



Iowa Department of Human Services

Prevention: Opportunities for Collaboration

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Objectives

- Overview of Prevention
 - Efforts in Iowa through Bureau of Child Welfare (IDHS)
 - Child maltreatment prevention (ICAPP/CBCAP)
 - Adolescent pregnancy prevention (CAPP)
- Opportunities for collaboration
- Q & A

Prevention, Where Do We Fit?



Prevention

- Three types of prevention:
 - **Primary:** Universally available (e.g., classroom education, parent education, public awareness)
 - **Secondary:** Services targeted to those at greater risk (e.g., families with risk factors for child abuse, adolescents in out-of-home placements with higher risk for teen pregnancy, etc.)
 - **Tertiary:** Services provided after abuse has occurred or to young parents after a child is born (e.g., formal child welfare services or young parent support programs)

What Do We Know?

- **Comprehensive Services:** Strategies should include multiple components and affect multiple settings to address a wide range of risk and protective factors of the target problem.
- **Varied Teaching Methods:** Strategies should include multiple teaching methods, including some type of active, skills based component.
- **Sufficient Dosage:** Participants need to be exposed to enough of the activity for it to have an effect.

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- **Theory Driven:** Preventive strategies should have scientific or logical rationale.
 - **Positive Relationships:** Programs should foster strong, stable, positive relationships between children and adults.
 - **Appropriately Timed:** Program activities should happen at a time (developmentally) that can have maximum impact in a participant's life.

- **Socioculturally Relevant:** Programs should be tailored to fit within cultural beliefs and practices of specific groups, as well as local community norms.
- **Outcome Evaluation:** A systematic outcome evaluation is necessary to determine whether a program or strategy worked.
- **Well-Trained Staff:** Programs need to be implemented by staff members who are sensitive, competent, and have received sufficient training, support, and supervision. Follow up (booster) training and technical assistance to staff are critical.

Source: Nation, M., Crusto, C., Wandersman, A., Kumpfer, K. L., Seybolt, D., Morrissey-Kane, E., & Davino, K. (2003). What works in prevention: Principles of effective prevention programs. American Psychologist, 58, 449-456.

Prevention Services in Iowa, Past, Present, and Future

State of Iowa
1952

Co

IOWA DEPARTMENTAL RULES

1952

Containing

The permanent rules and regulations of general application promulgated by
the state departments to July 1, 1952, except professional
regulatory examining and licensing provisions



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UNMARRIED PARENTS

SECTION X, CHAPTER 3

II. Responsibility of the County Department

The county department is responsible for providing services to unmarried parents and their children regardless of the age of the parents, their residence, financial situation, or whether the child remains with either parent. Even though the mother requires no material aid, the agency's services should be helpful to her in her personal relationships and adjustments, and in planning for her child. Some unmarried parents come to the county department without direct referral, and it may be necessary for the agency to meet its responsibility for the care and protection of children by assuming the initiative in those situations where the mother and baby are believed to be in need of help.

Shift in Child Welfare

- 1960s – “Modern Era of Child Protection”
 - An “explosion of interest in child abuse”
 - Physicians played a key role in this
 - 1962 – “The Battered Child Syndrome” published by pediatrician Henry Kempe
 - Reporter laws in place by 1967 in all states
 - Child Abuse Prevention and Treatment Act (CAPTA) first passed in 1974
 - States overwhelmed with influx of child abuse allegations, efforts shift to prevention

Iowa Child Abuse Prevention Program (ICAPP)

- Passage of law in 1982 (Iowa Code 235A.1)
 - Funding to be used for child abuse prevention, not child welfare or treatment services
 - Independent advisory council of professionals and volunteers who oversee grant administration
 - Similar to other state “trust funds” established throughout the country for the purposes of preventing abuse before it occurs

Who Provides ICAPP Services?

