

Interagency Child Abuse Prevention Task Force
Office of Child Abuse and Prevention, Oklahoma State Department of Health

OKLAHOMA STATE PLAN FOR THE *prevention* OF CHILD ABUSE AND NEGLECT 2009-2010



OKLAHOMA'S STATE PLAN *for prevention*

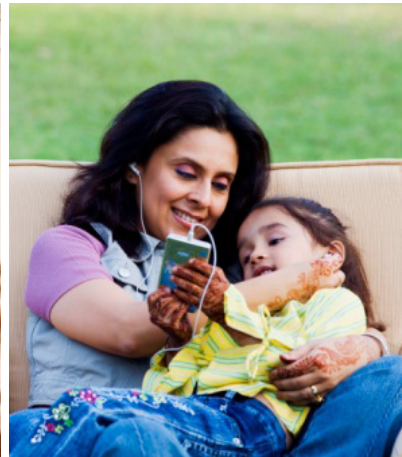


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MESSAGE FROM THE INTERAGENCY CHILD ABUSE PREVENTION TASK FORCE CHAIR

Dear Reader,

Child abuse and neglect are everyday tragedies for hundreds of children in Oklahoma. Maltreated children not only suffer immediate physical and emotional trauma, but the adverse experiences they undergo can affect them for the rest of their lives, can affect their families on a long-term basis, and can have a negative impact on Oklahoma. These children are more likely than other children to do poorly in school, to commit crimes as adolescents and adults, to struggle with drug and alcohol addictions and to abuse their own partners and children when they become adults.



There is a growing body of evidence concerning the effects of child abuse and neglect and an increasing understanding of the effectiveness of preventive interventions. As this knowledge base has developed, it has become clearer that allowing abuse and neglect to occur is unconscionable. We have learned about what children need to be healthy and how parents can be supported with formal and informal systems. In terms of economics, we know that an ounce of prevention really is worth a pound of cure. Early investments in children and families yield significant returns.

We know that Oklahomans see child abuse and neglect as a major social problem, but most feel they don't know what they can do to make a difference. It is time for all Oklahomans who care about the well-being of our children to re-think how we support children and their families. We all are working to combat child abuse: When mental health workers give services they are combatting child abuse; when faith groups help build strong families they are combatting child abuse. Now, more than ever, Oklahoma needs to make a commitment to invest in prevention - to support strategies that have shown to be effective and to be open to new approaches that are effective in preventing child abuse and neglect.

Sincerely,

Larry Langley, J.D.



INTRODUCTION

The Oklahoma State Department of Health is pleased to submit this State Plan for the Prevention of Child Abuse and Neglect for the time period of July 1, 2009 through June 30, 2010. This State Plan is to serve as a practical tool in identifying the service needs of Oklahoma children and families, existing services across the state and collaborations directed towards Oklahoma's prevention efforts.

While it is true that Oklahoma is currently implementing some of the Nation's most researched and recognized programs for families and children, these programs do not always have adequate resources to meet the needs. In addition, there are several types of services that are extremely limited or do not exist within our state, such as parent leadership opportunities, sexual abuse prevention programs and services to families with older children.

For these reasons, it is time for us to rethink our approach to the well-being of Oklahoma's children and families. The fundamental elements of successful families are safe, stable, nurturing relationships, financial stability, positive connections and opportunities. While all families have strengths, some have significant barriers that inhibit them from escaping their disadvantageous situations. Our responses to such families are often problem-oriented and piece-mealed. Instead, our approach must be comprehensive - drawing on the family's strengths, public and private services, faith groups, individuals, families and communities.

The State Plan is an opportunity to build upon Oklahoma's strengths and focus on PREVENTION. The 2009 – 2010 State Plan is considerably different than Oklahoma's State Plans of the past. This State Plan is just the beginning of long-term efforts to develop a multi-year, multi-agency, comprehensive plan. In order to develop such a plan, though, the OSDH Office of Child Abuse Prevention and its partners will focus on accomplishing the following tasks during State Fiscal year 2010:

1. Increase the capacity, ownership and leadership within the child abuse prevention professional community.

Strategy 1: The Interagency Child Abuse Prevention Task Force will provide leadership and direction for state efforts to prevent child abuse and neglect (see page 25).

Strategy 2: The OSDH Office of Child Abuse Prevention will staff the Interagency Child Abuse Prevention Task Force as well as other prevention efforts (see page 26).

Strategy 3: Enhance professional development of the existing workforce and facilitate cross-training staff from various agencies when appropriate (see page 27).

2. Develop a framework for a comprehensive system that focuses on prevention and/or early intervention of child maltreatment.

Strategy 4: Define the critical elements needed in every county/area of state for a comprehensive child abuse prevention system. (see page 28).

3. Identify key strategies that Oklahoma can implement to prevent abuse and neglect.

Strategy 5: Provide information regarding best practices and evidence-based/evidence-informed models from across the country to the Interagency Child Abuse Prevention Task Force and other interested parties to help best determine the use of prevention dollars (see page 29).

4. Strengthen the public will and community capacity to recognize the impact of maltreatment on families, communities and our state and to prevent maltreatment.

Strategy 6: Educate the general citizenry about the causes and effects of child abuse and neglect AND their individual roles in prevention (see page 29).

What is prevention?

One definition of prevention is “an action that stops something from happening.” Child abuse prevention programs provide such action. These services mitigate risks such as domestic violence, substance abuse, mental illness or poverty while boosting known protective factors such as social connections, knowledge of effective parenting, and access to support in times of need.¹ This balance of risk and protective factors influences the likelihood that a parent will harm his or her child.

Often we hear of prevention occurring at different levels. Oklahoma statutes,² as well as child abuse prevention leaders such as the Centers for Disease and Prevention (CDC), have defined or categorized child maltreatment into three distinct levels:

Primary Prevention (Universal): focuses on strategies for the general public; raises public awareness about child maltreatment; implements policies that protect, reduce risk factors and enhance protective factors for families. Primary prevention as outlined in Oklahoma statutes means programs and services designed to promote the general welfare of children and families.

Examples could include: a parent warmline, parenting resources on websites, public advertising campaigns, and parenting education accessible to all.



Secondary Prevention (Selected): targets families with risk factors for abuse and neglect through early identification; provides an intervention to stop the problem from occurring. Oklahoma statutes define secondary prevention as the identification of children who are in circumstances where there is a high risk that abuse will occur and assistance, as necessary and appropriate, to prevent abuse or neglect from occurring.

Examples could include: home visitation programs for families that meet certain eligibility criteria and respite services for families that are overly stressed or on the verge of a crisis.



Tertiary Prevention (Indicated): encompasses treatment for families who have been identified as abusive or neglectful. Oklahoma statutes define such services as those provided after abuse or neglect has occurred which are designed to prevent the recurrence of abuse or neglect.

Examples could include: services to parents reported to DHS, but not court involved (known as alternative or differential response services) or therapy for traumatized children.

“Children do better when their families are strong, and families do better when they live in communities that help them to succeed.”

What is the social-ecologic model?

