

Child Welfare Information Gateway Podcast
Prevention: Evaluating State-Wide Prevention TRANSCRIPT

Presenters: Female Narrator; Tom Oates, Child Welfare Information Gateway; Hillary Konrad, California Department of Social Services

[00:00:00]: [Music Introduction]

FEMALE NARRATOR [00:00:02]: This is the Child Welfare Information Gateway Podcast, a place for those who care about strengthening families and protecting children. You'll hear about the innovations, emerging trends and success stories across child welfare direct from those striving to make a difference. This is your place for new ideas and information to support your work to improve the lives of children, youth, and families.

TOM OATES [00:00:33]: Well thank you once again for joining us here on the Child Welfare Information Gateway podcast, I'm Tom Oates. We are wrapping a series of episodes focusing on the Community-Based Child Abuse Prevention grantees. And this episode complements another episode we launched in tandem. Now, both these episodes dive into effective evaluation of prevention programs. Now, the other episode looks at effective program evaluation and looks at evaluating a single program; we spoke with members of Kentucky's Division of Prevention and Permanency showcasing the various forms of evaluation used and data feedback to measure a family's improvement, monitoring across regions to measure the outcomes from a particular program and also how they are using all of that information to support continuous quality improvement. But what about evaluating across a region where different programs are being implemented to address different needs? How can you evaluate the entire region – or an entire state – with so many variables?

[00:01:34]: Well this episode investigates the evaluation across an entire state - across the State of California. Hillary Konrad is with the California Department of Social Services' Prevention Network Development Unit and her team's task is attempting to take a statewide view of prevention. Now, keep in mind we're talking about a state with dense, large population centers like Los Angeles and the San Francisco Bay area, and rural counties in the far northern and the far eastern desert parts of the state. So not only are they dealing with different demographics, but they're also dealing with different needs among those families served, and different resource challenges among the agencies serving those families. We chat about the tools being used to help establish consistency across the counties, developing a statewide baseline to evaluate prevention efforts, and the collaboration needed with each of the counties. Remember, California is a county-administered state, so that presents a separate challenge with relevance to CBCAP grantees – how CBCAP funds are administered across California in the first place. And that's where we begin our conversation with Hillary Konrad. Before diving into statewide evaluation of prevention efforts, we explain how California applies CBCAP funds to get it all started.

HILLARY KONRAD [00:02:52]: There are actually two ways that we administer the funds. One is statewide grants and currently those are focused on financial literacy, innovative partnerships, parent leadership and calculating the economic cost of child abuse. But then, in addition to that, we also have some funding that we allocate to the 57 counties. One county in California actually opts out, San Bernardino. But, as we allocate those dollars, they have to, they have the opportunity to choose how they're going to spend that funding in order to meet the needs of their community.

TOM OATES [00:03:30]: So, then let me pull on that because, again, maybe the most diverse state in the union, arguably to talk about different needs for different counties considering what's needed in LA or the Bay area can be different than say a San Bernardino county or high Northern California. How is the

state then trying to assess and identify the needs for each of those counties to maybe direct where those, where that funding goes?

HILLARY KONRAD [00:03:57]: So, there's a federal process - the Children and Family Services review and we've modeled that process, calling it the California Children and Family Services Review. So, each county has to walk through that process and in that process, they do a county-wide self-assessment and that self-assessment is looking at everything from the demographics of their child population and also the kids that are in care, as well as systemic factors including how is child welfare and probation functioning. They also look at the services that are being provided across the entire county with the whole goal of looking at which populations do they need to focus on more, have they possibly not even considered this population's needs and also just looking at the services. So, those gaps in the service array that need to be addressed.

[00:04:55]: So, because each county walks through that process, as they're walking through that process, they're thinking about how are they going to use OCAP funds - our prevention dollars - to meet some of these needs of the populations that they may not be serving and also how to address some of those gaps.

TOM OATES [00:05:13]: Is that decision solely made up by the county or does the state have any influence or any guidance for those funds?

