

VIRGINIA LAW ENFORCEMENT LEADERS:

Cutting Crime & Prison Costs

Extending health insurance will help parents with mental illness or substance abuse disorders, protect their children, and cut crime.



ACKNOWLEDGMENTS

FIGHT CRIME: INVEST IN KIDS is a national, bipartisan, nonprofit, anti-crime organization. The organization has a membership of nearly 5,000 police chiefs, sheriffs, district attorneys, other law enforcement leaders and violence survivors. The members take a hard-nosed look at what approaches work—and what don't—to prevent crime and violence. They then recommend effective strategies to state and national policymakers. It operates under the umbrella of the Council for a Strong America.

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EXECUTIVE SUMMARY

Our state must make an important choice that will impact Virginia law enforcement's ability to fight crime. That choice is whether to accept available federal funds to extend health insurance coverage for low-income Virginians.

Nationally, extending health insurance could bring coverage to more than 15 million adults, including 4.6 million women of child-bearing age. Another estimated four million children will gain coverage once their parents or caregivers enroll because parents without insurance are three times more likely to have uninsured children. Accepting federal funds to extend health insurance to low-income Virginians could bring coverage to almost 400,000 adults, including close to 100,000 parents. There are also 25,000 children in Virginia who would be more likely to become enrolled because their parents would gain coverage. In addition, over 110,000 women of child-bearing age in the state would become newly eligible.

As law enforcement leaders, we know that we save money and lives when we use proven, cost-effective interventions to treat individuals for mental health illnesses and substance or alcohol abuse. Providing troubled parents with treatment can help keep

their children from being abused, neglected, or born with Fetal Alcohol Syndrome, which can reduce their risk of growing up to become involved in crime. Increased coverage for children can also help prevent violent, drug-abusing youth from becoming violent, drug-offending adults. When health insurance coverage reaches more low-income parents and children, our state prevents crime and ultimately spends less on prisons.

The federal government is shouldering almost all of the costs of extending health insurance in Virginia: the entire cost is provided by the federal government through 2016, and 90 percent of the cost afterwards.

Unless Virginia extends health insurance to low-income individuals, men, women and children will not be screened and treated for dangerous problems. "Out of sight, out of mind" does not work well when you, a loved one, or one of our officers are staring down the barrel of a gun. And it does not cover the state-incurred costs of years of special education or confinement in a prison. There are many important reasons to accept available federal funding to provide health coverage to low-income parents and children in Virginia. Preventing crime and violence is one of them.

In the long-term, extending health coverage in our state will result in:

1

LESS ABUSE AND NEGLECT:

Up to two-thirds of child abuse and neglect cases involve parents who abuse drugs or alcohol. With health insurance extension, almost 100,000 parents would gain coverage in Virginia. Many of those parents would gain access to drug and alcohol treatment, which would help reduce the 5,800 confirmed child victims of abuse and neglect every year in Virginia.

2

FEWER CASES OF FETAL ALCOHOL SYNDROME:

According to the National Institutes of Health, "Prenatal alcohol exposure is the leading preventable cause of birth defects in the United States." By the time many low-income women know they are pregnant and can sign up for health insurance, most of the serious damage to their baby from drugs or alcohol has already been done and that child is at a higher risk for committing later crime. By getting more women insured we can reach them with opportunities for screening, counseling and treatment before they become pregnant.

3

FEWER CHILDREN ON THE PATH TO CRIME AND VIOLENCE:

Children or teens who have aggression or substance abuse problems can be given effective help through health insurance to help steer them away from violence, drugs, and prison. These medical interventions typically cut future arrests in half or more and save an average of \$25,000 to more than \$30,000 per child served.

VIRGINIA LAW ENFORCEMENT LEADERS:

CUTTING CRIME AND PRISON COSTS

Extending health insurance will help parents with mental illness or substance abuse disorders, protect their children, and cut crime.

INTRODUCTION

Our state must make an important choice that will impact Virginia law enforcement's ability to fight crime. That choice is whether to extend health insurance coverage for low-income Virginians. Right now, we can decide to accept available federal funds to make these improvements, or our state can pay the costs of not preventing crime in the years to come.

Virginia's law enforcement is very proud of the role effective law enforcement efforts have played in bringing down violent crime in cities around the state. But as we fight on the front lines, we know that more needs to be done.

If low-income families receive medical insurance, they are more likely to be routinely screened and treated for their health problems such as substance abuse, depression or excessive aggression. Left untreated, these problems make parents more likely to abuse or neglect their kids and troubled children whose problems are not addressed are more likely to become substance-abusing or violent adults.

