

Grantee:	Cherokee Nation of Oklahoma
Program Title:	<i>Cherokee PARENTS (Positive and Rewarding Educational Nurturing Tribal Services)</i>
Model Selected:	<i>SafeCare®</i>
Program Period:	<i>Cohort 3 (September 30, 2012 to September 29, 2017)</i>

Key Program Staff:

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Program Goals

The goal of the Cherokee PARENTS program is to support the development of healthy, happy, successful American Indian children and families through a coordinated, high-quality, evidence-based home visiting strategy that will assist in expanding the evidence base around home visiting programs for American Indian and Alaska Native (AI/AN) populations.

Community Context

State	Oklahoma
Rural or Urban Reservation or Non-Reservation	Rural Non-Reservation/Oklahoma Tribal Jurisdiction Service Area (TJSA)
Description of Service Area	Cherokee Nation of Oklahoma is located within the 14 counties (includes all of 9 counties and portions of 5 other counties) of northeastern Oklahoma. It has a TJSA, which consists of 9,234 square miles. Cherokee Nation of Oklahoma has over 300,000 citizens making it the United States' largest tribal nation. The American Indians in the 14 Cherokee Nation of Oklahoma counties account for roughly 30 percent of Oklahoma's total American Indian population; or 9 percent of the state's citizen population. Yet 51 percent of the Nation is rural. Out of the 14 counties the program will serve Adair, Cherokee, and Mayes Counties.
Births Per Year	2,483 in the TJSA
Children ages Birth to Five in Target Community	Children under 5 years, AI/AN alone or in combination with 1 or more other races: 1,182 in Adair County 1,922 in Cherokee County 1,242 in Mayes County Source: U.S. Census Bureau, 2010 Census.

Unique Characteristics of Target Community	There are currently no tribal home visiting programs serving Cherokee Nation of Oklahoma families with children ages birth to 5 within the Cherokee Nation of Oklahoma service area.
Key Community Partners	<ul style="list-style-type: none"> • CN Child Care Cultural Specialist • CN Child Care and Development Programs • Child Care Assistance • CN Child Care Center • NEO Hope Pregnancy Center • CN Health Services • Smart Start Cherokee County • Children, Youth, and Family Services – Indian Child Welfare • Cherokee County Health Department – Children First Nurse (Nurse-Family Partnership) • University of Oklahoma • CN Child Unit (Head Start and Early Head Start) • Oklahoma State Department of Health • CN Education Department • CN WIC Program • CN Behavioral Health Services • Pryor Public Schools • CN Marshal Services • Help in Crisis • CN Cherokee Connections Relative Home Visiting Program • Cherokee Nation Youth Services • Cherokee Elders
Primary Risk Factors in Target Community	The major risk factors in the target community include high teen birth rate, high preterm birth rate, lack of prenatal care, high infant mortality rate, low educational attainment, child abuse, and children living in poverty.

Program Delivery Context

Implementing Agency	The Cherokee Nation of Oklahoma, Human Services Department is the lead and implementing agency.
Organization Type	The Cherokee Nation of Oklahoma is a federally-recognized tribe.
Target Population	The Cherokee PARENTS program will serve 80 to 100 at-risk families.
Target and Actual Numbers Served	The Cherokee PARENTS program will serve 80 to 100 at-risk families, and compare them to 80 to 100 comparison families.

Home Visiting Model Selected

The Cherokee PARENTS program has chosen SafeCare® Augmented for its model and curriculum. In addition, the Cherokee PARENTS program will use Cultural Specialist from Cherokee Nation to help incorporate cultural activities.

Key Model Adaptations or Enhancements

The Cherokee PARENTS program will implement cultural activities during the monthly group meetings. Topics to be covered will include traditional parenting, lessons of the storyteller, lessons in traditional crafts, harmony in child rearing, traditional behavior management, lessons of Mother Nature, praise in traditional parenting, and choices in parenting.



Cherokee PARENTS program will invite Cherokee Elders to the meetings to pass down their parenting wisdom.

Description of Early Childhood System

CN of Oklahoma has a network of programs that support the tribe's early childhood system. Cherokee Connections, which is funded from a federal CCDBG block grant assists child care providers using the Parents as Teachers (PAT) curriculum. Services are limited to 12 months per provider. The Cherokee Nation Public Health Nursing funds post-partum visits to high risk mothers only. For the Early Head Start, 90 percent of slots are income-based, but with a limited availability of home-based services. Periodic home visits are made to families and are not intended as intensive intervention. Other programs such as PAT and Children First are also being implemented. In addition, Indian Child Welfare provides prevention and treatment services for families at risk for abuse and neglect. Referral cases are made through the court system.

The CN of Oklahoma also has state pre-kindergarten programs which are voluntary programs through the Oklahoma Department of Education. The Cherokee Nation Child Development Centers serves children ages 6 weeks to 13 years. The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), state and tribal programs provide services in the area as well. Both federal and tribal-funded food and nutrition education programs serve pregnant or nursing women, children ages birth–5 and is income-based. As part of the public school system, there are 84 schools within the 14-county jurisdiction.

Evaluation Approach

Evaluation Question

Can the SafeCare® Augmented intervention reduce the risk for, and incidence of, childhood neglect and abuse for Cherokee Nation Native American families, as compared to similar Native American families not receiving SafeCare® Augmented intervention?

Evaluation Design

	T1	T2
Safe Care HV Program (Adair, Cherokee, Mayes)	0	0
CN Services as Usual (Delaware, Nowata, Craig)	0	0

The Cherokee Nation will be using a quasi-experimental design with a naturally occurring comparison group designed to estimate the impacts and relevance of the SafeCare® Augmented curriculum for our target population’s parenting (and risk for maltreatment) and rates of childhood abuse and neglect.

The approach is for all intervention and comparison participants to undergo evaluation visits at intake and at discharge after program (or study). Comparison families will also complete the Cherokee Nation Data Sheet for general descriptive statistics. Comparison families will be recruited from the program’s partner agencies (the same agencies as the intervention families, for equivalency, but from different counties). Both program and comparison participants will be offered monetary incentives at the completion of each evaluation session, to help increase recruitment and retention.

Administrative data (ICW monthly abuse and neglect reports outlining substantiated maltreatment claims for program participants and general abuse and neglect rates by county) will be monitored for a total of 6 months from program entry. Data from program and comparison families for the six months preceding enrollment will also be requested. This will include reported and substantiated child abuse and neglect. All descriptive statistics on a comparison family will be compiled during statistical analyses and linked to an intervention family with comparable values. If needed, differences between the two samples will be controlled for in the analyses.

The Cherokee Nation identified home visiting as a valuable opportunity to improve parenting in higher risk families, thereby improving health, development, and safety for children. Hence, our proposed evaluation and development of a tribal home visiting program coincides with our community’s values and goals. The evaluation will be the first step in understanding how home visiting can be harnessed for the betterment of families within the Cherokee Nation. It has an ancillary benefit of allowing us to understand the needs of families in three additional counties to which we would like to expand, pending the results of this evaluation.

Key Federal and Technical Assistance (TA) Staff

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