HILLARY KONRAD [00:05:20]: The state, we're actually supporting and walking them through that. They do have a program description template that they basically explain in layman terms what is this program and then they have to say what need it's supposed to be addressing, whether that is poverty, mental health, parent education, whatever may be missing in their community and their county and then also, how they're evaluating the program. So, we're really trying to help them understand all the time, okay your desired outcome may be building protective factors, how are you measuring and assessing that so you know your program is actually being effective?

TOM OATES [00:06:00]: Yeah, I think anybody who is dealing with CFSRs at a statewide level can understand that for a place like California to implement that on a county by county-wide level not only is something that can lead up to where are you going, how do you know you're gonna get there when it comes to success, but then also the challenge that California has in trying to manage each of these different needs which have to be incredibly diverse. And so, I wanna kind of pull on that difference about, like a statewide evaluation versus a program evaluation, because clearly we've heard from Kentucky how they're able to dive into the data on a program. But, since you've got so many diverse needs with all of these different counties and multiple programs that are gonna go for each of those counties or even two counties that have the same need maybe doing something different - what can be done at a statewide level like this to really have some effective evaluation?

HILLARY KONRAD [00:06:57]: That's a really good question and we're always trying to figure it out. But, we've decided it's really addressing the social determinants of health and looking at community change within each county and then as the state as a whole. So, we've tried to come up with ways in essence to measure prevention by looking at the social determinants of health. So, basically, you know, poverty, the socio-economic status, health, substance use, violence, service access, racial disproportionality in the area. So, just giving the counties ways to measure because prevention is not typically something that you're able to measure and if we're able to give each county those measurements, then we can look at the state as a whole.

TOM OATES [00:07:47]: So, with that you've gotta create a sense of where you are and where you want to go. So, with that, it sounds like - and you and I had talked earlier before this about a prevention data dashboard and kind of setting that baseline to then watch and measure progress. Walk me through the dashboard and what's included and who are the folks that actually get to use that dashboard?

HILLARY KONRAD [00:08:10]: So, the dashboards were created as a way to elevate prevention within the California Child and Family Review process because you have the federal measures, right, but those are not focused on prevention. So, we came up with the dashboards as a way to help the county and us to look at the state as a whole. So, the dashboards is taking data from public sources all over the place and putting it in one location. And, it includes different, as I mentioned, social determinants of health and then within each social determinant of health, we have five to eight data indicators.

[00:08:49]: So, as I mentioned before, we have one that's focused on the demographics, the socio-economic status, health, substance use, violence, service access, child welfare. So, on the website, you can click on your particular county or you can click on California and see what is happening for each one of these social determinants of health. It's also, the counties like to compare themselves to the entire state, so it's a way for them not only to look at each other, but to look at themselves compared to the entire state.

TOM OATES [00:09:25]: So, then when you do look at those measures, are the counties able to kind of crosswalk between the data that they're seeing on the dashboard, or even from the sources that you mentioned that feed into the dashboard, and make a connection between the programs that they may be using or the actions they may be taking? Is there a possibility for them to go, yes, we've implemented these steps, we've done these specific things and we can see the results are maybe a direct correlation or is a lot of this, unfortunately - and maybe even fortunately to say, you know, this has to be something we have to infer, based on these aspects or maybe other aspects and just kind of saying, this is our data as a whole, as opposed to saying the program led to this specific improvement?

HILLARY KONRAD [00:10:10]: Correct, it's something you have to infer, we can't directly correlate, due to the fact that there's so many other variables that are happening, but it is a way for them to just look at how their county or the state is functioning as a whole and since these are new dashboards, our hope would be that they'd look at them now as their baseline and then in five years from now, they'd look at it again to see if anything has changed since they've implemented new prevention programs.

TOM OATES [00:10:38]: And when were the dashboards implemented?

HILLARY KONRAD [00:10:40]: Last year.

TOM OATES [00:10:41]: Okay.

