Building Healthy Communities and Preventing Child Maltreatment: A Shared Responsibility
Welcome

Justin Brown
Secretary of Human Services and Early Childhood Initiatives
Recent Accomplishments

Over the last year, OKDHS has launched some of the following major initiatives.

**Launched the Oklahoma Clearinghouse for Early Childhood Success**
Targeting outcomes for children by creating and investing in an evolving definition of quality in early childhood.

**Developed and Executed a Multi-channel Embedded Worker Strategy**
As a larger effort to reimagine the distribution model of human services in the State of Oklahoma. As an effort to meet those that we serve where they are, OKDHS has built strategies including ‘Service First,’ Law Enforcement Social Work Support Teams, traditional embedded workers strategies and the Community Hope Center platform.

**Agency Response to COVID19**
Successfully executed an aggressive & proactive response to COVID19, transforming the state's largest workforce to remote work, partnering in meaningful ways for responsive service to customers, and prioritizing the safety of our workforce and customers first.

**Launched the Community Hope Center Platform**
To better serve the community during COVID19, OKDHS, utilizing CARES Forward funds, partnered with existing providers to provide more resources to children & families as systems closed in our communities.
True North – Executive Leadership

ELTN 1 – Become the a ‘Hope Centered Organization,’ recognizing the trauma that we all bring, and building hope and resiliency in ourselves, our customers and our communities

ELTN 2 – Removing systematic barriers that keep our customers from being successful by meeting our customers where they are to provide needed resources in a more effective way.

ELTN 3 – Become an ‘Elite Employer,’ by improving work/life balance, cultivating talent, improving retention rates and providing for the health and mental health needs of our team.

ELTN 4 – Become the model of efficiency, effectiveness and transparency, serving our community free from fraud, waste or abuse.

ELTN 5 – Innovation – Become a national thought leader and program innovator, embracing new ideas from internal and external sources.

ELTN 6 – Introducing our OKDHS to the public and to our partners in the community through strategic engagement, effectively communicating our desire for deeper relationships and collaborative efforts.

ELTN 7 – Build a culture of equity, diversity, inclusion and belonging, evaluating our current systems and building new systems that embrace one another as equals.

ELTN 8 – Move the agency to a space of prevention, going ‘upstream’ to build a system that supports families with services and resources before they are in crisis;
True North ELTN8 – Executive Leadership

Move the agency to a space of prevention, going ‘upstream’ to build a system that supports families with services and resources before they are in crisis;

- Community Hope Centers
- Homeless Shelters
- Schools
- Law Enforcement

Rebuilding the distribution model for human services by meeting those that we serve where they are;

- Front Porch
- Traditional Embedded Worker Strategy
- Specialty Embedded Workers
- Virtual Front Porch
Oklahoma State Department of Health

Beth Martin, MA, CCC
Director, Family Support & Prevention Services
Primary Prevention

• Oklahoma State Plan for the Prevention of Child Abuse and Neglect (2019-2023)
• American Rescue Plan
• CAPTA Reauthorization
State Plan Surveys

Stakeholder Survey

Analysis Results and Year-wise Comparison

Aneera Sadiq, MBBS, MPH

Epidemiologist, Family Support & Prevention Services
CBCAP Stakeholders Survey Year 3

- Survey launched: 7/31/2020
- Survey closed: 9/11/2020
- Duration: 4 to 5 weeks
- 34 questions in the survey.
Survey Details

Stakeholders survey outreach: **386** Professionals across Oklahoma.

Professionals who chose not to respond to the survey after accessing the survey using the link: **62 (16%)**

Professionals who entered their responses to the survey questions: **324 (84%)**

Among those who completed:

- **245 (76%)** completed entire survey
- **79 (24%)** completed partial survey.
Professionals’ Education and Experience

Figure: Years of Experience

- < 1 Year: 4%
- 1-5 Years: 22%
- 6-10 Years: 15%
- 11-20 Years: 20%
- > 20 Years: 31%
- other: 8%

Frequency missing: 148

Figure: Respondents’ Education

- Doctoral degree: 7%
- Master’s degree: 43%
- Graduate certificate/post-college certificate: 5%
- College graduate: 34%
- Some college/post-secondary school/technical school: 8%
- High school graduate: 2%

Frequency missing: 148
**Figure: Awareness and Use of Community Resources**

<table>
<thead>
<tr>
<th>Resource Program</th>
<th>Aware</th>
<th>Used</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child care resource programs</td>
<td>28%</td>
<td>68%</td>
</tr>
<tr>
<td>Mental health resource programs</td>
<td>22%</td>
<td>76%</td>
</tr>
<tr>
<td>Disability resource programs</td>
<td>44%</td>
<td>50%</td>
</tr>
<tr>
<td>Insurance/health care resource programs</td>
<td>21%</td>
<td>78%</td>
</tr>
<tr>
<td>Employment &amp; education resource programs</td>
<td>39%</td>
<td>55%</td>
</tr>
<tr>
<td>Food, housing, &amp; clothing resource programs</td>
<td>17%</td>
<td>82%</td>
</tr>
<tr>
<td>Parent support programs</td>
<td>29%</td>
<td>52%</td>
</tr>
<tr>
<td>Home-based services</td>
<td>24%</td>
<td>73%</td>
</tr>
</tbody>
</table>

- **Aware** indicates whether the person has heard of the resource.
- **Used** indicates whether the person has referred clients to the resource.

