

# **REPORT TO CONGRESS ON COORDINATION EFFORTS RELATED TO CHILD ABUSE AND NEGLECT**

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ADMINISTRATION FOR  
**CHILDREN & FAMILIES**

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# **REPORT TO CONGRESS ON COORDINATION EFFORTS RELATED TO CHILD ABUSE AND NEGLECT**

## **EXECUTIVE SUMMARY**

The Child Abuse Prevention and Treatment Act of 2010 (Pub. L. 111-320), as amended requires the Secretary of the Department of Health and Human Services (HHS) to submit to Congress a report on efforts to coordinate the objectives and activities of agencies and organizations which are responsible for programs related to child abuse and neglect. The Children's Bureau (CB), in the Administration on Children, Youth and Families (ACYF), in the Administration for Children and Families (ACF) carries out the mandates of this law. CB is consistently engaged in significant efforts to meet its coordination responsibility and develops meaningful relationships to advance the work. Through collaboration with federal, state, and local agencies, as well as a broad network of partners that includes non-federal organizations and groups, CB manages efforts to broadly share and disseminate information, promote awareness, and create, foster, and implement opportunities for coordinated efforts to address child abuse and neglect. Addressing the complex issues of child maltreatment cuts across many disciplines and therefore collaborative efforts are essential to preventing child maltreatment, promoting well-being, and improving the lives of children and families.

The following report provides an overview and brief highlights of key areas of coordination, and major activities and accomplishments undertaken by CB since the last Report to Congress on Coordination which covered the period from October 2012 to September 2013, and was submitted on January 31, 2014. This report highlights the period covering October 2013 to September 2015.

Below are highlights from the current report. More detailed information is available within the report.

## **FEDERAL INTERAGENCY INITIATIVES**

### **FEDERAL INTERAGENCY WORK GROUP ON CHILD ABUSE AND NEGLECT (FEDIAWG)**

In 1988, with the passage of the amendments to Child Abuse Prevention and Treatment Act (CAPTA), the Federal Inter-Agency Task Force on Child Abuse and Neglect was created. This Task Force consisted of approximately 30 member agencies and was drawn from the eight Cabinet Departments and the Office of Personnel Management. As required by statute, the Director of the National Center on Child Abuse and Neglect (NCCAN) chaired this Task Force.

The passage of the CAPTA Amendments of 1996 eliminated the requirement for a Task Force on Child Abuse and Neglect. However, the existing members of the Task Force agreed that it remained important to maintain the connections created by the Task Force and continue their

work and coordination efforts. Based upon this decision, the name was changed to the Federal Interagency Work Group on Child Abuse and Neglect (FEDIAWG). FEDIAWG consists of representatives from over 40 federal agencies, and members meet in-person on a quarterly basis each fiscal year. FEDIAWG subcommittees include: the Research and Data Subcommittee, the Family Violence and Child Welfare Subcommittee, and the Tribal Child Welfare Subcommittee.

## INTERAGENCY AGREEMENTS

Through interagency agreements (IAA), funds contributed by both CB and identified partner agency or agencies are combined to support research, technical assistance, and coordination on effective prevention and intervention practices. The goal of these IAAs is to improve the health, safety, and well-being of children and their families and better understand the complex issue of child maltreatment.

Below is an example of a current IAA between ACYF/CB and the Substance Abuse and Mental Health Services Administration. Additional information is found within the report.

- **SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION (SAMHSA):** ACYF/CB currently provides approximately \$2 million to the Center for Substance Abuse Treatment (CSAT) at SAMHSA to support the implementation of a wide range of collaborative activities as outlined in the 1999 Report to Congress' recommendations, including the funding of the National Center on Substance Abuse and Child Welfare (NCSACW). The NCSACW is involved in targeted work to:
  - Support clusters of federal grants including the all three cohorts of ACYF's Regional Partnership Grants (RPGs) housed at CB and the Family Treatment Drug Court grants housed at SAMHSA/CSAT.
  - Support for In-Depth Technical Assistance (IDTA), including the Substance-Exposed Infants IDTA launched in 2014. This TA program helps states and tribes develop policies and practices to improve the safety, health, permanency and well-being of substance exposed infants and the recovery of pregnant and parenting women, with a special focus on opioid dependent pregnant women and their infants.
  - NCSACW disseminates thousands of informational materials every year, including reports, guidance documents, presentations from conferences and webinars, research articles, toolkits, and grantee site-specific tools. NCSACW hosts on-line tutorials and assists professionals throughout the nation to improve cross-system collaboration and be better prepared to meet child welfare mandates for timely child permanency decisions.

## INTERAGENCY COLLABORATIONS AND INITIATIVES

- **EARLY CHILDHOOD FEDERAL PARTNERS WORKGROUP:** The Early Childhood Federal Partners Workgroup was started in the early 2000s and initially comprised of the Maternal and Child Health Bureau (MCHB), Office of Head Start (OHS), and Office of Child Care (OCC). The CB Office on Child Abuse and Neglect (OCAN) joined the group in 2007 and there are now more than 30 representatives from more than a dozen offices within HHS, the Department of Education, the Department of Defense, and the Department of Justice.
- **U.S. INTERAGENCY COUNCIL ON HOMELESSNESS AND THE WORK GROUP ON ENDING FAMILY HOMELESSNESS:** The Interagency Council on the Homeless was authorized by Title II of the Stewart B. McKinney Homeless Assistance Act (Pub. L. 100-77) enacted on July 22, 1987. In 2002, Council members voted to approve changing the name of the agency to the United States Interagency Council on Homelessness (USICH). This change was enacted into law in 2004. The Council is represented by 19 Departments and agencies, including HHS. ACYF/CB staff currently participates in USICH's interagency working group to end family homelessness, including routinely attending workgroup meetings.
- **OFFICE OF PLANNING, RESEARCH AND EVALUATION (OPRE), ACF:** For many years, OPRE has had a long-standing collaboration with CB/OCAN to provide support, consultation, and management of several large scale research and evaluation projects funded by CB/OCAN and support on other projects of mutual interest. An example of this collaborative effort on large scale research projects is:
  - *Design Options for Understanding the Incidence of Child Abuse and Neglect and Related Risk:* On September 30, 2015, OPRE and CB awarded this contract to Mathematica Policy Research for an 18-month project period. The purpose of this contract is to support OPRE and CB in developing design options for one or more future studies that would leverage existing administrative data, innovative methods, and advanced statistical techniques to obtain accurate and ongoing surveillance on both the incidence of child abuse and neglect and types of related risk.

## MAJOR MEETINGS

- **19th NATIONAL CONFERENCE ON CHILD ABUSE AND NEGLECT:** Beginning in 1976, there has been a national conference every two to three years, designed to serve as the field's leading training and technical assistance event. The conference creates a unique collaborative opportunity for policy makers, practitioners,

advocates, researchers, and academics from a variety of disciplines to convene and learn more about the state-of-the-art in research, policy, and practice regarding child maltreatment. The 19th National Conference on Child Abuse and Neglect, “Making Meaningful Connections,” occurred from April 30 to May 2, 2014, in New Orleans, LA. The conference was held in conjunction with the 40<sup>th</sup> anniversary of CAPTA.

- **NATIONAL CONVENING ON TRAFFICKING AND CHILD WELFARE:** On June 10 and 11, 2015, over 300 attendees, representing all 50 states, Puerto Rico, and the District of Columbia, gathered in Washington, D.C. to discuss effective strategies for preventing and addressing sex trafficking of children and youth. Co-sponsored by the White House and CB, the *National Convening on Trafficking and Child Welfare* brought together representatives from child welfare agencies, courts, and law enforcement, to promote collaborative solutions to this issue of growing national concern. Specifically, the convening promoted coordinated implementation of the anti-trafficking provisions of the Preventing Sex Trafficking and Strengthening Families Act of 2014 (Pub. L. 113-183) and assisted states in determining strategies for preventing and responding to trafficking, particularly among vulnerable children and youth in the child welfare system.

