

Arizona Promoting Safe and Stable Families Program Annual Evaluation Report: FFY 2007

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Executive Summary

In 1998, the Division of Children, Youth, and Families in the Arizona Department of Economic Security (DES) created the Promoting Safe and Stable Families (PSSF) program to provide Family Preservation and Family Support Services to families throughout the state. The mission of the program was, and remains, 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. The goal of the program is to reduce child abuse and neglect by enhancing parents' ability to create stable and nurturing home environments that promote safety for all family members and healthy child development. During Fiscal Year 2007, the PSSF program provided 35 services through its 16 statewide and seven tribal sites.

The PSSF program uses a family-centered, family-driven approach to provide program services to Arizona families. This approach is designed to allow the family to take a fundamental role in prioritizing and resolving their presenting issues. Because the PSSF program tailors services to meet individual family's needs, it is a program able to offer services to families at various levels of risk. Furthermore, PSSF services help DES create a continuum of care for families in need in communities throughout the state.

The purpose of the program evaluation was to inform program coordinators and DES about the program participants, the services and program dosage they received, and their demonstrated progress toward stated outcomes. More specifically, the evaluation was primarily designed to assess and measure the following:

- Participant demographic characteristics and their level of risk of child abuse and neglect
- Participants' experiences through their presenting issues and services they received
- Participant progress toward outcomes related to improvement on their presenting issues, perceived improvement on their parenting abilities, satisfaction with the program, and subsequent CPS contact





In Federal Fiscal Year 2007, the program served a total of 7,154 families, which included 632 families from tribal sites. Key findings include the following:

- ➤ Program sites statewide served a highly diverse group of families throughout FFY 2007, with many exhibiting risk factors for child abuse and neglect.
- ➤ Most families (97%) received the services recommended at intake, and over 70% completed services.
- ➤ Over 99% of PSSF families did not have a substantiated CPS report within six months of program participation.
- Most families (82%) showed a positive change on at least one presenting issue while in the program.
- ➤ Most families (87%) receiving parenting classes reported improved competence in their parenting skills and competencies.
- ➤ Nearly all families (95%) were satisfied with the program and the services received.

Based on this year's report findings, the evaluation team recommends the following:

- The program should continue to evaluate parenting assessment tools and other measures to assess how families are progressing during program participation.
- The program should consider exploring families referred by CPS to understand why they perform better on outcome measures and work to better capture participating families' level of CPS involvement.
- The program should continue to encourage sites to spend more time with families.





Introduction

"25 - 50% of all children will experience some form of abuse during childhood."

-Child Abuse Prevention Association

"A child in Arizona is abused or neglected every hour."

-Arizona's Child Abuse InfoCenter

"Providing services that engage, involve, strengthen, and support families is the most effective approach to ensuring children's safety, permanency, and well-being."

-National Clearinghouse on Child Abuse and Neglect Information

The Impact of Child Abuse and Neglect

Approximately six children in the United States are reportedly abused and/or neglected every minute, which results in more than 3 million abuse reports annually (State of Arizona, 2008). The consequences of abuse suffered by children are wide-ranging, severe, and often last into adulthood (Centers for Disease Control and Prevention, 2008). The results of child abuse and neglect include physical limitations (e.g., shaken baby syndrome, impaired brain development, poor physical health), psychological problems (e.g., eventual psychiatric disorders, cognitive and social difficulties), and behavioral consequences such as delinquency, substance abuse, and abusive behavior. The overall societal burden is staggering as well. In a 2001 study commissioned by Prevent Child Abuse America, the estimated total direct annual costs of child abuse and neglect in the United States were estimated at over \$24 billion per year (National Clearinghouse on Child Abuse and Neglect Information, 2004). 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 and increasing, the prevention of child abuse is a critical policy priority. In response to the need for prevention within Arizona, the Department of Economic Security (DES) created the Promoting Safe & Stable Families (PSSF) program to provide family support and preservation services to Arizona families.





Arizona's Promoting Safe & Stable Families Program

Imagine a woman with two preteen sons living in a domestic violence shelter. Imagine a young, single mother of two boys under the age of 7, dealing with developmental issues for her eldest. Picture a teenage mother being abused by her boyfriend and in need of safety. Imagine a family that needs help parenting their children.

These scenarios come from families who sought services through the PSSF program. These families, and many others like them, came to the program in need of help and, through their participation, successfully improved their situations.

The PSSF program is a child abuse and neglect prevention program that helps Arizona families facing a wide variety of needs. Administered by the Department of Economic Security, the PSSF program uses a family-centered, family-driven approach to providing services to any family in Arizona. The main goal of PSSF is to reduce child abuse and neglect. The mission of the 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.

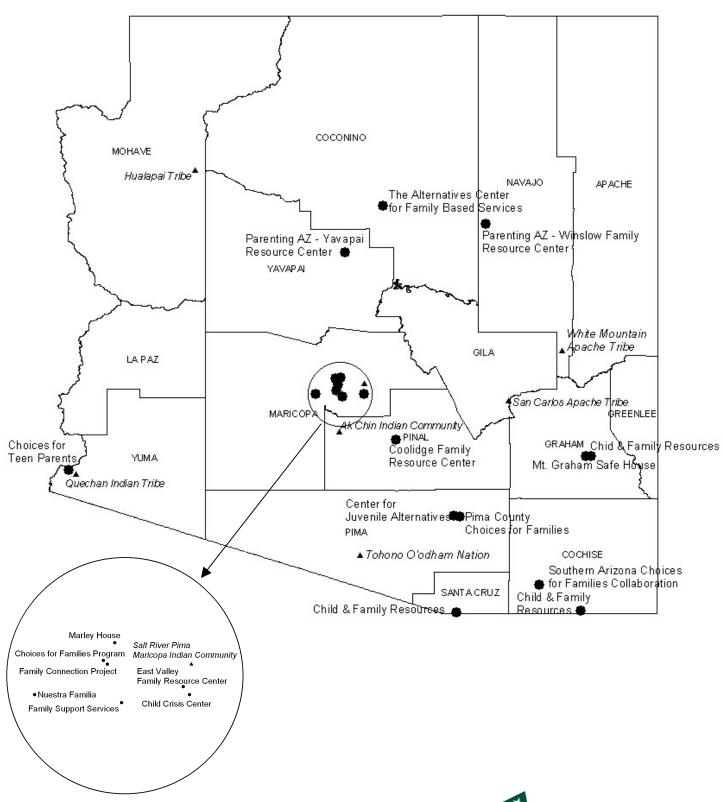
Families come to the program voluntarily and through referrals with a variety of needs (i.e., presenting issues). Once the families identify their specific presenting issues, they are then matched to appropriate services, which include the spectrum of family support (preventative services) and family preservation services (short-term, family-based services designed to assist families in crisis). Services vary across the state with some sites relying heavily on making referrals to outside agencies to provide the continuum of services necessary to address families' needs.

The PSSF program consists of 16 statewide agencies and seven tribal agencies. Exhibit 1 shows the location of all 23 agencies within Arizona. *Appendix A* provides a complete list of all program agencies and the services they provide.





Exhibit 1. Promoting Safe and Stable Families Program Locations





Evaluation of the Arizona PSSF program

Since the program began in 1998, LeCroy & Milligan Associates has performed the evaluation of the PSSF program. The purpose of the evaluation is to characterize the families served, describe the program services, and analyze progress toward the program outcomes. Specific questions guide the evaluation and analysis of the program's success.