- I have not heard of this
- I know of it, but have not referred clients to this
- I have referred clients to this
Use and Awareness of Resources 2018-2020

Percent Unaware of Parent support and home-based Programs

- 2018: 22%
- 2019: 20%
- 2020: 19%

- 2018: 5%
- 2019: 3%
- 2020: 3%

Percent Used Concrete Resources and Home-based services

- 2018: 83%
- 2019: 81%
- 2020: 82%

- 2018: 69%
- 2019: 73%
- 2020: 73%

Key:
- Blue line: % Have not heard of parent support programs
- Gray line: % Have not heard of home-based services
- Blue dots: % Have referred clients to concrete resources
- Orange dots: % Have referred clients to home-based services
Use and Awareness of Resources 2018-2020

Percent Used Parent Support and Mental Health programs

- % Have referred clients to parent support programs:
  - 2018: 46%
  - 2019: 49%
  - 2020: 52%

- % Have referred clients to mental health programs:
  - 2018: 73%
  - 2019: 70%
  - 2020: 76%

Very Confident in Ability to Refer Clients to Resources

- 2018: 63%
- 2019: 57%
- 2020: 65%
Child Abuse and Neglect Training

Figure: Child Abuse-related Training in Past 5 years

- Intimate partner violence: 55%
- Trauma-informed care: 81%
- Protective factors: 65%
- ACEs: 82%
- Risk factors for maltreatment: 62%
- Reporting procedures: 70%
- Detection: 48%
- Victimization: 50%

Frequency missing = 91
Child Abuse and Neglect Training 2018-2020

Have Received Training in Victimization, Detection, Reporting

- 2018: 42%
- 2019: 49%
- 2020: 48%

Victimization: 57%, 65%, 70%
Detection: 40%, 46%, 50%
Reporting procedures: 42%, 46%, 48%

Have Received Training in Maltreatment, ACEs

- 2018: 46%
- 2019: 53%
- 2020: 62%

Risk factors for maltreatment: 62%, 73%, 82%
ACEs: 46%, 53%, 62%
Child Abuse and Neglect Training 2018-2020

Have Received Training in Protective factors, Trauma-informed care, IPV

<table>
<thead>
<tr>
<th>Year</th>
<th>Protective factors</th>
<th>Trauma-Informed Care</th>
<th>Intimate partner violence (IPV)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2018</td>
<td>64%</td>
<td>71%</td>
<td>46%</td>
</tr>
<tr>
<td>2019</td>
<td>56%</td>
<td>55%</td>
<td></td>
</tr>
<tr>
<td>2020</td>
<td>52%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Agency provides Training

<table>
<thead>
<tr>
<th>Year</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>2018</td>
<td>80%</td>
</tr>
<tr>
<td>2019</td>
<td>79%</td>
</tr>
<tr>
<td>2020</td>
<td>79%</td>
</tr>
</tbody>
</table>
Knowledge of CAN/ Laws

Figure: Confidence in Identifying and Reporting CAN

- Refer clients to resources that best meet their needs
  - Not at all confident: 32%
  - Somewhat confident: 65%
  - Very confident: 13%

- Quickly and successfully report suspected child abuse/neglect to the appropriate authorities
  - Not at all confident: 20%
  - Somewhat confident: 78%
  - Very confident: 2%

- Accurately identify intimate partner violence
  - Not at all confident: 49%
  - Somewhat confident: 45%

- Accurately identify child abuse/neglect
  - Not at all confident: 35%
  - Somewhat confident: 62%
  - Very confident: 5%

Percent Very Confident in Identifying CAN, IPV

- 2018:
  - Very confident accurately identify CAN: 82%
  - Very confident accurately identify IPV: 61%
  - Very confident quickly report CAN properly: 43%

- 2019:
  - Very confident accurately identify CAN: 80%
  - Very confident accurately identify IPV: 59%
  - Very confident quickly report CAN properly: 39%

- 2020:
  - Very confident accurately identify CAN: 78%
  - Very confident accurately identify IPV: 62%
  - Very confident quickly report CAN properly: 45%
Knowledge of CAN/ Laws

Figure: Respondents' Knowledge of ACEs
- Not at all familiar: 4%
- I know a little: 12%
- I know a good amount: 24%
- I am well-informed: 60%

Figure: Respondents' Knowledge of Protective Factors
- Not at all familiar: 9%
- I know a little: 19%
- I know a good amount: 30%
- I am well-informed: 42%

Percent Well Informed
- 2018: 32%
- 2019: 36%
- 2020: 42%

Well informed on ACEs: blue line
Well informed on protective factors: orange line
Perceived Ease/difficulty of Access to Services

<table>
<thead>
<tr>
<th>Service</th>
<th>Usually Easy</th>
<th>Usually Difficult</th>
<th>No Opinion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Services that are appropriate for culture &amp; language</td>
<td>22%</td>
<td>46%</td>
<td>32%</td>
</tr>
<tr>
<td>Sports/recreational programs for children</td>
<td>39%</td>
<td>28%</td>
<td>33%</td>
</tr>
<tr>
<td>Sufficient food, housing, &amp; clothing</td>
<td>40%</td>
<td>40%</td>
<td>20%</td>
</tr>
<tr>
<td>Affordable, quality adult education</td>
<td>41%</td>
<td>26%</td>
<td>33%</td>
</tr>
<tr>
<td>Affordable, quality child education</td>
<td>42%</td>
<td>26%</td>
<td>33%</td>
</tr>
<tr>
<td>Affordable, quality child care</td>
<td>23%</td>
<td>54%</td>
<td>23%</td>
</tr>
<tr>
<td>Services to address concerns for child's social, emotional, and/or</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>behavioral development</td>
<td>52%</td>
<td>33%</td>
<td>15%</td>
</tr>
<tr>
<td>Mental health screening &amp; treatment</td>
<td>47%</td>
<td>38%</td>
<td>15%</td>
</tr>
<tr>
<td>Prenatal health care</td>
<td>60%</td>
<td>16%</td>
<td>25%</td>
</tr>
</tbody>
</table>
Perceived Ease/difficulty of Access to Services 2018-2020
Positive Togetherness during COVID-19 compared to before COVID-19

