



An Analysis of Primary and Secondary
Child Abuse and Neglect Prevention in the 2001-2004
Child and Family Service Reviews and Program Improvement Plans



FRIENDS National Resource Center for Community-Based Child Abuse Prevention
A Service of the Children's Bureau



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INTRODUCTION

In 2004, the Program Instructions (PI) for the Community-Based Child Abuse Prevention (CBCAP) grants strongly encouraged the State Lead Agencies that obtain the CAPTA Title II funds to begin linking/coordinating with their child welfare counterparts around the CFSR/PIP process and the Child and Family Services Plan (CFSP)/Annual Progress and Services Report (APSR) processes. Over the last several years, the Office on Child Abuse and Neglect at the Children's Bureau has emphasized the need for more thoughtful joint planning efforts between the CBCAP program and child welfare agencies in order to more effectively respond to the needs of children and families. A continuum of services and a comprehensive system of care needs to be in place before this can happen. Both the prevention and child welfare systems have important roles to play at different times along the continuum of care. This report is an attempt to compile what has been documented in the CFSRs/PIPs around the states' linking/coordination efforts. The report also highlights the points of intersection across the programs and shared work that needs to happen to improve outcomes for all children and families.

The Child and Family Reviews

The Child and Family Service Reviews (CFSR) are the result of an effort at the federal level to ensure states are in compliance with the requirements of Title IV-B and IV-E of the Social Security Act (SSA).¹ In 2000, DHHS formalized the CFSR as a new method of assessing states' compliance.² The first round of the CFSRs in all 50 states, Puerto Rico, and the District of Columbia were conducted during the 2001–2004 fiscal years by the Administration for Children and Families (ACF).

The states' performance was evaluated on outcomes within three specific areas—safety, permanency, and well-being—and seven systemic factors (statewide information system, case review system, quality assurance system, staff and provider training, service array, agency responsiveness to community and foster/adoptive parent licensing, and recruitment and retention).³ Each indicator/systemic factor used a specific set of measures to assess if the state was in substantial conformity. For each item in which a state was found not to be in substantial conformity, the state was required to create a plan, known as a Program Improvement Plan (PIP), for bringing their performance into substantial conformity.⁴

¹ U. S. Administration for Children & Families. *Child welfare reviews fact sheet*. Retrieved August 1, 2007, from <http://www.acf.hhs.gov/programs/cb/cwmonitoring/recruit/cfsfactsheet.htm>.

² Ibid.

³ Administration for Children & Families, *CFSR procedure manual*. Retrieved August 1, 2007, from http://www.acf.hhs.gov/programs/cb/cwmonitoring/tools_guide/proce_manual.htm.

⁴ Ibid.

The CBCAP Program

Although the CBCAP program covered under CAPTA Title II is not part of the focus of the CFSR process, the services covered under this legislation might help states be more effective in meeting substantial conformity with many outcome measures used as part of the CFSR process. To appreciate how the CBCAP program can be of assistance, it is important to understand the authorized activities under the program. CBCAP supports prevention activities that work with the community and families to prevent child abuse and neglect. To better illustrate what those activities might be, it is helpful to use the generally accepted frame of the three levels of prevention: primary, secondary, and tertiary.⁵ CBCAP funding should be used for the primary and secondary prevention activities/services as described below:

- Primary prevention consists of activities that are targeted toward the community at-large. These activities are meant to impact families prior to any allegations of abuse and neglect. Primary prevention services include public education activities, parent education classes that are open to anyone in the community, and family support programs. Primary prevention can be difficult to measure because it attempts to impact something before it happens—an unknown variable.
- Secondary prevention includes activities targeted to families that have one or more risk factors, including families with substance abuse, teen parents, parents of special needs children, single parents, and low income families. Secondary prevention services include parent education classes targeted for high-risk parents, respite care for parents of a child with a disability, or home visiting programs for new parents.
- Both primary and secondary prevention efforts strive to prevent child abuse and neglect before it occurs.

CBCAP funds are not intended for tertiary prevention. Tertiary prevention consists of activities targeted to families that have confirmed or unconfirmed child abuse and neglect reports. These families have already demonstrated the need for intervention, either with or without court supervision. These are families that qualify for services under child welfare programs that are not a focus of CBCAP programs. Services for children who have been abused and their families are the focus of Title IV-B, Subpart 2, Promoting Safe and Stable Families program.

For further information on the CBCAP program go to www.friendsnrc.org.

Why This Matters

The Children's Bureau has strongly encouraged the CBCAP SLA (State Lead Agency) to link/coordinate with the CFSR/PIP process within their state in order to facilitate stronger linkages for the CBCAP programs across the continuum of child welfare services. The results emerging from the initial CFSRs indicated the state child welfare agencies were significantly challenged in providing support and assistance to children and families. In particular, the CFSR findings indicated building an array of supportive services and engaging families in those services has been particularly onerous for many states. It was anticipated that if the state used all available resources they would have increased opportunity to be successful in meeting the requirements of the federal review process.