Evaluation Questions

The evaluation collects demographic information on the participants and their families, monitors families' abilities to address and reach personal goals, tracks services provided, and answers questions related to program outcomes. The outcome evaluation focuses on specific questions based on the State Strategic Plan Objectives:

- 1. How many program participants had substantiated CPS reports within six months after discharge?
 - Using the statewide child abuse tracking database, PSSF participants were tracked to identify those with a substantiated report of child abuse.
- 2. What was the overall family satisfaction with the program?
 - Participants' satisfaction ratings were tracked and compared with other indicators of program success.
- 3. Was there improvement in self-reported parental competence?
 - Since poor parenting is a well-known risk factor for child abuse and neglect, PSSF specifically assessed self-reported parenting competencies as an outcome measure.
- 4. Was there improvement in at least one presenting issue?
 - PSSF families provided reasons (known as presenting issues) for why they came to the program for services. During participation and at the end of receiving services, the program tracked families' progress toward improving these issues.
- 5. What was the total number of families served?
 - The program tracked the number of families served to assess how widespread the program's presence is throughout the state.





Data Collection & Analysis

The program provided services to three different types of families. Families who received two or more hours of service were considered long-term families. Families with less than two hours of service were short-term families and had significantly less data collected from them. Families who received services from one of the seven tribal providers had minimal data collected. This report focuses primarily on the program's long-term families, with separate sections dedicated to both short-term and tribal families.

Program staff completed the Family Data Collection Form (FDCF) for long-term families. The FDCF captures demographic data, information regarding presenting issues, and certain outcome data. Families also completed a Program Satisfaction Survey to provide feedback on the services received. Both forms were sent to the evaluation team when the family discharged from the program. The evaluation team analyzed and reported data monthly and quarterly to both DES and the participating sites. This annual report provides a thorough examination of the program's progress between October 1, 2006 and September 30, 2007, which is Federal Fiscal Year (FFY) 2007.

In this Report

This annual evaluation report analyzes both process and outcome evaluation data to determine the program's progress toward its stated goals. The report focuses on aggregate data summarized across the 16 agencies and seven tribal sites that constitute the PSSF program. Evaluation data are presented for the cohort of participants who received PSSF services during FFY 2007. At the request of DES, this year's report provides a brief overview of the process evaluation findings and focuses more on outcomes and site-level data to improve program quality overall. The report is divided into the following sections: Background of Child Abuse and Neglect, Process Evaluation Findings, Outcome Evaluation Findings, Profile of High-Risk Families, and Recommendations. The attached appendices provide more detailed information about key concepts.





Process Evaluation Findings

Between October 2006 and September 2007 (FFY 2007), the Promoting Safe and Stable Families program served a total of 7,154 families with 14,990 children overall. The program provided services to three different types of families (long-term, short-term, and tribal). The following table outlines the three family types and the numbers served during the past year.

Demographics - Who is the program serving?

Exhibit 2: Family Data, FFY 2007 (n=7,154)

Demographic	Long-term families	Short-term families	Tribal families	All families
Families served	3,563	2,959	632	7,154
Adults served	5,893	4,100	N/A	9,993
Children served	7,797	6,463	730*	14,990

^{*}These numbers should be reviewed with caution since approximately 38% of the data on the number of children from tribal families was missing. The tribal sites continued to refine their process of collecting and reporting data for the program. The evaluation continued to work with these sites throughout fiscal year 2007.

The majority of this report analyzes long-term families during FFY 2007, with short-term and tribal families reported separately at the end of this section. A historical review of program enrollment by family type is provided in *Appendix B*.

Specific families were most at-risk for child abuse and neglect; consequently, they were in the greatest need of prevention services. As the following table shows, many families served exhibit a significant level of need. Many families served had incomes below the poverty threshold, were single parent households, and lived in their neighborhoods for one year or less. *Appendix C* details the demographic profile of long-term families.



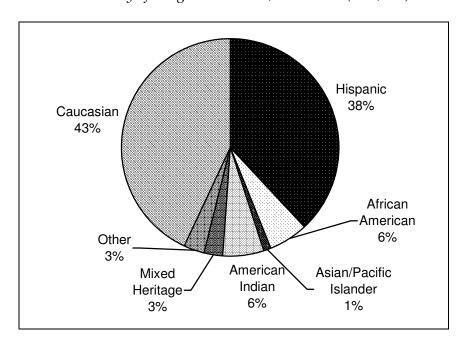
Exhibit 3: Risk Factors for Program Families, FFY 2007 (n=3,563)

Risk Factor	Long-term Families
Income below poverty threshold ^a	55%
Single parent household	42%
Unemployed primary caregiver at intake	38%
Primary caregiver less than high school education	23%
In neighborhood 1 year or less	42%
Children in physically residing outside the home at intake	9%
Homeless at intake	8%

^aPoverty threshold is defined using the 2007 U.S. Census definition (www.census.gov, 2008). The 2007 definition is the most current one available at the time of this report.

The PSSF program serves a variety of culturally and ethnically diverse participants throughout the state. The program's participant cultural makeup is similar to the state's overall composition, with most participants being either Caucasian or Hispanic.

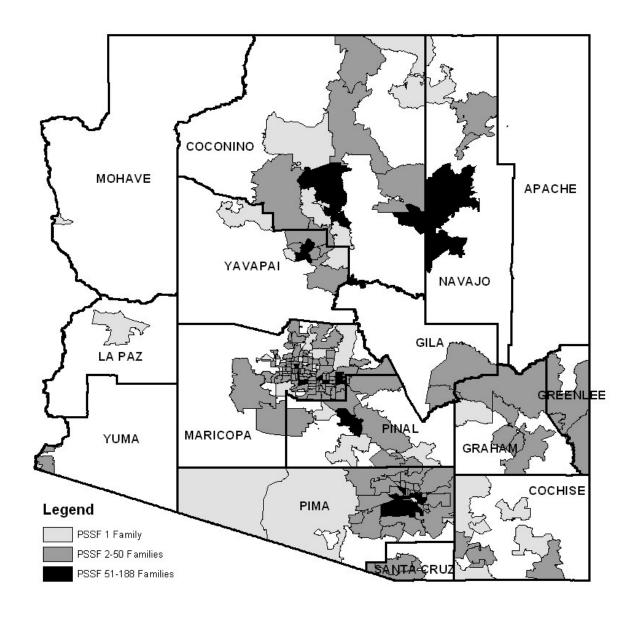
Exhibit 4: Cultural Diversity of Program Families, FFY 2007 (n=3,563)





Families participating in the PSSF program come from many different regions within Arizona. As shown in Exhibit 5, long-term 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 and served families in tribal areas, as well.

Exhibit 5: Map of Participating Families by Zip Code, FFY 2007





Comparable to previous years, families who received services from PSSF program sites during FFY 2007 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 the highlights listed below. For a complete listing of demographic characteristics of PSSF families, see *Appendix C*.

- 88% of the primary caregivers were female, and 12% were male.
- 6% of the primary caregivers were younger than 21 years of age, whereas 67% were over the age of 30.
- The average family size was four, and families ranged in size from one to 12.
- 79% of the families spoke English as their primary language, 9% spoke Spanish, and 11% spoke a mixture of Spanish and English.

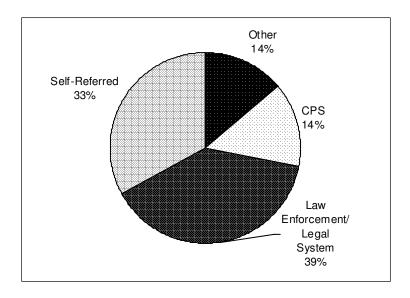
Referral Sources - How did families join the program?

The program has only one inclusion criteria, which is to serve families with a child 0 to 18 years of age. While program participation is free and voluntary, families are referred through various sources (see Exhibit 6). Many participating families (39%) were referred from either law enforcement or from the legal system. One site that specializes in juvenile offenders serves approximately one-third of all PSSF families and accounts for a significant part of this referral source. Self-referred or voluntary referrals make up 33% of all referrals. This percentage is up from last year's 27%. The percentage of families referred by CPS held constant at 14% from last year to this year. "Other" sources such as friends and schools made up approximately 14% of all referrals for this year.





