

Arizona Promoting Safe and Stable Families Evaluation Report FFY 2005



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Executive Summary

In Federal Fiscal Year 2005, **5,963** families were served by the 16 agencies funded by the Arizona Promoting Safe and Stable Families (PSSF) program. These families were offered a multitude of services that continued to adhere to the mission of the program:

...to strengthen and stabilize all families through the development of a continuum of family-centered services which promote safety, are comprehensive, coordinated, community based, accessible and culturally responsive (Arizona Department of Economic Security, PSSF Website).

Based on theory and consistent empirical evidence regarding its effectiveness, the agencies utilized a family-centered framework in providing program services. In addition, this approach was strength-based and designed to allow the family to take a fundamental role in prioritizing and resolving their presenting issues. Because the PSSF program is designed to tailor services to meet the needs of each individual family, *it represents one of the few programs in the state that is able to offer services to families at various levels of risk.* Furthermore, the services available to families in the program address all of the priority areas outlined in the Governor's Prevention System Subcommittee Report on Child Abuse and Neglect Prevention (2004).

The analysis of the Federal Fiscal Year (FFY) 2005 data yielded the following results:

Participant Profile

- Families were ethnically diverse (67% of the children were from minority populations).
- More primary caregivers were employed at intake, were over the age of 30, and had slightly higher incomes than in recent federal fiscal years.
- The percentage of families with children in out-of-home care at intake increased slightly to 12%.





- While the percentages of families that were self-referred or were referred by Child Protective Services decreased, the percentages of families referred by the legal system or law enforcement increased.

Program Services

- Most families sought assistance to enhance their parenting skills. More families sought services related to education and training than in prior years.
- Families with lower incomes were more likely than those with higher incomes to seek services related to their economic security, such as financial assistance and basic goods.
- In contrast, relative to lower income families, those with higher incomes were more likely to seek assistance with parenting and family support issues such as coping with family stress.
- The number of families who completed services increased, particularly among lower income families.

Program Outcomes

- 99% of high-risk families did not have subsequent reports of child abuse and neglect within six months after discharge from the program.
- 95% of the families surveyed reported they were satisfied with the program.
- 87% of the families reported improved competence in their parenting skills. While the program overall did not meet the Strategic State Plan Objective of 89%, 12 of the 16 participating agencies did exceed this mark.
- 69% of the families showed positive change on at least one presenting issue. While the program overall did not meet the Strategic State Plan Objective of 70%, families receiving two or more hours of service consistently met or exceeded this percentage.





Based on the results presented in this report, the following recommendations are made:

- **Provider agencies should develop strategies to increase the percentage of families that show improvement on at least one presenting issue.**
- **Provider agencies should continue to work to increase the return rate of the Program Satisfaction Survey.**
- **Provider agencies should focus on improving families' self-reported parenting competence.**
- **Provider agencies should receive increased technical assistance to critically examine their own outcomes.**





Introduction

Costs of Child Abuse and Neglect

Nearly one million children are victims of child abuse or neglect and well over one thousand die each year in the United States as a result of injuries from being abused (National Clearinghouse on Child Abuse and Neglect Information, 2004). The consequences suffered by these innocent victims are wide-ranging and severe. The results of child abuse and neglect include physical limitations (such as damage to a child's growing brain), cognitive impairments or emotional delays, and psychological problems manifesting in high-risk behavior such as substance abuse or violence.

Societal burden is staggering as well. In a 2001 study commissioned by Prevent Child Abuse America, the estimated total annual costs of child abuse and neglect in the United States were significant (National Clearinghouse on Child Abuse and Neglect Information, 2004). Total direct costs were estimated at over \$24 billion per year. Indirect costs included special education, mental health and health care, juvenile delinquency, lost productivity to society, and adult criminality. The annual indirect impact of such services was estimated at over \$94 billion. With a projected burden of over \$118 billion per year, the prevention of child abuse is a critical policy priority.

Family Support Programs at the National and State Levels

In response to the need to prevent child abuse and neglect, national family support programs exist to help families with their needs. Founded in 1981, Family Support America characterizes itself as an approach to strengthening and empowering families and communities. All Family Support strategies are based on a belief that families are the cornerstones of a healthy society and that parent engagement and leadership are the foundations. Through investing in parenting and families, research on family support programs shows that long-term effects of the program include fewer incidents of child abuse and neglect, increased self-confidence and parenting skills among parents, and greater educational attainment among parents (Family Support





America, 2005). Moreover, positive gains among participants in family support programs tended to persist over time (Comer and Fraser, 1998). All these results are demonstrated at some level in the Promoting Safe and Stable Families program in Arizona.

Along with the nationwide response to encourage Family Support programs, Arizona created Family Support/Family Preservation program in 1995, that became the Promoting Safe and Stable Families (PSSF) program in 1997. According to the Administration for Children and Families website (2005):

PSSF services are based on several key principles. The welfare and safety of children and of all family members should be maintained while strengthening and preserving the family. It is advantageous for the family as a whole to receive services which identify and enhance its strengths while meeting individual and family needs. Services should be easily accessible...and they should respect cultural and community differences. In addition, they should be flexible, responsive to real family needs, and linked to other supports and services outside the child welfare system.

In addition to this program and other comparable ones across the state, Governor Janet Napolitano has prioritized child abuse prevention since being elected. In 2004, the Governor's Prevention System Subcommittee released a report in September outlining recommendations for Arizona's Child Abuse and Neglect Prevention System. This system is a conceptual framework through which Arizona is working to reduce child abuse and neglect statewide. This framework highlights five key priorities including parenting and family support, economic security, health, child care, and evaluation of prevention programs. A more complete description of the ways PSSF addresses the Governor's priority areas can be found in the Promoting Safe & Stable Families Evaluation Report FFY 2004 (LeCroy & Milligan, 2005).

All five priority areas are represented in varying degrees by the PSSF agencies funded during Federal Fiscal Year 2005. Each of the 35 services¹

¹ A list of the providers by county, including the services they offer, can be found in Appendix A.

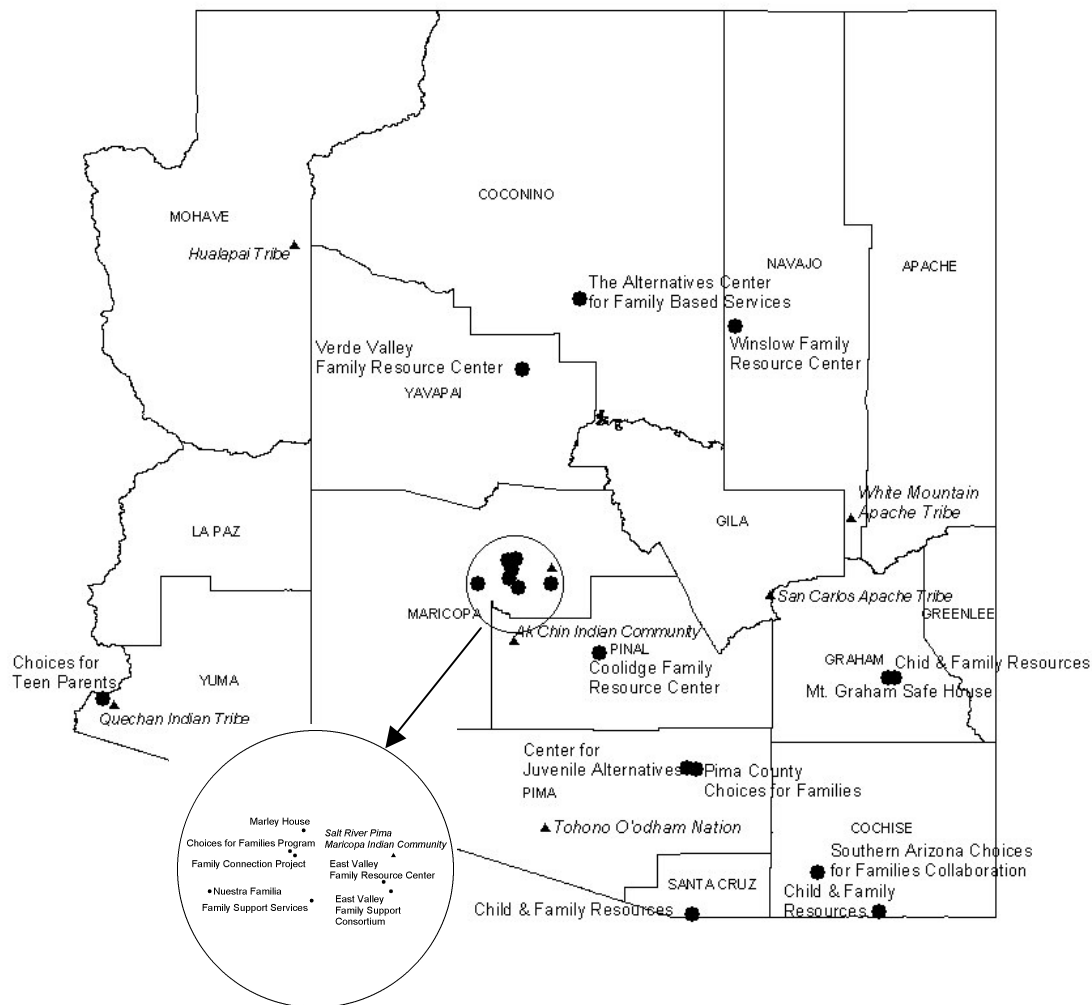




provided by the PSSF agencies addresses one or more of the four prevention priorities, and the programs have been evaluated annually (i.e., the fifth priority). The PSSF objectives are congruous with the Governor's prevention plan in working to decrease child abuse and neglect within the state.

The program consists of 16 agencies included in the evaluation and seven tribal agencies² not required to participate in this evaluation. Exhibit 1 shows the location of each of the 23 agencies within Arizona.

Exhibit 1. Promoting Safe and Stable Families Program Locations



² Three of the seven tribal sites started receiving state funding in April 2005. The other four sites were previously funded.





The seven tribal agencies provide Family Preservation and Family Support services similar to the other 16 sites (see Appendix B). This report focuses on the 16 sites participating in the statewide evaluation effort.

