




2017-2018

# Evaluation Report

THE ALABAMA DEPARTMENT OF  
CHILD ABUSE & NEGLECT PREVENTION

THE CHILDREN'S TRUST FUND  
SALLYE LONGSHORE, M.S., ED.S., DIRECTOR





The Alabama Department of Child Abuse and Neglect Prevention – The Children’s Trust Fund (ADCANP/CTF) was established in 1983 and is **the only state agency explicitly focused on educating our communities about child abuse and neglect. It also is the only state agency actively engaged in providing community-based prevention programs focused on promoting protective factors in families.**

Throughout its 35 year history, ADCANP/CTF has provided direct funding support to hundreds of local agencies through a competitive process. These local organizations carry out the important work of building family strengths.

ADCANP/CTF believes in investing upfront to ensure that children in our state grow up in a nurturing and supportive home. Research supports this prevention approach. A 2015 study by the University of Alabama College of Human Environmental Science and Center for Business and Economic Research – Culverhouse College of Commerce reveals the high costs of intervention. They estimated services associated with child abuse and neglect incidents costs taxpayers \$2.3 billion dollars every year. Child maltreatment prevention is, therefore, both a social justice and an economic issue for Alabama.

In this report we highlight the evaluation results of ADCANP/CTF-funded programs’ efforts to promote protective factors among the families and youth served throughout the state during the period of August 2017 – July 2018.

***Prevention programs funded by ADCANP/CTF-have documented important positive effects for parents and youth in Alabama. Support for these programs serves to enhance protective factors and reduce the significant human and economic cost of child abuse and neglect in our state.***

# 2017–2018 Evaluation Report

# The Five Protective Factors:

## *The Foundation of the Strengthening Families™ Program*

### **What are the Five Protective Factors?**

The Five Protective Factors are the foundation of the Strengthening Families™ approach. Extensive evidence supports the common sense notion that when these Protective Factors are present and robust in a family, the likelihood of abuse and neglect diminishes. Research also shows that these are the factors that create healthy environments for the optimal development of all children.

### **Parent Resilience**

No one can eliminate stress from parenting, but building parental resilience can affect how a parent deals with stress. Parental resilience is the ability to constructively cope with and bounce back from all types of challenges. It is about creatively solving problems, building trusting relationships, maintaining a positive attitude, and seeking help when it is needed.

### **Knowledge of Parenting & Child Development**

Having accurate information about raising young children and appropriate expectations for their behavior help parents better understand and care for children. It is important that information is available when parents need it, that is, when it is relevant to their life and their child. Parents whose own families used harsh discipline techniques, parents of children with developmental or behavioral challenges, and parents of special needs children require extra support in building this Protective Factor.

### **Social and Emotional Competence of Children**

A child's ability to interact positively with others, to self-regulate, and to effectively communicate his or her emotions has a great impact on the parent-child relationship. Children with challenging behaviors are

more likely to be abused, so early identification and working with them helps keep their development on track and keeps them safe. Also, children who have experienced or witness violence need a safe environment that offers opportunities to develop normally.

### **Social Connections**

Friends, family members, neighbors, and other members of a community provide emotional support and concrete assistance to parents. Social connections help parents build networks of support that serve multiple purposes: they can help parents develop and reinforce community norms around childrearing, provide assistance in times of need, and serve as a resource for parenting information or help solving problems. Because isolation is a common risk factor for abuse and neglect, parents who are isolated need support in building positive friendships.

### **Concrete Support in Times of Need**

Parents need access to the types of concrete supports and services that can minimize the stress of difficult situations, such as a family crisis, a condition such as substance abuse, or stress associated with lack of resources. Building this Protective Factor is about helping to ensure the basic needs of a family, such as food, clothing, and shelter, are met and connecting parents and children to services, especially those that have a stigma associated with them, like domestic violence shelter or substance abuse counseling, in times of crisis.

Information provided by: Strengthening Families™, a project of the Center for the Study of Social Policy; [www.strengtheningfamilies.net](http://www.strengtheningfamilies.net)  
US Department of Health and Human Services Administration for Children and Families/Strengthening Families™ and Communities 2009 Resource Guide: [www.acf.hhs.gov/programs/cb](http://www.acf.hhs.gov/programs/cb)



**In Project Year 2017-2018, ADCANP/CTF awarded grants from four primary federal and state funding streams to support two statewide initiatives and 153 community-based prevention programs provided by local agencies in Alabama that applied for program grants.** Records indicate these funded programs provided multi-session services to 73,014 adults and children. In addition, 247,124 individuals attended community awareness programs/presentations.

**A total of 320,138 Alabama citizens were impacted by ADCANP/CTF-funded programs during the one year period.**

In this report we feature evaluation results from the 153 community-based programs funded by Community Based Child Abuse Prevention (CBCAP), Children First Trust Fund (CFTF), Education Trust Fund (ETF), and Department of Human Resources/Temporary Assistance for Needy Families (DHR/TANF) funds. Research suggests several key activities as useful for the prevention of child maltreatment: raising public awareness, providing education and supports for parents – particularly those facing special challenges (e.g., low resources, special needs children), facilitating positive father involvement, and promoting youth’s own awareness, knowledge, and skills related to resilience. Therefore, the types of programs ADCANP/CTF funds include:

- **Parent Education and Support**
- **Home Visiting Parent Programs**
- **Fatherhood Programs**
- **Respite Care Programs**
- **Youth School-Based, Non School-Based/After-School, & Mentoring Programs**
- **Community Awareness Programs**


Although each program differs in approach and delivery method, common objectives are shared by programs in each area of emphasis. All programs have objectives that center on reducing risk factors for child maltreatment and promoting protective factors outlined at the beginning of this report.



From August 2017 to July 2018, ADCANP/CTF worked with an independent research team in Auburn University's Human Development and Family Studies Department to conduct a systematic evaluation of its funded programs. All funded agencies invest time and effort in the collection of data from program participants throughout the year, using uniform surveys within each program type. This allows for the aggregation of data within program categories and results in meaningful information regarding the experiences of the average participant in each program area. This systematic empirical assessment of prevention programs throughout the state is one of few such efforts in the U.S.

Survey research methods are utilized and program participants respond to questions regarding their background and demographics, as well as their understanding, knowledge, and skills in many different areas relevant to healthy families and communities. The questionnaire uses a validated method of gathering information on baseline and post-program levels of each measure in order to assess for changes. At program completion, participants report their level of knowledge and skill in specific areas before and after their participation in the program. Previous research has supported the use of this retrospective-pre and post-program evaluation design as efficient and meaningful documentation of participants' perceptions of benefit from the program and the extent to which specific program objectives have been met. Research indicates this method may be a more accurate strategy for documenting change. Participants tend to answer more honestly when taking a retrospective pre/post as compared to separate pre- and post-program surveys since participants may respond in a more socially desirable way prior to program start. They also tend to have better knowledge on which to assess pre-program levels after they have received information and skills training in the program. (see the authors of this report for more information on this survey research method).

For analyses, data were aggregated across programs within each program type. Paired sample t-tests were conducted on each measure (some are global; some are multi-item) to identify statistically significant changes from pre-program mean levels to post-program mean levels. Effect sizes for documented changes were calculated using the appropriate formula for paired data.



Data on numbers of participants in ADCANP/CTF funded programs were taken from master lists of individuals who spent time in a program, demographic reports that most participants provided, and from presentation reports that documented the numbers of individuals who participated in community awareness activities provided by grantees in all program areas, including the Community Awareness program area.

**Community Awareness**

247,124 individuals (youth and adults) participated in a community awareness event or presentation and learned more about prevention of child maltreatment. Helpful information also was provided through media and social media. Approximately 9,712,918 exposures/ impressions were generated. Programs provided multi-session services to adults and children in all 7 congressional districts in Alabama during the one year period.

# Participant Numbers & Demographics

# Adult Demographics

Data on adult demographics come from across the program types: parent education, home visiting, fatherhood, and respite. Parents are racially diverse and predominantly of lower socio-economic status, based on work status, education level, and income reported. Note: Adults who participated only in community awareness programs did not provide demographic information.

## Age

- Average age was 35
- 4% were 18 and younger; 16% were 19-24; 23% were 25-30; 31% were 31-40; and 26% were over 40

## Gender

- 63% female
- 37% male

## Race & Ethnicity

- 52% European American
- 43% African American
- 1% Asian American
- 1% Native American
- 3% identify as some other ethnicity
- Of all participants, 4% identified as Hispanic or Latino

## Work Status

For participants (excluding students) over the age of 18:

- 51% reported not working for pay
- 14% reported working part-time
- 35% reported working full-time

## Education Level

For participants (excluding students) over the age of 18:

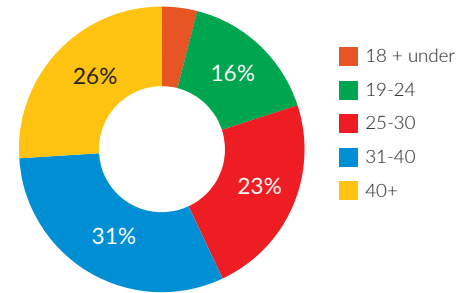
- 19% reported not completing high school
- 49% reported completing high school or GED
- 9% reported completing some college/Associate degree
- 6% reported obtaining trade/technical school degree
- 12% reported completing a 4-year college degree
- 5% reported completing an advanced degree

## Income Level

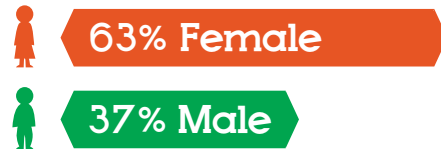
For participants (excluding students) over the age of 18:

- 56% reported a gross yearly income of less than \$10,000 a year
- 24% reported earning \$10,000-\$29,999
- 15% reported earning \$30,000-\$59,999
- 5% reported earning more than \$60,000 per year