The field of public health also provides a framework for the prevention of child maltreatment commonly known as the “Social-Ecologic Model.” This framework ranges from the individual to the societal level. In order to prevent child maltreatment, various strategies ranging from working directly with the family to broader public awareness activities must be utilized.³

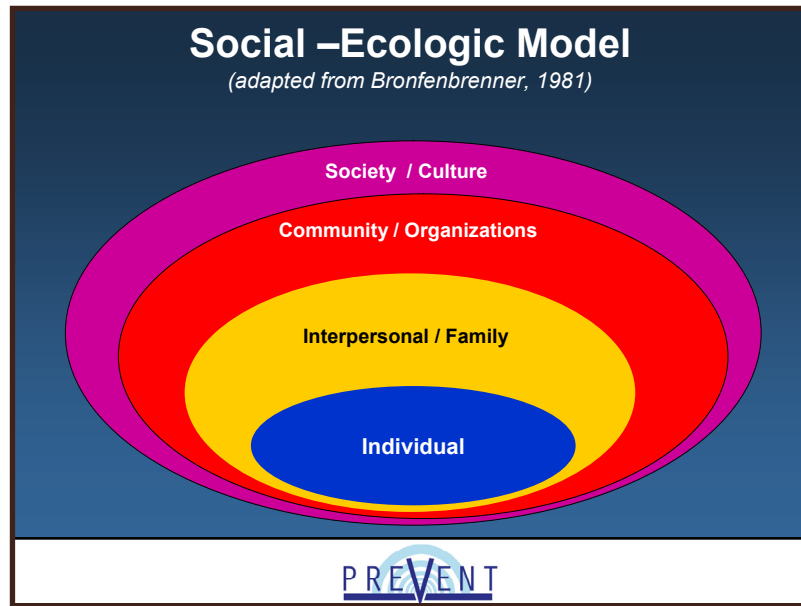
The factors that put families at risk of abuse and neglect are well known, and our state and local systems have the potential to bring about family and community well-being by supporting and strengthening families. Prevention strategies, at all levels, have been proven to enable families and communities to reduce the likelihood of abuse and neglect.

Individual Level: A number of factors determine an individual’s parenting style including some combination of developmental history, personality factors, social interactions or social networks, familial relationships, and the child’s characteristics.⁴ Parents draw on their experiences within their family, support and advice from friends, and information and services available in making decisions on how to parent.

In addition to these common factors, prevention efforts have been found to produce significant and substantial impacts on parenting behavior and child health and well being.⁵ By initiating parent education programs at birth or earlier, these interventions are in a position to help shape these



early parent-child interactions. Although the field is relatively young, several prevention models and programs have been evaluated for their effectiveness. For example, CDC behavioral scientists have conducted a meta-analysis of current research literature on parent education to identify components associated with more effective and less effective programs.⁶



The consequences of not educating or assisting parents can be highly negative for children. The Adverse Childhood Experiences Study (ACE Study)⁷ provides insight into how childhood experiences evolve into risky behaviors, which in turn, often evolve into disease and death. Child maltreatment leaves children vulnerable, actually disrupting the normal development of the brain. The ACE Study suggests that children and adolescents adopt risky behaviors as a means of coping with or covering their pain. The more trauma they experience, the greater the likelihood of adopting multiple risk behaviors such as alcohol or drug abuse, smoking, overeating and promiscuity.⁸ Some of these behaviors may very well be carried into adulthood.

Interpersonal/Family Level: Children most often live within families. Knowing that abuse and neglect typically occurs within families, strengthening and supporting families through specific strategies that increase positive outcomes for families makes sense. Most recently, the field of prevention has incorporated the elements, principles and practices of the family support approach.⁹ Oklahoma must focus on family strengths, increase knowledge/skills of parenting and child development, and connect families to their communities – all leading to stronger, safer and healthier families. It is recognized that families are responsible for the well-being of their children. It is recognized, too, that all families need additional support from time to time – formal or informal.

One of the most highly touted prevention efforts that addresses the needs of families is the “Strengthening Families through Early Care & Education” Initiative from the Center for the Study of Social Policies (CSSP).¹⁰ Many states, including Oklahoma, are striving to promote the “Five Protective Factors” identified within exemplary family support programs across the country. These

Protective Factors can be implemented within a variety of settings including, but not limited to, child care, social services and child welfare. The Protective Factors are:

1. **Parental resilience:** the ability to cope and bounce back from all types of challenges;
2. **Social connections:** friends, family members, neighbors and other members of a community who provide emotional support and concrete assistance to parents;
3. **Knowledge of parenting and child development:** accurate information about raising young children and appropriate expectations for their behavior;
4. **Concrete support in times of need:** financial security to cover day-to-day expenses and unexpected costs that come up from time to time, access to formal supports like TANF and Medicaid and informal support from local social services; and
5. **Nurturing and attachment:** a child's early experiences of being nurtured and developing a bond with a caring adult.

Community/Organization Level: Children need their communities to understand the factors that lead to abuse and neglect. Broad-based partnerships, working across systems, are necessary to create lasting change in how communities think about prevention and support families. Working together provides greater opportunities to identify strategies for ensuring that all parents in a community have the skills, supports and resources they need to competently and lovingly care for their children.

The ordinary citizen also has a critical role to play in the community of family support and child abuse prevention. Oklahoma is fortunate to have a mandatory reporting law. Many citizens understand that they have a duty to report child abuse and neglect once it has occurred. However, an unfortunate by-product of our reporting system may be that individuals believe this is the only way that they can intervene in a child or family's life. There are programs designed to create supportive, caring communities such as the "Creating Parenting-Rich Communities Initiative" from the Child Welfare League of America and "The Front Porch Project" promoted by the American Humane Association. Programs such as these should be explored for Oklahoma.





Society/Culture Level: Many lessons can be learned from other public health initiatives when attempting to engage the public at large. Initiatives to reduce tobacco use or increase seatbelt use have been effective by working in two arenas:

- 1) enacting or modifying laws, policies and regulations; and
- 2) educating the masses through social marketing campaigns.

A variety of prevention efforts have been mandated by state legislation. One example would be the laws passed in New York, Minnesota and Massachusetts that require Abusive Head Trauma (previously known as Shaken Baby Syndrome) training for parents and/or child care providers in order to reduce the number of injured babies.

In addition, Prevent Child Abuse America has engaged with the acclaimed Frameworks Institute to develop messaging that promotes positive parenting in a meaningful manner. The Frameworks' messaging is anticipated to be revealed in the near future.¹¹ Unfortunately, previous attempts at educational campaigns were found to be unfruitful by Frameworks and other groups. One example comes from another state where a radio commercial using an infant's cry was so

irritating to car drivers that they requested that the radio station take it off the air. Obviously the commercial made the point, but unfortunately not in a way that allowed the message to be heard by many. All this to say, there is an art to marketing for behavioral changes and this art is still evolving.

