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Report to the Chairman, Subcommittee on Human Resources, Committee on Ways and Means, House of Representatives

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CHILD WELFARE

States' Progress in Implementing Family Preservation and Support Services

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GAO

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The Honorable E. Clay Shaw, Jr.
Chairman
Subcommittee on Human Resources
Committee on Ways and Means
House of Representatives

In the late 1980s, increases in illegal drug use, homelessness, and poverty contributed to dramatic increases in the rates of child abuse and neglect and the number of children in foster care. Intent on improving services for children and their families as well as reducing foster care costs, states began to reconsider their approach to child welfare. Rather than waiting until families reached the crisis stage, they began to focus more on early intervention and preventive services designed to strengthen and support families. By the early 1990s, however, the child welfare system was overwhelmed by the needs of an increasing number of at-risk families and children.[1] States argued that additional federal funding was needed to supplement current state and federally funded programs. Therefore, to assist states in providing services designed to support families and help keep them together, the Congress enacted legislation as part of the Omnibus Budget Reconciliation Act of 1993 (OBRA 1993) that authorized $930 million in federal funds to states over a 5-year period for family preservation and support (FPS) services. Family preservation services typically target families already in crisis whose children would otherwise be removed from home. Family support services are community-based activities intended to prevent the kinds of crises that family preservation services are aimed at alleviating. To receive federal funds for these services, each state had to submit a grant application in 1994 and a 5-year plan in 1995 that set quantifiable goals and methods for measuring outcomes.

In response to your request concerning the status of states' use of funds for FPS services, this report describes (1) the nature and extent of states' use of federal funds for new and expanded FPS services and (2) states' plans to assess the impact of these services on children and their families and impacts identified to date. This report builds on our prior work that assessed early federal and state implementation efforts.

[1]See our prior reports, Child Welfare: Opportunities to Further Enhance Family Preservation and Support Activities (GAO/HEHS-95-112, June 15, 1995) and Child Welfare: Complex Needs Strain Capacity to Provide Services (GAO/HEHS-95-208, Sept. 26, 1995).

To collect information on states' use of federal funds for and the impact of FPS services, we conducted a nationwide survey of state child welfare agencies; held in-depth interviews with officials in nine states and five localities; interviewed Department of Health and Human Services (HHS) officials in its headquarters office; and reviewed related federal and state budget, summary, guidance, planning documents, and progress reports. (See app. I for more details of our scope and methodology.)

Results in Brief

All states reported to us that they are using federal funds to increase the availability of family preservation and family support services either by creating new programs or expanding existing programs. Forty-four states said that they introduced new programs. For example, some states launched new programs in which counselors are available 24 hours a day to work with families that have a history of child abuse. Forty-seven states reported enhancing their existing programs or expanding them to serve more clients. For example, adding a service like childcare could enhance a family resource center that already provides an array of services, such as parenting classes, afterschool activities, and family counseling.

As required by the law, our analysis shows that states appear to be allocating a significant portion of their federal funds to both family preservation and family support services. In the last 2 years, states budgeted 56 percent of their service dollars to family support and 44 percent to family preservation. The somewhat greater emphasis on family support services reflects priorities established through state and community planning efforts. Moreover, many states already had family preservation programs in place and decided to bolster family support services.

To determine whether this infusion of federal funds improves services for children and families, we identified a number of efforts that are underway or planned to assess programs providing FPS services. States plan to track the results of their federally funded services, for example, by measuring the number of clients served and the extent to which their needs are met, improvements in parent-child relationships, the degree that services are coordinated, and indicators of community well-being such as child abuse rates. Although not required to do so, at least 11 states are also planning formal evaluations to determine whether the services actually improve outcomes for families. Further, two federally sponsored evaluations are underway to assess the effectiveness of family preservation and family support services.

Early results from 10 states indicate some successes, such as preventing child removal and continued maltreatment. While it is too early to determine the impact of these programs, federal and state officials report that the extensive community and interagency collaboration required by the law has resulted in improved identification of service needs, setting of priorities, and receipt of services by at-risk families otherwise overlooked.