Exhibit 6: Referral Source, FFY 2007 (n=3,545)



Presenting Issues - What services did the families seek?

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 between 0 to 18 years old is eligible to receive services. The issues that families needed assistance with ranged from the need for basic goods used to preserve their families during difficult times (e.g., food or clothing), to dealing with the complex problems of family management to support their families. (See *Appendix D* for a complete list of presenting issues and descriptions.)

During the first visit with the agency, the family and their 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. The following table provides a list of all presenting issues available to the families and the frequency of which they selected each one.



Exhibit 7: Presenting Issues and Frequency, FY 2007 (n=3,563)

Order of Most Frequently Used	Presenting Issue	% (N)
1	Parent Stress	30% (n=2,222)
2	Education/Skills/Training	18% (n=1,338)
3	Child Stress	14% (n=1,004)
4	Family Stress	11% (n=834)
5	Adult Stress	5% (n=378)
6	Information & Referral	5% (n=338)
7	Basic Goods	4% (n=318)
8	Financial Assistance	4% (n=299)
9	Housing	3% (n=237)
10	Shelter/Respite	3% (n=228)
11	Medical Care	<1% (n=62)
12	Transportation	<1% (n=52)
13	Legal Assistance	<1% (n=46)

Similar to previous years, families typically selected two presenting issues, and the top three most common presenting issues were Parent Stress, Education/Skills/Training, and Child Stress. Combined, these three categories account for approximately 62% of the presenting issues for all families served.

Services - What services did families receive?

Based on a family's presenting issues, PSSF provides services that specifically address those identified needs. The program provides two general categories of services: family support and family preservation services. 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. *Appendix E* provides detailed descriptions of all services provided by family support and family preservation service types. The following table





details how frequently families received each type of service or both service types and approximately how much time families received each service.

Exhibit 8: Types of Services and Median Amount of Time Spent in Program (n=3,563)

Type of Service	% (# Served)	Median Amount of Time Spent in Program (in hours)
Family Support Services Only	35% (n=1,241)	9
Family Preservation Services Only	11% (n=387)	12
Both Family Support and Family Preservation Services	54% (n=1,935)	6

Families receiving preservation services spent more time in the program than those receiving family support services or a combination of both service types. Approximately 54% of families received a combination of both services.

While the general categories of family support and family preservation services are informative, it is more telling to know which specific services families received and of what duration. Over 60% of families received assessment, evaluation, and case management. In addition to those services, many families received information and referral for additional services, supportive intervention counseling, and parent skills training. These types of services provide the skills necessary to prevent child abuse and neglect. The following table outlines the top 10 services received and the amount of time spent with each. *Appendix F* provides a detailed list of each service provided.



Exhibit 9: Most Frequently Received Services (n=3,563)

Top 10 Most Received Services	% (# served)*	Median Time Spent (in hours)
1. Assessment/Evaluation	63% (2,219)	7.0
2. Case Management	61% (2,164)	7.0
3. Information & Referral	48% (1,704)	5.0
4. Supportive Intervention - Counseling	27% (976)	12.0
5. Parent Skills Training	26% (938)	10.5
6. Early Intervention	20% (715)	4.0
7. Respite Care	12% (413)	25.0
8. Basic Education (tied)	8% (281)	11.5
Emergency Human Services	8% (271)	6.3
Socialization & Recreation	8% (266)	12.0

^{*}Since most families received multiple services, the percentages should be interpreted as the percent of all families that received a particular service (e.g., 63% of all families received assessment or evaluation).

According to Family-Centered Practice, 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. Historically and including this year, the program has closely matched the intended services to the services received. This year approximately 97% of the intended services became the actual services received. 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 ensure families receive appropriate services. For the 3.5% who did not receive intended services, these families were often linked with comparable and related services to those outlined at intake.

Exhibit 10: Families Receiving Intended Services, FFY 2007 (n=3,563)

	Number of Services Families Received	Percent of Services Families Received
Family Received Intended Services	7,094	96.5%
Family Did Not Receive Intended Services	257	3.5%





With most families having services appropriately matched to their needs, it is useful to examine what services were provided for a family's particular presenting issue. The following table outlines the five most common presenting issues and the most delivered services associated with each. All of the top five presenting issues received assessment/evaluation and case management. The other services provided for each presenting issue were closely aligned to the problem (e.g., families with parent stress received parent skills training and supportive counseling).

Exhibit 11: Most Frequent Presenting Issues and Services, FFY 2007 (n=3,563)

Top Five Most Frequent	Most Delivered Services within Each Presenting	
Presenting Issues	Issue	
1. Parent Stress	1. Parent Skills Training (52%)	
	2. Assessment/Evaluation (40%)	
	3. Case Management (39%)	
	4. Supportive Intervention Counseling (27%)	
	5. Information & Referral (25%)	
2. Education/Skills/Training	1. Case Management (96%)	
	2. Assessment/Evaluation (95%)	
	3. Information & Referral (87%)	
	4. Early Intervention (48%)	
	5. Supportive Intervention Counseling (31%)	
3. Child Stress	1. Assessment/Evaluation (85%)	
	2. Case Management (84%)	
	3. Information & Referral (64%)	
	4. Supportive Intervention Counseling (35%)	
	5. Early Intervention (25%)	
4. Family Stress	1. Assessment/Evaluation (55%)	
	2. Case Management (55%)	
	3. Information & Referral (43%)	
	4. Supportive Intervention Counseling (38%)	
	5. Parent Skills Training (27%)	
5. Adult Stress	1. Supportive Intervention Counseling (50%)	
	2. Assessment/Evaluation (50%)	
	3. Case Management (46%)	
	4. Information & Referral (38%)	
	5. Parent Skills Training (35%)	



Service Delivery – What number of participants does each county and site serve?

The total number of long-term families served during FFY 2007 was 3,563. Sites served different numbers of long-term families depending on their funding and existing community resources. While down slightly from FFY 2006, steady enrollment and participation statewide remain a program strength to meet the broad range of families' needs to prevent child abuse and neglect.

Exhibit 12: Number of Families Served by Site, FFY 2007 (n=3,563)

Site & Long-term Families Served			
Cochise/Santa Cruz County		Maricopa County	
Child & Family Resources So. AZ	105	Aid to Adoption of Special Kids	119
Coconino County		Nuestra Familia	91
Open Inn Flagstaff	281	Black Family & Child Services	106
Gila, Graham, & Greenlee Counties	201	Child Crisis Center	653
Mt. Graham Safe House	64	Child & Family Resources - Phx	167
	04	Marley House	104
Navajo County	(0)	Mesa United Way	275
Parenting AZ – Winslow Family	69		
Resource Center			
Pima County		Yavapai County	
Child & Family Resources - Tucson	130	Parenting AZ - Yavapai Resource	86
Open Inn - Tucson	1,194	Center	
Pinal County		Yuma County	
Coolidge Family Resource Center	64	Child & Family Resources - Yuma	55
Total for all Sites = 3,563			



Duration - How long did families stay in the program?

Long-term families in the program are families who receive at least two hours of services. Many families spent significantly more time working on their presenting issues and benefited from PSSF services. The median amount of time across all families was eight hours. This amount is up from last year's 6.75 hours, which shows that families receive more services. This is important because families who spent more time in the program generally showed more improvement on their outcomes than families who spent less time. The following graph illustrates how much time families spent in the program.

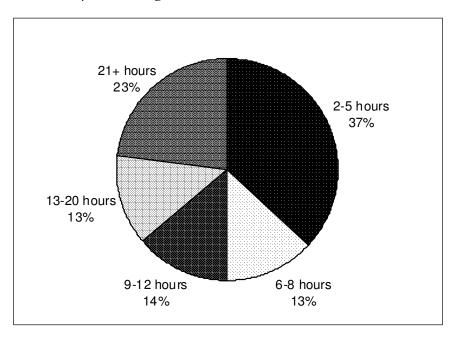


Exhibit 13: Time Spent in Program, FFY 2007 (n=3,563)

During their participation in PSSF, many families had positive and uplifting experiences. Select stories of these families are detailed in *Appendix G*.