## REPORTS AND PUBLICATIONS

- **PREVENTION COMMUNITY RESOURCE GUIDE:** A community resource guide has been published annually since 2003 in conjunction with National Child Abuse Prevention Month (April). The resource guide is developed in partnership with the National Child Abuse Prevention Partners and coordinated by CB/OCAN. *Making Meaningful Connections: 2015 Prevention Resource Guide*, was released in the spring of 2015, and focuses on national organizations, federal prevention partners and parents coming together to develop a shared vision, engage in shared action, and strengthen networks and partnerships committed to prevention child abuse and neglect. Of particular note are updates to Chapter Three, “Using Protective Factors as a Framework for Your Community Partnership.” This section continues to provide information on how to successfully work with community partners, including four new partners—law enforcement, substance abuse treatment agencies, mental health professionals, and domestic violence advocates.
- **CHILD WELFARE EVALUATION VIRTUAL SUMMIT SERIES:** The Virtual Summit Series is a group of 17 videos that combine illustration, animation, motion graphics, and content from national experts. CB, along with federal partners and guest authors, worked in collaboration to design and produce the videos as a means to share ideas and engage the audience. The videos engage the audience on the subjects of building and disseminating evidence on effective child welfare services, programs, and

policies; strengthening evaluation practice in child welfare; and promoting the use of findings for sound decision-making in child welfare programs and systems. Each video explores a particular evaluation-related topic, and many propose solutions to common evaluation problems in the field of child welfare research and evaluation. Many of the videos direct viewers to additional tools and resources.

### STATE-LEVEL ACTIVITIES

- **CAPTA FORMULA GRANT PROGRAMS TO STATES:** Detailed information about the following programs is found within the report.
  - Children’s Justice Act (CJA) Grant Program
  - Community-Based Child Abuse Prevention (CBCAP) Grant Program
- **CAPTA DISCRETIONARY GRANT INITIATIVES TO STATES AND LOCAL COMMUNITIES:** The concepts and themes of collaboration and interagency coordination efforts are strongly integrated in our discretionary grant initiatives with states and local communities, via program instructions, funding announcements, and technical assistance.

Below are several examples of current and past discretionary grant initiatives ACYF/CB has supported. Detailed information is found within the report.

- Grants to Address Trafficking within the Child Welfare Population
- Partnerships to Demonstrate the Effectiveness of Supportive Housing for Families in the Child Welfare System
- Child Welfare – Early Education Partnerships to Expand Protective Factors for Children with Child Welfare Involvement (ECCW)
- Child Welfare – Education System Collaborations to Increase Education Stability
- Targeted Grants to Improve the Well-Being of, and to Improve the Permanency Outcomes for, Children Affected by Parental/Caretaker Methamphetamine or Other Substance Abuse (Regional Partnership Grants) (RPG).

### CONCLUSION

Meaningful collaboration and coordination, whether it is at the federal, state, or local level, is essential to understanding the multifaceted issues of child maltreatment, developing effective prevention and treatment strategies, and working to improve the outcomes and well-being of children and families. Such coordination efforts are inherent in the work of CB/OCAN, both in direct collaboration with federal partners and the philosophical approach that underpins our discretionary and formula based grants to encourage robust and meaningful partnerships. CB is diligent in efforts to reach out to federal partners and remains dedicated and committed to further

collaborative efforts to bring multiple agencies together to support shared action to prevent child maltreatment and to promote well-being for children and families.

CB will continue to build inclusive collaborations with existing and new partners to: support coordinated research, training, technical assistance, and service delivery; continue to develop opportunities for shared learning, knowledge development, and dissemination at the federal level; and encourage such efforts at the state and local level among grantees and community service providers. It is through coordinated interagency efforts to develop meaningful connections across HHS, throughout the federal government and beyond, that we can best work to prevent child maltreatment and promote the well-being of children and families.

## **REPORT TO CONGRESS ON COORDINATION EFFORTS RELATED TO CHILD ABUSE AND NEGLECT**

The Child Abuse Prevention and Treatment Act of 2010 (Pub. L. 111-320, as amended) requires the Secretary of the Department of Health and Human Services (HHS) to submit to Congress a report on efforts to coordinate the objectives and activities of agencies and organizations which are responsible for programs related to child abuse and neglect. The Children's Bureau (CB), in the Administration on Children, Youth and Families (ACYF), in the Administration for Children and Families (ACF) carries out the mandates of this law. CB is consistently engaged in significant efforts to meet its coordination responsibility and develops meaningful relationships to advance the work in the fields related to child maltreatment. Through collaboration with federal, state, and local agencies, as well as a broad network of partners that includes non-federal organizations and groups, CB has managed efforts to broadly share and disseminate information, promote awareness, and create, foster and implement opportunities for coordinated efforts to address child abuse and neglect. Addressing the complex issues of child maltreatment cuts across many disciplines and therefore collaborative efforts are essential to preventing child maltreatment, promoting well-being, and improving the lives of children and families.

The following report provides an overview and brief highlights of key areas of coordination, major activities, and accomplishments undertaken by CB since the last Report to Congress on Coordination on Efforts Related to Child Abuse and Neglect, covering the period from October 2012 to September 2013, was submitted on January 31, 2014. This report highlights the period covering October 2013 to September 2015.

### **HISTORY OF REPORT TO CONGRESS ON COORDINATION EFFORTS AND OVERVIEW OF CURRENT AND PAST ACTIVITIES**

As required in the 2010 reauthorization of Child Abuse Prevention and Treatment Act (CAPTA) (P.L. 111-320, as amended), the Secretary of HHS has previously submitted to Congress several reports on the efforts to coordinate the objectives and activities of agencies responsible for programs related to child abuse and neglect. CB's Office on Child Abuse and Neglect (OCAN) carries out the mandates of this law. This report provides a description of key efforts of the coordination of programs and activities related to child abuse and neglect. The last report was submitted on January 31, 2014, and covered the period from October 2012 to September 2013. The following report highlights major activities and accomplishments OCAN has undertaken during the period covering October 2013 to September 2015.

## **FEDERAL INTERAGENCY INITIATIVES**

### **FEDERAL INTERAGENCY WORK GROUP ON CHILD ABUSE AND NEGLECT (FEDIAWG)**

In 1988, with the passage of the amendments to CAPTA, the Federal Inter-Agency Task Force on Child Abuse and Neglect was created. This Task Force consisted of approximately 30 member agencies and was drawn from the eight Cabinet Departments and the Office of Personnel Management. As required by statute, the Director of the National Center on Child Abuse and Neglect (NCCAN) chaired this Task Force.

The passage of the CAPTA Amendments of 1996 eliminated the requirement for a Task Force on Child Abuse and Neglect. However, the existing members of the Task Force agreed that it remained important to maintain the connections created by the Task Force and continue their work and coordination efforts. Based upon this decision, the name was changed to the Federal Interagency Work Group on Child Abuse and Neglect (FEDIAWG) and the words “Task Force” were eliminated because of their meaning and requirements under federal law.

Today, FEDIAWG consists of representatives from over 40 federal agencies. Many of these agencies and bureaus are from within the Department of Health and Human Services (HHS), including: the Office of Head Start (OHS), Office of Child Care (OCC), Office of Refugee Resettlement, Family and Youth Services Bureau (FYSB), the Office of Planning, Research and Evaluation (OPRE) at ACF, the Substance Abuse and Mental Health Services Administration (SAMHSA), the Health Resources and Services Administration (HRSA), the Centers for Disease Control and Prevention (CDC), the National Institutes of Health (NIH), and the Office of the Assistant Secretary for Planning and Evaluation (ASPE) at HHS. FEDIAWG also includes members from other agencies across various Departments in the federal government such as the Family Advocacy Program of the Department of Defense, the Office of Special Education Programs at the Department of Education, the Office of Victims of Crime, the Office of Juvenile Justice and Delinquency Prevention and the National Institute of Justice of the Department of Justice, the Bureau of Indian Affairs of the Department of the Interior, and the National Institute of Food and Agriculture and the Cooperative State Research, Education and Extension Services of the Department of Agriculture. Members of FEDIAWG meet in-person on a quarterly basis each fiscal year.

The primary goals of FEDIAWG are:

- To provide a forum through which staff from relevant federal agencies can communicate and exchange ideas concerning child maltreatment related programs and activities.
- To collect information about federal child maltreatment activities.

- To provide a basis for collective action through which funding and resources can be maximized.

To further the achievement of these goals additional subcommittees have also been created to address specific areas, partnerships, or targeted goals that have been identified by members of the larger workgroup or the workgroup as a whole. Below is a list of the various FEDIAWG subcommittees that have been convened over the last several years, their goals, and recent collaborative efforts.

