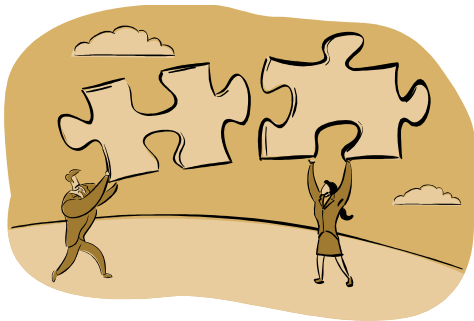


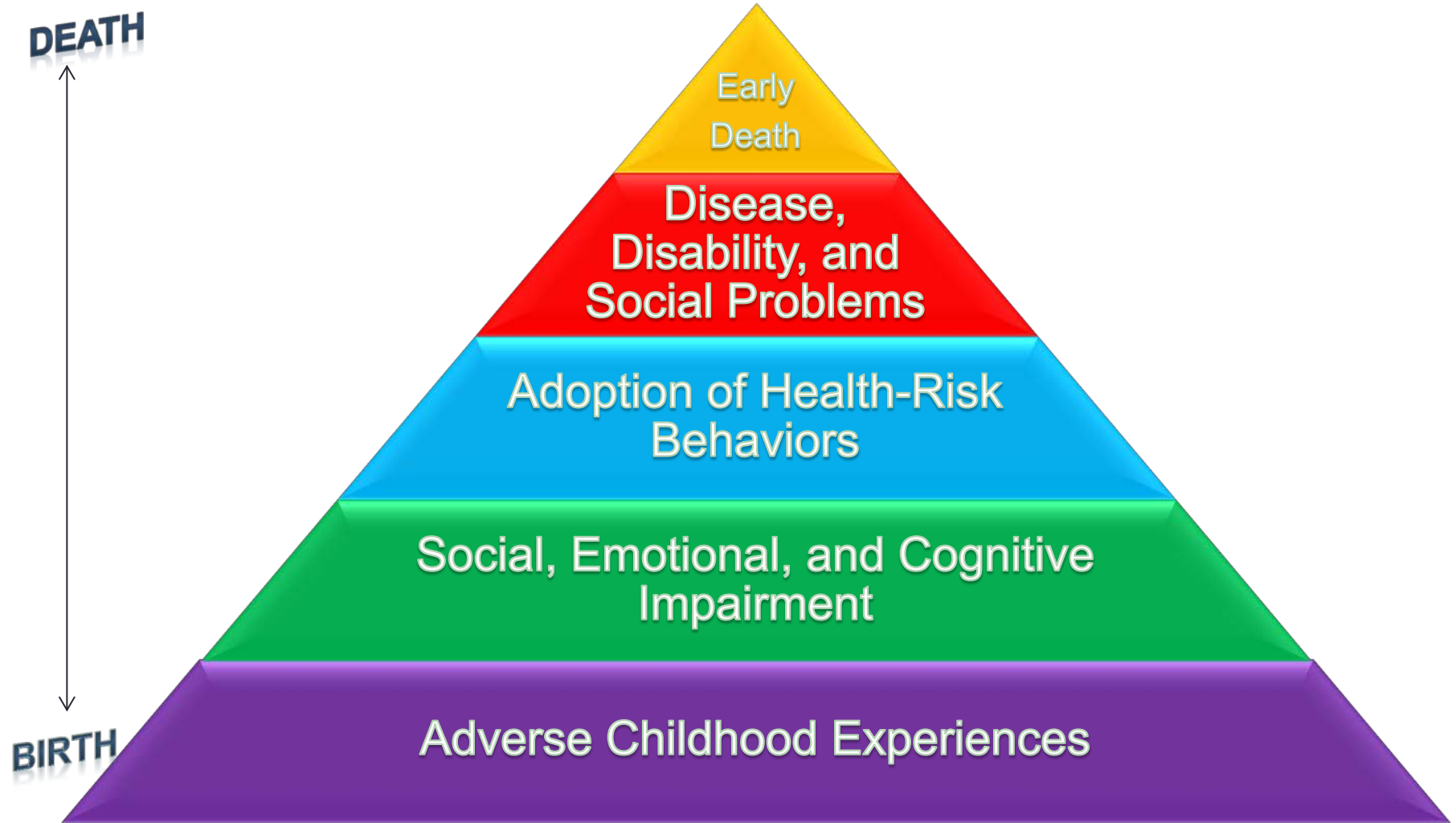
Shaping A Two-generational Approach For Reducing Poverty:

Identifying and Addressing the Missing Pieces



Prepared for:
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Adverse Childhood Experiences “The ACE Study”



ACE Categories Considered

Indicators of Family Dysfunction

- 1. Mentally ill, depressed or suicidal person in home
- 2. Drug addicted or alcoholic family member
- 3. Parental discord –indicated by divorce, separation, abandonment
- 4. Witnessing domestic violence against the mother
- 5. Incarceration of any family member