Financial Costs

Children who experience abuse or neglect are more likely to experience negative outcomes. In addition, there are economic costs to society also. The conservative estimate of the annual cost of child abuse and neglect in the U.S. is \$103.8 billion. This estimate included direct costs, associated with the immediate needs of children and indirect costs of long-term and or secondary effects. Not included were the estimated costs for intervention or treatment for the perpetrators or outpatient treatment for injuries. While it is possible to estimate the economic cost of abuse and neglect, it is impossible to estimate the cost of the impact of pain, suffering and loss to the victims.¹²



PAST EFFORTS *for prevention*





HISTORY OF THE PREVENTION OF CHILD ABUSE AND NEGLECT EFFORTS

Federal Legislation

Alarmed at the increasing incidence of child abuse and neglect, Congress passed the Child Abuse Prevention and Treatment Act (CAPTA)¹³ in 1974. While this legislation has been amended several times, its purpose remains the same: to support state efforts of prevention, assessment investigation, prosecution and treatment of child maltreatment. In the early 1980s, Congress made a further commitment to identifying and implementing solutions to child abuse by resolving that April be proclaimed National Child Abuse Prevention Month.

In 1996, Title II of CAPTA was amended by replacing previous grants with the Community-Based Child Abuse Prevention (CBCAP) Grants.¹⁴ The Administration for Children & Families within the Department of Health and Human Services requires that the Governor of each state designate a lead agency to receive these grant funds. Since 1996, the Oklahoma State Department of Health has served as Oklahoma's lead agency for the CBCAP Grant. The grant monies are to support the development, operation and expansion of initiatives to prevent child abuse and neglect as well as coordinate resources and activities that strengthen families.

Oklahoma Legislation

The Office of Child Abuse Prevention was created in 1984 by the Oklahoma Child Abuse Prevention Act.¹⁵ The intent of the Child Abuse Prevention Act is:

- that a comprehensive approach for the prevention of child abuse and neglect be developed for the state and used as a basis of funding for programs and services;
- that multidisciplinary and discipline-specific training on child abuse and neglect and domestic violence be available to professionals with responsibilities affecting children, youth, and families; and
- that the Office of Child Abuse Prevention within the Oklahoma State Department of Health establish a comprehensive statewide approach towards the prevention of child abuse and neglect.

Prior to 1984, the focus of child abuse and neglect efforts was on “after-the- fact” intervention, preventing the *recurrence* of child abuse and neglect. The Act declared that the prevention of child abuse and neglect was a priority in Oklahoma. In accordance with the Act, the Office of Child Abuse Prevention (OCAP) was created and placed within the Oklahoma State Department of Health to emphasize the focus on prevention. The OCAP provides primary (statewide promotion of child abuse prevention), secondary (community-based family support programs), and tertiary (training professionals on the identification and reporting of child maltreatment) prevention services.

The Child Abuse Prevention Act charges the OCAP with several duties and responsibilities focused on the following areas:



The Interagency Child Abuse Prevention Task Force¹⁶

The Interagency Child Abuse Prevention Task Force (ITF) has a mandated membership of representatives from: 1) public agencies with responsibilities for children and families, such as the Department of Health, Department of Education, Department of Human Services, Department of Mental Health and Substance Abuse, Office of the Attorney General and Judiciary/Law Enforcement Agency; 2) private organizations, such as, the American Academy of Pediatrics and the Oklahoma Partnership for School Readiness Board; 3) private agencies and programs that specialize in the identification and inter-

vention of child abuse and neglect; 4) local government or business community; and 5) parents participating in a family resource and support program. The Task Force is staffed by the OCAP. As directed by the CAP Act, the ITF reviews and evaluates all prevention program proposals submitted to the OCAP for funding through the Child Abuse Prevention Fund, reports findings to the Oklahoma Commission on Children and Youth and makes recommendations to the Commissioner of Health, the final authority for contract awards.

The Child Abuse Prevention Fund/Community-Based Service Contracts¹⁷

The Child Abuse Prevention Fund (CAP Fund) was created by the Act as a mechanism for pooling state, federal and private funds for the development and implementation of community-based family support programs for the prevention of child abuse and neglect. The majority of the CAP Fund is provided by state appropriations each year. In addition, specialty license plates are sold and proceeds are deposited into this fund.

The ITF works jointly with the OCAP to distribute the CAP Funds through a competitive bid process. All monies within the CAP Fund must be utilized for direct services to families by community-based organizations.

Since 1996, the OCAP has required that community-based organizations supported with CAP Fund dollars utilize only evidence-based models. All contractors have been utilizing the Healthy Families America¹⁸ approach along with the Parents as Teachers¹⁹ curriculum for the past two bid cycles. In addition, the parent support group model, Circle of Parents,²⁰ has also been added as an option for contractors to implement.

These particular models have been chosen because they have proven effectiveness - especially for families with young children. The OCAP has chosen to direct their efforts to these families because Oklahoma statistics demonstrate that:

- the majority of children that die from abuse and/or neglect are under the age of two years²¹;
- the majority of children that die from abuse and/or neglect, die at the hands of their biological parents²²; and
- over 80% of the children that die²³, die from neglect and not abuse.

OCAP staff are tasked with assuring that the community-based organizations are providing the highest caliber service to families across our state. The OCAP staff routinely train staff, conduct annual site visits and analyze programmatic data.

Child Abuse Training and Coordination Program²⁴

Multidisciplinary and discipline-specific training programs for professionals with responsibilities affecting children, youth and families are mandated responsibilities of the OCAP. The Child Abuse Training and Coordination (CATC) program also provides training, technical assistance and assessment of the developing and functioning county-level multidisciplinary child abuse and neglect teams throughout the state.

The **Child Abuse Training and Coordination Council (CATCC)** consists of 22 members. This Council is charged with annually reviewing the state Multidisciplinary Teams (MDTs) to ensure that teams meet the “functioning” status. In addition, CATCC assists with the development, implementation and review of curricula for agencies serving family and youth.



Oklahoma Commission on Children and Youth

The Oklahoma Commission on Children and Youth (OCCY) is an integral partner with the OCAP and ITF. The OCCY Commissioners are involved, by statute, in the approval process of the State Plan, the awarding of child abuse prevention contracts and the membership selection for the ITF and CATCC.

The Oklahoma State Department of Health/Office of Child Abuse Prevention is mandated in statute to be a leader in the area of child maltreatment prevention. However, by no means, is the OCAP the only entity providing prevention services in Oklahoma. There are many agencies and organizations involved in these efforts.

For more information about the Office of Child Abuse Prevention, visit <http://fsps.health.ok.gov>.



THE PLANNING PROCESS *for prevention*



PROCESS FOR DEVELOPING THE STATE PLAN

The Oklahoma Interagency Child Abuse Prevention Task Force (ITF) is to work collaboratively with the Office of Child Abuse Prevention (OCAP) to prepare the “Oklahoma State Plan for the Prevention of Child Abuse and Neglect” (State Plan). The State Plan is a compilation of findings and recommendations that are to be used to shape and develop the ‘Invitation to Bid’ that ultimately distributes the Child Abuse Prevention Fund dollars. In addition, the State Plan is to serve as a guide for the coordination of prevention services across agencies and institutions to assure that there is a continuum of efforts across the state (or to highlight services that are absent).