- **Research and Data Subcommittee:** The Research and Data Subcommittee is a newly formed subcommittee that is a reformed version of the former Research Subcommittee that shared its efforts with NIH's Child Abuse and Neglect Working Group (CANWG). The vision of this subcommittee is to use research/data collaboratively to inform agency, program, and policy decisions where and when possible. As an initial part of this work, the coordinator and contract support for FEDIAWG will be conducting an environmental scan of the research and existing data resources in child maltreatment prevention and treatment and related fields. Additionally the subcommittee is interested in exploring and addressing barriers in data sharing across systems and agencies.
- **Family Violence and Child Welfare Subcommittee:** Established in 2008, this subcommittee was created in response to an identified need that emerged in FEDIAWG discussions to focus attention on the cross section of family violence and child maltreatment. The subcommittee focuses on all families in which children are exposed to domestic violence. The subcommittee members also discuss related issues such as children's exposure to violence in other settings, including community violence. Members meet quarterly, and initial efforts have focused on: information sharing across the federal landscape on current initiatives; seeking opportunities for federal collaboration; and identifying ways to encourage further collaboration at the local level.
- **Tribal Child Welfare Subcommittee:** In recognition of the increased efforts and level of work that FEDIAWG members are currently engaged in within Indian Country and tribal populations living in other areas, members have recently discussed the creation of a new subcommittee focused exclusively on this work. There was great interest among FEDIAWG members, and efforts are underway to set regular meetings and establish goals. This subcommittee is seen as an important opportunity to better coordinate the initiatives of multiple federal agencies engaged with tribal communities, broadly share information about ongoing work, including the dissemination of research findings and lessons learned, and further explore opportunities for future efforts.

As described above, FEDIAWG is a key forum for its members to share key information and exchange ideas that help move the field forward and develop additional knowledge. The list

below represents key presentations held at FEDIAWG meetings in the two years since the last report to Congress was last submitted:

- **Stop, Look, Listen: Separating Fact from Fiction in Cases of Child Abuse: An Interactive Tool for Primary Care Clinicians: Presentation and Discussion:** Lucy Bruell (NICHD grantee)
- **Through Our Eyes: Children, Violence, and Trauma Children Exposed to Violence Public Awareness Campaign – Updated Video Preview: Presentation and Discussion:** Bethany Case, Keely McCarthy and Debra Whitcomb, Office for Victims of Crime, DOJ
- **Supporting Evidence Based Home Visiting Programs to Prevent Child Maltreatment, Cross Site Evaluation Report: Presentation and Discussion:** Melissa Brodowski, OCAN
- **Essentials for Parenting Toddlers and Preschoolers: Presentation and Discussion:** Beverly L. Fortson, Behavioral Scientist, Division of Violence Prevention, CDC
- **Commission to Eliminate Child Abuse and Neglect Fatalities: Presentation and Discussion:** Patricia Brincefield, Communications Director, Liz Oppenheim, Chief of Staff

Additionally, in February 2015, FEDIAWG held a full-day strategic planning session, assisted by an outside facilitator to identify key areas ready and suitable for shared work to achieve the goals of the workgroup. The workgroup recommitted to organizing interagency partners to achieve strategic goals toward strengthening families and preventing and treating child abuse and neglect.

## INTERAGENCY AGREEMENTS

Through interagency agreements (IAA), funds contributed by both CB and identified partner agency or agencies are combined to support research, technical assistance, and coordination on effective prevention and intervention practices. The goal of these IAAs is to improve the health, safety, and well-being of children and their families and better understand the complex issue of child maltreatment.

ACYF/CB has held current and past IAAs with the following agencies:

- **CENTERS FOR DISEASE CONTROL AND PREVENTION**

CB has entered into an IAA with the Division of Violence Prevention at the CDC, for the purpose of integrating the Adverse Childhood Experiences (ACE) study into the work of the Division. The primary goals of this work are: (1) extending the collection and

analysis of prospective data from the original ACE study with Kaiser; (2) supporting the analysis of ACE modules to the Behavioral Risk Factor Surveillance System (BRFSS) that were administered by various states (N=16) in 2008, 2009, and 2010; (3) creating a forum for collaboration between the two agencies to utilize the ACE study to inform prevention of child abuse and neglect efforts and to support and inform other CB and ACYF activities; (4) developing translational materials that will allow practitioners in the field to make greater use of the findings from the ACE study; and, (5) exploring the options for making ACE study data more broadly accessible, especially for child maltreatment researchers. CB is committed to supporting this IAA for five years, subject to funding availability. Support for this effort began in fiscal year (FY) 2012. Additional funding to support this IAA was not requested in FY 2015, but it is anticipated that the IAA will be renewed in FY 2016 and FY 2017 with additional fiscal support.

- **OFFICE OF THE ASSISTANT SECRETARY FOR PLANNING AND EVALUATION (ASPE)**

CB entered into an IAA with ASPE for the purposes of developing human trafficking screening tools and protocols to be used in child welfare and runaway and homeless youth (RHY) settings. Improved screening for cases of human trafficking among this population will help service providers better target and deliver services to those who need them most. ASPE has contracted with the Urban Institute to work in collaboration with expert advisors from the field to identify effective preexisting human trafficking screening protocols and develop a modified tool that is currently being pilot-tested through interviews with RHY and youth in the child welfare system. It is anticipated that the tool will be tested with 600 child welfare-involved and runaway and homeless youth, between the ages of 12 and 24, located in three unique geographic areas. Three-quarters of the screening tools will be self-administered by the youth and one-quarter will be practitioner-administered. The pilot testing process will enable the Urban Institute to test the screening tool's feasibility, reliability, and validity in a variety of child welfare and RHY settings. It is anticipated the work will be completed in the spring of 2016.

The IAA was for a total of \$171,000 during FY 2014 and FY 2015.

- **SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION (SAMHSA)**

The collaboration between CB/OCAN and SAMHSA began in 1999, when the two entities worked together in response to the Adoption and Safe Families Act legislation and developed the mandated report to Congress that resulted in *Blending Perspectives and Building Common Ground: A Report to Congress on Substance Abuse and Child Protection*. The report demonstrated a renewed emphasis on achieving permanency for

children in the child welfare system and finding effective ways to address concurrent substance abuse and child maltreatment problems in families. Since FY 2000, CB/OCAN has partnered with SAMHSA through an IAA to provide funding to support these efforts and improve collaboration across systems. Over the years of this collaboration, the various IAAs have ranged from \$450,000 in the past, to the current funding levels of approximately \$2.5 million. The early goals of the IAA included supporting regional meetings to discuss the implications of the Report to Congress; and since 2000 supporting the creation and development of the National Center on Substance Abuse and Child Welfare (NCSACW).

CB currently provides \$2.5 million to the Center for Substance Abuse Treatment (CSAT) at SAMHSA to support the implementation of a wide range of collaborative activities as outlined in the 1999 Report to Congress' recommendations. Specifically, these funds are targeted to sustain efforts in the cross-section of child maltreatment and substance abuse.

Such targeted efforts include:

- Continued operation of the NCSACW. The NCSACW employs a range of strategies to disseminate information and deliver technical assistance to support improved collaboration amongst child and family serving agencies.
- Support by the NCSACW for several clusters of federal grants. These grants include all three cohorts of the CB funded the Regional Partnership Grants (RPGs) and Family Treatment Drug Court grants housed at SAMHSA/CSAT. The NCSACW work with the grantees includes a program management liaison assigned to each grantee.
- Support by the NCSACW for In-Depth Technical Assistance (IDTA). This TA program selects sites through an application process that requires applicants to demonstrate that the relevant agencies and courts are committed to improving their policies and practices with regard to families involved in the child welfare system who are also affected by substance use disorders. In 2014, the Substance-Exposed Infants IDTA was launched to provide training and technical assistance to improve the safety, health, permanency, and well-being of substance exposed infants; and the recovery of pregnant and parenting women, and their families.
- Support to ongoing TA projects in response to demonstrated needs in the field. Examples of the work of the NCSACW in this area include: TA on topics including medication assisted treatment and Neonatal Abstinence Syndrome; the Trauma Walkthrough Project, focused on making systems

more trauma informed; and a partnership with the Child Welfare League of America to develop a special 2-volume journal issue focused on substance use.

- Support by the NCSACW for CB's responsibilities to the Administration's Synthetic Drug Control Strategy (particularly related to training and technical assistance) regarding Drug Endangered Children programs.

During the many years of this collaboration, the funds contributed under the IAA have allowed for advancements in the field including research and technical assistance supports for practitioners working at the intersection of substance abuse and child maltreatment. Many of the training and technical resources that have been created continue to be updated and made available online, including:

- The website for the NCSACW continues to be an essential tool to child welfare professionals and their collaborators. For example, the ten most popular NCSACW resources were collectively downloaded from their website over 37,000 times from March 2015 through June 2015. These resources include: Physical and Psychological Effects of Substance Use and Drug Testing in Child Welfare: Practice and Policy Considerations.
- Federal and state policy tools including sample interagency agreements and Memoranda of Understanding, shared principle statements, and executive orders.
- Substance abuse/child welfare training curricula including a resource guide and toolkit, as well as free and self-directed online trainings for child welfare, substance abuse treatment, and court professionals. Earlier this year, the NCSACW released an enhanced and updated online tutorial focused on essential information for child welfare professionals including: knowledge of substance use disorders and their impact on the family, and how cross-system collaboration with substance abuse treatment and court professionals can improve the outcomes for these families. To further support the above-mentioned professionals in completing their professional training requirements, free continued education credits are available upon completion of these trainings.

