

# Institute for Community Collaborative Studies

Department of Health, Human Services and Public Policy, CSUMB

- Family-centered practices
- Access to services
- Collaborative community leadership
- Ethical and professional communications
- Assessment and outcomes measurement
- Health, human services and public policy students

Pathway for the Prevention of Child Abuse and Neglect (2007)

Matrix Outcomes Model (1997)

# Pathway to the Prevention of Child Abuse and Neglect

# Pathways Prevention Project

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  - Project on Effective Interventions at Harvard University
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  - Pathways Mapping Initiative June 2007

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University, Monterey Bay, Jerry Endres, Director

# Pathway Purpose

- Give communities reliable guidance what has worked elsewhere
- Combine with local wisdom to improve outcomes for children and families

# Pathway Purpose

- Communities can effectively and strategically invest resources
- Make it easier to agree on plausible strategies that the majority of tribal members consider important

# Mental Mapping Meetings

February 2006 Washington, DC

July 2006 Sacramento Ca.

130 leaders of prevention across  
diverse fields

# Pathway Features

- A knowledge base that bridges disciplines
- Identifies actions that contribute to achieving specified outcomes
- Identifies indicators of progress toward specified outcomes

# Pathway Features

- Identifies attributes-key ingredients-that make specific actions effective
- Identifies the elements of community and system infrastructures that support and sustain change



# Outcome: Prevention of Child Abuse and Neglect

Child Conditions	Family Conditions	Community Conditions
<ul style="list-style-type: none"><li>▪ Children in good physical and mental health</li><li>▪ Children's cognitive and socio-emotional development on track</li></ul>	<ul style="list-style-type: none"><li>▪ Parental resilience</li><li>▪ Strong social connections</li><li>▪ Knowledge of child development and demonstrated skill in parenting</li><li>▪ Basic supports and services used by families as needed</li><li>▪ Family environment</li></ul>	<ul style="list-style-type: none"><li>▪ Community environment that support healthy child development and family functioning</li></ul>

# Pathways Action Approach

- Actions across systems and disciplines
- Actions that include informal community supports
- Actions that take account of policies and funding
- Actions from theories of change
- Actions presented through case examples

Early detection of health and developmental concerns

High quality child care and schools support social and cognitive development

Opportunities for youth to engage in civic and community life

1

**Children and Youth Are Nurtured, Safe and Engaged**

Support to families to strengthen parenting capacity

Social networks and services attuned to child development and connected to specialty care

Supports and services help parents to meet basic needs and decrease stress

2

**Families Are Strong and Connected**

Community-based services structured to respond to "screened out" families.

Staff who encounter families are trained in screening and referrals

Adequate service capacity based on information systems that track family needs and progress

3

**Identified Families Access Services and Supports**

High quality, accessible family-centered treatment services for substance abuse and mental illness

Coordination among public systems that encounter families struggling with addiction, mental illness, and domestic violence

4

**Families Are Free From Substance Abuse and Mental Illness**

Sustainable networks of services and supports contribute to child protection

Systems of care stay connected to families over time and assist with challenges as needed

Neighborhoods are safe, stable, and supportive

5

**Communities Are Caring and Responsive**

Services and supports target populations in communities with concentrated risk factors

Promising community-based organizations achieve geographic saturation with interventions and supports to respond to a wide range of needs

6

**Vulnerable Communities Have Capacity To Respond**

Early detection  
of health and  
developmental  
concerns

High quality child care  
and schools support  
social and cognitive  
development

Opportunities  
for youth to engage  
in civic and  
community life

**1**

**Children and  
Youth Are  
Nurtured,  
Safe and  
Engaged**

- **INDICATORS**
  - Children in good physical and mental health
  - Children's cognitive and socio-emotional development on track
- **INGREDIENTS**
  - Early childhood care and education
  - Effective family-strengthening programs
  - Effective mentoring

Support to families  
to strengthen  
parenting capacity

Social networks and  
services attuned to  
child development  
and connected to  
specialty care

Supports and  
services help parents  
to meet basic needs  
and decrease stress

2

**Families Are  
Strong and  
Connected**

- INDICATORS
  - Parental resilience to stress
  - Strong social connections
  - Knowledge of child development and skill in parenting
  - Basic supports and services used by families as needed
  - Family environment
- INGREDIENTS
  - Early detection of health and developmental concerns
  - Effective parent education
  - Effective home visiting services

Community-based services structured to respond to “screened out” families.