Responding to a survey during the last year, ITF members identified what important elements, based on their expertise, needed to be included in the State Plan. The overall recommendation was to proceed thoughtfully toward a comprehensive plan that would outline the entire scope of child abuse prevention efforts across the state. They asked that goals be clearly understood, manageable and measurable - laying the groundwork for complex tasks and objectives in future State Plans.

In addition, key informant interviews were conducted with the Director of the Oklahoma Department of Human Services, the Oklahoma State Department of Health and the Oklahoma Commis-



sion on Children and Youth. The goal of the interviews was to seek input regarding the development of the State Plan and its content.

Next, the ITF held a two-day retreat in November 2008. Over 50 stakeholders from public and private agencies, business leaders and community members attended the retreat. Dr. Richard Aronson, Director for the Humane Worlds Center for Maternal and Child Health discussed the current status of children and families and the connection between public health and child abuse prevention. In addition, two seasoned experts from Minnesota and Wisconsin shared their states' successes and set backs in developing and implementing their statewide comprehensive plans.

During the retreat, the ITF expressed its commitment to investing in prevention, expanding proven strategies and implementing new approaches to the prevention of child maltreatment. Developing a truly meaningful, comprehensive State Plan and redesigning the way in which we think of prevention will not occur overnight. The ITF and OCAP will have to:

- identify key stake holders in the prevention system;
- engage traditional and non-traditional community partners in the efforts;
- identify current initiatives, services and policies related to prevention;
- recognize gaps in services and services that are non-existent in our state; and
- learn of successful strategies being implemented in other states through literature and alliances.

At the conclusion of the retreat, the ITF members agreed that information needed to be gathered from a variety of sources in order to move forward. Eight topical work groups were established: 1) mental health; 2) child welfare; 3) domestic violence; 4) sexual abuse prevention; 5) family support; 6) substance abuse; and 7) economic opportunities. The ITF charged the OCAP to collect the information and include it in the upcoming State Plan. An eighth topical workgroup established, comprehensive systems development, will utilize the information gathered from the above workgroups to develop the recommendations outlining programs and resources needed for a comprehensive prevention system.

Following the retreat, various individual and group meetings were conducted. When possible, existing coalitions, task forces, etc. were contacted and asked to participate in the discussion of child abuse prevention at a routine meeting. Three questions asked of every group were:

- What is needed to support parents in the job of raising their children?
- What prevention efforts are you aware of and how are your efforts connected to these?
- What do we need in this state to prevent child abuse and neglect?

There were some common themes among all of the groups:

- All families need information and support in order to parent their children in a safe and nurturing way.
- Cross-training of frontline staff on recognizing stressed families and techniques to intervene and support these families would prevent abuse and neglect.
- A public engagement campaign about prevention of child abuse and supporting families is greatly needed.
- Children need loving, stable nurturing relationships.
- Prevention of child abuse and neglect is an issue most programs and agencies have a part in through their focus on helping families.
- While Oklahoma has quality programs in place, these programs are not available state-wide. A comprehensive, coordinated system is needed.

Below are listed some of the highlights of meetings on specific topics.

Mental Health:

- Families with members suffering from mental illness need support and appropriate treatment.
- Providing professionals with training related to recognizing signs of stress in families and how to assist them in a preventative, supportive manner would be beneficial.

Child Welfare:



- Families who can not meet basic needs are at higher risk for abuse and neglect. Many families are struggling to meet the most basic of needs for their children.
- A comprehensive approach is needed for at risk families; including preventative services (also known as differential, alternative or community response services) for families not screened into the child welfare system.

**Domestic Violence:**

- There is a growing need to address the children who are involved in or witness to domestic violence.
- There is an ongoing dialogue between the child abuse prevention field and those working in the domestic violence arena regarding the balancing act between child safety and the rights of a non-offending parent.

Sexual Abuse:

- There are little-to-no child sexual abuse prevention efforts in our state. Oklahoma should develop a task force to review resources available to address sexual abuse and make recommendations as to what programs should be implemented in order to have a comprehensive approach.

Family Support:

- Parents want and need information on positive parenting and child development.
- The information must be easily accessible.
- Families need basic needs met such as employment, safe housing and nutritious food in order to provide a healthy and nurturing environment for their children.
- Home visiting programs provide needed support and information to families, but are not available to all who need such services.
- Parents need support and information in understanding typical child development and strategies for dealing with stressful situations with positive coping skills.

Substance Abuse:

- Media promotion of positive mental health and substance abuse issues initiatives that focus on the strengths of families.
- Teens need support through peer-to-peer mentoring and discussion.
- Resources on parenting a “typical” teen are needed, often materials are focused on problems.
- Parent Universities partner with schools so that youth, parents and teachers can engage in a life-skills training process.
- Provide 24-hour resource line for parents so they can access information and support at anytime. Have parent resource centers open 24 hours.

Economic Development:

- Parents need stable employment.
- Statewide Workforce Centers assist with unemployment and training.
- Families need employment with a living wage and benefits/insurance in order to adequately provide for their children and ultimately improve their children’s outcomes.



Six parent focus groups were held in Oklahoma City, Ponca City, Jay and McAlester, Oklahoma. Over 100 parents participated. Some parents were part of prevention programs and others were engaged in court ordered activities. Parents were asked these questions: What are characteristics of a strong family and community? What supports do families need to raise their children?

Common themes among the sessions included:

- Stable jobs
- Strong, caring relationships with quality time together
- Support of family and friends (parents stated they often sought advice from friends and family when it came to parenting)
- Communities that are safe and family friendly
- Neighbors that know each other
- Employers that support family obligations
- Barriers to achieving the above needs included negative relationships, stress, lack of communication, over-scheduling, drugs, financial hardship and lack of support.



While parenting programs were identified as being helpful, parents focused on the support they get from neighbors, family and their community as necessary in their day-to-day job of raising a family. To this end programs that build community would be appreciated.

This document is just the beginning of gathering input from various stakeholder groups. It is the intention to return to these groups as recommendations and key strategies are formulated into a comprehensive five-year plan. Once such a plan is in place, these groups will be instrumental in its implementation.

Recently Oklahoma was one of the states accepted to participate in the 2009 PREVENT Child Maltreatment Institute at the University of North Carolina. Oklahoma sent representatives from OCCY, OSDH, ITF and Prevent Child Abuse Oklahoma. The purpose of the institute was to provide technical assistance and support to the State in developing a comprehensive plan for the prevention of child maltreatment over the next five years.