To view these resources and others developed by the NCSACW, please visit their website at: <http://www.ncsacw.samhsa.gov/default.aspx>.

- The NCSACW plans to release a new publication this year entitled "A Collaborative Approach to the Treatment of Pregnant Women with Opioid Use

Disorders: Practice and Policy Considerations for Child Welfare, Collaborating Medical, and Service Providers,” to respond to the growing concern of opioid use during pregnancy and resultant neonatal abstinence syndrome. The NCSACW also has extensive resources on its website devoted to this concern.

## **INTERAGENCY COLLABORATIONS AND INITIATIVES**

### **ACF EARLY CHILDHOOD/CHILD WELFARE FEDERAL PARTNERSHIP**

The Early Childhood/Child Welfare partnership is a workgroup comprised of multiple federal offices and agencies within ACF that have come together to enhance collaboration between child welfare and early childhood agencies at the federal level. This partnership meets bi-monthly to exchange information, share resources, and work toward a common vision of increased collaboration among child welfare and early childhood systems. The overall goal of this partnership is to support and amplify positive outcomes for children from prenatal to eight years of age and their families.

The partnership was formally brought together in 2009, after results were published on the 2002 Early Head Start–Child Welfare Services Initiative grant program. The Office of Head Start (OHS) and OCAN wanted to ensure that lessons from the initiative were not lost. Members of this collaborative now include the following ACF offices: CB [OCAN, Child and Family Service Review Team (CFSR) and the Division on Child Welfare Capacity Building], OCC, OHS, OPRE, Office of the Commissioner of ACYF, and the Office of Early Childhood Development (ECD).

The partnership is currently re-examining key strategic priorities including how to operationalize the lessons learned from the CB funded Early Childhood-Child Welfare (ECCW) discretionary grant program that has recently ended.

### **EARLY CHILDHOOD FEDERAL PARTNERS WORKGROUP**

The Early Childhood Federal Partners Systems Workgroup was started in the early 2000s and initially comprised of the HRSA Maternal and Child Health Bureau (MCHB), OHS, and OCC. OCAN joined the group in 2007 and there are now more than 30 representatives from more than a dozen offices within HHS, the Department of Education, the Department of Defense, and the Department of Justice. Active members include ACF (CB, OHS, and OCC), HRSA/MCHB, SAMHSA, CDC, and the Office of Special Education Programs (OSEP) at the Department of Education. OCAN has played a major leadership role, in partnership with a few key agencies, to sustain this forum for collaboration across federal

agencies. The workgroup has two main purposes. The first is to foster cross-agency early childhood service systems integration in support of bridging the service and systems gaps created by multiple, unconnected funding streams. The second purpose is to support states and communities in their efforts to build early childhood service systems that address the critical components of access to comprehensive health services and medical homes; mental health and social-emotional development of young children; and early care and education, parenting education, and family support. The workgroup continues to meet bi-monthly by conference call to share information about early childhood initiatives with colleagues. The Workgroup is currently coordinated by ECD.

### **OFFICE OF NATIONAL DRUG CONTROL POLICY AND THE FEDERAL INTERAGENCY TASK FORCE ON DRUG ENDANGERED CHILDREN (DEC)**

In 2010, the Department of Justice established the Federal Interagency Task Force on Drug Endangered Children (DEC). This Task Force was established in response to the Administration's 2010 National Drug Control Strategy and is chaired by the Deputy Attorney General. The DEC Task Force is committed to identifying ways to better serve and protect drug endangered children by building partnerships on the federal, state, tribal, and local levels. The Office of National Drug Control Policy and the Departments of Health and Human Services, Education, Homeland Security, Transportation, and Interior are active participants. OCAN staff participated in the inaugural meeting of the Task Force and contributed to the development of the group's strategy statement. CB staff members remain active participants of the Task Force and its efforts through our collaboration with SAMSHA and the NCSACW.

### **U.S. INTERAGENCY COUNCIL ON HOMELESSNESS AND THE WORK GROUP ON ENDING FAMILY HOMELESSNESS**

The Interagency Council on the Homeless was authorized by Title II of the Stewart B. McKinney Homeless Assistance Act, enacted on July 22, 1987. In 2002, Council members voted to approve changing the name of the agency to the United States Interagency Council on Homelessness (USICH). This change was enacted into law in 2004. The Council is represented by 19 Departments and agencies, including HHS. CB staff currently participate in USICH's interagency working group to end family homelessness and routinely attend workgroup meetings.

The shared vision and goals of this workgroup include:

- Ensure that no family is living unsheltered;
- Shorten episodes of family homelessness by providing resources that enable families to safely reenter permanent housing as quickly as possible;

- Link families to the benefits, supports, and community-based services they need to achieve and maintain housing stability; and
- Identify and implement effective prevention methods to help families avoid homelessness.

Members of the workgroup develop and share resources as the field and federal partners learn more about effective strategies for building systems to end family homelessness through research and evaluation of grant initiatives.

For more information please visit: [http://usich.gov/about\\_us/](http://usich.gov/about_us/) and <http://usich.gov/population/families/family-connection>.

### **OFFICE OF PLANNING, RESEARCH AND EVALUATION (OPRE), ACF**

For many years, OPRE has had a long-standing collaboration with CB/OCAN to provide support, consultation, and management of several large scale research and evaluation efforts funded by CB/OCAN and support on other projects of mutual interest. One example of these collaboration efforts on large scale research projects includes:

- *Design Options of Child Abuse and Neglect Studies*

On September 30, 2015, OPRE and CB awarded the *Design Options of Child Abuse and Neglect Studies* contract to Mathematica Policy Research for an 18-month project period. The purpose of this contract is to support OPRE and CB in developing design options for one or more future studies that would leverage existing administrative data, innovative methods, and advanced statistical techniques to obtain accurate and ongoing surveillance on both the incidence of child abuse and neglect and types of related risk. Since the 1970's, ACF has supported efforts that provide national-level data on the incidence of child abuse and neglect. This new contract will provide a systematic review of design and methodological innovations to supplement the usefulness and ongoing surveillance of the incidence of child abuse and neglect and related risk. The goals of this contract include: the identification and prioritization of key research questions; exploration of design options, including innovating methodological approaches; review of existing administrative datasets and ongoing surveys; examination of potential measurement issues; and consideration of resource allocation.

Potential questions of interest include (but are not limited to):

- What is the incidence of child abuse and neglect at national-, state-, and/or local-levels?

- To what extent are incidents of child abuse and neglect increasing, decreasing, or remaining constant in number and severity?
- What is the incidence of investigated (substantiated and unsubstantiated) and uninvestigated (screened out) cases of child abuse and neglect?
- What individual-, family-, and community-level factors (e.g., disabilities, parental substance abuse, lack of social supports, etc.) put children at risk for one or more types of abuse or neglect?
- Do the rates of re-reporting, types of child abuse and neglect, demographic characteristics, and/or risk factors differ between children who are investigated (substantiated and unsubstantiated) and those who are screened out without an investigation?
- If reports of maltreatment are not investigated, what services are families being connected to as part of alternative or differential response systems? How does alternative or differential response influence rates of re-reporting?
- Why do incidence rates of neglect vary across states and demonstrate inconsistent trends over time? (For example, are variations in incidence rates a result of different definitions of neglect; different data sources for analysis; disparities in availability of community services; or some other reasons?)

The contractor will engage an interdisciplinary group of key stakeholders, federal partners, experts, and researchers to inform their work throughout the project.

## **MAJOR MEETINGS**

### **19th NATIONAL CONFERENCE ON CHILD ABUSE AND NEGLECT**

Beginning in 1976, there has been a national conference every two to three years, designed to serve as the field’s leading training and technical assistance event. Originally hosted by the then National Center on Child Abuse and Neglect (NCCAN), the conference has been hosted by OCAN since 1998, the revised and renamed NCCAN. The conference creates a unique collaborative opportunity for policy makers, practitioners, advocates, researchers, and academics from a variety of disciplines to convene and learn more about the state-of-the-art in research, policy, and practice regarding child maltreatment. Engagement of both federal and non-federal partners in the planning process is symbolic of the multi-disciplinary nature of the conference and ensures that the conference is representative of the key constituents and disciplines involved in this work in the field.

