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### **Q & A Corner: Adhering to Best Practice Standards During Times of Financial Stress**

In these tight fiscal times, many programs have made difficult choices that have impacted program services. The Credentialing staff at PCA America has seen several programs disaffiliate or discontinue services in the past year due to budget crises, and many programs that have kept their doors open have had to make difficult program cuts. Across the country, programs are being asked to serve more families with fewer resources. In spite of these realities, more programs are going through the credentialing process than ever before. The reason: completion of an intensive national accreditation or credentialing process is seen as an important litmus test to funders and policy makers that tests the credibility and integrity of a program.

The HFA model is based on intensive home visiting, and that type of service requires resources. How can a program maintain model fidelity while watching the bottom line?

#### **Caseload management, and intensity of services**

Central to the HFA model is the relationship between a home visitor and a family. Cyd Wessel, MSW, and Holly Seymour, MS, HFA QA Coordinators at PCA America, emphasize that programs should be careful not to overburden staff with caseloads over the recommended maximums (i.e., no more than 15 families at the most intensive service level or 25 at any combination of service levels per full time worker) or compromise the intensity (i.e., weekly home visits for a minimum of six months after the birth of the baby) of services to families in an effort to save money. If these core elements are not adhered to, the effect can be crippling for a site. A staff overburdened by heavy caseloads translates into families not getting what they need and unsatisfied staff. This dissatisfaction can then affect the retention of both staff and families. The Quality Assurance and Credentialing staff recommends that it is better to serve fewer families well than many families poorly. Once a program has weathered the tough times, it will be easier to secure funding if fewer families have been served well. Ultimately, it is recommended that a program reduce their capacity versus lose the program entirely.

#### **Prioritize families before ratings**

Credentialing ratings are on a three-point scale: 3 equates to program excellence, 2 indicates the program meets the standard and 1 implies that the program needs improvement. While we all pursue excellence in our work, it is important that a program is in adherence with a “2” rating

before sacrificing resources to secure a perfect “3” rating on a certain program element. Put families before “3” ratings.

For example, one Program Manager wanted to eliminate serving teen mothers because they are difficult to engage. This would have helped her to reach the percentage needed on Standard 1-1.B (identifying the participants in the target population) to be rated in adherence. The philosophy behind the credentialing process is to encourage best practice to ensure quality services to families not to encourage programs to make changes to program delivery to ensure perfect percentages or high ratings. Programs should be assured that the process is designed to ensure that programs are not being judged on short-term patterns due to funding issues, but rather on quality issues over time.

It is more important to ensure that a program offers quality services than if all the documentation is filed perfectly. If a decision between good ratings and serving families arises for your program, a coordinator at PCA America can always be contacted for recommendations on how to handle the situation.

### **Look at the big picture**

It is easy to get caught up in the minutia of ratings. Programs should try to use the self-assessment as an overall tool, and not dwell on small things. Just because a program has been cited on a certain area does not mean that it is not offering quality services. It is important to keep in mind that the main tenet of credentialing is the focus on quality improvement. Built into the credentialing process is a degree of flexibility. If some selected standards have lower ratings, it will not automatically mean that a program will be deferred. Rather, the standards are designed to be guidelines for programs to help ensure quality services to families.

### **Advice from the HFA Credentialing Panel**

At the December 2003 HFA Advisory Credentialing Panel (the Panel) Meeting, the Panel was asked for advice they could share with programs and state systems that are struggling with budget issues and seeking to maintain the integrity of the critical elements in their service delivery. Here are some of their thoughts:

1. **Do not panic.** Short-term trends due to tough financial shortages can be pointed out or identified during the credentialing process to distinguish them from permanent features of the program. Choices can be made that will maintain program integrity.
2. **Do not overload supervisors.** When supervisors are overloaded, staff and families do not get what they need. A supervisor is one of the most cost effective positions in a program site. They are a vehicle for retaining staff and maintaining the integrity of program policy and practice.
3. **Consider narrowing the program’s target population or shortening the length of the program.** One way to narrow the program’s target population is to increase the assessment entry score required to enter the program or reduce the length of service of the program. For example, programs may identify that the current target population is far too large to be screened and assessed based on current resources and staff time (i.e.,

serving all births within the county may be narrowed to all births that occur at hospital A and B). Programs may also consider reducing a 5-year program to a 3-year program. These are not to be viewed as opportunities to meet certain standards, but as strategies that keep best practices at the core of service delivery during tight financial times.

