

Child Welfare Information Gateway Podcast
Prevention: Implementing Evidence Based Programs TRANSCRIPT

Presenters: Female Narrator; Tom Oates, Child Welfare Information Gateway; Heidi Aakjer, Maine Children's Trust; Nikki Hartwig, Child Abuse Prevention Services of Marshalltown, Iowa

Music Introduction [00:00:00]:

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 [00:00:34]: As a field, child welfare's approach to preventing abuse and neglect is swiftly migrating to a community-based approach. The bottom line is the need for relationships across agencies, services, and organizations – along with the need to ensure the capacity exists within all these groups to meet children and families where they are and apply the resources and support to their specific needs. And this is applicable not only within local communities, but across counties, and even state-wide.

[00:01:01]: Welcome into the Child Welfare Information Gateway podcast, everyone. I'm Tom Oates and we are spending a few episodes to focus again on community-based prevention and specifically, Community-Based Child Abuse Prevention programs – also known as CBCAP programs. Now, the purpose of the CBCAP programs are to support community-based efforts to develop, operate, expand, enhance, and coordinate the initiatives, the programs, and the activities to prevent child abuse and neglect and to support the coordination of resources and activities to better strengthen and support families to reduce the likelihood of abuse and neglect and also to foster the understanding, appreciation and knowledge of diverse populations in order to effectively prevent and treat child abuse and neglect.

[00:01:47]: Now in this episode, we're going to talk specifically about how CBCAP grantees leverage Evidence-Based Practices and programs into their work. Clearly with the signing of the Families First Prevention Services Act, there's a greater attention placed on Evidence-Based Practice. So, the challenge for CBCAP grantees – which is the challenge for anyone choosing and implementing Evidence-Based Practices – is to make sure the program fits the need and helps deliver the desired outcome for your constituency group. So today, we're going to hear from CBCAP grantees implementing Evidence-Based Practices at a local level and a state-wide level. And I encourage you to listen closely to how they tailor the programs to meet the unique needs of the families served and how important relationships are to success.

[00:02:35]: Now, at a local level, we talked with Nikki Hartwig, one of the program directors for Child Abuse Prevention Services, a non-profit serving Marshall County, Iowa. We talked about their Strong Foundations program, a home visitation program that serves immigrant families in Marshall County who are either expecting a child or have children up to five years old. We'll hear how and why they chose evidence-based practices and how they tailor programs to meet this unique constituency group. Now, for a state-wide perspective, we start it off with Heidi Aakjer, the Assistant Director and Prevention Coordinator for the Maine Children's Trust. Now in Maine, the Maine Children's Trust works directly with a series of regional Child Abuse and Neglect Councils and their job is to help build capacity for service providers and families and that's where we start – understanding the structure and relationships needed to implement Evidence-Based Practices across the state of Maine.

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[00:03:33]: Heidi Aakjer, welcome into the Child Welfare Gateway Podcast and, you know, I wanna focus in on what you guys are doing on a statewide level in Maine. But first, just to give everybody a sense of the relationship, can you explain the connection between Maine Children's Trust and the state's Child Abuse and Neglect Prevention Councils?

HEIDI AAKJER [00:03:54]: Absolutely, so, the Child Abuse and Neglect Prevention Councils are in Maine on statute to provide county-wide child abuse prevention efforts and in 2015, Maine Children's Trust entered into a contract with the Maine Department of Human Services to work with the councils across the state to reduce child abuse and neglect through prevention efforts such as evidence-based curriculums, parent support - and so, we developed that relationship to provide the best possible supports to families and to professionals.

TOM OATES [00:04:29]: So, with that, clearly you're trying to, you know, build skills for the parents, for the families, but also at the same time - especially because you've got such a high turnover in the field with professionals - how is then, this relationship and the Children's Trust supporting the ability to learn, that building capacity element?

