use and recovery support, the strengthening of workforce capacity, the provision of detoxification services, advancement of home and community-based services, and the availability of affordable, supportive housing.

This plan proposes a comprehensive approach to address these gaps, encompassing systemic reform and practice improvements. It emphasizes the integration of practiceinformed programming and the incorporation of local and traditional knowledge into behavioral health strategies. "Strengthening the System II" seeks to establish longterm strategies that connect community-level initiatives with individual behavior change. Each Area of Focus is presented with equal importance and is not prioritized over another. The following sections will delve into each Area of Focus in detail.

ENDNOTES

- 2020-2024 Strengthening the System Plan. https://health.alaska.gov/ 1 Commissioner/Documents/MentalHealth/StrengtheningSystem-CompPlan_2020-24.pdf
- 2 For the purposes of this document, the term "mental health" includes forms of care accessed within all medical care, home and community-based services, and behavioral health.
- Alaska Statute 47.30.660. http://www.akleg.gov/basis/statutes.asp#47.30.660 3
- 2023 Alaska Scorecard. https://health.alaska.gov/Commissioner/Documents/ 4 MentalHealth/scorecard/2023-AlaskaScorecard.pdf
- Strengthening the System II" website. https://health.alaska.gov/ 5 Commissioner/Pages/MentalHealth/default.aspx

Area of Focus: Early Childhood and Youth





Programs serving young children and youth will promote resiliency, prevent and address trauma, and provide timely access to early intervention services. Programs serving families with young children and youth will provide connections to community, safe and secure options, and ongoing system coordination and development will be prioritized.

Objective 1.1:	Promote practice-informed comprehensive developmental screening efforts and early intervention services.
Objective 1.2:	Ensure accurate identification and support of social-emotional needs for children and their families, congruent with their cultural identification.
Objective 1.3:	Improve social determinants of health and strengthen family resiliency through a comprehensive framework to promote consideration of shared protection and risk factors.
Objective 1.4:	Behavioral health services are easily accessible, timely, and include care navigation and wraparound services.
Objective 1.5:	Youth and their caregivers are connected to their communities.
Objective 1.6:	Youth are safe and secure.
Objective 1.7:	Coordinated youth behavioral health systems work will continue to

improve the health and wellness of Alaska's young people.

Early childhood significantly influences an individual's long-term health and well-being. By supporting families and caregivers in their community, this critical period lays the groundwork for future physical, mental, and emotional development, shaping lifelong health trajectories. Adverse Childhood Experiences (ACEs), encompassing traumatic events like abuse, neglect, or household challenges such as witnessing violence or living with a caregiver battling substance misuse, mental illness, or incarceration, profoundly impact these developmental stages. Research consistently demonstrates a dose-response relationship between childhood adversity and increased risks of chronic diseases, mental health issues, and substance misuse in later life. Alarmingly, adults with six or more ACEs have a life expectancy shortened by 20 years.

The impact of ACEs extends beyond immediate health outcomes, leaving an imprint on genetic expression. Epigenetic studies¹ reveal that the environmental stresses from ACEs can modify gene expression, potentially heightening the susceptibility to health problems across generations and highlighting the concept of intergenerational trauma transmission. This phenomenon suggests that the effects of ACEs in parents or caregivers can influence their offspring's health outcomes.

Data from the Alaska Longitudinal Child Abuse and Neglect Linkage (ALCANLink) study connects pre-birth household challenges in Alaskan mothers to increased risks of child welfare allegations, elevated ACEs, and poor school readiness/performance in their children. Interestingly, ALCANLink data also reveals that reducing household challenges between pre-birth and early childhood can decrease the risk of child welfare allegations by nearly 30%. In contrast, increasing these challenges elevates the risk by 85%.

Nearly a decade ago, the Behavioral Risk Factor Surveillance System (BRFSS) measured ACEs in Alaska's adult population, highlighting their prevalence, societal costs, and significant health impacts. ALCANLink data has expanded this understanding by demonstrating the early accumulation of ACEs, often right from birth, and showing that mitigating adversities can significantly improve childhood outcomes. Notably, children born to mothers experiencing 4 or more life stressors in approximately the year before

Area of Focus

birth are 4.1 times as likely to be reported to child welfare than those born to mothers with no reported stressors.²

These findings underscore the paramount importance of prevention, early intervention, and support systems in mitigating the long-term health consequences of ACEs, fostering resilience, and promoting thriving individuals. The molecular alterations in gene regulation triggered by ACEs may perpetuate a cycle of trauma susceptibility, emphasizing the need for holistic approaches that address both individual and familial aspects. Research suggests that effective primary prevention strategies can yield a fiveto-one return on investment within five years.³

Research indicates that effective primary prevention strategies can yield significant returns on investment. In Alaska, building and strengthening parent support systems has shown potential in mitigating the impacts of childhood adversity. High-quality early childhood education is instrumental in reducing high-risk behaviors and their associated costs, contributing to economic development by nurturing a skilled, healthy, and reliable workforce. Crucial to these efforts is the support of caregivers and their integration into social systems within their communities. Leveraging cultural practices and existing familial and community support structures is vital in achieving these goals, underscoring the collective responsibility in shaping a healthier, more resilient future generation.

