



**ARIZONA DEPARTMENT OF CHILD SAFETY**  
**Enhanced Availability of Substance Abuse Treatment Services for Families**  
**Involved with the Department of Child Safety**  
**Report to the Arizona Substance Abuse Partnership**  
**June 2017**

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This report has been prepared pursuant to Executive Order 2008-01: Enhanced Availability of Substance Abuse Treatment Services for Families Involved with Child Protective Services, which requires all Executive Branch agencies that administer substance abuse treatment and prevention services to submit a written report by June 30<sup>th</sup> of each year, to the Arizona Substance Abuse Partnership (ASAP). The Department of Child Safety (DCS) administers the Arizona Families F.I.R.S.T. (Families in Recovery Succeeding Together) program, also known as AFF. As required by Executive Order 2008-01, this report describes the actions taken to give priority to families referred to CPS (now DCS), and to maximize federal funds to the greatest extent possible before expending state funding. In addition, this report provides a description of available services, data on the number of individuals served, and permanency outcome data.

**Program Eligibility and Services**

The Department of Child Safety administers AFF in collaboration with the Arizona Health Care Cost Containment System (AHCCCS)/Division of Behavioral Health Services (DBHS) and the program's service providing agencies. The program provides family-centered substance abuse and recovery support services to parents who have come to the attention of the child welfare system via a child abuse and neglect report and whose substance abuse is a barrier to maintaining or reunifying children in the family's home. These same services are available to clients of the Department of Economic Security's Jobs program whose substance abuse is a significant barrier to obtaining or maintaining employment. While the program also serves individuals involved in the Jobs program, AFF gives priority to families involved in DCS. During SFY 2016, there were 99.9% referred by DCS while 0.1% referred by the Jobs program.

A comprehensive array of services is available through three contracted AFF providers who serve five regions throughout the state. The AFF providers, in coordination with the statewide Regional Behavioral Health Authorities (RBHA), serve AFF clients who are Title XIX eligible. Services include intensive outpatient treatment, group therapy, family therapy, individual therapy, drug screening, support services (such as transportation and child care) when needed to promote

recovery, and inpatient treatment when determined to be the least restrictive form of treatment necessary for the client's recovery.

### **Funding Sources**

Services provided to AFF clients were funded jointly by DCS and AHCCCS/DBHS. In SFY 2016, DCS funding for AFF was \$9.4 million while AHCCCS/DBHS federal funds served clients who were title XIX and XXI. DCS and AHCCCS/DBHA funding provided AFF the ability to administer a full array of services across the state and has not, to date, had a waiting list for referring to the AFF program. At the time of the initial assessment, 37.9% of services were funded by DCS, 57.4% were funded by DBHS, and 4.7% were paid through private insurance, tribal funds, or Medicare. At the time of closure for referrals closed in SFY 2016, 55.2% of services were funded through DCS, 42.2% were funded through DBHS, and the remainder were funded through private insurance, tribal funds, or Medicare. The most common funding source for services switched from DBHS at the time of the initial assessment to DCS at the time of service closure. AFF providers report the reasons include situations where clients' AHCCCS enrollment lapsed, clients were in recovery maintenance which DBHS does not fund, or clients were no longer eligible because they obtained employment.

### **Total Individuals Served**

Data from the most recent program evaluation indicates that 9,611 individuals were referred for substance abuse screenings or assessments in SFY 2016, and an estimated 7,474 clients received treatment and supportive services. The number of referrals to the AFF program in SFY 2016 was 9,611 and represented a 12.2% increase over SFY2015. For new referrals to AFF, 96% received some form of outreach and 95% received outreach within one day or less.

Services that fall outside substance abuse treatment include service coordination, and auxiliary and concrete supportive services. This includes but is not limited to parenting skills, job readiness and employment, mental health services, medical services, domestic violence education, crisis intervention, and basic life needs. Those who received substance abuse treatment also received a total of 117,460 services (nearly 16 services per client). Parenting skills and mental health services account for more than 65% of the services received by AFF clients.

During SFY 2016, 18.8% of individuals successfully completed treatment, 50.9% are still in treatment, and 30.3% unsuccessfully closed out of the program. Additionally, the percentage of referrals where the client reported they were "Employed Full-Time" increased from 17.5% at intake to 19.8% at closure. As such, these results provide evidence of the effectiveness of the AFF program in meeting the legislative goal of increasing the availability, timeliness, and accessibility of substance abuse treatment.

### **Permanency Outcomes**

Among the referrals closed during SFY 2016, approximately 90% had one or more allegations of child maltreatment at the time of their referral to the AFF program. Of these referrals, 61.2% had at least one substantiated allegation at the time of the referral, and an additional 17.9% had at least one unsubstantiated allegation at the time of referral. At the conclusion of SFY 2016, 65% had no new reports to DCS after being referred to AFF, approximately 20% had an

unsubstantiated maltreatment allegation after being referred to the program, and 12% had another substantiated finding after referral to the AFF program.

Data related to permanency for children indicates more than 50% of the children associated with a closed AFF referral during SFY 2016, had achieved permanency. Of the children who had achieved permanency, 47.9% were reunified with their family, and 42.8% were adopted.

These findings provide promising evidence of the effectiveness of services through AFF. Referral to the AFF program appears to support the legislative goal of improving child safety.