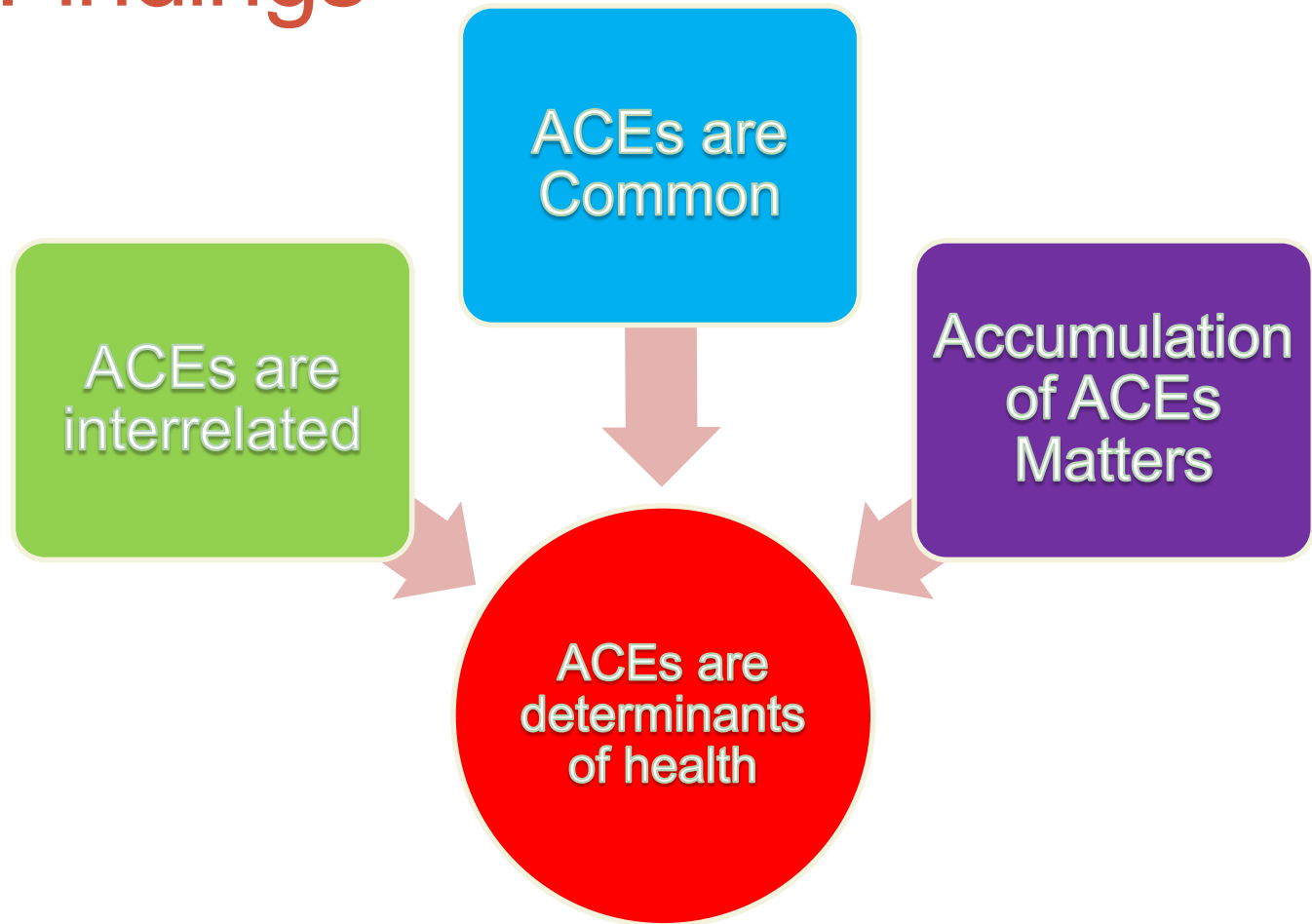
Abuse

- 6. Child physical abuse
- 7. Child sexual abuse
- 8. Child emotional abuse

Neglect

- 9. Physical Neglect
- 10. Emotional Neglect

Major Findings



- *ACEs strong predictors of what happens later in life in terms of health behaviors, social problems, disease incidence, and early death*

Family Employment Program (FEP) Study

- Purpose:
 - To better understand the demographics, childhood experiences, work and education histories, employment challenges, attitudes toward programs of new (2 – 9 months) TANF recipients.
- Design and methods:
 - Longitudinal, exploratory study of randomly selected FEP participants
 - Annual in-person interviews generally conducted in person's home 3 times starting 2012
- Sample:
 - Wave 3 participants w/ ACE questions included: N = 671
 - No significant non-respondent bias from Wave 1

