

2010 RIVERSIDE COUNTY COMMUNITY NEEDS ASSESSMENT EXECUTIVE SUMMARY



*Child Abuse Prevention and Intervention (CAPIT)
Promoting Safe and Stable Families (PSSF), and
Community Based Child Abuse Prevention (CBCAP) Services*



On behalf of Prevent Child Abuse Riverside County (PCARC), I am pleased to present the 2010 Riverside County Community Needs Assessment for child abuse and neglect prevention, intervention and treatment services and programs. This report is intended to serve a variety of purposes and it is our hope that it will prove a valuable resource to our community. The findings contained in the report are intended to assist in the decision making process regarding the allocation of resources and program funding as well as educating the community concerning the needs of children and families.

This report represents a collaborative effort among private and public partners, community representatives and citizens of our County working together in the compilation of data surrounding services to children and families. PCARC, in collaboration with the Riverside County Department of Public Social Services and the Health Assessment Resource Center convened an Advisory Group representing a wide variety of community leaders, advocates, social service professionals and community members to help in developing methodologies and reviewing information concerning strengths, needs gaps and barriers related to child abuse prevention and treatments services in Riverside County. The contribution of these individuals, as well as those who participated in the many community based focus groups, those that provided input through interviews and those that participated in the community survey instrument was without question invaluable to the completion of this report. I, along with the entire PCARC Board of Directors extend our deep appreciation to all those that contributed to this report. It is our sincere hope that this report will provide a glimpse into the struggles and challenges families in our community are facing, the needs they have in raising safe and healthy children and the strengths that exist within our community.



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PCARC Board President



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Copies of this report may be downloaded from the Prevent Child Abuse Riverside County web site at the following location <http://pcariverside.org/publications/need-assessment>

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INTRODUCTION AND OVERVIEW

In 2001, the California Legislature passed Assembly Bill (AB) 636, the Child Welfare System Improvement and Accountability Act. AB 636 established the California Outcomes and Accountability System (COAS) to expand Federal oversight systems and to set the stage for a statewide performance monitoring and accountability system. Primary components of the COAS are the County Self-Assessment and System Improvement Plan (SIP) which track and measure program outcomes, processes and services provided to children and families. The goal of these performance measures is to improve the experience of children and families entering the child welfare system.

Service provision for Riverside County is guided, in part, by findings from a triennial countywide CAPIT/ PSSF/ CBCAP Needs Assessment, which is required to receive state and federal funding from these sources. The Child Abuse Prevention, Intervention and Treatment (CAPIT), Promoting Safe and Stable Families (PSSF), and Community Based Child Abuse Prevention (CBCAP) programs have specific intents and restrictions. The last CAPIT/ PSSF/ CBCAP needs assessment was conducted by Parents Anonymous[®] in 2007.

As the designated Child Abuse Prevention Council (CAPC), Prevent Child Abuse Riverside County (PCARC) released a competitive Request for Proposals (RFP) to select a contractor to conduct the 2010 countywide needs assessment. This contract was awarded to the Health Assessment Resource Center (HARC). Between October 2010 and January 2011, HARC conducted multiple research activities to identify assets and gaps in child abuse prevention services in Riverside County for the Department of Public Social Services (DPSS) to consider as it allocates CAPIT/ PSSF/ CBCAP resources for FYs 2012-2015.

The Needs Assessment conducted by HARC included: 1) a Provider Survey administered by web-based application to DPSS Children's Services Division (CSD) staff, the staffs of eight vendor organizations funded by CAPIT/ PSSF, and individuals identified by 2-1-1 Riverside County as service providers; 2) a priority-setting exercise conducted at the November 2010 Community Partners Forum; 3) a survey in Spanish and English administered by mail to a subset of former DPSS clients; 4) a printed survey in Spanish and English administered to persons seeking services at Family Resource Centers (FRCs) in Riverside County; 5) surveys in Spanish and English self-administered to a "random encounter" convenience sample of Riverside County residents; 6) fourteen focused group discussions and four key informant interviews conducted with PCARC collaborative groups and individuals affiliated with DPSS and related professionals with a connection to foster care, adoption and/or child abuse prevention.

The overarching context for the 2012-15 system improvement plan is expected reductions in federal, state and local funding for public social services. Consequently, the implementation of programs, services, and policy recommendations requiring new resources is especially challenging. To achieve future reductions in the incidence of child abuse and to continue improving reentry and permanency indicators, system improvement in 2012-15 must capitalize upon the groundwork laid by the Family to Family initiative,¹ continue to improve and expand interagency and agency/ neighborhood collaboration, emphasize the co-location of services, allocate resources for effect, and increase efficiency. The recommendations supported by the data contained in this report follow from these themes.