Figure: Positive Togetherness During COVID-19 Pandemic

<table>
<thead>
<tr>
<th>Activity</th>
<th>More than before</th>
<th>Same as before</th>
<th>Less than before</th>
</tr>
</thead>
<tbody>
<tr>
<td>Helping others together</td>
<td>49%</td>
<td>33%</td>
<td>18%</td>
</tr>
<tr>
<td>Sharing material resources</td>
<td>50%</td>
<td>33%</td>
<td>17%</td>
</tr>
<tr>
<td>Sharing religious or spiritual activities</td>
<td>34%</td>
<td>14%</td>
<td>12%</td>
</tr>
<tr>
<td>Showing affection</td>
<td>43%</td>
<td>48%</td>
<td>9%</td>
</tr>
<tr>
<td>Showing concern or emotional support for each other</td>
<td>63%</td>
<td>26%</td>
<td>11%</td>
</tr>
<tr>
<td>Eating together</td>
<td>65%</td>
<td>24%</td>
<td>11%</td>
</tr>
<tr>
<td>Going on errands together</td>
<td>49%</td>
<td>17%</td>
<td>34%</td>
</tr>
<tr>
<td>Sharing household tasks</td>
<td>59%</td>
<td>32%</td>
<td>9%</td>
</tr>
<tr>
<td>Helping each other</td>
<td>61%</td>
<td>27%</td>
<td>12%</td>
</tr>
<tr>
<td>Facing challenges or solving problems together</td>
<td>58%</td>
<td>27%</td>
<td>15%</td>
</tr>
<tr>
<td>Getting involved in the children’s education</td>
<td>71%</td>
<td>16%</td>
<td>13%</td>
</tr>
<tr>
<td>Doing exercise or fitness activities together</td>
<td>45%</td>
<td>31%</td>
<td>24%</td>
</tr>
<tr>
<td>Engaging in conversation</td>
<td>61%</td>
<td>21%</td>
<td>18%</td>
</tr>
<tr>
<td>Spending leisure time together</td>
<td>62%</td>
<td>15%</td>
<td>24%</td>
</tr>
</tbody>
</table>
Summarized Open-ended Responses to COVID-related Positive Togetherness

**Quality family time** (45)
- Immediate family Being together
- Eating together
- Board games / game nights
- Better communication and understanding each other

**Parents involvement with Child's education** (14)
- Improved parent-child interaction
- Children who struggled at school have improved mental health and behaviors
- Parents desire to work on child's education
- Parents promoting their child's development
Summarized Open-ended Responses to COVID-related Positive Togetherness

Online Education (10)
- Introvert people feel better with remote school
- Positive effect on Mental health due to no school

Improved access to services due to Telehealth (10)
- Improved access to Mental health services

More Creativity In clients.
## Conflicts during COVID-19 Pandemic compared to Before

<table>
<thead>
<tr>
<th>Category</th>
<th>More than before</th>
<th>Same as before</th>
<th>Less than before</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol, tobacco, or drug use</td>
<td>62%</td>
<td>32%</td>
<td>6%</td>
</tr>
<tr>
<td>News or social media</td>
<td>76%</td>
<td>17%</td>
<td>6%</td>
</tr>
<tr>
<td>Privacy or personal space</td>
<td>66%</td>
<td>22%</td>
<td>12%</td>
</tr>
<tr>
<td>Finances</td>
<td>76%</td>
<td>8%</td>
<td>16%</td>
</tr>
<tr>
<td>Work or employment</td>
<td>68%</td>
<td>16%</td>
<td>16%</td>
</tr>
<tr>
<td>Food (what is purchased, meal prep, amount eaten)</td>
<td>63%</td>
<td>26%</td>
<td>11%</td>
</tr>
<tr>
<td>Home maintenance (cleaning or tidying, launder, repairs)</td>
<td>54%</td>
<td>31%</td>
<td>15%</td>
</tr>
<tr>
<td>Decisions about visitors to the home</td>
<td>76%</td>
<td>14%</td>
<td>10%</td>
</tr>
<tr>
<td>Personal hygiene</td>
<td>33%</td>
<td>44%</td>
<td>17%</td>
</tr>
<tr>
<td>Decisions about going out (on errands, to appointments, for visits)</td>
<td>74%</td>
<td>14%</td>
<td>12%</td>
</tr>
<tr>
<td>Decisions about how people should take care of their health</td>
<td>64%</td>
<td>28%</td>
<td>8%</td>
</tr>
<tr>
<td>Children’s schoolwork</td>
<td>79%</td>
<td>13%</td>
<td>8%</td>
</tr>
<tr>
<td>Parenting or child care</td>
<td>72%</td>
<td>18%</td>
<td>10%</td>
</tr>
<tr>
<td>How to spend leisure time</td>
<td>58%</td>
<td>27%</td>
<td>15%</td>
</tr>
</tbody>
</table>
Summarized Open-ended Responses to COVID-related Conflicts

**Family conflicts (50)**
- Differing opinions
- Conflicts regarding handling youth behaviors
- Conflicts on hygiene issues

