

The Office of Child Abuse Prevention
Professional Survey 2021

Purpose: The Oklahoma State Department of Health has partnered with other state and non-profit agencies in order to learn more about awareness and use of community supports and resources to help parents care for their children. Responses to this survey are **anonymous** and will be used to identify areas of service where improvements are needed, which will inform the five-year Oklahoma Child Abuse Prevention Plan. Survey completion will take about 10 minutes. By continuing on, you acknowledge that you have read this information and agree to participate in this research. You are free to withdraw your participation at any time without penalty.

1. What county do you work in? _____

2. What type of organization are you employed with?

- Government
- Non-profit
- Faith-based
- School
- Child Care Center
- Other: _____

3. In your employment do you directly work with children or provide any form of education / therapy / counseling / treatment to children?

- Yes
- No

4. Please further define your work:

- You work directly with children or their families (in case of younger children)
- You work indirectly with children or their families (in case of younger children)
- You are an administrative employee and do not work directly or indirectly with children or their families
- Other: _____

5. Please indicate your awareness of the following community services:

	I have not heard of this	I know of it, but have not referred families to this	I have referred families to this
Home-Based Services (Sooner Start, ParentPro programs: Children First [C1], Parents as Teachers, Safe Care, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parent Support Programs (Incredible Years, Circle of Security, Infant Massage, Positive Solutions, Child Guidance Services, Circle of Parents, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food, Housing, and Clothing Resource Programs (SNAP, WIC, TANF, food & Family Resource Centers (FRC), food banks, clothing closets, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employment and Education Resource Programs (Job training, job placement, temp agency, interview resources, GED/HSE, ESL, FAFSA, GI Bill, child care subsidy, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Insurance / Health Care Resource Programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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(SoonerCare, Variety Care, community health centers, tribal health clinics, veterans centers, etc.)			
Disability Resource Programs (Sooner Success, ADA DDS waiver, OK Department of Veterans Affairs, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mental Health Resource Programs (Community mental health centers: Red Rock, Grand Lake, CREOKS, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Child Care Resources Programs (DHS child care licensing, local resource and referral agencies, 2-1-1 Helpline Oklahoma offers information and referrals, including but not limited to rental assistance, food pantries, affordable housing, health resources, child care, after-school programs, caregiver support, financial programs, literacy, and job programs.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. In the past 5 years, have you taken a class/training on the following child abuse prevention topics: (check all that apply)

- | | | |
|---|--|--|
| <input type="checkbox"/> Victimization | <input type="checkbox"/> Risk factors for maltreatment | <input type="checkbox"/> Trauma-informed care |
| <input type="checkbox"/> Detection | <input type="checkbox"/> ACEs | <input type="checkbox"/> Intimate partner violence |
| <input type="checkbox"/> Reporting procedures | <input type="checkbox"/> Protective factors | |

7. How did you receive that training?

- In person, one on one
- In class group study
- Virtual, one on one
- Independent study based on materials provided and self research
- Other _____

8. Does your agency provide classes/training in child abuse and neglect, or provide access to a classes outside the agency? YES NO

9. Was there a fee associated with the training? YES NO

10. Is that training open to public? YES NO

11. Do you know where to access training on child abuse and neglect? YES NO

12. What training topics would you be interested in receiving: (check all that apply)

- | | | |
|---|--|--|
| <input type="checkbox"/> Victimization | <input type="checkbox"/> Risk factors for maltreatment | <input type="checkbox"/> Trauma-informed care |
| <input type="checkbox"/> Detection | <input type="checkbox"/> ACEs | <input type="checkbox"/> Intimate partner violence |
| <input type="checkbox"/> Reporting procedures | <input type="checkbox"/> Protective factors | <input type="checkbox"/> Other _____ |

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13. How would you prefer to receive training?

- In person, one on one
- In class group study
- Virtual, one on one
- Independent study based on materials provided and self research
- Other _____

14. How confident are you in your ability to do the following?

	Not at all confident	Somewhat confident	Very confident
Accurately identify child abuse and neglect			
Accurately identify intimate partner violence			
Quickly and successfully report suspected child abuse and neglect to the appropriate authorities			
Refer families to resources that best meet their needs			

15. How knowledgeable are you of ACEs (Adverse Childhood Experiences)? (circle one)

Not at all familiar I know a little I know a good amount I am well-informed

16. Are you knowledgeable of the 5 Protective Factors of Child Maltreatment (Parental resilience, social connections, concrete support in times of need, knowledge of parenting and child development, social and emotional competence of children)? (circle one)

Not at all familiar I know a little I know a good amount I am well-informed

17. On average, how easily are your families able to access the following services?

	Very easy	Easy	No opinion	Difficult	Very difficult
Prenatal health care					
Mental health screening & treatment					
Services to address concerns for the child's social, emotional, and/or behavioral development					
Affordable, quality child care					
Affordable, quality child education (pre-K, grade school, etc.)					

