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Findings from the Safe Kids/Safe Streets National Evaluation KidSafe, Burlington, Vermont

PREPARED BY WESTAT, NATIONAL EVALUATOR FOR THE PROGRAM

Many studies suggest that child abuse and neglect are risk factors for the development of juvenile delinquency and other problem behaviors. The Safe Kids/Safe Streets (SK/SS) program, sponsored by the U.S. Department of Justice's Office of Justice Programs (OJP), was designed to break the cycle, by reducing child abuse and neglect through comprehensive, multifaceted strategies involving a wide array of community partners. Five demonstration sites were selected to implement the program, which began in 1997. The five communities hosting the program were Burlington, VT; Huntsville, AL; Kansas City, MO; Sault Ste. Marie, MI; and Toledo OH.

In Burlington, the Safe Kids/Safe Streets program is known as KidSafe. The grantee for the program is the Community Network for Children, Youth and Families ("The Community Network"), a not-for-profit organization whose mission is to reduce child maltreatment and promote child well-being in Chittenden County, Vermont. Originating with a Federal grant in 1978, the Community Network has become a coordinator, advocate, and educator around issues of child abuse and neglect. It does not provide direct services, but it convenes child protection teams to improve service coordination in certain types of cases. When KidSafe began, the Community Network had 22 member agencies, including the state Department of Social and Rehabilitation Services (SRS), the Visiting Nurse Association, the community mental health center, the local hospital, several other private service providers, the Family Court, and the state Departments of Health, Social Welfare, and Corrections. The organization was staffed by a part-time Network Coordinator.

KidSafe received five awards of \$425,000 each between 1997 and 2002. In 2003, OJP decided to provide an additional \$125,000 per site to help sites make the transition to non-Federal funding. This brought total Federal funding for KidSafe to \$2,250,000.

Planning

Planning for the SK/SS initiative took approximately 10 months, from May 1997 to submission of the Implementation Plan in March 1998. The first major step was a widely publicized kick-off meeting in June 1997, which introduced KidSafe and led to formation of four

¹ For more information about this program, see Gragg, F., Cronin, R., Schultz, D., Eisen, K. *National Evaluation of the Safe Kids/Safe Streets Program: Final Report. (Volumes I – IV)*. Rockville, MD: Westat, 2004.

planning teams, which met regularly for months. Midway through the planning process, KidSafe organized a Management Council to serve as its governing body. The Council oversaw development of a Request for Proposals for "service improvement subgrants" from community agencies and selected 15 programs for inclusion in the Implementation Plan. OJP's comments on this plan were more extensive than expected, necessitating responses to numerous questions and preparation of more detailed training/education, evaluation, and MIS plans. After some negotiation, OJP agreed to release partial implementation funds in May 1998, which allowed the subgrant programs—known as the Partner Projects—to begin. KidSafe earned final approval of an amended Implementation Plan in August 1998.

Collaboration Development

The governance structure that was put in place during the planning process—a governing council supported by working committees—has remained much the same throughout the implementation phase. The Council, now called the KidSafe Collaborative Council, meets monthly to make decisions about KidSafe policy and resource allocations, strategize about issues related to child and family well-being, and share information. The group is somewhat larger (about 25 members versus 20) and no longer rigidly allocates members across the sectors that were defined originally. However, it remains committed to diverse representation and includes a cross-section of formal child protection, service provider, and community perspectives. There are no membership requirements other than a commitment to serve at least a year. Co-chairs are drawn from the membership and change every year or two.

KidSafe also relies on committees to carry out its agenda. Most committees have involved a mix of participants, including Council members, line agency staff, subgrantees, and others who are simply drawn to the topic at issue. The project uses widely publicized community meetings—typically one or two a year—to tap community concerns, conduct targeted discussions of key issues, and recruit occasional participants into more active roles. KidSafe actively joins in other collaborative efforts (e.g., the Domestic Violence Task Force and the Family Court Permanency Planning Project) with overlapping goals and membership.