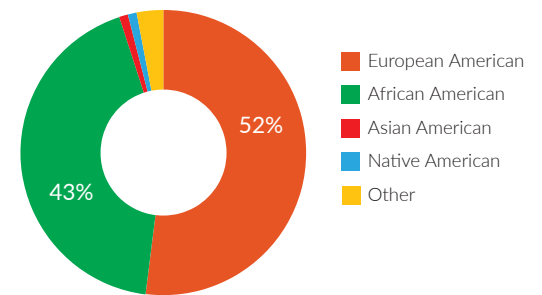
## Age



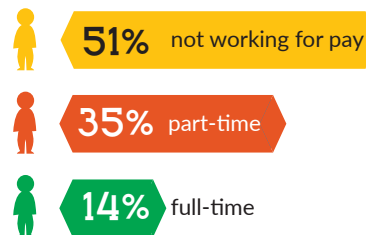
## Gender



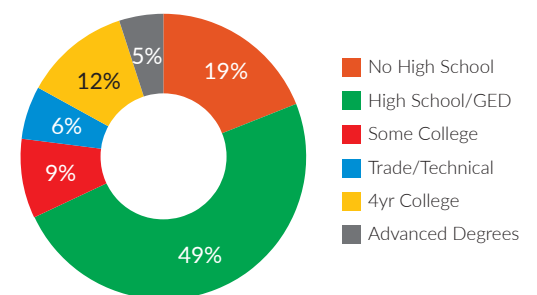
## Race



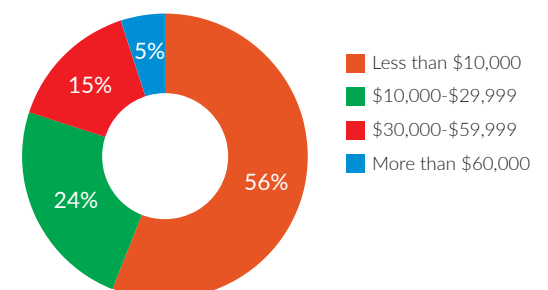
## Work Status



## Education Level



## Income Level





**Participant Numbers  
and Demographics**



## Youth Demographics

Data on youth demographics come from school-based, non-school based/after school, and mentoring programs and indicate that participants were diverse in age, race, and gender. Note: Youth who participated only in community awareness programs did not provide demographic information.

### Grade

- 42% were in grades 3-5
- 58% were in grades 6-12

### Gender

- 49% female
- 51% male

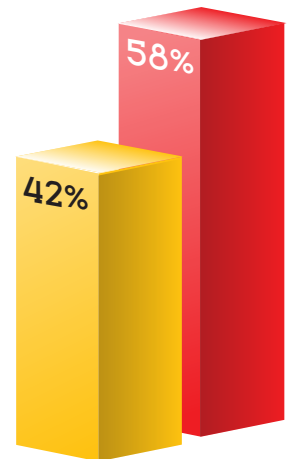
### Race & Ethnicity

- 43% African American
- 41% European American
- 3% Native American
- 1% Asian American
- 12% selected "other" when asked ethnic background

- Of all participants, 9% identified as Hispanic or Latino

### GRADE

- Grades 3-5
- Grades 6-12



### GENDER



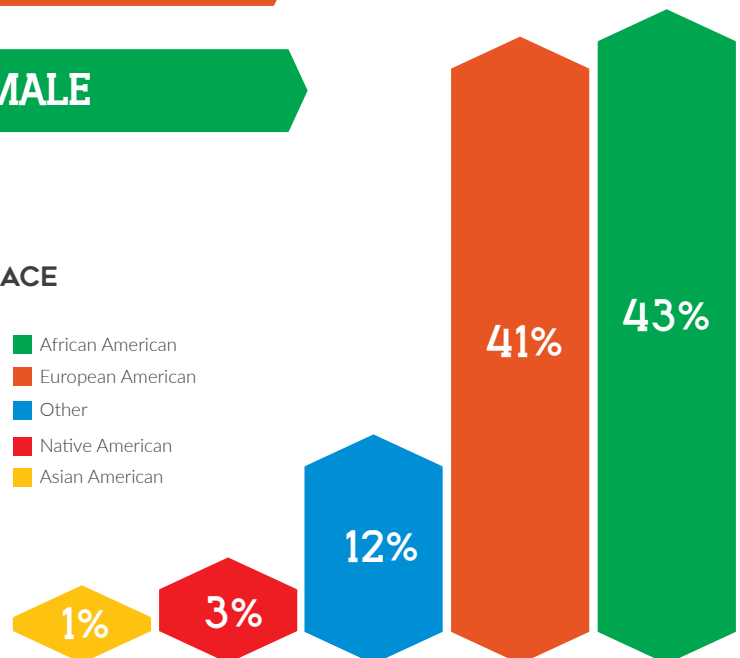
49% FEMALE

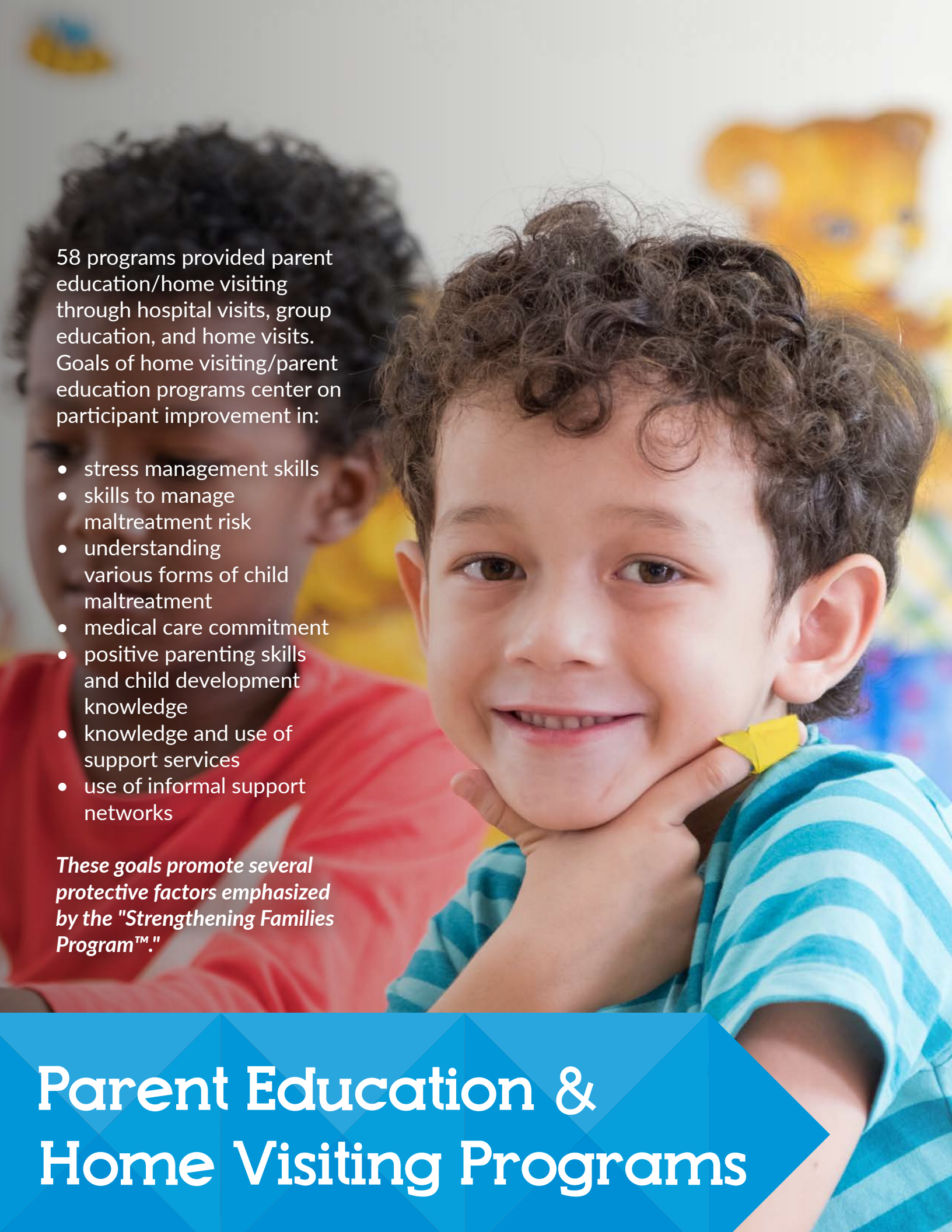


51% MALE

### RACE

- African American
- European American
- Other
- Native American
- Asian American





58 programs provided parent education/home visiting through hospital visits, group education, and home visits. Goals of home visiting/parent education programs center on participant improvement in:

- stress management skills
- skills to manage maltreatment risk
- understanding various forms of child maltreatment
- medical care commitment
- positive parenting skills and child development knowledge
- knowledge and use of support services
- use of informal support networks

*These goals promote several protective factors emphasized by the "Strengthening Families Program™."*

# Parent Education & Home Visiting Programs

# Parent Education & Home Visiting Program Demographics

Parents in Parent Education classes and Home Visiting programs are racially diverse and predominantly of lower socio-economic status, based on work status, education level, and income reported. Participants are predominantly women.