Discharge - How did families leave the program?

Families chose to leave the program for a variety of reasons, although most (74%) had completed services. Consistent with previous years, 18% of families became inactive and could not be located. Approximately 2% of families indicated that they no longer wanted services.

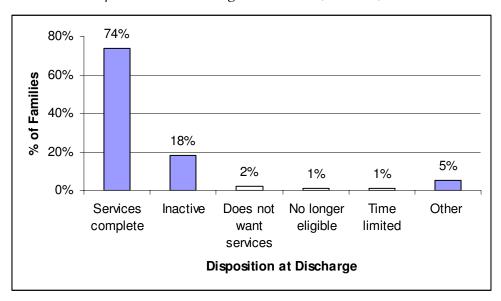


Exhibit 14: Disposition at Discharge, FFY 2007 (n=3,560)

Further analysis examines the link between referral sources and how families either complete services or become inactive. Families who completed services came from a variety of referral sources, with the greatest portion coming from law enforcement or the legal system. Over half of the families that become inactive were participating voluntarily.

¹ Case managers working with the families provided the reason why families left the program.





Short-term Family Profile

During FFY 2007, participating sites submitted data on 2,959 families who received less than two hours of service. The services provided addressed the presenting issues identified by the families, and were either Family Preservation and/or Family Support Services. (See *Appendix E* for a list of each type of service.) Due to the limited time spent with these families, only key questions were asked of them.

The following table details specific information about services provided to short-term families. Over half the short-term families received between an hour to two hours of services such as assessment and case management. These services were generally provided on-site and were usually family support services.

Exhibit 16: Short-term Family Profile, FFY 2007 (n=2,959)

Indicator	Percentage	Number served
One adult in household	54%	1,603
Received Family Support services	77%	2,284
Received Family Preservation services	22%	662
Referral to another agency	42%	1,235
Services provided on-site	74%	2,200
Contact minutes*		
30 minutes or less	31%	930
31-60 minutes	14%	418
61-120 minutes	54%	1,611
Most frequent services received**		
1. Assessment/Evaluation	25%	1,487
2. Case Management	22%	1,302
3. Information & Referral	16%	966
4. Supportive Intervention Counseling	9%	500
5. Socialization & Recreation	7%	427
6. Food & Nutritional Services	5%	286

^{*} One site provided services for 180 minutes to 49 participants. This amount exceeds the time that should be spent with short-term families. They were excluded from the response table.



^{**}Program participants received less than 5% of any of the other program services offered.



Tribal Family Profile

The program's seven tribal sites provided services to 632 families with at least 730 children during FFY 2007². The sites include Ak Chin Indian Community, Hualapai Tribe, Quechan Indian Tribe, Salt River Pima-Maricopa Indian Community, San Carlos Apache Tribe, Tohono O'odham Nation, and White Mountain Apache Tribe. The following table outlines the information gathered on families served.

Exhibit 17: Tribal Data on Services and CPS Involvement, FFY 2007 (n=632)

Indicator	Percentage (number served)
Received Family Support services	52% (331)
Received Family Preservation services	35% (224)
CPS Involvement	27% (169)

More than half the tribal families received family support services and approximately one-third received family preservation services. Moreover, of all tribal site families, 27% (n=169) reported having contact with CPS. This rate is substantially higher than the CPS referral rate among non-tribal providers (14%). However, due to significant amounts of missing data, these numbers should be reviewed with caution. In FFY 2006, the evaluation began collecting and reporting minimal data from these tribal groups. In FFY 2007, the program coordinators and evaluation team continued to work with the tribal groups to improve the quality of the data. The program should collect more information about tribal families to help them best meet their needs.

² Approximately 38% of the data on the number of children was missing.





Summary

In FFY 2007, the Promoting Safe and Stable Families program in Arizona served and discharged 7,154 long-term families, representing over 14,990 adults and children. These families came from diverse backgrounds and arrived at the program with a variety of needs and presenting issues. Although there were minor differences in the family profiles, overall families were relatively similar in FFY 2007 to recent years. Noteworthy differences were that more families were in their neighborhoods for one year or less and fewer children were physically residing outside of the home at intake. While there was slight variation among families' risk factors, overall, participating families have similar needs and support systems as in recent years.





Outcome Evaluation Findings

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 long-term families who participated in the program. These two measures provide important information about participating families, including the following:

- select risk factors for child abuse and neglect;
- degree of improvement in the family's presenting issues;
- program satisfaction; and
- self-perception regarding increased parental competence.

Outcome data were then linked to key performance goals outlined in the Department of Economic Security's State Strategic Plan Objectives. Data were collected on all long-term families to determine the program's success in reaching these objectives. 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 the State Strategic Plan Objectives separately at both the program and site level. Historical data trends are also provided in summary. The program is required to report on these objectives as well as the overall number of new families receiving services.





Child Abuse and Neglect

Objective: Maintain 99% of high-risk families with no subsequent reports of child abuse and neglect within six months after program discharge.

Result: 99.7% of families did not have a subsequent substantiated CPS report.

Many of the families served by this program are at high risk for committing child abuse and neglect due to the presence of known risk factors (i.e., poverty, emotional stress, homelessness, etc). In order to monitor the program's ability to prevent child abuse and neglect, the evaluation tracks program participants six months following their discharge to determine if the primary caregiver had a substantiated Child Protective Services (CPS) report filed. Incidence is established by thoroughly reviewing a data extraction from the statewide CHILDS (Children's Information & Library Data System) database for primary caregivers meeting these criteria. A match process (described below) determines the estimated percent of families with a subsequent CPS report.

For FFY 2007 the CHILDS data extraction included long-term families with *substantiated* CPS cases occurring between 08/31/2007 and 02/28/2008. Since only families who were out of the program at least six months were included in the review, those families with a discharge date before 08/31/2006 were examined. Based on these criteria, 3,200 families discharged from the program were included in the check. Of these 3,200 families, 79% (n=2,522) had either a social security number or both the mother's complete name and date of birth. It should be noted that this match is highly contingent on the availability of detailed information for each family and the reliability of the CHILDS data.³

Of those 2,522 families, eight families had positive matches for substantiated incidences of child abuse or neglect for an overall rate of 99.7% of families with no substantiated reports. This number is approximately half the number of substantiated cases found last year. This decrease mirrors the overall decline in number of substantiated CPS reports in recent years. The Child Welfare Division

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³ These rates are determined by a process that requires a "match" on available information on the families such as mother's name, social security number and date of birth. When details for the match are missing in either database, the accuracy of the match can decrease.



of DES reported approximately 2,380 substantiated CPS reports during FFY 2007, which was down 15% from the year prior (Arizona Department of Economic Security, 2008). Therefore, the statewide decrease could be responsible, in part, for the decrease in number of PSSF families with a substantiated CPS report.





Program Satisfaction

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

Result: Of families surveyed, 95% reported being satisfied overall with the program.

Program coordinators at all 16 sites administered program satisfaction surveys to their participating families. Close to the end of services, administrators gave surveys to program participants to complete and return to the site in a sealed envelope to encourage participants to honestly assess the programs. Some programs used incentives to encourage participants to complete and return the form.

Program satisfaction was measured using the first 14 items from the Program Satisfaction Survey. Respondents were asked to measure their satisfaction by using a 5-point Likert scale with the endpoints being Strongly Disagree and Strongly Agree. The items include statements about the family's experience with the staff and program as well as overall impressions of the program infrastructure. 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.

