HOUSE CONCURRENT RESOLUTION NO. 2

IN THE LEGISLATURE OF THE STATE OF ALASKA

THIRTIETH LEGISLATURE - FIRST SESSION

BY REPRESENTATIVE TARR

Introduced: 1/23/17

Referred:

A RESOLUTION

- 1 Urging Governor Bill Walker to join with the Alaska State Legislature to respond to the
- 2 public and behavioral health epidemic of adverse childhood experiences by establishing
- a statewide policy and providing programs to address this epidemic.

4 BE IT RESOLVED BY THE LEGISLATURE OF THE STATE OF ALASKA:

WHEREAS more than two-thirds of adults surveyed in the state report experiencing adverse childhood experiences at a rate higher than other states that have conducted surveys;

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WHEREAS adverse childhood experiences are traumatic experiences occurring during childhood that may have a profound effect on a child's developing brain and body and

10 may result in poor health during the person's adulthood, including physical, emotional, and

11 sexual abuse, physical and emotional neglect, and household dysfunction, such as domestic

violence, separation or divorce involving household members, and substance abuse, untreated

mental illness, or incarceration of a household member; and

WHEREAS research over the last two decades in the evolving fields of neuroscience,

15 molecular biology, public health, genomics, and epigenetics reveals that experiences in the

first few years of life build changes into the biology of the human body that, in turn, influence the person's physical and mental health over the person's lifetime; and

WHEREAS strong, frequent, or prolonged stress in childhood caused by adverse childhood experiences can become toxic stress, affecting the development of a child's fundamental brain architecture and stress response systems; and

WHEREAS Alaska Natives experience adverse childhood experiences at a rate of up to twice the rate of non-Natives, according to the Behavioral Risk Factor Surveillance System in 2013, with nearly 30 percent of Alaska Natives having experienced four or more adverse childhood experiences; and

WHEREAS adverse childhood experience studies have also found a strong correlation between the number of adverse childhood experiences and a person's risk for disease and negative health behaviors, including suicide attempts, cancer, ischemic heart disease, diabetes, smoking, substance abuse, depression, obesity, unplanned pregnancies, workplace absenteeism, lower educational achievement, and lower wages; and

WHEREAS, when compared with other states surveyed, an adult in the state with four or more adverse childhood experiences is 2.6 times more likely to use Medicaid, 2.7 times more likely to be unable to work, 2.4 times more likely to be a current smoker, 2.6 times more likely to have not graduated from high school or received a general education development diploma, 5.2 times more likely to have ever been diagnosed with a depressive disorder, 1.8 times more likely to be a heavy drinker, 2.9 times more likely to use a government food program, and 4.2 times more likely to have experienced hunger in the previous year; and

WHEREAS, in research conducted outside the state, when compared with all states surveyed, a person with four or more adverse childhood experiences is 2.4 times more likely to have a stroke, 2.2 times more likely to have ischemic heart disease, 2 times more likely to have chronic pulmonary obstructive disease, 1.9 times more likely to have a type of cancer, 1.6 times more likely to have diabetes, 12.2 times more likely to attempt suicide, 10.3 times more likely to use injection drugs, and 7.4 times more likely to be an alcoholic; and

WHEREAS the Alaska Mental Health Board and the Advisory Board on Alcoholism and Drug Abuse have estimated the direct and indirect cost to the state of adverse childhood experiences in six categories (adult Medicaid, current smoking, diabetes, binge drinking,

1	arthritis, and obesity) to be approximately \$774,000,000 annually; and
2	WHEREAS the life expectancy of a person with six or more adverse childhood
3	experiences is 20 years shorter than the life expectancy of a person with no adverse childhood
4	experiences; and
5	WHEREAS early childhood offers a unique window of opportunity to prevent and
6	heal the effects of adverse childhood experiences and toxic stress on a child's brain and body;
7	and
8	WHEREAS the emerging science and research on toxic stress and adverse childhood
9	experiences have uncovered evidence of a growing public health crisis for the state with
10	implications for the state's educational, juvenile justice, criminal justice, public health, public
11	safety, labor, and commerce systems; and
12	WHEREAS it is more effective and less costly to positively influence the architecture
13	of a young child's developing brain than to attempt to correct poor learning, health, and
14	behaviors later in life;
15	BE IT RESOLVED that the state's policy decisions acknowledge and take into
16	account the principles of early childhood brain development and, whenever possible, consider
17	the concepts of toxic stress, early adversity, and buffering relationships; and be it
18	FURTHER RESOLVED that early intervention and investment in early childhood
19	years are important strategies to achieve a lasting foundation for a more prosperous and
20	sustainable state through investing in human capital; and be it

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FURTHER RESOLVED that the Governor join with the Alaska State Legislature

and address the presence of adverse childhood experiences as factors for many societal issues

and to fund research for statewide solutions.