4. **Focus on the families' best interests.** It is important that in times of budget constraints, families are receiving the appropriate dosage of services. If a family is ready to move from Level 1 to Level 2 of service intensity, do so. Sometimes boundary issues arise between workers and their families in which families can be kept on Level 1 because the worker does not want to let go. Moving families onto Level 2 when they are ready creates new openings for families who need more intensive services.
5. **Create a transition plan.** If families have to be released from the program due to reductions in program capacity, create a transition plan for them. This planning helps both the families and the workers assigned to them adjust to the premature departure versus cutting off contact without closure. If you cannot offer intensive services to those families, suggest group services for higher functioning families. One option would be to explore PCA America's Circle of Parents program, a network of mutual self-help support programs that has begun to collaborate with HFA. See [www.circleofparents.org](http://www.circleofparents.org).
6. **Keep track of families that have discontinued services.** Direct feedback and numbers will help to demonstrate the need for expanding a program in the future. Some programs that have had to discontinue services to families have tracked these families to show the need. This is also important should a program unexpectedly receive additional funds and be able to expand their services once again to more families.
7. **Cross train staff.** When it comes to making decisions about possible layoffs, consider cross training as an alternative. Instead of laying off an assessment worker, retrain him or her to fulfill another role.
8. **Emphasize supervision.** Supervision becomes more important than ever when workers have more than one role. One-on-one supervision is crucial to keep staff feeling supported- especially if they are taking on a new role. In difficult financial times, supervision is a great opportunity to encourage staff, thereby increasing morale and helping to reduce staff turnover.
9. **Prioritize front line staff.** If you must institute layoffs, family workers should be the last to go. Without them the program cannot function.
10. **Keep your staff informed.** If the financial situation of your organization is transparent, natural attrition of staff may occur and will not result in as severe cutbacks. If staff is not informed of financial problems, there may be incredibly low morale and a potential bailout after the cuts are made.

11. **Provide counseling after layoffs.** If staff has had to layoff coworkers, it is important to maintain morale for the staff that remain. Counseling will help them to deal with their losses.
12. **Diversify your funding.** Most HFA programs exist on a myriad of funding sources. It is important to diversify your funding sources so that your program is not vulnerable to the whim of one particular funding source. Contact your state leaders to learn more about funding or see the HFA Peer Mentoring Network at: [www.healthyfamiliesamerica.org/network\\_resources/index.shtml](http://www.healthyfamiliesamerica.org/network_resources/index.shtml).
13. **Communicate with your advisory committee and/or state system.** It is important that sites are in touch with their state's advisory entities and state systems. A state system can only advocate on behalf of the needs of its sites if it is aware of what is going on at the program level and how state budget issues are impacting service delivery to families.
14. **Communicate to your funders.** Funders will be a lot more understanding, and a lot more likely to continue funding, if it is explained why a particular service needs to be cut rather than if the funder finds out after the fact.
15. **Pay attention to community ties.** If a program depends on support from a community agency whose needs are assessment services, try to not reduce the assessment capacity. Keep collaborative partners informed of financial issues and explore ways to further share resources.
16. **Collaborate with other area agencies.** Many programs are faced with impossible tasks. Families may not be able to be served with limited resources, but through pooling resources with other agencies, families that otherwise would be left without services might be served. One agency might be able to provide assessments, while another could provide home visitors.

### **Keep in touch with your QA Coordinator or RRC Director**

If a decision has to be made between good credentialing ratings and serving families, programs and state leaders should feel free to call their respective Coordinator at PCA America or designated Regional Resource Center (RRC) Director ([http://www.healthyfamiliesamerica.org/network\\_resources/reg\\_resource\\_centers.shtml](http://www.healthyfamiliesamerica.org/network_resources/reg_resource_centers.shtml)) for advice on how to handle the situation. The 12 Critical Elements in the Self-Assessment Tool were put in place because Program Managers and state leaders were challenged with the day-to-day operations of programs, and needed a structure to help maintain the quality of program services. They exist as a tool for your use.

Budget constraints don't have to mean the end of the program or even the quality of the program. Choices can be made that will not compromise program quality. PCA America and the RRCs understand these challenges and are here to support programs and state systems through these difficult decisions.