HEIDI AAKJER [00:04:49]: Sure, so, the first three-year contract that we had in 2015 we had a demonstration project and so we looked at the Office of Family and Child Services child maltreatment data for every county in Maine and we shared that information with the councils so that we can identify the gaps and needs for the families in that specific county - so, everything is tailored to that county. So, for instance, if child neglect is highest in children zero to one, then we look to the council to provide evidence-based curriculums and strategies and supports that will support those families prenatally and parents of children zero to one. So, it's supporting the work for directly with the families unique to that population and also targeting strategies and efforts for the councils to actually make an impact.

TOM OATES [00:05:41]: So, you've got, definitely there's an advantage from looking at the data, from, you know, a council-wide or at times for another state, maybe a county-wide or a region-wide, you know, view and therefore you can tailor those offerings and tailor those services as you mentioned. But, I'm curious in terms of, you've got a single entity in the Maine Children's Trust, but you are working with different councils who have different staff, who have different, maybe, potential, you know, levels of resources. So, with these diverse councils knowing that, yes, you can tailor the services for them, but their ability to, you know, execute may differ from council to council like in any state from county to county - how are you able to kind of establish some consistency across these counties so you're able to see, kind of that capacity building at a state-wide level?

HEIDI AAKJER [00:06:34]: Sure, so, the Trust does provide that coordinated leadership central statewide support, so we provide trainings for all the councils, we meet the councils where they are, as you said, they're all levels of various implementation, they all have very unique needs. So, we provide training for all the staff, we developed a toolkit so that there is some infrastructure and some guide to the council in how to implement this - however, it is flexible so that they can accommodate their populations. So, we provide all that central support, we have a learning community here at the Trust, all the councils get together and learn from each other, learn evidence-based strategies, best practices. We've had some innovative practices come out of that - Maine is the first state to use the Circle of Parents support group virtually. So, we've come up with some innovative things for folks to use by bringing folks together, learning from each other, supporting the needs, training, you know, if there's a training that's focused in an area that we haven't looked at yet then we as a learning community decide what's best for the state, what curriculum's really gonna use, so we share in our decision making.

TOM OATES [00:07:54]: I'm curious about that kind of peer to peer learning across the councils - how willing were folks, because at times it's potentially more work for folks to get involved or we don't need to share everything with everybody, but then in other situations you can find that you can't stop them from always communicating and always reaching out - what's that level of engagement across the peers in Maine?

HEIDI AAKJER [00:08:22]: Right, so, initially when we had the first demonstration project, there was a little bit of, you know, what are we doing and why are we doing it this way, we've been doing things, you know, this way for so long and it's working just fine. However, when we started looking at the data that shows exactly the focus that folks should be working in and you bring in the community - that's another part of this project, is to have community leaders come in - they started to understand the need. So the data is really pointing you in one direction, however, you really love that curriculum that you've been doing for ten years and it's just a staple for your agency, but, we really wanna move the needle, so we wanted to focus our efforts and once we started to show the data and show the community need and have their input, then it really guided us to the right direction to focus on those efforts. So, it did take some time, as most things do, a lot of input, a lot of front-loaded work, a lot of research, but it's resulting in really reaching families and professionals where they are.

TOM OATES [00:09:29]: And, I'm sure there's also an effort to just building that relationship and trust back and forth.

HEIDI AAKJER [00:09:35]: Yeah, all the work that we do, as you know, with families it's all based on trust - so, having a lot of input in the community and parents and other professionals is key to all our work.

TOM OATES [00:09:48]: So, you are at a state-wide level right now and you're working with councils who are at a regional level and they are each working with their communities and so, this kind of, you know, multi-tiered relationship that you've gotta kind of build - I'm curious, being that you're at that state level, how are you able to then develop those relationships with each of the councils, but really in an effort to help them foster relationships with each of their communities kind of at that grassroots level - what are you able to do to help support that kind of relationship building?

HEIDI AAKJER [00:10:20]: Right, so, we have a lot of background and research to do on our end, as well, so we really look at all the national strategies and we bring them to these local folks, we help them specific to their needs, you know, and really sit with them and do site visits, have lots of conversations about individual needs, we really want their staff to be trained and feel really confident going out and talking to families and working with them about all parenting supports and so, we have a training team here, we have a database that really tracks their efforts so they can see they are meeting their goals, they are moving the needle - we do have a retrospective protective factor survey that we use, we share those results back with the councils to show that they are, you know, making statistical improvements in protective factors in families, their work is paying off. So, we you know, we are in touch with them individually, which are all different, every step of the way to make sure that they are, you know, successful.