- A network of volunteer coalitions and councils with a presence in more than 80 counties
- These network members are responsible for delivering ICAPP-funded services
- They vary in size and structure, ranging from staffed organizations to volunteer boards that contract for services
- They must be broadly representative and recognized as the leader of child abuse prevention in their communities

Funding for ICAPP

- Federal Funds:
 - Promoting Safe and Stable Families (PSSF),
Temporary Assistance for Needy Families (TANF)
Child Abuse Prevention and Treatment Act (CAPTA)
- State Funds:
 - Birth certificate fees, sexual abuse prevention
appropriation, and income tax check off
- Total Annual Budget = Approx. \$1.35 million

Community-Based Child Abuse Prevention (CBCAP)

- Began in 1984 with “Child Abuse Prevention Federal Challenge Grants”
 - First law directing federal funds specifically to assist state efforts in preventing child maltreatment
 - Amendments in 1992, 1994, and 1996 incentivized creation of Family Resource Centers (FRCs), statewide prevention networks

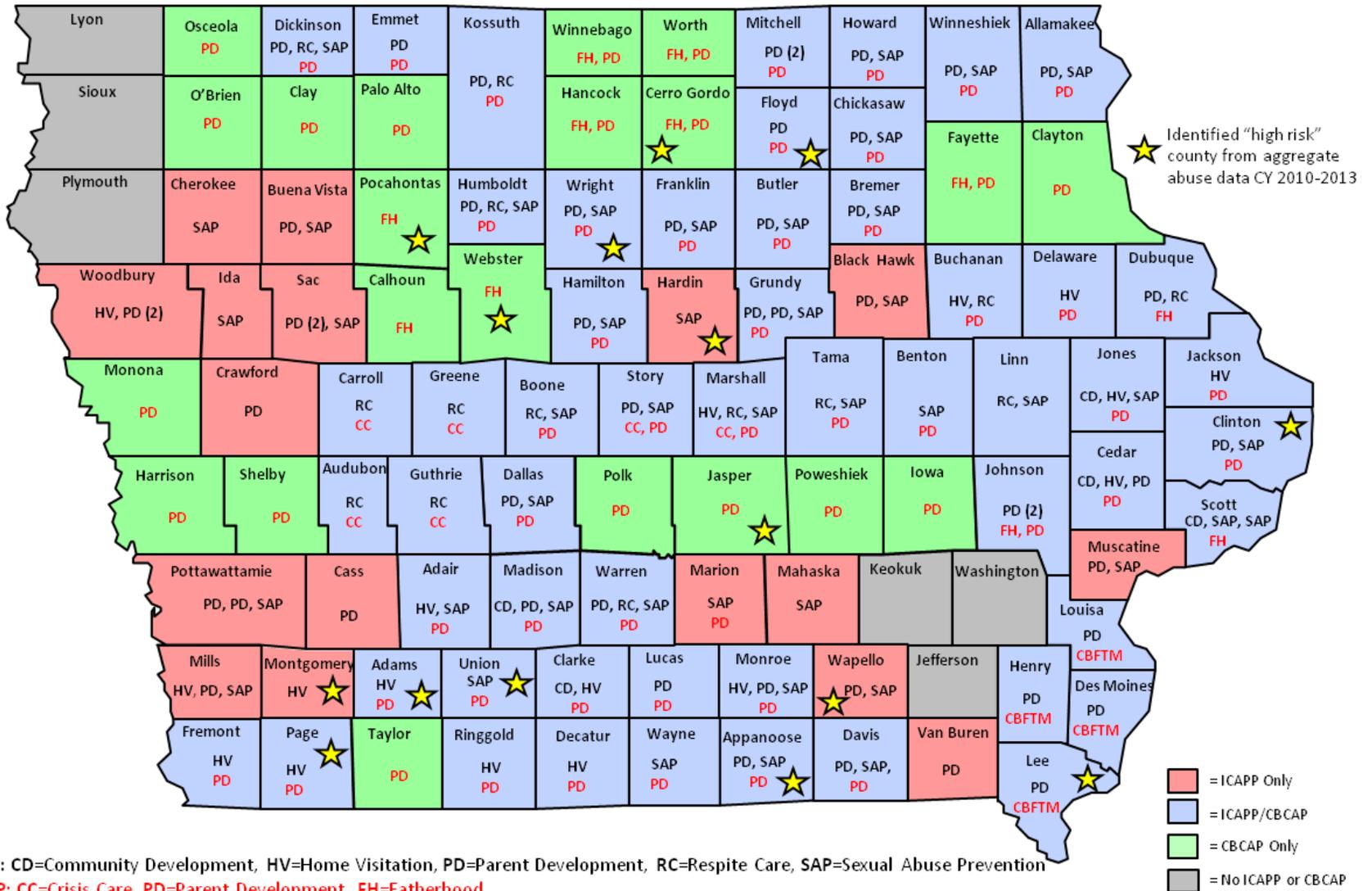
CBCAP (cont.)