⁵ Adapted from information on the FRIENDS website www.friendsnrc.org

Despite the emphasis on the linkages/collaborations with their state child welfare counterparts, a number of CBCAP SLAs across the country experienced significant challenges in this area. The feedback they provided indicated they struggled with making the connection with their child welfare counterparts or having sustained, meaningful involvement in the CFSR/PIP process. The CBCAP SLAs believed this was because their child welfare counterparts were not given similar messages to specifically collaborate with CBCAP.⁶ Even if they did manage to connect with their child welfare counterparts they also struggled with knowing where they/the program could be of assistance to the CFSR/PIP process. While numerous CBCAP SLAs struggled to create meaningful linkages and collaboration around their state's CFSR/PIP process, others were more successful. The feedback from the CBCAP/PSSF grantees meeting held in April 2005 provided us with specific examples. These linkages focused mainly around working on the CFSRs, the Areas Needing Improvement in the PIPs specifically well-being and service array, and around funding priorities.⁷

The focus of this review is to highlight where collaboration and coordination with the CBCAP SLA is identified in the state CFSR/PIP reports, and, more specifically, to highlight where CBCAP programs in primary and secondary prevention are identified as a resource to states to meet the requirements of the CFSR/PIP.

While the CBCAP total grant dollars are small in comparison to other child welfare funding streams, the funds for prevention and the programs and services provided could be helpful to states in addressing some aspects of the service delivery system. For example, CBCAP resources could help fill the gaps for upfront services needed to provide supports to children and families prior to an open case with the child welfare agencies, to engage families, or even to connect with the collaborative prevention networks that are developed as part of the CBCAP grant program.

This document provides a summary of our findings from this targeted review of the CFSRs/PIPs and highlights potential ways the CBCAP program can be of assistance to the states in being successful in reaching substantial conformity. Additionally, we have created a matrix of the typical services child welfare agencies indicated they were providing that could be categorized as primary and secondary prevention (see Attachment A) and created individual state profiles that contain language from the CFSR/PIP. The individual state profiles are available online at www.friendsnrc.org.

Since the state child welfare administrators are now in the process of preparing for or going through the second round of CFSRs, it is hoped that the content of this report will inform the current CFSR process. This report provides baseline information to states and reviewers regarding what collaborative efforts were taking place between welfare and prevention, where collaborative efforts can be mutually beneficial, and the importance of highlighting these activities in the Statewide Assessment, the CFSR, and the subsequent PIP, should one be needed.

⁶ Summary of Collaboration Activities, CBCAP/PSSF grantees meeting, April 18 and 19, 2005, Boston Massachusetts. Retrieved August 1, 2007, from http://www.friendsnrc.org/download/collaboration_summary.pdf

⁷ Ibid.

METHOD

The CFSR and PIP reports from the first round for the 50 states, the District of Columbia, and Puerto Rico were reviewed. Specific word searches were conducted and relevant phrases were extracted to gain an understanding of the context and the broader meaning. Our word searches included, but were not limited to: prevention or any derivative of it; family support and family preservation; family engagement or involvement; and collaboration and coordination. We also looked at the specific outcome indicators for safety, permanency, and well-being and the systemic factors for service array, quality assurance, and responsiveness to the community.

Limitations

As we examine the findings, it is important to keep in mind the limitations inherent in this type of review. The most noteworthy limitations are as follows:

- Many of the first round CFSR documents were written a few years ago (some date back to 2002). While the document might indicate what was going on in the state at the time of the review/report writing, it does not necessarily reflect the full extent of what was taking place, nor does it reflect what is going on currently.
- There were varying levels of comprehensiveness in report writing during the first round. The reports from the reviews performed in the first year of the CFSRs tend to be less comprehensive than those conducted in the last year of the CFSRs.
- The CFSR addresses compliance with program performance requirements for Title IV-E and IV-B, and not CAPTA. As a result, the process did not specifically address collaboration with the CBCAP SLA, nor those programs obtaining funding through the CBCAP SLA.
- There was not a specific requirement to document any level of collaboration between the child welfare agency and the CBCAP SLA. So, while collaboration might actually have been taking place, the collaboration would not necessarily have been documented in the CFSR or PIP.
- The term *prevention* has significantly different meanings across the child- and family-serving systems and even within the child welfare system itself. While CBCAP staff refer to primary and some secondary prevention services when they speak about prevention, generally when child welfare staff speak about prevention they are referring to tertiary prevention/prevention of reoccurrence of child abuse and neglect. This was true in the CFSRs/PIPs also.
- While one of the measures for the systemic factor for responsiveness to community addressed the involvement of/collaboration with other federally funded programs, there was not a specific requirement to collaborate with the CBCAP SLA, nor the agencies/programs that obtained CBCAP funding from the SLA. Most states did well on this systemic factor but the document does not necessarily indicate which federally funded programs are involved or they are collaborating with.
- It has only been since 2004 that the CBCAP SLAs were encouraged to collaborate with the child welfare system in a more systematic way.⁸ The documentation showing collaboration taking place is more evident in the CFSRs/PIPs that took place after that.