Childhood and adolescence are a time of significant growth and development as young people move toward adulthood. Key goals and transitions are being navigated by youth and the adults who support them. Patterns of behavior both positive and negative are built during these foundational years of body and brain development. Effective and timely supports and interventions allow youth to become healthy and resilient grownups who will lead our communities in the future. Youth is a time of great opportunity, and a time of potential danger as young Alaskans learn skills to manage their lives in increasingly complex situations.

Data from the Youth Risk Behavior Survey (YRBS) and other measures have shown growing risk for depression, substance misuse, and suicide risk for Alaskan youth. These challenges, often linked to trauma, mean that Alaskan schools, agencies, and

organizations must be ready and able to respond effectively with behavioral health supports for youth and their families. From prevention efforts to crisis response, the full range of services in the system need to be strengthened.

Alaskan high school students indicate fewer behavioral health risk factors when they have reported that they have teachers who care, have supportive adults in their lives, and feel that they matter in their communities. These protective factors are central to supporting positive youth behavioral health. Skills training and systemic support for adults serving youth is a key component to boost youth wellbeing and behavioral health.

Work is being done to support the youth behavioral health system across the state. These efforts, including better planning, coordination, and funding, are needed in a time of substantial stress for youth and caregivers. There is a need for building and maintaining levels of services that keep youth from being served in higher more disruptive and expensive levels of care if their needs can be met in lower levels of care. There are also opportunities to improve and expand specific and comprehensive prevention efforts as we continue to understand the impacts of trauma and resilience across generations.

Ultimately, positive and measurable results for youth, their caregivers, and communities are the aim for this work.

Objective 1.1: Promote practice-informed, comprehensive developmental screening efforts and early intervention services.

- well-child check-up for all Alaskan children.
- neurodevelopmental health.

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a. **Strategy:** Establish standards of care that support developmental screenings and make family education on developmental screenings a normal part of the

b. **Strategy:** Implement culturally responsive strategies to promote participation and use of practiced informed developmental monitoring and screening tools.

c. Strategy: Increase capacity for training healthcare providers on screening for

d. Strategy: Expand access to and availability of prenatal and early childhood home visitation services.

Objective 1.2: Ensure accurate identification and support of social-emotional needs for children and their family, congruent with their cultural identification.

- a. **Strategy:** Increase access to Infant & Early Childhood Mental Health services and consultation through an expanded, highly qualified, and credentialed workforce.
- b. Strategy: Provide training on social-emotional development and behavioral health to providers, caregivers, and educators serving children.

TRAUMA-INFORMED CARE:

Is a strengths-based framework that is grounded in an understanding of and responsiveness to the impact of trauma, that emphasizes physical, psychological, and emotional safety for both providers and survivors, and that creates opportunities for survivors to rebuild a sense of control and empowerment.

Substance Abuse and Mental Health Services Administration <u>— Trauma-Informed Care in</u> Behavioral Health Services⁴

- c. Strategy: Assist programs to have qualified staff who have training and understanding of various cultures.
- d. Strategy: Create resources, opportunities, and training for families related to system navigation, promoting resiliency, and connection to resources.
- e. Strategy: Expand Part C Early Intervention program⁵ service eligibility statewide to include more children with developmental delays or medical conditions commonly associated developmental or social emotional concerns.
- f. Strategy: Provide training and technical assistance on trauma-informed strategies for providers serving young children to assess children and their caregivers for service needs.
- g. Strategy: Ensure children and their families are supported in transition from early childhood services to next-level services through connection and coordination.

Objective 1.3: Improve social determinants of health and strengthen family resiliency through a comprehensive framework to promote consideration of shared protection and risk factors.

- ACEs and Positive Childhood Experiences.
- skills.
- c. Strategy: Provide training and technical assistance on practice-informed interventions for trauma-engaged providers and communities.
- d. Strategy: Promote trauma-informed practices through cross-departmental collaboration.
- e. Strategy: Promote and elevate family voice and partnership at the system of care level to inform change.
- f. **Strategy:** Provide referrals and connection for basic needs services as a standard for perinatal and pediatric care.
- g. Strategy: Support families through increasing access to quality early childhood care and friendly workplaces.
- for connection and system navigation.

Area of Focus

a. **Strategy:** Support thoughtful and culturally relevant community education on

b. Strategy: Increase access to family and peer support services that address resiliency by reducing early adversity, toxic stress, and childhood trauma, and by building protective relationship supports, cultural identity, and self-regulation

ADVERSE CHILDHOOD EXPERIENCES (ACES):

Traumatic events occurring before age 18; include all types of abuse and neglect, as well as parental mental illness, substance use, divorce, incarceration, and domestic violence.

<u>Centers for Disease Control</u> and Prevention — Adverse Childhood Experiences (ACEs)⁶

education programs and promote the creation of paid leave policies and family-

h. Strategy: Support families through increasing peer-based training and supports

Objective 1.4: Behavioral health services are accessible, timely, and include care navigation and wraparound services.