**State Systems Update**

***NEW PUBLICATION AVAILABLE- The State Systems Development Guide***

This guide provides a clearinghouse of information and innovation to support and grow the HFA program across the country. In its CD-Rom form, this resource guide connects you through web-links and PDF files to a variety of tools and resources that aid state systems development. In addition, the guide contains case studies of state successes that contribute to the sustainability of the HFA program. Get your copy of this useful guide, a virtual one-stop shop for the development of state systems for home visitation. Contact Lisa Cashion at [lcashion@preventchildabuse.org](mailto:lcashion@preventchildabuse.org) for a copy of the guide or download it on the HFA website at: [http://www.healthyfamiliesamerica.org/publications/download.shtml#state\\_systems](http://www.healthyfamiliesamerica.org/publications/download.shtml#state_systems)

***HFA Federal Earmark Results***

For the first time in HFA history, a federal earmark has been requested and thanks to your tremendous grassroots organizing, Senator Peter Fitzgerald and Representative Ray LaHood, both from IL, submitted direct requests for \$800,000 on behalf of HFA. In addition supporting sign-on letters on both the House and Senate sides of Congress were circulated by Rep. Danny Davis and Senator Richard Durbin. As the Labor HHS subcommittee considered the appropriations bill, they had before them requests from the following to consider the \$800,000 request for HFA.

<b>Senators</b>	<b>Representatives (all from IL delegation)</b>
Clinton (New York)	Costello
Stabenow (Michigan)	Davies
Durbin (Illinois)	Evans
Kerry (Massachusetts)	Gutierrez
Landrieu (Louisiana)	Rush
Edwards (North Carolina)	Schakowsky
Nelson (Florida)	Shimkus
Akaka (Hawaii)	
Corzine (New Jersey)	
Lautenberg (New Jersey)	
Wyden (Oregon)	
Collins (Maine)	
Levin (Michigan)	

While an earmark for HFA was not included the recently released Omnibus Appropriations Conference Agreement, recognition of the HFA program has far exceeded our goals and we plan to continue to capitalize on this newly gained federal support in the future!

We also wish to thank and congratulate those in the HFA network who went above and beyond in their efforts to help advocate for HFA on a national level: Valerie-Lustig Harris – IL, Juana Burchell – IL, Janet Bornancin – IL, Gaylord Gieseke – IL, Roy Harley – IL, Mary Odell – IA, Mike Foley – MI, Janet Rosenzweig – NJ, Lucky Hollander – ME, Gail Breakey – HI, Becky

Ruffner – AZ, Teresa Schwab – KS, Deb Callins – AL, Carol McNally – FL and Patti Herman – WI.

In conjunction with the HFA network, PCA America staff will analyze our efforts toward securing an earmark and make recommendations for future advocacy. For assistance on ways to thank your federal representatives for their support, please contact [ljalbraith@preventchildabuse.org](mailto:ljalbraith@preventchildabuse.org) or [jascroft@preventchildabuse.org](mailto:jascroft@preventchildabuse.org).

### ***Healthy Marriage Initiative***

PCA America has completed a research brief entitled, “*President Bush’s Healthy Marriage Initiative and Child Abuse Prevention: A Research Review.*” See the document here: [http://www.healthyfamiliesamerica.org/downloads/hm\\_policy\\_brief.pdf](http://www.healthyfamiliesamerica.org/downloads/hm_policy_brief.pdf). This document was created in response to a technical assistance call on this issue and the need for a broad review of family formation research and its relation to the healthy marriage initiative and child abuse prevention.

PCA America staff has been in contact with the Building Strong Families (BSF) Project of the Mathematica Institute, Inc. (see [www.buildingstrongfamilies.info](http://www.buildingstrongfamilies.info)), who is spearheading the Administration’s healthy marriage efforts with unwed parents over the age of 18. A potential meeting with BSF, PCA America staff and HFA states that serve this population is in the works. For more information on this initiative, please contact Lisa Cashion ([lcashion@preventchildabuse.org](mailto:lcashion@preventchildabuse.org)).

### **Research**

#### ***Report Presents Findings on Effectiveness of Early Childhood Home Visitation Programs in Preventing Violence***

"The Task Force recommends early childhood home visitation for prevention of child abuse and neglect in families at risk for maltreatment," state the authors of a report published in the October 3, 2003, issue of Morbidity and Mortality Weekly Report. The Task Force on Community Preventive Services conducted a systematic review of scientific evidence concerning the effectiveness of early childhood home visitation for preventing several forms of violence.

The authors found that

- \* There was strong evidence of effectiveness for early childhood home visitation in preventing child abuse or neglect.
- \* The evidence was insufficient to determine the effectiveness of early childhood home visitation in preventing (1) violence by the child, (2) violence by a parent (other than child abuse or neglect), or (3) intimate partner violence.