⁸ U. S. Administration for Children & Families, Community-Based Grants for the Prevention of Child Abuse and Neglect Program Instructions. Retrieved August 1, 2007, from www.acf.hhs.gov/programs/cb/laws_policies/policy/pi/2004/pi0404e2.htm, and www.acf.hhs.gov/programs/cb/laws_policies/policy/pi/2004/pi0404e3.htm, and www.acf.hhs.gov/programs/cb/laws_policies/policy/pi/2007/pi0706.htm.

FINDINGS

The CFSRs provide the majority of the information contained in our findings reflected in this report, the Matrix (see Attachment A), and the state profiles (see Attachment B). We found that the PIPs tended to be more process-oriented, with much of the activities focused around training issues. Most of the relevant information from the CFSRs was contained within the Safety and Well-Being Indicators and the Systemic Factors for Service Array and Agency Responsiveness to the Community.

Indicators

The states' performance for the **Safety Indicator** was based on two key outcome measures: 1) children are, first and foremost, protected from abuse and neglect, and 2) children are safely maintained in their own homes whenever possible and appropriate.

While we did find mention of prevention services under the **Safety Indicator** that could be considered as primary (such as the Shaken Baby Syndrome campaign in New Mexico) and secondary (such as respite care and Family Resource Centers, which are indicated in just under half the states), both of which potentially could be paid for through the CBCAP program funds, the majority of information in this section was more reflective of services provided when children are reported to or become involved with the child welfare system. Generally these services are paid for through a different funding stream. This should be of no surprise given that the focus of the CFSRs are the programs/services that are paid for through Promoting Safe and Stable Families and Title IV-E funds.

The absence of information about the CBCAP program and services could be reflective of many things. Perhaps the absence is as telling, if not more telling, of the potential disconnect between the CBCAP program and the formal child welfare system. Despite the requirement that the SLAs collaborate with their counterparts on the CFSR/PIP process, the CBCAP SLAs indicated that if they were included in the statewide assessment process or the CFSR, they were often not included in the PIP development/implementation process.⁹

In the individual state profiles that accompany this report, we include language extracted from the larger CFSR and PIP documents to demonstrate what the state had included in the area of prevention. This information can be divided into two categories: approaches and services. Generally we see states utilizing approaches such as family-centered practice, family group decision making/structured decision making, or family group conferencing, family teams, and System of Care (SOC). The list of services can be grouped into the following: concrete services (transportation, housing, day care, food); family supports (parenting education, respite care, home visiting); intervention (community-based diversion programs, parenting classes, wraparound services); and treatment (for substance abuse, mental health problems, sexual abuse). See the state profiles for state-specific information at www.friendsnrc.org.

Preparing the Annual Progress and Services Review (APSR) for the Child and Family Services Plan (CFSP): Coordinating the CFSP with Preserving Safe and Stable Families (PSSF) and Community Based Child Abuse Prevention (CBCAP) Funds teleconference. (May 2006). Retrieved August 1, 2007, from <http://muskie.usm.maine.edu/helpkids/telepast.htm#May2>.

⁹ Summary of Collaboration Activities, CBCAP/PSSF grantees meeting, April 18 and 19, 2005, Boston Massachusetts. Retrieved August 1, 2007, from http://www.friendsnrc.org/download/collaboration_summary.pdf

As stated in the upcoming prevention section on page 8, very few states mentioned primary prevention types of services. The prevention section also provides details regarding how prevention was defined and used in the CFSR/PIPs and the specific services that were reported by each state. While often there was indication of a wide array of services that were available, the states were frequently unable to have them accessible throughout the state. See p. 9 under service gaps for more discussion on services and gaps.

The report section of the CFSRs under the **Well-Being Indicator** provided much of the information on parent involvement/engagement and collaboration efforts. See relevant sections below for further details.

While we thought we might find potentially useful information under the **Permanency Indicator** that would be informative to this review process, this proved not to be the case. The focus of this particular section of the CFSR reports address issues of permanency for children in care. Any mention or discussion about services reflected those focused more on intervention/treatment services and on supporting children in the community when they are being reunified. The use of prevention within the context of this indicator was used in reference to preventing reoccurrence of abuse. While these types of services are very important and it is crucial for them to be provided for the child to be successfully reunified, they are not included in this summary as they are not within the parameters of what can be provided/funded under the CBCAP program.