Understanding the Promoting Safe & Stable Families program

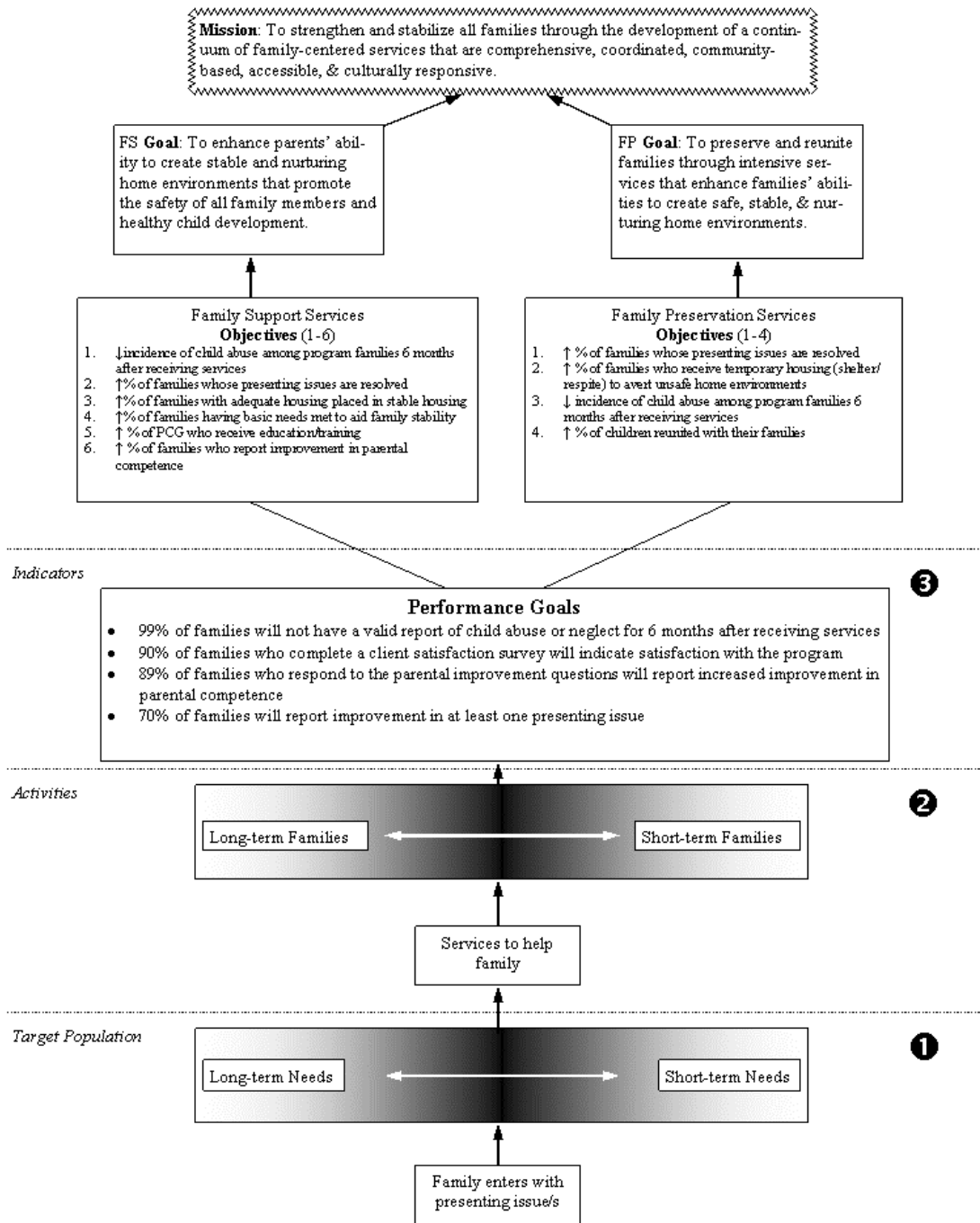
The PSSF program uses a family-centered, family-driven approach to providing services. As illustrated in Exhibit 2 that follows, families come to the program with a variety of needs or presenting issues (See section ❶). Once the families identify their specific presenting issues, they are then matched to appropriate services (See section ❷). Data collected on these services are used to assess the program's annual performance in meeting its goals (See section ❸). The performance goals are then mapped to the overarching objectives of both family preservation and family support services which, in turn, link to the program's overall mission. It is important to understand the program's organization when interpreting and using the findings in this report. With a clearer picture of the program's composition and flow, it is easier to see how individual findings are linked to bigger concepts.





Exhibit 2: Flowchart of the PSSF program

Promoting Safe & Stable Families





Evaluation of the Promoting Safe & Stable Families program

The evaluation of the PSSF program is designed to inform the Department of Economic Security (DES) administrators and PSSF program staff about the annual performance of their program. Specific evaluation questions are based on the State Strategic Plan Objectives:

- What was the number of CPS reports within six months after discharge?
- What was the overall family satisfaction with the program?
- Was there improvement in self-reported parental competence?
- Was there improvement in at least one presenting issue?
- What was the total number of families served?

This report summarizes these outcome data provided by 16 agencies and also provides demographic and program service descriptions. When available, historical data from FFY 2003 and/or FFY 2004 are provided to make multi-year comparisons. The report is organized into the following four sections:

- **Participant Profile** – Includes family profiles of demographics such as income, ethnicity, homelessness, and other baseline information. This section also details presenting issues noted by participating families.
- **Program Services** – Includes the types and duration of services utilized by both short- and long-term families. It describes reasons for discharging the program as well.
- **Program Outcomes** – Highlights FFY 2005 program performance in reaching the State Strategic Plan Objectives.
- **Recommendations**





Participant Profile

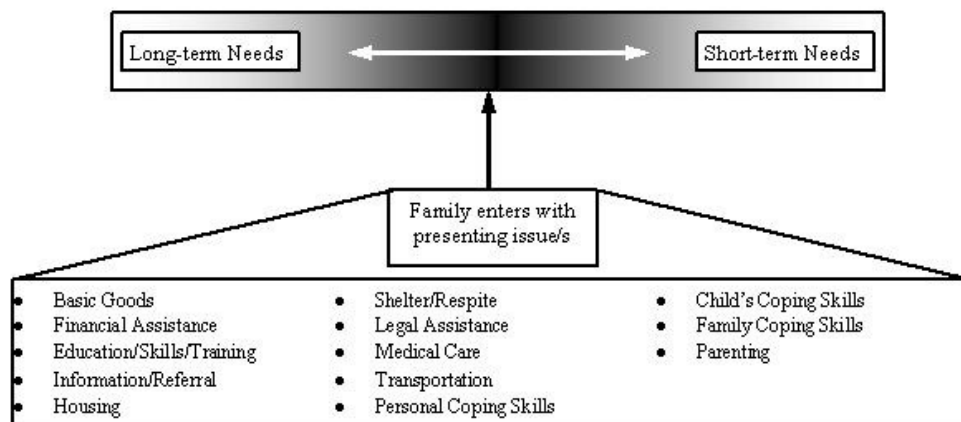
The mission of the Department of Economic Security's Promoting Safe and Stable Families (PSSF) program is to:

...strengthen and stabilize all families through the development of a continuum of family-centered services that are comprehensive, coordinated, community-based, accessible and culturally responsive.

In order to meet the mission, the sixteen funded agencies and seven funded tribal sites serve a wide variety of families and provide a multitude of services. As Exhibit 3 shows, the PSSF program serves any Arizona family in need of family-centered services. Families could need assistance in the form of basic goods, often a short-term service, through more complex, long-term services such as parenting skills. The PSSF program then identifies and matches services to address each family's personalized needs.

*Exhibit 3: Flowchart of families with presenting issues**

Target Population: Any family in Arizona who needs family-centered services.



**This is an enlarged portion of section ❶ of the flowchart in Exhibit 2.*





Between November 2004 and September 2005 (FFY 2005), 5,963 families with 13,348 children received program services. Limited service data was collected on 3,008 of these families because they received less than two hours of service. The remaining 2,955 families received two or more hours of service, and program staff completed the Family Data Collection Form (FDCF) for these families. The FDCF captures demographic data, information regarding presenting issues, and certain outcome data. The following section reports an analysis of the demographic data, the presenting issues of each family for FFY 2005, and a comparison of key data with previously reported fiscal years.

Family Profiles

During FFY 2005, participating sites submitted data on 2,955 families who received two or more hours of service. This represents 4,935 adults and 6,543 children or 11,478 people overall. In FFY 2005 there were fewer families served than in FFY 2004. In FFY 2004, data collection was extended by an additional month while a new contract was being negotiated (13 months), while in FFY 2005, collection was reduced by a month, again for contractual reasons (11 months).³ This results in FFY 2004 including two additional months' worth of data that FFY 2005 does not have.

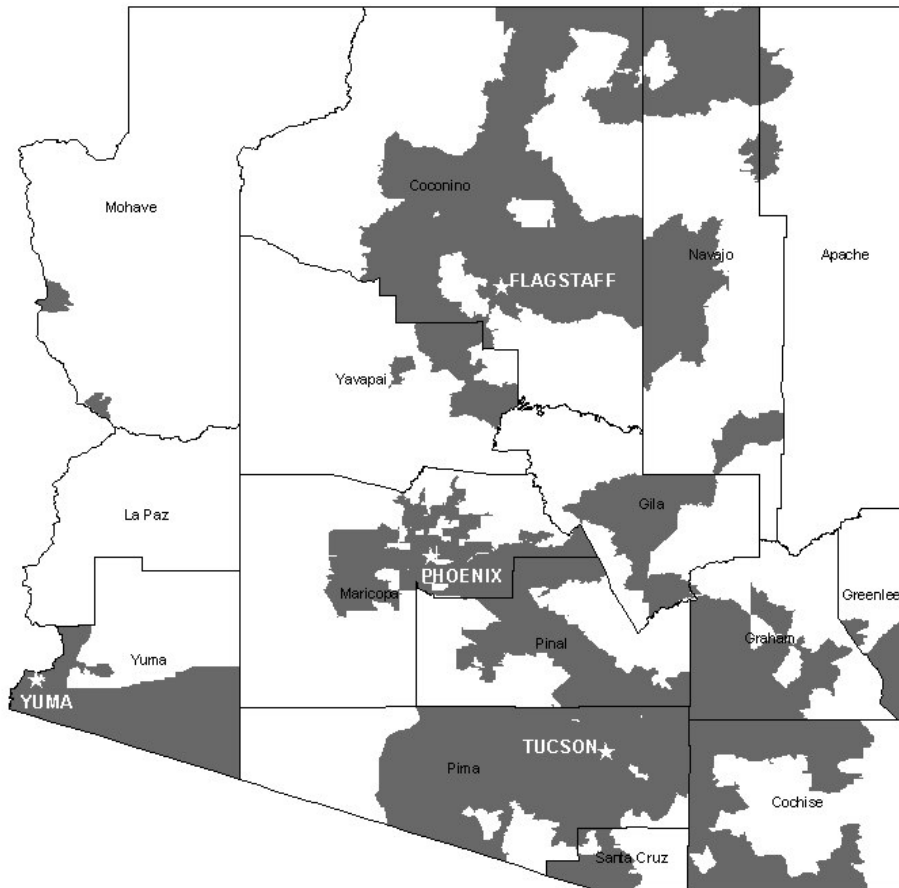
Families participating in the PSSF program represent many different regions within Arizona. As shown in Exhibit 4, families were concentrated in particular regions, mostly those correlating with the location of the 16 program sites. However, the program did have an impact beyond the immediate location of those sites.

³ In FFY 2005, the new contracts were not processed until late October and data collection began in November 2004. Therefore, the data collection period was 11 months rather than the traditional 12 months.





Exhibit 4: Map of Participating Families by Zip Code, FFY 2005



Comparable to previous years, families who received services from PSSF program sites during FFY 2005 were a diverse group with a variety of needs. Many of the demographic characteristics of these families were similar to families served in previous years, with some noteworthy differences.

- 88% of the primary caregivers were female, whereas 74% of the other adults in the household were male.
- Two-thirds (67%) of the children served in the program were from minority ethnic backgrounds. The largest minority groups served were Hispanic (46%), followed by children of mixed ethnicity (8%), African American (7%) and Native American (5%).





- Seven percent of the primary caregivers were younger than 21 years of age, whereas 73% were over the age of 30.
- The average family size was four, and families ranged in size from one to 12.
- 78% of the families spoke English as their primary language, 12% spoke Spanish, and nine percent spoke a mixture of Spanish and English.
- 70% of the primary caregivers had at least a high school education, as did 68% of the other adults in the household.

While families participating in PSSF during FFY 2005 exhibited many strengths, families receiving services faced a number of significant risk factors (see Exhibit 5). For most of the risk factors displayed, the percentage of participants experiencing the risk in FFY 2005 was relatively similar to the previous two federal fiscal years. However, a positive difference from previous years was that fewer families fell below the poverty threshold and there was a reduced number of homeless families at intake. A noteworthy downward trend is the increase in the number of children in out-of-home care. In FFY 2005, 344 families had children in out-of-home care at intake, which accounted for 570 children not living with their families.

Exhibit 5: Risk Factors for Program Families, FFY 2005 Compared to Previous FFYs

Risk Factor	Previous FFYs^a	FFY 2005
Income below poverty threshold ^b	59%	53%
Single parent household	43%	48%
Unemployed primary caregiver at intake	46%	43%
Primary caregiver less than high school education	34%	30%
In neighborhood 1 year or less	36%	39%
Children in out-of-home care at intake	10%	12%
Homeless at intake	8%	6%

^aThe previous FFYs included are FFYs 2003 and 2004 and values represent an average of both years.