The 19th National Conference on Child Abuse and Neglect, “Making Meaningful Connections,” occurred between April 30 and May 2, 2014, in New Orleans, Louisiana. The conference was held in conjunction with the 40<sup>th</sup> anniversary of the Child Abuse Prevention and Treatment Act (CAPTA). The meeting was planned by a diverse, multi-disciplinary

planning partnership of private sector, advocacy, government (federal and state), and community-based organizations. A key piece of this planning process was the development of themes, identification of the key issues to explore, and determining the essential learning clusters for the conference. To exemplify coordination and collaboration efforts, and to reinforce the multi-disciplinary nature of this work, both federal and non-federal partners were active in this process. Over 115 people from around the country participated in at least one of the three virtual planning meetings and 167 individuals volunteered to assist in reviewing the 445 abstracts received.

Learning clusters for the 19th National Conference included: Promoting Protective Factors and Preventing Child Maltreatment; Building a Research Agenda to Inform and Improve Policy and Practice; Trauma, Resiliency and Partnering to Protect Children, Youth and Families; Engaging Parents, Youth and Their Families; Developing and Supporting the Workforce; and Advancing Collective Impact and Social Change.

Below are some key highlights from the 19<sup>th</sup> National Conference:

- 1,834 individuals participated on site.
- 644 participated in the Virtual Participation Series associated with the conference.
- 13 countries and territories were represented.
- The conference consisted of 167 sessions, involving some 450 speakers and presenters.
- Session types included: plenaries, skills seminars, workshops, research panels, and policy forum institutes.
- Onsite and virtual participants represented multiple disciplines, including: child advocacy, state and local child protective services/child welfare, early education, domestic violence, education, substance abuse, medical and nursing, law enforcement and the courts, prevention and family support, research, sexual abuse/trafficking and others.
- To highlight the 40<sup>th</sup> anniversary of CAPTA, CB commissioned the writing of *The Child Abuse Prevention and Treatment Act: 40 Years of Safeguarding America's Children*. This paper provided an historical overview of CAPTA, the federal role in child protection, the move toward an increasing focus on prevention and the road forward in this field. To read the paper, please visit:  
[http://www.acf.hhs.gov/sites/default/files/cb/capta\\_40yrs.pdf](http://www.acf.hhs.gov/sites/default/files/cb/capta_40yrs.pdf).

For more information about the 19<sup>th</sup> NCCAN, including viewing the Program Book, as well as the Opening, Day 2 and Closing Plenary sessions, please visit:

<http://www.acf.hhs.gov/programs/cb/focus-areas/child-abuse-neglect/nccan/19th-nccan>.

The themes of prior National Conferences included:

- 2012: 18<sup>th</sup> National Conference on Child Abuse and Neglect, Washington, District of Columbia  
“Celebrating the Past, Imagining the Future”
- 2009: 17<sup>th</sup> National Conference on Child Abuse and Neglect, Atlanta, Georgia  
“Focusing on the Future – Strengthening Families and Communities”
- 2007: 16<sup>th</sup> National Conference on Child Abuse and Neglect, Portland, Oregon  
“Protecting Children, Promoting Healthy Families, and Preserving Communities”
- 2005: 15<sup>th</sup> National Conference on Child Abuse and Neglect, Boston, Massachusetts  
“Supporting Promising Practices and Positive Outcomes: A Shared Responsibility”
- 2003: 14<sup>th</sup> National Conference on Child Abuse and Neglect, St. Louis, Missouri  
“Gateways to Prevention”
- 2001: 13<sup>th</sup> National Conference on Child Abuse and Neglect, Albuquerque, New Mexico  
“Faces of Change: Embracing Diverse Cultures and Alternative Approaches”

For more information, visit: <http://www.childwelfare.gov/calendar/cbconference/>.

It is anticipated that the 20<sup>th</sup> National Conference on Child Abuse and Neglect will be held in the fall of 2016 in the Washington, DC area. The theme of this conference will be, “Building Community, Building Hope.”

### **NATIONAL CONVENING ON TRAFFICKING AND CHILD WELFARE**

On June 10 and 11, 2015, over 300 attendees, representing all 50 states, Puerto Rico, and the District of Columbia, gathered in Washington, D.C. to discuss effective strategies for preventing and addressing sex trafficking of children and youth. Co-sponsored by the White House and CB, the *National Convening on Trafficking and Child Welfare* brought together representatives from child welfare agencies, courts, and law enforcement, to promote collaborative solutions to this issue of growing national concern. Specifically, the convening sought to promote coordinated implementation of the anti-trafficking provisions of the Preventing Sex Trafficking and Strengthening Families Act (Pub L. 113-183) of 2014 and assisted states in determining strategies for preventing and responding to trafficking, particularly among vulnerable children and youth in child welfare. The meeting goals were to:

- Provide information and tools to enhance coordination, collaboration, and capacity in each state and jurisdiction.
- Assist states and jurisdictions in developing action plans that will be put in place to address the new mandates.

Over the two days, presentations on key trafficking topics were provided by a multidisciplinary and diverse group of panelists, including federal and non-federal partners from the White House,

the Office of Juvenile Justice and Delinquency Prevention, and Casey Family Programs. Additional disciplines represented included: leading experts and innovators, trafficking survivor leaders, program directors and managers of model initiatives from across the country, child welfare agency directors, judges, and technology specialists. The panel presentations addressed essential aspects of trafficking and child welfare including:

- Coordination and collaboration
- Identification, assessment, and data collection
- Placement and service delivery
- Partnering to address human trafficking
- Training and prevention

In addition to panel presentations, state and jurisdictional teams met in several structured sessions to support efforts for preliminary planning among cross-sector participants to meet Pub. L. 113-183 requirements. These sessions provided representatives an opportunity to reflect and integrate information heard in the panel presentations and begin a collaborative planning process.

Teams were asked to:

- Discuss their overarching goals to prevent and address the problem of sex trafficking.
- Identify their most pressing issues in key areas that mirrored panel topics.
- Determine strengths and barriers for addressing each pressing issue.
- Indicate areas for potential technical assistance.

To view a copy of the agenda and additional resources related to convening, please visit: <https://www.childwelfare.gov/topics/systemwide/trafficking/convening>.

## **REPORTS AND PUBLICATIONS**

### **PREVENTION COMMUNITY RESOURCE GUIDE**

A community resource guide has been published annually since 2003 in conjunction with National Child Abuse Prevention Month (April). The resource guide is developed in partnership with the National Child Abuse Prevention Partners and coordinated by CB/OCAN. The National Child Abuse Prevention Partners is a workgroup made up of federal and non-federal partners that has now grown to more than 30 organizations, all interested in the prevention of child maltreatment. The group was established by CB/OCAN to help develop and disseminate the resource guide on an annual basis and to help inform other prevention initiatives.

*Making Meaningful Connections: 2015 Prevention Resource Guide*, was released in the spring of 2015, and focuses on national organizations, federal prevention partners, and

parents coming together to develop a shared vision, engage in shared action, and strengthen networks and partnerships committed to prevention child abuse and neglect. The guide was designed to support service providers in their work with parents, caregivers, and their children to strengthen families and prevent child abuse and neglect. The resource guide now includes tip sheets (in both English and Spanish) for caregivers and the community; an activity calendar that highlights the promotion of child well-being for parents, programs, and community partners; and vignettes that highlight protective factors in practice. The resource guide can be used in trainings and to stimulate conversation at a Parent Café.

In addition, the 2015 Prevention Resource Guide was updated with new information and statistics, while maintaining some of the main content structure of the guide. Of particular note are updates to Chapter Three, “Using Protective Factors as a Framework for Your Community Partnership.” This section continues to provide information on how to successfully work with community partners, including four new partners—law enforcement, substance abuse treatment agencies, mental health professionals, and domestic violence advocates. The guide was developed through a partnership between the Child Welfare Information Gateway, the FRIENDS National Resource Center, and most recently the Center for the Study of Social Policy. The resource guide is available for download on the Child Welfare Information Gateway and a select number of print packets are made available for distribution through the Gateway to states and communities nationwide.

For more information, visit: [www.childwelfare.gov/preventing](http://www.childwelfare.gov/preventing).

### **CHILD WELFARE EVALUATION VIRTUAL SUMMIT SERIES**

In August 2011, CB hosted the Second National Child Welfare Evaluation Summit: *Building Evidence, Strengthening Practice and Informing Policy* in Washington, DC. The purpose of the summit was to engage participants on: building and disseminating evidence on effective child welfare services, programs, and policies; strengthening evaluation practice in child welfare; and promoting the use of findings for sound decision-making in child welfare programs and systems.