Systemic Factors

It was anticipated that we would find useful information under three key systemic factors: **Service Array, Agency Responsiveness to Community, and Quality Assurance.**

The Service Array systemic factor yielded much of the information contained in this report. It delineates the services provided, in particular prevention types of services and service gaps. While the Agency Responsiveness to the Community is the other systemic factor that yielded much information in this report on collaboration and coordination activities, there was little mention of the activities being associated with prevention (primary or secondary) efforts and initiatives. See the Prevention and Service Gaps Sections below for further details.

Although there was information within the Service Array and Agency Responsiveness to Community, there was no relevant information under Quality Assurance. This is an area in which the CBCAP SLAs could be very helpful, however, there was little information that would indicate any significant level of involvement. In some cases, the CBCAP SLAs might not be named in the CFSR report, but there was some indication of their involvement at some level of review of the system. In several states the CFSR report described inclusion of representatives with expertise in prevention and treatment of child abuse and neglect in the State External Review System and Citizen Review Panel.

Potential role for CBCAP Program

Quality Assurance programs may be an area in which states could involve the CBCAP SLA or local program in the upcoming round of CFSRs. In Minnesota, the person who is responsible for oversight of the CBCAP program is also responsible for the quality improvement program. Minnesota is using the performance data on targets related to safety and reallocating the

CBCAP grant dollars for child abuse and neglect prevention services to areas of the state where performance targets are not being met. This has allowed the state to think creatively about how prevention (primary and secondary) can be of assistance in helping address safety of children in the community.

New Mexico is also using its child welfare data to allocate funds and found that a high number of child deaths resulted from being shaken. In response, the state targeted funds to a Shaken Baby Syndrome campaign to heighten community awareness around this issue. Other CBCAP SLAs have indicated that as their child welfare counterparts have begun to realize the value of the CBCAP program/SLA they have been recruited to help with many aspects of the PIP or preparations for the upcoming statewide assessment.

CFSR/PIP Reviews

Findings are summarized within targeted areas in which the CBCAP program may assist the state child welfare agency in successfully completing their PIPs, in the upcoming round of CFSRs, or other aspects of the CFSR/PIP process. The key focus areas are as follows:

1. Prevention
2. Service gaps
3. Family engagement/involvement
4. Collaboration/coordination
 - Involvement in the CFSR/PIP
 - Funding
 - Meetings/committees/task forces
 - System reform efforts

1. Prevention

The majority of information obtained on prevention was reported in the Safety Indicator or the Service Array Systemic Factor. There was little mention of the continuum of prevention services. As mentioned earlier, it was rare to find the inclusion of the words "primary prevention" or "secondary prevention." Prevention was used mainly to refer to prevention of reoccurrence of child abuse or the child returning to care. Generally the CFSRs and PIPs reflect prevention activities and services that are meant to prevent reoccurrence of abuse or neglect and are focused on intervention or tertiary prevention services. Sometimes the word "prevention" was used to reference prevention of removal of children from the home. Family preservation services were generally indicated as being used to address this issue.

There was mention of alternative response/multiple response/diversionary services for cases reported and accepted by the child welfare agency and assigned to a non-investigation assessment pathway or cases reported to the child welfare agency and screened out and referred to appropriate community-based services. In 2006, there were 12 states (Arizona, Connecticut, Georgia, Indiana, Kentucky, Minnesota, Missouri, North Carolina, Oregon, Texas, Wisconsin, and Wyoming) that used CBCAP funds to partially fund their state's version of an alternative response model of service delivery.¹⁰ We found that three states indicated they were developing a state prevention plan. At present, there are a number of states that have completed state prevention plans. In the past few years, more states have been moving

¹⁰Annual reports for 2006 from the FRIENDS website. Retrieved August 1, 2007, from www.friendsnc.org/resources/06sum.htm.

towards developing a comprehensive state prevention plan with a continuum of prevention services that include primary, secondary, and tertiary prevention or that use the Centers for Disease Control and Prevention model of universal, selective, and indicated prevention continuum.

These results support the verbal feedback we obtained from the CBCAP SLAs. They indicated that they often used the term "prevention" in a different way than their counterparts in the child welfare agency and thus found communication around this topic challenging. Generally their counterparts did not think of prevention within the context of the continuum of prevention services, which would include primary and secondary , but rather in the context of intervention/treatment or tertiary prevention services. The key findings on prevention are as follows:

Mention of primary prevention or involvement of the Children's Trust Fund or Community-Based Family Resource and Support/CBCAP program as part of the array of services to prevent abuse and maintain safety	FL, IL, MI, MO, NC, NH OK, PA, RI, UT Note: all are states where the CBCAP grant dollars are administered by the child welfare agency
Use of the words primary and secondary prevention	FL, NC, MI, NJ, OK, RI
Finished or in the process of developing a state plan for prevention	NM, RI, TX,

2. Service Gaps

When examining the identified gaps in services, it is interesting to note that many of them are similar services being supported by CBCAP. They are services that are important for states to provide and that help families and children in their communities.