Hahn RA, Bilukha OO, Crosby A, et al. 2003. First reports evaluating the effectiveness of strategies for preventing violence: Early childhood home visitation. Morbidity and Mortality Weekly Report 52(41):1-9. Available at <http://www.cdc.gov/mmwr/PDF/RR/RR5214.pdf>.

PCA America has created talking points to address this research that can be obtained by contacting Lori Friedman, [lfriedman@preventchildabuse.org](mailto:lfriedman@preventchildabuse.org).

### ***Time Spent in Home Visits Related to Personality Traits of Mothers and Staff***

Research indicates home visiting relates to better outcomes for families, but few programs actually provide the prescribed amount of home visiting time. Until now, reasons for the discrepancy between prescribed and actual home visits have been unclear. Now a recent study has found personality traits of both mothers and home visitors may impact the amount of time spent in home visits. These findings may have implications for hiring and training of home visiting staff.

The study of a home visiting program for at-risk families involved in Early Head Start concluded "maternal negative emotionality" (being prone to such traits as anxiety, anger, and pessimism) was related to higher total home visit minutes per month. Conversely, "maternal positive emotionality" was related to lower total home visit minutes per month. Among home visitors, negative emotionality was related to lower total home visit minutes per month.

The authors offered several potential explanations for these findings:

- \*Mothers with negative emotionality may be perceived by home visitors as having greater needs, and therefore as requiring more home visiting time.

- \*Mothers with positive emotionality may be perceived by home visitors as having fewer needs, and therefore as requiring less home visiting time.

- \*Home visitors with negative emotionality (i.e., individuals prone to anxiety and pessimism) may have difficulty coping with the difficult life circumstances of program participants and may therefore interact with program participants less.

The study can be found in Volume 31, Issue 6 of the "Journal of Community Psychology". It can be accessed online from Wiley Periodicals at [www.interscience.wiley.com](http://www.interscience.wiley.com).

### ***Positive Father-Child Involvement Found Among Early Head Start Families***

A study of fathers of newborns involved in the Early Head Start program found fathers were involved with their children in multiple positive ways, despite difficulties that included parenting stress, financial problems, and symptoms of depression.

The study found:

- \*Fathers often participated in prenatal activities with the mother, and were usually present at the birth or visited the child in the hospital shortly thereafter.

- \*Fathers often participated in caregiving activities such as diapering, as well as play activities.

- \*Participation in prenatal activities and presence at the child's birth was positively associated with participation in father-child activities during the course of this study.

- \*The fathers' positive experiences with their own fathers were related to more frequent father-child activities.

A copy of this report can be obtained on the Mathematica Web site at [www.mathematica-mpr.com/PDFs/redirect.asp?strSite=ehsnewborns.pdf](http://www.mathematica-mpr.com/PDFs/redirect.asp?strSite=ehsnewborns.pdf).

## **PCA America Conference Division**

### ***PCA America National Conference May 16-19, 2004***

**Online registration will open as of January 5<sup>th</sup>.** Go to [www.preventchildabuse.org](http://www.preventchildabuse.org) to register online and check out all the latest information for planning your trip to Orlando to be a part of the country's largest national conference focused on family support and child abuse prevention. The ***Coronado Springs Resort*** has lowered the rate for sleeping rooms to **\$129 a night!** Call 407/939-1020 and mention the PCA America National Conference to take advantage of this rate for six days prior, during & post conference!

### **WIN FREE HOTEL NIGHTS!**

If you have registered for the conference AND paid in full AND you have booked your room at Disney's Coronado Springs Resort BEFORE the Early Bird Registration Deadline – March 15, 2004 – your name will be entered into a drawing to win two free hotel nights! PCA America will pay your hotel bill at Disney's Coronado Springs Resort for two nights during the national conference in May – *Spreading the Magic of Prevention!* Winner will be notified by March 31, 2004. This is just another way for us to show our appreciation for the good work you do on behalf of children and families.

Exclusive Offer for National Conference Attendees only...advance purchase of **tickets** to the *Disney* Theme Parks will be available to you at a discount. Details are on [www.preventchildabuse.org](http://www.preventchildabuse.org) and in the Registration Book that is being mailed at the end of December.