HILLARY KONRAD [00:10:42]: Yeah.

TOM OATES [00:10:43]: Walk me through again, you mentioned literally, a number of different factors - those indicators of health - so where are the data that you're pulling to demonstrate that for the dashboard? Some of them clearly can be, you mentioned, public sources, so if another state or another

region that may be looking to do something similar, what kind of public data are you able to pull to make something like this, you know for another state that may want to implement this as easy as they could - what are the sources that you're able to provide that you find valid to share with the counties?

HILLARY KONRAD [00:11:18]: There's several, but I can definitely list off some. For the demographics dashboard, for example, we pull data from the census, that was pretty much the main source that we used there. For the socio-economic status, we pulled data from Feeding America, the California Department of Education, the Bureau of Labor Statistics. For health, we pulled information from the National Center for Health Statistics, the Behavioral Risk Factors Surveillance System, some information from CDC, Maternal and Infant Health Assessment Survey. And then, for substance use, there's information from the Office of Statewide Health Planning and Development, California Healthy Kids Survey, California Department of Public Health. So, basically all over the place, really. That is information that we'd definitely be willing to share if another state was interested in which data sources we used.

TOM OATES [00:12:20]: Yeah, how to pull and how to determine, you know, what data is useful for the direction that you wanna go. You mentioned that counties will want to compare themselves against the state and potentially compare themselves against, you know, sister counties with similar needs, but, in terms of consistency - because you've got differing needs and you know, maybe different resources and challenges with each of the counties - how are you able to establish consistency across each of the counties to kind of measure that statewide effectiveness? Could you walk me through, I mean what are there, are there tools that you're using to kind of say, alright, if we implement this across the state, we can get some consistency?

HILLARY KONRAD [00:13:03]: We are trying our best. One of them is the Protective Factor Survey, which is basically, how are we building protective factors within the families that we are serving, right? And, that survey is free, so it's something that we encourage counties to use. And at this point, we are working with FRIENDS to develop a database so we can collect that data statewide. And if we have providers that are using the Protective Factors Survey, I'm going to be able to see what the results were from the pre to post. So, this will be the first time that we have a measure for the entire state to look at. We're piloting with LA to start, because they are our largest county and they're serving the most and we'll see how that goes, but the hope would be that eventually we can see that data for the entire state.

TOM OATES [00:13:59]: You had mentioned that there's a pre-prevention readiness assessment tool.

HILLARY KONRAD [00:14:03] I did.

TOM OATES [00:14:04]: That sounds pretty simple, like, alright, let's just check and see are they ready for the implementation or are they ready for programs - how is that used across counties and systems?

HILLARY KONRAD [00:14:14]: So, another initiative that we've started which is a way for us to look at prevention at a different level and then also a way to start integrating systems within counties and it's also a way for us to measure prevention among the counties and eventually the state as a whole, we started, it's basically county-wide prevention planning. And the idea is that you're taking service sectors that typically would not, would function in silos and now they're working together and not only just working together and collaborating, but integrating. So, coming up with a shared vision, a shared mission of how they want to create community change, how they want to they want to impact the social

determinants of health in their county, but as a group, they're looking at all the data and the current plans that are happening and coming up with their own strategic plan for prevention.

[00:15:15]: So, part of that was coming up with a pre-prevention readiness assessment so the team could look at themselves and say, okay, this is where our county currently is at. Now, in six months, let's take this tool, take the assessment again or in a year and see if our investment, if we've actually made headway, how has our vision changed, have we added community partners, do we feel that our service array is more robust than it was, our service is more coordinated. So, it's a way for the team itself can see is this planning that is happening working and it's also a way for us as a state to know how we can support these different teams that are functioning in the counties.