- Community-Based Family Resource and Support (CBFRS) program legislation (2003)
 - Title II of CAPTA, part of the Keeping Children and Families Safe Act 2003
 - Renamed to “Community-Based Grants for the Prevention of Child Abuse and Neglect”, commonly referred to as “CBCAP”
 - Emphasis on supporting community-based efforts operate, expand, enhance, and network initiatives aimed at prevention

CBCAP Funding

- Formula grant based on population and leveraged funds
 - FFY 2017, Iowa awarded \$446,111
- Funds distributed through IDHS Networks
 - Community Partnerships for Protecting Children (CPPC sites)

SFY 2016-2018 ICAPP/CBCAP Project Grant Awards



Child Abuse & Teen Pregnancy Prevention – Common Goals



Community Adolescent Pregnancy Prevention (CAPP)

- 1987 – State funded program initiated (now funded by TANF), based on Iowa Code 234.6, Powers and duties of the administrator.
 6. *Have authority to use funds available to the department, subject to any limitations placed on the use thereof by the legislation appropriating the funds, to provide to or purchase, for families and individuals eligible therefor, services including but not limited to the following:*

- *a. Child care for children or adult day services, in facilities which are licensed or are approved as meeting standards for licensure.*
- *b. Foster care, including foster family care, group homes and institutions.*
- *c. Family-centered services, as defined in section 232.102, subsection 10, paragraph “b”.*
- **d. Family planning.**
- *e. Protective services.*
- *f. Services or support provided to a child with an intellectual disability or other developmental disability or to the child’s family.*
- *g. Transportation services. h. Any services, not otherwise enumerated in this subsection, authorized by or pursuant to the United States Social Security Act of 1934, as amended.*