Create a greater awareness of your organization's services and products by exhibiting at our National Conference! The Exhibitor Brochure and application are still available for downloading from [www.preventchildabuse.org](http://www.preventchildabuse.org)

If you have any questions about the upcoming National Conference, please contact Ann Johnson, Conference Manager at [ajohnson@preventchildabuse.org](mailto:ajohnson@preventchildabuse.org) or Rebecca Loden, Conference Services Coordinator at [rloden@preventchildabuse.org](mailto:rloden@preventchildabuse.org)

### ***Parent Leadership Award at the National Conference!***

What better way to honor the parents who bring so much to our programs than with a nomination for the PCA Parent Leadership Award that will be given at the May 2004 conference!

In order to recognize and honor parent leadership at the local, program, state and national level, a Parent Leadership Award will be presented at the 2004 PCA America National Conference. The nominees of this award must exhibit all of the following criteria:

- A nominee must be or have been an active participant in an HFA or Circle of Parents program for at least six months;
- A nominee must be or have been an inspiration and role model to other parents in the program;
- A nominee must exhibit or have exhibited significant leadership within the program: i.e.: serving on an HFA or other program advisory board; organizing advocacy or fund-raising

activities; functioning as parent leader; participating in the development and/or delivery of training.

- A nominee must have made a personal contribution to his or her community or that strengthens families and children.

Go to our website at <http://www.preventchildabuse.org/news/index.html> and download the nomination form, or email Sue Campbell at [scampbell@preventchildabuse.org](mailto:scampbell@preventchildabuse.org) for a copy. The deadline for submission is January 15.

### **HFA Credentialing Update**

The HFA Quality Assurance and Credentialing Division is pleased to announce that at the close of 2003, 248 of the 428 total HFA programs (which represents 58% of our network) have earned a 4 year credential from PCA America. Please join us in celebrating all of the programs that worked so hard to earn their credential in 2003 and continue to work hard to deliver quality services to children and families.

State leaders are encouraged to spread the word in their state about the upcoming Credentialing Tips Pre-conference session at the May 2004 national conference in Orlando, Florida. This session will help to reduce anxieties for HFA program sites for preparing for the credentialing process; provide an overview of the credentialing process; provide tips for preparing for the credentialing process and organizing the self study materials; and present testimonials on how credentialing can positively impact program operations. Attendees can also look forward to hearing about the type of support available from the Midwest and Western Regional Resource Centers and the national office.

### **HFA Training Update**

#### ***Prenatal Home Visiting Pilot Project: What Parents Are Saying About Their Experiences With Prenatal Services***

Over the past three months focus groups were held with the 10 pilot sites participating in the Great Beginnings Start Before Birth HFA prenatal project. Groups were held with parents and with home visitors. Following are some quoted comments parents shared with us:

- I have no family or friends here...without the home visitor I would have had to go back home. Now I set goals, have a place to live, and a job, and am getting things ready for the baby.
- They always have things for Dad to do too, which is nice. Nobody else ever mentions him or asks about him. He loves the kick game with the baby and talks to him. Now he wants to go into the delivery room with me...before he didn't want to.
- I've learned something new every time the home visitor comes. And dads should be in this program. It has changed my life. I'm now totally committed to my daughter and I know how to handle my girlfriend's moods too...I just leave her alone to blow off steam.
- I liked the birth plan...had never thought about a lot of the things in the plan. I didn't think I had any say. Liked the relaxation exercises too.
- I learned about the stages of the baby's growth. The doctor never explains anything to me, but the home visitor shares lots of information every time she visits. She listens to me like a friend would.

- My home visitor showed me how to make a list to ask the doctor about things I want to know about. She still brings me more information than the doctor does...he's always too hurried.
- Like the games we learned to play with the baby, like singing, the kick game, talking to the baby to help him grow. It made me feel connected to the baby.

The information collected through the focus groups will be formally analyzed by using qualitative methods, which will yield themes and viewpoints that are most commonly shared by parents attending the focus groups. The same process will be employed with the information collected in the home visitor focus groups.

### **HFA Regional Resource Centers**

As 2004 begins, it is both unbelievable and extremely exciting that the HFA Regional Resource Centers (RRCs) have been open and operational close to one year. These two pilot Centers were designed to provide technical assistance and support in the areas of training, quality assurance, program development and long-term sustainability for HFA sites and state systems. This past year has been a time for implementing the many details that contribute to building the infrastructure of a regional model and a new way of doing business. This past year has also been an opportunity to gain a more in-depth understanding and awareness of the vast array of resources, skills and needs of the HFA network and more specifically in the two pilot regions.