The following are examples of where states indicated they struggled with meeting the demand for services:

Keeping children safe in homes and preventing removal	AK, AR, CA, IO, LA, MI, NV, NJ, PR, SC, UT
Prevention services	MI ¹¹ , NE, NJ ¹² , NY, NC ¹³ , OR ¹⁴ , VA, WA, WI,
Issues of prevention or early intervention	AK, HI, MO, TN, FL, IL, NE, WI, GA, ME, SC, WY
Rural	AK, AR, AZ, LA ¹⁵ , MI, SD, TN, VA
Wraparound community-based services, child care, and transportation	NY, NE, OH, RI
Housing	DC, OH
Bilingual services	MD, RI

¹¹ lack enough for families reported to CPS but not enough issues to open the case and too time limited

¹² those that would help to resolve issues and preclude contact with Child Welfare agency

¹³ not statewide

¹⁴ dealing with neglect

¹⁵ in all jurisdictions

Other examples of service needs along the prevention continuum:

Reunification services	AK, AR, IO, LA, ME, MI, WA ¹⁶
Providing services to prevent reoccurrence	AK, AR, CA
Individual needs	ID, IO, MD, MA ¹⁷ , MI ¹⁸ , VA
Insufficient resources	NY, TX, UT, WI, WY
Long waiting lists	ME, MH, MS ¹⁹ , NE ²⁰ , NV, VA ²¹ , VT
Timing/scheduling for services issue for parents	NY, PR, VA

Additional examples of identified service gaps, many of which are important supports for families at risk of involvement, that may be supported through the CBCAP/prevention funds:

- parent aides,
- flexible funds,
- respite care,
- culturally appropriate services,
- domestic violence services,
- services for the developmentally delayed,
- in-home services, and
- mentoring.

Plans for addressing service gaps

The states planned to address the identified service gaps in several ways. Many of the states with identified service gaps in prevention and early intervention types of services, however, did not indicate specific improvements for that area of service.

Examples of proposed solutions involved developing:

Capacity of family resource centers to provide in-home services to families in contact with the child welfare system	NC
A prevention plan for a full continuum of services through intervention and treatment ²²	NM, RI, TX

¹⁶ lack of resources to support relative caregivers and insufficient respite for foster parents

¹⁷ System of Care

¹⁸ need more services to have greater flexibility to meet individual needs

¹⁹ family preservation

²⁰ prevention services

²¹ rural

²² While only three states wrote in their CFSR/PIP they were developing a prevention plan, we know there are many other states that have or are in the process of developing their own statewide prevention plan.

A resource development plan	AR, FL, GA, ME, MD
A service inventory	NJ, NY
A directory of available services	AR, GA, MD, RI

Examples of proposed solutions involved collaboration around:

1. Wraparound initiative	AZ, AK, MD, ND
2. System of Care	MA
3. Culturally appropriate services	NV, NJ
4. Expanding array of services	NM, RI
5. General collaboration	NY, RI
6. Family-centered service model and wraparound	SD, WI, WY
7. Care Management Teams	RI

While many states might have an extensive array of services, the rural areas seemed to be where service gaps were experienced. The most common identified service gap was mental health services, which impacted the state's ability to be in substantial conformity with the well-being indicator.²³ While many of the states struggled to meet the performance requirements regarding the well-being of children, whether in state custody or living with their families, these tertiary/intervention types of services were not included as the CBCAP program could not be used to pay for them.

3. Family Engagement/Involvement

This is another key area in which states labored to meet the CFSR indicator. States were assessed as to whether parents and youth, when appropriate, were involved in the case planning process and visitation was taking place. Family/youth involvement was documented in the CFSR reports through programs/approaches such as Family Group Decision Making, Family Group Conferencing, Family Teams/Team Decision Making, Structured Decision Making, or case planning.

For the group of states that were not in substantial conformity with the engagement/ involvement of the family, this was frequently due to the lack of availability of the abovementioned approaches across the whole state. States may have had successful pilot sites for relevant approaches/programs but they were not operating across the whole state. These approaches highlight the importance of the family being in a key decision-making role and identifying the family's strengths and needs with the focus being on individualizing the services to meet those needs. Two states (MD and TN) mentioned they were implementing the

²³For additional information regarding the analysis on the states' performance around addressing mental health needs, go to *An Analysis of Mental Health Issues in State Child and Family Services Reviews and Program Improvement Plans* at http://gucchd.georgetown.edu/files/products_publications/CFSR_MH_ANALYSIS_FINAL_4-04.pdf.