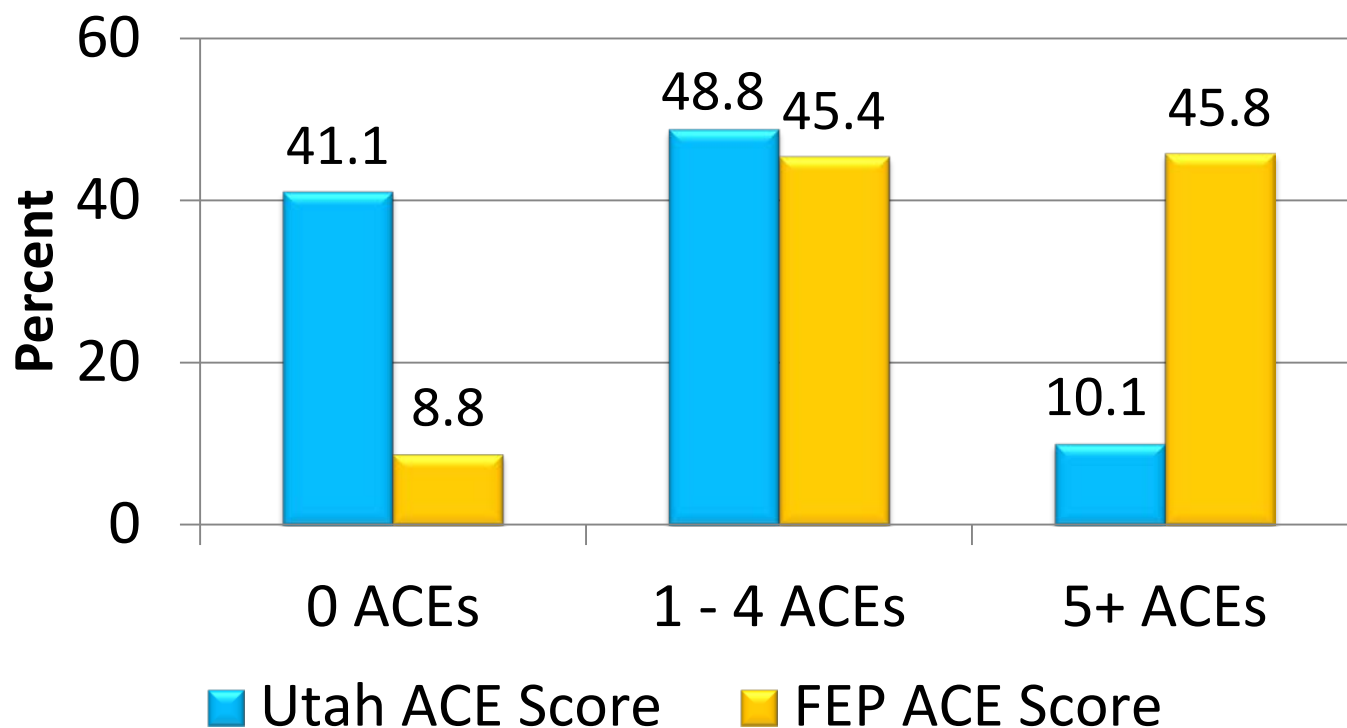
Searching for Missing Pieces

Research Question:

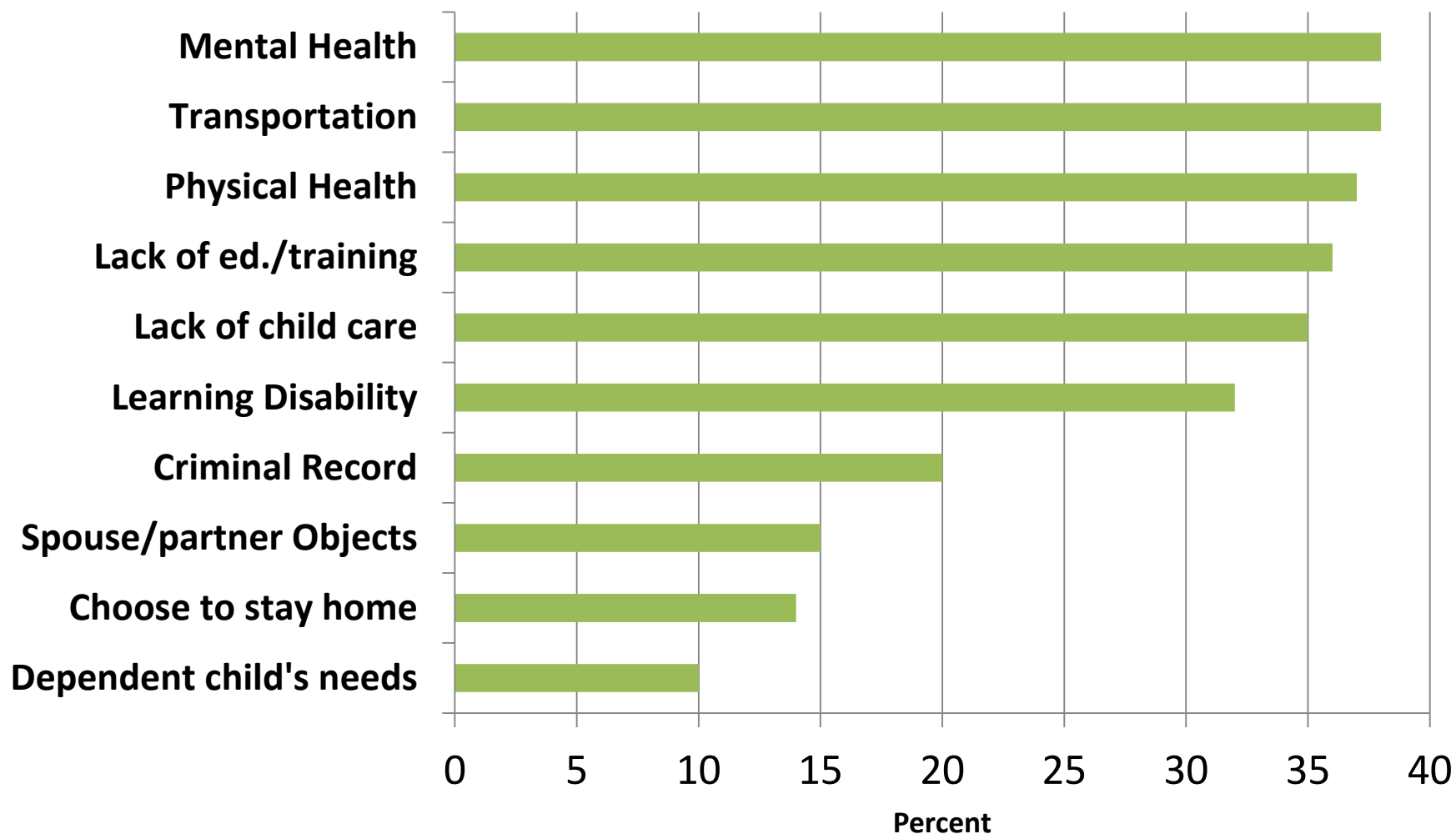
What is the relationship between a TANF recipient's adverse childhood experiences (ACEs) and the challenges they face in adulthood relative to achieving self-sufficiency?