Following the success of this meeting, the 2013 National Child Welfare Evaluation Summit was planned, but unfortunately was ultimately cancelled. Following this cancellation, CB decided to develop a series of short videos as a means for sharing ideas and issues that could not be presented at the conference. CB worked in collaboration with federal partners and guest authors to design and produce the videos.

The result is the Virtual Summit Series, a group of 17 videos that combine illustration, animation, motion graphics, and content from national experts. Each video explores a

particular evaluation-related topic, and many propose solutions to common evaluation problems in the field of child welfare research and evaluation. Many of the videos direct viewers to additional tools and resources. The videos are intended to advance the major objectives of the 2011 Summit by building capacity for improved evaluation, promoting further dialogue among evaluation stakeholders, and disseminating information to the field. To view the Virtual Summit Series and additional resources created, please visit: <http://www.acf.hhs.gov/programs/cb/capacity/program-evaluation/virtual-summit>.

## **CONTRACTS AND TECHNICAL ASSISTANCE ACTIVITIES**

### **ACYF PROTECTIVE FACTORS FRAMEWORK CONTRACT**

In FY 2011, CB established a contract to develop an ACYF Protective Factors Framework to inform future prevention, intervention, and treatment efforts for programs administered by ACYF. CB managed the contract in collaboration with staff from the Office of the ACYF Commissioner and FYSB. The contract involved several key tasks including: conducting a comprehensive literature review; engaging research experts, federal experts, and practitioners in the development of the framework; and developing a research brief to summarize the findings. The diverse populations served by ACYF share a complex set of characteristics and circumstances that place them at risk for a host of adverse outcomes. In addition, they also have unique characteristics that present challenges to creating a framework that is applicable to all types of children and families served by ACYF. This project identified protective factors at the individual, family, proximal, and community levels of influence that should be considered by ACYF-funded programs. The Protective Factors Framework and recommendations are intended to inform current and future efforts to infuse knowledge of protective factors into ACYF policies and practices. Federal agencies and the research and practice communities have responded positively to the focus and attention on promoting protective factors and resilience in the mutual populations our agencies serve. OCAN worked closely with several partners from FEDIAWG to ensure that this work was complementary to other federal efforts to promote protective factors. The contract concluded in 2013, and the final products, including the literature review, executive summary, and research brief, are available using the following link: <http://www.dsgonline.com/ACYF>.

### **CHILDREN'S BUREAU'S TRAINING AND TECHNICAL ASSISTANCE COORDINATION EFFORTS**

In FY 2014, CB launched the new Child Welfare Capacity Building Collaborative, building on the prior successes of the National Child Welfare Resource Centers and the Child Welfare Implementation Centers. The Collaborative is a partnership among three centers – the Center for

States, the Center for Tribes, and the Center for Courts. The new structure consolidates services that had previously been organized by topical area and geographic region in an attempt to increase coordination, leverage resources, and provide more strategic service provision.

The purpose of the Collaborative is to build capacity, which is defined as an ongoing, evidence-informed process that is intended to develop a system's potential to be productive and effective. Through universal, constituency, and tailored services, the Collaborative will work to support child welfare professionals and organizations to assess and enhance their capacity in several key areas. These areas include: resources, infrastructure, knowledge and skills, culture and climate, and engagement and partnership. The Collaborative will help agencies and organizations build relationships within and outside their organization, including: internal teaming, community participation, interagency agreements, and shared authority with key stakeholders.

For more information about the Child Welfare Capacity Building Collaborative, please visit: <https://capacity.childwelfare.gov/>.

## **STATE-LEVEL ACTIVITIES**

### **CAPTA FORMULA GRANT PROGRAMS TO STATES**

#### ***Children's Justice Act (CJA) Grant Program***

The Children's Justice Act (CJA), under section 107(a) through (f), of CAPTA of 2010, Pub. L. 111-320, as amended, authorizes grants to the states, the District of Columbia, Puerto Rico, and the territories for the purpose of improving the investigation, prosecution, and judicial handling of cases of child abuse and neglect, particularly child sexual abuse and exploitation, in a manner that limits additional trauma to the child victim. This authorization also includes the handling of child fatality cases in which child abuse or neglect is suspected. The program and supports provided at the federal level assist and guide grantees in coordination and collaboration at the local level to achieve these goals, often accomplished through innovative efforts and systems improvement and reform. The CAPTA authorization for CJA does not authorize funding for the grants. Instead, as provided in the Victims of Crime Act, up to \$20 million annually is set aside for CJA grants out of the Crime Victims Fund. Each year, DOJ sends this funding to HHS, which distributes these funds through the CJA program.

The CJA grant program has been in operation since 1984. Over the past 25 years, states have worked to promote child welfare system improvement. As indicated above, the focus of the CJA work is targeted at the improved handling of child abuse and neglect cases and fatalities in a manner that limits additional trauma. CJA's focus is on the improved investigation and prosecution of such cases.

One key element of CJA is the establishment and maintenance of a multidisciplinary task force. Examples of CJA Task Force projects include support of Citizen Review Panels, Child Fatality Review Teams, Multidisciplinary Teams, and Child Advocacy Centers. Many of the states use CJA funding for trainings. These trainings include cross-disciplinary training, training academies, and forensic interview training. State CJA Task Forces work to implement various programs to improve child welfare systems. The legislation and program instruction stress that funds are to focus on the reform of state systems and to improve processes. The funds may not be used for treatment services or prevention.

The reauthorization of CAPTA in 2010 added two new membership categories to the multidisciplinary task forces discussed above. CJA Task Forces must now include an adult former victim(s) of child abuse and/or neglect, and an individual(s) experienced in working with homeless children and youths (as defined in Section 725 of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11434a)). States are hard at work to recruit and appoint these new Task Force members.

In FY 2014 and FY 2015, \$17 million was disbursed to the eligible CJA grant applicants including all 50 states, the District of Columbia, Puerto Rico, and four territories. The amount awarded is based on a formula of a minimum of \$50,000, plus an additional amount based on the population of children less than 18 years of age in the applicant's jurisdiction. Awards in FY 2014 ranged from \$53,269 to the Northern Mariana Islands, to \$1,811,500 allocated to California. In FY 2015 awards ranged from \$53,268 to \$1,798,201. In each year, the average grant was approximately \$300,000.

### ***Community-Based Child Abuse Prevention (CBCAP) Grant Program***

The Community-Based Child Abuse Prevention (CBCAP) grant program as authorized in Title II of CAPTA of 2010 (Pub. L. 111-320, as amended) supports and promotes states to develop community-based efforts to develop, operate, expand, enhance, and coordinate initiatives, programs, and activities to prevent child abuse and neglect. In addition, these grants are also to support the coordination of resources and activities to better strengthen and support families to reduce the likelihood of child abuse and neglect.

One of the key focus areas for the CBCAP grant program is collaboration and coordination at the state level in order to maximize the use of limited prevention dollars. The 2015 CBCAP Program Instruction (PI) states that lead agencies are strongly encouraged to partner with public and private agencies that are serving the same populations and have the same goals, including possible partners such as: social services, child welfare, health, mental health, substance abuse treatment, domestic violence, child care, early childhood, education, law enforcement, and other state-level and community-based organizations. In addition, the 2010 reauthorization of CAPTA included substance abuse treatment and domestic violence services as additional categories of

prevention services, addressing an unmet need that may be funded under CBCAP. These changes underscore the importance of coordinated efforts from multiple disciplines as a significant element of child maltreatment prevention. The 2003 reauthorization of CAPTA emphasized the linkages to health and developmental programs and services.

In FY 2014 and FY 2015, \$39,764,000 was authorized for CBCAP and funds were disbursed to the eligible CBCAP grant applicants including all 50 states, the District of Columbia, Puerto Rico, and four territories. The amount awarded is based on a formula of a minimum of \$175,000, plus an additional amount based on the population of children under 18 years of age in the applicant's jurisdiction, and the amount of non-federal funds leveraged and directed through the currently designated state lead agency in the preceding fiscal year. In FY 2014 awards ranged from \$200,000 to \$2,973,652. In FY 2015 awards ranged from \$200,000 to \$2,960,775.