While the structure of the KidSafe collaborative has changed little, its place in the larger organization has expanded greatly. Three years into the project, the Community Network abandoned its old Board of member agencies and shifted to a more traditional nonprofit organizational structure. A smaller Network Board of individuals became responsible for agency oversight, personnel, finances, and fund-raising. At the same time, the KidSafe Council became

the agency's permanent forum for "visioning" and policy setting about child abuse and neglect. In 2002, the Community Network began calling itself the KidSafe Collaborative of Chittenden County, recognizing that KidSafe had become the Network's primary identity.

As of June 2003, the agency board and KidSafe staff had developed a target budget of \$60,000 to \$100,000 to continue the collaborative's core activities when Federal funding expires. They had already made progress in finding alternate support for some activities through private foundations, SRS, the Health Department, and the United Way.

Project Implementation

Implementation began in May 1998 with the awards to the Partner Projects. Throughout implementation, KidSafe undertook activities under each of the four program elements required by OJP—system reform and accountability, continuum of services, data collection and evaluation, and prevention education and public information. However, KidSafe significantly shifted its resource allocations over time toward greater investments in system reform activities and smaller investments in direct services. While several factors contributed to this shift, extensive negotiations with OJP, which took place in 2001, played a major role. As a result of these negotiations, KidSafe reduced funding for Partner Projects, added staff, and adopted several new system reform initiatives.

Staffing. Despite some turnover at lower levels, KidSafe has enjoyed stable senior leadership, retaining the same project director throughout implementation. In the early years, she had part-time assistance from the Network Coordinator and a secretary. After the Network Coordinator left the agency in 2001, a long-time participant in KidSafe came on board as assistant project director. By early 2002, KidSafe reached its biggest staff ever—about 2.5 full-time equivalents—adding a half-time multicultural coordinator and a quarter-time training, education, and outreach coordinator. Besides this core project team, the project has had a local evaluation consultant since 1999.

System Reform and Accountability. KidSafe subgrants helped get two major initiatives off the ground—establishment of a Juvenile Unit in the State's Attorney's Office (SAO) and development of a Children's Advocacy Center (CAC). KidSafe's backing helped the SAO win legislative support for added staff, enabling the Juvenile Unit to start operations in January 2001 and continue without further project support. CAC development took a lot longer, with many interim steps. They began with institution of a multidisciplinary team (MDT) to discuss cases

under investigation, followed by co-location of a child protective services worker at CUSI (the countywide law enforcement agency that investigates serious child abuse) and establishment of a dedicated facility for sexual assault examinations at the area hospital. By June 2003, the CAC had been certified by the National Children's Alliance and was operating side by side with CUSI.

KidSafe staff also led a year-long effort to revitalize the Community Network's Child Protection Team (CPT), which had originated years before to bring multiagency attention to children who were "falling through the cracks." A new, more family-friendly, and geographically accessible CPT was put in place in 2001—earning praise from many local observers. By 2003, the CPT was partially supported by a contract with SRS and averaged just over one case per month. In 2003, the Health Department announced that it would contract with KidSafe to facilitate a similar team for families with a substance-abusing parent.

KidSafe put increasing emphasis on professional training over time. One of the largest efforts involved development of a video and toolkit for mandated reporters statewide, which began in 2002. The same year, staff also started a popular series of Building Bridges workshops, which features visits to and presentations by a different agency each month. The Partner Project awards subsidized several other training opportunities for local professionals, including development of a college course for child care providers, on working with children of parents with mental illness. Project funds also supported several training sessions designed to enhance the cultural competence of service providers.

Other cultural competency efforts had their ups and downs. Initially, KidSafe had hoped to fund a Partner Project in this area, but never found the right partner. For a time, staff worked directly with the Vermont Refugee Resettlement Program (VRRP) to staff a committee on 24-hour interpreter access. The pilot project developed by the group was stalled by frequent staff turnover at VRPP and was put on indefinite hold. Meanwhile, however, KidSafe consistently encouraged all the Partner Projects to improve their cultural competency.

