

How has Texas advanced a public health approach to the prevention of abuse and neglect?

In most states, the prevention of child abuse and neglect is limited to services provided after maltreatment occurs and once the family is involved with child protective services. For child protection agencies that invest in upstream prevention, a crisis such as a high profile child death often triggers a cycle of reduction in prevention services and reinvestment in costly foster care services.

The Texas Department of Family and Protective Services (DFPS) sought to end this cycle by creating a division solely devoted to addressing risk factors that lead to abuse and neglect. Rather than waiting for a child to be harmed before intervening, the division of <u>Prevention and Early Intervention (PEI)</u> applies a public health approach to keeping children safe: providing population-based services to all families; normalizing a parent's need to seek help; and instilling a collective sense of responsibility for the safety and well-being of all children.

By investing in primary and secondary prevention services that equip communities to promote safe, stable, nurturing relationships and environments, Texas is creating a 21st century family well-being system, where a broad network of stakeholders work collectively further upstream to <u>prevent maltreatment</u> and promote the skills and strengths parents need to keep their children safe and thriving.¹



A population-based and coordinated approach to prevention

PEI's strategies are rooted in the belief that families want to do what is best for their children and keep them safe from harm, but often need some form of support to make that happen. Strengthening families and communities and preventing child abuse requires a diverse set of public and private-sector leaders at the state and local level working together in strategic and purposeful partnerships. To do this, a public health framework is applied to support positive child, family, and community outcomes by addressing the root causes of child abuse and neglect: poverty, family instability, poor health, substance abuse, and mental illness.

There has been a 182% increase in state and federal funding for PEI programs since 2012. In addition, the passage of the 2018 Family First Prevention Services Act allows child welfare agencies to draw down federal Title IV-E funds for evidence-based preventive services for children, parents, and relative caregivers to prevent foster care placement. It is an unprecedented opportunity for DFPS to further expand its investment in prevention services and become a 21st century family well-being system.

PEI model

Once PEI became its own division, the team conducted conversations with community members and experts in the field and developed a strategic plan. It was decided that a public health model would be adopted and organized around the following three activities:

- Invest in community-based organizations and local governments to provide access to voluntary health, wellness, and family-strengthening programs.
- Support and enhance community-driven work, so that communities can identify and mend systemic issues that impact child and family well-being.
- Deliver public awareness initiatives that destigmatize and normalize a parent's need for support.

Prevention across the continuum

The Department of Family and Protective Services' PEI division was established in 1999 by the Texas Legislature

to consolidate child abuse and neglect prevention, juvenile delinquency prevention, and early intervention programs within a single state agency, under Child Protective Services (CPS). In 2014, PEI was separated from CPS so that it could have its own leadership and funding solely devoted to prevention. At the same time, the Texas Home Visiting program at Health and Human Services (HHS) merged with PEI to eliminate fragmentation and duplication of state prevention activities for vulnerable children, youth, families and communities.

PEI invests in all levels of prevention along the continuum. Universal prevention provides a wide range of activities directed at the general population. Primary prevention programs provide services to individuals or families at higher risk for maltreatment. Secondary prevention programs target individuals or families when there's early indication of maltreatment. Tertiary prevention programs provide services to reduce the likelihood of future maltreatment. Universal, primary, and secondary prevention programs focus on preventing abuse and neglect from occurring in the first place, rather than intervening afterwards to reduce any impact caused from maltreatment and to prevent future incidents.

For example, Family Connects - a universal prevention program funded by PEI - provides up to three nurse home visits to every family in Austin who gives birth at St. David's South Austin Medical Center beginning at about three weeks of age, regardless of income or circumstances. For most families, this amount of support will suffice; families at higher risk are referred to primary prevention programs such as Nurse Family Partnership for more intensive services. Current and former youth in foster care who are pregnant and/or parenting are offered services through Helping through Intervention and Prevention (HIP), an example of a PEI secondary prevention program which provides support to reduce the chance of future CPS intervention. PEI also funds a specialized court in San Antonio designed to address child abuse and neglect by helping parents regain control of their lives and custody of their children.