TOM OATES [00:11:28]: And despite those differences, I'm curious, are there any common needs, common themes that you're hearing state-wide?

HEIDI AAKJER [00:11:37]: Yeah, so, we do have a hard time reaching families prenatally, which, as you can imagine is at an age where families are really focused on, you know, preparing for their children to come into the world and once they get here, you know, just becoming a new parent is difficult, so, we've come up with some great strategies to bring families into our parenting community. We have parenting playgroups, parent supports and then from that, we bring them into our evidence-based curriculums. So, we, like you said, we build the trust first and then we move the needle for them to keep being involved, kind of a holistic model.

TOM OATES [00:12:23]: So, I wanna dive into that evidence-based curriculum - which curricula do you guys currently offer?

HEIDI AAKJER [00:12:31]: Well, that's part of the uniqueness of this project, too, is that we have over, I would say over twenty different curriculums that we use, they're all evidence based curriculums, but some of them are active parenting suite, the nurturing parenting suite, the one two three magic, lots of different, you know, curriculums that actually are available to the councils to kind of pick what is the best strategy and curriculum for their population. So, we really try to have a range for folks to use, as you know, evidence-based curriculums can be four weeks to seventeen weeks and that also brings up that we have special populations such as those that are recovering from substance abuse, we have nurturing fathers just for dads, we have different curriculums that can really, you know, focus on groups that there's a need.

TOM OATES [00:13:24]: It points back to that ability that you mentioned to tailor what you offer for the communities knowing that you're gonna have a lot of diverse needs, you have to have, you know, the support of that on your end with the curriculum that you offer. So, yes, there is the evidence-based factor toward it, some of it you mentioned were different lengths or different requirements, so why were these particular, you know, this range of 20, how are those programs selected?

HEIDI AAKJER [00:13:50]: Sure. So, some of them were in Maine before our involvement, some of the councils were already using those and they've been working well and then we've added on some of the specialty curriculums based on need, you know, substance abuse is a real problem in Maine, our new governor's really focusing on substance abuse prevention and that's something we brought in two, three years ago just to meet the need, so, does that answer your question? Sorry.

TOM OATES [00:14:19]: Sure, sure. And we know that the term and the label of evidence based carries some weight, carries some volume, but as anyone who works in a local community recognizes is just what something may have worked someplace else doesn't mean I can automatically just deploy it, plug it and play and it's gonna work the same way in a particular community, yet there is some strength in the evidence that's there. I'd like to get your take and really the take of the Trust, as well, of the value placed on evidence-based practice versus maybe other programs that may have had success yet aren't certified or branded as evidence-based practice - where does the Trust kind of fall in terms of the direction that you go in terms of choosing or implementing programs?

HEIDI AAKJER [00:15:08]: Right. Yeah, so the Trust really focuses on evidence-based strategies and that's because we know that works, we know that's been proven, we, you know, there's funding going towards all these programs and these efforts and we really wanna make sure that we make an impact. We also evaluate all these evidence-based programs no matter what the curriculum with that retrospective of a protective factor survey. So, we can go across curriculums with one survey to make sure that we are impacting the families with providing protective factors in their lives. So, that

consistency with us is important, that evidence-based strategies, making sure that we actually are spending 17 weeks with families really is gonna make a difference is really important to us and our funder.

TOM OATES [00:15:55]: And finally, this kind of really gets back to how strong the relationships are between the trust and the councils. But, when you do work with the council and there is a recommendation for a new program, for a curriculum, how are you getting buy-in from the councils to get them to say alright, I follow you, I agree with you, let's go do this?

