

Joe Torre: Defending Childhood Task Force along with my co-chair partner, Bob Listenbee. To make welcoming remarks on behalf of Wayne State University I want to introduce you to Michael Wright, vice president of marketing and communications and chief of staff. Mr. Wright.

Michael Wright: Good morning, ladies and gentlemen. On behalf of our president, **Allan Gilmour**, who could not be with us because he's ill today, welcome to Wayne State University. I would just like to welcome and acknowledge some of our distinguished guests. **Barbara McQuade** a US attorney for the eastern district who's becoming a regular on our campus, and we're glad to see you back Barbara. Mary Lou Leary, acting assistant attorney general. Tony West, acting assistant attorney general. Detroit Police Chief **Ralph Godbee**, thank you for being back on our campus. And I'd also like to acknowledge our police chief, Tony Holt. Tony, are you in the room? Tony's really hosting this event. He keeps our campus very safe in our community working with Police Chief Godbee.

Yesterday evening I was at a funeral home for a friend of mine who was brutally murdered last week. His wife was beaten and his 17 year old son was also beaten and they are clinging to life in the intensive care unit. Two witnesses to this horror were his other 17 year old son and his 8 year old daughter. And no matter how you try to think about this and to make sense of it, it doesn't make sense. It makes no sense. But what I kept coming back to, and what, as I talked to a lot of people last week, what they kept saying is, how will that young girl, 8 years old, and that 17 year old boy whose twin is in intensive care and not good condition, how will they heal? The press said they were unharmed. But they're not unharmed. They've got a lifetime to think about this and to wonder about this and to feel the pain of this.

And that came to me as I was thinking about today because it is such an important subject that you are dealing with today. We live in a culture that sometimes celebrates violence and that way too often accepts violence as that's the way things works. But we ought to be outraged. And when that rage subsides, we ought to talk about it. We have to think about it. And we have to try to find a way to fix it. That's why we are happy to welcome this task force and you ladies and gentlemen, because you're taking on an issue that is so important. Violence affects all of us, but most especially those children. And I saw them last night. And they were very game. They were smiling and talking to people. But it

hasn't even begun to – they haven't begun to understand what this means to them.

Universities are places that at their best bring smart people together to talk about tough issues. This is a tough issue for our entire country, for the world and especially for those children. So thank you all for being here. Thank you for taking on this tough issue. And god bless you in your efforts and good luck with this conference.

Joe Torre: Thank you, Mr. Wright.

[Clapping]

Thank you all for being here. And I want to thank, again, Wayne State University for hosting this hearing.

Robert Listenbee, Jr.: *[Inaudible Comment]*

Joe Torre: Oh, I'm sorry. I'm sorry. I didn't mean to step on your toes.

Barbara McQuade: No, no. Just waiting for you to introduce me, Joe.

[Laughter]

Joe Torre: Why don't you introduce yourself? How's that?

[Laughter]

Barbara McQuade: Good morning. My name's Barbara McQuade. I'm the US attorney for the eastern district of Michigan, and I'm so honored to be here and welcome all of you. And, Joe, we're happy to have you even though you're a former Yankee. Happy to have you here in Detroit. I understand you're throwing out the first pitch tonight. So bring them some luck, would ya? It's supposed to be our year, so bring them some luck.

We are so honored that the Department of Justice has brought here to Detroit its Defending Childhood Initiative. Violent crime is one of my top priorities as US attorney in the eastern district of Michigan. There is no issue that is more important to us and to this community. So we are very pleased and grateful that you have come to Detroit to listen to our stories. And I'm so grateful that associate attorney general Tony West has come to listen to the testimony today and assistant attorney general Mary Lou Leary has

come today and administrator Melody Haines has come. They care deeply about this issue. They want to be educated about this issue. They want to hear the real stories of people.

You know you can look at statistics and read the research and the data and sit in Washington all day, but until you come out into the community and really listen to the stories you don't begin to understand the depths of these problems. We heard stories yesterday during the testimony of issues about how a faith leader talked about how you don't see children in the neighborhood jumping rope and playing tag and playing ball the way children should be able to do because they don't feel safe in their community. We heard stories about children who had been failed by the justice system that is supposed to serve us. We heard about children who had been abused twice, first by their abusers and then by the system that is supposed to protect them. The stories are compelling and important, and we thank you for taking the time to come listen to them.

You know here in Detroit our challenges are particularly grave. Regrettably, of the ten most violent cities in America, we have four of them right here in the eastern district of Michigan. If you go up I75 from Detroit you will encounter – after you Detroit you will encounter Pontiac, Flint and Saginaw. And those four are four of the ten most dangerous cities in America. And too often we see the children are the victims of this violence or even the perpetrators of the violence, because as your research shows, when children are exposed to violence too often they then become themselves part of that cycle of violence because of the physical and emotional harm that they suffered as children. So we are so grateful that you are here to try to solve that problem.

We get out, a number of people in our office get out and talk to children in our community. We talk to high school students in Detroit. And so often we ask students, how many people in the room know somebody who's been shot. And every hand in the room goes up. It is absolutely sobering and no one should have to put up with that. No one should tolerate that.

I am as honored to be here with the dignitaries from Washington as I am to be here with our local leaders. One of them, Chief Ralph Godbee of the Detroit Police Department, an incredible leader who is doing wonderful things despite shrinking resources. And the person I am most proud to be here with today is **Lawnya Sherrod**, a young person from our community. You're gonna hear her story

today. She is a remarkable young woman who against all odds has turned her life around and is now part of the solution instead of part of the problem.

Thank you all so much for being here today, and thank you to the task force for your important work. We look forward to the fruits of your work and the report that you put out so that we can all work together toward solving these problems. Thank you.

[Clapping]

Joe Torre: Thank you very much. Thank you very much. And now acting administrator of OJJDP, Melody Haines.

Melody Haines: Thank you very much. Good morning. I just wanted to briefly introduce myself to the task force. I know all of you. But to introduce myself this morning as the new acting administrator of OJJDP. And to underscore how grateful we are for the time and commitment that you have put in this very important initiative. It is one of the top priorities of the Department of Justice and the Attorney General, I think as you can see by the presence of everybody from the Department of Justice. And we're anxious to support you as you move forward in your task. And I'll talk more with you tomorrow, answer questions that you may have and help you as you move forward.

But at this time I get to introduce one of my favorite people at the Department of Justice, Mary Lou Leary. Mary Lou is the assistant attorney general for the office – the acting assistant attorney general for the Office of Justice Programs. And Mary Lou and I are kindred spirits for many reasons. But probably because we both started the same way. She began as a prosecutor in Middlesex County in Boston where she started from the ground up. And then worked her way into the United States Attorney's Office in the District of Columbia where she was first assistant to then US Attorney Eric Holder. And that's where Mary Lou began her career working with children and victims. And has continued that through the years. Has served more than once as acting administrator of the Office of Justice Programs. Has a deep and passionate commitment for the work that you are doing and for the issues surrounding children exposed to violence. And so it's my pleasure to introduce Mary Lou Leary. Thank you.

[Clapping]

Mary Lou Leary: Thank you, Mel. I'm so happy to be here and to see all of you here, and the task force members as well, for this final hearing of the Defending Childhood task force. I want to thank the US attorney, Barbara McQuade, and Chief Godbee for hosting us. What a thrill to see the top federal law enforcement officer and the top local law enforcement officer making kids a priority. You don't often see that, and it's really great. And I'm delighted to join the acting associate attorney general, Tony West. I think Tony's presence here really underscores the Department of Justice's commitment to this issue. And I'll have the pleasure of introducing him in a few moments.

First, I want to thank you, Joe Torre and Bob Listenbee, so much for co-chairing this task force and each of you, the members of the task force. It's incredible dedication on your part. I know you all have big, big day jobs that keep you very busy and in a very short period of time you've just devoted an enormous amount of time and emotional and intellectual energy to this. I really thank you for that. And I think I speak for all of us, and I know I speak for the Attorney General when I express our gratitude to you.

It's very gratifying in general to see the level of support that the Defending Childhood Initiative has received. Even though crime rates may be down nationally, many communities, and in particular specific neighborhoods within those communities have actually seen an increase in violence. And it's so sad that much of that violence is perpetrated by and against our young people and our children. Even very, very young kids have become victims of gun and gang violence. And I can't tell you how many times I have heard the attorney general say, "This is unacceptable."

By now, we shouldn't be at all surprised that the kids who are exposed to this kind of violence, either as witnesses or as direct victims, are more likely to go on to become perpetrators themselves, as you heard from Barbara a few minutes ago. There's a growing body of research that confirms this link. And we also know that these kids who are exposed are much more likely to run into all kinds of problems in life as a result of that exposure. Problems in school, emotional issues, psychological issues, developmental issues. You know. You're here because you know that and because you care about that.

A child's first encounter with violence can be the beginning of a lifetime of trouble. That's the bad news. The good news is that violence and crime are not inevitable. Research and experience

both show us that if we address these problems holistically, violence will actually decrease and outcomes for kids can and will improve. This can only happen though when we stop looking at violence as solely a law enforcement, a criminal justice matter. We need to approach it as a community and a public health concern because that is, in fact, what it really is. In the Office of Justice Programs, we're working hard to address children's exposure to violence in this kind of holistic way. We're grounding our approach in evidence. We're supporting research and we're gathering data through tools, like the National Survey on Children's Exposure to Violence. If we want to address the problem, we have to understand the nuances of the problem.

We're also supporting demonstration programs to refine approaches to this difficult issue and to foster innovation in the solutions. We have eight project sites, and they are developing really innovative strategies to approach kids exposed to violence.

And finally, we are working to prevent at-risk kids from becoming perpetrators themselves. Closely aligned Defending Childhood is the National Forum to Prevent Youth Violence. And this is a White House led initiative to address youth and gang violence. It's based on a comprehensive strategy. It's data based. And Detroit is actually one of the forum sites. So Detroit has both Defending Childhood and the National Forum to Prevent Youth Violence working hand in hand. And it so exciting to see that and to see the synergy that's developing out of those two initiatives. It's also great to see Chief Godbee's strong leadership and the US attorney, Barbara McQuade, in that as well.

And finally, the White House initiative Strong Cities and Strong Communities has also been deployed in Detroit. And that is an initiative to transform the economic wellbeing of a community from the ground up. And we all know that that goes hand in hand with public safety.

So I'm very proud that the Office of Justice Programs is playing a central role in all of these initiatives. We do it through funding, of course, but more importantly, through training, through research, through information. And, in my view, the most important thing we do is we bring people together. Like this. Like this task force. Like all of you in this room today. Because our real strength lies in partnership across levels of government, across disciplines and extending in to the private sector with friends like Casey Programs fellows who have been incredibly supportive. Working together

we can make a difference. There is no problem that we cannot solve if we work together. If any of you have seen the musical *Wicked*, you know that song that Elphaba sings at the end and she sings *Unlimited*. Together we're unlimited. And that's how I feel about defending childhood.

So it's now my privilege to introduce our next speaker, Tony West, who is the acting associate attorney general for the Department of Justice. He's pretty new to this position having started in March, but he's a veteran of the Department of Justice. He was the assistant attorney general for the civil division earlier in this administration. And during the Clinton administration he served as a special assistant to the deputy attorney general, who was, at that time, Eric Holder. And also as an assistant US attorney where he gained a lot of experience with child victims. So this is a man who knows what he speaks of when he talks about kids and violence. His commitment matches his experience. And I think you can bet that he will continue to be a strong advocate for protecting children. Tony?

[Clapping]

Tony West:

Thank you and good morning. I am very mindful of the fact that I am the only thing that stands between you and the real work of this task force, so I will be brief. I want to thank Mary Lou for that very kind introduction. You know when it comes to this issue I think there is nobody who better combines this tenacity of a prosecutor with the dedicated persistence of an advocate than Mary Lou. And I think we're just all very fortunate to have your commitment. So thank you, Mary Lou.

Thank you also to Melody Haines. She's great energy, great leadership that she has brought to this effort. Thanks to Barbara McQuade. And, of course, Chief. Chief, it's good to see you, and thank you for being here.

Let me begin by – let me also just thank, you know we know the names of the members of the task force here and how impressive they are. But there are so many people in this audience who have worked for years in the Office of Justice Programs, for the Office on Violence Against Women, who have just done an incredible amount of work over the years that really has made this initiative real today. And I have to thank my colleagues from the Department of Justice for that work. And in particular, **Falin Wyrick** and Ana Martinez.

So let me begin by bringing greetings to you from the Attorney General of the United States, Eric Holder, who wanted me to be sure that I expressed his thanks and appreciation to this task force. You know I think we're fortunate to have an attorney general who truly gets it. He has made this issue a priority for what is, I think, the greatest and one of the largest law enforcement agencies in the world. And he is absolutely grateful for the dedication that people have shown to this issue and the fact that people have given so generously of their time.

Now when it comes to violence, we know that the challenge that our children face is absolutely clear. We know that over 60 percent, regardless of race, have been exposed to some form of violence, crime or abuse. Whether it's at home, at school, whether it's in our communities, on the streets, online, we know that our children are witnessing or experiencing intolerable levels of violence. And we also know that understanding the nature and extent of that violence, understanding that is absolutely effective to our ability to combat its effects. And that's why I am pleased to announce that with the support of the Centers for Disease Control and Prevention we're releasing new data in a bulletin entitled *Child and Youth Victimization Known to Police, School and Medical Authorities*. Now it's a bulletin with a very long name but with a very straightforward purpose. Basically what this bulletin tells us is when children report violence, what type of violence that is and to whom.

And what have we learned from this bulletin, from this work? We've learned that while children are reporting – more children are reporting violence to authorities, the report rates of victimization are higher than they were 20 years ago. Too many children continue to ensure the pain of victimization in silence. For example, while authorities knew about a majority of serious victimizations, including incidents of sexual abuse by adults, gang assaults and kidnappings, they were mostly unaware by other kinds of serious victimizations committed by peers, such as dating violence or rape by a peer.

We learn that in connection with episodes of children witnessing domestic violence, only about half of these episodes were known to school, medical or law enforcement authorities. And when it came to certain types of victims, victims like boys, Hispanic youth or youth from higher socioeconomic statuses, we learned that authorities were much less likely to know about them. The same is

true, perhaps unsurprisingly, of children who were the victims of a perpetrator of violence who happened to be a family member.

Now while these statistics are difficult to hear I think for anyone who is a child advocate, anyone who cares about children, anybody who's hugged a child, I think these are very important statistics for us to know and to internalize. They're important because they illuminate the areas where we need to do more work. Where we need to bridge the gaps that still exist between our partners in school, our partners in law enforcement, our partners in medicine. Because when we bridge those gaps, we ensure that resources get to the children who need it the most. And bridging those gaps, of course, is the ultimate goal, our collective goal for defending childhood.

So let me close by thanking all of you for the extraordinary dedication that you've demonstrated to this effort. As individuals, each of you make an important contribution to this work. This is an exceedingly impressive group. I had the pleasure of having dinner and meeting all of you last night. As individuals you are impressive. But over these last six months, each of you has amplified your personal commitment by coming together to work as a team. And like the tiny ripples of hope that Attorney General Robert Kennedy spoke of a generation ago that combine to create waves of change, you are making a true difference that will change our understandings, that will improve our responses and that will give renewed hope to young lives all across this country.

So thank you for lending your time and your voices to this effort. Thank you for your commitment to this cause. And thank all of you for being here today.

[Clapping]

Joe Torre:

Thank you, Tony. And I want to thank you and Mary Lou Leary, Melody Haines, Barbara McQuade and Michael Wright for opening this program on a very important note. And, again, thank all you for being here and thank you to Wayne State for hosting our hearing today.

We have been on a remarkable journey since November. We began our first meeting in Baltimore where Attorney General Holder gave us our charge. In Baltimore, we learned about the scope and the impact of children's exposure to violence in this country. We learned about what we know about this problem and

what we still need to find out. We also heard brave testimony from individuals who have experienced violence.

On to Albuquerque we learned about children's exposure to violence in rural and tribal communities. We heard stirring testimony on how the history of American Indian and Alaska native tribes has impacted children and family's lives today.

The past is truly still very much with us, and there is much we need to address. We also heard about the challenges of protecting and helping children in isolated and remote communities and the good work people are doing in all these places.

In Miami, we learned about children's exposure to violence in the community. Which is an issue that is on many minds in the country today and every day. We'll hear more about this today from people working against violence right here in Detroit. Today is our last hearing and an important part of our journey. Because today we're going to look at how do we move forward. How do we take what we know works and bring that to more of our children? How do we change the expectation of this country to safety and wellbeing for every child? And when I say every child, I don't just mean children in certain neighborhoods or children of certain race or ethnicity or children who have enough money. Every child deserves a safe home, a safe neighborhood and a safe school.

That is our charge. To listen to you. Hear your experiences, your recommendations and your wisdom about how we can make that happen. We're very privileged to be here today, and I want to thank you very much for having us.

Robert Listenbee, Jr.: Thank you, Joe. And 'd also like to thank US Attorney McQuade, Acting Assistant Attorney General for the Office of Justice Programs Mary Lou Leery, Acting Associate Attorney General Tony West and Acting Administrator for the Office of Juvenile Justice and Delinquency Prevention, Ms. Melody Haines. And I'd also like to thank those people here in Detroit and Wayne State who have welcomed us to this area to have our fourth and final hearing. I'd like to echo Joe's sentiments about the remarkable journey that we've been on since November. We've learned a great deal about the extent to which children have been exposed to violence. Some of this is brand new to us, particularly in our journeys out west in Albuquerque. We were just surprised, shocked in some ways about the things that we learned. We also

learned new information and collected additional testimony in Baltimore and Miami.

I grew up 20 miles north of Detroit in the town of Mount Clements, Michigan. And it's certainly an honor to come back to this area to be serving on this task force. We've learned, as we indicated before, that rural, urban and tribal communities across this country, including up in Alaska, have a great deal of violence and our children are suffering there. Research shows that more than 60 percent of our children have been exposed to violence over the last year, either directly or indirectly. You've heard initially when the US Attorney McQuade spoke of just asking for children or people to hold up their hands if they've known someone's been shot or they've experienced violence, that most of the people in the rooms where she's asked that question have held up their hands indicating that violence is very widespread. This is really something extraordinary.

This violence has far-reaching consequences. Children who are exposed to violence are more likely to become ensnared in a cycle of violence. Revenge follows the initial exposure to violence often. Exposure to violence also impacts the physical and mental health of our children and youth in ways that are extraordinary and that stay with them for a lifetime. And here in Detroit, for example, the homicide rate is 41 people for every 100,000, which is nearly 7 times the national average.

