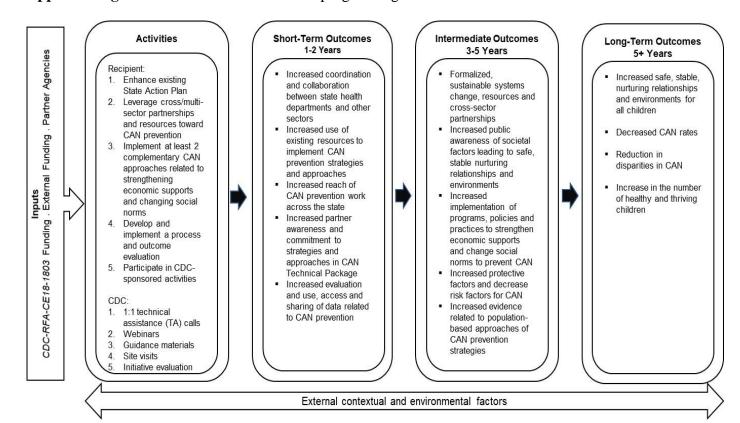
Appendix Figure 1. Essentials for childhood program logic model.



Appendix Table 1. Prevention Strategies Implemented by States^a

Variable	Number of states
Strengthening economic supports	
Family-friendly work policies	
Paid family and medical leave	3
Other efforts (including livable wages, consistent schedules, etc.)	3
Strengthening household financial security	
Increasing federal nutrition assistance program enrollment	2
Increasing EITC access (including state programs)	3
Increasing TANF awareness and education	1
Changing social norms	
Public engagement and education campaign	
Community connectedness	2
Corporal punishment	1
Parenting norms (including help seeking)	2
Societal factors for SSNRE (including collective prosperity)	3

^aStates may implement more than 1 approach within the broad prevention strategy categories.

EITC, Earned Income Tax Credit; TANF, Temporary Assistance to Needy Families; Safe, stable, nurturing relationships and environments.

Appendix Table 2. Most Common Outcomes for Implementation of Prevention Strategies and Identified Example Indicators^a

Program-level outcomes	N	Examples of indicators
Increase in childcare subsidies or	4	 Number of childcare subsidies
reimbursement for childcare programs		Reimbursement rate
Increased access to and use of EITC for families	4	 Proportion of EITC-eligible families that apply Proportion of EITC-eligible families that receive the maximum amount possible Number of families with access to EITC Number of households using State EITC
Increased number of business partners that adopt family-friendly policies	4	 Number of business partners supporting the FAMLI Act Number of employers working on establishing family-friendly work policies Number of employers implementing new policies for family-friendly workplaces Indicators for specific policies: Number of businesses with flexible schedules Number of businesses with paid sick and vacation leave Number of businesses with breastfeeding friendly policies Percent of employed adults with unpredictable work hours
Increased number of families connected to resources (e.g., WIC, SNAP, etc.)	3	 Enrollment gap (i.e., eligible versus enrolled) in WIC Enrollment gap (i.e., eligible versus enrolled) in SNAP
Increased number of family-friendly policies introduced and passed	3	 Number of family-friendly policies introduced at the state level Number of family-friendly policies passed at the state level

^aMost common outcomes are those assessed by at least 3 states.

N, Number of states; EITC, Earned Income Tax Credit; FAMLI Act, Family Medical Leave Insurance Program (Colorado); WIC, Special Supplemental Nutrition Program for Women, Infants and Children; SNAP, Supplemental Nutrition Assistance Program.

Appendix Table 3. Outcomes and Indicators That Address Adverse Childhood Experiences (ACEs)

ACEs topic	Example outcomes	Examples of indicators
Household mental illness	Increased protective factors for child abuse and neglect (CAN)	 Percent receiving prenatal and early childhood screening for intimate partner violence (IPV) and maternal depression
	Decreased risk factors for CAN:	 Percent of mothers experiencing maternal postpartum depression Percent of women reporting their doctor, nurse, or other healthcare provider talked to them about depression during a prenatal visit
Household substance abuse	Decreased rates of opioid misuse, overdose, and other opioid-related outcomes:	 Opioid-related morbidity and mortality Percent of past month illicit drug use among adults
	Reduce impacts of parent opioid use disorder (OUD):	 Percent of referrals to OUD treatment Percent of resources identified for finding pregnant women who have not yet engaged in any form of prenatal or substance use healthcare
	More families who are in recovery are connected with services and maintain custody of their children or have their children in kinship care	 Percent of families with reported NAS or SEN who have infants removed Percent of children removed from families with reported NAS or SEN that are placed in kinship care
Mother treated violently	Reduced family violence in the state	Percent of children who have witnessed domestic violence
	Decreased risk factors for CAN	 Number of domestic violence incidents Percent of mothers reporting intimate partner violence (IPV) Percent of new mothers reporting physical partner violence during pregnancy Rate of intimate partner violence

	 Percent of women reporting their doctor, nurse, or other healthcare provider talked to them about partner abuse during a prenatal visit
Exposure to community violence in the state:	 Percent of children who have experienced bullying or youth violence
SES Decreased risk factors for CAN:	 Percent of children aged 0–5 years living in poverty Percent of parents who report somewhat or very hard to get by on family's income Percent of children who are homeless Percent of children living in neighborhoods with >30% of residents below the poverty line

NAS, Neonatal abstinence syndrome; SEN, Substance-exposed newborn.