Staff who encounter families are trained in screening and referrals

Adequate service capacity based on information systems that track family needs and progress

3

**Identified Families Access Services and Supports**

- **INDICATORS**

- Parents have capacity to seek help as needed
- Parents are connected to community social institutions, services and supports
- Parents have supports that help them cope with the issues of poverty

- **INGREDIENTS**

- Effective coordination among public agencies
- Effective prevention efforts

High quality, accessible family-centered treatment services for substance abuse and mental illness

Coordination among public systems that encounter families struggling with addiction, mental illness, and domestic violence

4

**Families Are Free From Substance Abuse and Mental Illness**

- **INDICATORS**

- Parents are free of issues that negatively effect parenting, including substance abuse, symptoms of depression and domestic violence
- Family environment is free from injuries and has a safety plan

- **INGREDIENTS**

- Enhancing care for families with substance use disorders who are involved in the child welfare and family judicial systems

Sustainable networks of services and supports contribute to child protection

Systems of care stay connected to families over time and assist with challenges as needed

Neighborhoods are safe, stable, and supportive

5

**Communities  
Are Caring and  
Responsive**

- **INDICATORS**

- Community has capacity to provide affordable and high quality services needed to maximize family functioning
- Community provides families with healthy environments
- Neighborhoods foster social ties to act collectively

- **INGREDIENTS**

- “Gold standard” for all effective community interventions
- Capacities of organizations and providers to collaborate when treating young children and families exposed to violence



Services and supports target populations in communities with concentrated risk factors

Promising community-based organizations achieve geographic saturation with interventions and supports to respond to a wide range of needs

6

**Vulnerable Communities Have Capacity To Respond**

- INDICATORS
  - Community environments support healthy child development and family functioning
- INGREDIENTS
  - Community change initiatives
  - Tribal policy and organizational change

# Targets of Intervention

	<b>CHILDREN</b>	<b>FAMILIES</b>	<b>COMMUNITIES</b>
<b>Primary or Universal Prevention</b>	Goal I: Children and Youth Nurtured, Safe, and Engaged	Goal II: Strong, Connected Families	Goal V: Caring, Responsive Communities
<b>Secondary or Targeted Prevention</b>		Goal III: Identified Families Access Services and Supports	Goal VI: Greater Capacity to Respond in Vulnerable Communities
<b>Tertiary or Treatment Prevention</b>		Goal IV: Families Free from Substance Abuse and Mental Illness	

# Cross-Cutting Ingredients of Effective Implementation

- **Accessibility**
  - Outreach and enrollment procedures ensure families can easily locate and reach needed services.
- **High Quality**
  - Services are comprehensive, family-centered and culturally responsive.
- **Effective Management**
  - Principles and policies are explicit for well-trained and supervised staff.
- **Results Oriented**
  - Programs and community have the capacity to monitor programs and measure outcomes.
- **Connections to and Across Services and Support**
  - Community programs are connected and guide families to entry points for basic supports, supportive networks and specialized services.
- **Community Engagement and Social Networks**
  - Tribal members participate in building community.
- **Sustainability and Funding**
  - Funding investments focus on quality implementation, specific needs of children and families, and measure results.

# Prevention Planning

## Engage Collaborative Community Partners

- A Tribal Member and Organization Assessment
- Identify Issues of Concern
- Establish Community Philosophy
  - Values-Vision-Leadership Roles
- Select Goals and Outcomes

# Statement of Philosophy

We, the people of Warm Springs, believe the community can and should be healthy. We believe that all individuals are capable of making decisions when informed and provided with factual information, and that all individuals have a right to, and a responsibility for, their own health decisions. We subscribe to the preservation and protection of our traditional beliefs and values for multiple generations. We believe that by putting the needs of the people first we will regain trust, respect, and compassion for each other. Through the community working together, taking ownership of its health, and striving to improve the quality of all our lives, we will become a healthy community, enhance our self-esteem, and preserve our way of life.