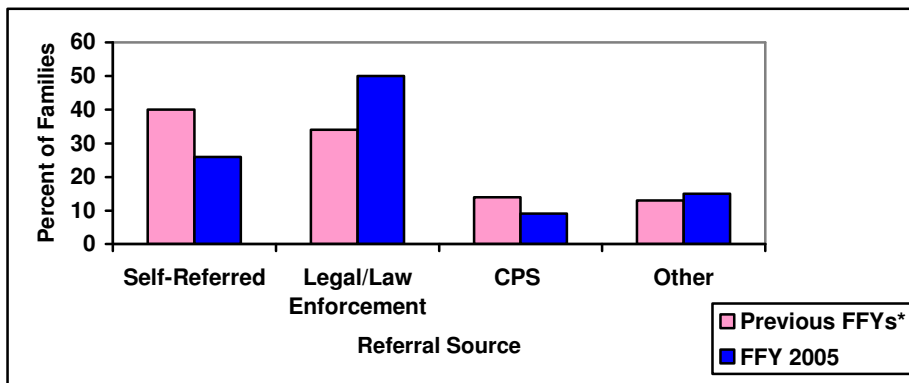
^bPoverty threshold is defined using the 2004 U.S. Census definition (www.census.gov, 2006). The 2004 definition is the most current one available at the time of this report.





It should be noted that although participation in this program is free and voluntary, families are referred through various sources. As Exhibit 6 illustrates, there have been some shifting trends in referral sources between FFY 2005 and previous federal fiscal years. More specifically, the number of families that were self-referred has declined from 40% during the past two federal fiscal years to 26% in FFY 2005. The percentage of families referred by CPS decreased from 14% in FFY 2004 to nine percent in FFY 2005. During the past two federal fiscal years, there has been a constant increase of families referred by the legal system, with FFY 2005 having half of the referrals from this source. The percent distribution differs from previous years mainly due to the inverse relationship between self-referrals decreasing and legal/law enforcement referrals increasing. "Other" sources such as friends and schools made up approximately 15% of all referrals for this year.

Exhibit 6: Referral Source, FFY 2005 Compared to Previous FFYs



**Previous FFYs include FFY 2003 and FFY 2004 and values represent an average of both years.*





Demographic Comparisons

The Promoting Safe and Stable Families program has existed in Arizona since 1995. With such a historical perspective, it is possible to track the characteristic trends in the families who received services in recent years. This multi-year overview provides agencies with a look at current demographic trends and their relationship to previous ones. This comparison allows agencies to examine the families they served in FFY 2005 and to review and adjust their services as needed to match their clients' needs.

Exhibit 7: Family Data, FFY 2005 Compared to Previous FFYs

Demographic	Previous FFYs ^a	FFY 2005 ^b
Families served	3,256	2,955
Individuals served	13,091	11,478
Children served	N/A	13,348
In neighborhood 1 year or longer	60%	61%
Average income	\$20,079	\$23,173
Time in program	3.7 months	2.9 months

^aPrevious FFYs include FFY 2002 through FFY 2004 and values represent an average of all three years.

^bOnly 11 months of data were collected in FFY 2005.

As shown in Exhibit 7, most of the demographic characteristics have remained fairly stable in FFY 2005 when compared to previous years. While the reporting period for FFY 2005 was 11 months compared to 13 months in FFY 2004, the number of families served on average per month is similar across years. Consequently, most other variables shown above have comparable trends demonstrated in years past. Time spent in the program decreased in FFY 2005 compared to previous years' average (2.9 months to 3.7 months, respectively).⁴ This decrease is less dramatic when compared to FFY 2004's value of 3.4 months.

⁴ Time spent in the program is defined as the amount of time between the intake and discharge dates.





The annual reported income within households served was markedly higher in FFY 2005 (\$23,173) than previously (\$20,079). In the FFY 2004 Final Report (LeCroy & Milligan Associates, 2005), an upward trend was reported in the percentage of families that had higher incomes (i.e., greater than \$30,000/year) who sought support from the provider agencies. In FFY 2005 this trend continued. Approximately 28% of participating families reported making more than \$30,000/year in FFY 2005 compared to 23% in FFY 2004. This increase is reflected in the median incomes reported for FFY 2005 and FFY 2004, as shown in Exhibit 8.

Exhibit 8: Median incomes for FFY 2004 and FFY 2005

Demographic	FFY 2004*	FFY 2005*
Median annual income of all long-term families	\$14,400	\$18,000
Median annual income of families below Federal Poverty Guidelines	\$9,384	\$10,200

**Income data were collected for 66% of all participating families in FFY 2004 and for 61% of all participating families in FFY 2005.*

The median annual income in FFY 2005 for all families was \$18,000, which is up \$3,600 from the FFY 2004 reported median annual income of \$14,400. To compare to the state numbers, the median family income for Arizona was \$46,723 in 1999 (U.S. Census Bureau). For the second straight year, families falling below the Federal Poverty Guidelines reported annual incomes greater than the previous year. In FFY 2005, the median annual income for these families was \$10,200, which was up from \$9,384 in FFY 2004. PSSF served 959 families below the Federal Poverty Guidelines. However, caution is still warranted in interpreting this income data, as data were not collected from over one-third (39%) of the sample.

Presenting Issues

The Promoting Safe and Stable Families program is a universal prevention program, meaning that the agencies do not screen families based on their level of risk. Therefore, any family with a child who wants assistance is eligible to receive services. The issues that families brought with them range





from the need for basic goods (food, clothing, etc.) used to preserve their families during difficult times, to dealing with the complex problems of family management to support their families. (See Appendix C for a complete list of presenting issues.)

During the first visit with the agency, the family and the caseworker decide which of 13 issues best describe why the family is seeking assistance from the agency. These issues are used to develop prevention plans for the families and to identify the most helpful services. Following the intent of family-centered practice, the PSSF program focuses on the issues determined by the family and develops a tailored plan of action to address those issues to stabilize the family and minimize potential negative effects of risk factors.

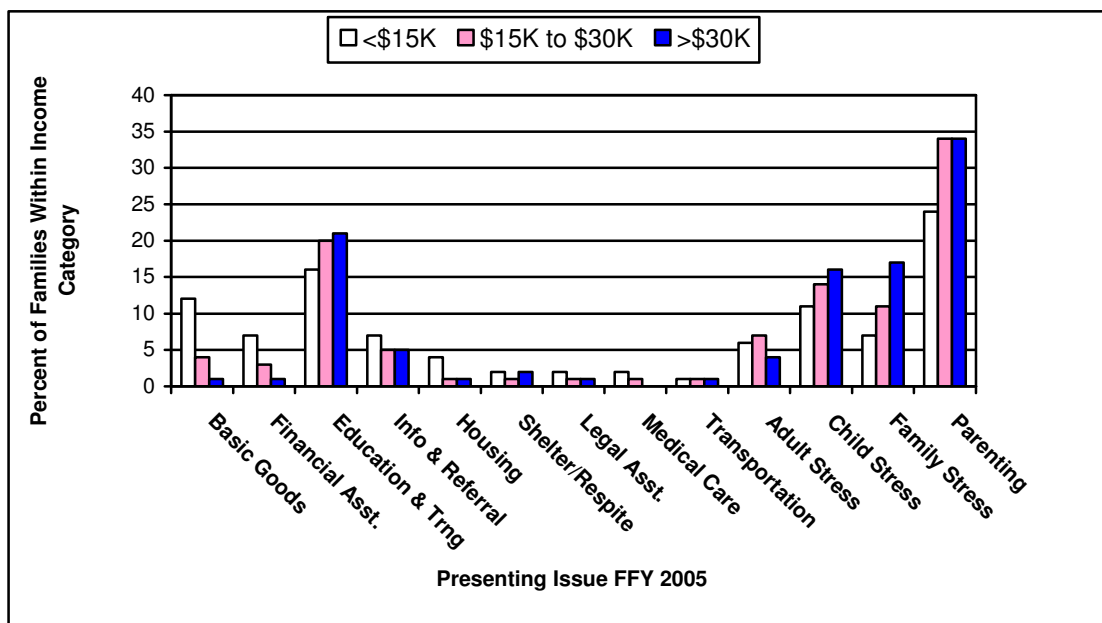
Similar to previous years, the average number of presenting issues was two, and the most common presenting issues were Parenting Assistance and Child Stress. Education and Training appeared as the next most frequent presenting issue in FFY 2005 compared to FFY 2004 when Family Stress was the second most common issue.

Despite the increase in reported income, a growing number of families served by provider agencies continue to face significant challenges in meeting their basic needs. Exhibit 9 shows the differences in presenting issues stratified by income bracket. There were 801 families with incomes less than \$15,000, 497 families with incomes between \$15,000 and \$30,000, and 510 families with incomes greater than \$30,000.





Exhibit 9: Presenting Issues by Income Level, FFY 2005



First, families with lower incomes on average had more presenting issues than families with higher incomes. Moreover, there are significant income differences with regard to presenting issues. It can be seen on the left side of Exhibit 9 that as income increases, the likelihood of seeking services related to material assistance decreases. For example, 20% of the presenting issues identified among the lowest income group were Basic Goods or Financial Assistance, whereas less than one percent of the highest income families identified these needs. In contrast, as shown on the right side of Exhibit 9, as income rises, demand for services related to family management increases. Parenting and Family Stress issues accounted for 31% of the presenting issues among the lowest income group compared to 45% and 51% of the middle and highest income groups, respectively. Also noteworthy is the spike in need for education and training services among all three income groups, which is a trend that differs from FFY 2004. In FFY 2004, education and training services was the fourth most administered service.

These data indicate that agencies offering services to predominantly low-income families should increase their supplemental material assistance (basic goods and financial assistance). As shown above, low-income families have





presenting issues linked to basic needs and financial assistance. Since low-income families are particularly at-risk, it is important to assist them with their basic needs so they can then begin to grapple with other long-term needs like parenting issues or family stress. Furthermore, agencies offering services to primarily high-income families should anticipate elevated needs for parenting and family stress help.

Summary

In FFY 2005, the Promoting Safe and Stable Families program in Arizona served and discharged 2,955 long-term families, representing over 11,478 adults and children. These families were diverse – both in their demographic characteristics and the kinds of issues they brought to the provider agencies. Although there were minor differences in the family profiles, overall families were relatively similar in FFY 2005 when compared to recent years. More primary caregivers were employed at intake, were over the age of 30, and had higher incomes than in recent years. Another key difference from previous years was the decrease in percentages of families that were self-referred and were referred by Child Protective Services.

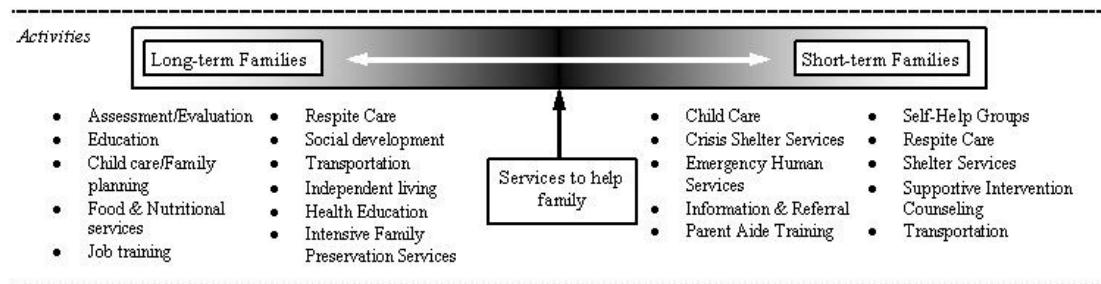




Program Services

The 16 Arizona Promoting Safe and Stable Families program providers offered a multitude of services to address the needs of the participating families. Along with the other partners in their community-based collaborations, the participating agencies utilized an array of prevention services in response to the presenting issues discussed in the previous section. Exhibit 10 highlights the types of services provided to participating families. The goal of the program is to match families' presenting needs with appropriate services for as long as families need them. Once families are matched to services, they are distinguished as either short-term families or long-term families. Short-term families should receive less than two hours of service, while long-term families should get more than two hours of service.

*Exhibit 10: Flowchart of the continuum of services provided to participating families**



*This is an enlarged portion of section ② of the flowchart located in Exhibit 2.

In FFY 2005, both Family Support and Family Preservation Services were offered to the families.

- *Family Support Services* are designed to help parents provide stable and nurturing homes, promote safe environments, and enable healthy child development.
- *Family Preservation Services* are designed to preserve and reunite families through intensive intervention, resulting in safe, stable, and nurturing home environments.





A key challenge in the evaluation has been assessing the wide variability of service models utilized by the 16 provider agencies. Although several of the agencies were located within family resource centers, other types of agencies that offered services included a domestic violence shelter, an adoption agency, and two adolescent support programs. Because of their variability, the 16 provider agencies offered different types of services to the families they served. Most of the agencies provided both family support and family preservation services to families in need.