HEIDI AAKJER [00:16:18]: Well, luckily, we don't actually have to get any buy-in, we actually talk with them every step of the way. So, they come to us, they tell us, you know, this curriculum is too long, we're losing those prenatal moms, they're not gonna come to a fifteen-week program, you know, what can we do? And in that learning community, we, you know, we talk to all the directors of the councils and the educators and say what's, what is working and what's not working and then we at the Trust can go out and look nationally, we also, you know, the councils hear about different programs that work, evidence-based curriculums elsewhere and we really dive in to see what that is with, with the councils, so it's never us mandating it coming down and the state who funds us really is open to us, you know, sharing, as long as it's evidence-based, what curriculums really are gonna work for the families. Our councils are the experts, they are out in the community working directly with the families and we're just here to provide that scaffolding and structure to support them in their work.

TOM OATES [00:17:20]: And that structure also hinges deeply on a strong relationship, which clearly talks about the back and forth and the dialogue and the respect for each other so you're not just handing something over that, you know, everybody realizes that they have some value to provide and that they're gonna be listened to be it on the councils end or be it on your end to say hey, you know, we value what we say, so let's find something to meet that need. So where is the, where is the Trust looking in terms of for the future and working with the councils in their local community? Clearly you mentioned substance abuse - but where is, kind of the next two to three years down the road, what's the objectives for the Trust to, you know, increasing the impact?

HEIDI AAKJER [00:18:10]: Absolutely, so we're already looking at our next contract period, as I'm sure most people do and what can we do, what have we learned in this past grant period that we can strengthen our efforts. So, you know, we're looking at core training for our staff, really having a robust, you know, overview of what is prevention, what is, why is evidence-based practice so important just as we've been talking here. You know, how do you really connect with your community, if you're a brand new staff, how do you go out and make sure that you're reaching your whole county. You know, Maine is a very rural state, how are we going out to meet those rural families, you know, meet them where they are, not sitting in an office and asking them to come to you.

[00:18:55]: So, we're looking at different strategies to kind of improve our efforts, really focusing on getting those protective factor surveys out and making sure that we are actually improving protective factors in families and as most people do, what else is out there in terms of curriculum that are really gonna focus on helping those family needs. So, looking at our best practices, looking at lessons learned and trying to improve.

TOM OATES [00:19:28]: Heidi, I really appreciate you giving us this statewide perspective on how to help implement evidence based curriculum, but yet realizing that it can't be done in a blanket for the entire state and it really has to develop - and we've said it a few times - on the relationships with your regions,

with your counties, with your councils and then those relationships down to the level of the communities involved.

HEIDI AAKJER [00:19:54]: Yeah, evidence based doesn't mean that it has to be rigid, I mean, you can have some flexibility and I think some people don't realize that. You do have to stick to your curriculums, but you have some flexibility in choosing them and making sure that they meet the needs.

TOM OATES [00:20:08]: Alright, I wanna switch gears a little bit and now focus a little bit more on a local level and for that, we're gonna focus in on the State of Iowa and Nikki Hartwig is here with us - Nikki, we'll just walk right into it, Strong Foundations is the program and I'll ask you just to start it off the top with explaining a little bit about Strong Foundations, what the program is and what it's intended to do.

NIKKI HARTWIG [00:20:33]: Okay. So, Strong Foundations is a home visiting program. We use the Parents as Teachers curriculum. The idea behind the program is that we are providing some parent education, we're providing family support services and there, for this particular program is a real focus on serving immigrant families. So, there are multiple components that go into that. There's definitely a focus on safety and child wellbeing and we do that in a lot of different ways. So, we are providing education around child safety and child development, we want to make sure that families are knowing how to access services, where can they go in our community to get help and then we provide just general family support for them, too.

[00:21:23]: So, that might be just answering questions, it can be helping them navigate the healthcare system, assisting with actually interpreting for local appointments - so, many of the families we're serving are Hispanic families who speak Spanish. So, just being able to go along with them, so we can make sure that they're understanding, you know, what the physician is saying, make sure that they can ask all the questions they're wanting to ask.

TOM OATES [00:21:51]: And you mentioned Parents as Teachers and I wanna dive into that in a moment. But, since you are dealing with immigrant families where there is a culture change, there is an entirely new environment, like you mentioned, new language, new systems and then you have folks coming into your home - how has the trust being able to be established in an area where you're dealing with such change for a family and where change can be scary?

