and materials in waiting rooms and receptionist areas where parents and children may be waiting for services.

#### Child Profile.

The DOH must review and include resiliency promotion and ACEs mitigation messaging in Child Profile materials.

#### Training Modules.

The DOH must develop training modules for community health workers and other peer educators and health care providers related to resiliency, prevention and mitigation of ACEs, childhood adversity, childhood trauma, and the promotion of safe and nurturing relationships and environments.

#### Pilot Program.

The DOH must develop and implement a pilot program with one or more local clinics or organizations to screen for ACEs using an evidence-informed or promising practices-informed questionnaire and provide linkages to appropriate community and clinical resources.

By December 1, 2020, the DOH must report to the Legislature on the results of the pilot, including:

- reported ACEs levels;
- effectiveness of questionnaires used;
- any challenges related to training staff to use the questionnaire; and
- any recommendations for improving the use of the screening tools and expanding adoption of the screening tools as part of community and clinical practice.

**Appropriation**: None.

Fiscal Note: Available.

**Effective Date**: The bill takes effect 90 days after adjournment of the session in which the bill is passed.