Family-to-Family program as a way to obtain family engagement/involvement. North Dakota referenced a partnership with Casey Family Programs in which they are working to implement Family Decision Making in two sites (both tribal reservations).

In the PIPs, more than half the states proposed either the implementation or expansion of a version of Family Group Decision Making (FGDM). In states where FGDM was identified as not being effective, additional staff training in how to implement the approach or how to more effectively engage families was planned. FGDM was the most common program identified in the CFSRs as only being implemented in a limited way.

Another common solution states proposed to increase family involvement was to ensure that policy changes, practice standards, or guidelines emphasized the importance of the child and family involvement in case planning and the importance of documenting such involvement in the case file. States identified other unique services, alternative approaches, and structured feedback loops to engage families and obtain family input.

Examples of the unique services mentioned were:

Emergency Assistance Program	DC
Family Builders, Project Thrive, Intensive Family Preservation, and Healthy Families	AZ
Alternative Response System	WA

Examples of the alternative approaches included:

One Family One Worker	IA, NJ
Engaging Families Initiative	TN
Family Handbook	NE
System of Care	OR
Practice standards	DC, PA, RI, UT, WY
"Nothing Without Me": Families participate at all levels of the organization	NC
Parent/family advocates	AK, MA
Father Program through Children's Trust Fund/CBCAP	RI

Examples of other proposed approaches to structured feedback loops for parent input that went beyond parent involvement in the case planning process:

Involvement in the development or implementation of the CFSP	DC, NE, TX, LA
Strong Families/Strong Children	MI
Feedback on agency performance	AK, ID, MA, TX, KY
County-level family services planning committees	OH
Regional Parent Leadership	CT
Community Connections coalitions	MA

Potential role for CBCAP program to enhance family involvement/engagement

In examining the solutions proposed by the individual states to address the lack of family involvement/engagement, there are only a few child welfare systems that have moved beyond the level of case planning to embrace a broader role for families, such as assistance with the oversight and quality assurance of the overall program. The staff involved with the CBCAP program have experience and wisdom to help states with this aspect; there is a specific requirement for all grantees to have family involvement at all levels. Part of the vision for CBCAP is "to support meaningful involvement of all parents, including parents with disabilities, in planning, implementing, and evaluating prevention programs." In Massachusetts, this is exemplified through the Community Connections coalitions. They coordinate neighborhood-based networks of family support, involve families in planning and decision making regarding deployment of resources, and develop services to fill gaps. There are many tools and trainings available around parent leadership through the FRIENDS National Resource Center for CBCAP. Child welfare counterparts could draw on these to enhance the level of involvement of parents within the child welfare system.

The states that have been involved with the SAMHSA System of Care grants in their communities or those that have a Children's Bureau System of Care infrastructure grant also have resources to draw on to assist with creative ways of involving families. In all three of these abovementioned examples, the state representatives and staff involved have a solid understanding of the benefits of families as partners and the importance of their input at all levels.

4. Collaboration/Coordination

Most of the states were in substantial conformity with the Systemic Factor of the Agency Responsiveness to the Community and indicated involvement in a wide variety of collaborations. One of the measurements for this systemic factor was collaboration with other federal departments or federally funded programs while another was collaboration with community stakeholders and involvement of stakeholders in the Child and Family Services Plan and the annual update to this. While the state's services under the CFSP are coordinated with services or benefits of other federal or federally assisted programs serving the same

population, there is not a specific requirement for collaboration with or involvement of their CBCAP counterpart.

When examining the CFSRs and PIPs, we found about a quarter of the states specifically identified the CBCAP program or the organizations that receive money for community-based child abuse and neglect prevention efforts.

This apparent lack of involvement/inclusion was pointed out at the April 2005 CBCAP/PSSF joint grantees meeting during a session on collaboration of the CBCAP grantees with the Promoting Safe and Stable Families grantees. Many of the representatives responsible for these grants indicated they did not know of the existence of their counterparts, did not know that their counterparts were being strongly encouraged to collaborate with them, and had little idea how collaborating together would be of mutual benefit. This has created unique challenges for many of the CBCAP grantees. It has been difficult for them to engage their counterparts in the state in a dialogue that would facilitate success in meeting their requirements for collaboration.

In this section on collaboration/coordination we have included information on the types of collaborations identified in the CFSR/PIPs where the CBCAP program/SLA potentially could be or is involved to help the child welfare agency meet its upcoming CFSR and PIP performance requirements. They have been compiled into the following groupings: programming; meetings, task forces, and committees; funding; and system reform efforts. In the individual state profiles (see www.friendsnrc.org) we have included more details of the examples of collaborations mentioned in the state CFSR/PIPs to allow the reader a better understanding of what the state indicated was taking place and with whom. Each state profile has the link to the complete Statewide Assessment and the CFSR and PIP reports if more details are needed to get a better understanding of the focus and who was or who was not included.