**Social Isolation (35)**
- More distressing and worsening mental health
- Adults hiding medical issues from loved ones to avoid going to hospitals

**Financial stress (20)**
- Lost jobs
- Less resources, more sharing
- Less resources to support child care
Summarized Open-ended Responses to COVID-related Conflicts

**Limited social freedom (10)**
- Family members have to adjust work or school routine around each other
- Cannot talk freely with friends

**Mental health issues (8)**
- Kids having more down times and less supervision
- Poor mental health

**Family stress**
- Parents have to struggle with work, child watch at home, and remote schooling

**Less technological resources for virtual education /work**
Summarized Perceived Community Strengths (Open-ended Question)

Evidence based home visitation services and child abuse prevention programs (parent PRO, PAT, C1) (50)
  • Evidence based home visitation services (Parent Pro)
  • Evidence based home visitation services (PAT)
  • Home visitation programs

Education (24)
  • For parents and care givers
  • For students
  • For providers

Schools as potential resource (22)
  • Assessment and screening with in schools
  • In-school abuse and neglect education for students
  • Afterschool and summer programs to reduce parental stress
Summarized Perceived Community Strengths (Open-ended Question)

Resources, Support and Access (32)
- Concrete, abundant and free resources.
- Resources that are informed on trauma symptoms, abuse cycles
- Interagency resources

DHS and Red rock (20)

Law Enforcement (7)

Relationships (5)
- Teacher-student, teacher-parent, provider-family relationships

Faith-based organizations, Partnerships, Direct referrals from Providers to Services.
Summarized Perceived CommunityWeakness (Open-ended Question)

**DHS (25)**
- Case load and burnout
- Lack of power or motivation
- Closing offices
- Hard to access via phone calls
- Child protective services come into play on serious incidents to children only

**Knowledge of Services (15)**
- Families don’t know many resources
- Providers lack early detection knowledge

PROMOTE HEALTH, SAFETY & WELL-BEING

OKLAHOMA
Summarized Perceived Community Weakness (Open-ended Question)

Education and Training (18)

• Public education in identifying signs of trauma and abuse
• Parental education about child abuse
• Improper sex education in schools leading to teen/at risk pregnancies
• Lack of preventive education
• Stress management techniques

....
Summarized Perceived Community Weakness (Open-ended Question)

Pandemic
- Unwilling families and distanced further from interaction with provider
- No accountability of families due to home schooling.

Substance abuse support
- Substance abuse and Mental health support
- Treatment centers for under age substance abuse

Cost and transportation are barriers to access of services.
Questions

Any Questions or Comments?

aneeras@health.ok.gov
State Plan Surveys
Community Survey

Amy Dedering, MPH
Program Evaluator, Family Support & Prevention Services
Awareness of Community Resources

- Most aware
  - Insurance/Health Care Resources – 97%
  - Child Care Resources – 89%
  - Employment & Education Resources – 85%
  - Disability Resources; Mental Health Resources – 78%
  - Home-based Services – 72%

- Most unaware
  - Parent Support Programs – 63%
Younger parents were more likely to be unaware of...
- Employment and Education resources
- Mental Health resources

Parents with < college degree were more likely to be unaware of...
- Mental Health resources
- Home-based services

Parents with income < $30,000 were more likely to be unaware of...
- Disability resources
- Home-based services
Unaware of Community Resources, by Survey Year

- **Parent Support Programs**: 35% (2018), 50% (2019), 64% (2020)
- **Home-based Services**: 14% (2018), 18% (2019), 23% (2020)
- **Disability Resources**: 9% (2018), 16% (2019), 28% (2020)
Use of Community Resources

- Most used
  - Insurance/Health Care Resources – 53%
  - Food, Housing, Clothing Resources – 45%

- Younger parents were more likely to have used...
  - Home-based services
  - Concrete resources (food, housing, clothing)

- Parents with < a college degree were more likely to have used...
  - Mostly all services (exception – Child Care resources)

- Parents with an income < $30,000 were more likely to have used...
  - Mostly all services (exception – Child Care resources)
Ease of Access to Community Resources

- **Easiest to Access**
  - Prenatal Health Care – 76%
  - Services appropriate for culture and language – 61%
  - Affordable, quality child education – 60%

- **Most Difficult to Access**
  - Affordable, quality Child Care – 59%
  - Mental Health screening and treatment – 48%
  - Services to address child’s social, emotional, behavioral development – 48%
Ease of Access to Community Resources According to Resource Users

- Easy to Access
  - Parents using Parent Support Programs (64%) or Home-based Services (52%) found resources to address their child’s social, emotional, or behavioral concerns were easy to access.

- Most Difficult to Access
  - Affordable, quality Child Care – 65%
  - Food, clothing, housing resources – 64%
  - Mental Health screening and treatment – 56%
Difficulty with Access of Community Resources, by Survey Year

- Mental Health treatment
- Child Development services
- Child Care

- 2018: 33% Mental Health, 36% Child Development, 33% Child Care
- 2019: 44% Mental Health, 42% Child Development, 40% Child Care
- 2020: 59% Mental Health, 49% Child Development, 48% Child Care
Knowledge of Where to Find Help
Basic Material Resources

- Most Agree
  - Food – 72%
  - Health Care – 63%
  - Finding employment – 53%
  - Clothing – 51%

- Most Disagree
  - Housing – 53%

- Close Agreement/Disagreement
  - Affordable Child Care – 43% agree, 42% disagree
Knowledge of Where to Find Help Mental Health Resources