- a. **Strategy:** Support behavioral health service availability and alignment with partners such as Tribal health organizations for youth and caregivers as close to their homes, schools, and local communities as possible.
- b. Strategy: Implement practice-informed screening for behavioral health, suicide risk, and other issues such as Traumatic Brain Injury (TBI) across multiple settings and help youth get connected to responsive interventions.
- c. Strategy: Provide professionally informed services for all youth and caregivers regardless of disability status.
- d. Strategy: Use a two generational approach to services that include youth and caregivers.
- e. Strategy: Increase targeted wraparound services and care coordination for children and families with complex care needs.

Objective 1.5: Youth and their caregivers are connected to their communities.

- a. Strategy: Provide services that are conducted in trauma-engaged, strengthbased, and a culturally respectful approach that promote connections between people and communities.
- b. Strategy: Increase access to food security, caregiver respite, transportation, and housing as essential parts of treatment and prevention services and account for their inclusion in evaluation of services.
- c. Strategy: Provide support for youth through life transitions and teach skills that prepare them for being successful adults in their home communities.
- d. Strategy: Provide caregivers and youth access to navigators, care coordinators, or peer support to guide them through behavioral health and other supportive systems of care.

homes and communities to the maximum extent possible.

Objective 1.6: Youth are safe and secure.

- trauma in homes, schools, and communities.
- such as mental health, prevention of substance misuse, and suicide.
- c. Strategy: Provide youth and caregiver serving agencies and organizations resources to train and support staff in culturally informed traumaengaged practices and health education.
- d. Strategy: Support schools in adopting traumaengaged practices and comprehensive health education including mental health, substance misuse, and healthy and safe relationships.
- e. Strategy: Create and support an effective crisis response system that quickly stabilizes youth and returns them to their homes and communities.
- f. Strategy: Actively promote community resilience and protective factors through supporting local wellness activities that draw from the strengths of Alaskan communities and include local and state support.

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e. **Strategy:** Youth transitioning from institutions to the community receive appropriate and timely community-based services needed to remain in their

a. Strategy: Actively support youth and caregivers in ways that reduce childhood

b. Strategy: Reduce stigma through promoting healthy messaging about topics

STIGMA REDUCTION AND COMMUNITY **ENGAGEMENT:**

Promote a culture of understanding and support by actively working to reduce stigma surrounding mental health issues. Consider cultural context and integrate cultural sensitivity into care practices. Prioritize prevention in community settings.

Behavioral Health Roadmap Project for Alaska Youth⁷

Objective 1.7: Coordinated youth behavioral health systems work to improve the health and wellness of Alaska's young people.

- a. Strategy: Promote and support the Youth Risk Behavior Survey (YRBS) and other youth measures that provide statewide and local data options to guide prevention and service development, implementation, monitoring, and evaluation.
- b. **Strategy:** Ongoing planning, coordinating, and expanding the youth behavioral health system and other youth serving agencies (including state agencies) will be designed for accountability by the state as well as all other stakeholders.
- c. Strategy: Identify and implement use of additional funding opportunities and service delivery models such as telehealth for the behavioral health system and better coordination of existing resources.
- d. Strategy: Emphasize youth and caregivers' input by incentivizing their participation in all planning and evaluation efforts and identify and support those Alaskans most in need of care.

ENDNOTES

Epigenetic regulation of the glucocorticoid receptor in human brain 1 associates with childhood abuse — https://pubmed.ncbi.nlm.nih. gov/19234457/

Epigenetic vestiges of early developmental adversity: Childhood stress exposure and DNA methylation in adolescence — https://pubmed.ncbi.nlm. nih.gov/21883162/

Epigenetic programming by maternal behavior — https://pubmed.ncbi.nlm. nih.gov/15220929/

ENDNOTES

- 2
- 3
- 4 default/files/sma14-4816_litreview.pdf
- 5 https://sites.ed.gov/idea/regs/c
- 6
- 7 gov/Commissioner/Documents/bhrm/BHRM-Report.pdf

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Prebirth Household Challenges To Predict Adverse Childhood Experiences Score by Age 3 — https://publications.aap.org/pediatrics/article/146/5/ e20201303/75322/Prebirth-Household-Challenges-To-Predict-Adverse

Preventing child abuse and neglect : a technical package for policy, norm, and programmatic activities — https://stacks.cdc.gov/view/cdc/38864

Substance Abuse and Mental Health Services Administration — Trauma-Informed Care in Behavioral Health Services. https://store.samhsa.gov/sites/

Part C Early Intervention program. The official Program for Infants and Toddlers with Disabilities, Part C, is a federal grant program to assist states in providing a comprehensive system of early intervention services for infants and toddlers with or at risk for disabilities and their families.

Centers for Disease Control and Prevention — Adverse Childhood Experiences (ACEs). https://www.cdc.gov/aces/about/index.html

Behavioral Health Roadmap Project for Alaska Youth. https://health.alaska.