Background

We previously reported that states originally funded most FPS services themselves or with nonfederal funds. As the demand for services increased and available resources became more constrained, states sought additional funding from federal sources, such as Title IV-B Child Welfare Services, Title XX Social Services Block Grant, and Title IV-A Emergency Assistance. However, funding levels were still insufficient to keep pace with service needs. By the early 1990s, over half the programs we surveyed reported that they were not able to serve all families who needed services primarily due to the lack of funds and staff.

OBRA 1993 created the Family Preservation and Support Services program under Title IV-B, Subpart 2, of the Social Security Act. Administered by HHS' Administration for Children and Families (ACF), OBRA 1993 authorized $930 million over a 5-year period. Through fiscal year 1997, Congress appropriated $623 million for grants to states to conduct planning activities and fund FPS services for the first time.[2] The grants are based on each state's percentage of children receiving Food Stamps, a federal food subsidy program for low-income households. State child welfare agencies are responsible for administering the FPS program in each of the 50 states and the District of Columbia.

OBRA 1993 allowed states to use up to $1 million of their grant amount for planning purposes during the first year, with no required state match. Funds used for FPS services and other allowable activities, such as additional planning or evaluation, require a 25-percent state match. The law also requires states to spend a significant portion of service dollars for each type of service, which HHS has defined as at least 25 percent each for family preservation services and for family support services. Further, state administrative costs are limited to 10 percent.

To receive FPS funds, states submitted grant applications to HHS by June 1994 and comprehensive plans a year later. These plans were based

[2]An additional $52 million was set aside for court enhancement studies; FPS services grants to Indian tribes; and federal evaluation, research, training, and technical assistance. For fiscal year 1998, OBRA 1993 authorized $255 million, which had not been appropriated at the time of our review.

on a needs assessment; developed with community groups; and coordinated with health, education, and other agencies that serve children and families. As required, the plans described goals that states expect to achieve by 1999 and methods that they will use to measure their progress. Federal guidance also encourages states to continue their collaborative planning activities, improve service delivery, and leverage additional funding from other sources for FPS services.

Family preservation programs generally serve families where child abuse or neglect has occurred or where children have been identified as representing a danger to themselves or others. These families risk having their children temporarily or permanently placed outside the home in foster care, juvenile detention, or mental health facilities. Most family preservation programs provide specific services tailored to the family's needs to help ameliorate the underlying causes of dysfunction. These services may include, for example, family counseling and training in parenting skills. The intensity, duration, and packaging of services differentiates these programs from the traditional delivery of child welfare services, which also share the goal of placement prevention and family reunification. Even among family preservation programs, however, service delivery varies. In the widely used Homebuilders intensive crisis intervention model, caseworkers typically carry small caseloads of two families at a time and are available to families on a 24-hour basis for 4 to 6 weeks. In other program models, caseworkers may carry caseloads of up to 20 families, with one or two personal contacts per week for a period of 7 or more months. (See app. II for a description of various family preservation program models.)

Family support programs include a broad spectrum of community-based activities that promote the safety and well-being of children and families. In general, the purpose is to reach families before child abuse or neglect occurs. Often provided in a community center or a school, family support programs may include services outside the traditional scope of the child welfare agency, such as health care, education, and employment. Some family support programs offer a comprehensive array of services to an entire community, including parenting classes, health clinics, and counseling. Other programs are more narrow in scope and may focus only on family literacy or provide information and referral services. Compared to family preservation, eligible participants may be more broadly or narrowly defined; for example, all families in a community or only teenage mothers in a community. In practice, the distinction between family preservation and family support services may be blurred.

States Are Using Federal Funds for Both New and Existing Services

The federal FPS services legislation provides states with the flexibility to meet the needs of children and families through family preservation and community-based family support services. Exercising this flexibility, states have reported choosing to fund an array of services and, in many cases, strategies for improving the ways in which services are delivered. Almost all states appear to be introducing new family preservation and family support services. Our analysis shows that states are allocating somewhat more funds to family support services.