Similar to last year, 42% of program participants (n=1,508) completed a satisfaction survey this year, with 86% responding in English and 14% in Spanish.⁴ Research has shown that there is a positive correlation between perceived service quality and program outcomes (Herman, 1997). Approximately 95% of survey completers reported being satisfied with the program overall, which is well above the program goal of 90%. Only 69 participants reported

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⁴ Participants were not randomly sampled to complete the survey and therefore, a convenience sample was used. Those who completed the survey were the participants who, for the most part, completed program services. Therefore, these data could be slightly biased, in that they do not address a fully representative sample of those who completed and did not complete services.



being not satisfied with the program. While most participants were satisfied, the program should continue to emphasize the importance of getting and incorporating participant feedback to the sites. Although 42% is a significant portion of the number of families served, the program should continue to increase survey completion rates.

One way to increase survey response rates is to examine the reasons why program staff could not get completed surveys from the other 58% of participants. The following table details the challenges noted by program staff in obtaining completed surveys. Many reasons provided are beyond the program's control (e.g., the family dropped out of the program early); however, program staff can work to best ensure their staff administer surveys to the 15% of families they missed last year.

Exhibit 18: Challenges in Completing Program Satisfaction Surveys, FFY 2007 (n=2,082)

	Percent of	
Challenges to Receiving Completed Satisfaction Surveys	Reasons Reported	
Family dropped out of program prior to completing survey	23%	
Can not locate family	5%	
Family refused to complete survey	9%	
Staff did not administer survey to family	15%	
Family did not return survey to agency	21%	
Unknown	13%	
Other	13%	

Overall, program satisfaction remains a strong point for the program. Families report being happy with the program and are willing to recommend the program to others.



Presenting Issue Improvement

Objective: Maintain at 74% the number of families who achieve improvement in at least one presenting issue.

Result: 82% of families improved in at least one presenting issue.

At intake, families discussed with agency staff members which presenting issues brought them in for service and selected the most applicable from an established list of reasons.⁵ 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 at discharge, regardless of their reason for leaving. The difference between these two ratings formed the basis for determining whether or not the family improved while enrolled in the program.

Across all families and all presenting issues, 82% of families improved on at least one issue between intake and discharge. The FFY 2007 percentage is up from the 75% reported last fiscal year. The program has experienced a steady increase in this outcome over time. During FFYs 2003 through 2005, the percentages hovered around 70%. This increase could be due to increased training with program staff on how to assess the families.

Certain key characteristics made some families more likely to improve on their presenting issues. Families referred from either CPS or were self-referred had a higher percentage of improvement. Similarly, families who improved tended to complete services and stayed in the program longer than the program average (over nine hours instead of eight hours). Few patterns were observed between improvement and other characteristics such as what services families received or what presenting issue they had. The following table details select characteristics and their influence on the percent of families that improved on their presenting issues.





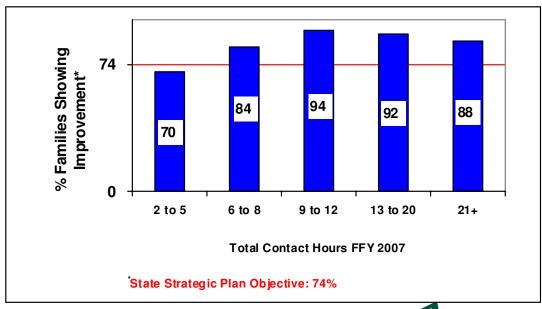


Exhibit 19: Presenting Issue Improvement, FFY 2007 (n=2,926)

Select Factors that Lead to Greater	Percent of Families that Improved		
Improvement on Presenting Issues	on Presenting Issues		
Referral Source			
Referred from CPS	88%		
Self-referred	85%		
Completed Services	90%		

Another factor related to demonstrated improvement is the number of contact hours families had with the providers. As shown in Exhibit 20, 70% of families receiving between two to five hours of service (n=905) showed improvement at discharge. This percentage falls short of the goal to achieve 74% of families improve. However, the chance of improvement steadily increased with more contact time. Families who received between nine to twelve hours of service improved the most, with 94% improving. With families spending more time in the program this year compared to last year, it correlated with more families improving during their participation. The program should continue to encourage families to stay longer to improve their situations and achieve their goals.

Exhibit 20: Percent of Families that Improved by Total Contact Hours, FFY 2007 (n=3,434)



*



Parental Competence

Objective: Maintain at 89% the number of families reporting improved competence in their parental skills.

Results: 87% of families receiving parenting services reported improved parental competence.⁶

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. This year 87% of the families who answered the questions regarding Parental Competence reported that they did improve. While this rate is slightly below the State Strategic Plan Objective, it should be noted that 11 of the 16 providers exceeded the 89% threshold of improved parental competence. There were 67 families who did not feel they improved in this area. Of these 67 families, 45 families (67%) came from one particular site. The program should work with this site and others to review their parenting classes and provide any needed support to improve. Given the convenience sample used to collect these data through the Program Satisfaction Survey, the program should consider adding another validated measure to assess parenting abilities.

⁶ Previous reports have included all families who completed the parental assessment tool. This year only families who received parent skills or parent aide training were included (n=1,077). Of this group, 531 families completed the parental competence section of the satisfaction survey. Of this group, 87% of families (n=464) self-reported improvement in parental competence and 13% (n=67) reported no improvement. As with the program satisfaction data, these results must be interpreted with caution due to the low number of participants who both received parenting services and completed the satisfaction survey.





Site-level Progress toward Outcomes

The program as a whole achieved most of its outcomes; however there was significant variation among the 16 individual sites. The following table details how each site performed in the program outcomes. The number of families is reported when 10 or fewer families responded to a specific response category.

Exhibit 21: Site Progress toward Outcomes, FFY 2007 (n=3,563)

Site Progress toward Program Outcomes						
		Satisfied	Improved on	Improved on		
	Number of	with	Presenting	Parental		
Sites	Participants	Program	Issues	Competence		
Aid to Adoption of Special Kids	119	100%	85%	100%		
Nuestra Familia	91	99%	99%	97%		
Child & Family Resources - Phoenix	167	71%	93%	50%		
Child & Family Resources - Tucson	130	100%	85%	100%		
Child & Family Resources – Southern Arizona	105	100%	75%	100%		
Child & Family Resources - Yuma	55	100%	96%	50% (n=2)		
Child Crisis Center	653	99%	88%	96%		
Marley House	104	100%	86%	100%		
Mesa United Way	275	95%	89%	93%		
Mt. Graham Safe House	64	90% (n=10)	94%	N/A*		
Open Inn – Flagstaff	281	85%	70%	N/A*		
Open Inn - Tucson	1,194	96%	78%	81%		
Parenting AZ - Yavapai Resource Center	86	100%	81%	100%		
Parenting AZ - Winslow Family Resource Center	69	50% (n=4)	55%	67% (n=3)		
Coolidge Family Resource Center	64	91%	52%	87%		
Black Family & Child Services	106	100%	96%	100% (n=8)		
Program Overall	3,563	95%	82%	87%		

^{*}Mount Graham Safe House and Open Inn – Flagstaff did not have any participants complete the parental competence section of the program satisfaction survey.

Each site provides services to unique populations with their own challenges. Most sites were able to conquer those challenges to help their families achieve their goals and improve their perceptions of their parenting skills. Overall,





families were very satisfied with the services they received. Follow up should occur with individual sites to ensure each site is striving to reach the stated program goals.

Historical Comparison

Exhibit 22 compares the success rate in meeting the State Strategic Plan Objectives over the past five years. The data from FFY 2007 indicate that the program consistently met all the stated objectives except improvement in parental competence. For the fifth straight year, overall family satisfaction exceeded 90%. Furthermore, less than one percent of families received a substantiated CPS report within six months of being discharged from the program. For the second straight year, the overall percentage of families improving in at least one presenting issue exceeded the outcome goal of 74%. However, the percentage of families reporting parental competence (87%) was slightly below the 89% objective. When examined at a site-level, 11 out of the 16 programs met or exceeded this objective. The number of families served was comparable to previous years.