NIKKI HARTWIG [00:22:20]: Right, right, absolutely. So, the, like I said, the majority of the families that we're serving are Hispanic families and we have two family support workers who are also Hispanic, so we have found that to be a very, very important piece of what makes this program work so well. They share some of the same customs and traditions, obviously, they can communicate with each other in their native language which makes things a lot easier for them. So, that's definitely, I think, probably one of the more important pieces of that is when you're allowing somebody to walk into your home, they automatically feel a little bit more comfortable knowing that, hey, they maybe have some of the same beliefs, some of the same traditions that I have.

TOM OATES [00:23:08]: And so, you've got the two home visitors for how many families?

NIKKI HARTWIG [00:23:13]: So, each home visitor maintains a caseload of around 25 to 28 families. So, they're very busy.

TOM OATES [00:23:24]: Yeah. And give us a sense, for those listening, where in Iowa? Marshalltown, correct?

NIKKI HARTWIG [00:23:30]: Marshalltown, yes. So, we're pretty centrally located in the state. We are about an hour from some of the more, the larger cities that people typically would know. So, we're about an hour from Des Moines, about an hour from Cedar Falls, Waterloo area, probably hour and a half or some from Cedar Rapids. So, like I said, pretty centrally located.

TOM OATES [00:23:52]: So, you are now dealing with, as you mentioned, Parents as Teachers - and there are a lot of programs out there, why Parents as Teachers was the approach that you selected to apply here?

NIKKI HARTWIG [00:24:05]: So, the Parents as Teachers program was a program that we are familiar with because we've used it for several years amongst our other programs. We felt like Parents as Teachers was a pretty well-rounded approach to helping families succeed - so, there's that focus on helping a parent understand what to expect from their child in terms of development, having them know how do I help my child learn, how do I help them grow? But, then there's also that component of family support. That's a piece that I think is so important when you have immigrant families coming in, so, you know, we are serving families who maybe have lived in Marshalltown for a year and some who maybe just arrived in the United States, you know, within the last couple of weeks. So, being able to support them in whatever they need is really a key component there. And too, when they're new to the area, they may not have someone else to rely on, you may be that first person that they feel that they can trust.

TOM OATES [00:25:13]: So, it's as you've mentioned family support, there's an element of, you know, community support, or really, kind of engagement with the community because somebody can feel very, very alone in a brand new world.

NIKKI HARTWIG [00:25:25]: Right, right. The other nice thing about Parents as Teachers is that parent handouts are available in Spanish and so, that alone, too, is the curriculum itself is, tends to be a little more welcoming to them when they can, you can hand them something and they can read it in their native language.

TOM OATES [00:25:42]: Did you tailor the program in any way for the way you guys apply it?

NIKKI HARTWIG [00:25:48]: We have some, yes. So, Parents as Teachers is kind of the basis of that program, however, we knew that with some of these families being really new to the community or even new to the United States, that we might need to add some additional components in for them. So, we are really looking at assessing what their needs are - you know, what is the immediate need, do they have some health concerns, do their kids have health concerns, you know, do we need to make sure that they are seen by a physician right away - we do wanna make sure that all the families are well connected with a medical home, so that they can have all of that stuff taken care of up front.

[00:26:34]: We have to do things like making sure kids are registered for school, so you know, navigating that whole idea is totally different for some of them, too, that's not something that they have had to do in the way that we do that here in the United States. So, yes, we've definitely had to tailor the program just to make sure that we are meeting the family's needs.

TOM OATES [00:26:59]: And there is this discussion - and maybe that's the best way to describe it - of programs and elements that people just know work or that they've seen work and they've got, kind of, the anecdotal evidence in their own backyard versus what evidence has shown and what has been researched and implemented and may have been implemented someplace else. I'm gonna ask you, in terms of the value of an evidence-based program versus other programs that may have success, yet they may not be certified or branded as an evidence-based practice. What does that mean to you if it is truly, you know, it's got that stamp of approval of this is evidence based?