## Age

- Parents in Parent Education/Home Visiting programs had an average age of 33.
- 8% were 18 and younger; 19% were 19-24; 26% were 25-30; 28% were 31-40; and 19% were over 40

## Gender

- 85% female
- 15% male

## Race & Ethnicity

- 56% European American
- 40% African American
- 1% Asian American
- 1% Native American
- 2% identify as some other ethnicity
- Of all participants, 5% identified as Hispanic or Latino

## Work Status

- Parents (excluding students) over the age of 18:
- 51% reported not working for pay
  - 13% reported working part-time
  - 36% reported working full-time

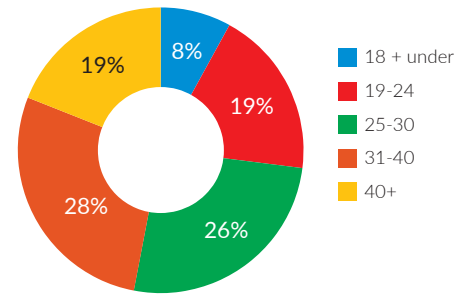
## Education Level

- Parents (excluding students) over the age of 18:
- 18% reported not completing high school
  - 55% reported completing high school or GED
  - 9% reported completing some college/Associate degree
  - 7% reported obtaining trade/technical school degree
  - 8% reported completing a 4-year college degree
  - 3% reported completing an advanced degree

## Income Level

- Parents (excluding students) over the age of 18:
- 51% reported a gross yearly income of less than \$10,000 a year.
  - 29% reported earning \$10,000-\$29,999
  - 15% reported earning \$30,000-\$59,999
  - 5% reported earning more than \$60,000 per year

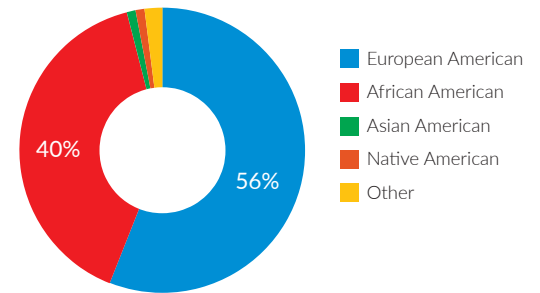
## Age



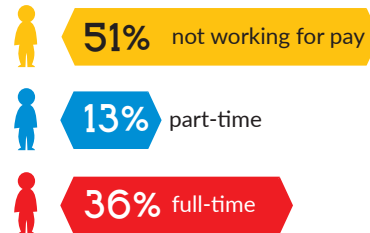
## Gender



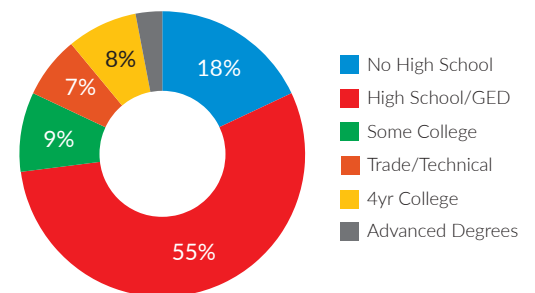
## Race



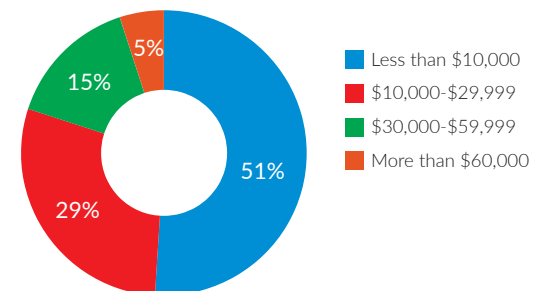
## Work Status



## Education Level



## Income Level



A sample of Parenting participants (n=3,586) responded to an assessment of 7 goals. Analyses of measures (some using multi-items; Cronbach's  $\alpha$  ranges from .78 - .91) using paired sample t-tests revealed statistically significant ( $p < .001$ ) improvements for participants, on average, in ALL targeted areas. The effect sizes ranged from .68-1.23. The average magnitude of the effect sizes for these improvements was 1.04 and can be considered large (i.e. .25 small effect, .50 moderate effect, .75 large effect).



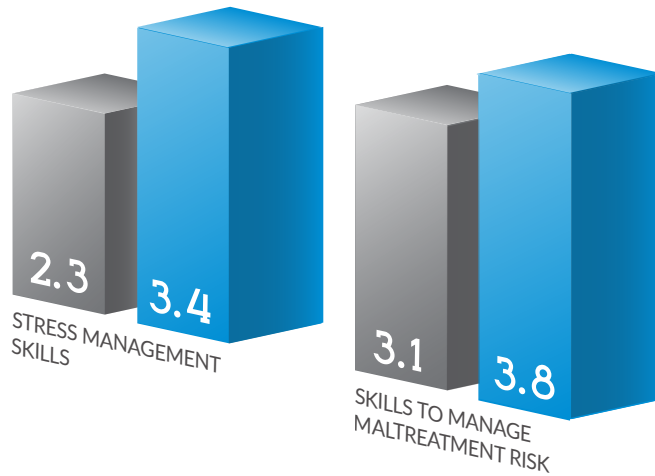
**Table 1.** Paired Sample T-test for mean change over time.

	Pre-Test M	SD	Post-Test M	SD	df	t	Cohen's d
<b>Protective Factor: Parent Resilience</b>							
Stress Management Skills	2.34	.83	3.44	.63	3553	-67.83***	1.15
Skills to Manage Maltreatment Risk	3.09	.81	3.79	.43	3493	-50.41***	.92
<b>Protective Factor: Knowledge of Parenting and Child Development</b>							
Understanding of Various Forms of Child Maltreatment	2.84	.82	3.67	.52	3546	-58.94***	1.03
Medical Care Commitment	3.13	1.01	3.75	.51	3509	-37.21***	.68
Parenting Skills & Child Development Knowledge	2.44	.76	3.53	.57	3552	-71.35***	1.20
<b>Protective Factor: Concrete Support in Times of Need</b>							
Knowledge of & Use of Support Services	2.28	.79	3.45	.62	3560	-72.61***	1.23
<b>Protective Factor: Social Connections</b>							
Use of Informal Supportive Networks	2.51	.89	3.49	.65	3526	-61.83***	1.06

\*\*\*  $p < .001$ . Cohen's d reported in absolute values.

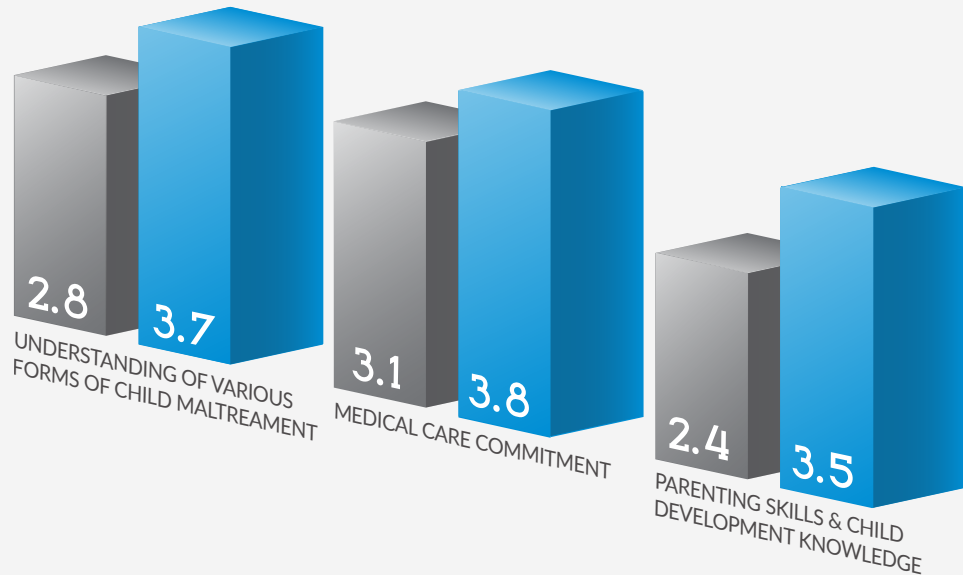
## Parent Resilience

PRE-TEST  
POST-TEST



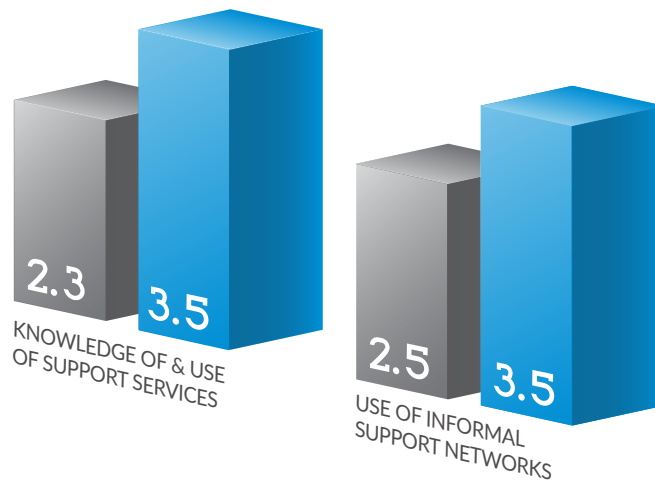
## Knowledge of Parenting and Child Development

PRE-TEST  
POST-TEST



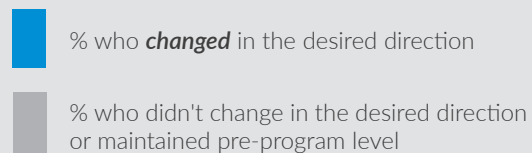
## Concrete Support in Times of Need & Social Connections

PRE-TEST  
POST-TEST



# Key Changes

We also examined the number of participants who showed improvement and found the majority rated themselves as improved in each area assessed.