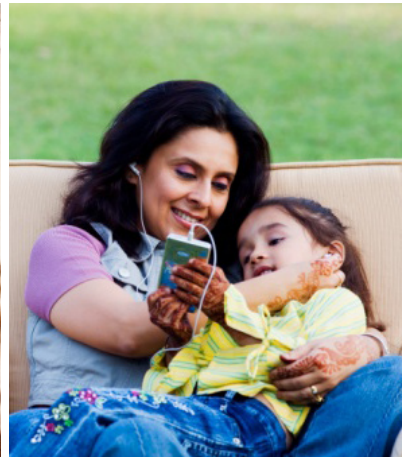
The PREVENT Child Maltreatment Institute is focused on creating the following items:

- detailed, team-based 6-month action plan focused on developing an effective program that stimulates organizational and social change;
- a Logic Model that outlines the transition from the 6-month plan into a comprehensive primary prevention program over a 5-year period;
- a framework for program evaluation with measurable objectives;
- communication strategies and message development for media and legislative advocacy; and
- approaches for achieving program sustainability.

The Oklahoma Team has developed an initial logic model supporting the efforts of the ITF and seeks to engage broad leadership in our mission to prevent maltreatment of children. This work will help frame the plan and the work of the ITF. (Please see 34).

The 2009 State Plan outlines the strategies for the upcoming year and outlines the process to build leadership, inform and engage stakeholders and assess the current status of prevention efforts in Oklahoma. From these efforts, a comprehensive plan with strategies that cross agency, program and community lines will be developed.

THE STRATEGIC PLAN *for prevention*



OKLAHOMA PLAN TO PREVENT CHILD ABUSE AND NEGLECT

PRIORITY STRATEGIES FOR 2009-2010

Leadership

The Office of Child Abuse Prevention and the ITF of the Oklahoma Commission on Children and Youth shall prepare the comprehensive state plan for prevention of child abuse and neglect for the approval of the Commission. The agencies represented on the ITF are key to providing leadership, services and education on the factors impacting maltreatment and the prevention of maltreatment. They are currently responsible for recommending funding and reviewing the implementation of policies and programs that impact families.

The ITF has the “voice” to educate the general public and policymakers that child abuse and neglect is a public health issue. Preventing poor outcomes for families is more cost effective than intervention and treatment.

Leadership is needed to engage the broad array of stakeholders, state and local, including traditional partners such as social services, substance abuse/ mental health, health and education as well as non-traditional partners such as housing, finance and the private sector.

GOAL: Increase the capacity, ownership and leadership within the child abuse prevention professional community.

Strategy 1:

INTERAGENCY TASK FORCE PROVIDES LEADERSHIP AND DIRECTION FOR STATE EFFORTS TO PREVENT CHILD ABUSE AND NEGLECT.

Activities:

- Recommend funding for evidence-based community programs using the Healthy Families America model.
- Evaluate local home visitation projects on a yearly basis.
- Review current use of resources and allocate accordingly based on recommendations received regarding the comprehensive system of services workgroup.
- Provide leadership, when necessary, for the topical task forces to be established.
- Provide updates and training to ITF board members in order to increase their capacity and knowledge of critical issues related to prevention throughout the year.
- Participate in Prevent Institute.
- Finalize a five year comprehensive plan by 2010.

Measurable Outcomes:

1. Healthy Families America programs funded for FY09.
2. ITF members provide leadership for development of comprehensive plan.

Strategy 2:

OFFICE OF CHILD ABUSE PREVENTION WILL CONTINUE SUPPORT OF ITF AND PREVENTION PROGRAMS.

Activities:

- Facilitate collaboration between the Oklahoma Child Death Review Board and the Oklahoma Domestic Violence Fatality Review Board.
- Participate in efforts related to the Home Visitation Leadership Advisory Committee.
- Participate on National Boards/Coalitions/Work Groups related to prevention of child abuse and neglect.
- Determine how linkages with other community-based organizations, i.e., Smart Start Oklahoma, OCCY's community partnership boards, can enhance services for families.
- Explore the feasibility of implementing existing evidenced-based programs such as:
 - Children First (utilizing the Nurse-Family Partnership Model)
 - Project Safe Care
 - Parents as Teachers
 - Strengthening Families
 - The Incredible Years
 - Circle of Parents
 - Front Porch Project

Measurable Outcomes;

1. OCAP provides staff support to family support programs within the division.
2. Oklahoma implements evidence-based programs with measurable outcomes that meet the needs of children and families.
3. Collaboration between the Oklahoma Child Death Review Board and the Domestic Violence Fatality Review Board and shared information leads to implementation of strategies addressing prevention of child abuse and neglect.

Comprehensive System

Prevention is a long-term investment in the well-being of children and families. Various public agencies have responsibilities for prevention programs with different funding streams, policies and procedures and populations served. We know that piecemeal, single focused solutions do not address the complex issues that families face. A coordinated, interagency approach is needed to provide the supports that families need.

Coordination and collaboration strategies can range from those that are easy to implement to those that are more complex. Interagency coordination will lead to efficient use of resources and a coordinated response to family needs.

Oklahoma has a broad array of public and private services focused on the needs of families. We are recognized for the evidence-based programs implemented and our history of helping our neighbors in need. To develop a clear five year comprehensive plan it is first necessary to identify all of our current resources, gaps in resources, needed resources and assess the best strategies to support families with identified actions and measurable results.

Strategy 3:

ENHANCE PROFESSIONAL DEVELOPMENT OF EXISTING WORKFORCE ON PREVENTION OF AND EARLY INTERVENING IN ABUSE AND NEGLECT BY 2010 AND CROSS TRAIN STAFF FROM VARIOUS AGENCIES WHERE APPROPRIATE.

Activities:

- Enhance existing and/or develop new training on identifying and intervening with families exhibiting stress factors for professionals.
- Implement enhanced training across agencies and programs beginning in 2011.
- Provide professional working with families with intervention strategies aimed at reducing stress factors and strengthening protective factors of families.
- Support Child Abuse Prevention Programs that serve special populations:
 - Contract with Indian Tribes in order to assure that their population is provided child abuse prevention services.
 - Contract with agencies that serve special populations such as teen parents, physically and mentally challenged parents and racial and ethnic minority parents.
 - Allow OCAP Contractors to incorporate culturally-specific curricula if supported by research.

Measurable Outcomes:

1. Cross-training on recognizing high risk, high stress families is provided for those frontline staff delivering home visitation programs.
2. Prevention programs with measurable outcomes that serve special populations are funded.

Public Will

We must mobilize a critical mass of policy makers, employers, community leaders, educators and providers to act on a commitment to families.

A public will campaign can fuel this change. A public will campaign is a structured, organized, initiative to garner public support for a problem as a way of achieving needed change.

Public will campaigns have been shown to mobilize communities, organizations and individuals to call for policy or program changes in order to deal with problems. Educating the public about a problem and giving them the information and actions that can be taken to address the problem has driven many of the social changes that have occurred in our country.

A public will campaign can focus on strategies ranging from media campaigns, policy change and providers sharing the merits of their approach to strengthening families or sponsoring community events focused on positive parenting.

GOAL: Develop a framework for a comprehensive system that focuses on prevention of, and early intervention in, abuse and neglect by 2010.

Strategy 4:

DEFINE THE CRITICAL ELEMENTS NEEDED IN EVERY COUNTY/AREA OF THE STATE FOR A COMPREHENSIVE SYSTEM.