# Prevention Implementation

- Build on Strengths, Opportunities, Assets
- Collaborative Approaches to Overcome Obstacles
- Priorities for Immediate and Longer Impact
- Objectives with Best Practices
- Measures for Population Outcomes and Systems Change
- Data and Report Cards to the Community

# Simplistic Evaluation

- Are we addressing family and community needs?
- How are we doing over time?
- Are we meeting standards or outcome indicators?
- What are we accomplishing?

# Strength Based Change Outcomes

**AWARENESS** Family sees their situation from a strength based perspective

**SKILLS** Family has the knowledge, skills and ability to move toward self-selected priorities

**MOTIVATION** Rewards and benefits for change outweigh attitudes or obstacles that may prevent the Family from achieving goals

**MAINTENANCE** Family is using strengths to reach and maintain self-sufficiency



# A Case Study

2005-2008 Office of Child Abuse and ICES developed 13 county collaborative partnerships between child welfare and family agencies. Shared outcomes across agencies.

# What is the Matrix?

The Matrix is an outcome-based approach that focuses on the changes of a community population.

Outcomes tell us how the population is doing at any one time in their actual situation.

The Matrix uses indicators that measures the population's status level situation initially and over a period of time.

# What are Outcomes

- Outcomes are end results of efforts made in family-centered practice.
- Outcomes represent a change in status from a baseline assessment for individuals, families, groups, neighborhoods, or communities.
- Outcomes can be positive or negative and generally change over time

# Children

## (Children's Development Matrix Outcome Model)

### Categories and Indicators

<b>Children's Care &amp; Safety</b>	<b>Children's Development</b>	<b>Children's Education</b>
Access to quality health care	Age-appropriate behavior & social skills	Access to appropriate educational services
Access to age-appropriate after school program	Children's behavior	Appreciation of intergenerational relationship
Supervision by the family	Children's communication	Comprehensive: retelling a story
Assure safe environment (risk of physical violence, sexual abuse)	Development milestones	Connectedness with local schools
Family respite Care	Peer relationships	Desire to read
	Resource for recreation & play opportunities	Educational development
	Verbal communications	Reading exposure by number of books read
	Age-appropriate development	School/Program attendance
		Vocabulary

# Adolescence

Adolescence Development		Student Development	
<b>Attitude</b>	<b>Knowledge of goal setting</b>	<b>Quality of immediate family support</b>	<b>Ability to follow directions</b>
<b>Job skill; work history</b>	<b>Peer relationship</b>	<b>Quality of community or school support</b>	<b>Communication with friends and adults</b>
<b>College and Vocational Goals</b>	<b>Conflict resolution skills with family</b>	<b>School/Program attendance</b>	<b>Leadership skills</b>
<b>Communication with Adults</b>	<b>Disciplinary problems</b>	<b>Sense of personal responsibility</b>	<b>Make wise decisions</b>