In 2002 and 2003, KidSafe began reaching out to legislators, partnering with the Domestic Violence Task Force to sponsor a forum for candidates and, later, monthly breakfasts where legislators and community members could exchange views on family and child welfare issues. KidSafe staff also joined the policy board of the Vermont Children's Forum, the state's leading child advocacy group, and successfully advocated for adding a separate section on child maltreatment to the Forum's policy agenda.

KidSafe staff regularly collaborated with several other groups, including the Family Court. Local observers say the close working relationships between KidSafe and Family Court fostered several innovations—including placement of mental health personnel at the Court and greater involvement by the Visiting Nurses Association (VNA) in the court process. More generally, the partnership created a climate in which Family Court, SRS, and local service providers work together on child protection.

Continuum of Services. Since the Community Network is not a direct service agency, the Partner Projects were the primary vehicles for expanding prevention, intervention, and treatment services. The largest single subgrant (\$50,000 initially) supported two programs through the VNA—intensive home visiting for up to 10 families lacking other payment sources and parent education and support at the VNA's Family Center in multicultural North Burlington. Among other activities, the Family Center used KidSafe support to institute popular Community Culture Nights, planned with parents. KidSafe funds also helped establish the now-thriving Winooski Family Center, which provides multiple services, including preschool programs, parent education, a summer lunch program, and case management. At the Milton Family Community Center, KidSafe helped start the only grandparent support group in the county. Over the years, the grandparents in this group became more active in defining their own agenda, recently expanding it to advocacy.

Several Partner Projects focused on families in conflict. One developed the county's first supervised visitation program and another provided therapeutic playgroups for child witnesses of domestic violence. A third partner added parent education to its batterer education program and developed new group programs for men and teens with abuse/control issues. Other prevention and early intervention services supported by KidSafe included Nurturing Parent groups for single mothers and for incarcerated fathers, case management for homeless families, and clinical support for a YMCA day camp serving SRS-referred children. On the treatment side, there were subgrants to the local community mental health center to support treatment for sexually reactive victims of child abuse, ages 6 to 12, and group, individual, and family therapy for adolescent sex offenders.

Despite an unfavorable economic climate, most services continued after their KidSafe funding ended in spring 2003, sometimes at slightly reduced levels. The supervised visitation program faced the most significant funding challenges, particularly because of its costly security. The program shut down temporarily in June 2003, while awaiting action on a pending application that would support security services.

Data collection and evaluation. This element got off to a slow start at KidSafe and never became a strong emphasis. The local evaluator's budget was modest—never more than \$10,000 a year. Nonetheless, she helped refine the progress reporting system for the Partner Projects, collected data on community indicators, and conducted two rounds of interviews with key agency personnel to assess changes in practice. In 2001, she also began helping KidSafe with its biggest data collection and evaluation effort, the Multisystem Case Analysis, undertaken in collaboration with the Family Court Permanency Planning Project. Adapting a methodology developed by the Child Welfare League of America, KidSafe tracked samples of cases entering the Family Court in 1998 and 2000 across agencies, including SRS, law enforcement, and the SAO. The task was arduous, complicated by the fact that each agency had distinctive data systems, and there were no linkages among them.

The fact that all the key public databases are maintained and administered at the state level was a particular barrier to improving local MIS capabilities. However, KidSafe made small investments in improving data access at CUSI/CAC, and contributed to several discussions about data systems at the state level. In addition, according to local observers, KidSafe sensitized the local SRS office to some limitations of its existing system and created a climate in which SRS freely shared much more information about performance than previously. Several Partner Projects also reported that evaluation training sponsored by KidSafe, coupled with the KidSafe reporting requirements, made them improve their internal data collection and assessment methods.

Prevention education and public awareness. This area, like data collection and evaluation, received much less emphasis than system reform and service efforts. However, two KidSafe subgrants focused exclusively on this area. Kids on the Block-Vermont provided prevention-oriented puppet shows for hundreds of elementary school children each year, along with information materials for parents and teachers. Stop It Now! VT encouraged reporting of child abuse by reaching out to victims, perpetrators, and their family members through workshops, a 24-hour hotline, and the media. In addition, several of the prevention and early intervention subgrants included prevention education for parents or children.