However, Detroit is not alone. In my adopted city of Philadelphia there is the same kind of problems of violence. One of my own clients was just murdered last week. And it was on the news and on the front pages of our newspapers. Violence is an epidemic in our country. One way or another we all pay for it. Our children pay. As adults we pay. No one is really left untouched.

But violence on this scale is not inevitable. We can do something about it. We must. We can no longer accept this violence as our new normal. Our children deserve safe homes, schools and communities. That's why, in our final hearing, we are highlighting solutions. Programs in communities across the country that have been successful at identifying those kids who are exposed to violence, finding ways to provide them with some sort of treatment and preventing the kind of violence that's happening to those children.

I'm honored to be co-chair of this task force and part of the extraordinary opportunity it represents. We'd like to thank the Attorney General for his initiative and the work that he's doing in bringing us together and allowing us this opportunity to pursue this endeavor. We are committed to making safety the norm in the lives of all of America's children. I speak for the entire task force when I say that we look forward to hearing today from those impacted by violence and from experts in the field about successful programs, partnerships and approaches for protecting the children in our community.

At this time, I'd like to allow the members of the task force to introduce themselves starting with Dr. Alicia Lieberman. And we're going to go from there back to my co-chair and colleague, Joe Torre, who's going to introduce the first panel. Dr. Lieberman.

Alicia Lieberman: Alicia Lieberman, University of California San Francisco.

Sharon Cooper: My name is Dr. Sharon Cooper. I'm a developmental and forensic pediatrician at the University of North Carolina at Chapel Hill and a consultant to the National Center for Missing and Exploited Children.

Steven Marans: I'm Steven Marans. I'm the director of the Childhood Violent Trauma Center at the Yale University School of Medicine.

Tony Taguba: I'm Tony Taguba, retired Army soldier.

Sarah Deer: Sarah Deer, assistant professor, William Mitchell College of Law, St. Paul, Minnesota.

Georgina Mendoza: Good morning. I'm Georgina Mendoza, community safety director for the city of Salinas, California.

Thea James: Good morning. I'm Thea James. I'm an emergency medicine physician at Boston –

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Joe Torre, Robert Listenbee, Jr., Alicia Lieberman, Sharon Cooper, Steven Marans, Tony Taguba, Sarah Deer, Georgina Mendoza, Thea James, Robert Macy, D. Tilton Durfee, Gregory Boyle, Jim McDonnell, Ralph Godbee, Lawnya Sherrod

- Thea James:* Medical Center in Boston and the director of the Violence Intervention Advocacy Program.
- Robert Macy:* Good morning. Dr. Robert Macy, director of the International Trauma Center in Boston and emergency medicine Harvard Medical School.
- D. Tilton Durfee:* Good morning. I'm Deanne Tilton Durfee, and I'm executive director of the Los Angeles County Interagency Council on child Abuse and Neglect. And I also chair the National Center on Child Fatality Review.
- Gregory Boyle:* Greg Boyle from Homeboy Industries in Los Angeles.
- Jim McDonnell:* Good morning. I'm Jim McConnell, chief of police for the city of Long Beach, California.
- Joe Torre:* Thank you very much. I'm going to introduce our first panelists. How Detroit is preventing youth violence. After both panelists have given us their testimony we will open up to questions from our task force.

Panelists will discuss their involvement with the National Forum on Youth Violence Prevention and other efforts they and their colleagues are involved in to stop youth violence in Detroit. First panel is Chief Ralph L. Godbee, Jr., police department, City of Detroit. Chief Godbee, a Detroit native, is the fortieth chief of police of the Detroit Police Department. Also on our panel Lawnya Sherrod, a youth representative National Forum on Youth Violence Prevention, founder of Glimpse of Hope and Youth Voice. Ms. Sherrod began her journey as a community organizer at the age of 14 when she co-founded Youth Voice, a group that strives to inspire youth to become community organizers. Ms. Sherrod recently started Glimpse of Hope where she works with ex-gang members, foster youth and teen mothers. A Glimpse of Hope helps ex-gang members find safe places to go when they want to leave the gang and helps foster youth achieve financial independence when they leave home and supports teen mothers to graduate from school so they can provide healthy, safe and productive futures for their children.

Would you please take your places? Right in front here, Chief. At this table. Sorry. Chief, if you would start for us, please.

Ralph Godbee:

Good morning, Mr. Chair to c-chair and this esteemed task force. It is certainly an honor to sit before you to talk about some of the things that has happened under the construct of the National Forum on Youth Violence Prevention. I bring you greetings on behalf of the Honorable Mayor Dave Bing of the City of Detroit. He is continuing to recover, and we ask that you keep him in your prayer. We expect him to be back to work in the next couple of weeks.

It is a daunting task that we have, but under the leadership of the Obama administration and particularly the interest that Attorney General Eric Holder has taken in this subject and being a part of the National Forum, it has been a real boon for the city of Detroit from the standpoint it has allowed us to really marshal services under the construct of our Youth Violence Prevention Initiative. And we've quantified our work into four very specific categories. And I'll go through the categories very quickly and talk about some of the examples of things that we're finding is getting us on a track that I think strategically and over time will lead to substantive reductions in youth violence. But also will be a remedy that we can replicate across the city out of three demonstration areas that we have chosen based on some very specific datasets.

Obviously the first and most important to us is a very strong crime prevention strategy where we engage the community constructively and our youth as stakeholders. I look forward to you hearing from Lawnya Sherrod and the work that she has done. What Mayor Bing found very early in his administration is he felt it very important and necessary for us to engage youth people as critical stakeholders. Their view from the ground, their experience and quite frankly, their wisdom has been so effective in helping us develop a strategy that not only is starting to net us some great results, but it is starting a different type of conversation relative to police and community relationships, youth engagement in a very substantive way where young people are now starting to encounter the police department in some nontraditional ways, in non-adversarial ways where we are not just showing up as enforcers of the law. But we are starting to be mentors again. We are starting to have constructive conversation with young people. As a matter of fact, they roped me into a basketball game. And till this day I don't understand that _____. How that happened. And I must say we won the game.

But much to my chagrin, one of my officers who played in the game, and I'm a different vintage and generation, as he took his shirt off had a very ornate tattoo. As chief of police I was taken a little aback. But I was proud that the officer participated. But Chief, what I didn't realize is that tattoo sparked a conversation with a young person who was formerly a gang member. And he connected with the police officer. He saw the police officer as a human being. And then we got a chance to take these same young people to a basketball game out at the Palace of Auburn Hills. And to see a police officer engaging with a young person in a very constructive conversation, cracking jokes, telling anecdotal stories, large fish stories about who's the best basketball player. But it started a different level of engagement relative to police community relations. Very proud of that work.

First construct, crime prevention. One of our constructs brought about a program called Safe Routes to School. It was a collaborative effort where we understood that the most important time of the day is a young person walking to and from school and then at the end of the day coming back home from school. And how we provide a mechanism for the community to get involved with that.

Out of that a few groups came to bear. A group called Brothers on Patrol, which took ownership of our Cody Rouge High School area. A group called Made Men, which is Men Affirming Discipline and Education. They took ownership over our Osborne constellation of schools. And they gathered a number of male volunteers, female volunteers, adults to watch our young people to and from school. Started to engage them in constructive conversations from a mentoring standpoint. Started to develop relationships to the extent they were able to give the police information of potential fights after school where we're able to intervene prior to them becoming full blown fighting situation or possibly a shooting.

We have had one of the safest school years in our recent history as a result of that collaborative effort. And we are generating different models that we hope to replicate this city wide in future iterations.

Second major component to what we're doing are intervention strategies. One of our key intervention strategy goes to another project relative to our young people called Operation Safe Passages. And under Operation Safe Passages we are looking at

alternatives to suspension and exclusion from schools. What we found was that we were exacerbating our own problem when young people were being kicked out of school. They were placed in unsupervised environments. Going to what we call skip homes. Engaging in sexual activity. Engaging in breaking and entering. Engaging in all kind of conduct that was unsupervised.

We have a very energetic talented Detroit police officer by the name of Officer Monica Evans who marshaled a number of resources. We picked a couple of schools. And as opposed to kicking these young people out of school, under a restorative practices model, started to teach the restorative practices to the young people. Teaching them restorative circles. And how to deal with unmitigated anger and resolve issues and constructive problem solving.

In one of our schools, the Osborne High School, which is in a very, very depressed challenged area, these young people are now – it has one of the lowest suspension rates of any school in the city. And the young people are now starting to take hold of their campus. They are leading restorative circles. They are mitigating some of the violence issues in the school by themselves. Which is a tremendous sea change relative to that area.

So the Safe Passage is where we're engaging young people in trying to help them understand their environment and deal with it in a more constructive way is really starting to pay off significantly. Within that also we've done truancy sweeps. Not with the intent of criminalizing the behavior of the young people but bringing them in, finding out why they're not coming to school and then providing appropriate social service resources necessary to support getting them ready to come to school.

What we found anecdotally were some young people were homeless. Some young people did not have running water or electricity. Their parents may have been incarcerated. A number of different social service issues where we were able to pair that young person with the appropriate resource and get them ready to go back to school. Some of them were just embarrassed of their circumstance and did not want to come to school in dirty clothes or not being able to take a shower or to be able to bathe appropriately or brush their teeth. Things that we take for granted every day were some of the reasons why these young people weren't coming to school.

Third component, which is one that we are very robust at, but we realize that we cannot arrest our way out of this problem. Suffice it to say though a strong enforcement response is a significant part of our strategy. And US Attorney Barbara McQuade has been a tremendous partner in the Detroit area relative to bringing resources to bear on an enforcement standpoint.

So I've been given up the wrap up signal like the Academy Awards. So I will stop there. But we look forward to any questions you may have about future strategies or things that we're implementing in the Detroit area.

Joe Torre: Thank you, Chief.

Gregory Boyle: [Inaudible Comment]

Ralph Godbee: I got the wrap up sign. So the other two – I ended enforcement. The last one is reentry, because we have to understand that there are a number of people that are coming back to our communities that if we don't deal with reentry we are going to keep the cycle of recidivism going and we will not make substantive change relative to crime reduction.

Joe Torre: Ms. Sherrod.

Lawnya Sherrod: Good morning. My name is Lawnya Sherrod, and I was born here in Detroit, Michigan. And my whole life I was in and out of the gang lifestyle. Basically where I was given a pat on the back like to steal drugs and sell drugs, to rob cars and everything. But my grandmother finally told me, you know she got sick of it. And she had told me she believed in me. And even if I'm too stupid to believe in myself. I didn't know what that meant at the time, but I knew she wasn't just gonna tell me anything. I didn't know that it had a strong meaning behind it.

By my high school year I had mastered stealing cars instead of mastering math. I had completed my ranks in the gang instead of completing my work in school. And it wasn't like I couldn't do it. It was just hard to keep hearing from my teachers that I was gonna die at a certain age or I wasn't gonna amount to anything. But yet these were the same people I sold drugs to. They never gave me a chance. They only looked at my background and saw me as another statistic.

I found myself giving up, not caring about anything. I felt like school wasn't for me. I knew I **can** get the grades, but what else could I do? I played sports, but that was a common thing for a high school student to do. I didn't see people coming into my school saying, you can do this, you can go to college, or nothing.

I started going to a program called **Alternative** for Girls. They helped me tell my story in a positive way from becoming a youth organizer, working on education and safety with so many programs that I learned from their CEOs that helps me in my life. From there I knew I wanted to do what I wanted to do. I started my own organization working with gang members, ex-gang members and foster youth in schools. Helping the youth understand you can come from nothing to something, something to nothing. Helping the gang members find a safe place to go after they leave the gang. Cause we all know you just can't get out of the gang and just basically be free. You have to do something for them.

The second thing that I really tried to focus on is helping them find a job, which is kind of not common because they still have that gang mentality, as I did myself. I also worked with foster youth. I helped foster youth basically find solutions where they can go to court and let the judges know that they need finances once they get out of the system. They need something that they can start on by theirself. I also worked with teen parents, helping them get back in school right along with the gang members and the foster youth.

Things like this that I wish I had in my life in my younger years, before I even started gang banging, or whatever you want to call it basically. I knew that I needed a place to go, somewhere to meet, somebody to lead me on the right path. And when I started going to Alternative for Girls, it was like a second home to me. My mom was in my life but my dad wasn't. He never really gave me the pat on the back that I wanted unless I bringing in the money in the house. Once I lost my brother it was a whole 'nother different life. A whole 'nother different life for me. My whole world came crashing down. I lost him to gun violence.

I found myself really _____ against the police because of the fact that it took them so long to come. And then they knew – like we knew who did it, but it was just a matter of time. _____
_____. Even though I could have retaliate, I knew that wasn't the best thing to do. It wouldn't do nothing but start a war.

The youth that I worked for, and I say I worked for because this is their group. Glimpse of Hope, I just came up with the name and they run it. They run it and they take care of it. I'm not nervous or scared that they will drag it into the ground. I've brought two of them here today just to let you know that you can basically say you have so much money or whatever the case may be, but once you step into these neighborhoods that they're from, you step in their house, just like Chief said, it's a whole 'nother world. They believe that it don't matter what hood you come from, how much money you have, you still can have a dream. But it only takes one person to have that dream _____ to accomplish that dream and that's theirself.

The fear that they have right now is basically what if I can't get a job. I'm in competition with most of their thoughts. It's hard for them to even get a job at McDonalds because one, you have to have a high school diploma or college degree now. So it's really hard. Or they even have a felony where they can't go ahead and just lie and say, "All right, I know they gonna catch it. I have to check this box." Once they check that box it's done for. So right now like, as you see, like I wear this hat because of the fact that this young man once told me, like he felt comfortable with a hat on. Like he can hide his face. And I wear it everywhere I go. Anywhere I go. And I told him, you know I would never forget him.

Not too long ago, a week ago he actually passed away. And I felt like it was my fault because I didn't grab him. I didn't grab him and say, "You can do better." But I know like he had to learn. He wanted to be the gangster, the top dog or whatever. I knew he had to learn before he can actually say I want out. But I said all this today to help everyone understand, just like how my youth told me, from something to nothing, from something to something, you always can be yourself and be someone.

Joe Torre: Thank you very much. Very, very –

[Clapping]

Joe Torre: Questions?

Georgina Mendoza: Thank you both very much for that incredible testimony, and it's great to see you again. We were just in Washington not too long ago for the National Forum. Ms. Sherrod, just your testimony, the work that you do it requires so much energy, passion, commitment,

courage, and you have all of that in strides. So I'm very impressed by all the work that you do. Now what is it exactly that captured your attention, that made you even want to go to Alternative for Girls? And, you know is there any other – what were the factors, the characteristics that you liked about it and that other such youth programs can have so that other youth could take advantage of those really positive programs?

Lawnya Sherrod: To be honest, the first time one of my family members was going there. And I had anger management problem. My mother told me like, oh, you're gonna go. So it was like I was kind of forced. But once I got into the program and started seeing everything that they was doing for us. Like basically organizing. And that was one of my passions. Cause gangs are organized. They're organized. They're well organized. And they actually gave me a chance to tell my story the way I wanted to and not just look at my background and say, "Well, you did this at a certain age and you did that." It was just they believed in me. They gave me that one push that I needed and I ran with it. Like it was just walking to that place where you know that everyone you can just hug. I was still actually in the gang when I went into Alternative for Girls. They probably knew. I knew they knew cause I still carried my colors and everything. They didn't judge me at all. So that was one thing that most organizations should have.

And then eventually I became – I sit on they board now. So now that I sit on their board it's just like they actually really watched me from the age of 14 till now. So it's just a proud moment.

Joe Torre: _____ if I could, yeah.

Joe Torre: Chief, congratulations on the programs and the success you've had here, and thank you for sharing those with us. If you were gonna look at this task force and our ability to make say one or two concrete recommendations we move forward, from your perspective, what would they be?

Ralph Godbee: I think the youth engagement and youth as stakeholders. A number of different task forces that we've encountered, I continue to hear the youth say, "How do we have a voice in what's going on?" I think what's been dynamic for us is the significant youth involvement we've had in our initiative as serious stakeholders at the table. As Lawnya indicated, her experience with Alternatives for Girls was the fact that she had a voice and she had one that was unfiltered and one that was taken seriously. In a lot of instances

we plan around our youth and for our youth but we don't substantively engage them in the conversation. So to the extent that this body can bring that to fruition I think it would bring great value to all of us.

Joe Torre: Sharon.

Sharon Cooper: Ms. Sherrod, and thank you, both of you so much for everything that you are helping us with. We've been trying to make sure we pay attention to all different types of victimization. And one of the types of victimization that we haven't heard as much about are sex trafficking of minors. Can you tell us whether or not this is an initiative that Alternative for Girls or other groups are trying to work on?

Lawnya Sherrod: Um. Yes, it is. There is a outreach program that they have. I'm trying to think of the name of it. Where they go out and they pass out protection and everything to the young ladies. So, yes.

Sharon Cooper: Do you find that the pimps are very powerful and that it's hard for them to escape?

Lawnya Sherrod: Um. I say yes and no. You can tell like some of the girls are doing it because one, they need money for whatever reason really. But and then like it's like a trend. It became common. It's stuck in their head. But I believe they can get out if they want to. It's just that one person that need to take they hand and take them and say, "Let's go." So it's just ____ _____.

Joe Torre: Before, Steven, you're next. But we are scheduled for a break after this panel. But we're gonna skip the break. We can't skip the break. I guess we're not gonna skip the break. Do I have it now? We're not gonna skip the break.

Female: *[Inaudible Comment]*

Joe Torre: One more question? I think two more. This is pretty good here. Steven.

Steven Marans: Thank you very much. It is a real pleasure and honor to be in Detroit. Detroit has had tough times, but it's also the example for our country that in tough times we step up. And the leadership here is quite extraordinary. So Chief, I'm gonna ask you to step out of your chief of police role in Detroit and be every police chief in America. And I'm gonna push –

Ralph Godbee: I feel like that sometimes too.

Steven Marans: Most chiefs do, Chief. And I'm gonna follow on from my colleague, chief from California. If you were to have a wish list specifically that allowed you three wishes as a commander of a major police department, you described wonderful programs, but there are the hour to hour calls for service, there are issues in which in order to carry out the concepts and programs, what do you need? You're the chief of every department in the country.