FEP Recipients vs General Population

- Utah 2010 BRFSS (Behavioral Risk Factor Surveillance System) data included ACE questions.
- Results show FEP population far from “typical”

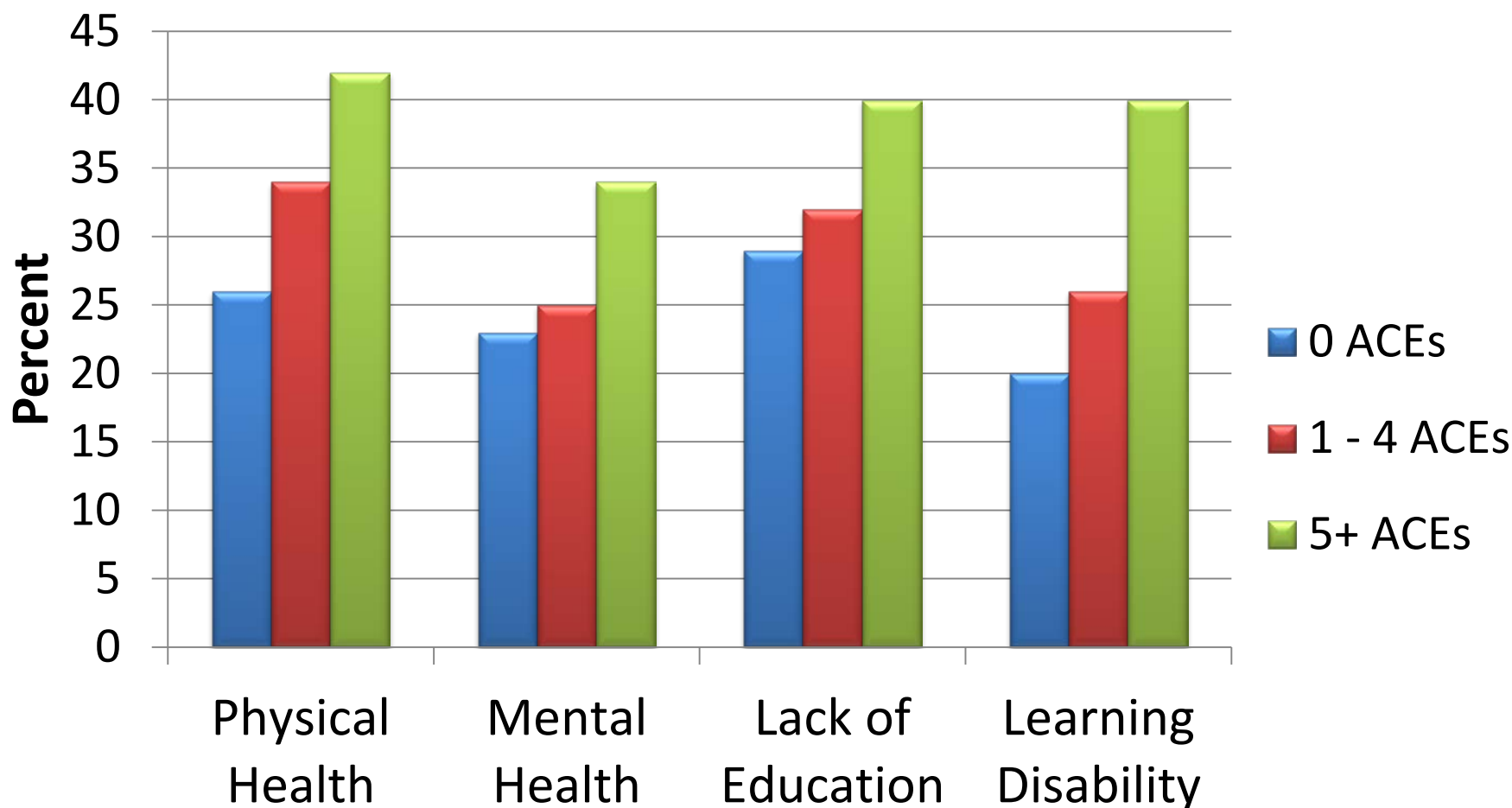


Employment Challenges



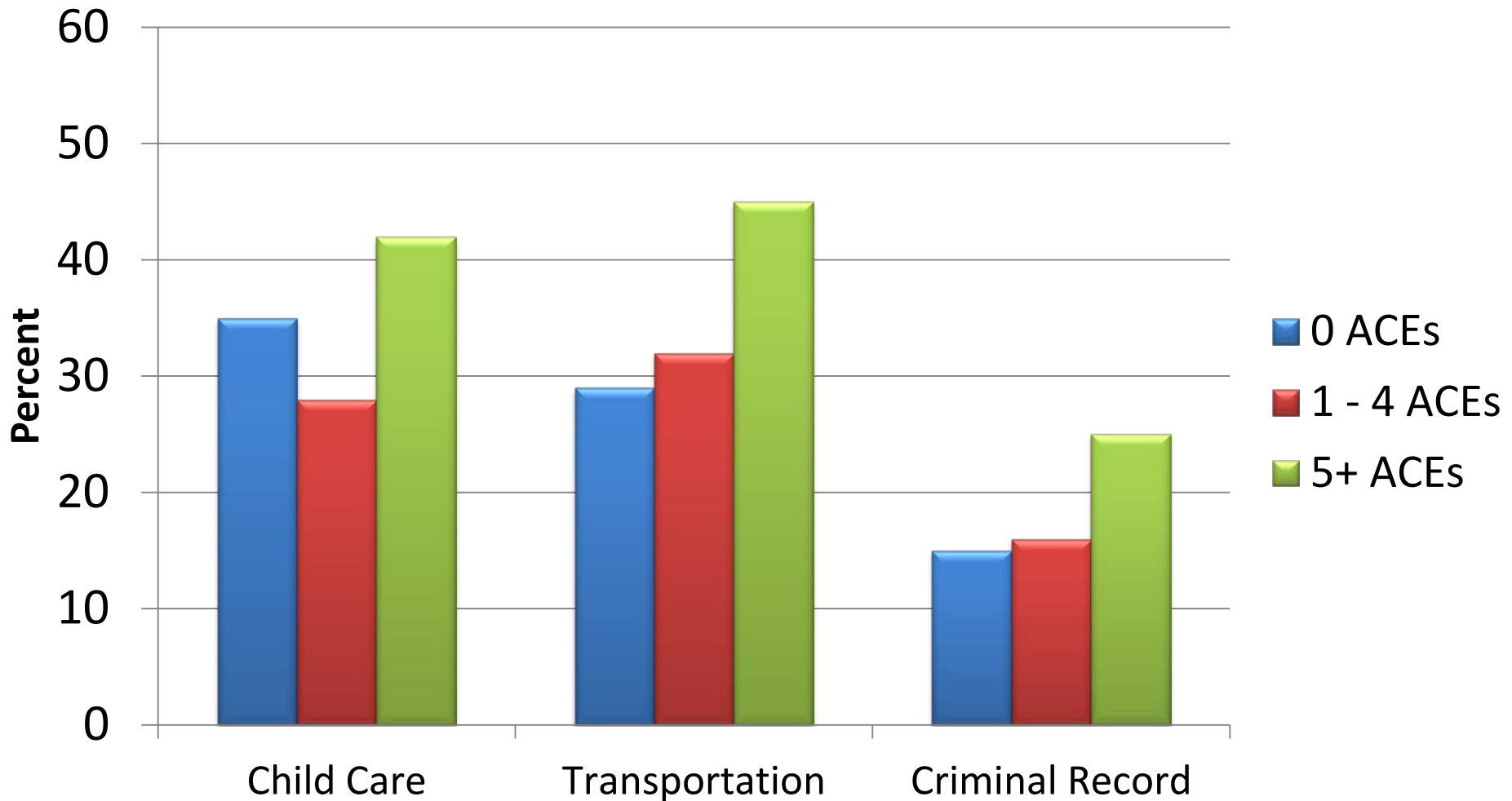
Employment Challenges and ACEs

- **Human Capital Challenges**



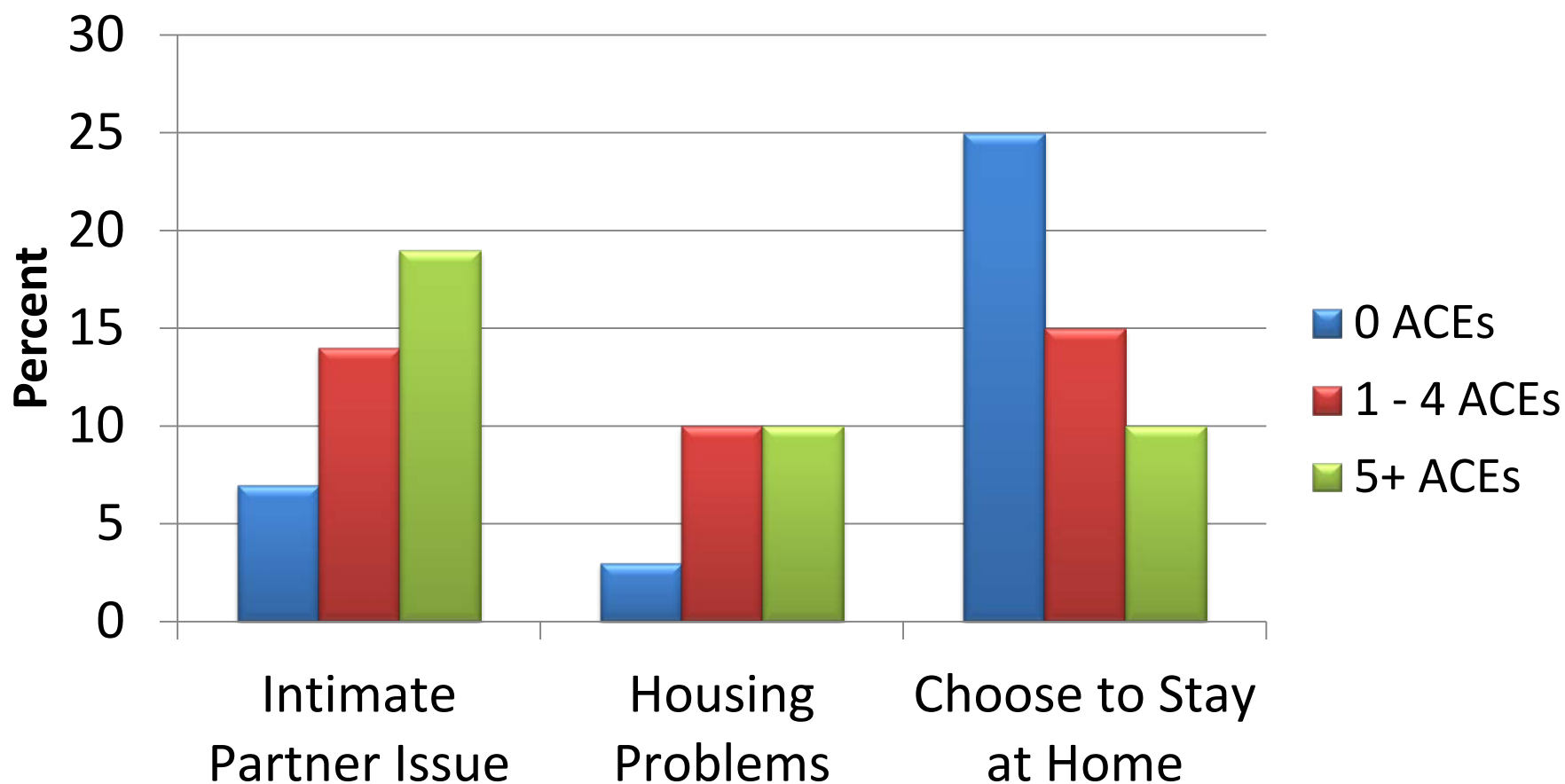
Employment Challenges and ACEs

- **Hire and Retention Challenges:**



Employment Challenges and ACEs