In the last issue of SCOOP we mentioned that each RRC held their first Advisory Committee meetings in July 2003. Each of these meetings led to the development of priority goals for the Centers. These goals are highlighted below.

The following three priority areas will serve as the basic foundation for the work of the Midwest Regional Resource Center (MWRRC) over the course of the next 6 – 12 months (the states covered include MI, IL, IN, IA, KY, MN, MI, OH, WI):

- To serve as a clearinghouse for technical assistance and training related information, drawing on the experience/expertise of the entire region.
- To serve as a resource for quality assurance with access to tools that promote the integration of HFA critical elements with program practices and help to facilitate the credentialing process.
- To create opportunities for integrated training across models that incorporates common elements and core competencies.

The following four priority areas will serve as the basic foundation for the work of the Western Regional Resource Center (WRRC) over the course of the next 6 – 12 months (the states covered include AZ, AK, HI, ID, NV, NM, CA, OK, OR, TX, UT, WY):

- A system of communication will be established to effectively facilitate the sharing of ideas and resources among the states of the Western region.
- The WRRC will provide high quality, accessible and effective quality assurance services.
- Each state will have an effective advocacy plan using a consistent message and data that can be used in a variety of venues.

- The WRRC will increase the availability and delivery of wrap around and advanced trainings to the region.

Staff from PCA America and the RRCs recently convened for a quarterly meeting in Chicago. At this meeting several key areas of focus for 2004 were identified:

- To enhance our marketing and communication efforts to the HFA network so that sites and states are better informed about the work of the RRCs, and so that sites and states within the regions are more readily connected to the Centers.
- To create marketing materials that will establish the brand identity of the RRCs and will increase awareness and an understanding of the roles and responsibilities of the Centers.
- Utilize the PCA America Conference being held in May 2004 to share ideas, lessons learned and tools for training, technical assistance and other related work with the entire HFA network.
- Implement strategies to assist the RRCs with achieving their identified priority goals identified earlier.
- Develop a timeline and process for implementing additional RRCs.

For more information about the RRCs please contact Susan Frankel,  
[sfrankel@preventchildabuse.org](mailto:sfrankel@preventchildabuse.org)

<i><b>Funding Opportunities</b></i>
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**Federal Agencies Launch Grants.gov web site.**

The federal government has developed a web site for all agencies to post grant opportunities. All federal agencies are now required to post their grant announcements on the site, which has a standard format for all announcements. See <http://www.grants.gov>.

**Centers for Disease Control and Prevention**

*1. Practices to Improve Training Skills of Home Visitors*

The Centers for Disease Control and Prevention (CDC) announces the availability of fiscal year (FY) 2004 funds for a cooperative agreement program to conduct a systematic examination of the impact of home visitor training and factors related to the implementation of an existing efficacious or effective home visiting program on family outcomes of child maltreatment and risk behaviors for youth violence.

Application Deadline Date: February 19, 2004  
<http://www.cdc.gov/od/pgo/funding/04053.htm>

*2. Grants for Violence-Related Injury Prevention Research: Youth Violence, Suicidal Behavior, Child Maltreatment, Intimate Partner Violence, and Sexual Violence*

Soliciting investigator-initiated research that will help expand and advance our understanding of violence, its causes, and prevention strategies.

Application Deadline: February 19, 2004.  
<http://www.cdc.gov/od/pgo/funding/04045.htm>

### *3. Sociocultural and Community Risk and Protective Factors for Child Maltreatment and Youth Violence*

The purpose of this program is to inform violence prevention efforts by testing the extent to which potentially modifiable sociocultural and community risk and protective factors are associated with child maltreatment and early risk factors for youth violence. This program addresses the ``Healthy People 2010" focus area of Injury and Violence Prevention

Application Deadline: February 17, 2004

<http://a257.g.akamaitech.net/7/257/2422/14mar20010800/edocket.access.gpo.gov/2003/03-30146.htm>

### *4. Efficacy Trials of Parenting Programs for Fathers*

The purpose of the program is to examine the efficacy of parenting programs for high-risk fathers, expectant fathers, or father surrogates of children age birth to two and/or age three to five for the prevention of child maltreatment and the promotion of positive parenting behaviors. This program addresses the ``Healthy People 2010" focus area of Injury and Violence Prevention.

Letter of Intent Deadline: January 16, 2004.