Short-term Families

In FFY 2005, 3,008 families received less than two hours of service and were consequently designated as short-term families. The services provided addressed the presenting issues identified by the families, and were either Family Preservation and/or Family Support Services. (See Appendix D for a list of each type of service.) Due to the limited time spent with these families, minimal data were collected from them.

Of the short-term families, 84% received Family Support Services, and 14% received Family Preservation Services. The remaining families were not designated as having received Family Support or Family Preservation Services because they received only cash assistance. The average contact time for the clients was 65 minutes, and 54% of the families had their intake and discharge on the same day. This percentage of same-day service is significantly lower than the percentage of families receiving such service in FFY 2004 (80%). More families came into the program identifying long-term needs such as Educational Training or Parenting Skills as their presenting issues. This need for more continuous services could explain the drop in same-day services. Approximately 58% of short-term families were referred to an outside agency for further services.

Exhibit 11 displays the Family Support services most frequently used by short-term families. In FFY 2005, there was a change in the Family Support service categories. The Information and Referral option was removed and services that had been classified under this category were absorbed by other





categories. Many but not all services previously coded under Information and Referral were categorized under Case Management in FFY 2005, making it the most frequently reported Family Support service.

Exhibit 11: Short-Term Families Comparison, FFY 2005

FFY 2005 Most Frequently Used Family Support Services (% of all Family Support Services Provided)		
#1: Case Management	#2: Assessment & Evaluation	#3: Supportive Intervention - Counseling
(32%)	(19%)	(9%)

Family Preservation Services were used by only a limited number of short-term families. However, the percent of families using these services increased dramatically from FFY 2004 to FFY 2005. In FFY 2005, Family Preservation Services accounted for 11% of all services used by short-term families, with the Information and Referral category making up 10% of that number. In contrast the Information and Referral category constituted approximately four percent in FFY 2004. By removing the Information and Referral category from Family Support services, more families seeking such services were probably classified in this section.

In summary, limited data was collected regarding families that received short-term services; however, these families had the opportunity to access a broad array of prevention services in order to enhance the safety and stability within their family.

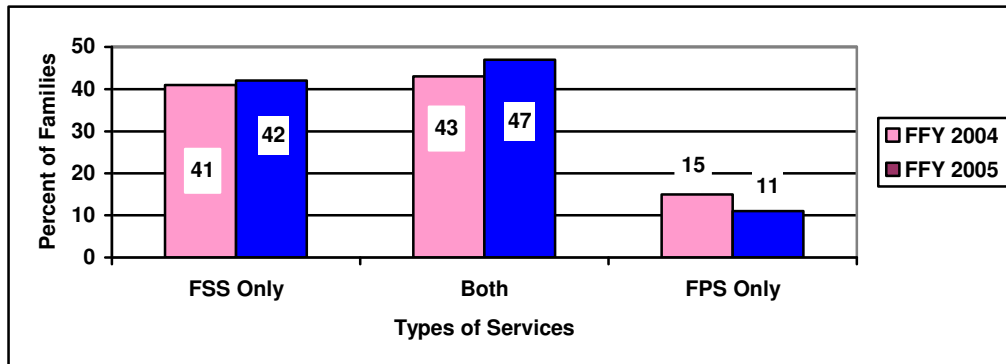
Long-term Families

As with the short-term families, the long-term families that were designated to receive two or more hours of service could receive Family Support Services, Family Preservation Services, or both. Exhibit 12 displays the breakdown for long-term families.





Exhibit 12: Types of Services: Long-Term Families, FFY 2004 and FFY 2005



In FFY 2005, 2,632 families received Family Support Services, including 1,248 who used only Family Support Services and 1,384 who used both Family Support and Family Preservation Services. An additional 319 families received only Family Preservation Services, bringing the total number of families receiving any Family Preservation Services to 1,703. Compared to FFY 2004, fewer numbers of families received Family Preservation Services, with the percentage dropping from 15 to 11%. This downward trend contrasts with the increase of Family Preservation Services utilized by short-term families. Family Support Services are historically used more often than Family Preservation Services overall, with this year's trend showing slightly more of a decrease in Family Preservation Services.

In FFY 2004, all of the providers had their Family Support budgets cut by 21%, while Family Preservation budgets were increased 11%. This differential in funding could explain the inverse relationship of Family Support and Family Preservation service hours spent in FFY 2005. For Family Support Services, average contact time per family was 9.5 hours, which represented a dramatic decrease of 35% relative to FFY 2004 (14.6 hours per family). However, average Family Preservation Service contact hours rose 15% in FFY 2005 to 34.4 hours per family. This increase in Family Preservation Service contact hours is contrary to the FFY 2004 downward trend in service hours (LeCroy & Milligan Associates, 2005).





Providers continued this year to track services received in conjunction with the presenting issues. This information shows to what degree agencies are providing services directly to address the presenting needs of the participants. The percent of families receiving intended services was 97% in FFY 2005. As can be seen in Exhibit 13, agencies were able to provide services directly aimed to address the family's presenting issues 97% of the time.

Exhibit 13: Families Receiving Intended Services, FFY 2005

	Number of Services Families Received	Percent of Services Families Received
Family Received Intended Services	5,693	97%
Family Did Not Receive Intended Services	149	3%

Those not receiving intended services often received other services. However, according to Family-Centered practice, the families that received services tied directly to their self-assessed needs should have more positive outcomes than families that received services not directly tied to their needs. The Program Outcomes section will show in greater detail that this was true for the PSSF program. Such a high success rate among the provider agencies in offering intended services to families means that if service gaps are identified, the providers should be able to adapt their service models to reduce these gaps.





Long-term Family Services

The next section describes the services families received in the PSSF program, grouped according to the priorities outlined in the 2004 Governor's Report on Child Abuse and Neglect Prevention. Those priority areas are:

- Parenting and Family Support Services
- Economic Security
- Health
- Child care

Family Support and Family Preservation Services exist on a prevention continuum of care. Accordingly, services received can be grouped together by area of service, similar to those highlighted in the Governor's Report.

Parenting and Family Support Services

The first priority area of the Governor's Plan is Parenting and Family Support Services. The Plan recommends that state agencies and community providers develop a support system for new parents and parents experiencing challenges through key developmental stages of life.

Many PSSF services provide the type of support recommended by the Plan. The following 11 PSSF services support the intent of the Plan:

- Assessment/Evaluation
- Case Management
- Early Intervention
- Family Planning
- Independent Living Skills
- Mentoring
- Parent Skills Training
- Self-Help Groups
- Social Development
- Socialization and Recreation
- Supportive Intervention-Counseling

Of the 2,955 families that received more than two hours of service, 89% of them received one or more services related to Parenting and Family Support (i.e., any of the services listed above). The percentage of families receiving





actual Parent Training was 16%, an 11% decrease from the 27% reported in FFY 2004. However, 58% of families who listed Parenting as one of their presenting issues received Parent Training. Of the 89% receiving parenting services, over 55% of families were referred from the legal system or law enforcement.

Economic Security

Another priority area in the Governor's Plan is Economic Security. The Plan suggests that services be provided to families to improve their economic security to reduce poverty.

The nine categories in the PSSF program that could be characterized as services that improve economic security include:

- Basic Education
- Emergency Human Services
- Exemplary Youth Work Programs
- Food and Nutritional Services
- Housing Support Services
- Job Development and Placement
- Job Training
- Supplemental Provisions
- Transportation

Each of these services helps families to improve their economic well-being, either directly or indirectly. With 53% of families served being under the Federal Poverty Guidelines, basic goods and economic security are key factors in assisting many families. Nearly 23% of families (N=678) received services related to economic security. Of those families, 23% had presenting issues categorized as either Basic Goods or Financial Assistance.

Approximately three percent of program families received Job Training or Job Placement services specifically, while 21% of families had presenting issues in the more inclusive Education or Training category. Therefore, of the 1,247 families who needed Education or Training services, only 87 received services related to employment. With Education or Training being the second most popular presenting issue, more emphasis could be placed on matching families with such job-related services.





Health

Health is another priority in the Governor's Plan for preventing child abuse and neglect. Healthy children are less likely to be victims of child abuse and the Plan recommends that high-quality health care be accessible to all families in Arizona.

While the PSSF program does not focus on health specifically, several services do address health-related issues. The following four services are designed to address health needs.

- Crisis Shelter Services
- Health Education
- Nursing
- Nutrition Education

Among families receiving two or more hours of service, only five percent (N=149) received health-related services. Of these services, nutritional education was the most utilized service (N=69). However, less than one percent of families (N=52) had a presenting issue related to Medical Care.

Child care

The final focus area of the Governor's Plan was child care. Accessible child care promotes economic stability, healthy childhood development, and school readiness, all of which are considered protective factors for child abuse and neglect. The Plan emphasizes the need for high quality, affordable child care in all Arizona communities.

Like health, child care is not a primary goal of the PSSF program, but is tied directly to helping families and is represented by PSSF services. The following two services are intended to improve child care for participating families:

- Child care
- Respite Care



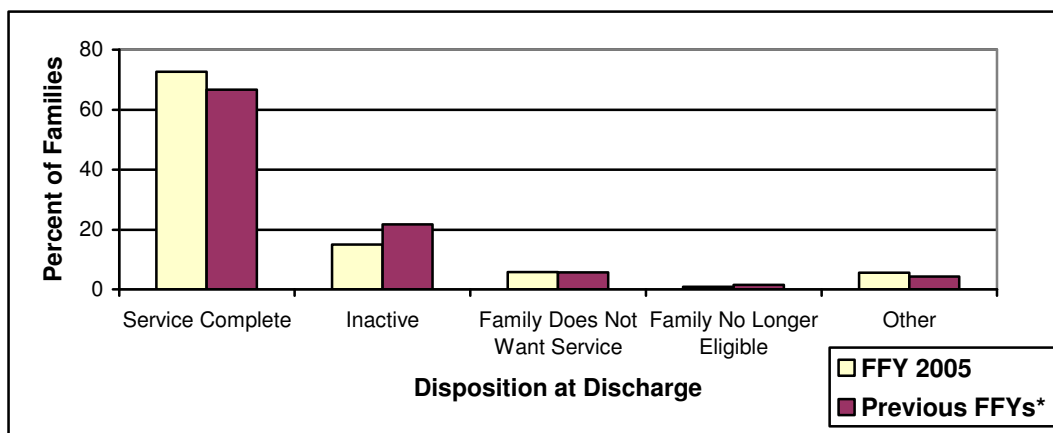


Approximately eight percent of long-term families received services related to child care, and nearly 79% of that was respite care. Less than two percent of participating families received actual child care services (N=52). With child, family, and parenting stress accounting for nearly 54% of all presenting issues, child-related issues are related to many families participating in the PSSF program.

Reasons for Discharge

Participants were discharged from the program for a variety of reasons (see Exhibit 14). The percentage of families that complete services increased from 67% in previous federal fiscal years to 73% in FFY 2005. In addition, during this same time period, the percentage of inactive families fell from 22% to 15%. Only six percent of families no longer wanted the services.

Exhibit 14: Disposition at Discharge, Previous FFYs Compared to FFY 2005



**Previous FFYs include FFY 2003 and FFY 2004 and values represent an average of both years.*

In FFY 2005, lower income families (less than \$5,000/year) were less likely to complete services than higher income brackets (more than \$20,000/year): 65% of lower income families completed services while 80% of higher income families completed services. Moreover, 22% of lower income families became inactive families compared to 12% of higher income families.





It should also be noted that there was wide variability across the sites in the discharge status of the families in the program. For example, three sites had completion rates above 75%, whereas three other sites had completion rates below 40%. Nonetheless, most of the providers demonstrated increased retention rates. The implications of these improved retention rates will be examined further in the next section.

Summary

Similar to years past, the Promoting Safe and Stable Families provider agencies delivered a multitude of prevention services in response to the many issues identified by the participating families. These services ranged from providing assistance with basic needs to direct intervention designed to strengthen family functioning and increase the overall safety and stability of the families.