TOM OATES [00:16:02]: It's also gotta be able to provide the counties a look at, alright, where do we need to focus on? If they're asking the right questions, not only does it give you a sense of, how far have we traveled and have we gone in the right direction, but maybe where else do we need to really focus our energy? You mentioned things like partnerships or specific actions that need to be taken, because if you ask the right questions hopefully the gaps start to appear and then you can address those specific needs as opposed to just blanket pouring resources into efforts that either aren't working or that don't need additional resources to support the work.

[00:16:39]: So, walk me through, again, let's go through this and I'm asking you to do a lot of walking with me as I'm trying to go through this of how you established or how you were able to get collaboration across these teams to not merely focus on, well, this is my county and this is how we do things and we know we're different than them, so, you know, let them do their thing and we'll do our thing. Were you able to get buy-in pretty easily or was there a challenge to kind of get the groups to work together?

HILLARY KONRAD [00:17:07]: It's been quite the journey. So, last January, we hosted a prevention summit and we asked teams to, or counties to put together teams of about ten people, but they needed to be across the service sector, right, so we need a public health, Office of Ed, mental health or behavioral health, child welfare, of course. Create your team of ten, okay, and then as that team, we wanted them to start looking at data - this was prior to the actual summit -so, look at data, look at strategic plans that already exist in your county and decide why it is that you think you should participate in this prevention planning process.

[00:17:53]: So, we had 33 counties that applied, we did not have enough room for all of them, so we had a lot of buy-in right there. We had 22 that participated and what they did when they came to the summit, we had Robin Jenkins from North Carolina who spoke about how prevention is so important and it's not only child welfare's responsibility, it is the community's responsibility, it's all of our responsibility. So, he spoke a lot about that and he spoke about creating a framework for your planning process and then we actually walked through an action plan of, okay, this is the area we wanna focus on, whether it's father engagement across all the services that we provide and here are the strategies that we are going to use and here are the action steps that we are going to take to meet, to accomplish those strategies.

[00:18:51]: So, that happened in January and then, since then the teams have been meeting monthly and we've been providing different support, whether it's helping them to figure out, okay, how do you engage a partner that you feel should be at the table who is not at the table right now. Or, how do we all get on the same page about what does prevention even mean? And, one of the focuses - which I

should've mentioned - was, this is all about primary and secondary prevention, so we're looking at what services are out there that are provided to the general population that are gonna lead to the prevention of winding up in the child welfare system or in probation system or other systems, what can we do to prevent entrance into these systems. And then, the secondary prevention level is more focused on who are these populations who are at risk. So, what services can we provide to them. So, the teams are focusing on either primary, secondary or a blend of the two, because typically funding does not go to these either, CBCAP funds do, but other funding streams that we have are more focused on the kids in care.

TOM OATES [00:20:04]: So, it's been a few months, as you mentioned, going back to January and we're in November as we're recording this - have you been able to gather any initial findings or any initial kind of feedback for how this has been working? Because, clearly we can hear it's been some effort to get all this up to speed, to get the sharing and to work with the various counties individually and as a whole within the state. What have you seen so far?

HILLARY KONRAD [00:20:30]: I've seen that messaging is very important. Making sure that everyone is on the same page as to what does prevention really mean. I've seen that sometimes their focus shifts after someone else comes to the table. They'll say, okay, maybe we were focusing on child trafficking before and now we've decided that's not really what we wanna focus on, we wanna focus on early childhood education. So, having them learn to flow with who comes in and comes out has definitely been a challenge for the teams. I've also seen how they get very motivated about this idea of impacting the entire community and really helping to change how the services are meeting the needs of children and families. So, I've seen a lot of passion and excitement during the process which is always great to see.

[00:21:29]: I've seen a lot of them wanting to connect with other teams, which is something as a state that we're working on. We've hosted one learning conversation which was one way to bring them all back together and share new information and tools with them and have an opportunity for them to learn from each other. So, that's something that we will continue, but coming up with other ways for them to communicate with each other and share different ideas and progress and goals and what they're doing to overcome barriers.

