**BILL ANALYSIS**

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| Senate Research Center | H.B. 4183 |
|  | By: Parker et al. (Perry) |
|  | Health & Human Services |
|  | 5/14/2019 |
|  | Engrossed |

**AUTHOR'S / SPONSOR'S STATEMENT OF INTENT**

Adverse childhood experiences (ACEs) are traumatic events that can disrupt neurodevelopment and increase the likelihood of negative health, behavioral, educational, and economic outcomes. These experiences can include child maltreatment in all its forms as well as other challenges such as living with a caregiver who is experiencing mental illness, substance use, violence, or incarceration. When compound adversities are experienced early, often, and without supportive relationships and environments, affected children are much more likely to become adults who engage in risky health behaviors and suffer from mental and physical illness, disability, chronic disease, and early death.

H.B. 4183 seeks to facilitate a cross-system collaboration to better understand the prevalence and impact of ACEs in Texas and create a five-year plan to empower systems and communities to better prevent and mitigate the effects of early adversities and implement best practices to build resiliency in children and families.

H.B. 4183 amends current law relating to addressing adverse childhood experiences and developing a strategic plan to address those experiences.

**RULEMAKING AUTHORITY**

This bill does not expressly grant any additional rulemaking authority to a state officer, institution, or agency.

**SECTION BY SECTION ANALYSIS**

SECTION 1. Amends Subchapter B, Chapter 531, Government Code, by adding Section 531.0222, as follows:

Sec. 531.0222. COORDINATION TO ADDRESS ADVERSE CHILDHOOD EXPERIENCES; PROGRESS REPORT AND STRATEGIC PLAN. (a) Defines "adverse childhood experience" for purposes of this section.

(b) Prohibits a program, service, or support established under this section from including sex education.

(c) Requires the Health and Human Services Commission (HHSC), in collaboration with the Department of Family and Protective Services, the Department of State Health Services, the Texas Education Agency, the Texas Workforce Commission, the Office of the Attorney General, the Texas Juvenile Justice Department, and an institution of higher education, as defined by Section 61.003 (Definitions), Education Code, with expertise in addressing adverse childhood experiences through a public health framework, in order to reduce exposure of children in this state to adverse childhood experiences and to address the social, health, and economic impacts of those experiences, to:

(1) analyze data related to the causes and effects of adverse childhood experiences, including data from the Behavioral Risk Factor Surveillance System established by the Centers for Disease Control and Prevention of the United States Public Health Service;

(2) evaluate prevention needs and gaps in services and support regarding awareness, assessments, and interventions addressing adverse childhood experiences;

(3) identify methods to incorporate best practices for preventing and treating adverse childhood experiences into existing services and support programs offered for children and families; and

(4) develop and implement a five-year strategic plan to prevent and address adverse childhood experiences.

(d) Authorizes HHSC, in developing the five-year strategic plan under Subsection (c)(4), to collaborate with representatives of certain listed entities.

(e) Requires the strategic plan to incorporate a public health approach that promotes collaboration between agencies and community-based providers. Authorizes the strategic plan to include strategies to:

(1) train and educate professionals to assess, intervene, and prevent adverse childhood experiences;

(2) provide trauma-informed practices for families, children, and providers impacted by adverse childhood experiences;

(3) provide high quality child care;

(4) provide support to parents to develop social and economic independence;

(5) provide support to strengthen the engagement of fathers in their children’s lives and establish paternity;

(6) incorporate voluntary, evidence-based home visiting programs to strengthen families and to connect families to community resources;

(7) develop parental support programs for teen parents and young mothers;

(8) develop parental education training and counseling programs;

(9) identify best practices for child protective services and investigations;

(10) prevent and treat mental illness and substance use disorder;

(11) prevent family violence; and

(12) prevent chronic diseases related to adverse childhood experiences.

(f) Requires the entities listed in Subsection (c) to develop a community awareness approach to implement the strategies and recommendations in the strategic plan required under Subsection (c)(4).

(g) Requires the entities listed in Subsection (c) to publish the five-year strategic plan required by Subsection (c)(4) on their respective Internet websites.

SECTION 2. Requires HHSC, not later than March 1, 2020, to develop a progress report to include data, best practices, and implementable changes within HHSC’s current capacity.

SECTION 3. Requires HHSC, not later than December 31, 2020, to:

(1) develop the five-year strategic plan required by Section 531.0222(c)(4), Government Code, as added by this Act; and

(2) submit a report to the Senate Health and Human Services Committee, the Senate Education Committee, the Senate Criminal Justice Committee, the House Public Education Committee, the House Juvenile Justice and Family Issues Committee, the House Public Health Committee, and the House Human Services Committee regarding HHSC’s strategies for preventing and treating adverse childhood experiences and any plan to incorporate those strategies into existing services and support programs for children and families.

SECTION 4. Effective date: September 1, 2019.