Most Agree
- Feeling depressed – 58%
- Intimate partner violence – 54%
- Using/abusing drugs or alcohol – 51%

Close Agreement/Disagreement
- Child’s behavior – 44% agree, 47% disagree
- Child abuse, by self or partner – 49% agree, 41% disagree
Knowledge of Where to Find Help Parenting Resources

- **Most Agree**
  - Child’s development – 64%
  - Learn more about parenting – 57%

- **Most Disagree**
  - Home-based services – 50%

- **Close Agreement/Disagreement**
  - Quality child care – 45% agree, 39% disagree
Agreement with Knowledge of Where to Find Help Basic Material Resources, by Survey Year

- Housing: 81% in 2018, 67% in 2019, 55% in 2020
- Affordable child care: 57% in 2018, 35% in 2019, 28% in 2020
- Health care: 64% in 2018, 42% in 2019, 37% in 2020

PROMOTE HEALTH, SAFETY & WELL-BEING
Agreement with Knowledge of Where to Find Help
Basic Material Resources, by Survey Year

- Blue line: providing food
  - 2018: 59%
  - 2019: 62%
  - 2020: 72%

- Orange line: providing children's clothing
  - 2018: 43%
  - 2019: 46%
  - 2020: 51%

- Gray line: finding employment
  - 2018: 54%
  - 2019: 50%
  - 2020: 53%
Agreement with Knowledge of Where to Find Help Mental Health Resources, by Survey Year

- Feeling depressed:
  - 2018: 64%
  - 2019: 45%
  - 2020: 58%

- Substance use/abuse:
  - 2018: 46%
  - 2019: 35%
  - 2020: 44%

- Problematic child behavior:
  - 2018: 57%
  - 2019: 31%
  - 2020: 51%
Agreement with Knowledge of Where to Find Help Mental Health Resources, by Survey Year

- **Child abuse & neglect**
  - 2018: 67%
  - 2019: 36%
  - 2020: 54%

- **Intimate partner violence**
  - 2018: 54%
  - 2019: 35%
  - 2020: 50%
Agreement with Knowledge of Where to Find Help Parenting Resources, by Survey Year

<table>
<thead>
<tr>
<th>Year</th>
<th>Child Development</th>
<th>Parenting</th>
<th>Home-Based Services</th>
<th>Quality Child Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>2018</td>
<td>66%</td>
<td>52%</td>
<td>50%</td>
<td>37%</td>
</tr>
<tr>
<td>2019</td>
<td>55%</td>
<td>46%</td>
<td>38%</td>
<td>37%</td>
</tr>
<tr>
<td>2020</td>
<td>65%</td>
<td>57%</td>
<td>45%</td>
<td>39%</td>
</tr>
</tbody>
</table>
Knowledge of Child Abuse & Neglect

- Most Respondents
  - Disagreed that it’s necessary to hurt their partner – 97%
  - Agreed they know how to report CAN to the appropriate authorities – 87%

- When comparing by parent education level
  - Higher education were more likely to have reported CAN
  - Higher education more likely to be familiar with Oklahoma’s CAN laws
Knowledge of Child Abuse & Neglect, by Survey Year

- **agree it's necessary to physically discipline child**
  - 62% in 2018, 53% in 2019, 48% in 2020

- **have reported CAN**
  - 38% in 2018, 22% in 2019, 30% in 2020

- **have current CAN concern**
  - 13% in 2018, 14% in 2019, 12% in 2020
Family Life - Stress

- I feel overwhelmed by stress
  - Rarely – 31%
  - Sometimes – 53%
  - Often – 16%

- When comparing by parent age
  - Older parents were more likely to report ‘rarely’ being overwhelmed by stress when compared to younger parents
Family Life – Feeling Overwhelmed by Stress, by Survey Year

- Rarely: 24% (2018), 31% (2019), 16% (2020)
- Sometimes: 38% (2018), 46% (2019), 15% (2020)
- Most of the time: 44% (2018), 53% (2019), 15% (2020)
<table>
<thead>
<tr>
<th>Positive Comments on Stay at Home Request</th>
</tr>
</thead>
<tbody>
<tr>
<td>- More time together</td>
</tr>
<tr>
<td>- More time at home</td>
</tr>
<tr>
<td>- More outdoor time</td>
</tr>
<tr>
<td>- Education and learning</td>
</tr>
<tr>
<td>- Health</td>
</tr>
<tr>
<td>- Mental Health</td>
</tr>
<tr>
<td>- Related to Covid-19</td>
</tr>
<tr>
<td>- More discussions with family</td>
</tr>
<tr>
<td>- More playtime</td>
</tr>
<tr>
<td>- Less distractions</td>
</tr>
<tr>
<td>- Cooking/baking/eating meals together</td>
</tr>
<tr>
<td>- Awareness of effects we have on others</td>
</tr>
<tr>
<td>- Working from home</td>
</tr>
<tr>
<td>- Saved money from less driving and outings</td>
</tr>
<tr>
<td>- Less rushing to activities/events/social obligations</td>
</tr>
<tr>
<td>- Using technology to stay connected</td>
</tr>
<tr>
<td>- Helping family/friends experiencing financial difficulties</td>
</tr>
</tbody>
</table>
Comments on Challenges from Stay at Home Request

- Concerns for children
- Online learning concerns
- Mental Health concerns
- Physical health concerns
- Increased stress
- Family concerns
- Covid-19 concerns

- Financial concerns
- Unable to attend/host social functions
- Many activities/places were unavailable
- Shortages of certain items
Survey Strengths and Challenges