New and Expanded Services Vary

Forty-four states reported that they used federal funds to create new family preservation programs, family support programs, or both. For example, Oregon has had one model of a family preservation program—the Intensive Family Services Program—since 1980; however, concerns about the high numbers of African-Americans in foster care in one community prompted this state to initiate a new family preservation program. This program is based on the Homebuilders service-delivery model but refined to better meet the cultural needs of this population.[3]

Although almost all the states reported starting new programs, the size and service levels of these programs vary across states and programs. Some are quite small. For example, in a low-income neighborhood in Maryland, a new family preservation component was added to a community-based substance abuse treatment program. There, $40,000 pays for one caseworker to provide family preservation services for as many as five families at a time to prevent the need to remove children from their homes while the parents are treated for substance abuse. Another new family support program in this same community provides information and coordinates communitywide activities to ensure families have knowledge of and access to all available community resources. About $75,000 is being spent for this program that plans to serve 200 persons by telephone or in-person and make 600 contacts by mail a month.

By contrast, another community in Texas implemented a larger-scale program spending $971,000 in federal funds over the last 2 years to create a family resource center in each of three school districts. This new family support program offers an array of services at each school-based center, including parent education, counseling, adult education, childcare, some health care, and family support workers for families in need of more

[3]Compared with the Homebuilders model, Oregon's state family preservation program relies less on the provision of concrete and supportive services and more on family therapy; moreover, treatment is less intensive.

intensive services. As of August 1996, over 3,000 households containing 8,600 individuals had registered since the program's inception.

In addition to introducing new programs, almost every state used federal funds to fill gaps in existing FPS services. Forty-seven states reported expanding existing family preservation services, family support services, or both by making them available to more clients within existing service areas, by adding more program sites, or enhancing programs by increasing the intensity of existing services or adding new services as illustrated by the following cases:

- Texas expanded its intensive placement prevention program to additional locations to reach new clients as well as more clients within existing service areas. This family preservation program is designed to prevent the need for placing abused and neglected children in foster care. The existing 18 service-delivery units are being expanded to 38 units and about 115 new workers are being hired to serve an additional 520 families per year.
- Arkansas expanded its Intensive Family Services program from 10 to 20 counties. This family preservation program was also enhanced by adding emergency cash assistance for participating families. This new service will enable families in crisis to address some of their immediate needs, such as covering back rent to avoid becoming homeless.
- One Maryland community enhanced a neighborhood recreation program by adding new activities and increasing its hours of operation. Community members voiced concern that the lack of recreational activities was a factor in the adolescent crime rate. This family support program is designed to give young people a safe place to congregate and recreate, especially in the late afternoon and evening hours, to keep them off the streets and away from the influence of illegal and drug-related activities.

The likelihood of states creating new or expanding existing programs appeared unaffected by whether states had previously provided family preservation or family support services, how long states have had service dollars available, or whether service decisions were made at the state or local level. Our analysis of state survey responses showed no clear patterns regarding the circumstances that might result in states funding certain types of services.

States Place Somewhat More Emphasis on Family Support Services

As the law requires, most states are spending a significant portion of their federal funds for family preservation services and family support services. Of the federal funds used for services in fiscal year 1996, states allocated

an average of 56 percent to family support services and 44 percent to family preservation.[4]

In 1996, over half the states allocated a majority of their service dollars for family support services, as shown in table 1. Four of these states are using all their service dollars for family support activities, which is allowable as long as the state justifies this distribution.

Table 1: Type of Service Receiving Majority of Funding, by Number of States, Fiscal Year 1996

Type of service	Number of states
Family support services[a]	29
Family preservation services	11
Equal funding for both services	11
Total	**51**

[a]Four states—District of Columbia, Iowa, Massachusetts, and Tennessee—are using all their service dollars for family support services.

Source: GAO analysis of HHS summary of state budget requests.

While every state is initiating or expanding family support services, family preservation services, or both, slightly more states are using federal funds for family support services. Forty-one states reported introducing new family support programs, while 34 states initiated new family preservation programs. Forty-three states expanded existing family support services, compared to 38 states for family preservation.

Several reasons may explain why states have placed somewhat more emphasis on family support services. According to federal and state officials, some states had already spent considerable state or other federal funds for family preservation services and decided—either at the onset or based on planning results—to place greater emphasis on family support services. Further, many states delegated to counties or communities the responsibility for conducting localized planning and making service decisions. Localities were apt to be more familiar with support services and to play a larger role in program decisions than the child welfare agencies familiar with family preservation.