Exhibit 22: State Strategic Plan Objectives, Previous FFYs Compared to FFY 2007

	Previous FFYs ²	FFY 2007	Outcome Goal	State Strategic Objective
No Substantiated CPS Reports 6 Months After Discharge	99%	99.7%	99%	Met
Overall Family Satisfaction	97%	95%	90%	Met
Improvement in at Least One Presenting Issue	71%	82%	74%	Met
Improvement in Parental Competence ^b	89%	87%	89%	Nearly Met
Total Number of Families Served	7,233	7,154	To Report	

^a Previous FFYs include FFY 2002 through FFY 2006 and values represent an average across years.

^b Parental Competence is self-reported. A key change from FFY 2006 was that this year's percentage only included families who received parenting services. In previous years, the evaluation reports included any family who completed this section of the Program Satisfaction Survey, regardless of the services received.





Profile of High-Risk Families

PSSF serves families from many different referral sources, including those referred from CPS. Families referred from CPS are arguably at a higher risk for child abuse and neglect than families without CPS contact. For FFY 2007, 14% of participating families were referred from CPS. See *Appendix H* for a map of CPS referrals by zipcode. The following table compares CPS-referred families with families not referred by CPS and all program families.

Exhibit 23: High-risk Family Profile, FFY 2007 (n=3,563)

	CPS-referred Families (n=497)	Families not referred by CPS (n=3,066)	All program families (n=3,563)	
Risk Factors	, ,	, ,		
Income below poverty threshold ^a	66%	53%	55%	
Single parent household	44%	42%	42%	
Unemployed primary caregiver at intake	47%	36%	38%	
Primary caregiver less than high school education	28%	22%	23%	
In neighborhood 1 year or less	46%	41%	42%	
Children physically residing outside of the home at intake	8%	8%	9%	
Homeless at intake	9%	8%	8%	
Presenting Issues & Program Serv	vices			
Amount of time in program (median)	8 hours	8 hours	8 hours	
Program made report to CPS	2%	5%	4%	
Top 3 Presenting Issues	 Parent Stress Child Stress Financial Assistance 	Parent Stress Education/ Skills/Training Child Stress	1. Parent Stress 2. Education/ Skills/Training 3. Child Stress	
Top 3 most received services	 Case Management Assessment/ Eval Info & Referral Supportive Intervention Counseling Parent Skills Training 	1. Assessment/ Eval 2. Case Management 3. Info & Referral 4. Supportive Intervention Counseling 5. Parent Skills Training	1. Assessment/ Eval 2. Case Management 3. Info & Referral 4. Supportive Intervention Counseling 5. Parent Skills Training	
Program Outcomes				
Program Satisfaction	97%	95%	95%	
Improved on at least one presenting issue	88%	81%	82%	
Improved on parental competence	100%	83%	87%	

^aPoverty threshold is defined using the 2007 U.S. Census definition (www.census.gov, 2008).





CPS families enter the program at higher risk than either families not referred by CPS or program families overall. CPS families showed higher poverty, more single-parent households, higher unemployment, and lower education than the typical PSSF family. Despite these factors, CPS-referred families reported slightly better program outcomes. Of particular note is that 100% of CPS families self-reported improvement on their parenting skills. These families received comparable services to all program participants and spent the same amount of time in the program. Further investigation should explore why these families tended to do better despite having more challenges to overcome.

Summary of Outcome Evaluation

Overall, the PSSF program met most of its outcome objectives in FFY 2007. Specifically, the program reached the State Strategic Plan Objectives for the percent of families without a substantiated CPS report after discharge, program satisfaction, and improvement on at least one presenting issue. The program nearly met its goal to have 89% of families improve their parental competence. Most individual program sites were able to reach these objectives; however, a few select sites did not meet the program objectives and follow up should take place with these sites. Families referred by CPS were a unique subgroup in that they entered the program with greater risk factors than the rest of the group yet demonstrated better program outcomes. The following section highlights FFY 2007 progress to last year's recommendations and outlines the recommendations for the upcoming year.





Recommendations

Overall, the Promoting Safe and Stable Families (PSSF) providers continued to offer a wide range of services to a diverse group of families in a manner consistent with the program's mission. The program's mission is to strengthen and stabilize all families through the development of a continuum of family-centered services that promote safety, are comprehensive, coordinated, community-based, accessible, and culturally responsive (Arizona Department of Economic Security).

As part of the PSSF program's quality assurance process, the program tracks and monitors progress in addressing recommendations made in the previous year's evaluation report. The following section outlines recommendations from last year's report and relevant activities and results from 2007 that addressed those recommendations.

Progress on Recommendations from FFY 2006

Recommendation 1: The program (providers, DES, and the evaluation team) should build on past gains in data collection to continue improving both the quantity and quality of data. **Result: Progress made.**

The program worked diligently in 2007 to better track and submit data for evaluation. The evaluation team and program coordinators developed quarterly site reports distributed for site review of data submission. The quarterly reports summarized the data submitted and reported on the monthly site reports. The evaluation team also worked directly with specific sites to ensure all data were provided.

The program sought to improve the quality of data submitted for evaluation as well. Formal data collection trainings were held during bimonthly meetings. The evaluation team and program coordinators developed a data dictionary with provider input. DES increased their level of documentation and review of site's data submission and progress toward key outcome measures. The evaluation team trained new program staff close to their date of hire to best prepare them for data collection.





Recommendation 2: Provider agencies should continue to work to increase the percent of families who improve on at least one presenting issue. **Result: Progress made.**

From FFY 2006 to FFY 2007, the percent of families who improved on at least one presenting issue increased from 75% to 82%. Program coordinators and the evaluation team provided technical support on how to best assess presenting issues at intake, then again at discharge. Through role-playing exercises, sites reexamined their strategies in this area. Through referencing quarterly site reports of program services and outcomes, DES program coordinators monitored each site's progress on this outcome, in particular.

Recommendation 3: The program should explore adding questions to more precisely measure parenting outcomes for each site providing such services. **Result: Some progress made.**

The program explored parenting measures currently being used by sites providing parenting classes. The evaluation team surveyed these sites to determine the different measures sites use for assessment and the utility of those measures. The program coordinators and evaluation team researched some alternative measures and brainstormed the challenges of finding a measure adaptable to the variety of different parenting programs offered through PSSF. However, the program did not identify an appropriate parenting measure or specific questions to use during FFY 2007. The program spent some time researching but could have used a more exhaustive technique to identify another measure or questions. Further research should be done to select an objective measure to assess parenting skills. With the evaluation team, the program could search the parenting literature for an appropriate tool and pilot that tool with select sites to test its overall practicality and utility.





Recommendations for FFY 2007

Based on an analysis of the data presented in this report, the following recommendations are made to help the program progress in the upcoming year.

 The program should continue to evaluate parenting assessment tools and other measures to assess how families are progressing during program participation.

The current measure of parental competence assesses how well participants feel their parenting skills improved at the end of the program. This self-report data has limitations and was collected on the program satisfaction survey, which was a convenience sample collected on participants willing to complete it. An additional repeated measure of parenting success or another intermediate concept (e.g., life stressors assessments) would validate the program's effects. Given the varying levels of program involvement across sites, the program could select measurement tools appropriate for families most involved in the program's parenting programs.

 The program should consider exploring families referred by CPS to understand why they perform better on outcome measures and work to better capture participating families' level of CPS involvement.