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Affordable, quality adult education (GED/HSE, ESL, career and technical education, etc.)					
Parenting education (classes, training, or groups to learn parenting skills)					
Sufficient food, housing, and clothing					
Sports/recreational programs for children (Little League, scouting, music/dance, etc.)					
Services that are appropriate for their culture and language					

18. When you think about your families, what do you think are the most significant barriers to accessing concrete resources (food, clothing, shelter)? (select all that apply)

- | | |
|---|--|
| <input type="checkbox"/> Cost
<input type="checkbox"/> Transportation
<input type="checkbox"/> Work schedule
<input type="checkbox"/> Location
<input type="checkbox"/> Waiting lists | <input type="checkbox"/> They don't know what's available
<input type="checkbox"/> Lack of available facilities/providers in the community
<input type="checkbox"/> Finding facilities/providers that speak language/understand culture
<input type="checkbox"/> Other (please specify) _____ |
|---|--|

19. When you think about your families, what do you think are the most significant barriers to accessing mental health resources? (select all that apply)

- | | |
|---|--|
| <input type="checkbox"/> Cost
<input type="checkbox"/> Transportation
<input type="checkbox"/> Work schedule
<input type="checkbox"/> Location
<input type="checkbox"/> Waiting lists | <input type="checkbox"/> They don't know what's available
<input type="checkbox"/> Lack of available facilities/providers in the community
<input type="checkbox"/> Finding facilities/providers that speak language/understand culture
<input type="checkbox"/> Other (please specify) _____ |
|---|--|

20. When you think about your families, what do you think are the most significant barriers to accessing parent resources (home-visiting services, parent education groups, etc.)? (select all that apply)

- | | |
|---|--|
| <input type="checkbox"/> Cost
<input type="checkbox"/> Transportation
<input type="checkbox"/> Work schedule
<input type="checkbox"/> Location
<input type="checkbox"/> Waiting lists | <input type="checkbox"/> They don't know what's available
<input type="checkbox"/> Lack of available facilities/providers in the community
<input type="checkbox"/> Finding facilities/providers that speak language/understand culture
<input type="checkbox"/> Other (please specify) _____ |
|---|--|

21. When you think about your families, what do you think are the most significant barriers to accessing quality childcare? (select all that apply)

- | | |
|---|--|
| <input type="checkbox"/> Cost
<input type="checkbox"/> Transportation
<input type="checkbox"/> Work schedule
<input type="checkbox"/> Location | <input type="checkbox"/> They don't know what's available
<input type="checkbox"/> Lack of available facilities/providers in the community
<input type="checkbox"/> Finding facilities/providers that speak language/understand culture
<input type="checkbox"/> Other (please specify) _____ |
|---|--|

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Waiting lists

22. When you think about your families, what do you think are the most significant barriers to accessing quality healthcare? (select all that apply)

- | | |
|---|--|
| <input type="checkbox"/> Cost | <input type="checkbox"/> They don't know what's available |
| <input type="checkbox"/> Transportation | <input type="checkbox"/> Lack of available facilities/providers in the community |
| <input type="checkbox"/> Work schedule | <input type="checkbox"/> Finding facilities/providers that speak language/understand culture |
| <input type="checkbox"/> Location | <input type="checkbox"/> Other (please specify) _____ |
| <input type="checkbox"/> Waiting lists | |

23. What is the biggest strength/resource in your community to help prevent child abuse and neglect?

24. In your community, what do you think is the least effective resource or tool in preventing child abuse and neglect?

To help us better understand the diverse needs of families in your community, please tell us a little about your experiences comparing now to the previous year during to the COVID-19 pandemic.

25. When comparing now to the previous year, is there more positive TOGETHERNESS in your families households because of. . .

	Less than before	The same as before	More than before	Prefer not to answer this
Getting involved in the children's education				
Facing challenges or solving problems together				
Helping each other				
Eating together				

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Sharing material resources				
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26. When comparing now to the previous year, are there more CONFLICTS in your families households about. . .

	Less than before	The same as before	More than before	Prefer not to answer this
Parenting or child care				
Children’s schoolwork				
Personal hygiene				
Decisions about visitors to the home				
Work or employment				
Finances				
Privacy or personal space				
Alcohol, tobacco, and/or drug use				

27. What methods do you currently use to contact families?

Check all that apply
Interactive video conferencing
Texting
Telephone
In person
Other (please describe) _____

Note: if you have not used video conferencing, you can skip question 28.

28. What challenges do you experience in using interactive video conferencing?

	Major challenge	Minor challenge	No challenge
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Do not have stable internet access			
Do not have tablets, webcams, and/or computers			
Do not have software to do interactive video conferencing			
Do not feel comfortable doing virtual visits			
Families do not have stable internet access			
Families do not have tablets, webcams, and/or computers			
Families do not have software to do interactive video conferencing			
Families seem/would be uncomfortable doing virtual visits			
Families are not/would not be comfortable doing virtual visits			
Our program has not received guidance from our model			
Our program has not received guidance from state or local officials			
Our program is unsure how to adapt visit content for virtual visits			
Our program is concerned about confidentiality and privacy			

29. What do you believe was the most helpful resource provided to families during the COVID-19 pandemic?

Please tell us a little about yourself to help us better understand the diverse needs of families in your community.

30. What is your gender? Female Male

31. How long have you worked directly with children and families? (check one)

- I have not worked directly with children and families
- < 1 year
- 1 – 5 years
- 6 – 10 years
- 11 – 20 years
- > 20 years

32. Have you ever reported child abuse and/or neglect? YES NO

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33. Are you currently concerned a child you know is being abused and/ or neglected? YES NO

34. Which race/ethnicity best describes you? White – non-Hispanic
Black
Hispanic/Latino
American Indian or Alaska Native
Asian, Native Hawaiian, or other Pacific Islander
Other: (please specify) _____

35. What is your highest level of education? High school graduate
Some college/post-secondary school/technical school
College graduate
Graduate certificate/post-college certificate
Master’s degree
Doctoral degree

Thank you for your time!

Please contact the office of Child Abuse Prevention (OSDH) if you need further assistance: (405) 426-8060
If you suspect child abuse/neglect, please call the Oklahoma Child Abuse Hotline (24 hours, statewide): 1-800-522-3511