In addition, low-income mothers would gain access to counseling before their child is born, preventing cases of Fetal Alcohol Syndrome and the higher risk that those children have of being arrested or incarcerated later in life.

That is not just more effective health care, it is effective crime prevention. Not only will extending health insurance save our

state money in the long-term, but the entire cost is covered by the federal government for the first three years, and 90 percent in the years afterwards.

WHO WOULD GAIN ACCESS?

Currently, low-income women in Virginia who know they are pregnant can receive health insurance to help ensure that their child will be born healthy. But they become eligible only two months before the month in which their child is born. Furthermore, Virginia recently restricted some low-income pregnant women from receiving health insurance. Now, a single mother having her second child who is making \$29,000 a year is no longer eligible. Only six states have lower income eligibility limits.¹

Extending health insurance would allow more women to access services before they become pregnant. Nationally, there are 4.6 million women of child-bearing age who will become eligible for coverage if health insurance is extended in all states.² Out of the estimated 400,000 adults who would become eligible, there are over 110,000 women in Virginia who are 19 to 44 years of age that would gain access to health coverage if extended.³

Research shows that children with uninsured parents are three times more likely to be uninsured than children whose parents have public or private coverage.⁴ Therefore, nationally, it is estimated that almost four million low-income children will become covered if their parents or guardians become eligible for

NATIONALLY – IF HEALTH INSURANCE COVERAGE IS EXTENDED IN ALL STATES

Low-income women of child-bearing age who will become eligible. ^a	4,600,000
Low-income children who will likely become enrolled if their parents or guardians become eligible. ^b	4,000,000

IN VIRGINIA – IF HEALTH INSURANCE COVERAGE IS EXTENDED

Low-income women, 19 to 44 years of age, who will become eligible. ^c	110,000
Low-income children more likely to become enrolled when their parents or guardians become eligible. ^d	25,000

SOURCES: a: Kenney, Urban Institute (2012). b: Holahan, Henry J. Kaiser Foundation (2012). c: Robert Wood Johnson, Urban Institute (2012). d: Heberlein, Georgetown University Health Policy Institute (2012).

health insurance.⁵ Of the 98,000 parents in Virginia who would become eligible, approximately 25 percent have children who are already eligible for Medicaid but not enrolled. That amounts to 25,000 children in Virginia who are more likely to become enrolled and receive better screening and services.⁶

PREVENTING FETAL ALCOHOL SYNDROME

Currently, health insurance coverage for low-income women can only begin once they know they are pregnant. At this point, it is often too late to avoid Fetal Alcohol Syndrome. With health insurance extension, over 110,000 women in Virginia who are 19 to 44 years of age would become eligible for coverage and able to access services ahead of pregnancy.⁷

“The estimated cost to the nation of Fetal Alcohol Syndrome is \$3.6 billion.”

of pregnancies in the United States are unplanned.⁹ Yet many women drink frequently: in Virginia, 54 percent of women report drinking in the last 30 days and more than one in ten women report binge drinking of four or more drinks at least once in the past 30 days.¹⁰

According to the National Institutes of Health, “Prenatal alcohol exposure is the leading preventable cause of birth defects in the United States.”¹¹ A total of 40,000 newborns in the U.S. suffer from alcohol-related birth defects each year (approximately one in every 100 live births). This includes an estimated 0.5 to 2 children out of 1,000 who are born with Fetal Alcohol Syndrome.¹² Applying this rate to Virginia means that over 1,000 children are born with alcohol-related birth defects each year in Virginia, and over 200 children are born with Fetal Alcohol Syndrome.¹³

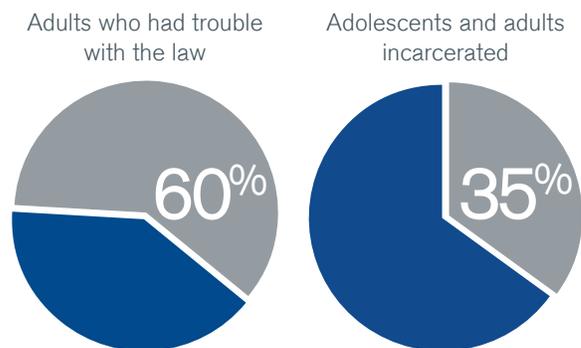
“Prenatal alcohol exposure is the leading preventable cause of birth defects in the United States.”



