

Background:

Exposure to crime and trauma has profound and lasting consequences that necessitate a response legislatively. Historically, the Victims of Crime Act (VOCA), designed to serve and support victims of all forms of crime, has been funded with federal pass-through dollars from the Crime Victims Fund. This pool of federal funds has significantly fallen in recent years. Connecticut utilized one-time ARPA funds to supplement and sustain the program in FY 23 and FY 24. However, it is anticipated that VOCA grants will experience a roughly 40% reduction in funding in FY 25. Connecticut needs to direct its own state funds to maintain this vital program minimally at existing levels or risk costly downstream consequences.

Vital Statistics

It is eye-opening to learn that exposure to trauma has profound mental and physical health consequences, as well as significant societal and economic consequences. Consider the following:

- Lifetime prevalence of exposure to trauma in the U.S. is 6.8%.
- Up to 20% go on to develop PTSD, equating to approximately 44.7 million people in the U.S.
- Exposure to trauma in childhood, commonly referred to as Adverse Childhood Experiences (ACES) has long-lasting effects behaviorally and medically:
 - 4-12x greater risk for alcoholism, drug use, depression, and suicide
 - 2-4x greater risk for sexually transmitted diseases
 - o 1-3x greater risk for heart disease, cancer, diabetes, and strokes
- Economically, the annual cost of trauma to American society is estimated to be \$42.3 billion

To date, 37 states have enacted or adopted ACEs legislation. Unfortunately, CT is one of 13 states yet to do so (Adverse Childhood Experiences (ncsl.org))

Policy and Funding Recommendations

- Utilize state funds to backfill the shortfall in federal dollars to maintain the VOCA program at existing levels
- Fund and increase access to preventative screening programs that can detect mental health and trauma symptoms earlier and help families access lower cost services rather than waiting for a problem to worsen and have to use higher cost services. Truly, funding an ounce of prevention is worth far more than a pound of cure.
- Fund and utilize Two-Generation strategies delivered by Community Health Workers that simultaneously address the needs of parents and children to improve outcomes for the whole family.
- Approve Medicaid reimbursement for Community Health Workers, who are ideally trained to understand the impact of social determinants of health on mental and physical well-being and to bridge families to services.

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