The program continues to show progress in some areas. The families' involvement in defining the issues and developing the case plan, as well as the providers' efforts to match services to the presenting issues, were both indicators of the continued adherence to the essential elements of family-centered practice. In FFY 2005, most families sought assistance to enhance their parenting skills and more families sought services related to education and training than in prior years. Coupling a high match rate of intended and received services with a greater percentage of families completing the program, more families are receiving appropriate levels of assistance for their needs. This finding demonstrates the program's response to last year's evaluation report recommendation to match families' presenting issues directly to services (LeCroy & Milligan, 2005). At the same time, there remain gaps in the availability of services in certain communities due to limited funding and services prioritized by individual communities.

The next section will address whether these services effectively addressed the risk factors experienced by the families, and whether they met the goals established by the Department of Economic Security.





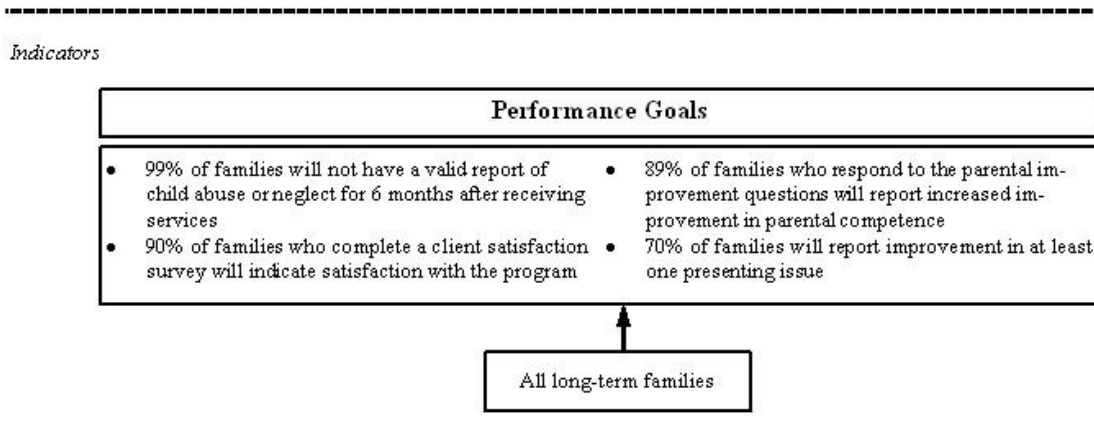
Program Outcomes

Since FFY 2002, the provider agencies of the Arizona Promoting Safe and Stable Families program have utilized two instruments – the Family Data Collection Form and the Program Satisfaction Survey – to collect outcome data from families who participated in the program. These two measures provide important information about participating families, including:

- degree of improvement in the family’s presenting issues;
- changes in status of select measures of family stability and safety;
- program satisfaction; and
- self-perception regarding increased parental competence.

Outcome data were then linked to key performance goals outlined in the State Strategic Plan Objectives, which are listed under Performance Goals in Exhibit 15. Data were collected on all long-term families to determine the program’s success in reaching these objectives. These performance goals link directly to the goals of both Family Preservation and Family Support services that drive the overall mission of the Promoting Safe and Stable Families program. (See page 12 for the full program overview).

*Exhibit 15: Flowchart of services provided to participating families**



**This is an enlarged portion of section ② of the flowchart in Exhibit 2.*





The reason for matching outcome data to these performance goals was to best answer the overarching evaluation question:

To what extent does the implementation of the Arizona Promoting Safe and Stable Families program contribute to strengthening and stabilizing families?

The following section discusses each of State Strategic Plan Objectives independently and provides comparisons to previous years. The program is required to report on these objectives as well as the overall number of new families receiving services. When appropriate, additional outcome measures are also described.

Child Abuse and Neglect

Maintain 99% of high-risk families that did not have subsequent reports of child abuse and neglect within six months after discharge from the program.

Many of the families served by this program are at high risk for committing child abuse and neglect due to the presence of risk factors such as poverty, emotional stress, and homelessness. Consequently, information regarding incidences of child abuse and neglect among program participants was obtained from a review of CHILDS (Children's Information & Library Data System) for those primary caregivers who had been discharged from the program for at least six months. Primary caregivers that met the criteria were assessed for a six-month period beginning at the date of program discharge. Only long-term families were included in the review. Based on these criteria, 2,183 families discharged from the program were included in the check. Of that number, 13 families had positive matches for substantiated incidences of child abuse or neglect for an overall rate of 99.5% of families with no substantiated reports. This match rate is highly contingent on the availability of detailed information for each family. Despite the high-risk nature of the families in the program, this rate was comparable to that of the general population of Arizona.





Program Satisfaction

Of the families who complete a client satisfaction survey, maintain a client satisfaction rate of at least 90%.

Program satisfaction was measured using a subset of 14 questions from the Program Satisfaction Survey. A total of 1,074 surveys were completed.⁵

Overall satisfaction was comprised of two subsets:

- Family satisfaction – how the respondent felt their family was treated, and
- Service satisfaction – the respondents’ perceptions regarding the manner in which services were delivered.

As shown in Exhibit 16, consumer satisfaction exceeded the State Strategic Plan’s 90% goal in all three scales.

Exhibit 16: Program Satisfaction, FFY 2005

	Percent of Families Satisfied Previous FFYs ^a	Percent of Families Satisfied FFY 2005 ^b
Family Satisfaction	98%	95%
Services Satisfaction	98%	95%
Overall Satisfaction	98%	95%

^a Previous FFYs include FFY 2003 and FFY 2004 and values represent an average of both years.

^b Comparable to previous FFYs, only 36% of families completed the Program Satisfaction Survey.

Although these satisfaction rates were slightly lower than in recent federal fiscal years, the FFY 2005 rates are still well above the 90% goal. Providing services that families perceive in a positive light is important because, as McCurdy and Daro (2001) suggest, high quality services increase program retention. Furthermore, evidence has shown a positive relationship between

⁵ The completion rate of 36% was slightly lower than the 39% rate obtained in FFY 2004. Therefore, caution should be used when interpreting these results, as responses were obtained from only one in three participants.





perceived service quality and program outcomes (Herman, 1997). Approximately 94% of the families who completed the survey also completed services. This is a three percent increase from 91% in FFY 2004. As noted by Littell (2001), families who actively complete services are likely to view the program more positively than families who do not. As indicated above, only 36% of all families completed the Program Satisfaction Survey. Therefore, provider agencies should focus their efforts on increasing the completion rate of the Program Satisfaction Surveys to allow a better understanding of the perceptions of all participants regarding program satisfaction.

Parental Competence

Maintain at 89% the number of families reporting improvement competence in their parental skills.

The parental competence scale was derived from the answers to seven questions on the Program Satisfaction Survey, and represented self-report of improvement in parenting competence resulting from involvement in the program. In FFY 2005, 87% of the individuals who answered the questions regarding Parental Competence perceived that they did improve. While this rate is below the State Strategic Plan Objective, it should be noted that twelve of the sixteen providers exceeded the 89% threshold of improved parental competence. Historically, this is the second year of not achieving this goal and agencies should focus on improving parenting competence. With parenting being the most common presenting issue, families need to leave the program with a better perception of their parenting abilities. As with the program satisfaction data, these results must be interpreted with caution due to the low response rate of 28%. However, the Program Satisfaction Survey response rate for families receiving parenting skills training was 59%.





Presenting Issue Improvement

Maintain at 70% the number of families who achieve improvement in at least one presenting issue.

The baseline for this measure was established during FFY 2001. As a reminder, families determined with agency staff members which presenting issues brought them into the agency. During this initial meeting, agencies rated the families in terms of their ability to resolve those issues utilizing their own resources. Families were then rated again on their progress when they were discharged, regardless of the reason for their leaving. The difference between these two ratings formed the basis for determining whether or not the family improved as a result of the services provided.

Across all families and all presenting issues, 69% of families improved on at least one issue between intake and discharge (see Exhibit 17). The FFY 2005 percentage is down only slightly from the 70% reported in recent federal fiscal years. While only a one percent drop, this figure is below the goal of 70%. The retention rate or percentage of families completing services increased from 66% in previous federal fiscal years to 73% in FFY 2005. Unlike FFY 2004, increased retention rates did not translate to demonstrated improvement with presenting issues in FFY 2005 (LeCroy & Milligan Associates, 2005).





Exhibit 17: Retention Rate and Presenting Issue Improvement, FFY 2005

	Previous FFYs*	FFY 2005
Percentage of Families Completing Services (Retention Rate)	66%	73%
Percentage of Families Showing Improvement on at Least One Presenting Issue	70%	69%
Percentage of Families Who Received Two or More Hours of Service Showing Improvement on at Least One Presenting Issue	N/A	71%

**Previous FFYs include FFY 2003 and FFY 2004 and values represent an average of both years.*

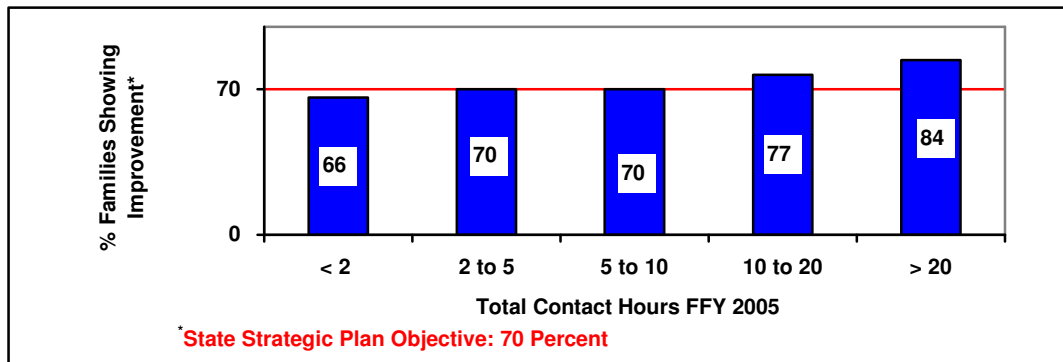
In addition, there are several key factors that increase the likelihood that a family will demonstrate improvement on at least one presenting issue. One of the critical elements to family-centered practice is to provide services that directly address the presenting issues, or risk factors present within the family. Starting in FFY 2004, providers were asked to directly connect the services offered to the needs of the family. As noted in a previous section, 97% of families did receive services tied to their needs. In FFY 2005, 93% of families who received intended services demonstrated improvement on at least one presenting issue. Providers should continue to try to adapt their service delivery models so that every single family receives services that directly address their needs.

Besides matching services to needs, another factor related to demonstrated improvement is the number of contact hours families had with the providers. As can be seen in Exhibit 18, 66% of families receiving less than two hours of service (n=1541) showed improvement at discharge. The chance of improvement steadily increased with more contact time. For example, 84% of families who received 10 or more hours of service show improvement. Moreover, spending more than two hours with providers (n=1413) results in 71% of families showing improvement.





Exhibit 18: Percent of Families that Showed Improvement by Total Contact Hours, FFY 2005



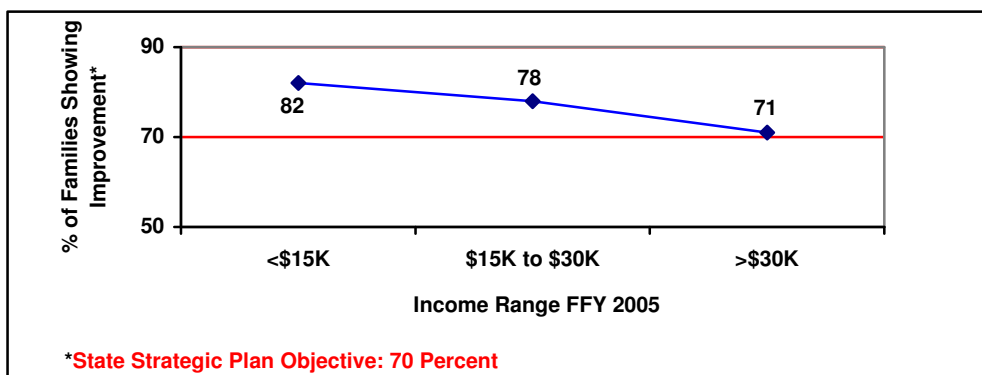
In the FFY 2004 final report (LeCroy & Milligan Associates, 2005), it was hypothesized that 5 contact hours may have represented a threshold after which families significantly heighten their chances of improving on their presenting issues. However, in FFY 2005, it appears that two hours of service may represent the point at which families significantly improve their chances of addressing their presenting issues. One possibility is that the providers are becoming more efficient in addressing the needs of the family, thereby lowering the service hour threshold needed to experience positive change.