Ralph Godbee: I think first of all you need a strategy. Because if enforcement is the only tool you have in your tool box, it goes to the adage of the only tool you have in your toolbox is a hammer, everything becomes a nail. So we have to have a multidisciplinary approach towards attacking youth violence. One, youth as perpetrators and secondly, youth as victims. If we don't take a multidisciplinary approach and it's just enforcement only, we have not done anything substantively to change the environment that contributes to some of the problems.

From a law enforcement standpoint, it is tempting for us to just ask for more police officers. And trust me, I would love to have more. But I think we ought to be more mature from a law enforcement standpoint to understand that there are environmental factors that contribute to these issues, whether it be sexual abuse, whether it be domestic violence, whether it be child abuse. We have definitive research that talks about how Head Start programs and prenatal care all are environmental factors that contribute to lessening the likelihood of youth violence. Yet we tend to always want to bolster our bottom line of boots on the ground.

So we have to be mature as law enforcement and not be selfish, for lack of a better term, to just add police officers to the ground. So a very coordinated strategy. The four prongs that I think are ____ prevention, intervention, enforcement and reentry. As a minimal basis for attacking your problem.

Steven Marans: Thank you, Chief.

Antonio Taguba: First of all, thanks very much, Lawnya and Chief for your testimony. Just a comment. ____ thank you, and I highly commend you for taking the bull by the horns so to speak. I think the task force would remember we had another youth in Albuquerque in the hearings and his name was **Colorados Mungas**,

who took the bulls by the horn. He's a **Mescalero** Apache. Mobilized his classmates to help deal with the program.

Chief, I really like that five star insignia you have on your color. I haven't seen that since my days in the Army. But it's really very, very impressive. And most police chiefs just have four stars, but you have five. So I applaud you on that. Great promotion by the way.

Ralph Godbee: I don't know what I did to deserve it.

Antonio Taguba: Well, you're wearing it so I guess it's condition of employment, right? My question to you, of course, is, you know from all of the programs that you have that you've indicated, which is admirable, and I think it's very important. And law enforcement is just not law enforcement. Because in the military we share a common affinity, you might say competency, that we just go beyond defending our nation. We also have to do nation building. And in your part of the world you're doing community building as part of your competency. So with all those programs that you've indicated to us, have you had the opportunity to share, collaborate and somewhat think about what your other police chiefs in the other communities and perhaps borrowing your models and making sure that the other three communities that Barbara McQuade said could probably somewhat spread you might say? Propagate itself into a successful series of programs to help our youth.

Ralph Godbee: Absolutely. Under US Attorney McQuade's leadership, obviously the enforcement components have been replicated in the same areas. Governor Schneider has also acknowledged the issues relative to those four cities. And from a best practices standpoint we're looking at how we implement those things not only in Detroit, which is the largest city in the state of Michigan, but also to scale in Pontiac, Saginaw and Flint. Because, again, substantive reduction goes beyond just the enforcement capacity. We tend to get trapped into looking at quantifying our work based on how many arrests we make and looking at FBI uniformed crime reporting statistics as our only metric. But there are many more metrics that need to look at to not only quantify our work from a violence reduction standpoint but also qualify it to really change substantively the quality of life on the ground.

Very anecdotally and very shortly, when I was a youngster, I looked forward to going outside and staying inside was a

punishment. There has been a shift in that paradigm for our young people to where they are afraid to go outside and staying in is now a reward. And we lock in with Playstation, Facebook and Twitter. So the work that you do in defending childhood I think will help change that operationally on the ground.

Joe Torre:

I want to thank you, Chief, for your innovative and upbeat approach to what you're doing. Detroit's very lucky to have you. And Lawnya, bless you. I mean you used your past to help the future of others. Not only yourself. And thank your grandmother for us too. Okay? We're gonna take a 15 minute break and we'll be back with more testimony. Thank you.

[Clapping]

Robert Listenbee, Jr.: Our next panel will focus on looking to leaders. National experts to share models of success. Panelists will describe successful models for addressing children's exposure to violence. These models include a program to empower and guide fathers, an innovative trauma treatment model, strategies to overhaul troubled juvenile justice systems and a juvenile justice system that has restructured social services with a focus on healing. Dr. Sandra Bloom, associate professor, health management and policy, co-director of the Center for Nonviolence and Social Justice at Drexel University School of Public Health and distinguished fellow Andres Child Center.

From 1980 to 2001, Dr. Bloom served as founder and executive director of the Sanctuary Programs, inpatient psychiatric programs for treatment of trauma related emotional disorders. In partnership with Andrews Children's Center, Dr. Bloom has established a training institute, the Sanctuary Leadership Development Institute, to train a wide variety of programs in the Sanctuary model. Sanctuary model is now being applied in residential treatment programs for children, domestic violence shelters, group homes and homeless shelters, and is being used in other settings as a method of organizational development.

Hector Sanchez-Flores, executive director of the National Compadres Network. Mr. Sanchez Flores is an expert on male involvement and parent engagement program development, as well as the development of locally based assessment measures that lead to programmatic improvements. His National Compadres Network and the National Latino Fatherhood Family Institute are launching the California Fatherhood Initiative to focus on fathers' varied

Joe Torre, Robert Listenbee, Jr., Alicia Lieberman, Sharon Cooper, Steven Marans, Tony Taguba, Sarah Deer, Georgina Mendoza, Thea James, Robert Macy, D. Tilton Durfee, Gregory Boyle, Jim McDonnell, Ralph Godbee, Lawnya Sherrod

needs and to build the capacity of services for families to include fathers.

Tondari Sturdivant, director of the Wayne County Child and Family Services. In 2010, Mr. Sturdivant was appointed Director of Children and Family Services –

[End of Audio]

Robert Listenbee, Jr.: The department consists of the following divisions – juvenile community corrections, alternative workforce, Michigan State University Extension and the Warrant Enforcement Bureau Unit of the Wayne County Sheriff Office. Prior to his appointment as director, Mr. Sturdivant served as deputy director of the department and as director of the Michigan State Police. He served in the police department for 28 years, rising from the rank of colonel. Mr. Sturdivant has also served as state director of emergency management and as Michigan’s homeland security director.

Mr. **Vincent Schiraldi**, a commissioner of New York City Department of Probation. Mr. Schiraldi was appointed commissioner of the New York City Department of Probation in 2010 bringing nearly 30 years of experience working with troubled youth and juvenile justice programs to New York City. As commissioner, Mr. Schiraldi came to New York from Washington, DC as the district’s first ever director of the Department of Youth Rehabilitation Services. Mr. Schiraldi launched major reforms to the juvenile justice system in the nation’s capital. He also founded the nonprofit organizations Center on Juvenile and Criminal Justice and the Justice Policy Institute.

We’d like to welcome all of you to Wayne State University, and we start off with Dr. Bloom in terms of testimony. We’re going to take testimony from all the parties, and then we’ll ask questions from the task force. Thank you very much. Dr. Bloom.

Sandra Bloom: Thank you very much. Is this okay? You can hear. Well, thank you very much for inviting me. I feel very honored to be here. And I applaud the work that you’re doing. I am a psychiatrist by background, and I spent 20 years treating adults who had been abused as kids. The problems are really not about kids, it’s about the grownups in our society. We developed the Sanctuary model as a reaction to what we saw as sanctuary trauma in that many of our people had experienced. And that means expecting a protective helping environment and finding only more trauma. And we discovered very excitingly that a lot of the science about trauma was emerging. And we discovered that even grownups could get better. They could heal from very complex terrible overwhelming experiences. But to do that, and I’m gonna use a metaphor, they had learned things. Their software programs, the things that they had learned, were really maladaptive. And we had to help them learn how to be safe, how to manage their emotions, how to deal with loss, how to figure out what kind of losses they

were gonna have to go through in order to change. And they couldn't do any of that unless they had some vision of healing. Of what they wanted to be, what could change.

But by 2001 the healthcare environment, the mental healthcare environment had radically changed, and we really had to close our program. We couldn't continue to deliver services. But meantime I had started consulting to pretty much every part of our social services, from juvenile justice, the welfare system, the shelter system and, of course, child and adult mental health programs. And what I saw was that sanctuary trauma was everywhere. That trying to help people heal who have suffered complex trauma demands enormous emotional labor on the part of the staff. And the more stressed the staff were and the more stressed the organizations became, the harder it was to deliver those services.

So we developed a model of changing an organization. Changing – we had seen that in our clients their operating system, their basic beliefs and values was altered. And so we had to immerse them into environments that have emerged as the sanctuary commitments. And it's a commitment to nonviolence, a commitment to emotional intelligence, commitment to social learning, to open communication, to social responsibility, to democracy and to growth and change.

And as I started working with all these other organizations I saw that was a problem for them too. Their organizational cultures were stressed. And as a result, they could not respond to what science was informing us about the problems related to complex trauma. And they could not really respond to the stresses that they were encountering, organizations losing funding, losing their ability to really do what they had been trained to do.

And the sanctuary model developed as a way of addressing that. It is an organized method for changing an organizational culture. It is now evidence supported, particularly as it applies to residential treatment of children. It's a developmentally grounded trauma informed whole organizational approach. So we work with everyone in an organization. Direct care and indirect care staff. And they have to follow a methodology for how they are gonna change their organizational culture to really become trauma informed. So it's a very participatory process.

And there are basically three things organizations have to do. They have to decide what they're already doing that works, and

they definitely should go on doing it. And what they really have to eliminate because it is not compatible with the sanctuary operating system. And then they have to decide what do they have to do to really respond to the needs of complex clients that they've never done before. That requires a lot of innovation and creativity. And in our world there has been very little emphasis, even in the literature, on creating organizations that can respond creatively and innovatively to bring about change. We don't have a history of being like Google.

And that is really where we need to go. We really need to have organizations that are able to tolerate the risk of change, because all change involves risk. And that are able to engineer significant habit change in the clients, in the staff and in their organization as a whole, a process we call parallel process. And I will stop.

[Laughter]

Robert Listenbee, Jr.: Mr. Sanchez-Flores.

H. Sanchez-Flores: Good morning. I want to thank the co-chairs of the Attorney General's Task Force on Children Exposed to Violence and Mr. Robert Listenbee and Mr. Joe Torre and the rest of the committee members for inviting me to participate in this important hearing. I know that the list of invitees is really long, and I'm really humbled to be representing some of the innovative things that we're working to achieve in the local community.

My name is Hector Sanchez-Flores, and I am the son of **Galvencio** and Selena Sanchez who came to the United States from Mexico and they started their family and raised two daughters and two sons. I'm married to Lucy **Ramo** Sanchez and have an eight year old son named Diego and a five year old daughter named Sophia. I represent these people every day, and they are the reason why this work is personally and professionally important to me.

I have the honor of serving as the executive director of the National Compadres Network and its training and technical institute, the National Latino Fatherhood and Family Institute. For over 20 years NCN or the National Compadres Network, has promoted the idea that fathers and men should be expected to be a positive and loving presence in the lives of their children. The principles that NCN works to highlight and asks men to adopt are very simple. They were very known to my father. They were very real for my grandfather. That is to adopt the seven principles that

state that we be men of our word. That we have a sense of responsibility for our own wellbeing and of others in our circle. That we reject any form of abuse, whether it be physical, emotional, mental or spiritual to ourselves and to other people. And that we take time to reflect and pray and include ceremony and introspection in our lives so that we can figure out what role we have in this greater thing called life in the world. And that we live these things like a mirror and reflect it to other people so that other people could see that there is something there. And that we work to live these values honestly and with love and without burden.

When we read in this context, in this hearing these principles, they seem kind of novel. Irrespective of our cultural history and our lineage, these are core values that men carry many years ago. And unfortunately for many of our young people they are hidden and unseen. The chaotic lives that our families live within sometimes get so busy that returning to something that is present and very core to our values seem to be, you know something that is a luxury. It's a luxury we can no longer afford.

We work to reroute an attachment to the positive attributes of manhood that many have lost. We do this through **circulos**, through circles, where men can collectively become and work to become noble men in the eyes of their children. Because the children are looking at us. They are looking toward us. They are looking for that reflection of positiveness. And if we achieve that, we give them a leg up, an advantage that perhaps some other young people don't have.

We understand profoundly that for many men this definition of manhood seems unattainable because they don't perceive that it is within them. We remind them that this is inherent in who we are as Latino men, as native men, and frequently other men of color. The men that do this and achieve this do this for no glory. We do this just simply because it's the right thing to do. Contemporary mainstream research acknowledges and reaffirms what many communities of colors have known for generations. That race and poverty are inextricably twined here in the US. Latinos disproportionately experience high rates of poverty and discriminated related disparities, including low educational attainment, sub livable wage employment, victimization or death from violence. And we have disproportionate contact with the criminal justice system and, **relatingly**, incarceration.

While there are universal facts and commonalities in the root causes of this disparity amongst all people of color, we each have our own unique history and cultural prism that guides a path to healing. To be sure, Latinos and African Americans share some important common elements in history, in disparities and life outcomes, but failure to move research and investigations from a prescriptive strategy that goes from beyond generalities and universalities to specifics, what works for African Americans, what works for Native Americans, what works for Latinos, is something that we will work. And not doing so will make us fall short of our outcomes.

I want to share one anecdotal experience that had. Which, although it's one, reflects many. I once was working with a young man who I call David. Who when we were talking about intimate partner violence could not believe that I had never struck my wife. It was an experience in his life that he just could not fathom that a man would never do. And he probed very strongly to get me to admit that I had. And then when I wouldn't and I explained to him that I had never, he pressed me and said that if he were to meet Lucy, my wife, how would – he said how would I feel if he knew I was gonna ask her that question.

That is the state of some of the young people in our community. They cannot fathom a reality where physical violence, both in the community and on the streets or within their home, is unreal. That's why we do the work that we do.

Robert Listenbee, Jr.: Thank you, Mr. Sanchez-Flores. Mr. Sturdivant.

Tondari Sturdivant: Good morning. As the former director of the Michigan Department State Police, let me welcome you to the state of Michigan. As a young kid that is born and raised in the city of Detroit, let me welcome you to the city of Detroit. As an employee of Wayne County, on behalf of the CEO of Wayne County, Robert A. Ficano, let me welcome you to Wayne County. And as an alumni of this great university, Wayne State University, let me welcome you to Wayne State.

Robert Listenbee, Jr.: We feel very welcomed.

[Laughter]

Tondari Sturdivant: It's critical that this task force considers the impact of trauma for children and adolescents that become involved in the juvenile

justice system. Children become involved in our juvenile justice system for a variety of reasons. One occurring factor is exposure to some sort of adversity in their life. Repetitive exposure to violence is intensively stressful and can be toxic to the normal development of a kid. In Wayne County, 75 percent of youth entering the justice system present one or more diagnosable mental health conditions and a third are assessed as seriously emotionally disturbed. Over 30 percent of the juvenile justice youth have extensive prior involvement in our child welfare system due to substantial abuse and neglect.

Youth exposed to trauma present a wide range of symptoms and behaviors. And this moment in their development, constructive support and safe support environment is essential to their recovery. In reforming its juvenile justice system here in Wayne County, Wayne County has emphasized a role of support as a pivotal to rehabilitation and recovery from trauma, substance abuse and other related issues. A significant part of my now 4 minutes and 30 seconds of testimony will be in the description in the Wayne County's innovative juvenile justice system and the model has proven to be responsive to children in a wide variety of adversaries and risk and needs.

One of my challenges will be to condense all the things that I have to say in the time limit, and I will meet our time limit, cause I know I'll be touched if I don't. A decade ago Wayne County launched a comprehensive community based reform of juvenile justice. It placed the decentralization of juvenile justice. In short, I'm gonna tell you basically why Wayne County reformed. And it was reformed because the state of Michigan about 1996 no longer funding. I've heard a lot of different things, but I haven't heard funding. And I'm gonna talk about that later, perhaps when you ask questions.

But as a result of chronic problems in the juvenile system, the state of Michigan says, "Wayne County, perhaps you want to take over the juvenile justice system in Wayne County." We're the only county in the state that did that. And as a result of that, I'm here to talk about some marvelous successes and how we did that.

While I can't take credit because I was not a part of the department when that happened, some of the architects are right here in the room today. There was vast media coverage of the juvenile justice system in chaos, which was reported in the newspapers. The model that Wayne County went to was instead of installing a range

of individual treatment programs for juveniles, the county adapted to realign it in a reinvestment strategy.

We transferred the responsibility and authority of all mandated juvenile justice services to Wayne County. We reduced the unnecessary high cost of institutional placements and reinvested those services and programs that diverted and prevented penetration to the court system. And what we've found is that some kids do stupid kid tricks and should not ever be involved in the juvenile justice system. And the best way not to get them involved in the juvenile justice system is to actually divert them and provide services before they actually formally involved in the system.

We engaged in some tremendous partnerships with the third circuit court of Wayne County, with the Wayne County prosecutor's office, with law enforcement and with private care institutions. We developed MOUs that described everybody's authority in this particular system that there was no gray areas.

We started with a transformation of the county's juvenile justice system, which is compromised of new organizations. We actually privatized the system. We have a juvenile assessment center, which is the entry point of all youth in Wayne County that comes into the juvenile assessment center is assessed and then prescribed certain services. We have five outstanding care management organizations, which are lead by five outstanding executive directors that have tremendous respect.

Just quickly, some of the results of this transformation. We went from a recidivism rate from 38 to 56 percent in 1999 to today, 17.2 percent. We reduced in-care or youth that are housed in our system from about 2,000 to 600. The state of Michigan had many, many kids housed all over the continental United States, and we reduced all of that to bringing the care back home. In essence, we found that juveniles are served better when they're served in their own particular communities. That is my testimony for now and would be more than welcome to answer any questions when it's appropriate.

Robert Listenbee, Jr.: Thank you very much. Mr. Schiraldi.

Vincent Schiraldi: Thank you both for inviting me. The whole committee for allowing me to testify today. This has really been terrific to listen to my colleagues and to the other speakers so far. I was just trying

to imagine myself in your shoes, I think my head would be about to burst about all the stuff you heard.

So Mr. Sturdivant talked a little about the reduction in the number of kids they're locking up in favor of community based programs here. I'm gonna talk about how New York City modeled ourselves after what they did in Wayne County. But before I get there I want to talk to you about why that's important to a group that's impaneled around defending childhood. And that is because we set up a juvenile justice system to protect the public from the kids, but also to protect the kids from each other, right? And it's doing neither particularly well right now. And I think we really need to take a leaf out of Hippocrates' famous oath and first do no harm. And we're not achieving that goal right now.