- **Outside Challenges:**



Increased Impact of High ACEs

Prevalence of Issue as barrier to work in past year:	All FEP Sample	5+ ACEs	↑ Risk
Learning Disability	32%	40%	+ 8%
Lack of Child Care	35%	42%	+ 7%
Transportation	38%	45%	+ 6%
Lack of Education/training	22%	28%	+ 6%
Physical Health	37%	42%	+ 5%
Mental Health	29%	34%	+ 5%
Spouse/ Partner Objects	15%	19%	+ 4%
Criminal Record	20%	24%	+ 4%

Additional Correlated factors

Prevalence of Challenge in respondent's life:	All FEP Sample	5+ ACEs	↑ Risk
Witnessed abuse of others as an adult	53%	70%	+ 17%
Parents “not at all” involved in education as child	34%	50%	+ 16%
Grew up in non-two parent home	41%	54%	+ 13%
Remembers public assistance as a child	34%	46%	+ 12%
Homeless as an adult	39%	50%	+ 11%
Experience of domestic violence as adult	64%	74%	+ 10%
Homeless as a child	16%	25%	+ 9%
In resource or special education classes	31%	39%	+ 8%
Mom was a teen when her first child was born	51%	58%	+ 7%
Not married when first child was born	63%	68%	+ 5%