¹ See: <http://dpss.co.riverside.ca.us/ChildProtectiveServices.aspx#Family>

Selected Provider Survey Results

The 433 respondents from DPSS, vendor organizations, the District Attorney's office, K-12 educational organizations and 2-1-1 listed service providers completing most or all of the web-based Provider Survey were reminded that Primary prevention raises public awareness about child maltreatment among the general population, Secondary prevention targets families with risk factors for abuse and neglect, and Tertiary prevention programs prevent continued child maltreatment after abuse or neglect has been substantiated. Next, they indicated the percentage of resources that should be allocated to each of these forms of child abuse prevention. Consistent with its charge as a public Child Protective Service agency, providers believe that the largest proportion of DPSS resources ($M= 39.5\%$) should be allocated to tertiary prevention. The mean recommended allocations to secondary prevention ($M= 32.2\%$) and primary prevention ($M= 28.6\%$) are lower.

This emphasis upon tertiary prevention was balanced, however, by very high ratings of the importance of services and supports provided to families that have one or more risk factors for child maltreatment before they enter the child welfare system—in other words, secondary prevention. These results emerged from linked pairs of Provider Survey items presenting the most critical services designed to prevent the occurrence of child maltreatment or domestic violence, followed by an assessment of the extent to which that service or best practice is currently implemented.

“Individual, conjoint, family or group counseling services designed to prevent the occurrence of child maltreatment or domestic violence” was ranked by providers as first in importance to the prevention of child maltreatment on a list of twenty services. The gap between it and its implementation indicator “In Riverside County, we have a full array of community-based services structured to respond to families by connecting them with supports and services prior to dependency court intervention” was the second widest observed across all linked pairs of items in the Provider Survey. Utilizing an algorithm accounting for both the perceived importance of a service or best practice and the extent of its implementation in Riverside County, this item pair depicts a gap tied for first priority to improve the prevention of child abuse.

A gap tied for third priority resulted from pairing, “...counseling services designed to prevent the occurrence of child maltreatment or domestic violence” with “Staff at my agency/ organization is able to connect children and families to needed supports and services at the earliest moment possible, so early interventions can help resolve problems like substance abuse or unhealthy parenting behaviors before they escalate.”

“Parent Education classes for adults who need assistance strengthening their emotional attachment to their children, learning how to nurture their children, and understanding general principles of discipline, care and supervision” was rated as the fifth most important service to prevent child abuse. Pairing this item with the implementation indicator, “In Riverside County, we have a full array of community-based services structured to respond to families by connecting them with supports and services prior to dependency court intervention” produced the second gap in the tie for third priority. The high priorities associated with the gaps between this item pair and the two described above indicate the importance of secondary prevention to service providers and DPSS professionals.

Responses to a subsequent open-ended question inviting advocacy for a particular parent education curriculum suggest that no single parent education curriculum is perceived by providers to be universally effective. Instead, to engage parents and to change their behavior, practitioners indicate that classes tailored to parents' specific needs (e.g. parenting children in specific age groups—particularly

teenagers; parenting in the context of a specific cultural-linguistic heritage; parenting children with special needs) are necessary.

Collaboration and co-location of services are also identified by providers as key areas of emphasis to prevent child abuse in Riverside County. The best practice receiving the second highest agreement in the Provider Survey is, “Placing offices or staff from various agencies at the same location (e.g., placing substance abuse treatment staff in children’s services offices) improves collaboration and can help ensure that supports and services are easily accessible.” Pairing this statement with, “In Riverside County today, a variety of services available to families of children at risk for child abuse are frequently located in the same building,” produced the widest gap between a best practice and its implementation in Riverside County and a tie for first in terms of priority.

“A high degree of collaboration between agencies involved in child abuse prevention will lead to more integrated and comprehensive services, collective problem solving and shared innovations” received the strongest agreement of the seven best practices listed on the Provider Survey. Paired with an implementation indicator articulated as, “In Riverside County, the responsibility for preventing and addressing child maltreatment is well distributed between child protection agencies and local communities” produced the third largest gap among all item pairs and positioned it in second place in terms of priority.