There's about 81,000 kids lay their heads down to sleep every night in juvenile facilities around the country. Good news is that's down about a third from what it had been over the previous decades. Bad news is it's still about the size of the adolescent populations of many middle sized American cities. Even if those numbers weren't cause for alarm, what's more deeply troubling is the widespread abuse and neglect that are fostered upon the kids in state care when we are, in essence, **in local parentis**. Right, we're legally acting as their parents. Thirty-two states since 1990, about two-thirds of all states, have had documented abusive situations since 1990.

In these cases, the youth facilities themselves displayed a systematic failure to protect youth from serious physical psychological harm in forms of violence from staff or other youth, sexual assaults and excessive use of isolation and restraints. A landmark report by the Justice Policy Institute did a scan of all the research in this area and found a variety of ills which would come as no surprise to anybody that's spent any time around these kinds of facilities.

As far as mental health went, not only is there a mental health issue for the kids, but for a lot of them, the onset of their mental illness occurs in the facilities. The conditions make them crazy. There's institutionalized kids commit suicide disproportionately high. Suffer long term – which is, you got to think about that. They're surrounded by staff trying to make them mentally healthy and to prevent them from committing suicide and yet they are being made crazy and committing suicide at higher rates than kids in the general population. They also suffer long term employment

disabilities and educational disruptions, profound educational disruptions. And they're, as I said, frequently abused physically and sexually.

An Associated Press story in 2008 found 13,000 claims of abuse had been reported in these facilities from 2004 to 2007. The Federal Bureau of Justice statistics released the first ever national study on sexual abuse in youth correctional facilities and found a shocking 12 percent of the kids reporting that they had been victimized sexually during the prior year by staff or other youth. That's one out of eight kids. And almost half of them report fear of being assaulted while they're confined. Very, very high numbers.

My experience in DC brought these kinds of conditions to life. I was the twentieth director of my department in 19 years. And that was 19 year period during which there was a lawsuit and a consent decree. By the time I got there, the plaintiffs had made a motion to put the whole department into receivership. The inspector general had just done a report that found rats and cockroaches were crawling in the kids at night. They would take their shirts off and stuff them around the toilets to keep the rats and cockroaches from crawling up.

Abuse of youth and excessive use of isolation was rampant. There was cases where staff would abuse the kids in front of dozens of witnesses cause they wanted to send a message about who was in control of the facility. Kids were actually testing positive for marijuana more frequently after they'd been locked up for a month than they did on the way into the facility. Which meant that it was actually easier to score pot in my facility than on the streets of the District of Columbia. And I got to tell ya, that's a pretty low bar to jump over.

So following the – similar conditions existed in New York when I got there. Following an excessive restraint by staff a kid died. Human Rights Watch did an investigation. The Justice Department sued. And they signed a consent decree. And that's where the Wayne County story comes to bear. The major and the governor got together. The governor's now transferred responsibility for all the kids from the state system to the local system, to New York City's system where we're setting up a continuum of community based programs, day treatment, wrap around services, evidence based practices, to keep the kids out of care. And then for the ones that do go, it's a fully privatized

system. Nonprofit organizations are gonna run small rehabilitative programs right in the city as opposed to up in the Adirondacks and the Finger Lakes which are hours away from where the families were. And so I'll give you my four strategies, cause I got the hi sign here and I don't want to get the tap, that I would recommend.

First of all, I think we should just all look at this as we would want – what would you want for your own kid if they run afoul with the law. Right? These kids aren't little angels. They don't need to be hugged and told to go forth and sin no more. They really do need help. But what they don't need is to be re-traumatized, as Dr. Bloom had mentioned. So we should only put the kids in the facilities that are really a danger to public safety and have committed serious offenses or at high risk.

We can and should implement a broad continuum of high quality services, supervision and dispositional positions to treat the kids in their own homes whenever that's possible. We should expand court diversion as Mr. Sturdivant talked about, and reduce correctional placements. And we should replace these large distant facilities, right, that no good comes out of these prison like facilities, we should stick a fork in this model and say it's done. It's had 170 year run. It's never proven itself to be worth anything but a bucket of warm spit, and we should stop putting kids in places like this. Bring them home into small rehabilitative and secure facilities when they need to be confined. Thank you.

Robert Listenbee, Jr.: Thank you very much to the panelists. We'll now take questions from the task force members.

[Clapping]

Dr. Marans.

Steven Marans: This is really for all the panelists. We have heard over and over again the horror stories. And we've also heard the stories of hope. And I want to start with Dr. Bloom who has been a leader on the hope front. And I want to push just on one part of our testimony. You said in 2001 we shut down. And I'm encouraged to hear about models that are moving in the right direction being adopted. But we are really facing a – we're facing a public health tragedy and an American tragedy, and I'd like to hear from you all what's getting in our way. When we have the opportunities for treatments, effective treatments, effective intervention strategies, what is stopping us and what do we need to do to move us ahead?

Sandra Bloom: Money. Funding is – you know funding – in Sanctuary, funding is like food. It's basic safety for organizations. So without adequate funding everything goes. Proper orientation, proper training, proper supervision. Everything that makes an organization work properly starts to be deleted because there's just no money to actually provide the services. And when we got to the point that we just could not do it anymore without somebody dying, that's when we closed our program.

It's now, you know there are many residentially that are still trying their best to do, under very adverse conditions, good treatment. So we have good results from sanctuary. But it can only go so far when there's no money to really – and there's plenty of money in this country. But we haven't made kids a priority and we haven't made treatment a priority. We need to go in the direction we've been going about evidence based practices to show that what we do works. We have accountability in that. But we can't even do that research if there's not funding to prove what really is effective.

Steven Marans: So I beg your pardon, but I'm gonna push this a little bit and ask you all to be diagnosticians. Because sometimes it's as if beliefs trump facts. So that even when we have evidence, I mean I don't need to repeat what you just said, it's accurate. I'm asking you to help us think about why is it that we are so able to be blind – I'm pushing you, Dr. Bloom, because you've spelled out the problem with money. I'm asking why have we stopped funding successful work.

Sandra Bloom: I do have an opinion about that. I really think there's a profound lack of vision in our culture for what kind of culture we want to have. So, you know we look – I take the organizational level because I can manage that. But really you can apply all of the same ideas to our whole culture. We have a profoundly divided culture. And we're not doing anything about it. We have no vision of what it would be to really be able to work together, produce healthy children, have a society that can pay its bills and still thrive. There is just a profound lack of vision, and that's what we need.

H. Sanchez-Flores: I will add that in the field that I work in, which is engaging fathers and young men in a positive way, that I think that funding streams are divergent. Historically we look at the health and wellbeing of young children and mothers and building the capacity and strengths there. And that's one funding stream. And then we look

at what is available to counterbalance that. And unfortunately in California there was very little that was positive. And in fact, the one small thing that was positive was the male involvement program that was doing this work in communities throughout California. That was blue lined in one evening by the governor's staff and later signed by him, by Governor Schwarzenegger. So we look at we do not have a unified vision of what a healthy family looks like. What supports are needed for young people. We've done the cost benefit analysis. We know that doing this saves money. But at a time of political stressors, even that argument fails to move anything. And that, to me, is a will. That is not about our intervention. This is about a will to do something that is right. As opposed to purchasing, repurchasing that metaphor that you used that I'm gonna repeat, a warm bucket of spit.

Tondari Sturdivant: If I could just piggyback on that as well. I think it goes to leadership. And when I think of leadership I think of a united or a vision and a will to see that vision come through. And then the framework built around it for reform. When I speak of funding, I speak in terms of overcoming obstacles to change. I think my esteemed colleague said something has been going 170 years. Well, if we've been funding something for long periods of time, you will find a lot of resistance in funding something new. Because what you're doing is not reinventing new money but changing your money system. And that will cause a tremendous amount of leadership, a tremendous amount of pushback. But I think it comes down to leadership and then overcoming the barriers and obstacles to funding. I think in terms of, and I'm not a mental health specialist by no stretch of the imagination. But I do know that kids need help. And I do know there's monies available. And I know that there are some rules and regulations that do not allow certain money streams to help those particular kids. And some of those things will have to be looked at, examined and changed because they've been involved for many, many years, and probably for a lot of legitimate reasons. But I think in terms of helping kids the money is there, you have to change our funding streams and overcome the obstacles to change.

[End of Audio]

Vincent Schiraldi: I'm gonna echo some of that. It is amazing no matter how bad the status quo is what a force it is to be reckoned with. I've only been in government seven years now. I was in nonprofits before this. So it was sort of stunning to me. I thought when I got into the system everybody was gonna be like, yeah, let's change it. Un uh. So in New York, for example, every time we've tried to close a facility or the state has, there's been enormous resistance from the unions and the local elected officials in the small towns from which these facilities are located. You know you can't blame them. There's nothing left. There's no good union jobs in these places, in the Adirondacks and the Finger Lakes. There's a couple of hotels you can sort of change the beds or you can have this union job at the facility. So there was a law passed that said you have give a year's notice to closing a facility.

So one of the first things Governor Cuomo, to his credit, did, literally within weeks of his election, was he flew up to a facility in the Adirondacks and toured it. It was empty of kids and fully staffed. Right. And then he decried this. And that was the momentum. And then Mayor Bloomberg did that two weeks later. And then right after that they told us, all right, we're gonna cut this deal. Get to work. And so that got to the leadership that you talked about.

But the kids are relatively powerful. They tend to be kids of color. I did not have one white kid committed to me in five years that I ran the system in DC. Every kid was African American and Latino. They tend to be poor kids of color, right. And the forces is on the other side are, you know they're economically well endowed and they have connections to the political base. So it's a really unfair fight. Right now 43 states have reduced their institutional populations since 2001. And I think part of that is that the crisis created by the economic crisis has allowed a different kind of conversation. So your report actually comes at an opportune time because it's not just about the money. No question that Mayor Bloomberg and Governor Cuomo believed in this. They believed this was the right thing to do. Oh, by the way, it also saves money in a hard economic time. That's gonna bring them a couple extra votes. But it wasn't – most governors are not waking up and going to sleep thinking about the juvenile justice budget. It's not even a rounding error for them.

So the fact that it's the right thing to do and if it gets sort of the imprimatur of a group like this, that will help push it even further along. And, again, we don't want to jailbreak here. We don't

want kids just running around the streets with no supervision or the dangerous kids to be running around the streets at all. But we also don't want them abused and neglected in these facilities at a high cost both economically and public safety wise.

Steven Marans: Thank you.

Tondari Sturdivant: If I can just – one last comment in this. And that is a short sentence. We have the philosophy that you should incarcerate kids that we're afraid of not that you're mad at.

Antonio Taguba: Thea, go ahead.

Thea James: Thank you to all of you for your testimony this morning. I have a question for Dr. Bloom. Dr. Bloom, there are multiple definitions for trauma informed care. And I'd like to know if you could help us, help the task force with a definition of trauma informed care in the context of what we are charged to do. In developing recommendations and a report for defending children against exposure to violence.

Sandra Bloom: Well, I think that it encompasses several dimensions. So there has to be trauma specific treatment to really treat the kids. But trauma specific treatment, I think a lot of us have discovered will not flourish unless there's a medium within which it can really be incorporated into ongoing processes. So there's no way to avoid that it has to be a change in value system and that it's a value system that has to be articulated. So that's what we've had to take on in Sanctuary is to say, you know I was taught as a therapist that you're supposed to keep values free at transactions and you weren't really supposed to bring your values into the therapy room. That's nonsense. It's impossible, in the first place, and the what has happened to children and adults in this country has occurred within a context. A social and economic context. Which just cannot be denied. And, therefore, in order to have a trauma informed culture of any sort, you have to be willing to say what the values are that back that up.

For us, it means a commitment to nonviolence. Cause we're in love with violence in this country. And we have to do something about that. We're on a dead end course literally. It means a commitment to having organizations where people are learning things all the time and taking the risks associated with change. It means that you have to have emotionally intelligent people in the environment who can deal with each other and deal with the very

complex problems we have to encounter. It means you have to be able to communicate among systems and between systems because we live in these silos where the right hand doesn't talk to the left hand.

And you have to – it has to be participatory. Top down and reengineering change doesn't work very well. It's been proven not to work very well. You have to have the top down support. But it has to also come bottom up. There has – democracy is really what we're talking about. You have to have participatory environments. And you have to teach people how to do that. Because we don't necessarily practice what we preach. And you have to have a commitment to social responsibility. That's a commitment to justice and fair play and what it means and what is right and wrong. And you have to have a commitment to growth and change. To that whole issue of vision and where are we going and what are we gonna have to give up in order to get there.

That, to me, is what we mean by trauma informed culture. That it's really clearly values based and we're able to stand behind those values and what we mean by them.

Robert Listenbee, Jr.: For task force members, we have about another six minutes, so keep that in mind as you ask questions. Father Boyle.

Gregory Boyle: Yeah, again, Dr. Bloom. I work in a trauma informed community, and so I just want some hope in terms of working with adults. In your written testimony you talk a little bit about it's not about changing minds it's really about changing brains. And I think that's very helpful. And you talk about free will and how free really are we. But what's the hope of healing adults in terms of attachment repair and getting them to a place? Because we talk about breaking the cycle, and the truth is we will not be able to protect, heal children and give them a place where they can thrive unless we are, in fact, healing adults who have really been impacted and stressed by complex trauma. And what's the prognosis. Give us hope. Give me hope.

Sandra Bloom: Well, I can talk from my personal experience. You know that's what we did –

Gregory Boyle: Apart from organizational culture, but in an adult who's.

Sandra Bloom: We treated thousands of adults who had been horribly abused as kids and had social health, mental health and juvenile justice issues

in their background. And that's the presenting problems. And not everybody, but enough got better that made me passionate about this change and how it has to change. So grownups too can change. We often have more stimulation to change because our lives are such a mess that if somebody offers us an opportunity, a helping hand to say, "All right, I've got something you can do and this is what it's gonna take. This is what the path to recovery looks like. This is what you're going to encounter along the way. These are the challenges that you're gonna have to meet. And I'm gonna be there with you to support you and you're gonna have a group of people to really support and help you do that," even grownups can change some very bad habits. I know that for a fact cause I saw it happen so many times.

Robert Listenbee, Jr.: Dr. Lieberman, one second. I skipped over the general earlier. I'll come back to him and then you're next, okay?

Antonio Taguba: Ladies first, please.

Alicia Lieberman: Thank you very much, General. One common denominator in the work that each of you does, and thank you for your wonderful testimony, is that the children that you are working with come from families, parents that have not had the resources to raise them in healthy ways. And in my own work I'm constantly impressed by the resistance of systems to include fathers, the fear of fathers and the effort to look into the cozy mother/child relationship when, in fact, these children are also very hungry for access to their fathers and where the perception of their fathers has been as violent men to be scared of and to be fended off. Do you have recommendations that we can use about how to incorporate, and I know that Mr. Sanchez-Flores devotes his life to this, I would like to use his work as a platform, but also to go beyond it to think of how can we make it into a broader awareness.

H. Sanchez-Flores: There are many examples, Dr. Lieberman, of families that are separated by systems because of a circumstance of either violence or substance use and abuse and whatnot. But when you get the system out of it, you'll find that children want contact with those fathers. You oftentimes want – you hear mothers saying, "My child needs the influence and involvement in a positive way of my father." And nobody wants to work with him because he's the perpetrator. He's to be feared.

In the Circulo de Hombres, when we bring men together that are working on healing from the past traumatic experience, they begin

to recognize something that they know at their core. That they actually influence their children profoundly. And the question is how. And in those circles where they get acknowledged, where their trauma is addressed and recognized, where they get a chance to decide what they want to move towards, do they want to remain stuck? With the support of other men who maybe are one step ahead or maybe they look back and they see men that are one step behind, they seem themselves in this process of movement.

Within that context you begin to see change. Profound change. Men say, "I am nothing like my father, yet I love my father." And when you begin to understand that the motivation that it takes for that you are humbled. You are profoundly humbled. Because these men begin to do things and learn things to become better fathers, to understand the developmental stage of their child, to understand how this relationship with that child's mother is profoundly important. But that is done in the cocoon of El Circulo. Where men begin to practice using words that perhaps they've never heard before. Genuine love. Genuine commitment to something that is greater than themselves. And when they begin to practice and that gets reinforced, incredible transformation happens in the family.

I think that many of us that have had really different reflections of our fathers still learn something from those men who grow out of the circumstances. And I am humbled always to see the men that are referred or some to the circulo because of the pain that exists in their lives. And then they open that pain. And then they decide what they're going to do with that pain. And are they going to be destructive forces in their families and communities or are they going to be the catalyst for healing and positive movement? And when you see that happen, it becomes contagious. People want that. Because the negative reflection, the teachings from that other world of maladaptive behaviors are ever present in our communities. And it's our job to highlight those. And you see them and people will say men like that don't exist in our community. Hogwash. You go into every community and you see men doing, they're quietly going about their business, providing for their families as best they can with limited resources but being really positive, motivating forces in their family. And when we go, when I go and I say, "I want to thank you for that, I want to give you an award," you know their response usually is? Why should I receive an award for doing what all men should be doing? The humility lies within them. And we sit there and I walk away having learned profound things from those men. And yet they

don't realize the remarkable force they are in the broader community. And our goal is to bring the men that are doing it just as a nature and course of behavior, and bringing them to the men that have never seen that and seeing the marriage of those ideas. And we believe when that happens in a really healing space, you're humbled by the change.

Robert Listenbee, Jr.: Our final question will be from General Taguba.

Antonio Taguba: Okay. We'll do it in a congressional setting. A congressional minute to speak. From all the hearings we've had, and I really want to thank you for your input. It was very helpful in our task to do a final report. We've heard several themes. Typically that comes to mind is resources, which we've already discussed. Resources in time and money, space and time and whatever have you. The other is lack of public awareness and access of facilities. But one of the things that's kind lingering out there in my mind is this outreach. We tend to look at the government and cities and blah, blah, blah in terms of monies and legislative. Have you actually engaged the public/private sector? You've got the Ford Foundations of the world. You've got the Gates Foundations of the world. You got the auto industry here. You've got Clinton's Global Initiative. You know if we're looking for resources and understanding, why don't we go to the other half of the world and make these great executives understand that you're living in our community and perhaps you out to contribute money, time, whatever the case may be, in understanding what you're marketing and help us out with our national dilemma. Have you done that?