Application Deadline: February 18, 2004

<http://a257.g.akamaitech.net/7/257/2422/17dec20030900/edocket.access.gpo.gov/2003/03-31083.htm>

## *New Resources*

### **HFA Launches New Website**

This newly designed web site has state-specific information, evaluation studies and information to help advocates and concerned citizens expand and improve these services that help support new families: <http://www.healthyfamiliesamerica.org/home/index.shtml>

### Check out the website's **Peer Mentoring Network**

([http://www.healthyfamiliesamerica.org/network\\_resources/index.shtml](http://www.healthyfamiliesamerica.org/network_resources/index.shtml)) - an interactive technical assistance tool that facilitates the use of relevant funding and advocacy information between HFA programs. Use this tool to find others in the HFA network who can provide advice, lessons learned and point you in the right direction when implementing new funding streams and advocacy strategies.

### **New HFA Listserv Up and Running**

This listserv is intended to provide a forum for discussion, sharing of resources and exchanging ideas about HFA. Please utilize this tool for questions around programming, research, training, credentialing, state system/site development and funding.

In order to subscribe, follow these steps:

1. Click on this link or go to your web browser and paste this link in the **Address** box:

<http://mail.preventchildabuse.org/cgi-bin/mailman/listinfo/hfa-net>

2. Under the **Subscribing to HFA-Net** heading, enter your email address, pick a password, and click the **Submit** button. Ignore the question "Would you like to receive list mail batched in a daily digest?", as all members will automatically receive mail in digest form. If your

subscription is successfully submitted, you will see a new web page, **HFA-net Subscription Results**, which should indicate that you will need to confirm your subscription through your email address.

3. You should receive a confirmation request email shortly (usually within minutes) from [hfa-net-request@preventchildabuse.org](mailto:hfa-net-request@preventchildabuse.org). Follow the directions given in the message to confirm your subscription. If you have any questions about the listserv, please contact Cydney Wessel at [cwessel@preventchildabuse.org](mailto:cwessel@preventchildabuse.org) or Holly Seymour at [hseymour@preventchildabuse.org](mailto:hseymour@preventchildabuse.org).

### **2nd Annual Counties Care for Kids Awards Program**

The National Association of Counties (NACo) is pleased to announce its second annual Counties Care for Kids awards program. In 2004, NACo will recognize early childhood and school readiness programs at a ceremony honoring county government programs that provide exceptional services for children and families. For a copy of the awards application, visit: <http://www.naco.org>. The application deadline is January 16, 2004. Please submit the application to HyeSook Chung at [hchung@naco.org](mailto:hchung@naco.org)

### **NCCAN Launches Newly Designed Website**

The National Clearinghouse on Child Abuse and Neglect Information has redesigned its website to be easier to navigate and more user-friendly. <http://nccanch.acf.hhs.gov>

### **State Infant and Toddler Fact Sheets Available**

With the release of the book, America's Babies, the Better Baby Care Campaign has compiled state and territory fact sheets which include basic data around infants and toddlers, as well as some state specific resources. <http://www.betterbabycare.org/>

### ***Public Policy Resources***

#### **Preventing Abuse and Neglect Prevents Crime: State-by-State Data**

As a follow-up to the report, "New Hope for Preventing Child Abuse and Neglect: Proven Solutions to Save Lives and Prevent Future Crime", Fight Crime: Invest in Kids has released state-specific briefs describing the rates of abuse and neglect, later affects of abuse and neglect, and proven programs for preventing such behavior. To access these briefs, see: <http://www.fightcrime.org/reports/CANstate.php>. For a copy of the full report, see: <http://www.fightcrime.org/reports/CANreport.pdf>.

#### **HHS Launches Initiative for Children Who Witness Domestic Violence**

The Department of Health and Human Services recently announced a new initiative to help children who witness domestic violence. The initiative, called "Safe and Bright Futures for Children," will incorporate evidence-based practices such as treatment for child and adolescent trauma, mentoring and mental health services to prevent the cycle of violence from continuing from one generation to the next. To learn more about the initiative, see [www.hhs.gov](http://www.hhs.gov).

#### **Growing Up Healthy: What Local Governments Can Do to Support Young Children and Their Families**

This brochure is a joint publication of the Zero to Three Policy Center, The National League of Cities (NLC) and The National Association of Counties (NACo), and is targeted to officials from

local governments. Growing Up Healthy provides a succinct review of the scientific research on early brain development, discusses why investments in early childhood services pay enormous dividends for communities, and highlights how local officials can support birth-to-five initiatives. If you would like a copy of Growing Up Healthy, please contact HyeSook Chung @ [hchung@naco.org](mailto:hchung@naco.org).