Since the goal of the program is to reduce child abuse and neglect, it is important for the program to give special consideration to families who have already had involvement with the CPS system. From the high-risk profile (see *Exhibit 23*), CPS-referred families appear to perform slightly better on their outcomes than other families do. Further inquiry into why this happened and what resources they utilize could help sites target their prevention efforts with this group and with participants from other referral sources. Additional efforts could also be made to refine the data collection questions related to CPS involvement.





• The program should continue to encourage sites to spend more time with families.

Program sites spent an average of 8 hours per family during last fiscal year, which is up from 6.75 hours the year prior. As evident by the increase in number of families who improved in at least one presenting issue from last year to this one, families appeared to benefit from the increased time spent with providers. The program appears to be most useful for families who spend at least nine to twelve hours receiving services. The program could continue to monitor families' success by the amount of services received. It could also encourage sites to work with families to resolve as many presenting issues as possible.





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Appendix A: Listing of Program Agencies by County and Tribal Agencies





APACHE COUNTY

See tribal provider list.

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

Contact: (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

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

Flagstaff, AZ 86001 Contact: (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

Contact: (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.

GRAHAM COUNTY

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

Contact: (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

Contact: (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 **Contact:** (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

Contact: (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 Planing, 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

Contact: (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 Skull 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 - Family Resource Center - 817 N. Country Club, Mesa, AZ 85201

Contact: 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

Contact: (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 Contact: (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 Contact: (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

Parenting Arizona. - Winslow Family Resource Center -200 W. Third Street, Winslow, AZ 86047 **Contact:** (928) 289-5491

Website: www.parentingaz.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 ad Family Counseling.

Target Population: Winslow Families.

PIMA COUNTY

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

Tucson, AZ 85716 Contact: (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

Contact: (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 Family Resource Center - 340 South Main Street, Coolidge, AZ 85228

Contact: (520) 723-4711

Website: http://coolidgeschools.org/

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. Mastick Way, Nogales, AZ 85621

Contact: (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 - Yavapai Resource Center - 753 N. Main, Cottonwood, AZ 86326 Collaboration of Parents Anonymous, Catholic Social Services and Open-Inn/Crossroads Youth Services.

Contact: (928) 639-1227 / FAX (928) 649-1541

Website: www.parentingaz.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 Contact: (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.





Tribal Providers

For FFY 2007, the PSSF program funded seven tribal sites. The sites' locations, contact information, and services provided are described below.

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

Contact: 520-568-8125

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: 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: 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: 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: 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: 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: 928-338-4164

Services Offered: Parent Aid Services, Emergency Human Services, and Supportive

Intervention/Guidance Counseling.





Appendix B: Historical Review of PSSF Long-term & Short-term Families





Number of Long-term and Short-term PSSF Families Served by Year by Site (FFY 2004-2007)

PSSF Site Long-term Short-term Long		FFY	2006	FFY2005*		FFY2004**		
		Long-term	Short-term	Long-term Short-term		Long-term Short-term		
1 - AASK	119	0	99	0	57	0	89	0
2 - Nuestra Familia	91	62	168	14	82	58	164	47
3 - CFR Phoenix	167	0	85	0	35	7	119	42
4 - CFR - Tucson	130	82	117	197	82	106	131	57
5 - CFR - So. AZ	105	577	85	565	85	480	147	230
6 - CFR - Yuma	55	0	95	7	51	1	57	18
7 – Child Crisis Center	653	0	741	0	468	0	651	0
8 - Marley House	104	509	171	796	64	1151	60	2702
9 - Mesa United Way	275	405	250	381	216	354	328	357
10 - Mt Graham Safe House	64	107	13	171	14	0	115	0
11 - Open Inn Flagstaff	281	68	286	18	273	14	259	91
12 - Open Inn Tucson	1194	470	1365	455	1329	390	933	372
13 - Parenting AZ - Yavapai. Resource Center	86	0	60	1	28	3	22	0
14 – Parenting AZ - Winslow FRC	69	374	0	389	8	294	153	218
15 - Coolidge FRC	64	175	110	74	62	58	179	212
16 - Black Family & Child Services	106	130	98	197	101	92	121	49
Total for Year	3563	2959	3743	3265	2955	3008	3528	4395
Raw TOTAL of LT & ST for Year	& ST for Year 6522		7	7008 5963		963	7923	
Average # of Families Served Monthly	N/A		N	/A 497		.97	660	
Adjusted TOTAL to a 12-month Period	sted TOTAL to a 12-month Period 6522		70	008	64	460	7:	263

^{*}FFY2005 only included data from 11/04-9/05. One month of data collection was excluded due to contract start date.

^{**}FFY2004 included data from 10/03-10/04. There was an extra month included in the data analysis due to a late contract start date for FFY2005.





The number of families served by PSSF has fluctuated over time. The comparison of year 2007 and 2006 with 2005 and 2004 is difficult because 2005 included 11 months' worth of data and 2004 included 13 months' worth of data. To correct for this, we adjusted both years to make them more closely reflect a 12-month data collection. We took the average amount of data collected for a given month within each year, then either added it to 2005 or subtracted it from 2004. By doing this adjustment, it assumes that each month is comparable and an average could substitute for its value, and it also makes the years more closely reflect a 12-month collection period. After the adjustment, the number of families served ranges from 6,460 in 2005 to 7,263 in 2004, with fluctuations during 2005 and 2006.





Appendix C: Detailed Demographic Profile of Long-term Families





Household Demographics (N=3,563)

Household Demographics N (%)		
Primary Language		
English	2,800 (79.0%)	
Spanish	329 (9.3%)	
Mixture of English/Spanish	394 (11.1%)	
Other	20 (0.6%)	
Unknown	2 (0.1%)	
Homeless at Intake		
No	3,190 (89.7%)	
Yes	277 (8.4%)	
Unknown	69 (1.9%)	
Lived in Neighborhood*		
1 year or less	1,269 (41.9%)	
More than 1 year	1,759 (58.1%)	
* 15% Missing Data		
Income Level*		
Less than \$10,000	407 (20.0%)	
\$10,000 to \$19,999	655 (31.6%)	
\$20,000 to \$29,999	320 (15.4%)	
Greater than \$30,000	690 (33.3%)	
Poverty Threshold**		
Below Poverty Threshold	1,246 (54.6%)	
Above Poverty Threshold	1,035 (45.4%)	

^{*} Approximately 40% of all long-term families did not provide income data.



^{**} Poverty threshold is defined using the 2007 U.S. Census definition (www.census.gov, 2008). The 2007 definition is the most current one available at the time of this report. Again, 40% of families did not provide income data.



Primary Caregiver Demographics (N=3,563)

Primary Caregiver Demographics	N (%)
Gender	
Female	3,097 (87.5%)
Male	441 (12.5%)
Education Level	
Not High School Graduate	804 (22.7%)
High School Graduate/GED	868 (24.5%)
Some College	701 (19.8%)
Associates Degree	167 (4.7%)
Bachelor's Degree	252 (7.1%)
Advanced Degree	115 (3.3%)
Unknown	631 (17.8%)
Marital Status	
Married	1,410 (39.8%)
Never Married	629 (17.7%)
Separated/Widowed/Divorced	863 (24.3%)
Consensual (Living Together)	232 (6.5%)
Unknown	412 (11.6%)
Ethnicity	
American Indian	200 (5.7%)
Asian/Pacific	41 (1.2%)
African American	216 (6.2%)
Hispanic	1,317 (37.8%)
White	1,504 (43.1%)
Mixed Heritage	112 (3.2%)
Unknown	96 (2.8%)
Age	
Less than 21 years old	168 (6.1%)
Between 21 and 30 years old	721 (26.2%)
Between 31 and 40 years old	1,051 (38.3%)
Greater than 41 years old	807 (29.4%)