Areas of No significant difference

- **Self perception:**
 - View their situation as similar to others receiving benefits (48%)
- **Attitude toward work:**
 - Prefer to work outside home vs be stay at home parent (42%)
- **Preparation for work:**
 - Ready and available for full time work (65%)

Areas of No significant difference

- **Employment:**

- Strong work history (64% worked $\frac{3}{4}$ of adult life or more)
- HOWEVER - those with 5+ ACEs:
 - Were more likely to work at low skill jobs
 - Reported lower wages on average

- **Education:**

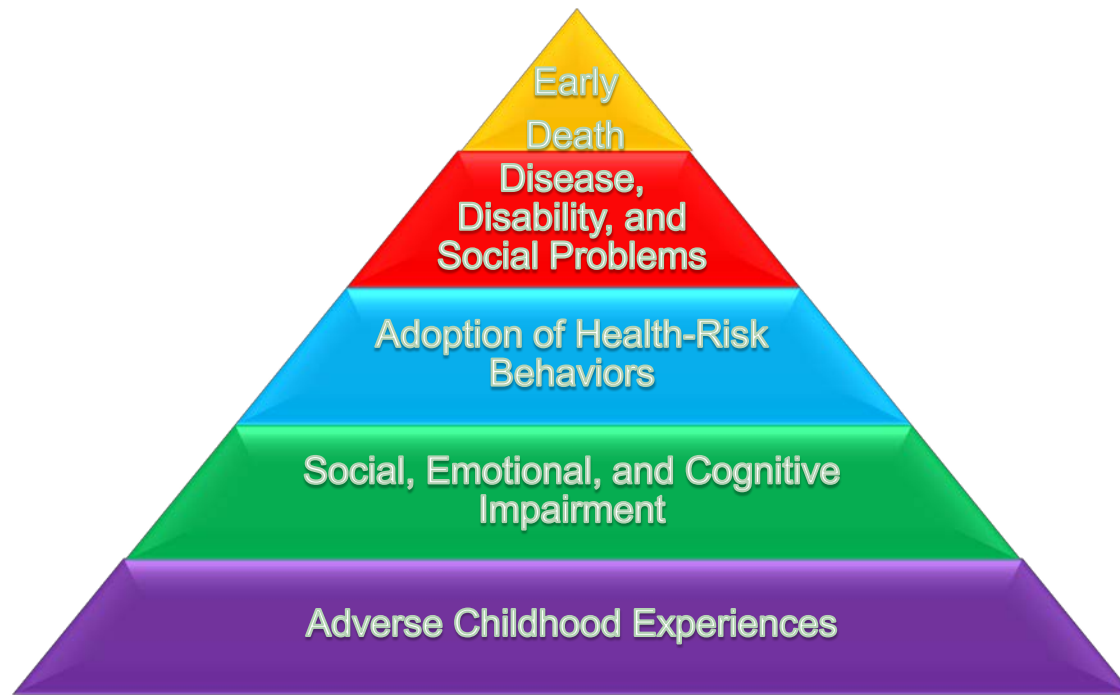
- Basic education levels high (74% have HSD/GED)
- HOWEVER – those with 5+ ACEs were:
 - more likely to have no post secondary education (5+ = 75%; all FEP = 67%)
 - Less likely to have graduated from traditional HS (5+ = 42%; all FEP = 48%)
 - Less likely to have been engaged in HS educational experiences

Data Based Conclusions

- High ACE scores are significantly higher in the TANF population vs general population
- Within TANF population, high ACE scores are correlated to a wide variety of employment barriers and challenges in the activities of daily living
- TANF recipients with high ACE scores are engaged in work and work activities at the same rate as other TANF recipients however they are not achieving the same level of benefit from employment
- Lower level of benefit from employment increases the likelihood of the family remaining in poverty for a longer time

Returning to ACEs

- ACEs are common in general population, but much more common in TANF population
- This suggests a missing piece: So, How do we use the ACE science to better serve TANF recipients?



Limitations



- ***ACE Histories instead of ACE scores***

Trauma-Informed Case Management

1. Exposure

- ACE history = Level of Exposure
- Not label or Diagnosis

2. Response

- Varies by individual
- May or may not need attention

3. Impact

- What challenges TANF recipients face today
- Barriers to employment

Mitigate the Impact

1. ACE history informing conversation about impact:

“A lot of people who had difficult experiences growing up find work really challenging, I’m wondering if you’ve had the same experience?”

OR

“A lot of people who had difficult experiences growing up find work really challenging, how have you managed to do so well?”