Activities:

- Task forces will be established or existing groups tapped to address specific topics: child welfare, substance abuse, mental health, domestic violence, economic stability, family support, special needs and comprehensive system development for the purpose of identifying short and long-term strategies that address prevention and early intervention; identifying existing resources and gaps in local and state systems by 2010.
- Identify existing primary, secondary and tertiary prevention programs, populations served, geographic availability, resources allocated and program outcomes and evaluation by November 2009.
- Measurable outcomes and evaluation will be established for each program, existing or new, that is implemented.

Measurable Outcomes:

1. Comprehensive Plan for the Prevention of Child Abuse and Neglect is completed by 2010.
2. System "map" of primary, secondary and tertiary prevention programs available statewide is completed by 2010.
3. Recommendations regarding how prevention of sexual abuse will be addressed by programs are approved and implementation is in progress by 2010.

GOAL: Identify key strategies that Oklahoma can implement to prevent abuse and neglect.

Strategy 5

PROVIDE INFORMATION REGARDING BEST PRACTICES AND EVIDENCE-BASED/EVIDENCE INFORMED MODELS FROM ACROSS THE STATE TO THE INTERAGENCY CHILD ABUSE PREVENTION TASK FORCE AND OTHER INTERESTED PARTIES TO HELP BEST DETERMINE THE USE OF PREVENTION DOLLARS.

Activities:

- Coordinate and integrate program activities and funds for the prevention of child abuse and neglect with regard to primary and secondary prevention.
- Establish workgroup to review existing evidence-based programs addressing prevention of sexual abuse. Make recommendation to ITF based on review by December 2009.
- Review other state systems to identify strategies, programs, policies that supported prevention efforts.

Measurable Outcomes:

1. Annual report on completion
2. Plan for 2010
3. County-by-county Guide

GOAL: Strengthen the public will and community capacity to recognize the impact of maltreatment on families, communities and our state and to prevent maltreatment

Strategy 6

STRENGTHEN THE PUBLIC WILL AND COMMUNITY CAPACITY TO PREVENT ABUSE AND NEGLECT AND RAISE AWARENESS OF THE IMPACT OF ABUSE AND NEGLECT ON CHILDREN, FAMILIES AND COMMUNITIES.

Activities:

- Based on recommendations for the five year plan, develop a policy agenda that supports the goals of the plan.

- Develop a statewide campaign that promotes specific child abuse prevention programs (such as family support programs).
- Develop a statewide campaign that celebrates the diversity of families in Oklahoma and provides tips on supporting families in your community.
- Develop a statewide campaign that promotes positive parenting practices utilizing television, radio, billboard and/or other print mediums and reframing principles.
- Provide educational materials upon request when funding is available; for example, Identification and Reporting of Child Abuse and Neglect Brochures and Child Abuse Hotline Cards
- Promotion and Community Involvement of Child Abuse Prevention Month (every April) through coordination of Child Abuse Prevention Day at the Capitol and other planned community events

Measurable Outcomes:

1. Policy agenda that defines needed resources for a comprehensive system focused on prevention of abuse and neglect.
2. Statewide media campaign implemented.
3. Education material provided to those programs requesting material.
4. Annual Child Abuse Prevention Day at the Capitol.

The Oklahoma State Plan for the Prevention of Child Abuse and Neglect represents the input of dedicated individuals and organizations who gave their time and expertise to develop this plan, which will provide the framework for our state in the prevention child abuse and neglect.

- | | | |
|---|---|---|
| • Domestic Violence Task Force | • Oklahoma Department of Human Services | • Ralph McQuarter, Minnesota Department of Human Services |
| • Interagency Task Force on the Prevention of Child Abuse and Neglect, OSDH | • Prevent Child Abuse Oklahoma | • Mary Anne Snyder, Wisconsin Children’s Trust Fund |
| • Dr. Barbara Bonner, Oklahoma University Health Sciences Center | • PREVENT Team of Oklahoma | • Micah Stirling, Prevent Child Abuse Oklahoma |
| • Oklahoma Commission on Children and Youth | • Ponca City Alternative School, parent group | • Linda Terrell, Center for Children and Families |
| • Oklahoma City Alternative School, Parent Group | • Parent Child Connections, Jay Oklahoma | |
| • Oklahoma Systems of Care, State Advisory Team | • Parent Group, McAlester Oklahoma | |
| | • Jack Chapman, Oklahoma Commission on Children and Youth | |

APPENDICIES



APPENDIX I

END NOTES

¹ Protective Factors Literature Review: Early Care and Education Program and the Prevention of Child Abuse and Neglect. Carole Horton. CSSP 2003.

² Title 63 Oklahoma Statute Section 1-227-.1.

³ PREVENT Institute, The University of North Carolina, Injury Prevention Research Center.

⁴ Belsky & Vondra, 1990; Sameroff & Chandler, 1975 and Sander, 1979.

⁵ Ramey and Ramey 1998.

⁶ "Parent Training Programs: Insights for Practitioners," United States Department of Health & Human Services, Centers for Disease Control and Prevention 2009.

⁷ ACE Issue Brief 2: Child Maltreatment; Oklahoma KIDS COUNT Factbook, 2006-2007; Issue Brief 2 of 5.

⁸ Ibid.

⁹ Family Strengthening Writ Large: On Becoming a Nation that Promotes Strong Families and Successful Youth. National Human Services Assembly. December 2007.

¹⁰ <http://www.cssp.org/>

¹¹ Reframing Child Abuse and Neglect for Increased Understanding and Engagement: Defining the Need for Strategic Reframing; Kevin T. Kirkpatrick. 2004 Prevent Child Abuse America.

¹² Total Estimated Cost of Child Abuse and Neglect in the United States, Ching-Tung Want, Ph.D. and John Holton, Ph.D. - 2-7 Prevent Child Abuse America.

¹³ Child Abuse Prevention and Treatment Act (CAPTA) Public Law 93 247.

¹⁴ [Http://www.acf.hhs.gov/programs/cb/laws_policies/cblaws/capta/index.htm](http://www.acf.hhs.gov/programs/cb/laws_policies/cblaws/capta/index.htm)

¹⁵ Title 63, O.S. Supp. 2001, Section 1-227.

¹⁶ 63 O.S. 1-227.4

¹⁷ 63 O.S. 1-227.8

¹⁸ www.healthyfamiliesamerica.org

¹⁹ www.parentsasteachers.org

²⁰ www.circleofparents.org

²¹ Child Abuse and Neglect Statistics. State Fiscal Year 2002, 13. Oklahoma Department of Human Services.

²² Ibid, 16.

²³ Ibid, 19.