The same best practice, “A high degree of collaboration between agencies involved in child abuse prevention...” paired with a different implementation indicator, “In Riverside County various collaboratives have formed to share innovations and work together to solve problems in the prevention of child abuse and neglect,” produced a gap ranked as the fourth highest priority overall. Paired with another implementation indicator, “In Riverside County today, a strong degree of interagency collaboration helps to provide more integrated and comprehensive child abuse prevention services” produced a gap ranked as the sixth highest priority of the 23 calculated based on Provider Survey items.

Information sharing is an element of collaboration directly addressed in the Provider Survey by the perceived gap between the best practice receiving the third strongest agreement, “Developing systems to share information and track clients can improve coordination between agencies to prevent child maltreatment,” and the implementation indicator, “Agencies and organizations in this county have developed common intake and assessment forms to integrate the information collected by various agencies, share this information and to reduce the number of forms families must complete.” This gap ranked seventh in priority among the 23 item pairs. The size of the gap between this best practice and its implementation is significantly and positively related to providers’ years of professional experience. Those with the most experience view the gap between this best practice and its implementation in Riverside County as wider than do their less experienced colleagues. Together, these highlights establish one theme: “Diverting children and families from the child welfare system”—secondary prevention—and introduce another, “Collaboration and Information Sharing” that is reinforced by other quantitative and qualitative results.

Community Partners Forum Prioritization Exercise

Consistent with providers' emphasis upon secondary prevention, the 62 professionals attending the November 2010 Community Partners Forum identified, "Enhance our collective ability to connect children and families to needed supports and services at the earliest moment possible, so early interventions can help resolve problems like substance abuse or unhealthy parenting behaviors before they escalate" as the system improvement priority most important to prevent child abuse in Riverside County. The next highest system improvement priority is consistent with the theme of collaboration: "DPSS partners with community groups in neighborhoods that have a high concentration of families involved with the child welfare system to educate them about its services, build trust, and establish a positive 'community presence.'" The third highest system improvement priority is "Allocate resources to child abuse prevention programs emphasizing the outcomes (defined as real changes in the lives or circumstances of the families served) they produce, rather than the 'units of service' they deliver." This is consistent with our recommendation to "allocate resources for effect," and is echoed in various ways in the interview and focused group discussion results.

The first service priority established by Community Partners Forum participants is, "Services for youth who age out of foster care (e.g. housing, health and safety, employment and education). This was a key concern of focus group participants. The second priority is, "Crisis intervention, as a preventive service for families at risk." "Mental health counseling for children" was ranked as the third priority.

Selected DPSS Client Survey Results

Utilizing rigorous procedures to protect confidentiality, a printed survey in Spanish or English was mailed to 932 former DPSS clients meeting three criteria. 1) Their interaction with DPSS was comparatively recent. The sample frame consisted of cases closed between July 1, 2009 and June 30, 2010. 2) Cases selected into the sample frame had received a disposition of "reunification" or "family maintenance stabilized." 3) The client's relationship to the child involved in the allegation of maltreatment or neglect was "birth mother." Subtracting 149 pieces of mail returned as undeliverable left 783 potential respondents. Just 61 (7.8%) surveys were completed and returned in an enclosed postage-prepaid envelope. Although they are included in this report, this low response rate compromises our ability to generalize these survey results to the 932 former DPSS clients who met the criteria for inclusion, and these findings must be interpreted with caution.

More than one half (52.5%) of the responding former clients rated "the services that the county child protection agency (Children's Services Division) provided in improving the conditions or circumstances that led to your family's involvement with the system in the first place" as "Very helpful" and 21.3% rated the services received as "Somewhat helpful." Similar ratings were obtained for the services received in terms of "preventing the same conditions and circumstances from happening again" (55.0% "Very helpful" and 18.3% "Somewhat helpful.") On a four-point scale (from 1= "No help at all" to 4= "Very helpful,") four of the 19 core services provided to DPSS clients received mean ratings at or above 3.4. In descending order, these are "Substance Abuse Treatment" (M= 3.48), "Group Counseling" (M= 3.46), "12-Step Program" (M= 3.43) and "Anger Management" (M= 3.40). Three quarters agreed or strongly agreed that, "the combination of services I received was right for my family," and about 90% that the services received "were appropriate for my race/ethnicity, culture, and language." The extent to which these results reflect the fact that former clients responding to this survey "graduated" from the system with "reunification" or "family maintenance stabilized" dispositions is not known.

In contrast, just 63.3% either “Agreed” or “Strongly agreed” that, “Staff at the various organizations and agencies that I had to work with seemed to know what the other was doing as far as my case was concerned.” The fact that 36.7% disagreed or strongly disagreed with this statement appears to indicate room for improvement with regard to interagency collaboration. Similarly, that 43.3% of former DPSS clients agreed or strongly agreed that, “I had to provide the same information over and over to staff from different organizations and agencies” indicates a need for better information sharing across agencies.