PEI prioritizes investments in evidence-based, data-driven programs whenever possible. It also partners with community-based organizations to build their capacity to measure the effectiveness of their programs. The division works closely with providers, model developers, and research and evaluation experts to expand use of, and fidelity to, evidence-based models.

PEI now manages nine programs that offer free, voluntary services to children, youth, and parents across Texas. The division does not provide direct

services, but rather maintains over 160 contracts with nonprofits, governments, and schools to provide local services within their communities. In 2018, PEI served more than 67,000 children and families with a budget of \$105 million through the following programs and services:

PROGRAM	EXAMPLE OF EVIDENCE-INFORMED MODELS	SAFETY IS A KEY MEASURE
Community Youth Development (CYD)	Mentoring, Youth Advisory Committee, Youth Leadership Development, Life Skills, Recreational Activities, Academic Support Services, Youth Based Curriculum	
Fatherhood EFFECTS	24/7 Dads, Nurturing Fathers	Х
Help through Intervention and Prevention (HIP)	Effective Black Parenting Program (EBPP), Exchange Parent Aide, Nurturing Parenting Program, Nurturing Skills for Parents, Nurturing Skills for Teen Parents, Parents as Teachers (PAT), Systematic Training for Effective Parenting (STEP), Triple P	Х
HOPES: Healthy Outcomes through Prevention and Early Support	Abriendo Puertas, Barkley's Defiant Child, <u>Incredible Years</u> , ADVANCE, <u>Home Instruction for Parents of Preschool Youngsters (HIPPY)</u> , Nurse-Family Partnership, Parent Café, ParentAide, <u>Parents As Teachers (PAT)</u> , <u>SafeCare</u> , <u>Systematic Training for Effective Parenting (STEP)</u> , <u>Trust-Based Relational</u> <u>Intervention (TBRI)</u> , <u>Triple P</u> , <u>Nurturing Parenting</u> , <u>Nurturing Fathers</u> , 24/7 Dads	Х
Military and Veterans Family Program	Systematic Training for Effective Parenting (STEP), STRONG STAR, Parents as Teachers (PAT), Stewards of Children, Nurturing Parenting Program, Self- Management And Recovery Training (SMART)	Х
Services to At- risk Youth (STAR)	Counseling (trauma-informed, several modalities), Parenting (evidence-based and research supported), Youth Development/Education (evidence-based and research supported)	Х
Statewide Youth Services Network (SYSN)	Boys and Girls Club programs, Big Brothers Big Sisters mentoring	
Texas Home Visiting	Family Connects, Healthy Families America, Home Instruction for Parents of Preschool Youngsters (HIPPY), Parents as Teachers (PAT), Nurse Family- Partnership (NFP)	Х
Texas Nurse Family Partnership Program (TNFP)	Nurse-Family Partnership (NFP)	Х

Child safety is everyone's responsibility

Child protection agencies need help to keep children safe, and can join with other key partners that touch the lives of children and families to work collectively on efforts to prevent abuse and neglect. An effective response requires that support networks be built and families engaged before crises strike. Through PEI's partnerships with local communities, organizations are poised to build effective and coordinated collaborations that streamline efforts so families receive the help they need.

A public health approach begins by identifying the underlying needs in the local community, particularly those that are the most wide-spread. A broad group of stakeholders then work together to identify and implement strategies to effectively meet those needs. Through many of its funded community programs, PEI supports the collective impact approach to coalition building which brings together stakeholders committed to a common agenda for solving a specific social problem, using a structured form of collaboration. PEI funds the backbone agency that provides the coordination and infrastructure for the collective effort, made up of community members, non-profit organizations, and government agencies. PEI provides support for existing coalitions and activates coalitions in communities that do not yet have them.

In addition to mobilizing stakeholders to form the coalitions described above, PEI partners across sectors with schools, housing authorities, and hospitals to break down silos and improve coordination. For example, one of PEI's goals is to improve fatherhood engagement, since a lack of engagement is associated with child abuse and neglect. Many Texas housing authorities have policies that do not allow the fathers to be on the property of the housing facility. In one community, PEI worked with the housing authority to waive this policy so fathers can come on-site and visit with their children for a pre-determined amount of time.