2020 Community Survey Strengths
- Large number of participants – 1,221
- Almost every Oklahoma county represented – 88%
- Larger percent of...
  - younger parents
  - parents with young children (birth to 2 years)

2020 Community Survey Challenges
- Continue to have more older parents and parents with older children than young parents and parents with young children

PROMOTE HEALTH, SAFETY & WELL-BEING
Any Questions or Comments?

amyd@health.ok.gov
Deborah Shropshire, MD, MHA
Director, Child Welfare Services
Oklahoma Human Services
Child Welfare Services True North Goals

- Equip and empower families to provide a safe home for their children
- If children enter foster care, understand and meet their specific needs. This includes their need for safety, connections with family, community and culture, and addressing health, behavioral health, developmental, and educational needs.
- Aggressively pursue the belief that every child and youth deserves a family and the supports they need to grow and develop into healthy adults
Financing Streams that Support Prevention for Children and Families

- **Title IV-E Prevention dollars**
  - Specific services to meet the needs of families involved with child welfare where children are candidates for and at risk of placement in foster care.

- **Title IV-B Child Abuse Prevention and Treatment Act (CAPTA)**
  - Targeted services to meet the additional needs of some families with children including mitigating risk factors associated with abuse and neglect.

- **Social Services Block Grant**
  - Specific resources and services that are available to families with low-income in order to help meet their basic needs.
  - TANF
  - SNAP
  - Medicaid

- **Earned Income Tax Credit**
  - Resources and services available to many families in the community, some of which are tied to income while others are not.
  - Child Tax Credit
  - Maternal, Infant, and Early Childhood Home Visiting (MIECH-V)

- **Public K-12 Education**
  - Universal resources and services that are available to all families in the community.
  - Universal Pre-K
  - Public Health Programs
  - Public Recreation Programs

**PROMOTE HEALTH, SAFETY & WELL-BEING**
Who is Eligible?

- A “child who is a candidate for foster care” (as defined in section 475(13) of the Act),
  - A child with a parent who is at risk of imminent placement in foster care, but can remain safely at home or in a kinship placement with prevention services
  - A child who exited foster care to adoption or legal guardianship, or who was reunified with his or her parents and are at risk of re-entering foster care

- Pregnant and parenting youth in foster care, and

- The parents/kin caregivers of those children and youth (sections 471(e), 474(a)(6), and 475(13) of the Act).
Oklahoma Title IV-E Prevention Services

Factors to consider when selecting EBPs for FFPSA

- **Need** - match to target population
  - Addresses service/system gaps

- **Fit** - match to value, culture, and state priorities

- **Capacity** to implement (or expand availability)
  - Case-level decision-making to refer for EBPs
  - Provider availability
  - Administrative requirements
  - Evidence-implications for required evaluation and CQI

- **Feasibility**
  - Payer of last resort: If public or private providers (private health insurance or Medicaid) would pay for a allowable service under the Title IV-E prevention program, they have to pay for these services before the Title IV-E agency.
There are 3 models of home visiting programs offered via CWS Prevention:

- SafeCare (CHBS): 2 providers serve statewide
- Intensive Safety Services (IV-E Waiver Project): 2 providers serve statewide (w/limitations due to capacity)
- Youth Villages: 1 provider serves Oklahoma, Canadian, Logan, Cleveland, Pottawatomie and Lincoln, Tulsa, Creek, Rogers, Mayes, Washington, Okmulgee, and Muskogee counties

These programs are offered through Family Centered Services (FCS) cases. CWS served 2012 families/6288 children in SFY19 through FCS.
Oklahoma Primary Prevention Services

- There are 3 models of home visiting programs offered via Primary Prevention:
  - Parents As Teachers (Start Right): 17 programs in 30 counties
  - Nurse Family Partnership (Children First): 7 programs in 65 counties
  - SafeCare (augmented): 3 programs in 5 counties (Oklahoma & Tulsa County)
    Cherokee Nation (Mayes, Cherokee, and Adair)

- These programs served 2,865 families/2,494 children in SFY19
  (OK Home Visiting Annual Outcomes Report)
  - NFP served 1,304 families/1,055 children (Children First Annual Report)
  - PAT served 386 (OCAP Annual Report)
  - SafeCare served 233 families in Oklahoma and Tulsa Counties (Dr. Silovsky)

- PAT & SafeCare are via contractors and NFP is through the health department
Thriving Families/Safer Children

- National “movement” around child abuse prevention and strengthening families
- Collaboration between Children’s Bureau, Casey Family Programs, Annie E. Casey, and Prevent Child Abuse America
- State/county/Tribal jurisdictions included
- Specific focus areas include:
  - Co-design with those who have lived expertise
  - Addressing diversity and equity
Thriving Families/Safer Children

- Oklahoma was accepted for round 2
- Vision: Oklahoma has a vision to reduce or eliminate the amount of trauma experienced by individuals, heal and strengthen families and communities, and build alternative supports so that foster care is no longer an intervention for child safety and well-being
Thriving Families/Safer Children

• Strategies:
  • Shift financial resources to prioritize primary, secondary, and tertiary prevention at least as much as we do foster care and adoption
  • Create a child and family well-being network grounded in the science of hope
  • Create structures for leadership and co-design with “lived” experts using human centered design principles
  • Aggressively work to dismantle systemic racism and other barriers to equitable access
Thriving Families/Safer Children