## **CAPTA DISCRETIONARY GRANT INITIATIVES TO STATES AND LOCAL COMMUNITIES**

Collaboration has long been recognized as essential to the prevention, intervention, and treatment of child maltreatment. It is a process by which several agencies or organizations make a formal, sustained commitment to work together to accomplish a shared vision. This report has emphasized much of the work done at the federal level to bring agencies serving children and families together to collaborate and improve the delivery and quality of services. In addition to the work at the federal level, efforts through formula grants provided to states have also been discussed. Formula grants are not the only mechanism through which OCAN/CB funds states and local communities to support child maltreatment prevention. The other main funding mechanism utilized is discretionary grant initiatives. The concepts and themes of collaboration and interagency coordination efforts are strongly integrated in our discretionary grant initiatives with states and local communities, via program instruction and technical assistance. Many of the Funding Opportunity Announcements (FOA), which inform and direct the efforts for CB's grant programs, require or strongly encourage collaboration across state and local agencies to further efforts to prevent child maltreatment and improve the well-being of children and families. In addition, CB works closely with partner agencies to develop FOAs and create support across federal partners to awarded grantees.

For more information about CB's discretionary grants, please visit CB's website:

<http://www.acf.hhs.gov/programs/cb/grants/discretionary-grant> and the Discretionary Grant Library, [http://library.childwelfare.gov/cbgrants/ws/library/docs/cb\\_grants/GrantHome](http://library.childwelfare.gov/cbgrants/ws/library/docs/cb_grants/GrantHome), which allows you to search for and view products and information related to specific CB grant projects.

### ***Grants to Address Trafficking within the Child Welfare Population***

In FY 2014, CB funded nine localities across the country, for a five-year period, to focus on addressing trafficking within the child welfare population. The purpose of these grants is to continue the development of child welfare systems' response to human trafficking through infrastructure building, and a multi-system approach with local law enforcement, juvenile justice, courts systems, runaway and homeless youth programs, Children's Justice Act grantees, child advocacy centers, and other necessary service providers. Some examples of the work these grants are focusing on include:

- Developing multidisciplinary collaborations with state and local partners.
- Creating a best practice program model that will include protocols, tools, and service training to be shared across agencies and disciplines.
- Building internal capacity to work with minor victims of sex trafficking, engage in system-wide outreach, and support capacity-building in partner systems.
- Further supporting and replicating multi-disciplinary response systems addressing human trafficking and models for effective collaboration across systems to identify and provide needed services to minor trafficking victims.

To see a list of the grantees, please visit:

<http://www.acf.hhs.gov/programs/cb/resource/discretionary-grant-awards-2014>.

### ***Partnerships to Demonstrate the Effectiveness of Supportive Housing for Families in the Child Welfare System***

In FY 2012, CB awarded five grants, for five-year period and a maximum of \$1,000,000 per budget period. The purpose of these grants is to serve a subset of families for whom the lack of adequate housing is a primary factor in the imminent placement of the child, or children, in out-of-home care, or in the delay of discharge of a child, or children, to the family from out-of-home care. As specified in CAPTA, community-linked services are being provided to families through the local implementation of supportive housing services. Each project is required to work collaboratively with the following partners: local public child welfare, local public housing authority or other housing agency, and at least one community family homeless or domestic violence shelter. Partnerships extend beyond these required partnerships for all project sites. The projects were structured to include a 10-month planning and assessment phase (Phase I). In October 2013, implementation plans for years two-five were approved for all five sites. All grantees are currently in their fourth year of the five-year grant period.

More specifically, the targeted five-year grants were awarded to support:

- The development and expansion of triage procedures for a subset of families who come to the attention of the child welfare system due to severe housing issues and high service needs.

- Local implementation of supportive housing services that integrate community services for housing and other critical services for the specified target population.
- Customized case management services for children and their parents as well as trauma-informed interventions and evidence-based mental health services through partnerships to access additional services through community-based service providers.
- Evaluations that examine the process and implementation outcomes for these grants.

Expected outcomes are reductions in: child welfare system contacts, child maltreatment, child removals, and foster care placements. A list of the grantees in this program can be found at the following website: <http://www.acf.hhs.gov/programs/cb/resource/discretionary-grant-awards-2012>.

***Child Welfare – Early Education Partnerships to Expand Protective Factors for Children with Child Welfare Involvement (ECCW)***

In FY 2011, CB awarded eight 17-month grants to communities across the nation to develop the infrastructure necessary to support key collaborative initiatives between child welfare, early childhood systems, and other critical stakeholders such as child care, health, and mental health agencies working with young children ages birth to five years old. CB awarded an additional ten grants in FY 2012. The second round of awards was for two-year project periods to support these collaborative efforts in additional communities. The goals of these additional grants was to expand access to these collaborative opportunities across the country, increase the time frame available to accomplish this work, increase funding to support the development of these collaboratives, and ultimately enhance the work they can accomplish and increase the potential of more significant evaluation outcomes. The second round of grants concluded their projects on September 30, 2015. A list of the grantees in this program can be found at the following websites: <http://www.acf.hhs.gov/programs/cb/resource/discretionary-grant-awards-2011> and at: <http://www.acf.hhs.gov/programs/cb/resource/discretionary-grant-awards-2012>.

The purpose of this grant initiative was to support and reinforce the development of community partnerships involving child welfare, early education, and other partner agencies. The collaboratives focused on maximizing enrollment, attendance, and supports of infants and young children in foster care, into comprehensive, high-quality early care and education programs. Grantees had been encouraged to enhance their collaboratives through the development of new models, or build on existing collaborative policies, procedures, and/or practices; address barriers to permanency; and implement multi-disciplinary interventions to improve the socio-emotional and behavioral well-being of young children. In addition, the grantees worked to create strategic coordination; institutionalized communication across public child welfare, early childhood, and community organizations; and promoted utilization of multi-disciplinary interventions and quality practices.

Efforts under this initiative have included:

- Infrastructure development of an electronic child welfare to Head Start/Early Head Start referral system.
- Creation of a system for referring, linking and tracking child welfare-involved children in their Head Start/Early Head Start programs.
- Cross-training partnerships across collaborative members to educate multiple disciplines on a shared protective factors frame for action, trauma informed interventions, infant mental health and resiliency.
- Identifying strategic opportunities to infuse a protective factors approach into policy and practice tools to support this type of multi-disciplinary approach.
- Development and expansion of existing collaboratives to develop policies, promote awareness and utilization of multi-disciplinary interventions, practices and strategies, and disseminate findings in support of knowledge transfer.

To further increase our learning from the grantees, several site visits were completed and a synthesis report highlighting the work of the first round of these grantees was published. Key successful strategies across the grantees included:

- Communication and interaction across programs
- Supportive leadership
- Ongoing education
- Active, meaningful child welfare involvement

A copy of the synthesis report can be found:

<https://www.childwelfare.gov/topics/management/funding/funding-sources/federal-funding/cb-funding/cbreports/earlyeducation/>.

In addition, several final reports of the first round grantees can be found here:

<https://www.childwelfare.gov/topics/preventing/programs/earlychildhood/collaboration-ec/>.

A report on the synthesis of evaluation efforts of these grants was completed by James Bell Associates can be read here:

[http://www.jbassoc.com/ReportsPublications/ECCW%202011Cross-Site%20Synthesis%209\\_24\\_15.pdf](http://www.jbassoc.com/ReportsPublications/ECCW%202011Cross-Site%20Synthesis%209_24_15.pdf).

### ***Child Welfare – Education System Collaborations to Increase Education Stability***

In FY 2011, CB awarded ten 17-month grants to communities across the nation to develop the infrastructure necessary to support crucial collaborations between child welfare, the education system, and other key youth-serving organizations to support youth and families in, or at risk of entering, the child welfare system. CB awarded an additional ten grants in FY 2012. As above,

the goal of the additional grants was to expand access to these collaborative opportunities across the country, increase the time frame available to accomplish this work, increase funding to support the development of these collaboratives, and ultimately enhance the work they could accomplish and increase the potential of more significant evaluation outcomes. The second round of grants concluded their projects on September 30, 2015. A list of the grantees in this program can be found at the following websites:

<http://www.acf.hhs.gov/programs/cb/resource/discretionary-grant-awards-2011> and at:  
<http://www.acf.hhs.gov/programs/cb/resource/discretionary-grant-awards-2012>.

The purpose of this grant initiative was to build collaborations between child welfare and education systems to increase the educational stability and school success of children (ages 10 to 17 years) in or at risk of entering the child welfare system. Through this effort child welfare agencies were to develop collaborative policies, products, and programs to work toward these identified goals for the target population. Child welfare agencies worked in partnerships that included local and neighborhood school districts, and identified critical stakeholders such as courts and health and mental health agencies. Building and sustaining multi-system partnerships and meaningful collaborations between child welfare, education, and other youth-serving systems was key to ensuring that youth in care were afforded the ability to succeed and thrive in educational settings.