Federally Funded Services Were Implemented Within Last 2 Years

States have had 1 to 2 years to initiate or expand family preservation and family support services, depending on how they used their first year's funds. All states spent at least a year doing collaborative community-based

[4]Amounts for family preservation and support services are based on budget information that states submit to HHS each year. Data on actual expenditures are not readily available.

planning to develop their 5-year plans, in accordance with HHS guidance. Nineteen states elected to implement services while simultaneously conducting planning activities resulting in these states having had about 2 years to implement services. The majority of the states, however, began to implement federally funded services a year later, after they had completed their 5-year plans.[5]

For those states that have had a year to initiate or expand services, most reported that implementation of family preservation and family support services has been slower than they expected. In total, 25 states indicated being behind schedule primarily due to the magnitude and complexity of the implementation effort. Most of these states said that they experienced delays in designing or developing FPS services. Moreover, the competitive process to select communities or programs that would receive federal funds also caused delays in several states. Officials had not anticipated the time required to solicit and review proposals, respond to challenges, and award contracts. Many states also reported that an extended period of time was required to change their service-delivery system to facilitate implementation, such as training staff on procedural changes and collaborating with other service providers. In addition to these procedural factors, many states attributed their receipt of federal funds later than expected as a reason for being behind schedule.

Other Activities Are Designed to Improve Service Delivery

While states appear to be using most of their federal FPS funds to initiate or expand family preservation or family support services, many states are also undertaking a variety of activities to enable the service-delivery system to serve vulnerable children and families more effectively and efficiently. According to estimates provided by each state at the time of our study, an average of 83 percent of federal funds had been spent on direct services, such as the new and expanded family preservation and family support services already described. The remaining federal dollars were used for other allowable activities, including additional planning, administration,[6] and capacity-building such as training and technical assistance.

Five states dedicated all their FPS funds to the provision of direct services, while 46 states used a portion of their funds for other activities as well as

[5]First-year funds were available to all states by Sept. 1994. The next year's funds—triggered by states' submittal of their 5-year plans—were available a year later.

[6]According to federal guidance, administrative costs include costs for procurement, payroll processing, management, data processing and computer services, and other indirect services.

direct services. Thirty-eight of these states conducted activities designed to enhance the capacity of state and local agencies to provide family preservation and support services. These activities included staff training in cultural awareness or procedural changes, technical assistance to service providers, research or evaluation activities, and management information system development and improvement. For example, Arkansas held two conferences, which were attended by over 1,000 individuals, to educate the public on prevention issues, encourage collaboration among providers, and provide technical assistance and training to staff of community-based organizations. Several states contracted with universities or private research firms to conduct outcome evaluations. In Idaho, local panels were established to review closed child protection cases to identify service gaps and improvements to the service-delivery system responsible for investigating allegations of child abuse and neglect.

In addition, 17 states reported that planning activities will continue beyond 1995. For example, Maryland is taking more time to allow its 19 local management boards representing the state's 24 counties to develop their own community-based plans. At the time of our study, the state had provided federal funds to 11 boards for localized planning. Eventually every local management board in the state will have the opportunity to develop its own plan.

Results and Impact Will Be Monitored in Various Ways

Midway into this 5-year program, it is too early to identify what impact the federally funded family preservation and family support services have had on the lives of vulnerable children and their families. Several efforts, however, are underway to monitor results and assess impact. By law, states must track results and report on their progress in achieving the goals set in their 5-year plans. Some states will also conduct formal evaluations to examine outcomes and processes. To determine the impact of federally funded services, however, requires rigorous evaluation. Eleven states plan to conduct such evaluations. In addition, federal efforts are underway to assess the effectiveness of family preservation and family support services.

States Will Use Various Measures and Methods to Track Results

States plan to track the results of federally funded services by using a variety of measures. At a minimum, all states report that they will track the number of children and families served and most will measure the extent to which their needs are being met. Specifically, 45 states will look for

evidence of changes in parent-child relationships, family functioning, or participants' satisfaction with services delivered. Many states will also assess the well-being of children by using appropriate measures, such as the number of infants discharged from community care who receive follow-up care within 48 hours. More than half the states told us that they expect to determine the program's cost effectiveness, the efficacy of certain services for particular client groups, or both. Finally, at least 45 states plan to monitor traditional indicators of child welfare, such as the number of child abuse and neglect reports, and changes over time in one or more aspects of the service-delivery system. For example, one state plans to examine the extent to which consumers are participating in service planning groups and services are provided in conjunction with community and neighborhood organizations.