# Family Development Matrix

<b>Adult Education and Employment</b> <ul style="list-style-type: none"> <li>• Adult Education</li> <li>▪ Employment Status</li> <li>▪ History Skills</li> <li>▪ Language Skills</li> </ul>	<b>Basic Needs</b> <ul style="list-style-type: none"> <li>• Clothing</li> <li>▪ Nutritious Food</li> <li>▪ Furniture</li> <li>▪ Utilities</li> <li>▪ Food Preparation</li> </ul>	<b>Children's Care and Safety</b> <ul style="list-style-type: none"> <li>• Child Care</li> <li>▪ Physical Violence</li> <li>▪ Sexual Abuse</li> <li>▪ Supervision</li> </ul>	<b>Children's Development</b> <ul style="list-style-type: none"> <li>• Appropriate Development</li> <li>▪ Behavior Skills</li> <li>▪ Children's Communication</li> </ul>
<b>Children's Education</b> <ul style="list-style-type: none"> <li>• Connected Schools</li> <li>• After school programs</li> <li>• Books read</li> </ul>	<b>Community Engagement</b> <ul style="list-style-type: none"> <li>• Community Groups</li> <li>▪ Neighbor Relationships</li> <li>▪ Resources Knowledge</li> </ul>	<b>Community Environment</b> <ul style="list-style-type: none"> <li>• Neighborhood Appearance</li> <li>▪ Neighborhood Crime</li> </ul>	<b>Family Environment</b> <ul style="list-style-type: none"> <li>• Conflict Resolution Skills</li> <li>▪ Extended Family</li> </ul>
<b>Financial Stability</b> <ul style="list-style-type: none"> <li>• Basic Expenses</li> <li>▪ Budgeting Financial Resources</li> <li>▪ Income Capacity</li> </ul>	<b>Health and Safety</b> <ul style="list-style-type: none"> <li>• Health Insurance</li> <li>▪ Physical Health</li> <li>▪ Accidents</li> <li>▪ Health Literacy</li> </ul>	<b>Immigration</b> <ul style="list-style-type: none"> <li>• Immigration Status</li> <li>• Cultural Involvement</li> <li>• Literacy</li> <li>• Access to Services</li> </ul>	<b>Parents/Child Relationship</b> <ul style="list-style-type: none"> <li>• Discipline</li> <li>▪ Enrichment</li> <li>▪ Family Rules</li> <li>▪ Nurturing</li> </ul>
<b>Prenatal Healthcare</b> <ul style="list-style-type: none"> <li>• Health Care Resources</li> <li>▪ Health Knowledge</li> <li>▪ Family Support</li> <li>▪ Nurturing &amp; Enrichment</li> </ul>	<b>Shelter</b> <ul style="list-style-type: none"> <li>• Adequacy</li> <li>▪ Housing Environment</li> <li>▪ Housing Resources</li> <li>▪ Stability Housing</li> </ul>	<b>Social and Emotional Health</b> <ul style="list-style-type: none"> <li>• Coping Skills</li> <li>▪ Life Value</li> <li>▪ Quality of Wellbeing</li> <li>▪ Personal Responsibility</li> </ul>	<b>Substance Abuse</b> <ul style="list-style-type: none"> <li>• Presence of Substance Abuse</li> <li>• Family Member Abuse</li> <li>• Coping Mechanism</li> </ul>

# Customize a Matrix model to fit a specific program population

Adolescence  
Adult Education & Employment  
Agency Organizational Standards  
Ambitions  
Attachment Status (child)  
Basic Needs  
Caregiver Support (senior)  
Children's Care & Safety  
Children's Education  
Children's Development  
Children's Skill Building  
Community Engagement  
Community Environment  
Community Health  
Cultural Competence  
Elder Support  
Family Environment  
Family Relations  
Financial Stability

Health Access  
Health Safety  
Health Care Policy  
Immigration  
Individual Health  
Intergenerational Programs  
Long Term Care (senior)  
Parent Involvement  
Parents/Child Relationships  
Prenatal Healthcare  
School Healthy Environment  
Sexual Activity  
Shelter  
Social & Emotional Health  
Social Family Support  
Student Development  
Substance Abuse  
Transportation  
Volunteers

# Auto-Generate Evaluation Forms

[Back](#)

Parent Name: \_\_\_\_\_

Visit Date: 02/22/2006

Visit Number 2

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Staff Name: \_\_\_\_\_

Date: \_\_\_\_\_

Indicator	Strengths		Concerns	
	Safe/Self-Sufficient	Stable	At Risk	In Crisis
<b>Adolescent Development</b>				
Attitude		3		
CollegeVocationalGoals		3		
CommunicationAdults	4			
DecisionMaking		3		
DisciplinaryProblems		3		
GoalSetting	4			
InterviewSkills		3		
PeerCommunication		3		
PersonalExpression			2	
School		3		
SchoolSupport		3		
SelfTransportation	4			

**Family Environment**



# Case Planning

<b>Client ID#</b>	<b>Case Partners</b>	<b>Date Case Opened</b>
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Write in the name of the Matrix categories and family objectives below