### **State Networks of Local Comprehensive Community Collaboratives: Financing and Governance Strategies**

Evidence suggests that comprehensive, coherent and flexible child care and early learning services are better for families than fragmented services -- but coordinating and financing such services is a challenge. Some states have begun establishing state/local collaborative networks and partnerships. This brief from the Finance Project examines how they do it, and their financing and governance strategies.

<http://www.financeprojectinfo.org/Publications/collaborative.pdf>

### ***Program Resources***

#### **High Levels of Flame Retardant in Breast Milk**

A flame retardant common in textiles, carpets, home appliances and hard plastic computers and has been linked to developmental problems in laboratory animals is present in the breast milk of U.S. women in much higher levels than in European women.

[http://www.kaisernet.org/daily\\_reports/rep\\_index.cfm?DR\\_ID=19971](http://www.kaisernet.org/daily_reports/rep_index.cfm?DR_ID=19971)

#### **U.S. Breastfeeding Rates at All-Time Recorded High**

According to new data from the Ross Mothers Survey, 70 percent of mothers now start breastfeeding in the hospital, up from 54.2 percent a decade ago. Thirty-three percent are still breastfeeding their baby at six months of age, up from 18.9 percent in 1992. (The federal Healthy People 2010 plan aims for a 75-percent breastfeeding rate in the hospital and a 50-percent rate at six months.) Rates among recipients of WIC, a federal nutrition program, are considerably lower. Breastfeeding rates at six months are also significantly lower for women who work outside the home. <http://abbott.com/ross/index.cfm?id=640>

#### **Building Literacy from the Ground Up -- The Parents as Teachers Model**

According to some studies, middle-class children enter first grade having spent over 1,000 hours sharing a book with an adult, while low income children have experienced just 25 hours. An evaluation of the national Parents as Teachers (PAT) program finds its curriculum effective for helping low-income parents build strong literacy environments for their very young children.

<http://www.patnc.org/pdf%20files/Report%20of%20Literacy%20Content%20Analysis.pdf>

PCA America's new booklet -- "**Preventing Shaken Baby Syndrome: Keeping Your Cool When Baby Keeps Crying**" -- tells parents why shaking a baby is dangerous and provides tips on how to calm a crying baby and manage their own stress. To find out more about this publication, call or call 1-800-835-2671 or click here:

<http://go.channingbete.com/wa/promotion?p=4&code=B19P>.

Visit **Child Development Media** ([www.ChildDevelopmentMedia.com](http://www.ChildDevelopmentMedia.com)) for a catalog of over 1000 titles of video and training materials relevant to home visiting programs.

## *Conferences*

### **PCA America National Conference May 16-19, 2004**

Online registration will open on January 5<sup>th</sup>. Go to [www.preventchildabuse.org](http://www.preventchildabuse.org) to register online and check out all the latest information for planning your trip to Orlando to be a part of the country's largest national conference focused on family support and child abuse prevention.

February 29 through March 3. **A System of Care for Children's Mental Health: Expanding the Research Base** (Research and Training Center for Children's Mental Health; Tampa, FL; <http://rtckids.fmhi.usf.edu/rtcconference/rtcconf.htm>)

March 1-2, 2004. **The Florida Multi-Disciplinary Conference on Shaken Baby Syndrome and Serious Physical Child Abuse.** Contact: Teresa Brechlin, Shaken Baby Alliance, (801)230-5697, [tbrechlin@shakenbaby.com](mailto:tbrechlin@shakenbaby.com). For more information visit: [www.shakenbaby.com](http://www.shakenbaby.com).

April 19-21, 2004, **Prevent Child Abuse New York**, 9<sup>th</sup> Annual Child Abuse Prevention Conference, "Creating a Community Quilt: Working Together for Children." Albany, NY. Contact: (518) 445-1273 or [info@preventchildabuseny.org](mailto:info@preventchildabuseny.org).

May 12-15, 2004, **Family Support America**, 10<sup>th</sup> Biennial National Conference, "Extending the Reach: Building a National Framework for Family Support." Chicago, IL. Contact (312) 338-0900 x105 or [gschingoethe@familysupport.org](mailto:gschingoethe@familysupport.org).

**Thank you and we'll see you again in March 2004!!!**

**As always, if you have any questions about the material in SCOOP, feel free to contact Lisa Cashion, Manager of State Systems Support at [lcashion@preventchildabuse.org](mailto:lcashion@preventchildabuse.org), (312) 663-3520 x160.**