Selected Family Resource Center Client Survey Results

In fairly equal proportions from each location, 361 surveys were completed by FRC clients at the Mecca, Desert Hot Spring, Perris, and Rubidoux locations. The service rated as most important to prevent child abuse in Riverside County on a six-point scale from (1=“Not at all Important,” to 6=“Extremely Important),” is “Easy-to-get-to family-focused treatment for substance abuse including education about parenting and child development” ($M= 5.42$). Tied for second ($M= 5.37$) are “Parent Education classes for adults to help them feel closer to, and learn how best to discipline, care for and supervise their children,” and “Anger Management classes to stop abuse and violence.” Tied for third are “Classes and advocacy services for victims of domestic violence to empower them and to prevent future incidents of domestic violence,” and “Counseling to prevent the occurrence of child abuse and domestic violence” ($M= 5.33$).

To assess general knowledge about child abuse, FRC clients answered six multiple-choice questions identical to those included on a survey of the general public—see the following Community Survey section. The general public, compared to FRC clients, is more likely to know that two-thirds of child abuse investigations focus on neglect. The general public is also more likely than FRC clients to know that Riverside County ranks 2nd among 58 California counties in terms of the number of children supervised in out-of-home placement. FRC clients, on the other hand, are more likely than the general public to correctly identify all seven professions listed on the survey questionnaire as mandated reporters.

The proportion (43.7%) of FRC clients correctly answering that the largest proportion of child abuse is reported by school personnel is lower but not significantly different than the general public (48.6%). Similarly, a lower (but not significantly lower) proportion of FRC clients (10.3%) than members of the general public (15.6%) correctly indicate that across the nation children from birth to one year of age have the highest rate of victimization by adults who neglected or abused them. Finally, the proportions of FRC clients (21.3%) and the general public (22.6%) correctly indicating the number of calls in 2009 to the Child Protective Services Hotline reporting suspected abuse or neglect was closest to 20,000 are essentially equivalent. The total number of correct responses to the six questions is not significantly different between FRC clients ($M=1.95$) and the general public ($M=2.08$), pointing to the need for education regarding child abuse targeting the general public—primary prevention.

Selected Community Survey Results

Consistent with the call for primary prevention, in response to the open-ended question, “What can we do now as a community to prevent child abuse in Riverside County?” over half of those who answered indicated that awareness and education are needed to prevent child abuse. Responses in this category included “gain knowledge,” “helping to inform people,” “reach out to the community,” and “get the word out.” The next most common response was to report abuse. Examples include “be more vigilant and involved” and “contribute by reporting if you see something wrong.” About one in ten community residents (10.9%) indicated that parent education/ parenting classes are needed.

Four hundred nine residents of Riverside County completed this self-administered survey at the Grove Community Church, Sacred Heart Church, the Chicago Avenue Gateway Office Building, Palm Desert Community Park, Palo Verde Unified School District in Blythe, in the Eastern Coachella Valley, and at public locations (e.g., libraries, shopping centers) in the Riverside/ Corona area. Upon return of the completed survey questionnaire, interviewers handed the respondent a “Fact Sheet” presenting the correct answers to the knowledge-based questions and the Child Protective Services Hotline Number.

The most frequent response (71.2% of those answering) to the question, “What’s the best way to educate people in Riverside County about the issue of Child Abuse?” was some sort of community outreach. Responses in this category included classes, meetings, forums, symposiums, discussion groups, workshops, and seminars. Many residents provided a location for these outreach efforts—such as schools, churches, parks, community centers, worksites, doctors’ offices/ hospitals, and booths at social events. The second most frequent response (27.0%) was to use the media, including TV, newspapers, radio ads, billboards, and brochures. The fact that FRC clients and members of the general public can answer an average of just two of six questions about child abuse correctly establishes the need for continuing education about child abuse in Riverside County.

Selected Focus Group Discussion and Key Informant Interview Results

Our full report includes over 45 pages of qualitative analysis of the 14 focus group discussions and four “key informant” interviews conducted with PCARC local collaborative members, staff of DPSS and associated agencies, and other professionals associated with child abuse prevention, foster care and adoption. A mere fraction of these results can be addressed here.