- Oklahoma’s assets
  - Child welfare reform success
  - IV-E waiver/prevention of foster care success
  - SAT and CSAW
  - TIC task force work
  - Depth of academic engagement around ACES
  - OPSR and CAP strategic plans
  - IDTA around maternal substance use
  - Hope Centers
  - Cross agency collaboration
Oklahoma Child Welfare Services

Jimmy Arias, MSW
Program Administrator
Continuous Quality Improvement
Child Welfare Services Oklahoma Human Services
Jimmy.Arias@okdhs.org
405-213-4532
Oklahoma Child Welfare Services

CHILD AND FAMILY SERVICES PLAN (CFSP)

- A strategic plan that sets forth a State’s vision and goals to strengthen its child welfare system

ANNUAL PROGRESS AND SERVICES REPORT (APSR)

- An annual update on the progress made by states toward the goals and objectives in their CFSPs and outlines the planned activities for the upcoming fiscal year.
OKDHS CWS CFSP: GOAL 1

Decrease the number of unnecessary family disruptions by increasing prevention efforts in order to strengthen families, prevent child maltreatment, and keep children safely in their own homes.
<table>
<thead>
<tr>
<th>MEASURE</th>
<th>BASELINE</th>
<th>PERFORMANCE</th>
<th>TARGET</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foster Care Entry Rate Per 1000</td>
<td>5.3</td>
<td>4.7 (FFY19)</td>
<td>4.0</td>
</tr>
<tr>
<td>Families who receive preventative/FCS services</td>
<td>2,024</td>
<td>2,024 (FFY19)</td>
<td>2,500</td>
</tr>
<tr>
<td>Absence of maltreatment in care</td>
<td>99.08%</td>
<td>99.19% (ending Mar 2020)</td>
<td>99.68%</td>
</tr>
<tr>
<td>Services to protect children in home and prevent removal or re-entry into foster care</td>
<td>51.06%</td>
<td>69.79% (ending Mar 2020)</td>
<td>95%</td>
</tr>
<tr>
<td>Risk and safety assessment and management</td>
<td>18.46%</td>
<td>40.77% (ending Mar 2020)</td>
<td>95%</td>
</tr>
</tbody>
</table>
CFSP GOAL 1: OBJECTIVES

- Increase use of Intensive Safety Services and other well supported/promising services to keep children in their home.
- Increase access to evidence-based programs and services to support and prevent maltreatment and unnecessary family separation.
- Improve the quality of safety decisions through enhanced policy followed by training and support to the field.
- Complete qualitative MIC Reviews for a portion of unsubstantiated investigations and for all substantiated investigations. Compile, analyze, and share data of reviews to regional staff for practice improvement efforts.
- Supervisor utilization of the three key strategies of the Supervisory Framework to support staff in critical decision-making.
CQI will partner with other CWS programs to compose combined reviews over statewide and regional practices, sharing data back to the regions to identify areas of focus.

Increase completion of Family Service Agreement (FSA) at time of Safety Plan creation ensuring services are timely, flexible, coordinated, accessible and are organized as a continuum, linked to a wide variety of supports.

Enhance family meeting continuum to improve the assessment of child safety and increase family involvement early on and throughout the life of the case through child safety meetings (CSMs), Initial Meetings (IMs), and ongoing family meetings.

Increase community collaborative with OSDH, ODMHSAS, and the Court Improvement Project (CIP) utilizing mental health consultants as a liaison between local CWS district offices and community service providers to increase preventive and ongoing services.
OKDHS CWS CFSP: GOAL 2

Decrease trauma experienced by a child who enters the child welfare system by ensuring stability of placement, enhancing family engagement and decision-making, decrease maltreatment in care, and enhancing efforts to achieve timely permanency.
<table>
<thead>
<tr>
<th>MEASURE</th>
<th>BASELINE</th>
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<th>TARGET</th>
</tr>
</thead>
<tbody>
<tr>
<td>Two or fewer placement settings for children in care for less than 12 months</td>
<td>79.8%</td>
<td>79.2% (FFY20)</td>
<td>88%</td>
</tr>
<tr>
<td>Two or fewer placement settings for children in care for 12 to 24 months</td>
<td>61%</td>
<td>63.4% (FFY20)</td>
<td>68%</td>
</tr>
<tr>
<td>Two or fewer placement settings for children in care for 24+ months</td>
<td>33%</td>
<td>35.4% (FFY20)</td>
<td>42%</td>
</tr>
<tr>
<td>Initial placement as kinship</td>
<td>47.2%</td>
<td>52.3% July-Dec 2020</td>
<td>55%</td>
</tr>
</tbody>
</table>
## OKDHS CWS CFSP GOAL 2: Data Measures Continued

<table>
<thead>
<tr>
<th>MEASURE</th>
<th>BASELINE</th>
<th>PERFORMANCE</th>
<th>TARGET</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reunification in less than 12 months</td>
<td>55.5%</td>
<td>56.3% (Ending Mar 2020)</td>
<td>69.9%</td>
</tr>
<tr>
<td>Guardianship in less than 18 months</td>
<td>59.8%</td>
<td>63.5% (Ending Mar 2020)</td>
<td>65%</td>
</tr>
<tr>
<td>Adoption in less than 24 months</td>
<td>45.9%</td>
<td>47.8% (Ending Mar 2020)</td>
<td>54.5%</td>
</tr>
<tr>
<td>Absence of maltreatment in care</td>
<td>99.08%</td>
<td>99.19% (Ending Mar 2020)</td>
<td>99.68%</td>
</tr>
</tbody>
</table>
CFSP GOAL 2: OBJECTIVES

- Enhance focus on ensuring as many supports and connections are present during CSMs and IMs. Ensuring that not only are meetings scheduled within policy, but that they are of good quality.
- Ensure resource parent check-in calls and Child and Resource Support Plans are completed and of good quality.
- Implement strategies of CWS resource recruitment and retention goals.
- Continued focus on enhanced safety discussion and collaboration, and consistency of safety decisions made across all programs, including Foster Care and Adoptions.
- Supervisor utilization of the three key strategies outlined in the Supervisory Framework to support staff in critical decision-making.
- Monitor and enhance contracts of Systems of Care and mobile response to ensure that if a child in foster care is in crisis, appropriate services can be provided without disruption to the child’s placement.
Increase use of the Care Portal to access resources for resource homes to meet needs.