Though there is no safe period for women to drink during pregnancy, the more serious damage to the developing child is done by alcohol exposure in the first seven weeks of pregnancy.⁸ This is a time when many women are still unaware they have conceived; in fact, approximately half

Children born with Fetal Alcohol Syndrome also have an increased likelihood of committing future crime. One study found that 60 percent of adolescents and adults who were born with Fetal Alcohol Syndrome had trouble with the law, and 35 percent had been incarcerated. The study also found that children with Fetal Alcohol Syndrome who were diagnosed earlier and offered help were less likely to be in trouble with the law.¹⁴

CRIME AMONG THOSE WITH FETAL ALCOHOL SYNDROME OR FETAL ALCOHOL EFFECTS



Like with many diseases, treatments for alcoholism or substance abuse disorders are not one hundred percent effective, and alcohol or substance abuse has to be treated as a lifelong health problem that often needs additional treatment. But giving more young women the opportunity to be screened, counseled, and, if need be, directed into treatment covered by insurance is crucial to prevent Fetal Alcohol Syndrome or at least lessen the likelihood it will lead to crime.

SAVINGS FROM MEDICAL TREATMENTS FOR YOUTH WITH AGGRESSION OR SUBSTANCE-ABUSE PROBLEMS

Proven Interventions	Program costs	Net savings to taxpayers & victims (after subtracting the cost of the program)
Aggression Replacement Training	\$1,510	\$29,740
Functional Family Therapy	\$3,261	\$30,706
Multisystemic Therapy	\$7,370	\$24,751
Multidimensional Treatment Foster Care (vs. regular group care)	\$7,922	\$31,276

Washington State Institute for Public Policy (2012)

REDUCING CHILD ABUSE AND NEGLECT

Crimes involving child victims are the most difficult and distressing for law enforcement officers to respond to. Law enforcement across the nation respond to cases involving almost 700,000 child victims of abuse and neglect every year, including more than 5,800 confirmed child victims of abuse and neglect every year in Virginia.¹⁵

Children are far more likely to be abused or neglected by a parent than any other person in their lives, and research shows that up to two-thirds of all cases involve parents who abuse drugs or alcohol.¹⁶ If health insurance coverage is extended in Virginia, approximately 98,000 parents would become newly eligible for coverage.¹⁷ These parents would gain access, if needed, to services including drug and alcohol treatment and mental health counseling.

While most survivors of childhood abuse and neglect never become criminals, research shows that being abused or neglected almost doubles the odds that a child will commit a crime by age 19 when compared to youth from similar backgrounds.¹⁸ Health insurance coverage provides access to proven programs such as the Nurse Family Partnership, a voluntary home visiting service that cut abuse and neglect in half among the children it reached and cut their future arrests in half.¹⁹

Physical wounds eventually heal, but the long-term emotional and psychological trauma of abuse or extreme neglect have lifelong consequences for the victims. We cannot sit around when money is available for proven interventions to stop abuse and neglect.

KEEPING KIDS OFF THE PATH TO VIOLENCE

Most children have relatively stable childhoods and learn self control, so they do not become involved in excessive aggression or, later in life, serious substance abuse. But children who become troubled for whatever reason need help.

Many mental illnesses or behavior disorders do not necessarily increase the risk that an individual will become violent. However, when an individual has a mental illness in addition to alcohol and drug use disorders, their odds of engaging in violence are 26 times higher compared to individuals without these disorders.²⁰ It is important to get these individuals screened and treated for these problems as early in life as possible.

Children who are signed up for health insurance receive periodic screening for health problems. A screening guidebook used by pediatricians, for example, advises doctors to ask parents of 11- to 14-year-old children to, "Tell me your concerns about your child's behavior, moods, mental health, or substance use."²¹

“A baby who grows up to become a troubled youth, dropping out of school, using drugs, and going on to become a career criminal, produces average costs to society of \$2.5 million per individual.”

Simply asking such a general question allows parents to raise concerns if they have them and the doctor to ask follow-up questions, counsel the family or, if needed, direct them to services if there is a serious problem.

ACCESS TO PROVEN MEDICAL TREATMENTS

While not all services are effective, it is important to note that, just as with pharmaceuticals, there are medical treatments that have been put through rigorous randomized trials to ensure they can deliver significant, meaningful help. Health insurance can pay for these proven medical treatments. They include:

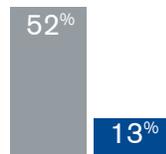
- **The Incredible Years:** There are many young children who are kicked out of preschool or suspended from elementary school for aggressive behavior. This is not the usual pushing another child and taking their toy; these are children throwing chairs or injuring others on a fairly regular basis. The Incredible Years counsels their parents using proven approaches on how to avoid reinforcing aggressive behavior at home.