TOM OATES [00:21:59]: That's great information for another state thinking about doing something similar, what are those things you can hinge on, what are those things you can promote, how do you get that energy, how do you get that buy-in and you've been listing some of those key things that once you see everybody's eyebrows, you know, peak up and they start to really get engaged, that those are the ways you can start to get that collaboration flowing.

HILLARY KONRAD [00:22:21]: Yeah, it's really been amazing, I will admit, to see how people will come together around a shared purpose and a shared agenda. It definitely has its challenges, any time you take one person from one world and take somebody from another world and try to put them together which was really the goal that we had with this process, was to take the public agency world and then the community-based family strengthening world and combine them and have them start talking to each other so that now the services are coordinated. So, it's really a lot of out of the box thinking, there's no doubt about that. And just, sales, really bringing people back - because, typically, when we're working with children and family, we're not selling necessarily, so now we're trying to teach these teams to sell the idea to other partners and then also, engagement. It's all about that engagement when you are selling, so the approach is so important.

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TOM OATES [00:23:23]: If there's another state or even a region out there, let's say a large county or a region of a state that is thinking of doing something similar when trying to, you know, evaluate an entire region, understanding it's got a lot of different, diverse needs and going through a process that you are going through in California - what's like, the one must have that you would guide them or you would give advice to for them to have something and that they'd need for success?

HILLARY KONRAD [00:23:52]: Need for success. I would say you need to be persistent. Don't let any roadblock get in your way, you've gotta overcome it and the partnership is really important. We can do so much as one, but when I bring in another perspective from someone else, it changes the amount of creativity and innovation that you can bring to the project and we need that, we desperately need it, especially at the government level.

TOM OATES [00:24:24]: Hillary Konrad, thank you so much for sharing the effort and the challenge and how California is meeting that challenge to try to evaluate an entire state when it comes to something that's difficult to evaluate and that's prevention efforts. Hillary, thank you so much for being a part of the Child Welfare Information Gateway Podcast.

HILLARY KONRAD [00:24:42]: Thank you so much.

[00:24:46]: So there you have it – wrapping up our series on prevention featuring the work of the Community Based Child Abuse Prevention grantees. We've gone from looking at how CBCAP programs influence and collaborate across the entire state that they're involved in, how they select, implement and tailor evidence-based programs, and now our two episodes looking into how programs evaluate the success of prevention efforts. Now, on this episode's web page, we'll have a link to the Protective Factors Survey that Hillary mentioned. We'll have a link to the FRIENDS National Resource Center, who help administer the CBCAP grants, so you can see a bit more about all the work states are putting forward. You can check out the CBCAP State Reports and State Highlights to see what's going on across the nation and what's going on in your state. We'll also post a link to the other evaluation episode looking into how Kentucky is evaluating particular programs.

[00:25:39]: The episode's webpage is over at www.Childwelfare.gov, so I encourage you to go check it out, along with the nearly 50 other episodes of the Child Welfare Information Gateway podcast. We are available to you on Apple Podcasts, GooglePlay, Stitcher, Spotify, and SoundCloud, so you can subscribe and get each new episode to your device as they're released. Thanks to Hillary Konrad, along with all of the CBCAP grantees who've shared their time and insight with us. And of course, my thanks to you for bringing us along as part of your day. We're so honored you've chosen to spend your time with us. Plenty more episodes are on the horizon, including we'll take a look into a guide for states working to meet the guidelines of the Families First Prevention Services Act, and we're also highlighting some online training resources for caseworkers and family support professionals, so great episodes coming right at ya in the next few months. Thanks again for choosing the Child Welfare Information Gateway podcast. I'm Tom Oates – have a great day!

FEMALE NARRATOR [00:26:42]: Thanks for joining us for this edition of the Child Welfare Information Gateway podcast. Child Welfare Information Gateway is available at www.childwelfare.gov and is a service of the Children's Bureau, U.S. Department of Health and Human Services Administration for Children and Families. The views and opinions expressed on this podcast do not necessarily reflect on those of Information Gateway, or the Children's Bureau.