Income is another factor that appears to influence whether families demonstrate improvement. Similar to FFY 2004, no income groups as a whole fell below the State Strategic Objective of 70%. As displayed in Exhibit 19, families with lower incomes were more likely to demonstrate improvement on their presenting issues. Similarly, 81% of families in poverty showed positive change compared to 73% of families above the poverty threshold. Approximately 61% of program families disclosed their incomes in FFY 2005, compared to only 52% disclosure in FFY 2004. However, despite this increase, the income data must be interpreted with caution since they are collected from only a portion of the families.





Exhibit 19: Percent of Families that Showed Improvement by Income, FFY 2005



In addition to retention, contact hours, and family income, there was also wide variability across the sites regarding improvement on presenting issues. As noted above, this is likely due to the differing service models utilized by the provider agencies.

Comparison with FFY 2003 Through FFY 2005

Exhibit 20 compares the success rate in meeting the State Strategic Plan Objectives over the past three years. The data from FFY 2005 indicate that the program consistently met some of the objectives but declined slightly in others. For the third straight year, overall family satisfaction exceeded 90%. Furthermore, less than one percent of families received a CPS report within six months of being discharged from the program. In contrast, the overall percentage of families improving in at least one presenting issue fell slightly below the State Strategic Plan Objective of 70%. *When services are for two hours or greater, the percentage of families improving in at least one presenting issue consistently meets or exceeds the 70% objective.* Likewise, the percentage of families reporting parental competence fell below the 90% objective. Again, 12 out of the 16 programs exceeded the objective. The number of families served decreased from 8,046 to 5,963. This decrease is due in part to the 11-month reporting cycle for FFY 2005.





Exhibit 20: State Strategic Plan Objectives, Previous FFYs Compared to FFY 2005

	Previous FFYs ^a	FFY 2005 ^b
No CPS Reports 6 Mos. After Discharge	99%	99.5%
Overall Family Satisfaction	98%	95%
Improvement in Parental Competence (Self-report)	91%	87% ^c
Improvement in at Least One Presenting Issue	70%	69% ^d
Total Number of Families Served	8,046	5,963

^a Previous FFYs include FFY 2003 and FFY 2004 and values represent an average of both years.

^b In FFY 2005, data were only collected for 11 months.

^c 12 out of the 16 program sites met the parental competence objective.

^d 71% of families receiving two or more hours of service had improvement in at least one presenting issue.

Other Indicators of Effectiveness

In addition to the State Strategic Plan Objectives, data were collected that allow for a number of additional factors to be examined that address program effectiveness.

Presenting Issues

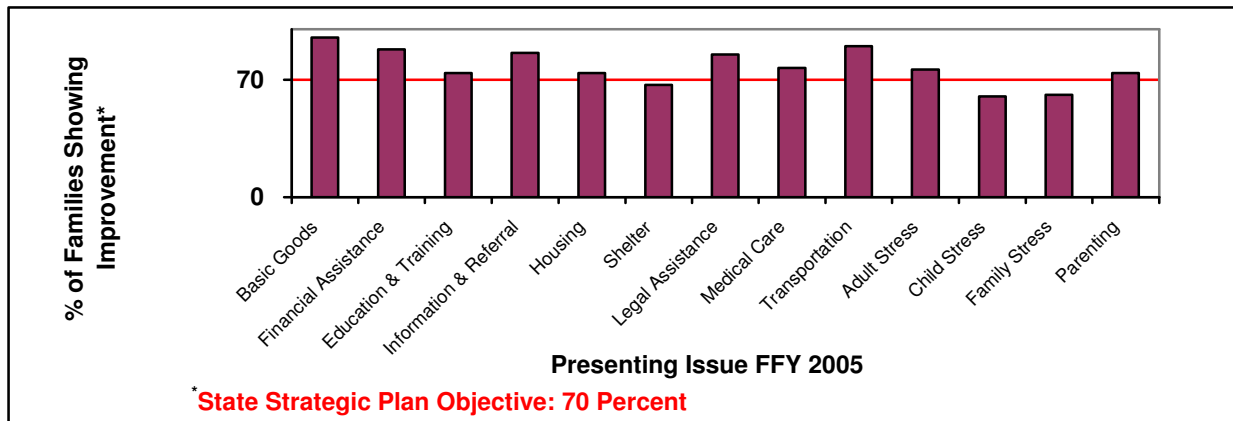
In addition to looking at overall improvement on the presenting issues, Exhibit 21 displays the results of whether the family demonstrated improvement on each presenting issue separately.

Overall, the majority of the families improved from intake to discharge on every presenting issue. Compared to FFY 2004, the percentage of families showing improvement increased for nearly all of the presenting issues except Family and Child Stress. With the exception of Family and Child Stress (both approximately 61%) and Shelter (67%), the percentage of families that demonstrated improvement was above the State Strategic Plan Objective of 70%. Providers should continue their efforts to increase the percentages of families demonstrating improvement, so that these rates for all presenting issues meet the State Strategic Plan Objective.





Exhibit 21: Improvement by Presenting Issue, FFY 2005



Family Reunification

A critical component of family support programs and of family-centered practice is the emphasis on promoting family stability and preventing out-of-home placements. When appropriate, another goal is reuniting families that have been separated. During the initial meeting with families, data were collected regarding the number of children in out-of-home care, defined as placement with an individual or agency other than the child's parent or legal guardian. These data were also collected when families left the program.

As can be seen in Exhibit 22, approximately 12% of the families providing data had children in out-of-home care at intake. There were 344 families with 570 children in out-of-home care at intake and 293 families with 544 children in such care at discharge. This decrease in the number of families is statistically significant (Chi-sq, $p < .001$). Of those families that had children in out-of-home care at intake, 40% of families were reunited at discharge. This means 122 families with 249 children were reunited while participating in this program. This percentage of families reunited is comparable to those reported in previous federal fiscal years. However, there were still 185 families with children that remained in out-of-home care at from intake to discharge. Agencies should continue to focus their efforts on preventing long-term out-of-home care placements by assisting the families in addressing risk





factors so that their families can be reunited. The data also show that 103 families (over four percent of the total families) who did not have children in out-of-home placement at intake did so at discharge. This rate of out-of-home placement between intake and discharge has maintained itself since FFY 2003.

Exhibit 22: Out-of-home Placement Rates for Previous FFYs Compared to FFY 2005

	Previous FFYs*	FFY 2005
Number of families with data at intake	3,017	2,900
Percentage of families with children in out-of-home care at intake	10%	12%
Percentage of these families that were reunited at discharge	41%	40%
Percentage of families who had their children placed in out-of-home care between intake and discharge	4.8%	4.5%

**Previous FFYs include FFY 2003 and FFY 2004 and values represent an average of both years.*

As noted earlier, the percentage of families referred to the program through CPS has dropped from 14% in FFY 2004 to nine percent in FFY 2005. While the number of families with children in out-of-home care at intake increased to 12%, the number of CPS referrals dropped over the same time period. There was also a decrease in the percentage of families who had their children placed in out-of-home care between intake and discharge. However, the percent of families with children in out-of-home care at intake was approximately the same as the percent of CPS-referred families with children in out-of-home care at intake (12%). To deal with the increase in children in out-of-home care, agencies should target their services to help these families through a variety of training topics that could include parenting skills, domestic violence, and substance abuse.

Housing

As in previous years, housing related issues were measured by tracking homelessness at intake and discharge, and by the two presenting issues that





address housing—inadequate housing and the need for alternative housing due to conflict in the home. For the presenting issues, 74% of families that had identified inadequate housing or the need for alternative housing demonstrated improvement at discharge. In terms of reducing homelessness, Exhibit 23 illustrates the results for the last two years. While the number of homeless families seeking assistance increased in FFY 2003 and FFY 2004, the number dropped in FFY 2005 to 175 families. This decrease could be attributed to the shorter data collection cycle for FFY 2005 (11 months) compared to FFY 2004 (13 months). Correspondingly, the percentage of families that found housing after seeking assistance dropped from 59% in previous federal fiscal years to 50% in FFY 2005.

Exhibit 23: Number of Homeless Families, Previous FFYs and FFY 2005

Issue	Previous FFYs ^a	FFY 2005
Number of homeless families at intake^b	201	175
Number of homeless families housed at discharge^b (% who found housing)	118 (59%)	87 (50%)

^a Previous FFYs include FFY 2003 and FFY 2004 and values represent an average of both years.

^b Data presented only for those cases where data were available for intake and discharge.

Summary

Overall, the Arizona Promoting Safe and Stable Families program exceeded the State Strategic Plan objectives to some degree for FFY 2005 (see Exhibit 24). In addition, the agencies collectively improved their effectiveness relative to previous years in a number of areas, including assisting families in matching their services received to their presenting issues and increasing the number of families who completed services.





Exhibit 24: Summary of State Strategic Plan Objective Performance FFY 2005

Objective	Outcome Goal	Achieved	State Strategic Objective
No CPS Reports 6 Mos. After Discharge	99%	99.5%	Met
Overall Family Satisfaction	90%	95%	Met
Improvement in Parental Competence (Self-report)	89%	87%	Not Met ^a
Improvement in at Least One Presenting Issue	70%	69%	Not Met ^b
Total Number of Families Served	Report	5,963	Met

^a This objective has not been met for the past two FFYs but 12 of the 16 programs met or exceeded it.

^b This objective has not been met. However, for families receiving more than two hours of service, it was met or exceeded.

At the same time, the providers continue to face challenges in some areas. Relative to last year, there was a decline in the percentage of families that reported improved parenting competence. Although the decline was marginal, the percentage fell below the State Strategic Plan Objective for the second year. It should be noted that 12 of the 16 programs met or exceeded this objective. The data show that across all presenting issues, the majority of families improved from intake to discharge. However, this percentage across all families fell below the State Strategic Plan Objective. Families who received two hours of service or more met or exceeded this 70% objective.





Recommendations

Overall, the 16 Promoting Safe and Stable Families (PSSF) providers continued to offer a wide range of services to a diverse group of families in a manner that is consistent with the mission of the program:

...to strengthen and stabilize all families through the development of a continuum of family-centered services which promote safety, are comprehensive, coordinated, community based, accessible and culturally responsive (Arizona Department of Economic Security, PSSF Website).

Based on an analysis of the data presented in this report, the following recommendations are made.

- **Provider agencies should develop strategies to increase the percentage of families that show improvement on at least one presenting issue.**

Based on the findings, specific strategies include increasing contact hours through higher retention and continuing to match services to families' presenting needs. Families who receive services for two hours or longer showed greater improvement on at least one presenting issue.

- **Provider agencies should continue to work to increase the return rate of the Program Satisfaction Survey.**

While providers responded to this recommendation in FFY 2004, the return rate decreased to 36% in FFY 2005. A response rate of over 50% would expand the utility of the survey by providing insight into more participants' feelings about the program.

- **Provider agencies should focus on improving families' confidence in their parenting competence.**

In order to meet the Strategic Plan goal of 89% parental competence, providers should focus their efforts on addressing these concerns within participating families. Because parenting skills are the most frequent presenting issue, achieving parental competence should be a priority for providers. Moreover, parental





competence information is gathered on the Program Satisfaction Surveys, which had only a 36% completion rate in FFY 2005. One recommendation to improve the completion rate is to offer the Program Satisfaction Survey directly following the parenting classes, when possible.

- **Provider agencies should receive increased technical assistance to critically examine their own outcomes.**

While the statewide evaluation of the PSSF initiative by necessity focuses on aggregate findings, sites have found information that is site-specific to be most valuable for program improvement and organizational learning. In addition to continuing to provide site reports, technical assistance should be provided to interested sites to build their capacity to generate and use their own organization's outcome data.





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Appendix A: PSSF Participating Programs by County





APACHE COUNTY

No locations available in this county.