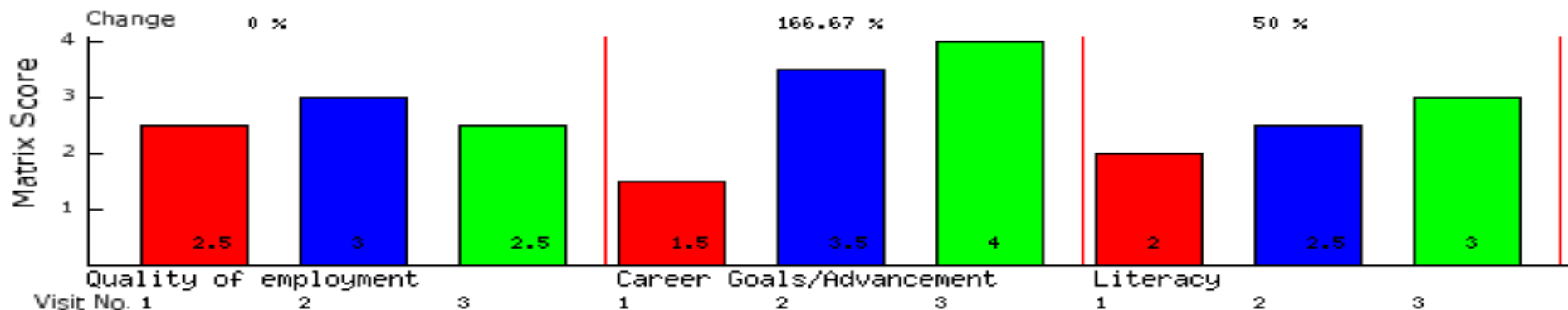
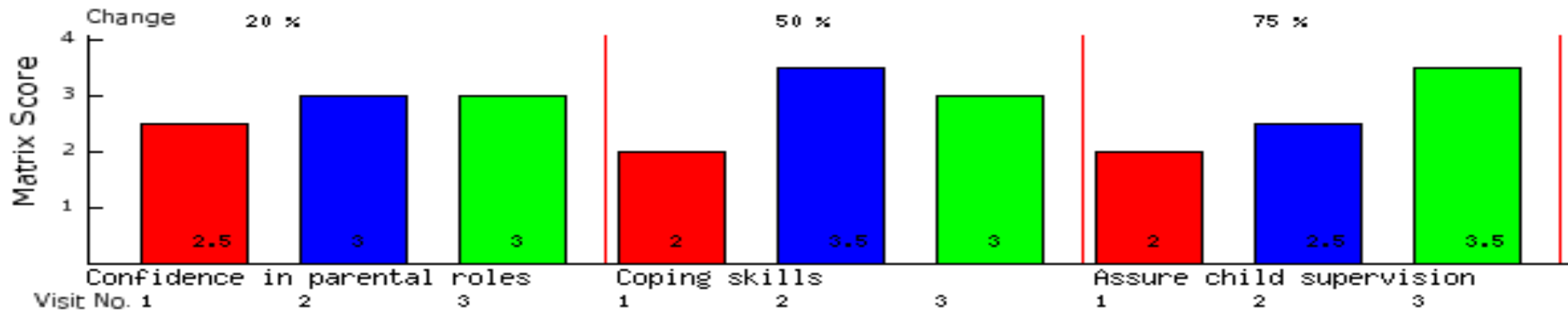
<b>Goals</b>	<b>Matrix category</b>	<b>Matrix category</b>	<b>Matrix category</b>	<b>Accomplish ment</b>
What will the family want to accomplish?	<b>objective</b>	<b>objective</b>	<b>objective</b>	<b>Objectives</b>
What the the family will do to help reach the objective?				<b>Family</b>
What the program will do to help reach objectives				<b>Program</b>
What other resource persons will do to help reach objectives?				

<b>Review Date:</b>	<b>Parent signature:</b>	<b>Staff Person:</b> <b>Supervisor:</b>
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# Charts Enable Quick Understanding of the Data

## Your Organization Matrix Evaluation Chart

### Adoption



# Matrix Outcome Findings

- Families that are at-risk or in-crisis are generally not connected to and are not actively engaged in their community
- Individuals and families that are connected or who are enrolled in needed services (health, family support, child development/education) generally have better outcomes across a wide variety of stable and safe and self-sufficient measures

# Tribal Experience

1970-1980 Alaska, Canada, Western  
Tribal Alcohol Programs

1980-1990 Self Government

Concepts & Management

1990-2000 Community Health Programs

2001 Inaugural Summit “Building  
Federal/Tribal Relations for Healthy  
Children into the New Millennium.”

Thank You

QUESTIONS?