Meanwhile, KidSafe staff also carried out a variety of public awareness activities. In 1999, staff convened a public meeting that helped focus community concerns on constructive responses to a child fatality. KidSafe also participated routinely in community fairs and other local events where project materials were distributed. In 2000, KidSafe developed a comprehensive *Family Services Directory*, which was widely disseminated and updated. In 2002-2003, KidSafe began working on a more comprehensive public awareness strategy, designed in part to make the

program more widely known. As part of the effort, staff developed an annual report, a Fact Sheet on child abuse and neglect, and a KidSafe web site.

Results

Project accomplishments. So far, KidSafe has amassed a strong record. Through involvement in KidSafe, the Community Network reinvented its structure—establishing a vibrant, working collaborative that represents diverse sectors of the community. Collaborative members developed a common vision and shared important decisions about resources and priorities in an atmosphere open to different points of view. In 2001, KidSafe adjusted to directives from OJP to reallocate its efforts, and began to tackle more difficult system change issues, including sustainability.

KidSafe made impressive progress on system reform and helped bring about many changes that are likely to endure. Perhaps the most dramatic change is that collaboration has become the normal way of doing business in the community. There have been other forces at work, but local opinion is close to unanimous that KidSafe deserves a large share of the credit. KidSafe played a substantial role in many other system changes, among them:

- Establishment of a Juvenile Unit within the SAO,
- Establishment of a CAC,
- Implementation of an MDT for serious abuse cases under investigation,
- Revitalization of a family-friendly Child Protection Team for children "falling through the cracks," and
- Closer integration of Family Court with the child protection community.

Through the subgrant process, KidSafe established new or expanded services for children and families, including home visiting, a grandparent program, case management for homeless families, therapeutic programs for child witnesses, treatment for sexually reactive children, and community-based family supports. Subgrants also expanded programs for offenders, including treatment for adolescent sex offenders and counseling/education for violent males. It is too soon to judge some other initiatives—such as the Multisystem Case Analysis, the new outreach to legislators, the funding survey, and the mandated reporter video and toolkit—but they have system-changing potential.

While interagency communication and information-sharing have improved, the community's management information systems remain largely as they were when KidSafe began, with little integration across agencies. KidSafe promoted changes where it could, but it seems clear that major changes were beyond the scope of the project, or would have required a radically different approach and resource allocation. In other areas—promoting public awareness, prevention education, cultural competency, and family-centered practice—KidSafe did valuable work, but there are few structures in place to continue it if KidSafe itself does not find the resources. The collaborative also has struggled, with limited success, to attract more involvement from nontraditional sectors, including business, the faith community, grassroots organizations, and consumers. KidSafe is about to take on a new responsibility—for developing the SRS District's Community Advisory Board—which may open up new avenues for engaging more nontraditional members in the collaborative.

Local Perspectives on Accomplishments. By and large, KidSafe participants appear very satisfied with both the collaborative process and its results so far. They feel that the Community Network was the right choice to lead the KidSafe project and provided outstanding leadership. On a 2003 survey of stakeholders (N=71 respondents), most respondents (82%) felt that KidSafe was open to different points of view and that they had substantial influence over its goals and objectives (75%).

There were a few areas of concern. The majority of stakeholders surveyed (58%) felt that there had not been enough resources available in the previous year—perhaps a reaction to recent cuts in Partner Project funding. The same proportion reported that there had been insufficient cultural diversity among participants in the collaborative and 44 percent said that there had not been enough community involvement. However, fewer respondents felt this way than in surveys conducted in 1998 and 2001.

When it comes to overall accomplishments, 70 percent of the stakeholders surveyed were very satisfied with KidSafe, awarding ratings of 4 or 5 on a 5-point scale. Another 22 percent were somewhat satisfied (a rating of 3). Four out of five reported significant effects on their own organizations, such as improved communication with other organizations (68% of respondents), improved communication with community members (59%), an expanded scope of services (51%), and improved training/professional development (46%).