COCHISE COUNTY

Child & Family Resources - Southern Arizona Choices - (Cochise and Santa Cruz Counties) 999 E. Fry Blvd., Suite 222, Sierra Vista, AZ 85635

Website: www.childfamilyresources.org

For Referral Call: (520) 458-7348 Sierra Vista/Benson, (520) 364-5150 Douglas/Bisbee

Services Offered: Case Management, Child Abuse Education and Awareness, Early Developmental Assessment and Intervention, Family Planning, Independent Living Skills, Parent Skills Training, Parent Self- Help Groups, Planned Respite Care, Social Development, Socialization and Recreation, Intensive Family Preservation and Reunification Services, Parent Aide, Supportive Intervention and Guidance Counseling, Emergency Cash Assistance.

Target Population: Families in Benson, Bisbee, Douglas, Nogales and Sierra Vista.

COCONINO COUNTY

Aid to Adoption of Special Kids- 501 E. Thomas Road, Suite 100, Phoenix, AZ 85012

For Referral Call: (602) 254-2275 or 800-370-2275

Services Offered: Education and Information, Education/ Training, Information and Referral, Mentoring, Parenting Skills Training, Peer/ Self-Help Groups, Respite, Socialization and Recreation, Family Counseling, Behavior Management Consultation, Play Therapy for Post Traumatic Stress, Intensive Family Preservation Services including Crisis Intervention and Stabilization. (Providers in the Flagstaff, Tucson, and the Phoenix Area)

Target Population: Foster, Foster/ Adopt, Kinship and Adoptive Families in Districts I, III, V, and VI.

Open Inn Inc. The Alternatives Center for Family Based Services- Flagstaff-823 W. Clay, Flagstaff, AZ 86001

For Referral Call: (928) 214-9050

Services Offered: 24-Hour Crisis Center providing: Assessments, Education/Training, Independent Living Skills, PEER/Self-Help Group, Respite, Counseling, Transportation, Crisis Intervention, Emergency Services, 24-Hour Hotline, Shelter, Intensive Family Preservation Services.

Target Population: Coconino County Families with children 0-17 yrs, specializing in juvenile status offenders, victims of abuse and/or domestic violence, substance abusing youth and families, homeless and pregnant and parenting teens.





GILA COUNTY

Mt. Graham Safe House - Gila, Graham and Greenlee Counties - PO Box 1202, Safford, AZ 85548-1202

For Referral Call: (928) 348-9104 or Greenlee County toll free 1-888-269-9104

Services Offered: Domestic Violence Emergency Shelter, Transitional Housing Apartments, Victim Advocacy Program which includes: Education, Crisis Intervention, 24-Hour Information and Referral Hotline, Escort, and Transportation through the Social, Legal and Medical Services, Food, Clothing and Other Emergency Items, Emergency Financial Assistance, Transitional Housing.

Target Population: Female victims of Domestic Violence and Sexual Assault and their children in Greenlee and Graham Counties and the San Carlos Reservation.
See tribal provider list

GRAHAM COUNTY

Mt. Graham Safe House - Gila, Graham and Greenlee Counties - PO Box 1202, Safford, AZ 85548-1202

For Referral Call: (928) 348-9104 or Greenlee County toll free 1-888-269-9104

Services Offered: Domestic Violence Emergency Shelter, Transitional Housing Apartments, Victim Advocacy Program which includes: Education, Crisis Intervention, 24-Hour Information and Referral Hotline, Escort, and Transportation through the Social, Legal and Medical Services, Food, Clothing and Other Emergency Items, Emergency Financial Assistance, Transitional Housing.

Target Population: Female victims of Domestic Violence and Sexual Assault and their children in Greenlee and Graham Counties and the San Carlos Reservation.

GREENLEE COUNTY

Mt. Graham Safe House - Gila, Graham and Greenlee Counties - PO Box 1202, Safford, AZ 85548-1202

For Referral Call: (928) 348-9104 or Greenlee County toll free 1-888-269-9104

Services Offered: Domestic Violence Emergency Shelter, Transitional Housing Apartments, Victim Advocacy Program which includes: Education, Crisis Intervention, 24-Hour Information and Referral Hotline, Escort, and Transportation through the Social, Legal and Medical Services, Food, Clothing and Other Emergency Items, Emergency Financial Assistance, Transitional Housing.

Target Population: Female victims of Domestic Violence and Sexual Assault and their children in Greenlee and Graham Counties and the San Carlos Reservation.

LA PAZ COUNTY

No locations available in this County.





MARICOPA COUNTY

Aid to Adoption of Special Kids- 501 E. Thomas Road, Suite 100, Phoenix, AZ 85012

For Referral Call: (602) 254-2275 or 800-370-2275

Services Offered: Education and Information, Education/ Training, Information and Referral, Mentoring, Parenting Skills Training, Peer/ Self-Help Groups, Respite, Socialization and Recreation, Family Counseling, Behavior Management Consultation, Play Therapy for Post Traumatic Stress, Intensive Family Preservation Services including Crisis Intervention and Stabilization. (Providers in the Flagstaff, Tucson, and the Phoenix Area)

Target Population: Foster, Foster/ Adopt, Kinship and Adoptive Families in Districts I, III, V, and VI.

Arizona's Children Association - Nuestra Familia - 9401 W. Garfield, Tolleson, AZ 85353

For Referral Call: (623) 936-3980

Website: www.arizonaschildren.org

Services Offered: Case Management, Community Education and Information (Child Abuse Education and Awareness), Child Day Care, Exemplary Youth Work Program, Health/Nutrition Education & Information, Assessment, Early Intervention (Early Developmental Assessment and Intervention), Education/Training, Community Education and Information (Workplace Support for Families), Family Planning, Food, Job Development and Placement, Housing Search and Relocation Information and Referral, Job Training, Independent Living Skills, Basic Education (Literacy Classes for Families), Peer/ Self- Help Groups, (Parent Self-Help Groups), Parenting Skills Training, Respite, Client Access, Education and Information, Socialization & Recreation, Social Development, Supportive Intervention/Guidance Counseling (Mental Health Support & Intervention), mentoring, Transportation, Nursing Services (Visiting Nurse Services).

Target Population: Avondale, Buckeye, Cashion, El Mirage, Goodyear, Surprise, and Tolleson Families.

Black Family and Child Services- 1522 E. Southern Avenue, Phoenix, AZ 85040

For Referral Call: (602) 243-1773

Services Offered: Family Support Services include: Assessment/Evaluation, Basic Education, Case Management, Client Access, Education & Information, Child Care, Community Education and Information, Early Intervention, Exemplary Youth Work Program, Food and nutrition Services, Health Education, Housing Support Services, Independent Living Skills, Information and Referral, Job Development and Placement, Job Training, Nursing, Nutrition Education, Parenting Skill Training, Self-Help Groups, Social Development, Socialization and Recreation, Supportive Intervention/Guidance Counseling, and Transportation.

Target Population: Services will focus on the geographic community that lies between McDowell Road on the North to Baseline Road on the South, and between 43rd Ave on the West to 48th St. on the East. This area takes in some or all of the zip codes 85040, 85041, 85009, 85007, and 85034. A primary focus of outreach activities is to engage the African American community.





Child Crisis Center - East Valley Inc. - Family Resource Center -170 W. University, Mesa, AZ 85201

For Referral Call: (480) 834-9424

Website: www.childcrisis.org

Services Offered: Family Resource Center providing: Basic Education, Community Education and Information, Information and Referral, Parenting Skills Training, Self-Help Groups, Social Developmental, Socialization and Recreations, Supportive Intervention, Crisis Shelter Services, Emergency and Human Services, Shelter Services.

Target Population: East Valley Families.

Child & Family Resources - Choices for Families - 700 W. Campbell, Suite 3, Phoenix, AZ 85013

For Referral Call: (602) 234-3941

Website: www.childfamilyresources.org

Services Offered: Child Day Care, Child Abuse Education and Awareness, Early Development Assessment and/or Intervention, Education/ Training, Family Planning, Independent Living Skills, Job Training, Mentoring, Parenting Skills Training. Parent Education Groups, Supplemental Provisions, Mental Health Support and Intervention, Transportation, Emergency Services, Intensive Family Preservation Services, Parent Aide, Respite, Supportive Intervention/Guidance Counseling.

Target Population: Families of children 0-18 years from Baseline to Bell, between 30th St. and 75th Ave.

Desert Mission Inc. - Marley House Family Resource Center - Sunnyslope Area, 9 E. Mission Lane, Phoenix, AZ 85020

For Referral Call: (602) 331-5817

Services Offered: Resource Center providing: Case Management, Information & Referral, Parenting Skills Training & Support Groups, Healthy Families, recreations, Counseling, Outreach, Mentoring.

Target Population: Families in Sunnyslope with zip codes of 85020, 85021 with children under 18 years.

Mesa United Way - Family Support Program - East Valley-137 E. Main, Mesa, AZ 85201

For Referral Call: (480) 834-2121

Services Offered: Efforts are primarily directed toward prevention. Services include Mentoring, Parenting Skills Training, Health and Wellness Education, Peer/Self-Help Groups, Social Development and Recreation, Family Support, Information and Referral, Literacy and continuing education services to both reduce the incidence of child abuse and to resolve parenting issues.





Target Population: Maricopa County Families in East Mesa, with some services offered in the area specifically from Greenfield Road east to Meridian Road, and from Thomas Road south to Williams Field Road.

MOHAVE COUNTY

See tribal provider list.

NAVAJO COUNTY

Parents Anonymous of Arizona, Inc. - Winslow Family Resource Center -200 W. Third Street., Winslow, AZ 86047

For Referral Call: (928) 289-5491

Website: www.parentsanonymous.org

Services Offered: Family Resource Center providing: Intake and Assessment, Child Abuse Education and Awareness, Food and Clothing, Rent and Utility Assistance, Housing Search and Relocation, Budgeting, Job Search and Job Training, Continuing Education, Parent Skills Training, Parent Self-Help Groups, Teens and Adult Life Skills, Youth and Children's Programs, Informational Workshops, Emergency Services, 24-Hour Crisis Line, Intensive Family Preservation Services, Individual and Family Counseling.

Target Population: Winslow Families.

PIMA COUNTY

Child & Family Resources - Pima County Choices for Families Collaboration -2800 E. Broadway; Tucson, AZ 85716

For Referral Call: (520) 881-8940

Website: www.childfamilyresources.org

Services Offered: Child Abuse Education and Awareness, Early Development Assessment and/or Intervention, Education/Training, Health/Nutrition, Education and Intervention, Tutoring and Mentoring, Parent Skills Training, Parent Aide, Case Management, Information and Referral, Peer/Self Help Groups, Respite, Social Development, Supplemental Provisions, Supportive Intervention/Guidance Counseling, Crisis Intervention, Intensive Family Preservation and Reunification Services, Respite.

Target Population: Families in the Tucson metropolitan area with children ages 0-18.

Open Inn, Inc. - Center for Juvenile Alternatives - 630 E. 9th St., Tucson, AZ 85705

For Referral Call: (520) 670-9040





Services Offered: 24-Hour Crisis Center providing the following: Assessments, Education/Training, Independent Living Skills, Peer/Self-Help Group, Respite, Counseling, Transportation, Crisis Intervention, Emergency Services, 24-Hour Hotline, Shelter, Intensive Family Preservation and Reunification Services.

Target Population: Juvenile Status Offenders (8-17yrs.) and their families, Truant children (6-16yrs.) and their families, community referrals and walk ins- families with children 0-17.

PINAL COUNTY

Coolidge Unified School District # 21. - Coolidge Family Resource Center - 340 South Main Street, Coolidge, AZ 85228

For Referral Call: (520) 723-4711

Website: www.cusd.k12.az.us

Services Offered: Resource Center providing: Newborn Assessment, Basic Education, Case Management, Child Day Care, Child Abuse Education, Workplace Support for Families, Early Intervention, Education and Training, Family Planning, Food, Health/Nutrition Education, Housing Search & Relocation, Independent Living Skills, Mentoring, Parenting Skills Training, Counseling, Transportation, Crisis Intervention/Domestic Violence, Emergency Services, Parent Aide Service, Shelter Services, Supportive Intervention/Guidance.

Target Population: Families living in the Coolidge Unified School District.
See tribal provider list.