PEI also oversees the Office of Child Safety, a team that independently analyzes individual child abuse and neglect fatalities, near fatalities, and serious injuries investigated by DFPS or that occur while the child is involved with DFPS. Through analyzing trends in child abuse and neglect fatalities and near fatalities, this team assesses root causes to provide advanced consultative assistance to agency staff and local stakeholders, government agencies, and community organizations on the most effective prevention methods, as well as improvements in child welfare and prevention practices to reduce child maltreatment fatalities and near fatalities. The Office of Child safety produces an <u>annual</u> <u>report</u> of its findings that can be found online on <u>PEI's</u> <u>Reports and Presentations page</u>.

In 2015 DFPS partnered with the Texas Department of State Health Services to analyze and link DFPS-Child Fatality Review Data (DFPS-CFR) with other data sources including birth records, death records, and community-level risk indicators to develop a strategic plan to reduce abuse and neglect fatalities. After reviewing all abuse and neglect fatalities from calendar years 2010 to 2012 it was discovered that over half had no prior involvement with DFPS, highlighting the importance of population-based strategies to reach vulnerable children outside of the child welfare system and involve coordinated efforts between agencies. The ultimate goal of this plan is to reduce abuse and neglect fatalities by providing timely, coordinated, and evidence-based services to families and communities before there's a crisis.

Normalizing the need for parenting help

PEI staff traveled to different communities across the state to ask parents directly what types of services and supports they needed. The answer was similar from urban areas to the most rural counties: being a parent is amazing, but it is also difficult, and there is nowhere to go to deal with the stressors and challenges of parenting and learn where to get help. Accordingly, PEI decided to invest in changing cultural and societal norms to destigmatize seeking help and advance a narrative that <u>all parents need some support</u> to increase participation in voluntary parenting programs. PEI's message is one of parental support and building resiliency.

PEI recently launched a \$1 million universal public awareness campaign designed to support the parenting experience and normalize outreach for services to help parents deal with the challenges and stresses that can lead to child abuse and neglect. The <u>Help for Parents</u>, <u>Hope for Kids</u> media campaign includes television ads in the largest Texas markets, radio spots in rural Texas, and a statewide mobile and online campaign. On the campaign website, parents and other stakeholders can access <u>educational videos</u> and <u>tips</u> to address some of the most challenging aspects of parenting – behavioral challenges with teens, bedtime battles, crying babies, postpartum depression, toilet training, and more.

Using data analytics to target resources

To more effectively target resources and build capacity, PEI contracted with Population Health at University of Texas Health Science Center Tyler to develop tools that utilize geographically based risk and resiliency models to identify community maltreatment risk and the specific factors associated with that risk. In 2018, the center released maps showing the distribution of maltreatment rates in the state by residential ZIP code. These maps provide PEI with new opportunities to utilize state-of-the-art risk mapping and geographically-based risk and resiliency models to identify and allocate resources within communities of highest need.

Evidence of effectiveness

Currently, PEI captures the effectiveness of its efforts through two major outcome measures: a validated pre- and post-services survey of protective factors, and data on entry into the child welfare and juvenile justice system. The Protective Factors Survey measures parental protective factors in five major areas: family functioning/resiliency; social support; concrete support; child development and knowledge of parenting; and nurturing and attachment.

2018 OUTCOMES FOR PEI

- 94% of families remain safe* after 3 years of completing services
- Almost 90% of families show improvement in at least one protective factor
- More than 95% of youth served were not referred to juvenile probation

* Parents are not a confirmed perpetrator in a CPS investigation.

Source: DFPS Prevention and Early Intervention Outcomes Report – FY2018

In addition, outcomes collected for specific PEI programs, such as home visiting and fatherhood engagement programs, showed improved parenting skills, greater family economic self-sufficiency, increased father involvement and support, and enhanced connections to support networks, such as extended family members, other parents, and faith-based organizations.

1 The information in this brief is based on an interview with Sara Abrahams, Deputy Assistant Commissioner, Prevention and Early Intervention, Texas Department of Family and Protective Services on June 28, 2019.

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