Consistent with the “Primary Prevention” theme established by discussion of the Community Survey in the preceding section, geographically dispersed agency representatives providing diverse services applauded the efforts undertaken by DPSS and other agencies to better educate the community about preventing child abuse and neglect. Education efforts, such as the “It Happens to Boys” billboards, are seen as successful and are lauded for their ability to reach adults and children. Flyers distributed to families are seen as a way to provide information without provoking a defensive reaction from the recipients. PCARC collaborative members noted the effort to disseminate the Child Abuse Hotline Number so that people have the necessary “information on what to do when they become aware of any kind of abuse...” Of special importance to many discussion participants and interviewees is education provided to children so that they can distinguish appropriate from inappropriate touching and know how to get help if they are being maltreated.

In addition to providing education about what child abuse is, how to recognize it, and how to report it, these results point to the need for a public relations campaign to dispel the perception in some quarters of the general public that DPSS will remove a child from the home at the slightest provocation. Law enforcement participants in the Pass area (including the communities of Banning, Beaumont,

Cherry Valley, Cabazon, and Calimesa) recommended a DPSS public education and public relations program so that parents would not be afraid to be “stern” with their children. These law enforcement professionals have encountered parents that believe DPSS will become involved if they discipline their child in any way. A representative from Blythe echoed the recommendation that DPSS should attend community events to explain the services they provide and to assure parents and community members that they go to “great lengths to prevent kids from being removed from the home.” Establishing trust between DPSS and the community is a necessary prerequisite to the collective problem-solving that DPSS is initiating in communities with concentrated risk factors.

With regard to secondary prevention, although getting services to families antecedent to their involvement in dependency court is widely agreed to be critically important, the capacity to provide services to a large pool of “at risk” parents has limits and their lack of willingness to engage with such services is viewed as problematic by PCARC collaborative members and agency personnel. Moreover, processes for the early identification and referral of families at risk do not appear to be in widespread use. Regarding the latter issue, FRCs are well-positioned to perform this function and the family identification and referral activities at the Rubidoux FRC were acknowledged as one successful model. Two programs based in elementary schools were also identified as successful child abuse prevention interventions. Programs in Riverside County school districts and nonprofits funded by First 5 or others that conduct similar screenings should be identified and a liaison appointed to link families identified as at risk of child maltreatment with CAPIT/ PSSF/ CBCAP service providers.

Discussion participants and interviewees provided repeated independent testimony regarding the positive effects of the collaboration DPSS has undertaken in the context of the Family to Family Initiative; a primary strategy in the Riverside County System Improvement Plan. Family to Family is, “grounded in the beliefs that family foster care must be focused on a more family-centered approach that is responsive to the individual needs of children and their families, rooted in the child’s community or neighborhood and is sensitive to cultural differences.” The practice and policy infrastructure developed in this regard, especially Team Decision Making receives positive appraisals from all quarters. Many believe that the expansion of this practice or some variant of it would be extremely helpful as a secondary prevention activity targeting families at risk but who have not yet come to the attention of DPSS.

The extent to which DPSS has reached out to faith-based communities and organizations is also viewed as a very positive development that must be continued in the future. Efficiencies in foster and adoptive parent recruitment as well as the recruitment of mentors and families willing to work with other families are noted. Such collaborations must continue and be expanded to interfaith consortiums to include the participation of members of all faiths. Increasing community involvement in the prevention of child abuse is especially necessary as public funding for social services diminishes.

The broad array of stakeholders included in this Needs Assessment agrees that there is limited access to mental health care and substance abuse treatment for children, adolescents and adults. The need for expanded and more accessible substance abuse treatment is especially salient in view of the overlap between substance abuse and child maltreatment. The Riverside County Family Preservation Court, an intensified one-year court-supervised substance abuse recovery program that is designed to enhance the sobriety efforts of parents prior to filing a dependency petition to enable their children to be safely maintained with them, was cited by various professionals as a program that appears to be working, particularly the component that provides intensive parent-child interaction therapy. The length of the waiting list appears to vary by county region, but in the Metro Riverside area, long waiting lists are an obstacle to participation.

Services for teens in the foster care system are widely perceived to be inadequate. This inadequacy is particularly important to address in view of the compelling needs of emancipating youth which include transitional housing. Both professionals and emancipated youth decry the lack of independent living skills instruction, and insufficient emphasis upon education in many foster placements. One professional suggests that training in the provision of independent living skills be established as a post-certification training requirement for Foster Family Agencies (FFAs). Counseling and other services for pregnant and parenting foster youth are a critical need to break the cycle of dependency.