The vast majority of stakeholders (94%) reported that KidSafe had significantly affected the community in some way, and over half said it had significantly affected their

organization's clients. The most frequently reported community effects were: improved cooperation/communication among those who deal with child abuse and neglect (83%), improvements in multiagency responses to children affected by domestic violence (68%), improved information sharing and case tracking across agencies (66%), and expanded prevention programs (63%). Several community effects, although not reported very often overall, were reported much more frequently in 2003 than in 2001. They include: reaching underserved rural areas, making professionals and services more culturally sensitive, and involving grassroots organizations and other nontraditional groups.

About two out of three stakeholders chose improving cooperation and communication as one of the two *most* important KidSafe accomplishments. Other popular choices included: improving services for children/families that might "fall through the cracks" (23%), improving information sharing and case tracking across agencies (18%), improving case management and followup for families (18%), and expanding prevention programs (15%).

Data from other sources, including key informant interviews and a 2002 Survey of Agency Personnel were broadly consistent with these findings. The local evaluator also echoed many of our results.²

KidSafe participants seemed fairly optimistic about the future. Key informants generally felt that the collaborative itself would be sustained in some form, or failing that, at least the communication and relationships established would continue informally. Sixty percent of the respondents to the Stakeholder Survey also saw the KidSafe collaborative as likely to continue. And 60 percent expected to be personally involved in KidSafe in the coming year, up from 49 percent when we asked the question in 2001. Along with KidSafe's record of sustaining many of its activities so far, this provides good reason for optimism about KidSafe's future.

Factors affecting project success. Several factors help account for KidSafe's successes, including:

 A favorable community climate, where both county and state appeared to be "prevention-oriented" and there was some initial awareness that domestic violence and child abuse were linked.

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² See Livingston, J.A. (2003). KidSafeCollaborative of Chittenden County Local Evaluation: Agency Structured Interviews, Second Round Report. Hinesburg, VT: Flint Springs Consulting.

- A capable and appropriate lead agency, with a track record on child protection issues, representation from many public and private agencies, and a relatively "neutral" stance.
- Stable, skillful, and committed leadership, from both its project director and from committed Council members and co-chairs.
- The use of open community meetings to attract members and shape priorities. These meetings helped form the collaborative initially, and later, spawned some of the project's most popular initiatives, such as the mandated reporter video/toolkit and revitalization of the CPT.
- Attention to the mechanics of collaboration, especially maintaining communication with collaboration members.
- Pressure from OJP and its technical assistance team to focus more on system reform.
 Although this made for tense relationships at some points, KidSafe was challenged to take its efforts to a new level and did so.

There were some obstacles. KidSafe, like many collaborations before it, was preoccupied with service strategies and resources. This tendency was accentuated by the fact that the Community Network was primarily an organization of service providers at the outset. While the subgrant strategy did contribute to system reform in some ways, the balance was tilted heavily toward services the first few years. The concentration on funding subgrants also meant that less money was available for core staffing. Although KidSafe accomplished a lot with a small team, the advantages of a larger one became apparent in late 2001, when the staff expanded and many new initiatives were launched.

At times, KidSafe seemed confused about OJP expectations and timetables for approvals of applications or other requests. The reasons are debatable, but the result was misunderstanding and delay that frustrated both KidSafe and OJP. Finally, KidSafe was challenged by the limitations of public management information systems. Nearly all management information systems in Vermont are statewide, with little or no cross-system integration. Also, because these systems are maintained elsewhere, technical expertise in how to use or improve them was lacking at the local level. This made KidSafe reluctant to tackle any system integration efforts. It also forced the collaborative, for much of its history, to rely mainly on expert judgment and anecdotal information to identify problems and determine project priorities. Information-sharing and data from SRS improved substantially after 2001, in part because of the climate of collaboration that KidSafe had nurtured.