## Protective Factor: Parent Resilience

Stress Management Skills

87%

13%

Skills to Manage Maltreatment Risk

85%

15%

## Protective Factor: Knowledge of Parenting & Child Development

Understanding of Various Forms of Child Maltreatment

86%

14%

Medical Care Commitment

80%

20%

Parenting Skills & Child Development Knowledge

89%

11%

## Protective Factor: Concrete Support in Times of Need

Knowledge of & Use of Support Services

89%

11%

## Protective Factor: Social Connections

Use of Informal Supportive Networks

81%

19%



***“The HIPPY Program was one of the best educational opportunities for my son. The program provided great creative curriculum. My son always wanted to do more of it. The monthly meetings gave the parents and children a platform to connect with each other along with amazing activities and gifts. So glad we found it.”***

***“My Parent Educator has been amazing. She taught me many different factors on parenting styles, ways to cope with stress, learning activities to try with my child, and much more. “***

***“It opened my mind and showed me new ways to respond to my kids.”***

***“Small wonders helped me and my family to get the help my son needed, from helping us get the appointments with the doctors, to coming to the school meetings with us and asked some questions that I did not think about asking and sincerely cared about my child. I would highly recommend this group to a friend or relative.”***

*– Home Visiting Program Participants*

***“Thank you so much for being there for me when I call! I have called several times and each time you calm me down and help me work through my issue I am dealing with at the time. The information you sent me the last time I called was also very helpful. I am thankful I have the PAL line I can call.”***


*– A mom who calls often. PAL-Parenting Assistance Line*

***“I am a better mom because now I know there’s a difference between teaching and punishment. Punishment doesn’t teach new behaviors. I’ve learned to communicate and to talk with my children”.***

***“Special Deliveries is a great program. It helps women, young and old who may need help with issues they have with their children. It has helped me with my anger issues I had within myself. I am a great mom and loving it!”***

***“Most days as a parent with my child feels like joy and a struggle. Having a child with a disability can be overwhelming. This group has taught me to take one step at time and to appreciate all that is right with my child and to celebrate each accomplishment. I will now approach each situation thinking about all that is able with my child and not what view him as his disability, I can now see my child beyond his disability.”***

*– Parent Education Program Participants*



7 programs provided respite care services and parent information for parents of children with special needs. Goals of respite programs center on participant improvement in:

- stress level
- positive view of child
- knowledge and use of support services
- use of informal supportive social networks

*These goals promote several protective factors emphasized by the "Strengthening Families Program™."*

# Respite Care Programs



# Respite Care Program Demographics

Parents in Respite Care programs are racially diverse and predominantly of lower socio-economic status, based on work status, education level, and income reported. Participants are predominantly women.

## Age

- Parents in Respite Care programs had an average age of 41.
- 1% were 18 and younger; 3% were 19-24; 11% were 25-30; 42% were 31-40; and 43% were over 40

## Gender

- 93% female
- 7% male

## Race & Ethnicity

- 59% European American
  - 37% African American
  - 1% Asian American
  - 1% Native American
  - 2% identify as some other ethnicity
- Of all participants, 3% identified as Hispanic or Latino

## Work Status

Parents in Respite Care programs (excluding students) over the age of 18:

- 55% reported not working for pay
- 18% reported working part-time
- 27% reported working full-time

## Education Level

Parents in Respite Care programs (excluding students) over the age of 18:

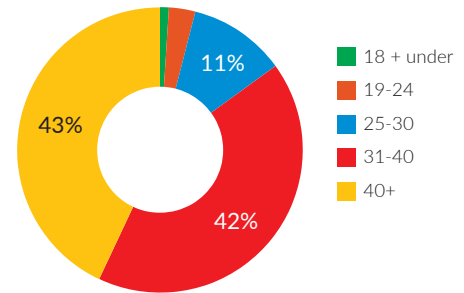
- 8% reported not completing high school
- 36% reported completing high school or GED
- 14% reported completing some college/Associate degree
- 8% reported obtaining trade/technical school degree
- 22% reported completing a 4-year college degree
- 12% reported completing an advanced degree

## Income Level

Parents in Respite Care programs (excluding students) over the age of 18:

- 31% reported a gross yearly income of less than \$10,000 a year.
- 34% reported earning \$10,000-\$29,999
- 24% reported earning \$30,000-\$59,999
- 11% reported earning more than \$60,000 per year

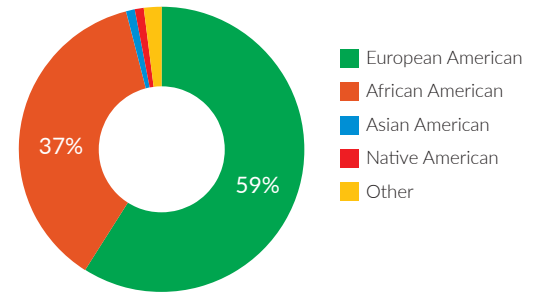
## Age



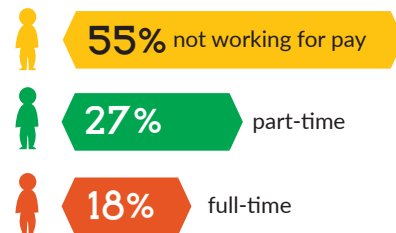
## Gender



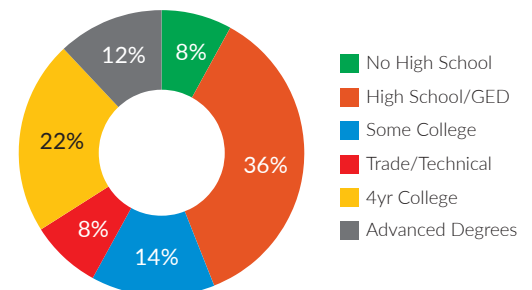
## Race



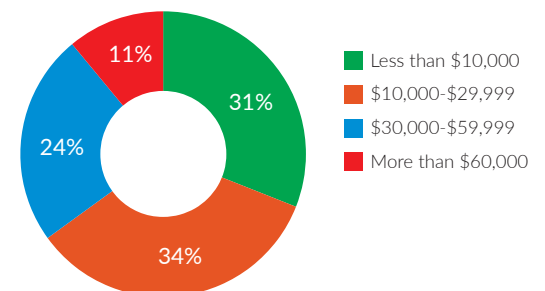
## Work Status



## Education Level



## Income Level



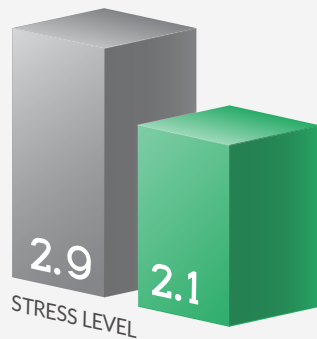
A sample of Respite Care program participants (n=334) responded to an assessment of 4 goals. Analyses of measures (some using multi-items; Chronbach's  $\alpha$  ranges from .82 -.87) using paired sample t-tests revealed statistically significant ( $p < .001$ ) improvements for participants, on average, in ALL targeted areas. The effect sizes ranged from .71-1.03. The average magnitude of the effect sizes for these improvements was .89 and can be considered large (i.e. .25 small effect, .50 moderate effect, .75 large effect).

**Table 2.** Paired Sample T-test for mean change over time.

	Pre-Test M	SD	Post-Test M	SD	df	t	Cohen's d
<b>Protective Factor: Parent Resilience</b>							
Stress Level	2.86	.81	2.08	.64	330	18.37***	1.03
<b>Protective Factor: Knowledge of Parenting and Child Development</b>							
Positive View of Child	3.03	.82	3.63	.59	323	-12.27***	.71
<b>Protective Factor: Concrete Support in Times of Need</b>							
Knowledge of & Use of Support Services	2.24	.89	3.22	.72	328	-16.45***	.91
<b>Protective Factor: Social Connections</b>							
Use of Informal Supportive Networks	2.28	.96	3.17	.76	325	-15.85***	.89

\*\*\*  $p < .001$ . Cohen's d reported in absolute values.

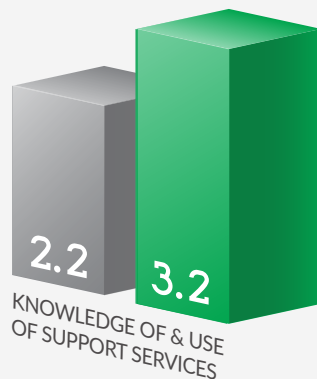
**Protective Factor:  
Parent  
Resilience**



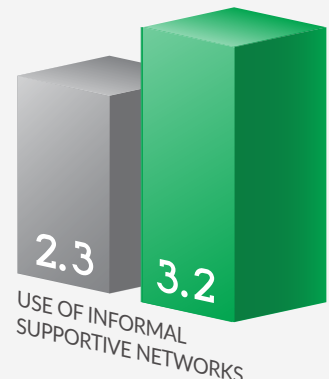
**Protective Factor:  
Knowledge of Parenting  
& Child  
Development**



**Protective Factor:  
Concrete  
Support in  
Times of Need**

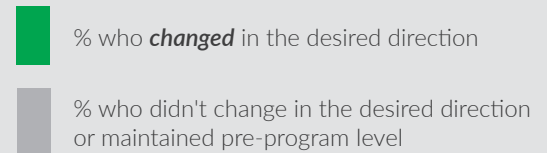


**Protective Factor:  
Social  
Connections**



# Key Changes

We also examined the number of participants who showed improvement and found the majority rated themselves as improved in each area assessed.



## Protective Factor: Parent Resilience

Stress Level



## Protective Factor: Knowledge of Parenting & Child Development

Positive View of Child



## Protective Factor: Concrete Support in Times of Need

Knowledge of & Use of Support Services



## Protective Factor: Social Connections


Use of Informal Supportive Newtworks



*"This service has helped strengthen my relationship with my husband. It has also helped reduce the daily stress of caring for a child with special needs."*

*"I was able to attend a marriage enrichment seminar due to financial support from Hearts Respite. My husband and family are so grateful!"*

- Respite Care Program Participant

A photograph of a man with blonde hair, wearing a teal t-shirt, smiling broadly and looking upwards. A young child with blonde hair, wearing a red t-shirt, is sitting on the man's shoulders. The child is holding a small American flag on a wooden stick. The background is a plain, light color.

DHR/TANF (Alabama Department of Human Resources and Temporary Assistance for Needy Families) provided funding for 21 Fatherhood programs; Community Based Child Abuse Prevention (CBCAP) funded 1 additional program; and the Children First Trust Fund (CFTF) provided funding for an additional 7 programs. Fatherhood programs provide case management and classes. They focus on enhancing employability through education and job skills training. They also provide educational information on child development and positive parenting strategies and emphasize the value of positive involvement with children and child support obligation compliance. Mothers are invited to participate in classes as well.

Goals of fatherhood programs are:

- positive relationship skills
- enhanced coparenting quality
- dating abuse prevention skills
- cooperation with child support enforcement (CSE) & commitment to pay child support
- greater work and education commitment
- greater use of support services
- positive parenting skills
- enhanced parent involvement & relationship quality with child
- enhanced child adjustment

*These goals promote several protective factors emphasized by the "Strengthening Families Program™."*

# Fatherhood Programs

# Fatherhood Program Demographics

Parents who participated in Fatherhood programs are racially diverse and predominantly of lower socio-economic status, based on work status, education level, and income reported. Participants were predominantly men.