Programming

States indicated that they had collaborative activities related to programming such as:

- identifying gaps in services and planning to fill these,
- offering input into CFSP/annual reports,
- developing community partnerships to prevent abuse and neglect,
- having family violence response teams for safety and well-being for families,
- creating one-stop-shop centers,
- establishing multidisciplinary teams,
- developing Integrated Care Coordination units,
- having co-location of specialist with child welfare to improve service coordination, and
- developing a visitation program for children in care.

Meetings/task forces/committees

This is where most of the identified collaborative activities are focused. Just over a third of states indicated having Statewide Advisory Groups and local advisory groups. States indicated that these Advisory Groups have input into prevention and family support services, review reports/proposals, advocate for funding with legislators, and/or make recommendations on child welfare issues. Less than 10 states indicated that they had youth advisory groups or

boards. About one-fourth of the states mentioned having some type of task force or council, involving many different agencies/stakeholders that focused on the prevention of child abuse and neglect or had specific expertise in the prevention and treatment of child abuse and neglect. Some of these were identified as developing the state plan for prevention services. A number of states mentioned working in collaboration with the Children's Trust Fund and others involved with preventing child abuse and neglect including the Prevent Child Abuse chapter in their state. Other states mentioned having some type of task force for community involvement to protect community children or having Community Child Protection Collaboratives. These groups might be responsible for reviewing requests for funding for prevention programs or reviewing policies and procedures.

Funding

While funding/budget issues were identified as a reason for service gaps in about 10 states, there were only two states we found that mentioned something about collaborating around funding related to child abuse and neglect. Colorado indicated they used CAPTA to fund/promote coordination activities and form partnerships and to sponsor training and projects. Michigan indicated that Federal Child Abuse and Neglect grant funding was used for training for children services workers through a Child Abuse and Neglect conference that focused on child abuse and neglect prevention.

System reform

While less than half the states made mention of some type of system reform effort, only a few specifically mentioned prevention or early intervention as part of it. For example, in California their collaborative efforts were through Stakeholder Groups that made recommendations regarding a redesign of child welfare with emphasis on early intervention, prevention, and family support. In Nebraska, legislation addressed community-based issues affecting child abuse and neglect.

How CBCAP could be helpful

States indicated that there were multiple barriers to coordination with other federally funded programs, the most common of which were lack of communication and collaboration. The plans outlined in the PIPs for how states were going to address and improve collaboration focused around such issues as: addressing systemic as well as case specific issues; increasing collaboration with other child- and family-serving systems, most frequently in mental health, juvenile justice, and education; the more common areas were mental health, juvenile justice and education; and integrating the work of child welfare with other community-based services for at-risk families.

A large focus of the CBCAP program is around collaboration at the state and local level for such activities as: creating the needs assessment; developing the plan to meet the identified needs; working toward prevention of child abuse and neglect in the communities; and supporting the network or prevention providers. Already many states have begun using this collaboration infrastructure to assist with stakeholder input as part of the statewide assessment.

The vision of the CBCAP program aims to:

- support the development and expansion of community-based and prevention-focused programs and activities to support and strengthen families and prevent child abuse and neglect;
- support meaningful involvement of all parents, including parents with disabilities, in planning, implementing, and evaluating prevention programs;
- enhance states' evaluation capability to determine effectiveness of funded prevention programs and activities;
- promote greater linkages with other national and statewide systems change efforts such as the Child and Family Services Reviews; and
- support training and technical assistance for lead agencies on program and requirements, as well as support ACF Priorities, for example, healthy marriage, responsible fatherhood, outreach to faith- and community-based programs, positive youth development, and the rural initiative.

Given this focus there are many areas for collaboration that would potentially lead to a positive impact for the performance on the CFSRs and subsequent PIP.

CONCLUSION

There has been significant progress made since the initiation of the data collection process for this report. The information gathered during the data collection process was shared with the CBCAP SLAs and PSSF grantees at the 2005 CBCAP/PSSF grantees meeting and several presentations at the States and Tribes meetings and other national venues. Since this review was initiated, there has been some exciting progress made in the partnership between child welfare agencies and CBCAP SLAs. As a result of these various efforts, greater numbers of CBCAP SLAs reported increased involvement with their child welfare counterparts at the 2006 CBCAP/PSSF grantees meeting, the state CBCAP grantees annual reports,²⁴ and the 2006 submission for the CBCAP program state applications.²⁵ Some examples of this growing collaboration include:

- As an outcome of the collaboration discussion at the 2005 CBCAP/PSSF grantees meeting, the grantees in Region IV requested that the regional office staff support them in more effective collaboration across Administration for Children and Families/Children's Bureau programs. The regional office staff took a leadership role in organizing what has become the Child Welfare Collaboration Initiative. The eight states in Region IV collected baseline information regarding their collaborative efforts that were already taking place and identified the five key areas that were the greatest challenge. State representatives across the different programs gathered together to learn what was going on in other places that might be of assistance in their state and to develop a work plan to address their most challenging areas. They report quarterly on the progress made. This process has been so successful at helping the states focus their collaborative efforts across the various programs, build on what is already taking

²⁴ Annual reports for 2006 from the FRIENDS website. Retrieved August 1, 2007, from www.friendsnrc.org/resources/06sum.htm.