The researchers studying the program report that it has been able to stop aggression among approximately two-thirds of the children served.²²

- **Aggression Replacement Training (ART):** Designed for seriously aggressive youth, this intervention is based on the proven Cognitive Behavioral Therapy approach that has been shown in multiple randomized trials to be effective in treating children and adults for anxiety, depression and other mental health problems. ART provides these youth with a counselor who helps them develop effective ways to avoid aggression or other troubled behavior.

Juveniles returning to their communities following custody who did not receive ART were almost three times more likely to be re-arrested for a crime than those who went through ART. Another trial with gang

ARRESTED



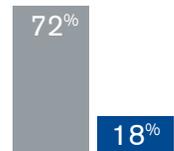
members showed that those without ART were four times more likely to have been arrested following treatment.²³

FAMILY INTERVENTIONS:

There are three family interventions widely used across the United States that help parents learn effective strategies of setting boundaries and reinforcing positive behavior to keep their seriously troubled teens from getting into more trouble due to aggression, substance abuse, or out-of-control and defiant behaviors.

- **Functional Family Therapy (FFT):** This program works with parents and their children to develop more productive behaviors. One study found that the intervention cut re-arrests in half among participating youth and, in another study, those in the program were one-fourth as likely to be placed outside their home in juvenile justice custody, in a psychiatric placement, or in foster care.²⁴
- **Multisystemic Therapy (MST)** is similar to FFT but is more intensive and can also be used with youth who have more

PLACED OUT OF HOME



HEALTH CARE SAVINGS TO VIRGINIA

The Virginia Secretary of Health and Human Resources recently projected that extending health insurance coverage would save our state close to \$1 billion over the next eight years (from July of 2014 through 2022). These huge savings largely result from reductions in current state spending on covering the costs of the uninsured, such as emergency room visits. The estimates were recently presented by Secretary Dr. Bill Hazel, who served in the same role under Republican Governor Robert McDonnell.

SOURCE: Virginia Department of Medical Assistance Services Presentation to the Senate Finance Committee on January 28, 2014.

extensive histories of breaking the law. A 22-year follow-up of one randomized trial of MST showed that those who did not receive MST were three and a half times more likely to be arrested for a violent felony than those who received the treatment.²⁵

Another randomized trial of youth with serious emotional disturbances showed MST reduced the days youth were held in juvenile justice facilities, psychiatric hospitals or other out-of-home placements from an average of 12 days per month to 4 days per month.²⁶



- **Multidimensional Treatment Foster Care (MTFC):** If parents are not in a position to fully participate in treatment initially, children can be placed in specialized foster care homes where the program is followed by trained foster parents, while the biological parents or caregivers are trained to take over once the child returns home.

MTFC cut the percentage of boys who had two or more criminal referrals for violent offenses from 24 percent to five percent.²⁷ Girls not served by MTFC experienced three times as many days in locked settings and were 62 percent more likely to become pregnant.²⁸



In most states, youth are directed to these treatments through the juvenile justice system, often by parents, schools, pediatricians, child welfare officials and others who recognize the need for effective treatment of dangerous behaviors. Health insurance can pay for these proven medical treatments.²⁹

SAVING MONEY

A report from the Centers for Disease Control and Prevention found that the median annual cost of Fetal Alcohol Syndrome is approximately \$3.6 billion, “but the costs associated with the entire fetal alcohol spectrum are surely much higher.”³⁰

Similarly, the cost of not helping a troubled child get on the right path is very expensive. A baby who grows up to become a troubled youth, drop out of school, use drugs, and become a career criminal produces an average cost to society of \$2.5 million per person.³¹

That explains how avoiding birth defects and getting troubled children back on track can save so much money. An independent Washington State government analysis of savings from four of these proven programs shows they produce average net savings of \$25,000 to \$31,000 per child served.³²

CONCLUSION

Virginia policymakers have an important choice to make. From the perspective of Virginia’s law enforcement leaders, one of the most important reasons to extend health insurance coverage is to prevent crime and to save money. If we don’t confront these problems, our state will have to pay for the unabated costs of uninsured health care and special education, and the costs of incarcerating criminals.

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