## Age

- Parents in Fatherhood programs had an average age of 35.
- 1% were 18 and younger; 13% were 19-24; 25% were 25-30; 37% were 31-40; and 24% were over 40

## Gender

- 20% female
- 80% male

## Race & Ethnicity

- 50% African American
  - 44% European American
  - 2% Native American
  - 4% identify as some other ethnicity
- Of all participants, 3% identified as Hispanic or Latino

## Work Status

Parents in Fatherhood programs (excluding students) over the age of 18:

- 65% reported not working for pay
- 8% reported working part-time
- 27% reported working full-time

## Education Level

Parents in Fatherhood programs (excluding students) over the age of 18:

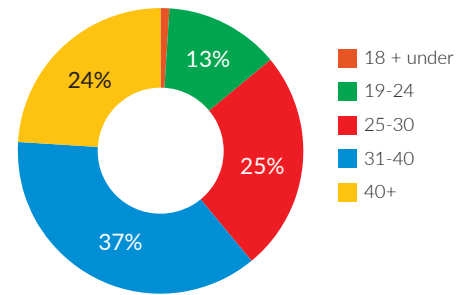
- 29% reported not completing high school
- 53% reported completing high school or GED
- 4% reported completing some college/Associate degree
- 10% reported obtaining trade/technical school degree
- 3% reported completing a 4-year college degree
- 1% reported completing an advanced degree

## Income Level

Parents in Fatherhood programs (excluding students) over the age of 18:

- 74% reported a gross yearly income of less than \$10,000 a year.
- 12% reported earning \$10,000-\$29,999
- 13% reported earning \$30,000-\$59,999
- 1% reported earning more than \$60,000 per year

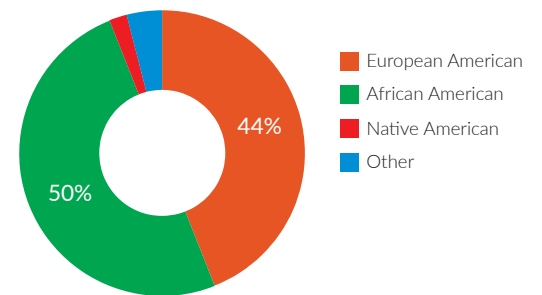
## Age



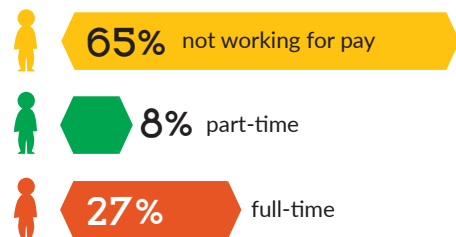
## Gender



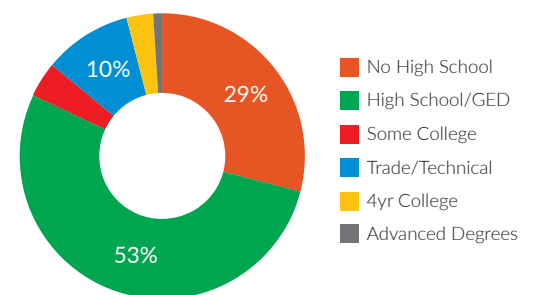
## Race



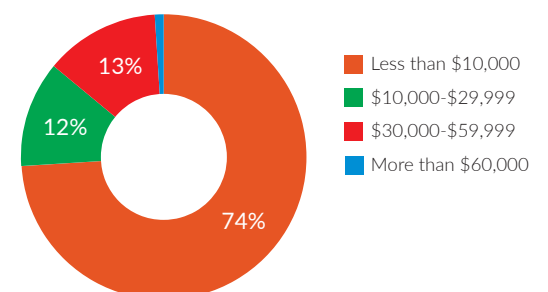
## Work Status



## Education Level



## Income Level



A sample of Fatherhood program participants (n=1,634) responded to an assessment of 14 goals. Analyses of measures (some using multi-items; Chronbach's  $\alpha$  ranges from .62 -.85) using paired sample t-tests revealed statistically significant ( $p < .001$ ) improvements in ALL targeted areas. The effect sizes ranged from .17-.72. The average magnitude of the effect sizes for these improvements was .44 and can be considered small to moderate (i.e. .25 small effect, .50 moderate effect, .75 large effect).



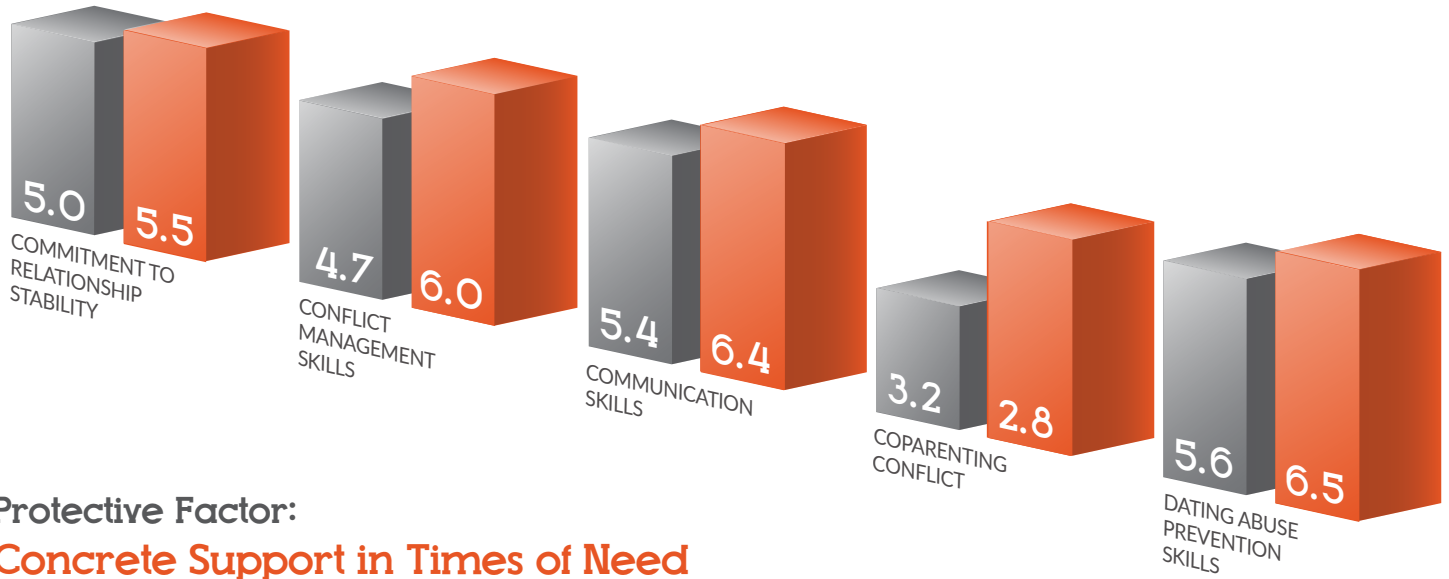
**Table 3.1** Paired Sample T-test for mean change over time.

	Pre-Test M	SD	Post-Test M	SD	df	t	Cohen's d
<b>Protective Factor: Social Connections</b>							
Commitment to Relationship Stability	4.99	1.81	5.51	1.83	1319	-11.42***	.31
Conflict Management Skills	4.71	1.74	6.03	1.34	1534	-27.59***	.72
Communication	5.43	1.55	6.38	.96	1539	-23.88***	.64
Coparenting Conflict	3.24	1.74	2.79	1.62	1360	13.68***	.37
Dating Abuse Prevention Skills	5.57	1.77	6.49	1.15	1501	-20.10***	.54
<b>Protective Factor: Concrete Support in Times of Need</b>							
Hopeful About Future	4.95	1.70	6.06	1.15	1550	-25.77***	.68
Financial Responsibility	5.72	1.69	6.62	.94	1546	-19.95***	.54
Economic Stability	4.58	2.48	4.96	1.89	1458	-6.381***	.17
Cooperation with Child Support Personnel	5.35	1.89	6.11	2.93	816	-7.42***	.27
Commitment to Pay Full Child Support	5.36	1.99	6.00	1.68	801	-11.12***	.39
<b>Protective Factor: Knowledge of Parenting and Child Development</b>							
Positive Parenting Behavior	5.71	1.35	6.28	1.08	1440	-18.73***	.50
Parent Involvement	5.67	1.27	6.02	1.27	1452	-12.01***	.32
Parent Child Relationship Quality	5.92	1.37	6.34	1.28	1452	-14.10***	.37
<b>Protective Factor: Social and Emotional Competence of Children</b>							
Child Academic Adjustment	6.02	1.46	6.36	1.21	1169	-10.84***	.32