²⁴ 63 O.S. 1-227.9

²⁵ Ibid

²⁶ www.okkids.org

APPENDIX II

ITF MEMBERS

Nelda Ramsey, Oklahoma Department of Human Services, Child Welfare Services

Barbara Smith, Oklahoma State Department of Health, Maternal and Child Health Services

(Sara) Sue Boyle, Oklahoma State Department of Health, Child Guidance Service

J.C. Smith, Ph.D., Oklahoma Department of Education

Teresa Shuck, Oklahoma Department of Mental Health and Substance Abuse Services

Tamatha Mosier, Office of Attorney General

Dr. Deborah Shropshire, Oklahoma Chapter of the American Academy of Pediatrics

Larry Langley, Judiciary, Legal Profession or Law Enforcement

Donald Batson, Office of the Faith Based and Community Initiatives

Maggi Hutchason, Oklahoma Commission on Children and Youth's Community Partnership Board

Susan Illgen, Oklahoma Partnership for School Readiness

Alissa Brummett, Parent Representative

Jacqueline Green, Parent Representative

Stephanie Matlock, Parent Representative

Karina Forest, Person having expertise in the identification and treatment of families at risk of child abuse and neglect who are representative of private agencies, programs and services for the prevention of child abuse and neglect and who do not receive funds from the Child Abuse Prevention Fund

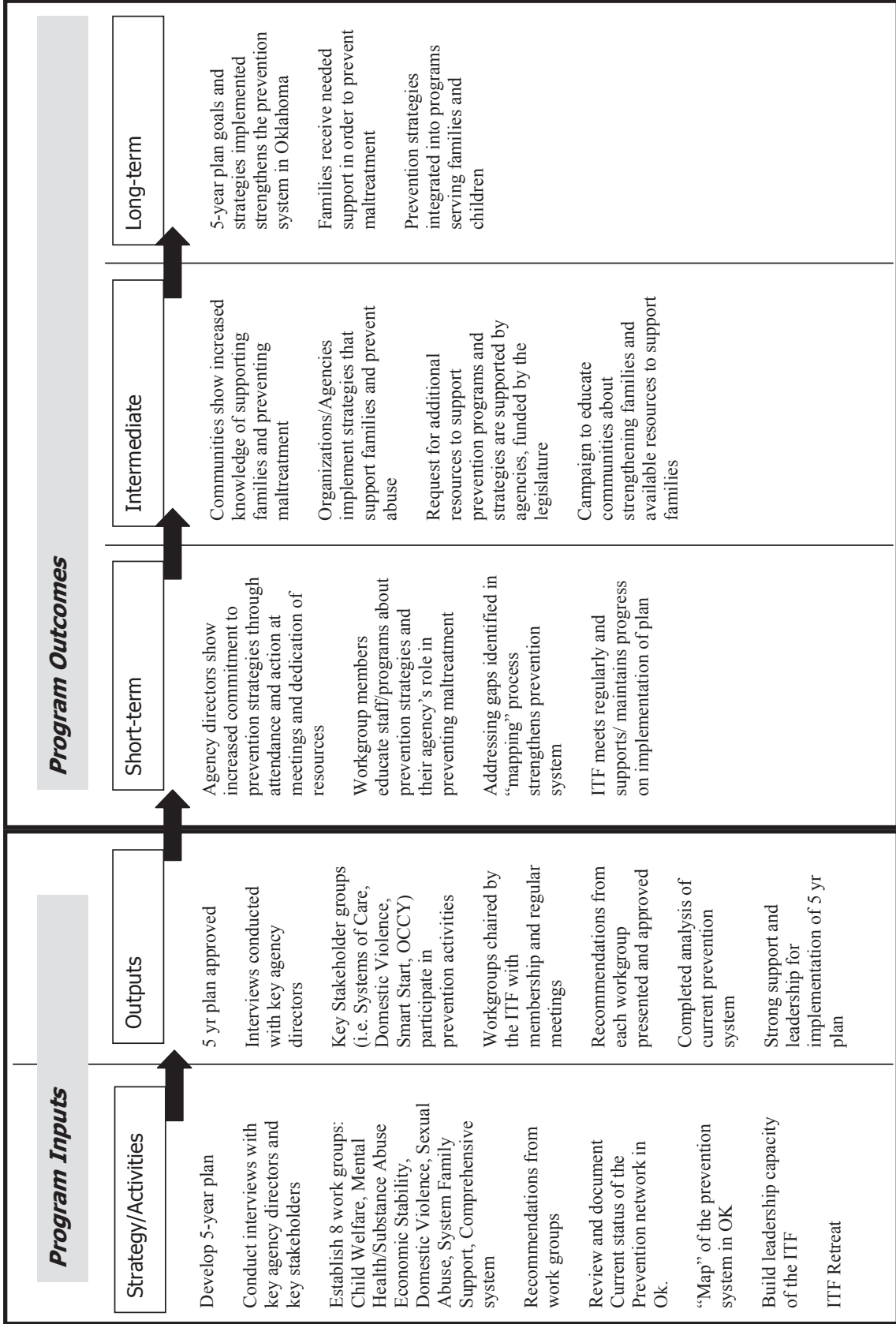
APPENDIX III

PREVENT LOGIC MODEL



Appendix III: PREVENT TEAM PROJECT PLAN (8 Months)

PREVENT TEAM LOGIC MODEL (5 Year Plan)



APPENDIX III

PREVENT LOGIC MODEL



Appendix III: PREVENT TEAM PROJECT PLAN (8 Months)

Team Name: TWISTERS

Short Term Outcome #1: What do you expect to change? (Select 1 Short-term outcome from your Logic Model)

Agency directors show increased commitment to prevention strategies through attendance and action at meetings and dedication of resources

ACTIVITIES	OUTPUTS – Tracking Activities	DATA SOURCES
<p>What activities will be taken to reach this short term outcome?</p> <p>Interviews with agency directors will be conducted to identify what resources/programs they have that are related to prevention, what their current commitment to prevention is and what they see as key strategies to prevent maltreatment</p> <p>Staff will be invited to participate in the 8 workgroups</p> <p>Strategies will be presented at ITF meetings and distributed to agencies responsible, as appropriate</p>	<p>What will tell you that the activities have been accomplished?</p> <p>Results of interviews will be used in planning</p> <p>Staff assigned and attending workgroups</p> <p>Agencies implement strategies when resources are available and begin to see change in outcomes for families</p>	<p>Where will you get information to determine if these activities were accomplished?</p> <p>Minutes, write-up of meetings</p> <p>ITF will track implementation of strategies identified in the 5-year plan. Progress recorded in yearly update.</p>

APPENDIX III

PREVENT LOGIC MODEL



Appendix III: PREVENT TEAM PROJECT PLAN (8 Months)

Team Name: TWISTERS

Short Term Outcome #1: What do you expect to change? (*Select 1 Short-term outcome from your Logic Model*)

Agency directors show increased commitment to prevention strategies through attendance and action at meetings and dedication of resources

EVALUATION INDICATORS	DATA SOURCES
<p>What will specifically indicate you have (or have not) reached this short-term outcome?</p> <p>Agencies taking responsibility for implementing prevention strategies.</p> <p>Reduction in families identified as high risk for abuse and neglect.</p> <p>Families diverted from intensive child welfare services</p>	<p>Where will you get information to help evaluate this outcome?</p> <p>Annual reports, self-reporting by agencies at meetings.</p> <p>DHS data</p> <p>DHS and OSDH data</p>

APPENDIX III

PREVENT LOGIC MODEL



Appendix III: PREVENT TEAM PROJECT PLAN (8 Months)

Team Name: TWISTERS

Short Term Outcome #1: What do you expect to change? (*Select 1 Short-term outcome from your Logic Model*)

ITF meets regularly and supports/maintains progress on implementation of plan

RESOURCES

What resources are needed to carry out these activities and evaluate this outcome?