Primary Caregiver Demographics	N (%)
# of Children PCG is responsible for	
0	95 (2.7%)
1	1,136 (32.6%)
2-4	2,009 (57.7%)
5+	243 (7.0%)
# of Children Physically Residing Outside the Home	
at Intake	3,049 (91.0%)
0	309 (9.0%)
1 or more	
6% Missing Data	
Employed at Intake	
Yes	1,868 (52.7%)
No	1,331 (37.6%)
Unknown	345 (9.7%)

Other Adults in Household Demographics (N=2,315)

Other Adults in Household Demographics	N (%)
Relationship to Primary Caregiver	
Adult Child	152 (6.6%)
Non-relative	63 (2.7%)
Parent	302 (13.0%)
Other relative	175 (7.6%)
Step parent	44 (1.9%)
Significant other	365 (15.8%)
Spouse	1,156 (49.9%)
Unknown	58 (2.5%)
Gender	
Female	527 (23.0%)
Male	1,767 (77.0%)





Ethnicity	
American Indian	105 (4.5%)
Asian Pacific	21 (0.9%)
African American	124 (5.4%)
Hispanic	879 (38.1%)
White	964 (41.8%)
Mixed Heritage	29 (1.3%)
Unknown	186 (8.1%)
Education Level	
Not High School Graduate	448 (19.6%)
High School Graduate/GED	579 (25.3%)
Some College	300 (13.1%)
Associates Degree	83 (3.6%)
Bachelor's Degree	170 (7.4%)
Advanced Degree	82 (3.6%)
Unknown	629 (27.5%)

Children Demographics (N=8,277)

Children Demographics	N (%)
Relationship to Primary Caregiver	
Biological	6,597 (85.1%)
Adoptive	252 (3.3%)
Guardianship	217 (2.8%)
Foster	182 (2.3%)
Grandchild	215 (2.8%)
Non-relative	17 (0.2%)
Other relative	75 (1.0%)
Step	136 (1.8%)
Unknown	60 (0.8%)
Gender	
Female	4,013 (48.5%)
Male	4,264 (51.5%)





Ethnicity	
American Indian	586 (7.1%)
Asian Pacific	60 (0.7%)
African American	569 (6.9%)
Hispanic	3,354 (40.6%)
White	2,832 (34.3%)
Mixed Heritage	767 (9.3%)
Unknown	100 (1.2%)
Enrolled in School	
Yes	5,059 (65.3%)
No	1,974 (25.5%)
Unknown	718 (9.3%)





Appendix D: PSSF Presenting Issues



Promoting Safe and Stable Families Presenting Issues

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

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

2. My family wants FINANCIAL ASSISTANCE for...

101	•••
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.

5. My family wants HOUSING because...

•	ev 1/19 14111119 114110 114 Collins City		
	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.

7. My family would like LEGAL ASSISTANCE in

- 4	***	
	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 et
--

10. I would like (or another adult in my home needs) to be able to cope with...

needs) to be uble 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 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...

11011111	
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 E: 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	Services provide various employment-related training
Program	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 that provide food and nutritional needs.
Services	





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	A service that provides services to locate and maintain a
Services	home.
Independent Living	A service that provides help with interpersonal and
Skills	daily living skills or counseling for independent living.
Job Development/	A service that provides assistance in obtaining
Placement	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
0.1614.1.0	the person.
Self-Help Groups	A service that provides peer intervention in a group
0 110 1	setting.
Social Development	Services that provide structure and instruction,
C 11 11 11 1	designed to promote improved social functioning.
Socialization &	A service that promotes mentally and emotionally
Recreation	healthy interaction between participants and that may
C 1 (1	be organized around leisure activities.
Supplemental	A service that provides supplemental food, clothing,
Provisions	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	A service that provides supportive intervention and/or
Intervention -	guidance.
Counseling	
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	Services that provide assistance to abused individuals or		
Service	families. Services include but are not limited to: shelter and counseling.		
Emergency Human	Services respond to crises-related situations where there is		
Services	an inability to provide for the basic needs. Services may		
	include, but are not limited to: case management, financial		
	services, and referral.		
Information &	A service that provides or arranges for assistance to		
Referral	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	Service provides intensive crisis-oriented activities to		
Preservation &	families whose children are at significant risk of out-of-		
Reunification	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	A service that provides instruction and assistance for		
Training	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		
Colf Holm Croums	person. A convice that provides near intervention in a group setting		
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		
Chaltan Carriaga	crisis situation.		
Shelter Services	Services that provide for care, refuge and protection.		





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





Appendix F: Services Received





All Program Services with Median Time Spent, FFY 2007

This i rogram ocroices with ividual time ope	,	Median Time
Service Type	Percent (# Served)	Spent (in hours)
Assessment/Evaluation	63% (2,219)	7.0
Basic Education	8% (281)	11.5
Case Management	61% (2,164)	7.0
Child care	3% (90)	99.8
Crisis Shelter Services - Domestic Violence	4% (128)	53.8
Early Intervention	20% (715)	4.0
Emergency Human Services	8% (271)	6.3
Exemplary Youth Work Program	<1% (8)	95.0
Family Planning	2% (58)	100.0
Food & Nutritional Services	6% (201)	13.0
Health Education	3% (88)	34.0
Housing Support Services	4% (130)	11.1
Independent Living Skills	2% (76)	19.8
Information & Referral	48% (1704)	5.0
Intensive Family Preservation &	1% (43)	35.5
Reunification		
Job Development/Placement	4% (150)	13.8
Job Training	<1% (24)	26.0
Mentoring	5% (176)	14.9
Nursing	<1% (3)	26.0
Nutrition Education	2% (80)	41.4
Parent Aide Training	6% (198)	17.3
Parent Skills Training	26% (938)	10.5
Respite Care	12% (413)	25.0
Self-Help Groups	4% (141)	15.0
Shelter Services	6% (218)	326.5
Social Development	3% (94)	22.5
Socialization & Recreation	8% (266)	12.0
Supplemental Provisions	5% (190)	14.0
Supportive Intervention – Counseling	27% (976)	12.0
Transportation	4% (158)	53.9

LeCroy & Milligan Associates, Inc. _

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Appendix G: Select Success Stories from PSSF Participants





Select Participant Success Stories from FY 2007

Story 1: After delivering a premature baby boy with a congenital heart defect, one new mother was overwhelmed by her situation. With a history of depression and suicide attempts, the mother was referred to a Promoting Safe and Stable Families site for additional support. The program's Family Support Specialist helped the mother open up and deal with her many challenges of getting steady employment, attending school, and receiving help for her mental illness. Through the support provided through PSSF, the family became more self-reliant and now lives in their own home.

Story 2: One mother and her two preteen sons were living in transitional housing provided by a domestic violence shelter when they found one PSSF site. The family came to the program in need of financial stability, medical care, and food. Despite her husband's threats to report the family to immigration services, the mother sought PSSF services. With her caseworker's help and encouragement, the family began getting child support checks and became more self-sufficient through participating in the program.

Story 3: A single mother of two young boys came to the program in need of counseling services. By receiving PSSF services, the woman became a more empowered parent and a better advocate for her children. This advocacy led to identifying one son's speech delay, addressing the other son's developmental needs by finding a more suitable school, and having the mother go back to college.

Story 4: A mother enrolled in PSSF parenting classes was able to regain custody of her son, who had been in CPS custody for a year. Her son stopped bedwetting, improved his grades in school, and demonstrated better self-esteem. The mother was so grateful to the program that she wrote a letter to explain her progress and gratitude.





Story 5: PSSF helped a mother who was being abused by her boyfriend. The program helped the mother get court-imposed protection for her and her child. The mother completed her GED and worked full-time to support her family.

Story 6: "Not only did the [PSSF] program help me but it helped my whole family," said one mother who received program services. Follow up with this mother revealed that her daughter behaved much better after the family attended the program's parenting classes. The mother reflected that she felt "much more relaxed and capable of reaching the overall change we have been working towards" as a result of being in the program.





Appendix H: Map of CPS-referred Families