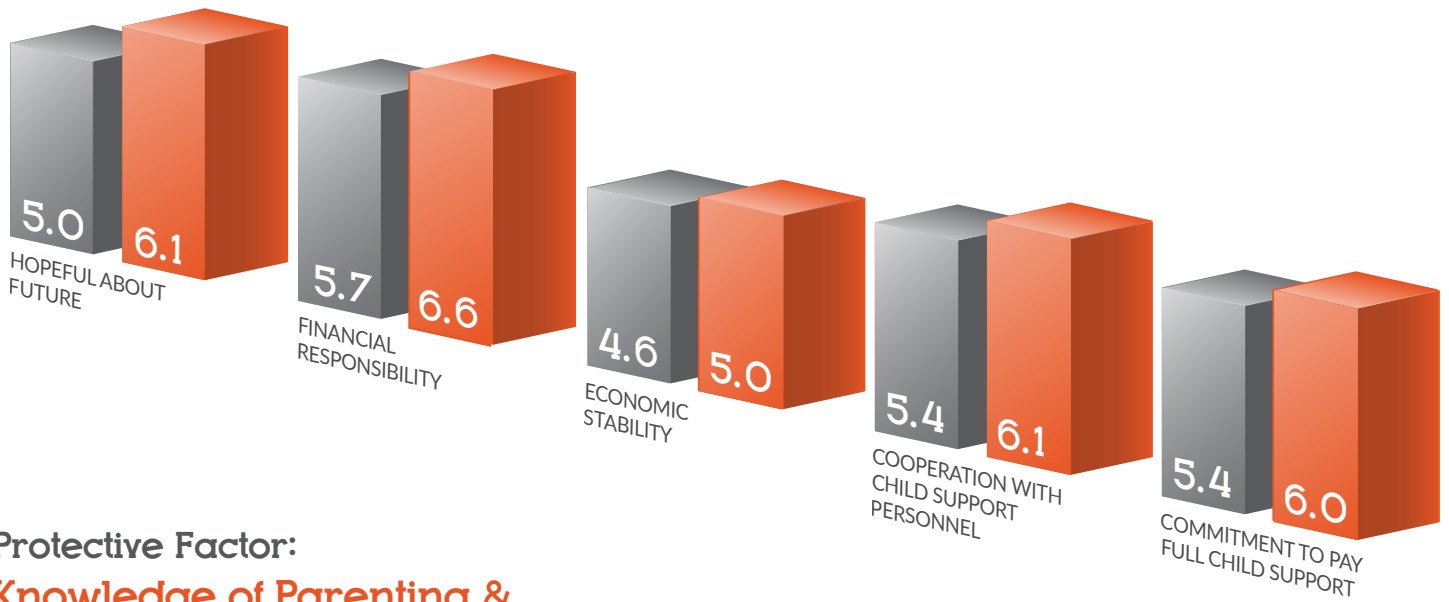
\*\*\*  $p < .001$ . Cohen's d reported in absolute values.

**Protective Factor:**  
**Social Connections**

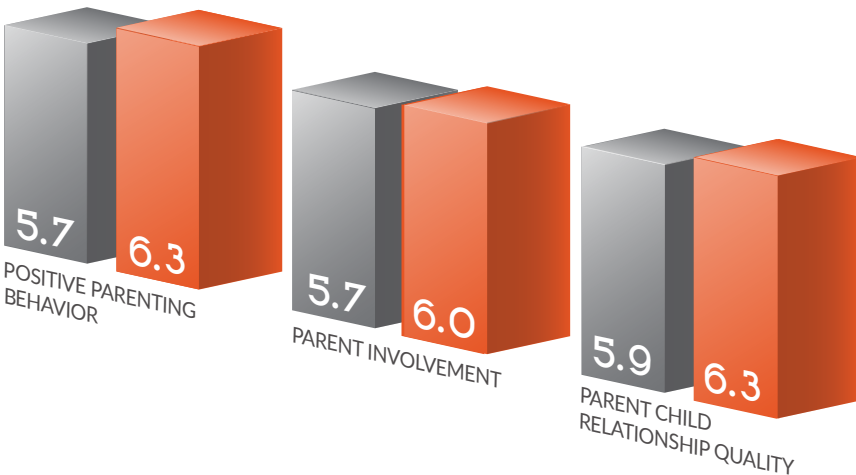
PRE-TEST  
POST-TEST



**Protective Factor:**  
**Concrete Support in Times of Need**



**Protective Factor:**  
**Knowledge of Parenting & Child Development**

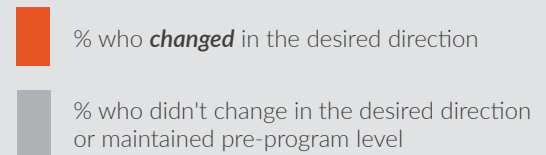


**Protective Factor:**  
**Social and Emotional Competence of Children**



# Key Changes

We also examined the number of participants who showed improvement and found the majority rated themselves as improved in each area assessed.



## Protective Factor: Social Connections

Commitment to Relationship Stability

65%

35%

Conflict Management Skills

80%

20%

Communication Skills

82%

18%

Coparenting Conflict

57%

43%

Dating Abuse Prevention Skills

82%

18%

## Protective Factor: Concrete Support in Times of Need

Hopeful About Future

77%

23%

Financial Responsibility

85%

15%

Economic Stability

42%

58%

Cooperation with Child Support Personnel

58%

42%

Commitment to Pay Full Child Support

59%

41%



Protective Factor:  
**Knowledge  
of Parenting  
and Child  
Development**

Positive Parenting  
Behavior

66%

34%

Parent  
Involvement

58%

42%

Parent Child  
Relationship  
Quality

64%

36%

Protective Factor:  
**Social and  
Emotional  
Competence  
of Children**

Child Academic  
Adjustment

52%

48%

*"The Fatherhood class has been very fulfilling and has taught me even though I have made mistakes I can still be a good dad and person. I can be productive and a good role model for my children".*

*"Without Fatherhood, I don't know where I would be today. I learned about the importance of being a father, and I secured 2 jobs, a high school diploma, and entered the Welding program at Wallace Community College."*

*"I just wanted to THANK YOU FROM THE BOTTOM OF MY HEART FOR U BELIEVING IN ME, and Helping me with This case, I know without you in my corner this case would Not have moved so fast!!! Thank you for taking the time from your day to help me bring my babies home!!!! Thank you soooooooooo much! [followed by several emoji]"*

*-Fatherhood Program Participants*

# Fatherhood Challenges

Fathers rated a list of areas\* on the level of challenge using a scale of 1-4, with 1 indicating no challenge and 4 indicating a major challenge. Analyses using paired sample t-tests revealed statistically significant ( $p < .05$ ) changes in several key challenge areas. All but one of these were significant improvements (i.e., the area is significantly less of a challenge, on average, following program participation). Fatherhood participants reported a significant increase, on average, for their level of challenge for managing anger; the effect size was very small ( $d = .09$ ). The effect sizes for improvements ranged from .05-.13. The average magnitude of the effect sizes for these improvements was .09 and is considered small (i.e. .25 small effect, .50 moderate effect, .75 large effect).


**Table 3.2** Paired Sample T-test for mean change over time.

	Pre-Test		Post-Test		df	t	Cohen's d
	M	SD	M	SD			
<b>Fatherhood Challenges</b>							
Not Having a Steady Place to Live	1.73	1.07	1.64	1.01	1434	3.22**	.08
Drug/Alcohol Abuse	1.78	1.09	1.69	1.06	1397	3.22**	.09
Child Support	1.74	1.11	1.61	1.00	351	2.32*	.13
Anger	1.46	.77	1.53	.78	1451	2.95**	.09
Not Enough Money	2.05	1.13	1.95	1.09	1422	3.00**	.09
Transportation	1.86	1.13	1.79	1.07	1421	2.46*	.06

\*\*\* $p < .05$ , \*\* $p < .01$ , \* $p < .001$ . Cohen's d reported in absolute values.

Challenge areas that did not show significant change: unemployment, incarceration, problems with the law, physical health problems, violent toward partner, abusing children, overcrowded home, repairs to home, bills, living situation, foster care, living too far from child, working too many hours, protective order, keeping a job, family court, court support, mom's new partner, trouble with child's mother, trouble with child's mother's family and immigration



A photograph of two young boys sitting on a brick wall. The boy on the left is a white child with short blonde hair, wearing a blue and white striped shirt and a green backpack. The boy on the right is a Black child with short dark hair, wearing a blue and white striped shirt and a blue backpack. Both boys are smiling and laughing, looking towards each other. The background is a brick wall.

Youth in 3rd-12th grade around the state were served through 46 programs that included a variety of school-based, non school-based/after school, and mentoring programs. These programs varied in their emphasis, but all were focused on reducing risks for children and enhancing their well-being by promoting the protective factor: social and emotional competence of children.

Program objectives for youth in 3rd-5th grade center on:

- social skill development
- improved abuse awareness
- self confidence
- emotion identification and regulation
- enhanced assertiveness
- cooperative behavior

# Youth Programs 3rd-5th Grade

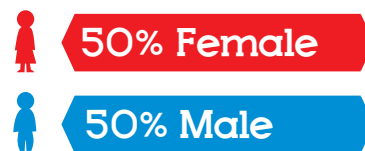


## Youth Programs 3rd - 5th Grade Demographics

Data on youth demographics from school-based, non-school based/after school, and mentoring programs offered to children in 3rd - 5th grade indicate that participants were diverse in race, and gender. Note: Youth who participated only in community awareness programs did not provide demographic information.

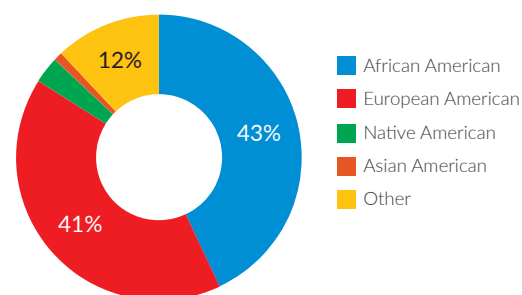
### Gender

- 50% male
- 50% female



### Race & Ethnicity

- 43% African American
  - 41% European American
  - 3% Native American
  - 1% Asian American
  - 12% selected "other" when asked ethnic background
- Of all 3rd- 5th grade participants, 9% identified as Hispanic or Latino



A sample of 3rd – 5th grade participants (n=5,247) responded to an assessment of 6 goals. Analyses of measures (some using multi-items; Chronbach's  $\alpha$  ranges from .65 -.66) using paired sample t-tests revealed statistically significant ( $p < .001$ ) improvements for participants, on average, in ALL targeted areas. The effect sizes ranged from .49-.97. The average magnitude of the effect sizes for these improvements is .75 and can be considered large (i.e. .25 small effect, .50 moderate effect, .75 large effect).