Having set goals and measurable objectives in their 5-year plans, states are expected to annually report on outcomes and progress towards achieving these goals. At the time of this report, HHS and its contractor responsible for evaluating state implementation were reviewing states' first progress reports and expected to complete their initial analyses in December 1996. In addition, some states will conduct formal evaluations that examine processes and outcomes, in many cases in conjunction with schools of social work at state universities. For example, Kentucky has contracted with the University of Kentucky to develop an evaluation program to assess the extent to which the state's FPS services program reaches the target population, monitor the frequency of service delivery and client participation, tabulate the cost of implementing the program, and assess the extent that program goals are achieved. In Arizona, the state's evaluation will track multiple child, family, and community outcome measures over time and compare results to baseline indicators. Data sources include family questionnaires, agency reports, and worker assessments.

State plans for monitoring and evaluating FPS programs should yield useful information on the size, nature, and outcomes of funded activities as well as changes in the well-being of communities, families, and children. Because these efforts will not necessarily confirm that the programs caused improved outcomes, 11 states plan to conduct their own rigorous evaluations—even though such evaluations are not required—that will yield more conclusive results. For example, a research contractor will conduct a 3-year randomized clinical trial of a home visitation program in San Diego County, California, that is based on Hawaii's Healthy Start

model.[7] Researchers will randomly assign 500 families to one of two groups—about half the families will receive program services and the other families will not—and evaluate the effectiveness of the program model as it is implemented in San Diego. Primary study objectives include testing whether implementation of this model results in improved outcomes and determining what cost-benefits are derived.

Federal Evaluations Are Designed to Assess Impact

Two federal evaluations are underway to rigorously assess the impact of FPS programs on children and families—one for family preservation and the other for family support services. Each evaluation is comprised of multiple studies of mature programs—initiated before the federal FPS services law—that span a range of program models and methods for targeting services. At the time that we prepared this report, the research contractors were expected to begin data collection in the fall of 1996 and issue interim reports a year later.

The family preservation evaluation is reviewing four programs that aim to prevent out-of-home placement and one program that tries to reunite foster children with their families.[8] Two of these programs use the Homebuilders crisis intervention model, while the other three use less intensive service models. Each program evaluation is designed to assign families to treatment and control groups. Families in the treatment group receive services from the family preservation program. Families in the control group receive services that they would have received if the program was not available. Outcomes to be measured include changes in foster care placement rates, recidivism, and duration in stay, as well as family functioning and subsequent child abuse and neglect.

The family support evaluation consists of multiple studies of eight different programs, including several comprehensive community family support programs as well as those that focus on economic self-sufficiency, family literacy, or preventing substance abuse.[9] Five programs are being evaluated using treatment and control groups. The remaining three programs will compare families that receive program services with

[7]The Healthy Start model uses home visitors to provide supportive services to families at risk of becoming abusive. New mothers are screened and interviewed at the hospital and can voluntarily receive family support services until their children are 5 years old.

[8]The family preservations programs are in New York City, Philadelphia, the Louisville area of Kentucky, the Memphis area of Tennessee, and selected counties in New Jersey.

[9]The family support programs are in Albuquerque, New Mexico; San Jose, California; Cleveland, Ohio; Denver, Colorado; Pensacola, Florida; New York City; several cities in Wisconsin; 11 counties in Iowa; and 6 school districts in Kentucky.

families in other programs or similar settings. For example, families that participate in Florida's Full Service Schools program will be compared with families in comparable schools where the program is not offered.[10] Outcomes to be measured include family functioning, child and family well-being, instances of child abuse and neglect, and satisfaction with services delivered.

Early Results Are Few, but Service-Delivery Approaches Have Been Affected

Although it is too early to identify service impacts on children and families, 10 states reported that program results were available on federally funded FPS services. Most of these states collected data on the number of children and families served, changes in child abuse and childhood mortality rates, as well as changes in their approaches to delivering services. For example, Louisiana reported on the results of federally funded projects after the first year of implementation. To contribute to future planning efforts related to the configuration of family preservation and family support services in Louisiana, the evaluation described the services and population characteristics in three programs and assessed the relationship between services and short-term outcomes. In particular, the Intensive Home Based Services program, which is a family preservation program, met its goal of preventing child removal and continued maltreatment. A family support program, designed to prevent child abuse and neglect, resulted in few reports of child maltreatment even though a majority of cases had had one or two child abuse or neglect reports before receiving program services. In another example for another family support program operating at a child development center whose primary service population is teenage parents and their children, individual service needs were summarized based on participants' and workers' completion of a new needs assessment form.