Efforts under this initiative included:

- Creating electronic academic records to be shared and utilized across education, child welfare, and juvenile justices systems; assisting the transition of youth in foster care from one school to another.
- Increasing awareness of the child welfare system to better assess the child's well-being, including educational needs; public awareness campaigns targeted toward the education and child welfare systems about the importance of information exchange.
- Training programs for education advocates to better assist youth and their families better navigate the education system.

To further increase our learning from the grantees, several site visits were completed. Site visit reports from these trips are available at the following website:

<https://www.childwelfare.gov/topics/management/funding/funding-sources/federal-funding/cb-funding/cbreports/edcollaborations/>. Additionally, a synthesis report of the efforts of the first round of these grants is currently being developed and will be available at:  
<https://www.childwelfare.gov/topics/management/funding/funding-sources/federal-funding/cb-funding/cbreports/edcollaborations/>.

### ***National Quality Improvement Center on Early Childhood (QIC-EC)***

In FY 2009, CB awarded a five-year cooperative agreement to the Center for the Study of Social Policy, in partnership with ZERO TO THREE: National Center for Infants, Toddlers, and Families, and the National Alliance of Children's Trust and Prevention to form the National Quality Improvement Center on Early Childhood (QIC-EC). The QIC-EC studied collaborative interventions that increase protective factors and decrease risk factors to achieve optimal child development, increase family strengths, and decrease likelihood of child maltreatment within families of young children at high-risk for child maltreatment. The QIC-EC concluded its work in September 2014.

Over the course of the project, the QIC-EC:

- Funded four research and demonstration projects that investigated and evaluated the impact of collaborative, innovative programs and strategies that targeted primary prevention of infants and younger children through promoting optimal development, strengthening families and reducing the likelihood of abuse and neglect. The projects included:
  - Collaboration among Part C case managers, wraparound services, family strengths, and substance abuse treatment for pregnant women.
  - Triple P parent education training plus adapted Prevention Child Abuse and Neglect training for Part C early intervention coordinators.
  - Healthy Steps home visiting, legal assistance and other family supports; and multifaceted neighborhood mobilization led by a range of community members to reduce child maltreatment and promote optimal development of children.
- Conducted a rigorous cross-site evaluation of the funded projects (listed above).
- Disseminated information through a national learning network to engage a broad maltreatment prevention constituency and share lessons learned.
- Funded five doctoral dissertation fellows who conducted research in primary prevention or promoting child and family well-being in families with young children who are at high-risk for abuse or neglect.
- Developed numerous products, including a strengths-based survey to measure parents' assessment of their protective factors.

For more information about the QIC-EC and their projects, and to view their final report included the cross-site evaluation please visit: <http://www.cssp.org/reform/early-childhood/quality-improvement-center-on-early-childhood>.

### ***Targeted Grants to Improve the Well-Being of, and to Improve the Permanency Outcomes for, Children Affected by Parental/Caretaker Methamphetamine or Other Substance Abuse (Regional Partnership Grants) (RPG)***

The Child and Family Services Improvement Act of 2006 reauthorized the Promoting Safe and Stable Families program designed to improve the lives of abused and neglect children and their families who are affected by methamphetamine and other substance use disorders. The

legislation included a new competitive grant program and provided funding over a five-year period to implement regional partnerships for the purpose of improving outcomes for children and families. The legislation responded to parental substance abuse as a key factor underlying the abuse or neglect experienced by many children in the child welfare system. The five-year project period of the initial 53 Regional Partnership Grants (RPG) awarded under this grant program ended on September 29, 2012. SAMHSA staff continue to remain involved in the grants in both a support and consultation role to provide programmatic TA for the grantees, the overall grant program, and evaluation.

For more information about these grants, grantee profiles and the related four reports to congress on this initiative, please visit <http://www.cffutures.org/projects/regional-partnership-grants> and <http://www.acf.hhs.gov/programs/cb/resource/targeted-grants-to-increase-the-well-being>.

In September 2011, the President signed Pub. L. 112-34 into law that authorized new demonstration projects through FY 2016. As with the previous round of RPG, these grants were awarded through a highly competitive process. The new targeted grants awarded under the new authorization provide similar integrated activities and services that are designed to increase the well-being of, improve permanency outcomes for, and enhance the safety of children, and continue the emphasis on local collaboration and partnerships. The focus is on children who are in an out-of-home placement, or at risk of being placed in an out-of-home placement, as a result of a parent's or caretaker's substance abuse. SAMHSA staff has remained deeply involved in the process of designing and reviewing the second round of RPGs. On September 30, 2012, 17 grants in 15 states were awarded to the second round of RPGs. In addition, a national cross-site evaluation and evaluation technical assistance contract was awarded to Mathematica Policy Research to support and evaluate the work for this new cohort of grantees. At that time, ACYF/CB funded two-year extension grants to eight of the RPGs that were funded as part of the initial round of grants in 2007. A list of the FY 2012 grant awards can be at the following website: <http://www.acf.hhs.gov/programs/cb/resource/discretionary-grant-awards-2012>.

As a result of availability of funds, a competition was held for an additional round of RPG. On September 30, 2014, four grants were awarded to this third cohort. Round three of the RPG will be a part of the national cross-site evaluation that began with second round of grants. A list of the FY 2014 grant awards can be found at the following website: <http://www.acf.hhs.gov/programs/cb/resource/discretionary-grant-awards-2014>.

The RPGs have and will continue to implement varied interventions, such as family drug courts, comprehensive substance abuse treatment, and/or in-home parenting and child safety support for families. Grantees will also:

- Use evidence-based or evidence-informed programs or strategies that are trauma-informed to provide services to the target populations they selected.
- Address child well-being along with the more traditional goals of safety and permanency as part of their selected strategy or program.
- Conduct an evaluation sufficiently rigorous to contribute to the evidence base on service delivery and outcomes associated with their chosen interventions.
- Participate in the national cross-site evaluation, and collect and report performance and evaluation measures to increase the knowledge that can be gained from the RPG program.

As mentioned earlier in this report, this group of discretionary grantees receives support from the NCSACW, as outlined in the IAA between CB and SAMHSA. In addition to the training and technical assistance support provided to this cluster of grantees through the NCSACW, CB has worked closely with SAMHSA since the inception of this discretionary grant cluster. During the initial development of this program, and the writing of the FOA, CB extensively consulted with the staff at SAMSHA based upon their topical expertise in this area. The FOA required grant applicants to reflect the commitment of key community partners, as outlined in the legislation, and demonstrate the partnerships through which the grant applicants would work through signed letters of commitment and support and signed Memorandum of Understanding. SAMHSA remains involved in the grants in a consultative capacity to provide programmatic TA for the grantees, the grant program as a whole and evaluation. The five-year project period of round two of the RPG grants will end on September 29, 2017.

## **CONCLUSION**

Collaboration and coordination, based on meaningful connections, whether it is at the federal, state, or local level, is essential to understanding the multifaceted issues of child maltreatment, developing effective prevention and treatment strategies, and working to improve the outcomes and well-being of children and families. Such coordination efforts are inherent in the work of CB/OCAN, both in direct collaboration with federal partners, and the philosophical approach that underpins our discretionary and formula based grants to encourage robust and meaningful partnerships. CB is diligent in efforts to reach out to federal partners and remains dedicated and committed to further collaborative efforts to bring multiple agencies together to support shared action to prevent child maltreatment and to promote well-being for children and families.

It is a widely held understanding that federal agencies serving children and families need to collaborate to accomplish these goals. These efforts require that organizations take the additional time necessary to work outside historical boundaries; dedicate staff, skills, and energy to build strong partnerships; examine diversity among organizational priorities and culture; and

develop a shared vision. Agencies must also learn to recognize that one organization's plans and initiatives are part of a larger system that needs to function in a coordinated manner to achieve the collective objective of child maltreatment prevention and increased well-being for children and families. Through collaboration, including the careful consideration of these necessary actions and on-going dedication to the shared work, great strides can be made in achieving mutual goals by improving resource alignment, increasing effectiveness of efforts, and taking steps to ensure that outcomes more sustainable.

CB will continue to build inclusive collaborations with existing and new partners to support coordinated research, training, technical assistance, and service delivery. Staff will also continue to develop opportunities for shared learning, knowledge development, and dissemination at the federal level and encourage such efforts at the state and local levels among grantees and community service providers. It is through interagency coordinated efforts to develop meaningful connections across HHS, throughout the federal government and beyond, that we can best work to prevent child maltreatment and promote the well-being of children and families.