SANTA CRUZ COUNTY

Child & Family Resources - Southern Arizona Choices - (Cochise and Santa Cruz Counties), 827 N. Mastik Way, Nogales, AZ 85621

For Referral Call: (520) 458-7348 Sierra Vista/Benson, (520) 364-5150 Douglas/Bisbee, (520) 281-9303 Nogales.

Website: www.childfamilyresources.org

Services Offered: Case Management, Child Abuse Education and Awareness, Early Developmental Assessment and Intervention, Family Planning, Independent Living Skills, Parent Skills Training, Parent Self Help Groups, Planned Respite Care, Social Development, Socialization and Recreation, Intensive Family Preservation and Reunification Services, Parent Aide, Supportive Intervention and Guidance Counseling, Emergency Cash Assistance.

Target Population: Families in Benson, Bisbee, Douglas, Nogales and Sierra Vista





YAVAPAI COUNTY

Parenting Arizona Resource Center - 753 N. Main, Cottonwood, AZ 86326

Collaboration of Parents Anonymous, Catholic Social Services and Open-Inn/Crossroads Youth Services.

For Referral Call: (928) 639-1227 / FAX (928) 649-1541

Website: www.parentsanonymous.org

Services Offered: Families: Assessment & Evaluation, Community Information & Referral, Supportive Intervention, Peer Self Help Groups, Parenting Skills Training. Youth: Respite-Short Term, Independent Living Skills, Crisis Interventions

Target Population: Families and Youth in the Verde Valley Area.

YUMA COUNTY

Child & Family Resources - Choices for teen parents-1020 S. 4th Ave., Yuma, AZ 85364

For Referral Call: (928) 783-4003

Services Offered: Child Abuse Education and Awareness, Child Care Resource and Referral, Education/Training, Family Planning, Health/Nutrition Education and Intervention, Life Skills Education for Children and Adolescents/Independent Living Skills, Job Development and Placement, Peer/Self-Help Groups, Parenting Skills Training, Social Development.

Target Population: Yuma Families with focus on Teen Parents.
See tribal provider list





Appendix B: PSSF Tribal Programs





Tribal Providers

For FFY 2005, the PSSF program funded seven tribal sites. These sites were not required to participate in the evaluation. The sites' locations, contact information, and services provided are described below.

Ak Chin Indian Community-48203 W. Farrell Rd, Maricopa, AZ 85239

Contact: Julie Jimenez/Consuella Narcia- (Prevention Resource Center) 520-568-8125

Dena Romo (Recreation Program) 520-568-9527

Franklin Sam (Community Center Child Care) 520-568-2221

Services Offered: Child Care Services, Parenting Education, Substance Abuse Prevention and Awareness Activities, Social/Development and Socialization & Recreation.

Hualapai Tribe-PO Box 179, Peach Springs, AZ 86434

Contact: Lucille Watahanagie 928-769-2200

Services Offered: Resource Center providing: Newborn Assessment, Child Day Care, Early Intervention, Educational Training, Family Planning, Food, Health/Nutrition Education and Intervention, Independent Living Skills, Information and Referral, Job Development and Placement, Parent Skills Training, Social Development, Socialization and Recreation, Supplemental Provisions, Transportation.

Quechan Indian Tribe-PO Box 1899, Yuma, AZ 85366-9352

Contact: Margarita Rubalcaba 760-572-1080

Services Offered: Parenting Classes, Court Hearing, Home Studies, Individual Counseling, Support Services, Community Liaison, Substance Abuse Assistance, Transportation, Anger Management Classes, Health Care, Quechan Housing.

Salt River Pima - Maricopa Indian Community - 10005 E. Osborn Rd., Scottsdale, AZ. 85256

Contact: Felicia Panana, Family Reunification/Preservation Coordinator 480-850-8298

Services Offered: Intensive Case Management, 1:1 Parenting, Family Therapy, Transportation, Family Reunification and Preservation Services.

San Carlos Apache Tribe-PO Box O, San Carlos, AZ 85550

Contact: Rebecca Pahe 928-475-2313

Services Offered: Intensive Family Preservation Services and Reunification Services, Parent Aide, Family Therapy, Crisis Intervention, Alcohol and Drug Abuse Program, Parenting Skills Training.





Tohono O'odham Nation-PO Box 810, Sells, AZ 85634

Contact: Stanley Cruz (Family Preservation Supervisor, Services) 520-383-6100

John David (Child Welfare Manager, Administration) 520-383-6100

Services Offered: Assessment/Evaluation, Case Management, Early Intervention, Intensive Family Preservation Services and Reunification Services, Parent Aide, Parenting Skills Training, Transportation, Information and Referral.

White Mountain Apache Tribe-P.O. Box 1870, White River, AZ 85941

Contact: Carlene M. Narcho, Director 928-338-4164

Services Offered: Parent Aid Services, Emergency Human Services, and Supportive Intervention/Guidance Counseling.





Appendix C: PSSF Presenting Issues





Promoting Safe and Stable Families Presenting Issues

1. My family wants BASIC GOODS (household material goods) of...

1a	Food
1b	Clothing
1c	Household items (toys, gifts at holidays, toiletries etc.)

2. My family wants FINANCIAL ASSISTANCE for...

2a	Housing (household utilities, bills, rent / eviction help)
2b	Medical (pay for medical services, prescriptions, co-pay etc.)
2c	Child care
2d	Transportation (car repairs, bus passes, gas, relocation etc.)
2e	Work or school supplies, uniforms, shoes etc.

3. One member of our family would like to get EDUCATION, SKILLS, TRAINING to...

3a	Help find a job, finish school, improve school performance, improve budgeting and financial mgt, increase family health [family planning, immunizations, nutrition], improve decision-making skills etc.
----	--

4. My family wants INFORMATION about, REFERRAL to or HELP with paperwork on...

4a	Services: child care services, educational, gov't services (CPS, DES, immigration etc.), medical services, mental health services, parenting services etc.
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5. My family wants HOUSING because...

5a	Current home unstable
5b	Home not safe or secure because of locations or environment
5c	Change in economic status

6. My family wants immediate SHELTER or RESPITE because...

6a	Conflict in home: domestic violence, parent unable to provide care (in detox/jail/etc.) and needs safe place for children etc.
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7. My family would like LEGAL ASSISTANCE in...

7a	To address child custody, child support, illegal or delinquent activities, divorce, order of protection, rights (tenants, parental, victim etc.), paternity establishment etc.
----	--

8. My family wants MEDICAL CARE to...

8a	Treat illness or disability
8b	Get evaluated for health maintenance (glasses, birth control pills, thyroid, ADHD, DDD, dental, etc.)

9. My family wants TRANSPORTATION to...

9a	Travel to work, school, other agencies etc.
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10. I would like (or another adult in my home needs) to be able to cope with...

10a	Emotional distress - adult depression, anger, grief, past trauma, loss domestic violence, sexual abuse, substance abuse, etc.
10b	Isolation/lack of communication

11. My CHILD's goal is to be able to cope with...

11a	Emotional distress - child (depression, anger, grief, past trauma, loss domestic violence, sexual abuse, substance
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	abuse, etc.)
11b	Lack of confidence and/or few friends
11c	School adjustment/performance
11d	Home conflicts/defiance

12. Our FAMILY wants help in dealing with stress from...

12a	Isolation
12b	Family conflict
12c	Communication problems within family

13. As a PARENT(S), I/we want to learn how...

13a	To cope with unmanageable child due to... violence, aggressive, withdrawn, sexual, running away, school performance, special needs, negative influence from friends, stealing etc.
13b	To understand what to expect from my child at this age, to learn how much supervision is needed
13c	To learn new discipline methods
13d	To be more accepting/supportive of my child
13e	To prepare for parenthood and how to care for an infant





Appendix D: Service List Definitions





Service Definitions

Family Support Services

Type of Family Support Service	Explanation of Family Support Service
Assessment/Evaluation	Services that provide an evaluation to identify and analyze problems, needs and/or assets and may recommend corrective action and/or treatment.
Basic Education	A service that provides instruction in educational areas necessary for an individual to function effectively. The emphasis of this service is literacy classes for families.
Case Management	A service that determines the needs and eligibility of an individual applying for/receiving services to enhance effectiveness. For those individuals eligible, the appropriate services and/or benefits are identified, planned, obtained, provided, recorded, monitored, modified when necessary, and/or terminated. This includes assistance in finding necessary resources in addition to covered services to meet basis needs; communication and coordination of care, engagement, and follow-up of crisis contacts or missed appointments.
Child Care	A service that provides supervised planned care for children during a portion of a 24-hour day.
Early Intervention	Services provide activities to meet and enhance the developmental needs of children or families. Services may include, but are not limited to: managed and/or health care services, family support and preservation. The emphasis for this service is early developmental assessment and/or provision for intervention.
Exemplary Youth Work Program	Services provide various employment-related training activities for youth. Services may include, but are not limited to: occupational/vocational education, assessment, basic education, work experience, counseling, case management and job placement.
Family Planning	A service that provides assistance to individuals to voluntarily implement plans to determine the number and spacing of children.
Food & Nutritional Services	Services that provide food and nutritional needs.





Type of Family Support Service	Explanation of Family Support Service
Health Education	A service that provides interpersonal and daily living skills training and counseling to prepare individuals for independent living.
Housing Support Services	A service that provides services to locate and maintain a home.
Independent Living Skills	A service that provides help with interpersonal and daily living skills or counseling for independent living.
Job Development/ Placement	A service that provides assistance in obtaining employment for job-ready individuals.
Job Training	A service that develops specific vocational skills.
Mentoring	A service that provides positive role models that support and guide individuals to achieve personal growth.
Nursing	A service that provides nursing intervention that may include patient care, coordination, facilitation and education.
Nutritional Education	A service that provides individual or group instruction about food to maintain or improve development.
Parent Skills Training	A service that provides training that promotes specific parent or caregiver skills. The emphasis of this service is parenting education on skills, family planning, child development, education, discipline, and communication.
Respite Care	A service that provides short-term care and supervision consistent with the health needs of the person; to supplement care; to provide a safe living environment; and/or to support or relieve caregivers for the benefit of the person.
Self-Help Groups	A service that provides peer intervention in a group setting.
Social Development	Services that provide structure and instruction, designed to promote improved social functioning.
Socialization & Recreation	A service that promotes mentally and emotionally healthy interaction between participants and that may be organized around leisure activities.
Supplemental Provisions	A service that provides supplemental food, clothing, toys, vouchers or household supplies to individuals. This service is intended to supplement individuals on a non-emergency basis.





Type of Family Support Service	Explanation of Family Support Service
Supportive Intervention - Counseling	A service that provides supportive intervention and/or guidance.
Transportation	Services that promote or provide mobility.





Family Preservation Services

Type of Family Preservation Service	Explanation of Family Preservation Service
Child care	A service that provides supervised planned care for children during a portion of a 24-hour day.
Crisis Shelter Service	Services that provide assistance to abused individuals or families. Services include but are not limited to: shelter and counseling.
Emergency Human Services	Services respond to crises-related situations where there is an inability to provide for the basic needs. Services may include, but are not limited to: case management, financial services, and referral.
Information & Referral	A service that provides or arranges for assistance to individuals to enable them to gain access to services through the provision of accurate and current information and referral to appropriate resources. Referral may involve short-term supportive assistance and follow-up. This service may include a 24-hour hotline.
Intensive Family Preservation & Reunification	Service provides intensive crisis-oriented activities to families whose children are at significant risk of out-of-home placement due to abuse and/or neglect in order to allow those children to safely remain in their own homes. Services may include, but are not limited to: counseling, communication and negotiation skills, parenting skills training, home management skills, job readiness training, case management, development of linkages to community resources.
Parent Aide Training	A service that provides instruction and assistance for parents or caregivers in improving their skills and ability to fulfill parenting roles and responsibilities.
Respite Care	A service that provides short-term care and supervision consistent with the health needs of the person; to supplement care; to provide a safe living environment; and/or to support or relieve caregivers for the benefit of the person.
Self-Help Groups	A service that provides peer intervention in a group setting. The emphasis of this service is peer/self-help groups in a crisis situation.
Shelter Services	Services that provide for care, refuge and protection.





Type of Family Preservation Service	Explanation of Family Preservation Service
Supportive Intervention-Counseling	A service that provides supportive intervention and/or guidance.
Transportation	Services that promote or provide mobility.