NIKKI HARTWIG [00:27:44]: Especially with Parents as Teachers, I think because we had experience with it and because it's evidence based, we know that we have a foundation of a program that is going to be beneficial for families, we know that it can work, we know that there is value in what you will be sharing with the families and the idea behind that program. So, I think that piece is really important in making that the foundation of the program.

TOM OATES [00:28:20]: Yeah, it's one thing to recognize the data, but then when you also get that backed up by actual results in your own community, you know, I think that's, you know, it's kind of like you get the best of both worlds there.

NIKKI HARTWIG [00:28:33]: Yes. And the other nice thing with Parents as Teachers and other evidence-based programs is that you know the information that you're providing to the family is factual information, it's been researched. You know you're sharing with them, you know, true science-based information that they can trust.

TOM OATES [00:28:53]: Well, you talk about what they can trust, it also sounds like what you and your staff can trust.

NIKKI HARTWIG [00:28:57]: Absolutely, yes. Yes.

TOM OATES [00:28:59]: So, you have to get the buy-in from the families, but then it's also great when your staff and yourself, when you've got your buy-in, when you can support it, as well. You know, in your opinion, I'd like to, I'm curious about this - a bigger factor from the results that you're starting to see, which one is maybe more important or where you're seeing greater results, the trust that you mentioned between the families and the home visitors, or actually the application of really like we just talked about, seeing this program work and getting that kind of reinforcement, building that trust in that program versus just watching the families start to bond more with those home visitors. You know, is there something you look at and say, you know, I'm really happy because of this?

NIKKI HARTWIG [00:29:44]: It's a tricky question, but I, you know, my first gut response is that both are very important, however, we know from experience in working with - so, we have a very large Hispanic population in Marshalltown, but we're starting to see some other families. So, we've got a refugee population from Southeast Asia, we're starting to see some Congolese families, so we know through experience that it's very important to have that family's trust before they're going to allow you to come into their home, before they're going to really listen to what you have to say and what information you're sharing with them. So, in, when working with the immigrant population, I think trust might be the key to getting in the door, but from there, you have to have an evidence-based program that's delivered as it is intended. So, making sure that we are delivering the program with fidelity is, you know, the second piece of that that is also important.

TOM OATES [00:30:51]: Are you seeing your current, let's say the current families that you're serving or those that maybe you have served for a number of years or a number of months, are they referring new families to you? Are you starting to see that? Because that's, there's a great element of if I trust it so much, I'll recommend it to a friend.

NIKKI HARTWIG [00:31:09]: Correct. Yes. And it's funny you mention that. So especially with, so with some of the, one of the newer populations to come to the area is the Congolese families and what we have seen is we've got one worker who has worked with a couple of those families and now she is going to home visits and all of a sudden two or three new families will walk in the door and they will say, hi, this is Maria, she's our home visitor, you know, and they're introducing her to other families. So, she has built that trust with them and now they are starting to tell their other, their friends and their family that, you know, she's a trusted resource in this community.

TOM OATES [00:31:49]: Make sure you bring more copies to every visit because you never know who else is gonna show up. Well, that's I mean and that's a great, that's, you know that's truly an example of the effectiveness and not only seeing the results but having, you know, how many times do we talk about implementing programs, but trying to get the families to buy-in and explaining the value and able to demonstrate when the families recognize and are able to communicate that value to others.

NIKKI HARTWIG [00:32:19]: Right.

TOM OATES [00:32:21]: So, for others out there who are listening to this and they're considering, you know, implementing maybe a new program or an evidence based program that they may not have that much familiarity with - what's your guidance to those implementing an evidence-based practice to making sure it fits in their community, as opposed to just taking something, you know, figuratively right out of the box and plug and play knowing that every community is going to be different?

NIKKI HARTWIG [00:32:46]: Right. Number one, I think fidelity is very important. So, I think understanding what criteria you need to meet of that program in order to maintain fidelity is going to be the number one priority. Because, we all know the program can be a great evidence-based program, but if it's not being delivered as it's intended, we may not see the result. So, I think understanding the fidelity of the program, from there, you know, we've created policies and procedures to kind of help break that down so that everybody knows what's expected of them. You know, it's breaking it down into steps so they understand, you know, I have to have A, B and C for this program to work.