Many discussion participants and interviewees assert that parent education works to prevent child abuse. In these discussions, parent education subsumes a variety of curricula and emphases, and is delivered to a diverse array of parents most (but not all) of whom are perceived to be at risk for child maltreatment. Evidence for the efficacy of these programs is predominantly anecdotal, however, and other professionals are critical of “one size fits all” classroom-based lecture-format parent education and anger management classes.

The most urgent need for additional services in a particular geographic area is articulated by PCARC local collaborative members in Blythe. Areas around Perris, Good Hope, Mead Valley, Lake Elsinore, Sun City, Wildomar, Moreno Valley, Hemet and San Jacinto were also identified as underserved. With regard to racial/ ethnic and cultural-linguistic groups, the need for more services provided in Spanish is repeatedly cited. Some participants indicate the need for African-American specific services in the Moreno Valley area and culturally tailored mental health services for geographically dispersed, low-income Native Americans. Teens and adolescents in the foster care system (especially pregnant and parenting teens), grandparents caring for grandchildren and families with members (particularly parents) that are involved with gangs and families in which a parent is incarcerated were identified as underserved at-risk populations.

Summary and Conclusions

- Secondary prevention programs designed to divert children and families from the child welfare system are critically important. It is far less expensive to prevent child abuse than to treat its effects.
- The data collected to inform this needs assessment includes conflicting information about anger management and parent education. These inconsistent findings signal the need for objective information about what is and is not working with regard to anger management and parent education. It is probable that parent education and anger management classes are differentially effective depending on the intensity and interactivity of the presentation and the motivation of the parents attending. More refined intake and assessment tools are recommended to inform better targeted/ tailored anger management and parent education classes that meet parents’ specific needs.
- A cost-effective step toward empirically determining what works, and to allocating resources for effect, is to institute the assignment of a common case ID to connect individuals across CAPIT/ PSSF/ CBCAP service providers and DPSS. This step would ensure that outcomes like successful reunification, family maintenance leading to stabilization and lack of reoccurrence or first report can be linked to the type and extent of services received. There is no better way to determine what is truly working for individuals and subgroups of DPSS clients and other at-risk

parents. Satisfaction with services and provider assessments of the extent to which clients benefit from them are poor substitutes for indicators of real changes in their lives and circumstances.

- In contrast to the lower importance assigned by providers, former DPSS clients ranked “Substance Abuse Treatment” as *the most helpful*, “12-step Program” as the third most helpful and “Drug Testing” as the sixth most helpful of 19 core services they received. FRC clients rated, “Easy-to-get-to family-focused treatment for substance abuse including education about parenting and child development” as the service *most important* to prevent child abuse in Riverside County. To the extent that access to substance abuse treatment can be leveraged by CAPIT/ PSSF/ CBCAP funds, it should be.
- Services for youth who age out of the foster care system, e.g. housing, health and safety, employment, and education are universally regarded as needed investments in the prevention of child abuse.
- The practice and policy infrastructure developed in the context of the Family to Family initiative, especially Team Decision Making (TDM), receives positive appraisals from all quarters. Many believe that the expansion of this practice or some variant of it would be extremely helpful as a secondary prevention activity targeting families at risk but who have not yet come to the attention of DPSS.
- Another, and perhaps more complicated element of collaboration that can be expanded is information sharing. One element of information sharing discussed above is establishing a common case ID that can be linked across county service providers and DPSS. Another is the development of common intake and progress forms. Movement to encourage the efficiency and improved collaboration that will result from information sharing can be jump-started by recasting CAPIT/PSSF/CBCAP vendor RFPs to award points to proposals including signed MOUs regarding information sharing practices.
- The best practice, “Placing offices or staff from various agencies at the same location (e.g., placing substance abuse treatment staff in children’s services offices) improves collaboration and can help ensure that supports and services are easily accessible” received the second strongest endorsement from providers in Riverside County. Co-location is a cost-effective means of addressing the transportation issues that limit access to services. Awarding points to CAPIT/ PSSF/ CBCAP vendor proposals indicating a willingness to outstation their service providers at FRCs and other shared locations will encourage progress in this direction.
- Myriad other services and programs needed to prevent child abuse in Riverside County were identified in the context of this assessment. Improving the culture and experience of foster care from the youth perspective is an overarching concern that exceeds the scope of this research but is nonetheless of critical importance. Specialized services for victims of sexual abuse, including male victims, are needed with reduced or no lag times. A “Parent Advocate” specifically to guide families through the dependency court process would be useful. Many other creative and interesting suggestions are detailed in the full report.