Sandra Bloom: Well, not the big guys. I'll be glad to go to the big guys, but we haven't done the big. But I can tell you something that we've done recently in Philadelphia. Philadelphia has made a lot of initiatives to introduce trauma informed care into our service delivery system. And I had to do a presentation, and I did a timeline from the 1990s to now what had emerged. And a lot has emerged that kind of surprised me. So we put together. One of our small local nonprofits put together a meeting of all of our local funders. And in Philadelphia we're lucky enough to have a lot of local funders. And I went through what they had all been a part of to show them that there's a common stream here. And that something very exciting has happened. And they have agreed to get together to kind of brainstorm together about what can they do as local funders to give this a boost. To move this trauma informed approach faster and in a more coherent thoughtful way. So it's a beginning.

Tondari Sturdivant: General, since you posed the question in a form of a congressional hearing. My answer is, yes, senator. But our whole system is based upon the privatization that you just heard. What we deal with, we deal with a private sector. And we, as the government, says, "This is the outcomes we want. This is the amount of resources or funding that we have. But you have to be able to give us this particular outcome." And then they're able to structure their services based upon the particular outcome that we demand. And yes, we do a lot of different involvement with a lot of different organizations. I see on one of the panels you're gonna have the Skillman Organization later this afternoon. And we work very closely with the organization as well.

H. Sanchez-Flores: I'll only add that, you know I want to add that is that these problems are large in scope. And sometimes when big organizations and big foundations with much resources, they want to organize their funding. And they organize it within the systems. And then the grassroots or the communities are the final recipients of those resources. And I would say that it's important to do all of that structural work but accelerate the resources getting into the community. Because ultimately the outcomes should be the ones that the community wants. Not what the funding stream is doing. Because trust me, the community wants probably more in terms of outcomes than any funding source will ever demand. And I think that sometimes there's that level of distress. And how do you quantify men in a community that are just doing the right thing?

Vincent Schiraldi: In both DC and New York the foundations had a huge role. In DC it was kind of interesting. They didn't just give us money, but they also came to the table because, as I said, as soon as you started stirring the status quo pot, you know people started picking fights. And the foundations were a real sort of high brow, especially when they brought their board members. Now just the program officers but the people who were on the board and testified before city council saying, "No, we need to stay the course. We understand there's gonna be bumps along the road." They were really a major force for change.

And then in New York – see, every time you go from one system to another you simultaneously run both systems for a little while. And so you really need the money to get the bridge. So in New York they're helping fund, there's a lot of big foundations in New York. One of which is run by this guy named Bloomberg, so that kind of helps, right? So they helped with the bridge so we can start

Joe Torre, Robert Listenbee, Jr., Alicia Lieberman, Sharon Cooper, Steven Marans, Tony Taguba, Sarah Deer, Georgina Mendoza, Thea James, Robert Macy, D. Tilton Durfee, Gregory Boyle, Jim McDonnell, Sandra Bloom, Hector Sanchez-Flores, Tondari Sturdivant, Vincent Schiraldi

a lot of the programs before we get the state money. And then the Casey Foundation, which is UPS money, and they do a lot of child welfare and delinquency work. They didn't just give us money, but they actually gave us expertise. They came in and helped us plan which are the high risk kids, what kind of services should we provide to them? Which ones have to be in placement. Which ones could be in programs and what are the kinds of programs. So philanthropy had a huge role in helping us get where we were. And they can be a little more nimble sometimes than government can.

Robert Listenbee, Jr.: We'd like to thank the panelists for this wonderful testimony here today. Let's acknowledge them with a round of applause.

[Clapping]

[End of Audio]

Joe Torre:

We are going to seat our next panel and move right along. The Investing in Prevention Building on Success. This panel discussed the cost of childhood exposure to violence and the benefit of investing in prevention and early identification and intervention activities. Our first panelist, Dr. **Alex Piquero**, Ph.D., **Ashbel** Smith Professor in the Program in Criminology in the School of Economic, Political, and Policy Sciences at the University of Texas at Dallas. Professor Piquero has published over 220 peer-reviewed articles in the area of criminal careers, crime prevention, criminological theory, and quantitative research methods and has collaborated on several books. Professor Piquero has given Congressional testimony on evidence based crime prevention practices in the area of early family/parent training programs and has provided counsel and support to several local, state, national and international criminal justice agencies.

Vincent Felitti, M.D., president and CEO of California Institutes of Preventive Medicine, a clinical professor of Medicine at University of California San Diego, and fellow of The American College of Physicians. Dr. Felitti is a noted researcher on the negative impacts of adverse childhood experiences on adults. He is one of the principal investigators of the Adverse Childhood Experiences Study, a long term, in-depth analysis of over 18,000 adults that matches current health status against eight categories of adverse childhood experiences. Findings to date have revealed a powerful relationship between our emotional experiences as children and our physical and mental health as adults, as well as a strong link with the major causes of adult mortality in the United States.

Neil Guterman, Ph.D., **Mose** and Sylvia Firestone professor, director of the Beatrice Cummings Mayer Program in Violence Prevention, and Dean of the School of Social Service Administration, University of Chicago. Dean Guterman's scholarly interests are concerned with services targeting children and violence, particularly child abuse and neglect prevention and children's exposure to violence outside the home. He currently directs three studies examining the effectiveness of strategies to prevent child abuse and neglect. Dean Guterman is the author of *Stopping Child Maltreatment Before It Starts: Emerging Horizons in Early Home Visitation Services* and is co-editing a second book on child abuse prevention.

We're gonna go away from the norm a little bit just to facilitate Dr. Piquero's schedule. So he will be the first panelist, and we will go right to questions before the other two panelists proceed. Doctor.

Alex Piquero:

Thank you. Having just come from London I was told to mind the gap and today I'm told to mind the tap. So thank you very much for the task force for inviting me here today. My testimony this morning's divided into three parts. First, I will discuss the issue of early childhood prevention. Following, I will review the effectiveness of these programs at reducing delinquency and improving life success in various domains. And then I will discuss and emphasize the cost savings of these programs.

Early childhood prevention programs have been advanced as an important prevention strategy. The prevention of behavioral problems is one of the many objectives of early childhood prevention, but it also includes other possible longer term benefits, such as increased educational attainment, reduced delinquency, improved employment and prospects, reduced alcohol and drug abuse, reduced child abuse and neglect, as well as reduced teenage pregnancy.

Second, there is a vast array of these early childhood prevention efforts, such as home visitation programs, parent training programs and daycare/school based programs. One set of programs that I wish to bring to your attention involves those around early family/parent training. These strategies focus on parent education, promotion of maternal health related behavior, cognitive stimulation of a child, promotion of a child's cognitive development and physical health, the linking of mothers, fathers and families with social and health services during pregnancy and throughout the first few years of a child's life.

Another set of efforts include those aimed at parent training. These programs attempt to strength parents' competencies in monitoring and appropriately disciplining their child's behavior, emphasize the importance of promoting the child's social and emotional competence and its effect on reducing the occurrence of the childhood behavior problems.

Thus, these programs seek as a whole to affect children's behavior primarily by facilitating learning control over their impulsive tendencies. In that way, both parents and children are the focus of the prevention strategy together.

Our meta analyses of 55 **methodologically** rigorous studies indicates as a whole early family/parent training is an effective intervention for reducing behavior problems during young – for

your children during adolescence and into adulthood. These effects are far ranging. They infiltrate employment, interpersonal relationships, educational prospects and overall health well into the fourth decade of life.

The cost savings of these prevention programs are very important to understand. How much they cost and how much they benefit for us as people who pay the taxes to support these programs. I'm gonna highlight the cost savings of two particular types of programs. The first one are nurse home parenting programs and the second involves **peri** preschool. They're somewhat costly at the front end, but they yield much reward over the long term.

In short, the benefits and savings to taxpayers when costs per youth are calculated and compared are especially high. They are especially high when we target these programs at youth who are at the most risk, because that's where you're gonna get the most outcomes and benefits later on down the road. In general, these early childhood prevention programs have a benefit cost ratio of at least two to one and up to four to one. And a similar set of benefit cost emerges for other types of early family/parent training programs. Thus, for every \$1.00 you spend in these programs it saves society or produces to society \$4.00 in return.

The key is not necessarily to focus on the specific dollar figure in terms of the benefit realized because these figures will vary wildly. However, what you need to know is that the benefits accrue all of the time for all of these programs and they're very clear without one exception.

In conclusion, we are at a critical moment in our nation's history with respect to record low rates of crime and violence, yet this is no time for complacency as we make important recommendations and funding decisions that will affect children now and the rest of us later when these children progress in their education and enter employment and interpersonal relationships in adulthood. It is important that we double these efforts on early childhood prevention initiatives right now.

As a whole, these initiatives are geared around early family/parent training programs. They represent a coalition of strategies that are extremely effective, have universal support, are very cost effective, do no harm but do quite a bit of good in children's lives throughout their lives and many spheres of their lives. Such programs are commonplace. The entire province of Quebec does this, cities in

Europe such as Paris and Dublin do this. In fact, the state of Colorado is doing this as well with respect to investing in early family/parent training for their kids.

These initiatives hold great promise for success among children exposed to early childhood prevention efforts and, in turn, for all of us as well. That the benefits of early childhood prevention initiatives far exceed their cost and expenditures is an added bonus. The old Quaker state adage still holds true. Pay me now or pay me later. The scientific evidence strongly suggests that we should pay now to benefit later. Thank you.

Joe Torre: Questions for Dr. Piquero.

Robert Macy: Dr. Piquero, thank you, wonderful. If you were sitting before an undivided elected at the federal level and they were asking for three policy suggestions to back up what you've just testified what would you ask them to do?

Alex Piquero: Well, you gave me no constraint of resources. So.

Robert Macy: Let's do this. Let's acknowledge this. Which you may want to speak about. I'm already prompting the witness here. But you say it costs more upfront, which we know is true. That's evidence –

Alex Piquero: Sure.

Robert Macy: But you end up with a much better outcome. So we will give you enough resources to start it properly. But then what do we do?

Alex Piquero: I would do this for all parents, mothers and/or fathers, whoever is taking care of the pregnant child. And I would start from the first – and proceed into the first three years of life. So you're dealing with things that deal with the parents. So you're helping them navigate when babies cry what does that mean. It can mean 200 different things. Right? The Yankees may have won last night. I'm in Texas, Rangers lost.

Robert Macy: The Red Sox may have won last night.

Alex Piquero: So the baby cries for lots of different reasons. All right. And so parents need to be taught what those kinds of reasons are. So you need to invest in the mother, father, whatever the correct unit is, as well as integrating them into employment possibilities down the road. Then you have to influence the child's development, social,

emotional, cognitive, and then deal with the people around them as well who help parent that little child. So there's a short term infusion of money. And that money will progress in terms of outcomes later on down the road.

So I would make a program like this mandatory, which is what they do in a lot of places around the country. Because there are no known negative consequences in over 60 experimental studies in the world.

Robert Macy: So invest in zero to three at –

Alex Piquero: Invest in the money now for the realization down the road. Yes. Thanks.

Joe Torre: You have a question? Okay.

D Tilton Durfee: Really quickly. Any of these home visiting programs better than others? Do you believe any of these home visiting programs, zero to three, are better than others or more effective?

Alex Piquero: There is a range of them. Some have been better implemented than others. Some have been better evaluated than others. But there are a couple that stand out. And my colleague over here knows them very, very well and can speak to – will probably speak to them in greater detail. But there is variation. But as a whole, they're all effective. Some are just a little bit more effective than others.

Joe Torre: Okay. Thank you – oh.

Alicia Lieberman: I might push you a bit.

Alex Piquero: Push away.

Alicia Lieberman: I'm an early childhood person, and I totally agree with your recommendation. At the same time, I'm reminded of the findings of the Department of Justice showing that when families make less than a certain amount per year there is a 20 percent incidence of domestic violence. When families make more than a certain amount there is a 2 percent incidence of domestic violence. And yet I feel as if we keep having different figures that don't speak to each other. And clearly, mothers and babies need support. But at the same time, fathers are absent from a lot of those programs and fathers often don't have the opportunity to support their families.

So how would you create a bridge between those figures so that the early childhood programs become not just mother/child but become cohesive programs that include economic sufficiency?

Alex Piquero:

Excellent question. Most of the early programs in this area were geared toward mothers only. And they've only recently started to expand to a larger unit. The issue is what that larger unit should be. Who should it include? And as people cycle in and out during pregnancy and the first years of the kid's life, how do we appropriately target that set of persons. The way I think the initiative should work is that you make it available for the kid, the mother and whoever else needs to have that. So I would make it at the household level rather than – cause you may not be in that kid's life for six months and she may be in that kid's life for four months. So I would just make it for the household.

And so, again, resources aren't an option. I would do it that way. Because if you want something to work you have to pay. Nothing's free. So you got to pay for the product. And the product works. So it's a very simple decision. It's a matter of where you want to put those monies. I'd put it at the household level. Because you'll get ancillary benefits that are not just crime and delinquency and violence but better health outcomes, better education outcomes. And we all win when that happens. It all generates productive societal members. That's what we want.

Joe Torre:

No more questions. Dr. Piquero, thank you very much for your time. It was very informative. Dr. Felitti.

Vincent Felitti:

Thank you. You've invited me here to speak about the Adverse Childhood Experiences or ACE study. A study of 17 ½ thousand late middle aged middle class San Diegans who were members of Kaiser Permanente, a collaborative study between Kaiser Permanente and San Diego and the Centers for Disease Control. Matching adult health risks, disease burden, social function, longevity against ten categories of adverse childhood experience that ordinarily are never recognized because it would be impolite routinely to inquire. It would certainly be uncomfortable for us routinely to inquire.

When one does that, which was the essence of the ACE study, one finds that there is a powerful relationship between these ten categories, that I'll define in a moment, and what happens to people later in their lives. The ten categories were selected because we stumbled into them inadvertently in operating a major

obesity program. They are three categories of abuse, contact sexual abuse during childhood or adolescence, major physical abuse, not spanking, during childhood or adolescence, major emotional abuse, basically recurrent humiliation. Two categories of neglect, emotional neglect and physical neglect. And five categories of major household dysfunction. Growing up in a home where someone in the household was an alcoholic or a drug user, where one of the household members was imprisoned during one's childhood or adolescence, where mother was treated violently, where someone was mentally ill, chronically depressed, suicidal or institutionalized, some household member and where both biological parents were not present during childhood or adolescence.

And these ten categories were unexpectedly common in a middle class population, although one would have routinely to inquire to determine that. For instance, one in four women acknowledged a history of contact sexual abuse during childhood. One in six men acknowledged a history of contact sexual abuse during childhood. One in 19 grew up in a household where one of the members of that household was imprisoned during their childhood. One in seven grew up in a home where mother was treated violently, etcetera.

So in the ACE study we first documented that these ten categories of adverse childhood experiences are unexpectedly common in a general middle class population, although well concealed, have a profound effect on adult health, wellbeing and life expectancy and are indeed the prime determinant of adult health status in the United States, as well as the social fabric of the nation.

Some brief examples. An individual experiencing any six of those categories, and I should say that the categories were found to be coequal in destructiveness. That was a surprise. We didn't expect that. But there were a lot of things we didn't expect. An individual experiencing any six of those categories during their childhood or adolescence has the life expectancy we determined almost 20 years shorter than an individual experiencing none of those categories. An individual experiencing any six of those categories is 46 times, a 4,600 percent increase, in the likelihood of becoming an injection drug user at some point later in life as compared with a person having none of those ten categories of experience. The relationship to chronic depression, to suicide attempts, etcetera, was, again, up in the thousands of percent at ACE score six as compared to ACE score zero.

So the Adverse Childhood Experiences Study has direct and important relevance to the practice of medicine, to the practice of public health and to social planning. And the findings from the study indicate that many common public health biomedical, mental health and social problems are the results of events and experience that were present but largely unrecognized during childhood. We saw that our current understanding of depression, obesity and the addictions is needlessly superficial. Demonstrated them to have a very strong dose relationship to antecedent traumatic life experiences during childhood.

When these finds were integrated into a general medical evaluation, in other words, when trauma oriented questions were integrated into general medical evaluation, in a 125,000 patient sample, separate from the ACE study, that was associated with a 35 percent reduction in doctor office visits in the subsequent year. So the economic implications of using this information are enormous. The resistance to using this information, as opposed to finding it intellectually interesting, is enormous.

Joe Torre:

Dr. Guterman.

Neil Guterman:

Thank you very much. I'm honored to be able to speak to you briefly about an issue that is important to all of us. I want to thank each and every one of you for your dedication to trying to really make a difference on kid's exposure to violence. As you know, as well I do know, this is a huge problem. I just wanted to say, I actually got my start in working with children exposed to violence here in the city of Detroit about 20 years ago. And I used to work children who had been taken out of the home because of abuse and neglect. I worked in some of the sort of deep, more institutionalized systems that you heard about earlier this morning. One of the things that kept striking me over and over again is I felt like I was sort of like Sisyphus rolling the ball up the hill to have the ball come back down. My work felt very, very frustrating. I felt like it was too little too late. Or in some ways, too much too late. Very, very expensive, stigmatized and coercive intervention that, you know to me I felt was too little too late.

And as this panel well recognizes, children's exposure to early violence is one of the clearest and strongest predictors of whether a person will later be revictimized and later perpetrate violence and crime. So that if we can prevent that violence exposure in the first place, we can prevent not only the trauma itself but also the later

damage and the later perpetration in a downward spiral or an upward spiral if we can do the prevention.

If we consider the relatively brief span of childhood, I would suggest, complementary to Dr. Piquero's testimony, that we should telescope into the first three years of life, and especially even during the perinatal phase giving a wave of scientific studies just over the last two decades that have pointed out this period of life is uniquely and profoundly predictive phase for later life. The perinatal phase and the first three years of life are uniquely characterized by the dynamic development of the most fundamental – the development of the neural systems, physiological systems, as well as the development of the emotional, cognitive and social competencies necessary for the rest of life. Interpersonally this phase also involves the development of the parent/child attachment, which ultimately serves as the major foundation stone for the development of social relationships of a variety of kinds throughout life.

On the flip side, the perinatal phase of life is also characterized by an inordinate risk for long lasting detriment for the developing person. Just for example, in the child abuse and neglect field, one-third of all cases of child abuse and neglect occur in children three years old and younger. Where of course the risk of detriment is most profound and long-lasting. And disturbingly, over 80 percent of all child abuse and neglect fatalities occur in children 3 years old and younger.

So the evidence further indicates even if we telescope further into this brief three year window of early childhood, the younger the child, the higher the risk of these most profound consequences. So at the highest risk for the most sever forms of child maltreatment, including death, are concentrated in young infants.