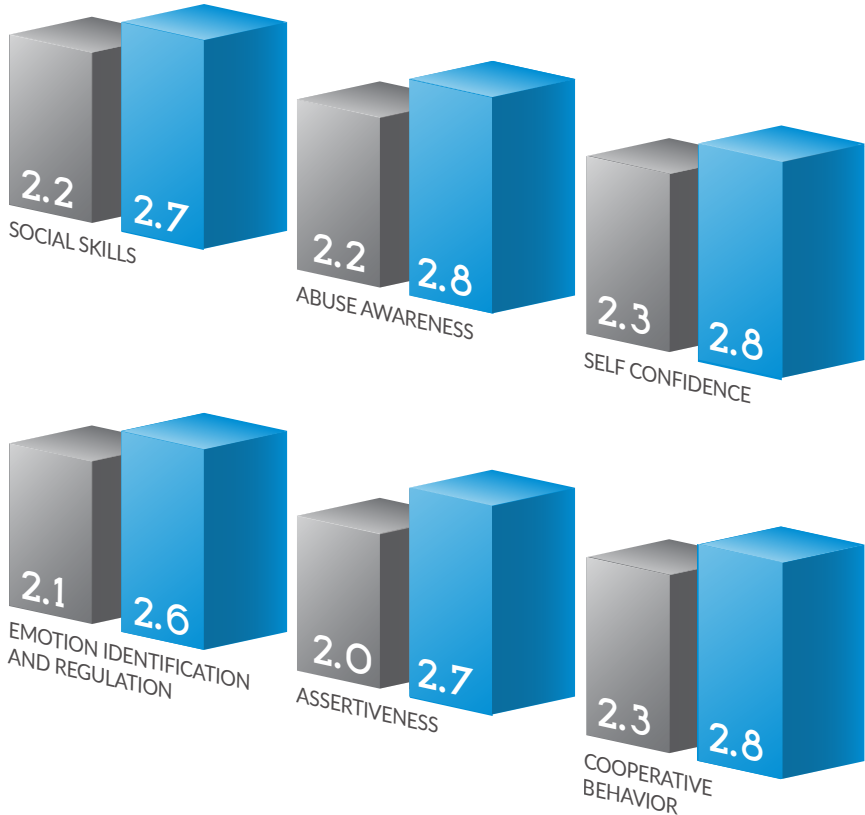
**Table 4.** Paired Sample T-test for mean change over time.

	Pre-Test M	SD	Post-Test M	SD	df	t	Cohen's d
<b>Protective Factor: Social and Emotional Competence of Children</b>							
Social Skills	2.16	.76	2.72	1.00	5033	-34.38***	.49
Abuse Awareness	2.24	.81	2.77	.52	4974	-46.45***	.69
Self Confidence	2.34	.75	2.78	.49	4949	-41.96***	.62
Emotion Identification & Regulation	2.06	.55	2.62	.43	5150	-65.41***	.93
Assertiveness	1.95	.74	2.69	.56	5076	-68.44***	.97
Cooperative Behavior	2.25	.65	2.75	.44	5120	-54.93***	.81

\*\*\*  $p < .001$ . Cohen's d reported in absolute values.

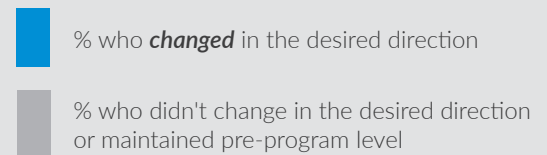
**Protective Factor:**  
**Social and Emotional**  
**Competence of Children**

PRE-TEST  
POST-TEST

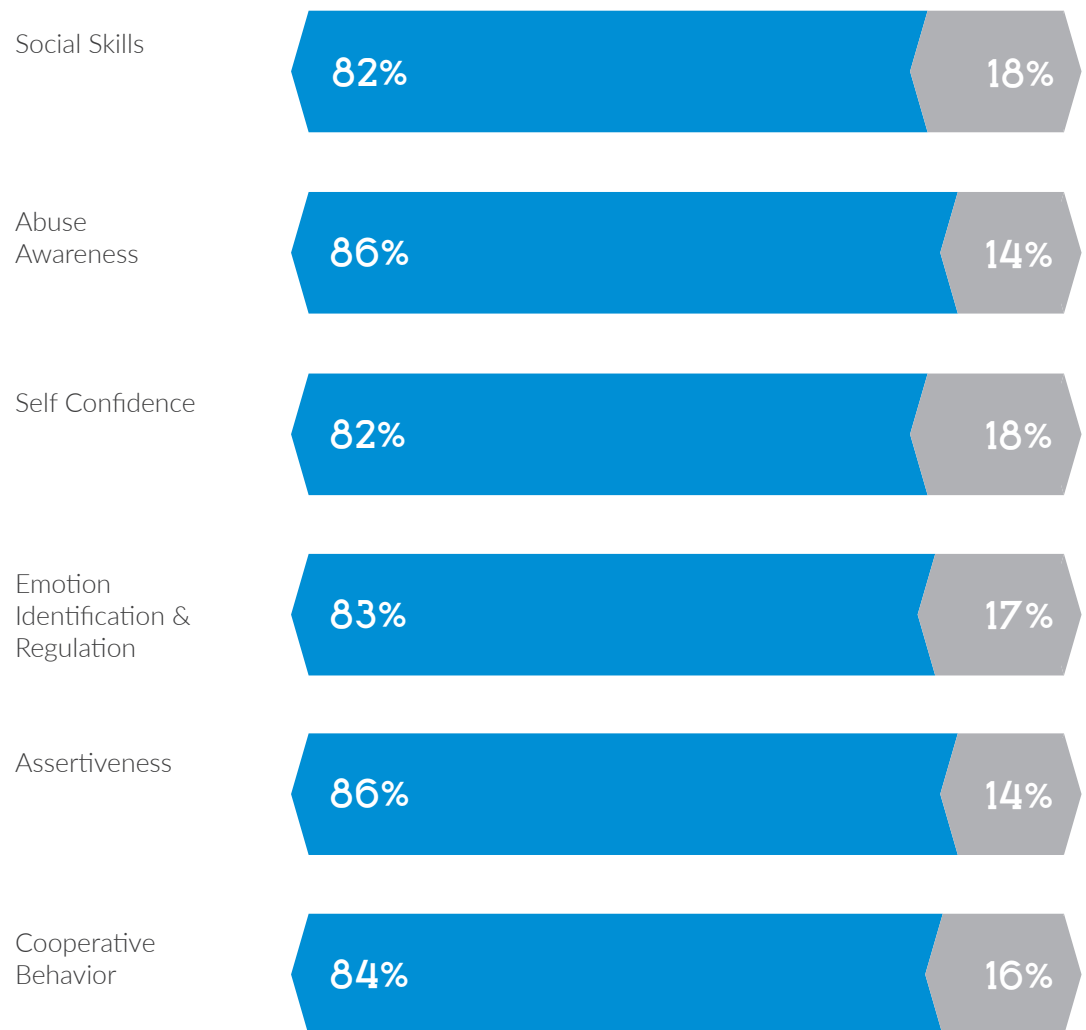


# Key Changes

We also examined the number of participants who showed improvement and found the majority rated themselves as improved in each area assessed.

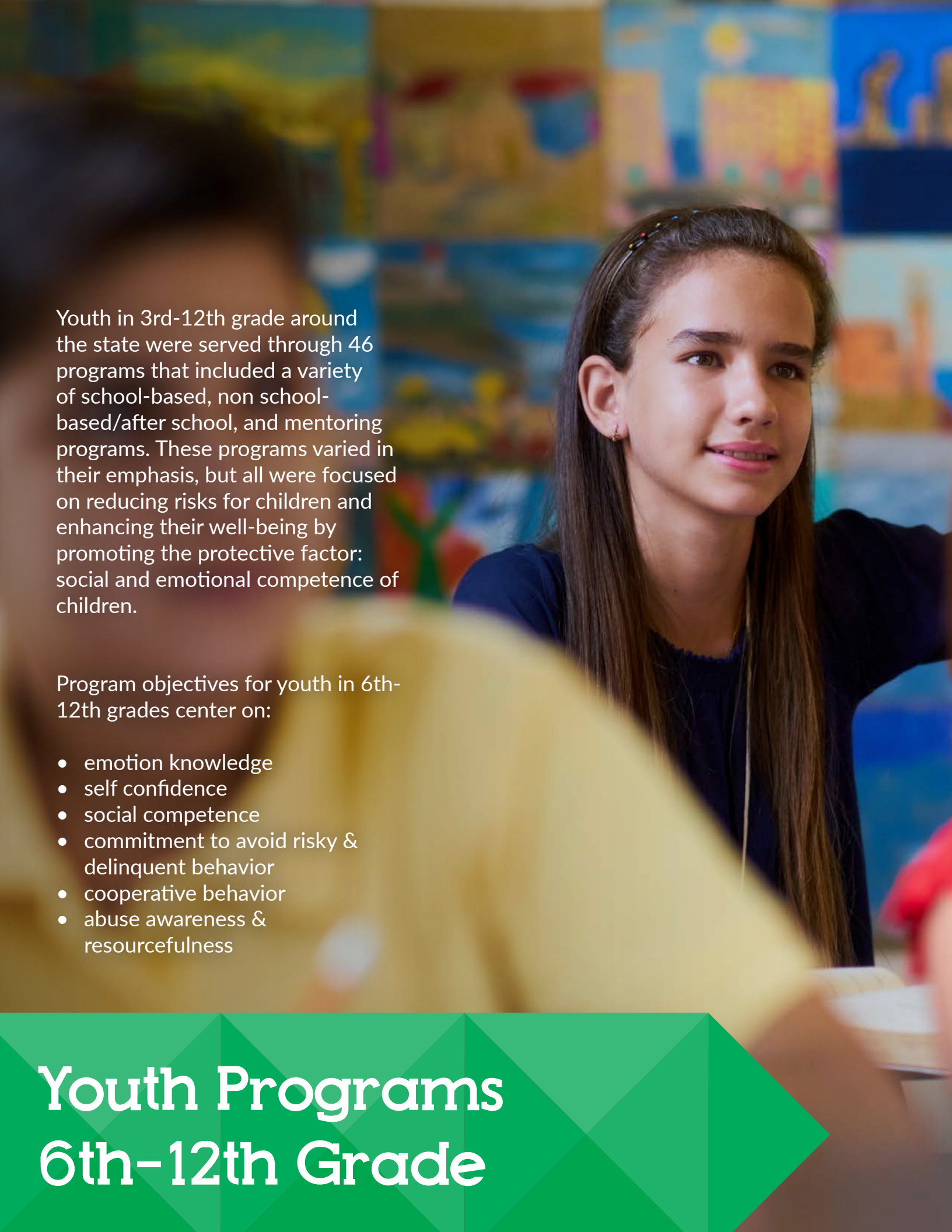


## Protective Factor: Social and Emotional Competence of Children



***“To my after school teacher- Thank you for making me better at BAMA Kids. Thank you.”***

*-Youth Program Participant*



Youth in 3rd-12th grade around the state were served through 46 programs that included a variety of school-based, non school-based/after school, and mentoring programs. These programs varied in their emphasis, but all were focused on reducing risks for children and enhancing their well-being by promoting the protective factor: social and emotional competence of children.