²⁵ Annual reports for 2006 from the FRIENDS website. Retrieved August 1, 2007, from www.friendsnrc.org/resources/06sum.htm.

place, and support each other that they now meet annually. At each meeting, additional players from the state attend to further advance a more cohesive and coordinated system for children and families.

- In support of furthering collaboration across ACF-funded programs, the Program Instructions (PI) for the CBCAP grants began including an attachment that provided suggested ways the CBCAP SLAs could work with the planning processes.²⁶ Involvement of the CBCAP SLAs in the APSR process was encouraged in a teleconference in July 2006 explaining the changes to the PI for PSSF grants.²⁷ And the most recent PI for the CFSR/PIP process added new language that specifically identified the CBCAP SLAs as one of the federally funded program partners to include in the process.²⁸
- There are growing numbers of states that are collaborating together to develop a common language for prevention and development of a comprehensive state prevention plan that incorporates the full spectrum of prevention (primary, secondary, and tertiary) and not just of child abuse and neglect.
- Several State SLAs are reporting collaborations around their version of an alternative response system for families who come to the attention of the child welfare system but do not require an investigation by CPS as discussed earlier on page 8.
- Joint planning for the Statewide Assessments and helping with assessing/meeting requirements around the safety and well-being indicators in the CFSR/PIPs;
 - Implementing system redesign efforts through participation in committees/task forces/work groups, and funding the redesign activities and training efforts;
 - Closing gaps such as services for rural communities and sufficient continuum of effective prevention services;
 - Assisting with the Quality Assurance activities (such as what is taking place in Minnesota) and pooling funds from CBCAP and Title IV-B, Subpart 2—prevention and family preservation and family support funding—to issue joint Request for Proposals to fund programs that meet the shared goals and objectives of the two programs;
 - Developing family support services for the special populations that could be served by CBCAP, such as:
 - vulnerable families at risk of abuse or neglect,
 - parents (all, new, teens, etc.),
 - parents/children with disabilities,
 - racial and ethnic minorities,
 - members of underserved or underrepresented groups, and fathers;
 - Drawing on the resources/training that are part of the CBCAP program around parent engagement and leadership to build increased capacity for greater parent involvement; and

²⁶ U. S. Administration for Children & Families, Community-Based Grants for the Prevention of Child Abuse and Neglect Program Instructions. Retrieved August 1, 2007, from www.acf.hhs.gov/programs/cb/laws_policies/policy/pi/2004/pi0404e2.htm, www.acf.hhs.gov/programs/cb/laws_policies/policy/pi/2004/pi0404e3.htm, and www.acf.hhs.gov/programs/cb/laws_policies/policy/pi/2007/pi0706.htm.

²⁷ *Preparing the Annual Progress and Services Review (APSR) for the Child and Family Services Plan (CFSP): Coordinating the CFSP with Preserving Safe and Stable Families (PSSF) and Community Based Child Abuse Prevention (CBCAP) Funds teleconference.* (May 2006). Retrieved August 1, 2007, from <http://muskie.usm.maine.edu/helpkids/telepast.htm#May2>.

²⁸ *Collaborating During the Child and Family Services Reviews.* Retrieved August 1, 2007, from www.acf.hhs.gov/programs/cb/cwmonitoring/tools_guide/procedures/appendixj.htm.

- Getting involved with/linking with key ACF initiatives, such as Healthy Marriage and Strengthening Families, Positive Youth Development, Responsible Fatherhood, and Rural Initiatives.

The information in this report will be updated following the completion of the second round of CFSR/PIPs initiated this year. This information has been and will continue to be used by the FRIENDS National Resource Center for Community-Based Child Abuse Prevention (NRC CBCAP) and the CBCAP State Lead Agencies to enhance the linking/coordination to support states being successful in meeting the performance requirements of the CFSRs/PIPs. It is anticipated that this information will also be helpful to staff of state child welfare agencies, other Children's Bureau National Resource Centers, and other key stakeholders for ideas for how they can more effectively link/collaborate with the CBCAP SLAs to enhance the overall success of the state in their CFSR/PIP performance, as well as other related strategic efforts to improve outcomes for children and families.