Put simply then, early childhood, and particularly the perinatal phase of life, represents a wholly unique and consequential window of risk and opportunity. When we consider policies and strategies to reduce crime, to protect children from violence and harm and to strive to preserve health and strength in the wider social fabric.

Now in the face of growing acknowledgement of this from the scientific community, the field of early home visitation services I'd like to focus on. Because it emerged over the last two decades or so as a sensible, feasible, effective, clinically effective, cost

efficient and cost effective preventative strategy to address not only the problem of child maltreatment but also to promote school readiness, maternal and child health more generally.

As their connotes, early home visiting services are compromised of services delivered directly in the homes of families during the perinatal phase of life whereby parenting guidance is provided to the parents, supporting the development of the parent/child attachment, connecting families with necessary resources and supports in the early parenting phase. All with the aim of promoting a parent/child relationship along a positive trajectory and away from maltreating parenting and all of the untoward outcomes, like violence and crime later in life.

One of the distinct advantages of offering services voluntarily in the home around the point of birth is that the very, very large proportion of families, even high risk ones, are motivated to opt and engage in such services. Although there's a wide variety of early home visiting program models, they all offer services proactive, family supportive and in a non-coercive way. Typically through the non-stigmatizing gateway of the healthcare system. Such programs are cost efficient, as Dr. Piquero noted, and cost effective.

We now have a well developed body of scientific evidence that indicates that although home visiting services are not a panacea for the problem of child and abuse neglect, they can nonetheless successfully address significant proportions of cases of child maltreatment. My own research and that of others, including a recently completed meta analysis from the Centers for Disease Control and Prevention has shown from randomized clinical trials that on the whole and across differing home visiting models early home visiting services can and do tangibly reduce maltreatment risk. As the CDC conservatively estimated that we can prevent 40 percent of cases by home visiting services. And when the measurement biases were taken into account we actually can prevent up to 60 percent of cases of maltreatment.

Especially relevant for Department of Justice, home visiting services delivered in just the first two years of life have shown later in life to reduce criminal involvement with the children, as well as the mothers themselves. Fewer lifetime sex partners, less involvement in drugs and smoking and so forth.

It's important to point out that a home visiting strategy is not a panacea, but nonetheless, we've been able to demonstrate under careful scientific scrutiny that such services indeed reduce significant proportion of traumas to children during this most vulnerable phase of life and promote long-lasting benefits to children. The good news is that we continue to forget advances in the knowledge base on how to extend the impact in a more robust and widespread way so the science can drive progressive improvement in the preventive impact such services can deliver. This strategy is clearly one example of how careful scientific study, instead of rhetoric or personal or polarizing agendas, can yield robust, tangible and sustainable benefits. Ones that not only protect children and their families from violence but at the same time yield significant cost savings to the public. Advances in the research have driven these hopeful developments and are essential as we continue to strive to reduce children's exposure to violence in a broad way.

Joe Torre: Thank you. Questions? Robert.

Robert Macy: Thank you, gentlemen. Excellent, excellent information. Dr. Felitti, thank you not only for your testimony but for your two, three decades of service to our country doing this work. It's really profound difference. And it's disturbing to hear, although I knew it, but to hear it from the primary author that we know it, we know how it works, we know we have graded correlations, we know it's solid science, we know it's uncomfortable to talk about, but as a physician, you know when you do examinations you know you have to get into those kinds of territories. What do you think at this point has stopped the general medical and psychological professional community from moving forward with ACE dissemination?

Vincent Felitti: I think the number one block probably has to do with the awakening of personal ghosts. Having spoken to many large medical audiences on this subject now, it's –

Robert Macy: And I'm sorry to interrupt. Can I clarify? Is that the provider themselves?

Vincent Felitti: Yes. Yes. It's by about eight or ten minutes into any presentation of the ACE study the level of anguish on people's faces in the audience exceeds anything I would be willing to attribute to empathic responses. I mean I really do believe the personal ghosts are being awakened.

Number two, I believe that if one accepts the data, and it's hard not to, then one recognizes that this calls for a paradigm shift in primary care medical practice, moving from our current symptom responsive mode to the more comprehensive style that we originally conceived for primary care but clearly never attained. It's easier to work in a symptom reactive mode, there's no question about that.

Thirdly, I believe that the sums of money involved – I mean in – I think I mentioned that there was a 35 percent reduction in doctor office visits in this enormous sample. If one translated that to the budget at Kaiser Permanente in southern California, that would be in excess of 1 billion dollars a year. Well, most people are not comfortable dealing with sums of money that size, correctly perceiving, you know a) if they screw that up they're gonna be remembered forever and b) they were hired really to keep the ship on course not to make a right angle turn to discover the northwest passage.

So some mixture of these and perhaps other issues I think are what makes up the stew that we're in in terms of having resistance to using this information in spite of attracting a great deal of intellectual interest.

Robert Macy: Can we change this?

Vincent Felitti: Well, if so, I believe that the greatest opportunity lies perhaps in changing patient expectations, which I believe would be far easier to do, and then using changed patient expectations as a market force to drive a needed change in primary care practice. For instance, if one were to develop and put on the internet free a detailed comprehensive medical history with biomedical, psychological, social, family and, in particular, trauma oriented components so that anyone who wished could fill it out at home. And if they wished, print it out and give to their doctors. The experiment would be whether some meaningful portion of those recipient physicians receiving laser printed in-depth, in-breadth information on their patients, would begin to see the utility of that in every day practice and start using it. That would be the unknown. It's an affordable experiment.

Robert Macy: Thank you, sir.

Sharon Cooper: Dr. Felitti, I just want to also thank you for your research. As a forensic pediatric, I mention the ACE study in every victim impact testimony across the board in all kinds of child maltreatment. What I would like to ask you is does this information beg for us, as pediatricians, to being a more proactive means of lifestyle change preventions for children who we already know now have been victims of child maltreatment or family violence?

Vincent Felitti: Yeah. You raise, I think, a critical point. Because we have a major choice to make. Namely trying to fix things after they're broken, which is extraordinarily difficult, expensive and really taken on a problem at a magnitude that most people can't even imagine. Or figuring out what primary prevention would look like in the first place. That, I think, is the piece that needs attention, primary prevention. No one knows how to do that right. But it's the right question. And I have no doubt that if well intentioned people sat down and were to focus on that that, you know I think some testable ideas would come up in a very short period of time.

One I would like – I mean what has been said about home visitation programs is –

[End of Audio]

Vincent Felitti: You know incontestably a terrific idea. Whether anyone would put the money together to underwrite all of that is the real question.

Something to keep in mind, I mean basically what we're talking about, the low hanging fruit in terms of improving parenting skills, would be that huge number of parents who have never had any personal experience with supportive parenting themselves. Many of whom might do better if they only knew what it looked like. And so the question comes up in my mind, might one not use broadcast television, that is to say soap opera, to weave this into the storyline illustrating what supportive parenting looks like and how it plays out downstream decades later contrasting that with destructive parenting, what that looks like and how it plays out. The bill is paid for. There are millions of people in the audience, etcetera. And certainly the material has sufficient lurid content that in the hands of skilled writers it's not going to bore anybody.

Sharon Cooper: People wouldn't look at it. Yes. Right. Thank you very much.

Joe Torre: Dr. Lieberman.

Alicia Lieberman: One of the things that we've been talking about is the importance of pooling the wisdom among the sources that we've been working with. And as the three of you talk to each other, would you consider incorporating an ACE questionnaire in home visiting programs as an integral component of an initial assessment and incorporating training in how to address the costs that emerge in the parent/child relationship, to quote Selma Freiberg, into the training of home visitors. So that we really start incorporating the tremendous value of the ACE study into the actual large scale programs that we're using.

Vincent Felitti: Yes. Understanding that the ACE questionnaire would be in reference to the parents.

Alicia Lieberman: Yes. Absolutely.

Vincent Felitti: Yes, for sure.

Alicia Lieberman: Yes. Yes. Although I just want to tell you that among the zero to five year olds that we treat in my program, the mean ACE score is five. And for the mothers the mean ACE score is 13. And the range is four to five standard deviations. So even among five year olds we have children that have an average of five –

- Vincent Felitti:* No question. I was simply raising the point would you get the information from a five year old or would you get that from the parent?
- Alicia Lieberman:* From the parents. Yes. Right. And they're eager to tell us when we dare to ask.
- Vincent Felitti:* One of the things that we found enormously useful was getting this information by a well devised, in our instance, paper based questionnaire filled out at home not in a doctor's waiting room on a clipboard. That all of the usual impediments to getting this into – well, you know I don't know. This doctor's too young or too old. He's not gonna understand. I don't know if I want to talk to a woman about this. Etcetera. People tend to attribute to a well devised questionnaire the characteristics that they would want in their idealized interviewer. And once it's out on paper then you know ahead of time where you need to go, where you don't need to go. It makes everything a great deal easier.
- Neil Guterman:* So in complement to that, a number of the home visiting models that are already out there in the field do engage in an upfront clinical assessment interview that does include some questioning around trauma, around domestic violence, for example, around depression, which obviously frequently is interrelated with trauma. And where the field is currently at, the way I see this is that we're moving into what we call a second generation of home visiting programs. So we started with sort of the standard models that are out there. And then we began to realize that these models are rather limited with regard to specific kinds of presenting concerns for families. Whether that's trauma, whether that's domestic violence, whether that's depression or other mental health kinds of problems.
- So now we're actually casting off a whole new generation of strategies that are much more tailored to individual – the most common kinds of problems that are out there. So for example, you earlier asked a question about fathers and how fathers have really been overlooked and the problem with domestic violence has been overlooked in the field. So now we have several sets of investigators that are beginning to augment the home visiting models that have already shown t have some impact by adding in either a father component or a domestic violence component.
- So, for example, the nurse family partnership that we've alluded to earlier originally was found to benefit families in the full sample

but actually did not benefit families where there was a certain threshold of domestic violence. So we call that a moderator effect, right? That home visiting actually didn't work where there was domestic violence in the family. And so David Olds, for example, is now adding on an enhancement where he's beginning to assess and so forth. I, myself, am adding on a, trying to actually reorient the whole home visiting models that are out there to be fully father inclusive .not only mother focused. So that the initial assessment includes both mothers and fathers whenever possible. Sometimes that's not possible. As we're learning as we're pilot testing a new intervention in the field. But we're trying to learn – this is what I saying at the end of my testimony is we're learning from the success on how to extend the benefits and how to tailor the benefits of home visiting given – we're building sort of a mousetrap that's a better mousetrap. You know it initially works overall pretty well but is not a panacea, but we can extend those benefits.

Joe Torre: Marans.

Steven Marans: Well, I want to thank each of you, and also to possibly create a bridge between the previous panel and yours. Let me start by thanking you for being such wonderful troublemakers. Because while there are many intervention strategies that you are demonstrating and describing that have enormous effect, the troublemaking part is that you are going to the heart of the matter that Dr. Felitti's work has demonstrated, which is this key ingredient that you mentioned in the original study. Unrecognized, unattended traumatic experience. And what each of you is suggesting are methods and vehicles for actually increasing the array of not only innovative, broad scale, large end interventions, but also addressing the individual complex traumatic needs, as Dr. Bloom and others were describing. And so I would ask you to perhaps think about the question as to whether one of the other impediments for not moving ahead with some of the areas that have been proven successful, that have enormous cost saving effects, is that identification is step one. But we are in a country in which our mental health services are being cut right and left. And as someone who's a professor of child psychiatry and psychiatry at Yale, and I have a hard time finding people to refer these adults to who have been identified, I guess I would ask you to help us think through making that case, or at least trying to address it, in our recommendations to the Attorney General.

Neil Guterman: I don't think I have a simple answer to that. It's a very tough question, thank you. But I do think one of the things that we've

talked about earlier in the day and with several of our sets of testimony is making the case for the cost benefits of not only identifying but intervening preventatively. As has been mentioned, we are very good I think culturally and societally at reacting to problems. In fact, this panel is about a problem. The focus is on a problem. A deep problem. It's not about good childhood. It's much harder to mobilize society around good childhood, right? Because it doesn't mobilize people as much.

But I think we – so it's incumbent upon all of us I think to make the case that proactive, early preventative, early strategies are also reduced the problems at hand here. And therefore, the need for mental health services down the road will decline. Not that they will go away. But one can think, in a world of limited resources, one can think about beginning to make strategic investments on the national scale that try out new strategies.

I mean in the healthcare reform legislation as you know, or may know, had the first federal funding ever for early home visiting services. Part of that was on the basis of the evidence based that these programs not only work but they're cost effective. Right? And that is a start. That was never there before. It's maybe a baby step. But I think that what we can do – if we can begin to document that we can bring down the traumas, recognized and unrecognized, that we can begin to fuel even greater public support for proactive, perhaps less sexy kinds of interventions. Less heart tugging. Because we don't see the trauma immediately there when we're – you know the conundrum of prevention work, of course, is that we're doing work – we're trying to do work in areas that are not yet – problems that are not yet cropped up. So it's hard to mobilize an enormous amount of energy behind. And so I think that's a dilemma that we have to continue to contend with. But I think making the case on the science basis – I don't fully agree that this is all just values and rhetoric. I think that science, I think that education, I think informing the public, I think informing our stakeholders, does make a difference over and over again.

Joe Torre: Yes. Deanne.

D. Tilton Durfee: Thank you all three. Excellent outstanding testimony. I wanted to break away a little bit from just the prenatal to three or zero to five framework because that we know is extremely important developmentally. And I think it was our US Advisory Board 20 years ago recommended universal voluntary home visitation. And

it's crawled forward and taken other forms. I was interested in which seems to be the more effective or the most effective.

What I wanted to kind of jump into with Dr. Felitti's studies is he doesn't just focus on the zero to three or zero to five. You are assessing adverse childhood experiences throughout childhood. Am I correct?

Vincent Felitti: And adolescence. First 18 years of life. Yes.

D. Tilton Durfee: Right. So the impact of that, not just the first three years but the impact of being in a home throughout your childhood will affect not only how you're able to function later, what you do. And then the huge news that seemed to get through to people, the impact on the health and the lifespan of adults who really did not consider themselves as at-risk because they had survived, they'd grown up. They maybe didn't recognize the seriousness of what they were experiencing. And this was only brought forward by your study of people with liver dysfunction and heart trouble and diabetes and early death. And to me that needs to be out there more. You mentioned media. I think we have a fair amount of media on the importance of the first three years, and we should keep that going and keep that going. But the fact that when you visit your doctor's office you may be treated for something as a result of a childhood experience, not necessarily early but some childhood or adolescent experience, and I do think that that is a great motivator for people to support what we're doing. And that's why I think your concept of media, even weaving this into existing media. I mean we have a jillion series. We still have a couple of soap operas I guess. I don't know how you'd weave it into The Voice or American Idol, but somehow it seems to me that we aren't thinking in terms of those expensive costly life threatening conditions in adulthood that would never have occurred to us were related to an adverse childhood experience. Can you comment on that?

Vincent Felitti: Well, you bring to mind something that slowly became evident to us. That many things that we term public health problems are indeed that. But perhaps more importantly on an individual basis are a solution for the person involved. Specifically. No one smokes to get lung cancer. People smoke because of the profound psychoactive benefits of nicotine in terms of its anti-anxiety activity, its antidepressant activity, its anger suppressant activity and its appetite suppressant activity. Am I saying nicotine is good for you? Yes. In 10 or 15 second there are benefits that occur.

But isn't it bad for you? Absolutely. In 10 or 15 years there are major life threatening problems that can occur.

Another good example. Pretty much everybody has some awareness of the demonized drug crystal meth. Virtually no one, interestingly, seems to be aware that the first prescription antidepressant introduced for sale in the United States in 1940 by **Burroughs Wellcome** was methamphetamine. It held that position for approximately the next 18 years. So the question is does it mean anything that the most commonly sold street drug is a potent antidepressant? Is that just, you know an irrelevant happenstance? Or does that tell us something about the functionality of what we dismiss as dysfunctional behavior?

Sit down. Have a drink. Relax. Sit down. Have something to eat. You'll feel better. Some of us have a great deal of relaxing or needing to feel better that has to be accomplished.

D. Tilton Durfee:

Yes, some more than – but in terms of the investment of our country in something, including early childhood interventions, but the investment of our country in promoting and informing and helping in whatever way to prevent serious costly medical problems. I mean hundreds of thousands of millions and billions of dollars spent in cardiac units and in liver transplants and kidney transplants and homes for people who are no longer ambulatory. I guess I'm trying to get from you an idea of how this might be promoted. Because that will get at people's purse strings. It will be something appealing to a threatened budget.

Vincent Felitti:

Okay. You're raising a good question, and I have not thought much about how one would promote that to the population in general. We have a book coming out in probably about two years designed for general audiences about the ACE study. I expect, from what I've been presenting this to general audiences, that the interest will be intense.

The first step if anything is going to be done usefully on a large scale is professional recognition of the problem. Whether that be in a prison, whether it be in a medical office, whether it be, you know in the foster care system, etcetera. Overwhelming that's the great lack that these things are passing through our hands all the time and we have no recognition of what the true origins are. You know people – yeah, you have emphysema because you smoked too much. It's those evil tobacco companies that made you do it, etcetera.

Well, what we saw is that with all of the additions, the relationship to antecedent adverse childhood experiences was dramatically proportionate. Starting with cigarette smoking where the higher one's ACE score, the larger the number of categories of adverse child, the greater the likelihood of being a current smoker. Going on to alcoholism, going on to drug use, including injection drug use where I mentioned that six categories equates with a 4,600 percent increase in the likelihood of becoming an injection drug user. I mean people at CDC told me that those are numbers that they run into once in a career.

Joe Torre: Any other questions? I want to thank both Dr. Guterman and Dr. Felitti for the very informative panel. Let's hear it for them please.

[Clapping]

Robert Listenbee, Jr.: Good afternoon, everyone. This afternoon we're going to look at the topic of Making Change Happen Through Public and Private Partnerships. The next panel we're going to have is going to bring together leaders of influential private foundations and non-governmental organizations to discuss their role in addressing the epidemic of children's exposure to violence and system changes they believe would strengthen the public/private partnership to prevent and address children exposed to violence.