Program objectives for youth in 6th-12th grades center on:

- emotion knowledge
- self confidence
- social competence
- commitment to avoid risky & delinquent behavior
- cooperative behavior
- abuse awareness & resourcefulness

# Youth Programs 6th-12th Grade





## Youth Programs 6th - 12th Grade Demographics

Data on youth demographics from school-based, non-school based/after school, and mentoring programs offered to students in 6th - 12th grade indicate that participants were diverse in age, race, and gender. Note: Youth who participated in community awareness programs did not provide demographic information.

### Gender

- 48% female
- 52% male



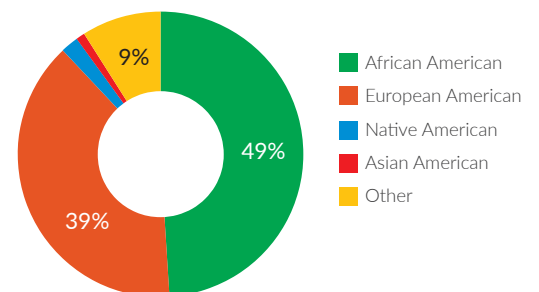
48% Female



52% Male

### Race & Ethnicity

- 49% African American
  - 39% European American
  - 2% Native American
  - 1% Asian American
  - 9% selected "other" when asked ethnic background
- Of all participants, 8% identified as Hispanic or Latino



A sample of 6th – 12th grade participants (n=5,820) responded to an assessment of 6 goals. Analyses of measures (some using multi-items; Chronbach's  $\alpha$  ranges from .66 -.69) using paired sample t-tests revealed statistically significant ( $p < .001$ ) improvements for participants, on average, in ALL targeted areas. The effect sizes ranged from .54-.81. The average magnitude of the effect sizes for these improvements was .65 and can be considered moderate to large (i.e. .25 small effect, .50 moderate effect, .75 large effect).

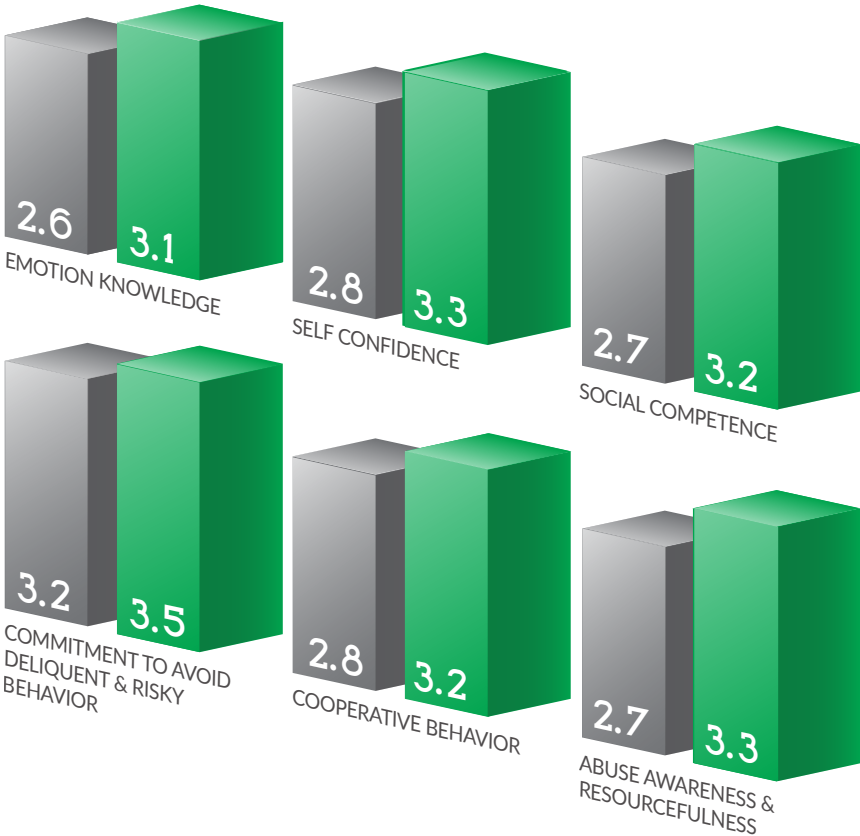
**Table 5.** Paired Sample T-test for mean change over time.

	Pre-Test M	SD	Post-Test M	SD	df	t	Cohen's d
<b>Social and Emotional Competence of Children</b>							
Emotion Knowledge	2.60	.74	3.10	.75	5650	-50.61***	.67
Self Confidence	2.83	.90	3.27	.78	5594	-40.26***	.55
Social Competence	2.71	.63	3.20	.61	5743	-57.29***	.76
Commitment to Avoid Delinquent & Risky Behavior	3.23	.69	3.51	.56	5737	-40.56***	.54
Cooperative Behavior	2.78	.91	3.24	.80	5643	-42.75***	.57
Abuse Awareness & Resourcefulness	2.69	.74	3.27	.65	5717	-60.11***	.81

\*\*\*  $p < .001$ . Cohen's d reported in absolute values.

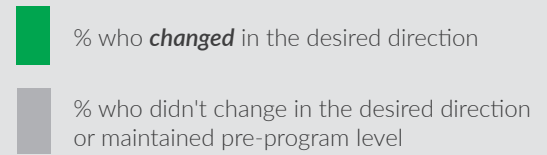
**Protective Factor:**  
**Social and Emotional Competence of Children**

PRE-TEST  
 POST-TEST



# Key Changes

We also examined the number of participants who showed improvement and found the majority rated themselves as improved in each area assessed.



## Protective Factor: Social and Emotional Competence of Children

Emotion Knowledge

65%

35%

Self Confidence

54%

46%

Social Competence

76%

24%

Commitment to Avoid Delinquent & Risky Behavior

67%

33%

Cooperative Behavior


55%

45%

Abuse Awareness & Resourcefulness

77%

23%

A young child with light brown hair, wearing a blue quilted jacket, a grey corduroy hat, and grey pants, is climbing a green metal play structure. The child is looking towards the camera with a slight smile. The background is a blurred outdoor setting with trees and foliage.

*“The Central Alabama Regional Child Advocacy Center assists our district each year with the mandatory reporter training. Their experiences, knowledge, and partnership provide us with the resources we need to ensure that every child has an advocate in the school and community. ”*

*- Mandatory Reporter Training Participant*

**Community  
Awareness Programs**



There were 13 programs funded to specifically conduct Community Awareness activities. These programs provided information to professionals and community members on child abuse and neglect in an effort to raise awareness and increase 1) the likelihood of reporting suspected child abuse and neglect and 2) the use of services provided for child abuse and neglect situations.

Additionally, many of the Youth, Parent Education and Home Visiting, Respite, and Fatherhood programs also made efforts to raise community awareness about child abuse and neglect and documented their efforts.

Due to the large numbers attending community awareness programs, individual surveys were not administered to these participants. Staff tracked the number of face to face encounters and reported these to the evaluation team monthly and quarterly.

- Community awareness programs/ presentations **directly served a total of 247,124 individuals.**

Staff also tracked exposures to other community awareness efforts implemented within communities through various media outlets, such as billboards, radio and newspaper ads, agency websites, and social media (Facebook, Instagram, and Snapchat).

- **9,712,918 exposures/impressions were documented.**



**Making a  
Difference**



## Making a Difference

Helen Keller noted: “The world is moved along not only by the mighty shoves of its heroes, but also by the aggregate of the tiny pushes of each honest worker.” As we complete another year as the Auburn University Evaluation Team, we reflect on the hundreds of people throughout the State of Alabama who are working with the programs funded by the Alabama Department of Child Abuse and Neglect Prevention – the Children’s Trust Fund. We value our partnership with them and continue to be so impressed with their selfless efforts to offer family-strengthening resources to youth and parents in our communities. Their work doesn’t stop there - they also are invested in the process of collecting the important data that are critical to telling the participants’ collective story. And it’s a powerful story! While we are objective in our analyses of these data, we cannot help but be grateful when we see the results of their work. We have clear evidence that participants value these programs and are experiencing multiple benefits.

We continue to be invested in providing meaningful and useful information for grantees, the ADCANP/CTF staff and Board, and the ADCANP/CTF funding sources. It is our hope that this report will be helpful in your continued efforts to expand the outreach of ADCANP/CTF funded programs in pursuit of your mission: To Prevent Child Abuse and Neglect in the State of Alabama.

We are so appreciative of this opportunity provided by the inspiring Sallye Longshore, Director, Tracy Plummer, Deputy Director, and the Board. This is truly a great team effort and we cannot thank you enough for your unending support and investment in this initiative and in us, as a research team. You are visionaries and it is our privilege and pleasure to work for you and with you.

The dedication of ADCANP/CTF staff and Grantee Program staff to protecting and strengthening children and families is unparalleled in the State of Alabama. We commend you for the evidence provided in this report of the large numbers of citizens who face the future more informed and empowered. Together – these programs are making a difference for Alabama families.

**PY 2017-2018 REPORT**  
submitted in October by:

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preventing child abuse  
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