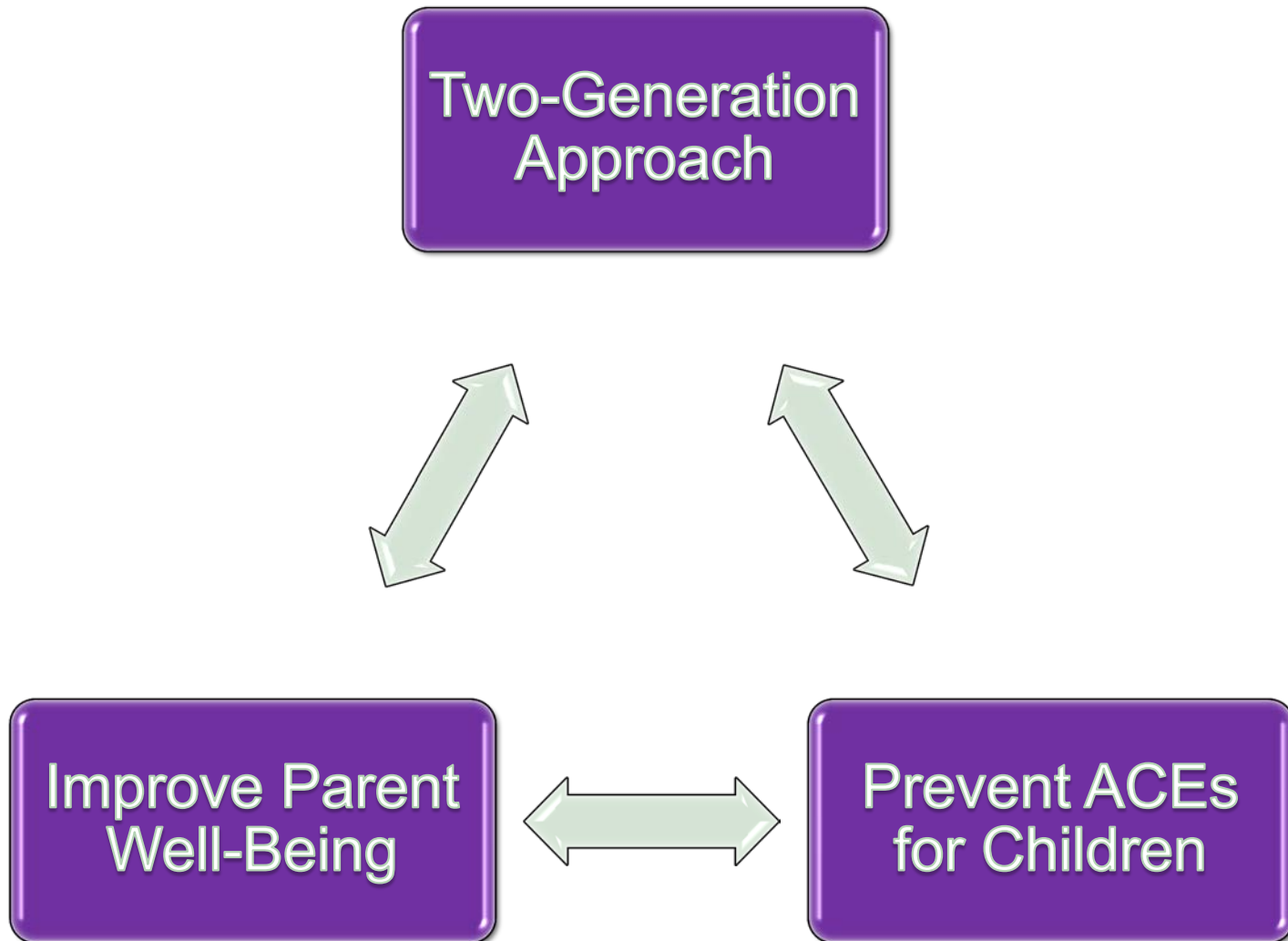
2. Modify case plans to build capacity:

- Address impacts that makes self-sufficiency challenging
 - E.g. Mental Health, Physical Health, etc.

3. Provide resources and referrals to support well-being

- Flexibility within case plans for long term gain

Next Steps



References

- Center for Disease Control and Prevention (2014, May 14). *Injury prevention and control: adverse childhood experiences (ace) study*. Retrieved from <http://www.cdc.gov/violenceprevention/acestudy/pyramid.html>
- Center for Disease Control and Prevention (2014, May 13). *Major findings*. Retrieved from <http://www.cdc.gov/violenceprevention/acestudy/findings.html>
- Felitti, M. D., Vincent, J., Anda, M. D., Robert, F., Nordenberg, M. D., Williamson, M. S., ... & James, S. (1998). Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults: The Adverse Childhood Experiences (ACE) Study. *American journal of preventive medicine*, 14(4), 245-258.
- ACE Learning Institute. (2014). *Workforce presentation* [PowerPoint slides]. Retrieved from http://www.healthygen.org/sites/default/files/Workforce%20June%202014%20LI_HealthyGen.pdf
- Foundation for Healthy Generations. (2014, July 21). Ace learning institute “hot topics” webinar. Webinar retrieved from <http://www.healthygen.org/our-impact/news/aces-learning-institute-hot-topics-webinar>
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