One of our first witnesses will be Ms. Pamela Shifman, director of Initiatives for Girls and Women, NoVo Foundation. Ms. Shifman has served as the director of Initiatives for Girls and Women at the NoVo Foundation since 2008. Overseeing the foundation's work on empowering adolescent girls in a developing world and ending violence against girls and women. Prior to joining NoVo, Ms. Shifman worked at UNICEF, where she spearheaded UNICEF's efforts to prevent and respond to gender-based violence, particularly in conflict affected settings. Ms. Shifman also served as the co-chair of the UN Task Force against Sexual Abuse and Sexual Exploitation and was a founding member of the UN Action against Sexual Violence. Prior to joining the UN, Pamela served as the co-executive director of Equality Now, where she focused extensively on trafficking of girls and women and sex tourism and worked closely with a coalition of organizations for passage of the first US legislation on trafficking in persons and the UN Transnational Crime Protocol on Trafficking in Persons.

Dr. William Bell, president and chief executive officer of Casey Family Programs. Dr. Bell has more than 30 years of experience in the human services field. Prior to becoming president and CEO of Casey Family Programs in 2006, he served as the foundation's executive vice president for child and family services. Prior to joining Casey, he served 2 ½ years as the commissioner of the New York City Administration for Children's Services. From 1996 to 2001, Dr. Bell was deputy commissioner of ACS's Division of Child Protection. From 1994 to 1996, he was deputy commissioner of field services and contract agency management for the New York City Human Resources Administration.

Carol Goss, president and chief executive officer of The Skillman Foundation. The Skillman Foundation is a private independent foundation whose mission is to improve the lives of children in metropolitan Detroit by strengthening their schools and neighborhoods. Involved in philanthropy for the last 20 years, Ms. Goss, a Detroit native, joined The Skillman Foundation in March 1998 as a senior program officer and was named president and CEO in 2004. She has also worked as a program officer at the Stuart Foundation in San Francisco and a program director at the WK Kellogg Foundation. Ms. Goss' professional career also includes nearly 20 years' experience in child welfare, family services and youth development in Detroit and Oakland.

At this time we'll start off with testimony coming from Ms. Shifman. Ms. Shifman, welcome.

Female 1:

Thank you. Thank you so much for the opportunity to be here today. It's been a great morning so far. In 2006, Jennifer and Peter Buffett, the co-chairs of the NoVo Foundation, were sent a fax by Peter's dad, Warren Buffett, letting them know that their small foundation would soon be receiving a pledge worth approximately 1 billion dollars. In deciding where to focus the foundation's resources, Jennifer and Peter were inspired by Warren Buffett's investment philosophy. Warren Buffett invests in companies that are undervalued in the marketplace but show great potential. The undervalued asset NoVo invests in, adolescent girls.

Adolescent girls around the world experience profound discrimination and violence and are deeply undervalued. But when supported, have huge potential to change their own lives, as well as the lives of those around them. The NoVo Foundation has dedicated our resources to the girl effect. The ripple effect that happens when we invest in girls who then transform their families,

their communities and their nations. To fuel the girl effect, we must end violence against girls.

Today, I'm gonna talk about one manifestation of violence, commercial sexual exploitation. I met recently last week with a brilliant 22 year old woman who was first prostituted at age 12. she'd run away from home and was riding the New York City subway back and forth when the first man approached her and offered her a place to stay for the night in exchange for sex. She agreed. He was the first in a long line of men waiting to prey on the vulnerability of this young girl. By age 15 she was under the control of a pimp being exploited by him, as well as by the customers. She learned to use cocaine to stay awake while working and pot to numb herself to sleep.

She's just one of the hundreds of thousands of children, mostly girls, who are being prostituted on the streets of the US every day. It's estimated that the average of entry into prostitution is between 12 and 14 years of age. For the vast majority of these children, the violence of prostitution, the daily rapes by customers, beatings by police, harassment by bystanders, controlled by pimps, is not their first experience of violence. Like the girl I met, they end up on the streets because they're escaping other forms of violence, often in their own homes.

Not only are victims of sexual exploitation victimized, but often they're not even recognized as victims at all. They're blamed, stigmatized, isolated and told they brought this violence on themselves. And in many localities around the country, they're treated as criminals, including right here in Michigan, my home state, where anyone 16 years of age or older can be charged with prostitution.

Having spent much of my adult life working to end violence against girls and women around the world, from South Africa to Liberia to India to here in the United States, I am so struck by the parallels between sexual exploitation and domestic violence. Like domestic violence survivors, survivors of sexual exploitation are subjected to rape and beatings, economic coercion and severe emotional abuse. Like batterers, pimps use power and control to manipulate their victims and ensure their compliance. And like domestic violence victims, far too often victims are asked, "Why do you stay?" As one survivor answered, "When we're the most vulnerable pimps attack, promising us stability, a family life, a future. They reel us in. He becomes our father and our boyfriend

until we see what he really wants. Then he intimidates us and reminds us constantly about the consequences if we leave. Most tell us they'll find us and kill us no matter where we go. We're afraid of being afraid. Resources are limited and many of us do not see a way out."

Like victims of domestic violence, the real question we must ask is why does he abuse her, why does he buy her? I want to share five recommendations with the task force that I believe will go a long way in helping to end this violence. One, name sexual exploitation as violence. Sixteen year old girls trading sex on the street are not participating in the world's oldest profession. The children selling sex in this country are victims of systematic and routine violence. By most definition, their experience constitutes torture. When we pretend prostitution is a victimless crime, we're telling a lie.

Two, enact laws to protect victims. In too many places a girl who's too young to consent to sex can still be arrested for prostitution. In other words, if there's no money involved she's a victim. If there's money involved, she's a delinquent. While all prostitution constitutes trafficking under federal law, many prostituted children are still treated as criminals. In 2008, New York State became the first state to pass the Safe Harbor for Exploited Children Act, which recognizes that children in prostitution are victims of a brutal form of child sexual abuse, not criminals. Since then, several other states have followed but not nearly enough.

Three, fully fund services as part of Safe Harbor legislation. Child victims have very specialized needs that must be addressed. On any given night in New York City, as many as 4,000 children are sold and bought in the commercial sex industry, and yet there are less than 50 shelter beds available for trafficked youth. Specialized services are equally as important as ensuring they're not treated as criminals.

Four, address demand. Demand for prostitution drives the industry. With the exception of several counties in Nevada, it is illegal in the US to buy sex and to sell sex. Overwhelming however, it is the victims who are arrested, both women and children. In New York City where I live, six times as many people are arrested for selling sex as for buying sex. And while this hearing is focused on children, we know that the majority of adult women who are selling sex were first victimized as children and the system's failed them to get out.

Five, collaborate, collaborate, collaborate. As a private foundation we know we can't do this work in isolation. We believe in leveraging the strengths of partners. Just as an example, together with the Nike Foundation, we have partnered to build the case for why government should prioritize adolescent girls. Recently we've taken this collaboration a step further through a partnership with **Difit** and Nike. Difit is the equivalent of USAID in the UK. To scale up solutions for girls in Ethiopia and Rwanda and northern Nigeria. Through this partnership, using innovation plus scale, we are able to empower girls on a much larger scale. And I'm happy to talk about this in the Q&A.

In conclusion, I just want to say I'm so grateful to have the opportunity to talk to you all about this work. And I think together we can harness the work of the girl effect, not only overseas but right here at home. Thank you.

Robert Listenbee, Jr.: Thank you very much, Ms. Shifman. Dr. Bell.

William Bell:

Let me start by thanking you for this opportunity to testify before the Defending Childhood panel. As a foundation, Casey Family Programs is focused on safely reducing the need for foster care and building communities of hope for all of America's children and families. We believe that every child deserves a family of their own and a community that will ensure they make life sustaining and life enhancing choices. During the last several years, we have become convinced that violence and exposure to violence represents two of the most significant and most complex challenges to childhood as we've known it in America.

Where America goes from here and the change that we see will be about the choices that we make as a nation. We must change our expectations for what is acceptable. Because no child rises to low expectations.

Over the last 24 hours, we've lost a future potential of approximately 32 of this nation's young people because of the choices that someone made. In approximately 16 instances another young person chose to murder one of his peers. In another four tragic situations an adult committed actions that took the life of a young child, most likely a child under the age of five. Most tragically, approximately 12 of America's young people under the age of 25 decided to end their own life through suicide. And also in the past 24 hours some estimate that as many as 3 women lost

their lives to domestic violence due to choices made by men in their lives.

The painful reality is these choices will repeat themselves every 24 hours from today forward unless those of us across America who have the resources, the knowledge, the capacity and the authority to make choices of change take action. We can teach our young people to make better choices using evidence based tools like multi systemic therapy, life skills training or promoting alternative thinking strategies. We can create grids across our cities to narrow the geographic space that we are trying to cover with our responses by creating geographic community. We can identify and engage youth, parents and other adults to co-lead the local effort to help change choices by creating active community leadership. We can better integrate the resources and the responses of federal, state, tribal, county and city government with philanthropy and local social entrepreneurs, creating an integrated community response and support network. We cannot police or child welfare our way out of losing 32 young lives every 24 hours.

No philanthropic entity, no grassroots organization, no government organization, no social entrepreneur can fix this through their own efforts alone. We must integrate efforts. We must be specific about our actions. And we must be bold in the results that we want to see. We know where the children and families are. Often we know who they are. We also know what they need. We give it to our children every day. The question is, what will we choose to do?

And there are people making choices that we can learn from across this country. There's a couple in Seattle who, after losing their son to violence, made the choice to create a community mentoring program. There's another couple, who after winning their battle with the streets and drugs, chose to create a dads program that is today reconnecting men with themselves, with their families and helping them to live up to their responsibilities to their children. There's a minister in New Jersey who has chosen to require home visits and parent counseling as a condition of the baby dedication process.

There's a public school in North Carolina that chose to change the way that it ran its school system and the way that it taught its children, which were mostly poor and mostly minority, to move their reading and math performances from the 50 percentile to consistently being at the 90 plus percentile for years. There's a

city in Alabama where the mayor has decided to create grids across the city where he is now engaged local churches and other houses of workshop and local leadership to improve outcomes for his children. There's a corrections commissioner in Mississippi who has decided that warehousing young people and allowing them to treat each other like animals cannot be a part of our rehabilitation system. And he's decided to change his response, his treatment and the outcomes for the young people. There's a tribe in Minnesota that has chosen to end placing its kids in foster care off the reservation and has actually completely shut that down. There are tribes in Montana who have –

[End of Audio]

William Bell: - decided today to begin the conversation, the hard conversation, of ending domestic violence on their reservations. The state of Virginia has decided to make it impossible for a child to age out of their foster care system by not giving the goal that allows it to happen. And forcing their staff and agencies to work towards that end.

As a parent, I have learned all too painfully that we cannot make choices for our children. Nor can we force them to always make the best choices. But we can decide that we will approach the life giving task of preparing them to make choices, and that we can decide that when their choices go wrong, that we will be there with support, with love and with more teaching.

Thirty-two times 365 is 11,680 lives a year. The question is, what choice will we make?

Robert Listenbee, Jr.: Tank you, Dr. Bell. Ms. Goss.

Carol Goss: Good afternoon everyone. Welcome to Detroit. And thank you for the opportunity to speak before this task force. I'm particularly glad that you've selected Detroit to come here and hold this hearing as the issue of violence among children and youth is very serious in Detroit and important. So welcome and I'm glad you're here.

I've spent more than 40 years myself individually working on behalf of children who have been exposed to violence through the child welfare system, juvenile justice, domestic and family violence and crime in neighborhoods. And at the Skillman Foundation for more than 40 years, our work has focused on changing the conditions in the neighborhoods and schools to support the healthy development of children. What we learned during the first years of our work was that while we supported fine and discrete programs, we actually were not serving our children well enough, nor were we serving them in the places where they lived and where they were most at risk.

So we changed our way of working. We are not a traditional foundation, although we do make grants, some 17 million in 2011. But our work is based on building relationships within the neighborhoods where many children live and to attract and bring to bear additional resources on the solutions that we believe will create the necessary change. We consider ourselves and embedded

funder. And by that, that means that where we work, where we live and we work in partnerships with communities and schools.

And here are some things that we have learned that we believe if implemented broadly in partnership with communities will help young people to be more successful and to reduce the degree of violence that's currently present in their communities.

First of all, the presence of caring adults in communities and neighborhoods. Neighborhood patrols now exist in some communities. They patrol schools and areas where there is apt to be lots of violence. But we need more volunteers who are well trained and willing to go forward and provide the protection for young people. Young people need to be connected to caring adults in their schools, communities and grassroots youth development programs. And those adults need to be connected to each other. So they need to talk to each other about the young people that they are trying to help.

Young people need access to quality education from pre-kindergarten all the way through college. And they mostly need for that quality education to be available in their neighborhoods. We are failing our children. We are not preparing them for college or with the skill so that they can be ready for work. In Detroit, less than 2 percent of our high school graduates were prepared for college English or math. That means they spent a significant amount of time in remedial courses.

We believe that comprehensive programs that meet all the needs of children in their communities in place where children live, like Promised Neighborhoods, that comes out of the Department of Education, is significantly important in making those neighborhoods safer and children more successful.

We also believe that until we get to scale, we will not see the kind of change that's necessary. And that means we need the funding to expand those programs that we know work. Earlier you heard about a small discrete program called the Glimpse of Hope that Lawnya Sherrod spoke about in her community. That program could exist all across this city if they had the right resources. Others that we should use, street workers, returning citizens who have the desire to work with young people and are already doing some things. And then addressing the issue of vacant and abandoned properties. Which is a major issue in our city.

Finally, in Michigan, we have many philanthropic and corporate partners. And we are working together to leverage our funds to get greater impact. We have neighborhood funders and early childhood funders and a new economy initiative. And we know that those resources, while helpful, still need the resources that could be available from the federal government. And with that I will stop. Thank you.

Robert Listenbee, Jr.: Thank you very much, Ms. Goss. At this time we'll take questions from members of the task force. Okay. Professor Deer.

Sarah Deer: Thank you. This is for Ms. Shifman. I recently had the opportunity to work on a report about Native American women being sexually exploited and trafficked. And I was wondering if you could address the mythology that sexual exploitation only happens in urban areas.

Pamela Shifman: Thank you for that question. And really, especially, I think thank you, since we know that Native American girls and women are particularly vulnerable. And there have been some really – there's been some excellent research done on that to really highlight that enormous problem. So it's interesting, there's often a – you often hear the statement that sexual exploitation or trafficking does not discriminate. And I actually think that's a lie. It completely discriminates. It discriminates on race and age and gender and class. You know it is, while white middle class girls and boys could be sexually exploited and trafficked and sometimes are, they are not as vulnerable as people who have other kinds of vulnerabilities that propel them into the industry. And certainly poor rural girls and women and boys are vulnerable in the same ways that urban children and women are vulnerable. I think it's looking at the layer of other vulnerabilities that's really important. And looking at the ways in which discrimination is operating in our society. Thank you.

Robert Listenbee, Jr.: Georgina.

Georgina Mendoza: I want to thank all of you for your testimony and for all the wonderful work that you do. This question is for Dr. Bell. Much of your testimony was centered around local solutions, which we understand and agree is an integral part to any solution cycle. If you can give this task force your top three recommendations that we can have on a national scale, what would those be?

William Bell:

It would begin by accepting that where this issue plays itself out is at the local level. And that if we are going to be successful, we have to bring our efforts to bear at the local level. You cannot solve a local neighborhood's issue in Detroit from Washington, DC. But we can create an integrated community response system that integrates the resources, the capacities and the ideas of the federal government, the state government, as well as the local city and community into the work that is going on at the community level.

And so I think that we've got to – and this is the way I lay it out. Right now as a philanthropic entity, many of us will bypass the local city government and go and find a not for profit to say, "Here are my three ideas. Take my money and implement my ideas and give me a report." The federal government will mandate certain things need to happen absent of conversation. There has to be local political leadership, local community leadership and the affected people need to be involved in a conversation to say, "this is what we need and we are all working together to change it." See, that's first and foremost.

I think secondly we have to teach kids and adults to read. Our issues right now are people are struggling to make things happen for themselves and they're disadvantaged. And when I can't compete I find the best way possible to survive. And so we need to teach young people to read. And I'm gonna have to give you four. Because the third one I would say is we've got to create grids across the communities. You can't solve a city wide issue from a city wide perspective. You need to break it down to its lowest common denominator and begin to work in community driven ways in specific areas with targeted efforts that are important for that particular area.

And lastly, I would say turn the lights on. We know where kids are being killed. We know when they are being killed. And we send the police in to control and to punish. If we say, we're gonna take back these places where this stuff is going on, we're gonna hold activities in the parks and the communities and the very street corners where the crack is being sold and we're gonna do it 24 hours a day, if there's no place to go – and I said this a while ago at another summit. I don't like to use the roach analogy, but when you turn the lights on roaches scatter. If we take back our space and engage even the young people who are committing the violence in constructive conversations about their futures, because we have to recognize that they're somebody's child too. And that

at some point somebody was holding them in their arms saying, “You’re gonna be the next doctor, the next lawyer, the next this.” And the choices that got made in their lives and the choices that they’re making today need to change. So I know I’ve given you about seven or eight now. But I think that we can –

Georgina Mendoza: I appreciate all of them.

William Bell: We can’t do it from up here. We’ve got to engage with the people who are being impacted where they live. And that’s how I think we will solve this.

Robert Listenbee, Jr.: Father Boyle.

Gregory Boyle: As funders, this is running a nonprofit organization, you know the funders will often say, you know we don’t fund efforts. We fund outcomes. But given the populations that you’re sort of underscoring and saying these are folks who are certainly on the margins and need a lot of help, a dilemma I always find, and I would love to hear funders respond to this, is, you know if I start – you can tend to sort of find yourself working with the most likely to succeed because foundations will fund outcomes and success. And then it feels like an abandonment of the population that I serve. So I get sort of stubborn when it comes to that kind of thing. Because I think that’s how people get outcomes sometimes is they just change the population they work with. And so help me. You know how do funders fund folks who are standing with exploited women when it’s hard sometimes to measure the kind of success that funders long for?

William Bell: I think it has to start with a change in behavior of funders. I think not only philanthropy but also government, who is one of the biggest funders. We have promoted the need to first, always have a needy population. So I cannot afford to tell you that this problem is resolved because then I can’t get funded for it. So I’ve got to tell you how bad things are in order to get your money. I’ve got to show you some results, and so I’ve got to cream in order to the population – I know you didn’t want to use that word. But to get the population that I can say I did something with. What I’m suggesting is that we have to take a step back and say, I’m serious about an outcome. That outcome is ending this cycle of 32 children dying every 24 hours. And there are some places where children are not dying at that rate every 24 hours. What are they doing different from what’s happening in the places where children? It cannot be what the philanthropy wants. It cannot be

simply what a local government leader, and there's too much fighting even at the local level. Because the legislative body is fighting with the executive body because we got to blame somebody. We've got to have a conversation about a specific geography, about a specific set of children and about a specific set of behaviors that will change the way children make choices, the way adults make choices and the way those who say that we are supposed to be governing make choices.