[00:33:35]: Your policies and procedures, too, I think help provide consistency in the quality of the programming, so, you can hire a new employee, share with them what is the fidelity, but those policies and procedures are really gonna help guide them in their practice with the families. Other things I think, supervision, supporting your staff is very important, you know, making sure that they know what's expected of them but that they can come to a supervisor and ask questions, talk through situations when that need arises, as well.

TOM OATES [00:34:12]: Do you get the chance to kind of sit back every three, every six months and say, hey, what's really working for us, what would we change? Are you able to kind of ever, you know, take a breather and say, hey, how are we doing so far, do we need to adjust, because I'm curious about what you guys are learning in the field and if you're able to then apply the lessons learned back.

NIKKI HARTWIG [00:34:34]: Yes. So, We actually have kind of an internal database and so we're always collecting data on the families, you know, some of those things are required things in order to meet fidelity, but some of those things are just things that we have implemented over time because we've become more curious about maybe what their needs are and, you know, is there something that we're missing. So, collecting that data so we have something to reflect back on is very helpful in that and we have tried just over the last year or so, tried implementing a couple of focus groups, just getting some families to come in the doors and share, you know, what did you like about the program, was there something you didn't like about the program and this is something, you know agency related as a whole that just getting their input to make sure that we are truly meeting their needs.

TOM OATES [00:35:21]: I'm curious because immigrant families are on, kind of, the tip of many folks' tongue in working with agencies, what are those needs, what are those common needs that you and your staff are seeing from these immigrant families?

NIKKI HARTWIG [00:35:59]: A lot of them really just need help being pointed in the right direction in terms of how do I use local transportation. Like I said, school registration seems to be a large thing, so understanding what documents do I need to bring to the school. Some of those forms that you have to fill out are very difficult even when you can read and understand English, I can't imagine trying to fill them out and not being able to read English. So, really helping them get through some of that paperwork has been a big need for families. Also, helping them, I think, connect with our public services, so, you know, how do you get health insurance, is that something that's offered through your employer and helping them understand how that works and if not, and they maybe need to apply for some public assistance for their children to be covered under medical, you know, helping them navigate that whole system, as well.

TOM OATES [00:36:42]: Interesting that the way you're also finding the way to tailor to the community and really meeting the community's needs. So, taking an evidence-based practice and making it meet the need that you have in your own backyard. Nikki, thank you and Heidi, thank you both, as well, we really appreciate the insight and the sharing on the work you guys are doing and thank you so much for being a part of the Child Welfare Information Gateway Podcast.

NIKKI HARTWIG [00:37:08]: Thank you so much for inviting me.

HEIDI AAKJER [00:37:10]: Thank you, I appreciate it.

TOM OATES [00:37:13]: A reminder that this is one of a number of episodes we're focusing on CBCAP grantees and their programs. So, look out for other episodes diving into State and Community collaboration, and evaluating the effectiveness of community-based prevention programs, those are coming up on the podcast. Hey, if you're not already subscribed, you can find the Information Gateway podcast on Apple Podcasts, GooglePlay, Spotify, Stitcher and SoundCloud. And you can check out some other resources on prevention and CBCAP programs on this podcast's web page over at www.childwelfare.gov. We'll have links to a number of resources including the Child Abuse Prevention Resource Guide and the National Child Abuse Prevention Month site, which full of information for caseworkers and communities to work together implementing programs to strengthen families and prevent abuse and neglect.

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[00:38:06]: And if there's other information you're looking for to improve practice, find data or other resources, see the laws and policies for your state or other states, you can visit Child Welfare Information Gateway at www.Childwelfare.gov or for more help, you can reach out to our Information Support Services team at info@childwelfare.gov. So, my thanks to Heidi Aakjer and Nikki Hartwig for their time and sharing how these CBCAP grantees implement Evidence-Based Practices, and of course my thanks to you for listening and subscribing to the Child Welfare Information Gateway podcast. Until next time, I'm Tom Oates – have a great day!

FEMALE NARRATOR [00:38:48]: 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.