Improve collaboration and communication with contracted RFP’s, by including RFPs in CW training pertaining to safety, permanency, and well-being outcomes as well as include RFPs as key stakeholders to inform and support updates to safety practices.

Use of CBHS for children in out-of-home care to assess child's educational, developmental, physical, and mental health in the resource home and to ensure service referrals are sent timely.

Focus Actively Seeking KINnections (ASK) efforts within each region to enhance strategies in building permanent connections and locating family for the child in DHS custody.

Develop a parent stakeholder group to gather and apply feedback from parents and relatives in improving ASK efforts.
CFSP GOAL 2: OBJECTIVES Continued

- Complete qualitative MIC Reviews for a portion of unsubstantiated investigations and all substantiated investigations. Compile, analyze, and share data of reviews to regions for practice improvement efforts.
- Enhance communication between programs involved with resource families in use of resource alerts, written plans of compliance, screen-out consultations, injury alerts, and ten-day staffings.
- Provide ongoing training for staff surrounding quality worker visits with children and parents and use of qualitative reviews of quality worker visits to inform practice.
- Make changes within the KIDS system to reflect expectations of parent visitation.
- Use of Permanency Safety Consultations (PSCs) to assess safety in a team approach at key junctures of the case and throughout the life of the case while the case plan goal is reunification.
- Use qualitative reviews and ongoing training of outcomes of Initial Meetings and resource placement calls.
- Continue ongoing collaboration with CIP to engage staff in barriers with the court and improve relationships with court partners.
OKDHS CWS CFSP: GOAL 3

Decrease trauma experienced by a child who enters the child welfare system by ensuring stability of placement, enhancing family engagement and decision-making, decrease maltreatment in care, and enhancing efforts to achieve timely permanency.
<table>
<thead>
<tr>
<th>MEASURE</th>
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<th>TARGET</th>
</tr>
</thead>
<tbody>
<tr>
<td>Families have enhanced capacity to provide for their children’s needs, includes services of child, parents, and foster parents</td>
<td>21.54%</td>
<td>35.38% (Ending Mar 2020)</td>
<td>95%</td>
</tr>
<tr>
<td>Percent of children receiving a CBHS in accordance with policy</td>
<td>66.7%</td>
<td>60.2% (Ending Mar 2020)</td>
<td>98%</td>
</tr>
<tr>
<td>Improvement of children’s social and emotional functioning as compared to their own baseline and throughout the duration of service provision</td>
<td>To be created</td>
<td>To be created</td>
<td>To be created</td>
</tr>
<tr>
<td>Percent of families who complete (FCS) and do not have a subsequent removal or unsafe finding within 12 months</td>
<td>95.08%</td>
<td>97.1% (Ending Mar 2020)</td>
<td>97%</td>
</tr>
<tr>
<td>Percent of children needing an intervention and served in FCS</td>
<td>25%</td>
<td>49.9% (Ending Mar 2020)</td>
<td>50%</td>
</tr>
</tbody>
</table>
**CFSP GOAL 3: OBJECTIVES**

- Enhance family-centered practices by utilizing services that are focused on the family as a whole and are developmentally and/or culturally appropriate. Utilize service providers that will work with families as partners in identifying and meeting needs and strengthening families.

- Evaluation of providers understanding of children, families, and resource parents needs and effectiveness of services provided through information gathered by community stakeholders during the annual stakeholder meetings in partnership with OSDH and CIP.

- Support and enhance a competent, skilled, and professional trauma-informed workforce to identify and meet the needs of children and families; determining the appropriateness of the services array and broader CW decision-making and case planning.

- Utilize outcomes from CFSR reviews to inform and enhance the quality and timeliness of the Child Behavioral Health Screener to better serve the needs of children.
CFSP GOAL 3: OBJECTIVES Continued

- Effectively use IMs to support family involvement in assessing needs of the child and resource family by identifying and providing appropriate services to support placement stability.

- Build community partnerships with the education system through school-based social workers to adequately identify appropriate prevention services for children and families in need.

- Utilization of Early Periodic, Screening, Diagnosis, and Treatment (EPSDT) to identify and link through referral for necessary medical and behavioral health treatment.

- Utilization of an evidence-based screener to determine appropriate treatment needs of children and families.
Next Steps

The Oklahoma State Department of Health and Oklahoma’s Child Welfare Team will continue to work together on promoting health, safety, and well-being of children, youth, and their families through the prevention continuum aimed to increase protective factors and strengthen families.

We look forward to our continued collaboration with you!

SAVE THE DATE:
2021 Biannual Oklahoma State Plan for the Prevention of Child Abuse & Neglect & Oklahoma Human Services, CWS CFSP & Title IV-E Prevention Program Plan Review and Stakeholder Engagement
  – Thursday, October 14, 2021 (Time & Format TBD)
Contact Information:

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