Carol Goss: Could I comment on that also? So our work really is based on a relationship and partnership with those who are working and living in neighborhoods where children are most vulnerable. So we are deciding together what the strategies are and what the priorities are and what the results will be long term. And then providing the technical assistance so that we all get to the same outcomes. So we are not as a foundation setting outcomes ourselves and then saying you've got to meet them. But that we are all talking about what is happening in place in those communities and neighborhoods, and how do we get to the best for all children. That is a different way of philanthropy working. And it is a harder way. It's more external. Our staff are based in community. They work hard in community. We use a community organizing model. And really I think if we're gonna create the kind of change that needs to happen so that we no longer have the kind of violence and losing the numbers of young people that we lose, we have to work in that way.

Gregory Boyle: Thank you.

Pamela Shifman: Can I just add one thing to that? Cause I think what you're pointing out is one of the most sort of poisonous aspects of philanthropy. Which is this really strong focus on measurement and evaluation that actually is about a quick fix solution to long term social problems. And the way we have addressed that at NoVo and are really trying to do a lot of advocacy with our funder colleagues is to highlight that we are in this to support organizations and efforts over the long term. And that many of the solutions that we want to see won't actually happen. The change we want to see won't happen in our lifetime. Actually. And that we have to remember that we are investing in social change, which takes a very long time.

We're really guided by sort of the Gandhian philosophy of the last man. But in our case we say we support the last girl. And we think about what will this impact – what will we do, what impact

will that have on the last girl. And knowing that if you impact the last girl, you impact everyone else. But that that is going to take time. And I think it's our job as philanthropists I think to really spread that message among our colleagues, because I think we have really caused a lot of problems in the fields. And really sort of made vaccines for problems for which there are no vaccines.

Robert Listenbee, Jr.: Dr. Cooper and then Dr. Marans.

Sharon Cooper: This question is for Ms. Shifman. Thank you very much and thank you very much to all of our speakers. The girl effect as is depicted on YouTube is outstanding. And I encourage everyone to go to that site and take a look at the visual media message that you have provided for those of us who are trying to learn how to value children in a more positive manner. You mentioned as one of the major initiatives that you think needs to happen is to address demand. And I think communities are somewhat stymied about how to best do that. Do you have thoughts on how to address demand?

Pamela Shifman: Thank you. Thank you so much, Dr. Cooper. I would say a couple things about addressing demand, which I think I addressed somewhat in my remarks. But one is to notice who's buying here. Right? So right now if in New York six – you know we have six times as many arrests of the girls and women who are selling sex as those who are buying. That is a huge problem. And I think when we see when law enforcement focuses their efforts on addressing demand, they do it.

You know we had in New York, we just recently have had a sort of turn in our own law enforcement in New York City where they are focusing more on addressing demand, and it's starting to take effect. So I think it is a matter of resource and priority. It's where do you focus your attention. Cause we can often hear that it's difficult, it's more difficult to arrest the customers. But I have to say I find that hard to believe. That we can't find a way when we know the damage that they are inflicting upon very vulnerable girls and women. That if we focus our attention we can actually arrest them.

I would say two other things. Something we advocate very strongly for at the NoVo Foundation, which is we think the best model for addressing commercial sexual exploitation is something that is really spreading across Europe now and in Asia, which is something called the Nordic Model. Which is where those who

buy sex are criminalized but those who sell, whether children or adults, are not. They are seen as victims of violence and are offered supportive services instead of prisons. This has had an incredible, incredible impact, both on reducing prostitution, as well as reducing sex trafficking. If you look at Sweden, which is the first country to adopt this law, they have the lowest trafficking rate in Europe. This is, you know in opposition to a country like The Netherlands which has legalized prostitute which has very, very high rates of sex trafficking and of sexual exploitation of children. So on the law there's that.

And then I think there's some really innovative media efforts to really challenge demand and help would be customers to understand that this actually is hurting someone. That actually buying sex is not victimless. That that child or that woman actually is somebody's sister, is somebody's daughter, actually doesn't want to be doing this. Wants to have a better life for herself. And I think those kinds of efforts – you know in Illinois there's a coalition of groups who are leading efforts toward that, which is, you know I think really exciting and the way to go. Using social media and really speaking to teenage boys and men who may buy sex and asking them to think again. Thank you.

Robert Listenbee, Jr.: Dr. Marans.

Steven Marans: I don't want to lose the opportunity, because each of you represents a leadership in the area of what are often invisible children. And each of you have really addressed this. But each of you as head of foundations had decided your foundations are not going to ignore and not going to pretend these children and their problems don't exist. So the question I have is, we need your help in terms of thinking about how do we capitalize on your being outliers to some extent, your being bold in your approaches. How can that inform the federal government, either in partnership with foundations, but also in terms of helping us understand what are the ways of helping these children become less invisible to both foundations, local governments, state, federal? I don't know if I'm being clear. But you've stepped up, so help us think about this question would you?

Carol Goss: That's really a great question. We have been working with the federal government on some philanthropic partnerships, public/private partnerships, to do just that. To really address that those issues that don't seem to come forward. And actually I think it is helping the departments to think differently even about their

work and how they can work across departments and how they can really with their funding apply it to those that are most in need.

And I think the more visibility, the more opportunities that philanthropy has to talk about what they're learning, what's working, what's happening, particularly on behalf of vulnerable children, that it helps partners like the public sector to look at this work differently.

And just an example is in the child welfare area organizations, states, counties, receive funding to remove children from their home. It's much more likely that they'll be reimbursed from that than they are to keep children in their home and make those neighborhoods and communities safer. And while we know that they could apply for a waiver to use the funds differently, it's a very complicated and cumbersome process. And many don't undertake that.

So from our perspective, what we've been talking about is how can we work differently so that the funds really go where there is the greatest need and we prevent the very thing that causes the trauma for children and their experiences with violence over the period of their lifetime.

William Bell:

I would say that one of the things that we've done is to one, we can do more in publication and research and make sure that that's out there. We have changed the way that we work with government. I think one of the challenges with philanthropy is that we have set ourselves up as our own entity. But if you think about the dollar amount that goes through grant making versus the dollar amount that gets spent through government, we pale in comparison.

And so what we've decided to do in Casey Family Programs is to say we want to align ourselves with local leadership. And we want to ___ ask you what your goal is for all of your children. Because while they may be invisible as victims of child abuse and neglect to some, those same families are the ones who are the police know exactly where they are. Those same families are the ones that are in juvenile justice. Those same families are the ones where the young women that Pamela's talking about's coming from. And so part of it is we've got to encourage a change in thinking. And that this is a conversation about all of our children and not just some of our children. It's a conversation about all of our communities having the same opportunities and not just some of our communities.

And so when I talk about the number of murders of young boys age 10 to 24, that 16 is not just black boys. It's not just Latino boys. It's not just Asian or Native American. It's all boys. And the boy who's pulling the trigger is almost 100 percent of the time of the same racial and ethnic group. So when a white boy is killed in that age group, there's another white boy who's doing it. And so we need to have our conversation about all of our children. And we need to step away from this notion that philanthropy out here can solve what's going on. Philanthropy is most effective when we are fully integrated in our conversations, in our annual planning, in our annual thinking, in the outcomes that we say that we're looking for with the local communities and with the local governments who's responsible. Because the hundred million dollars that Casey Family Programs will spend this year and next year in child welfare pales against the 20 billion dollars that government will spend in that same space.

Pamela Shifman:

I would just add one thing, which is that I do think this opportunity of working with corporations is a really interesting opportunity. Certainly our partnership with the Nike Foundation has been a very interesting one and challenging at times. And yet I think as Dr. Cooper pointed out, some of the communications, materials that they have been able to create, which are really designed to engage governments and multilateral organizations in prioritizing adolescent girls living in poverty. Right. That is the goal of the Nike Foundation. Invest in adolescent girls living in poverty. And the way that they have been able to communicate, you know they have brought to bear all of their just do it, you know, to this issue. And as Peter Buffett our co-chair often says, you know if they can learn to sell this concept like they've learned to sell shoes, you know we'll be golden. And I think we have to really be a little bit creative in working with companies like Nike to be able to really raise the profile of these children and these women.

Robert Listenbee, Jr.:

I'd like to address a question to the entire panel. One of the challenges that we've faced in looking at the problem of children exposed to violence is the need to have full community involvement. We've been thinking about not just foundations and corporations but how do we get the entire faith based community involved. How do we get, you know sort of ignite an entire community of community groups and family groups and community activists of all stripes, shapes and sizes, to get involved in this process. And then how do we join with you to leverage your resources and the resources of government.

As we look at government, one of the things that's obvious to all of us is that government has limited resources at the present time. And they're not likely to expand in the near term. So we're going to have to do more with less. But doing more with less means that we have to have more people volunteering and being involved in the process. How do we do that? How do we get the word out such that it mobilizes people? How do we get the word out so that we have hope in the face of what looks to many like really despair in many communities across the nation. Just real honest to goodness despair. So much despair that it immobilizes folks. How do we do that?

William Bell:

The question that Georgina asked was about how the federal get down to the community. What we're dealing with is on multiple levels. And I think we have to start with leadership. I don't necessarily, when I count 20 billion dollars, think that we don't have resources. I think we're not purchasing what we need to purchase with those resources. And that's a broader conversation. But I think the leadership question.

So if we want to get churches involved in their communities, let's start with a conversation with the leadership of those national organizations. The National Baptist Convention. The Church of God and Christ. The National Jewish Organization. So that we can begin to say at a national level, what are you talking about with your people? And how are you asking them to get involved on a local level? Casey Family Programs will not necessarily get churches across the country to do nearly as much as their national organizations could get them to do if they decided to do it. The national civic organizations. Sororities and fraternities. They have local chapters who, as a part of who they say they are, are about change at the local level. How are we engaging the national to have conversations with their local constituents about what they can and should be doing and saying to you, you can't do it alone, you have to be in an integrated conversation. If we challenge organizations, philanthropy, civic organizations, these national umbrella organizations, NAACP, National Urban League, all of whom who have local chapters, if we challenge them to say, never approach a problem unless you've got five people working with you on solving it. Five different groups working with you on that problem. If we in philanthropy said that we will never approach an issue unless we've got five additional philanthropic organizations working with us integrated in our conversation from the beginning with government and members of the community where we're looking, then I think we begin to shape a strategy that in the years

to come will begin to bring about the change that we're looking for.

But we are too individualized in what we're doing in this country. Child welfare in New York City was wonderful as long as kids were going home. If a child died, nobody had anything to do with it except that caseworker and that supervisor. We've got to own this collectively and begin to shape the solutions and the outcomes that we're looking for collectively and encourage each other to work together more constructively as opposed to working more separately.

And the question that you had earlier, marketing. We're some of the best in the world at marketing. I've started to refer to local grassroots folks like the people I listed in my remarks as social entrepreneurs. People who have made it their business to change the outcomes and the choices that children are making on a daily basis. They don't have marketing dollars. And that's why the folks they server are invisible to some. We've got to change the conversation that we're having across this country at the highest levels in this country in order to get people recognizing that somebody's sitting right next to them who can benefit if they only stepped in.

Robert Listenbee, Jr.: Ms. Goss, yes.

Carol Goss: Could I just add to that? Because I absolutely agree with that. Last week the Detroit Free Press ran a series in their newspaper about the violence that exists for young people as they walk to and from schools in neighborhoods in Detroit. That series gave great visibility to a problem that people had no knowledge of. And we have listened for a while to young people telling us how scary it is for them to just walk to school.

[End of Audio]

Carol Goss: - wait for the bus. So I believe that as a community that while we need the more national efforts, as a community we need to inform everyone and then have a vehicle that allows for people to engage and participate both on a voluntary level and on other levels. For example, the United Autoworkers, their retirees have indicated that they retired early, they'd like to do something, we need a vehicle where they can be in neighborhoods. They can patrol the streets and make children safe. But we need a broad spread communication strategies that make sure that everyone is informed and knows what to do when. They can get well trained. They have resources, the technical assistance that's available to them.

Robert Listenbee, Jr.: Ms. Goss, I hear you when you say we need a vehicle. But we're asking you based upon your experience to help us craft or design or create such a vehicle. What would you tell us that vehicle should be?

Carol Goss: Well, I would say now that we now have at least in Detroit and in I guess five other cities around the country a strategy that's coming out of the city government that is designed to prevent, to remediate youth violence and to really protect children in their neighborhoods. It's significantly under supported. Most people don't even know what's going on. It has all kinds of strategies. The police, the chief of police has been very engaged in it. But it's very small, discrete. It in no way at a level of scale that it could be. It could be in a partnership with the people in all of those communities who want to get out. You know I've been thinking about it as I read the stories. Why is it that we don't have adults riding on the bus with those children? Why don't we have adults walking block after block with children? With the right training and resources. You can't just turn all adults loose in the community. But we can train. We can make sure that they have those resources. And coming out of the city, the span is across the city. So I believe also out of that would, from our perspective, our city was grossly affected by foreclosures. Coming out of the city could deal with our problems with vacant and abandoned buildings. Which just adds to the problem of violence and the lack of safety that young people feel.

So I think that it does require leadership. But I think that we have a vehicle in place. We've got something that could at least we could scale it up, resource it up and make sure that it could work.

William Bell: I think the vehicle is we have a government in place in every community in this country. And they are either doing well and are

effective or they are not. We have a number of folks who have resources and who have desire. We need to begin by aligning ourselves with the people who are locally responsible. The government and the members of the community. And sitting down to say what are we going to do to change this. This is not rocket science. Our families that are successful, they have a plan for where they are going. If we say we expect government to deliver and every corporation that wants to have people involved in change, every philanthropy that wants to have people involved in change, then choose your neighborhood. Choose your community. Choose the government that you are going to align your efforts and your resources with and get the people in the community in conversation with their leaders about how do we make our lives different. We can't do this for people in the community. They have to be involved in shaping their own future. And that's a conversation between the local government and the local people who are being affected. Everybody else has to find a seat at that table saying this is what I can offer you to align it with what you're doing.

When Casey Family Programs started the 2020 Initiative in 2006, we said that we were gonna influence a 50 percent reduction in the number of kids in foster care in this country. The way we did that was to go to every state and say, "This is what we have. What are you trying to do? And how can this help you do your job better so that we can get the results that you say that you want?" If we sit in this room, we're not responsible every day for the policing in a community. We're not responsible for the schools in those communities. We're not responsible for the healthcare in those communities. But we can bring something to bear to support those who are responsible. So I would encourage you that whatever you design begins to be routed through the people who hold the responsibility, the community and the local leadership, so that they can craft their solutions.

Robert Listenbee, Jr.: General and then Dr. Marans.

Antonio Taguba: Well, thanks to all three of you for your enduring and long term noble work in helping with our children. You know I had a mentor who used to say when they'd give us a task, and these are leaders, coming from the military. And he used to say, "You know I don't want you to start this project where you roll up your sleeves and then wring your hands at the same time." If you think about that, you know we write a plan and then we put it on automatic pilot in hoping somebody will kind of catch that.

From our own personal perspective, and just bear with me this analogy, you know in our four hearings here and plus some, for me I have a terrible time of adjusting the focus on my lens from three power to ten power just so I can understand the common view of the battlefield. Right? Right now from all the testimonies I've heard cause of the multitude of notes I've taken is there's thousands of 25 meter targets. Which one of those are we gonna target first or shoot at first or solve first. Because there's 50 meter targets in front of them, behind them and you have the maximum extended range of about 460 meters, which is the round of a M4 _____. You know I'm just trying to understand. Cause I hear the good words like collaboration, philanthropic. I like the way Berkshire and Warren Buffett contributed 1 billion. You know the whole thing. Our government during an economic crisis authorized 700 billion dollars to rescue our economy, right? You take 10 percent of that, 50 billion, and help rescue our kids. Okay. Just kind of that.

But from our ground perspective, cause I like to look at it linearly from the ground. Cause I don't like hovering in a helicopter 10,000 feet above sea level cause you can't see anything down in the trees. But from your perspective of collaboration at your community, I'm not saying that there's a cookie cutter, have the three of you collaborated in your best practices and kind of shared the conversation that your program is not better than the other but you have the same objective? You know it's not as if you're paralleling yourselves. But there is one objective here, and if you're not careful you're gonna bypass that objective. Right? Have you done that? I mean, you know from your perspective. I know you just met today probably. But have you give it some thinking? Cause like Hawaii is a way station for huge human and sexual trafficking. My home state. Right. Why? Hundred and five million square miles of the ocean and you got this island where everything kind of transfers through. The east and the west. It's amazing that my home state that prides itself in tourism. But underneath all that veneer at night all these people are transferring. I know because my sister's a school teacher and she has all these students.

But anyway, I just want to ask you that question of how about collaborating at your ground level and then giving us a perspective of what works amongst yourselves cause you're funded appropriately by UPS, Warren Buffett and things like that. Because, you know you can't really rely on the corporate side, but

you depend on them. But then they help enable ____ your problem through funding, right? So. Comment there ____ ____ short question.

Carol Goss:

So I'll just say quickly that we undertook an initiative, 100 million dollars over 10 years, to try to transform six neighborhoods. It's not nearly enough dollars. So we needed all kinds of partners to help us. And we started out saying that we don't need the credit. We just need the support to work where we are working. So we attracted all kinds of funders. We wanted to do a public arts project. This came right out of a neighborhood meeting. They wanted to do murals and benches and sculptures that would make their community more attractive. We had some money. But so did JP Morgan Chase Bank. And so did the **Cresby** Foundation. And we all came together in support of that.

In one of our neighborhoods in the **Brightmore** community, our work is focused on K12 education, but the Fisher Family Foundation focuses on early childhood. If you put those two together, then that begins to create a continuum of quality education for kids. So we are trying to do that.

I think the biggest piece that we have learned ourselves, and by the way, we have worked with the Casey Family Programs too because their work in child welfare has been significant in our state as well. But what we have to learn is that we don't need the credit for it. What we need is the results. We need for communities to be better for children. So for us, from our perspective at the Skillman Foundation, we step back and we say, "You want to call this school the Warren Buffett School, that is fine with us." What we need is for that school to become the best possible school educating children. So I think we work very hard to do that.

Then finally I'll say it isn't easy. It is not easy at all to bring all of this together in this way. But I believe that philanthropy recognizes that the problems that we are experiencing now are so complex and serious that we have to work differently.

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