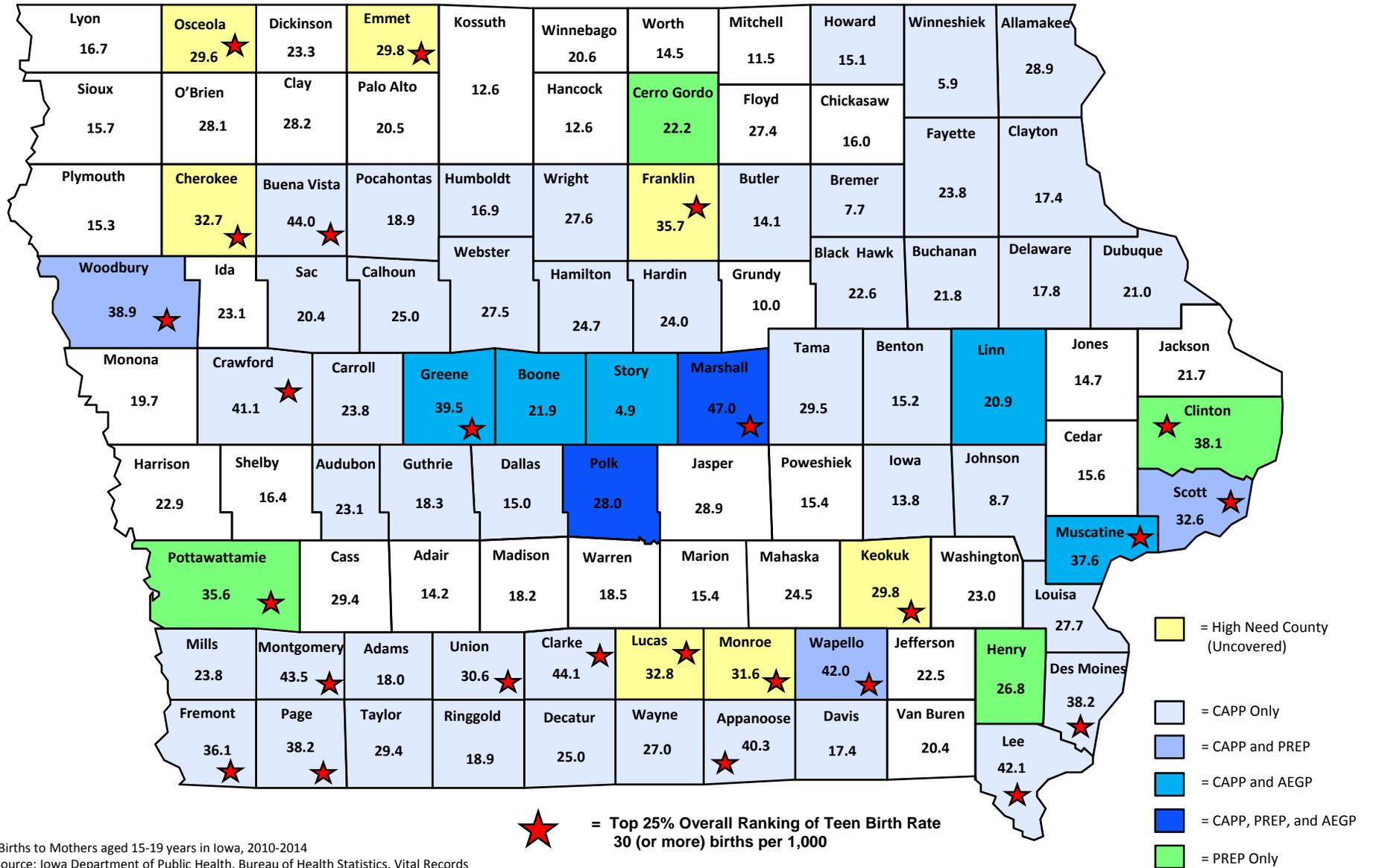
CAPP Grantee Projects

- Three Criteria:
 - Broad-based coalitions
 - Comprehensive programming focused on prevention of initial pregnancies during adolescent years, and
 - Services to pregnant and parenting adolescents (not more than 25% of grant)

CAPP Grantee Projects

- Awards to be based on:
 - Demonstrated need for services
 - Community support
 - Program structure/stability
 - Plan for use of funds (budget)

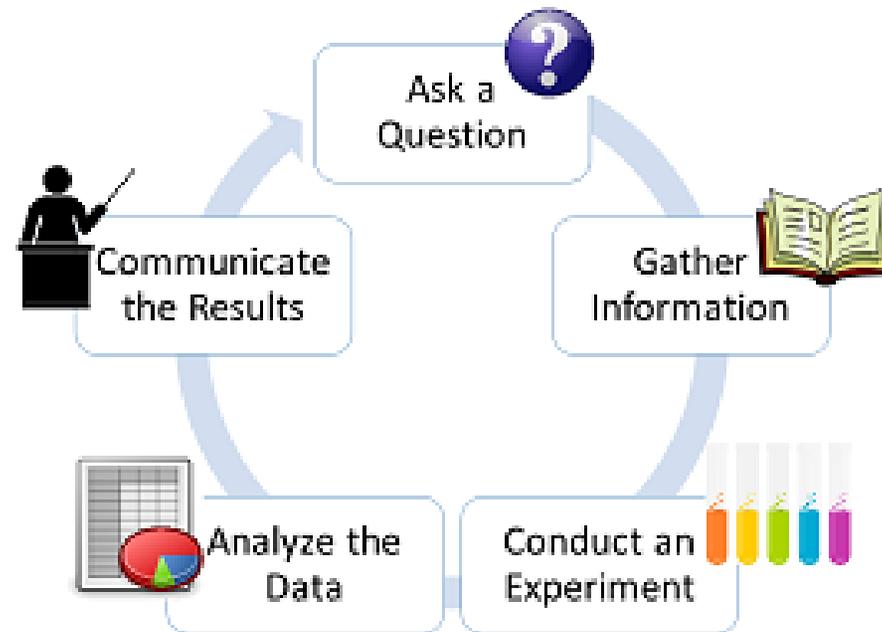
Iowa Adolescent Pregnancy Prevention Programs by County (with Teen Birth Rate¹)



¹Births to Mothers aged 15-19 years in Iowa, 2010-2014
 Source: Iowa Department of Public Health, Bureau of Health Statistics, Vital Records

Future: Data Driven Services

- Never before have we had so much information at our fingertips.



The Scientific Method

How Do We Move Forward Together?

- **Needs Assessments** – how do we use existing data and work together around assessing community needs?
- **Evaluation/Performance Measures** – what indicators do we have available and how do we begin to “move the mark”?
- **Collective Impact** - Integrated Data Systems, Predictive Analytics, etc.

Questions/Discussion





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