- ITF will attend presentations on various issues identified in the plan in order to become more educated about the issues
- Advocacy Training
- Board development training
- Staff support
- Commitment by agencies to send representatives who actively support prevention efforts
- Evaluation tools developed by OSDH staff – evaluate increase knowledge of ITF, actions taken by ITF

APPENDIX III

PREVENT LOGIC MODEL



Appendix III: PREVENT TEAM PROJECT PLAN (8 Months)

Team Name: TWISTERS

Short Term Outcome #2: **What do you expect to change?** (*Select 1 Short-term outcome from your Logic Model*)
 Addressing gaps identified in “mapping” process strengthens prevention system

ACTIVITIES	OUTPUTS – Tracking Activities	DATA SOURCES
What activities will be taken to reach this short term outcome? Conduct process to identify all programs that have prevention activities across the state Review annual reports, conduct surveys of programs regarding prevention activities	What will tell you that the activities have been accomplished? Document outlining current prevention activities in Oklahoma Listing of current programs involved in prevention	Where will you get information to determine if these activities were accomplished? Review of current documents, request information from agencies/programs, surveys Review current annual reports of agencies, review CBCAP application, evaluations conducted by currently funded projects.
Identify and catalog funding resources used by programs	Document outlining current spending on prevention	Legislative requests, review of federal funding resources received by state.

APPENDIX III
PREVENT LOGIC MODEL

Appendix III: PREVENT TEAM PROJECT PLAN (8 Months)



Team Name: TWISTERS

Short Term Outcome #2: What do you expect to change? (Select 1 Short-term outcome from your Logic Model)
Addressing gaps identified in “mapping” process strengthens prevention system

EVALUATION INDICATORS	DATA SOURCES
<p>What will specifically indicate you have (or have not) reached this short-term outcome?</p> <p>Agencies and communities will be aware of the available resources for preventing child maltreatment</p> <p>Financial resources identified and requests made to increase (if necessary) the resources allocated to prevention.</p>	<p>Where will you get information to help evaluate this outcome?</p> <p>Programs will see an increase in families seeking preventative help</p> <p>Review of budgets to see alignment of resource focused on prevention.</p>

APPENDIX III

PREVENT LOGIC MODEL



Appendix III: PREVENT TEAM PROJECT PLAN (8 Months)

Team Name: TWISTERS

Short Term Outcome #2: What do you expect to change? (Select 1 Short-term outcome from your Logic Model)
Addressing gaps identified in “mapping” process strengthens prevention system

RESOURCES

What resources are needed to carry out these activities and evaluate this outcome?

Resources needed for activities

- Activity #1: Staff time, descriptions of programs, clear definition of prevention, evaluation tools
- Activity #2: Budget requests and allocation of resources to prevention identified by agencies, development of tool to collect information
- Activity #3: Budget request made to increase resources available, process for interagency budget requests

Resources needed for evaluation

- Tracking of families in various programs, cooperation of agencies in collecting data, data collection forms, staff time
- Staff time, development of evaluation forms, tracking of requests of funds and actual allocation of funds

APPENDIX IV

ACKNOWLEDGEMENTS

The State Plan is submitted by:

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APPENDIX V

MEASURABLE OUTCOMES REVIEW SHEET

Goal 1: Increase the capacity, ownership and leadership within the child abuse prevention professional community			
Strategies	Measurable Outcomes	Specific Measures	Delivered?
Strategy 1: Interagency Task Force provides leadership and direction for state efforts to prevent child abuse and neglect	Healthy Families America programs funded for FY09; ITF provide leadership for development of comprehensive plan	Document containing number of dollars used to fund Healthy Families America programs Document containing listing of meetings of ITF with regard to development of comprehensive plan	
Strategy 2: Office of Child Abuse Prevention will continue support of ITF and prevention programs	OCAP provides staff support to family support programs within the division Oklahoma implements evidence-based programs with measurable outcomes that meet the needs of children and families Collaboration between Oklahoma Child Death Review Board and Dometics Violence Fatality Review Board to develop strategies	Document containing number of staff or staff hours dedicated to family support programs within the division Document containing number of operating programs Document containing listing of strategies developed by collaboration of two groups	
Strategy 3: Enhance Professional Development of Existing workforce on prevention of and early intervention in abuse and neglect by 2010 and cross train staff from various agencies where appropriate	Cross-training on recognizing high risk, high stress families is provided for those frontline staff delivering home visitation programs Prevention programs with measurable outcomes that serve special populations are funded	Document listing number of trainings and number of attendees to said trainings Document containing number of dollars used to fund prevention programs	
Goal 2: Develop a framework for a comprehensive system that focuses on prevention of and early intervention in abuse and neglect by 2010			
Strategies	Measurable Outcomes	Specific Measures	Delivered?
Strategy 4: Define the critical elements needed in every county/area of the state for a comprehensive system	Comprehensive Plan for Prevention of Child Abuse and Neglect completed by 2010 System "map" of primary, secondary and tertiary prevention programs available statewide is completed by 2010 Recommendations regarding how prevention of sexual abuse will be addressed by programs are approved and implementation is in progress by 2010	Document titled: Comprehensive Plan for the Prevention of Child Abuse and Neglect Document listing all primary, secondary and tertiary programs available statewide Document listing recommendations of how to address Child Sexual Abuse by 2010	

APPENDIX V

MEASURABLE OUTCOMES REVIEW SHEET

Goal 3: Identify key strategies that Oklahoma can implement to prevent child abuse and neglect			
Strategies	Measurable Outcomes	Specific Measures	Delivered?
<p>Strategy 5: Provide information regarding best practices and evidence-based/evidence-informed models from across the state to the Interagency Child Abuse Prevention Task Force and other interested parties to help best determine the use of prevention dollars</p>	<p>Annual Report on completion Plan for 2010 County By County Guide</p>	<p>Document titled: Annual Report Document titled: Plan for 2010 Document listing county specific info</p>	
Goal 4: Strengthen the public will and community capacity to recognize the impact of maltreatment on families, communicates and our state and to prevent maltreatment			
Strategies	Measurable Outcomes	Specific Measures	Delivered?
<p>Strategy 6: Strengthen the public will and community capacity to prevent child abuse and neglect and raise awareness of the impact of abuse and neglect on children, families and communities.</p>	<p>Policy agenda that defines needed resources for a comprehensive system focused on prevention of abuse and neglect Statewide media campaign implemented Education material provided to those programs requesting material Annual Child Abuse Prevention Day at the Capitol</p>	<p>Document outlining Policy Agenda for needed resources Document listing media efforts completed Document outlining activities of Day at Capitol including attendance numbers of public and legislators</p>	

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