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1990 FACT FIND Child Abuse Prevention Programs [s]

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PREVENTING CHILD ABUSE SAVES \$\$\$

"Child and family interventions are best conceptualized as a combination of strategies designed to both improve personal competencies and enhance social supports..."

E. M. Tracy and J. K. Whitaker. The Evidence Base for Social Support Interventions in Child and Family Practice: Emerging Issues for Research and Practice. Children and Youth Services Review 9:249-270, 1987.

...an infant with a fractured skull and significant brain damage who becomes a ward of the state and in an institution for mentally retarded will during its lifetime cost the state and our taxpayers about three quarters of a million dollars.

That amount of money, spent before abuse occurred, could pay for family-based services for a significant number of people. Because we are only willing to spend money after a crisis, we end up spending a lot more money than we need to.

Current programs for abuse situations are characterized by intensive, costly services that aim to "fix" what has been broken. It is clear that preventive services are a cheaper, less intrusive, more humane solution.

Effective models of preventive service delivery for high risk families have been demonstrated around the country. These programs are characterized by combining school readiness programs, family support programs, and intensive child care resources to create an environment to empower parents.

GOOD PROGRAMS ARE NOT HARD TO FIND

in South Carolina . . .

the Welcome Baby program, designed by the South Carolina Council on Child Abuse and Neglect, offers support and education to new parents and identifies and provides extensive

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support to new parents who seem potentially dysfunctional. Volunteers initially contact the new parents in hospital and continue care with telephone contact, home visits, and mailings throughout the first year of parenthood. This model's cost effectiveness, flexibility and possible adaptation mean it could be used within many community settings.

In Hawaii . . .

the Hawaii Family Support System (FSS) is a community-based, multi-disciplinary program designed to prevent child abuse and neglect, enhance parent functioning and child development in a multi ethnic/cultural environment. FSS relies upon public and private human service communities working together. Having evolved from three to fourteen program sites and from full federal to full state funding, daily implementation of programs are contracted with seven private community agencies. Benefits include: systematic and early involvement of health, social, and educational agencies with at-risk families; a decrease of child abuse among children 0-5 years; early identification of developmental delays among at-risk populations; and reduction of cost of treatment of families experiencing family violence.

In Minnesota . . .

the STEEP (Steps Toward Effective, Enjoyable Parenting) Program, developed by the University of Minnesota, incorporates a variety of strategies to promote healthy family interaction and development. A key component is home visits by a "family life facilitator" beginning in the second trimester of pregnancy, which continue until the babies are a year old. The program also provides group sessions for the mothers, providing support and encouraging problem-solving. The facilitators teach child care skills and help the new parents to understand infant development. Other family members or friends are encouraged to attend the home visits with the new parent.

In Kentucky . . .

Kentucky's Parent and Child Education (PACE) promotes family literacy improvement. The program seeks to provide under-educated parents with basic skills to both improve employability and to enable them to serve as better education models for their children. Parents participate in adult education classes while their three to four-year old children attend a pre-school program next door. At the end of the program's first year, three-quarters of the parents and their children had completed the PACE program. 70% of the adults had either earned GEDs or increased two grade levels. The program both addresses the needs of two generations and serves to strengthen families and steer them toward greater self-sufficiency.

In Washington . . .

Childhaven, a therapeutic day care program in Seattle, is situated in a low-income, decaying neighborhood. Each morning, childcare workers make the rounds to pick up the children, extending the formal program into the family environment. This allows a realistic appraisal of parent-child interaction, of how the parent is functioning, and an evaluation of the child's

environment. Parents receive practical parent education including transportation, casework support, and parent support groups. This bridge between formal and informal support fills a critical gap for families with little or no social networks. The children are assessed regularly and early estimates, based on 142 children, show that 69% had improved in problem areas when they withdrew from the program.

In Massachusetts . . .

Boston's Healthy Baby and Healthy Child program, using a network of 12 neighborhood clinics and two hospitals with strong adolescent clinics, is a cooperative network. Goals include good prenatal and postpartum care, positive maternal functioning, and counseling. Mothers considered still to be high-risk are referred to the Healthy Child program which provides each family with a public health nurse and neighborhood advocate for the first two years of the child's life. Results include a lowering of the infant mortality rate, low birthweight babies have decreased and the gap in infant health outcomes has narrowed between black and white families.

In Colorado . . .

Colorado's Community Infant Project (CIP) creates an individualized program for each family to boost parent functioning and skills. In a failure-to-thrive case, the CIP costs were \$654 over a four-month period. A similar case cost the Department of Social Services \$8,128 (including a necessary out-of-home placement, hospitalization, case worker, attorney and court involvement).

In Washington . . .

Family Support Project-Homebuilders was created by the University of Washington, School of Social Work. This project is designed to establish, maintain and strengthen social support resources for those families typically isolated from such resources.

FACT FIND SUGGESTS:

For Minnesota..

More programs to provide intensive family support services.

A system for coordination and integration of existing programs.

Training for people from many disciplines who influence the care that parents provide for their babies and small children.