While not much is known yet about the impact of federally funded services, the legislation appears to have affected the ways in which states and localities develop and administer services for children and their families. According to federal and state officials, the primary impact to date has been to forge links between state agencies and the communities they serve. The process of developing states' 5-year plans resulted in public agencies, organizations, service providers, and consumers working together for the well-being of children and families. Many states departed from their traditional method of administering child welfare services at the

[10]The Full Service Schools model is a school-based family support program that integrates education, medical, and human services for general and certain at-risk populations in predominantly low-income communities. Primary objectives include helping children to be better prepared for school, reducing teenage pregnancy rates, and reducing the need for mental health and substance abuse services.

state level. In particular, 27 states reported distributing federal funds to counties and other local entities, such as community groups and local coalitions, to develop their own plans and make service decisions. Several states took additional steps to better identify the service needs of children and families. For example, Michigan is investing an additional $10 million in state funds to supplement federal funds and enable each of its 83 counties to participate in the process of improving services to better meet local needs. State officials credit this process with ensuring that at-risk families now have greater access to needed services and contributing significantly to the broader goal of positive system reform.

Conclusion

Before the enactment of OBRA 1993, FPS programs throughout the country were unable to meet the demand for services to strengthen and support families. Since then, states have begun to both initiate and expand programs of family preservation and support services to achieve the purpose of the FPS legislation. Early results indicate that these services are being offered to families and children who might otherwise have fallen through the cracks and that some programs supported with federal funds have met their goals of strengthening families and reducing child abuse and neglect. Information being gathered by states, universities, and research firms should increase our understanding of the outcomes of funded activities as well as changes over time in the well-being of communities, families, and children. Moreover, the community-based collaborative planning process undertaken seems to be having beneficial effects on the service-delivery system. While there has been service innovation and services have been expanded, it is still too early to tell what will be the ultimate impact of these programs on children and families.

Agency Comments and Our Evaluation

In commenting on a draft of this report, HHS agreed with our findings that implementation has been slower than expected but has achieved several positive outcomes. In particular, HHS emphasized the availability of new and expanded programs for both family preservation and support services, the focus on family support as a balance to family preservation, and the extension of services to families otherwise overlooked. Further, HHS noted that the use of FPS funds has encouraged collaboration among programs and levels of government and has attracted additional funds to meet community needs.

We are providing copies of this report to the Secretary of Health and Human Services, state child welfare directors, and state FPS coordinators. We will also make copies available to other interested parties upon request. Should you or your staff have any questions or wish to discuss the information provided, please call me at (202) 512-7125. Other GAO contacts and staff acknowledgements are listed in appendix IV.

Sincerely yours,

Mark V. Nadel
Associate Director, Income Security Issues

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Abbreviations

ACF	Administration for Children and Families
ASPE	Office of the Assistant Secretary for Planning and Evaluation
FPS	family preservation and support
HHS	Department of Health and Human Services
OBRA	Omnibus Budget Reconciliation Act

Scope and Methodology

We had previously assessed federal and state efforts to implement the FPS provisions during the first 18 months after OBRA 1993 was enacted and highlighted areas in which those efforts could be enhanced.[11] To update this information, we interviewed officials from HHS' ACF, which is responsible for overseeing this program, and reviewed related federal guidelines. Recognizing that it might be too early to identify service impacts on children and families, we also reviewed several states' 5-year plans and first annual progress reports to determine the availability of information related to our objectives and to document states' plans for assessing impact.

To obtain information about the status of federal evaluation efforts, we interviewed officials from HHS' Office of the Assistant Secretary for Planning and Evaluation (ASPE) and ACF who are responsible for overseeing the three national evaluation contracts that will collectively assess state implementation and the effectiveness of FPS programs.

GAO Survey Instrument

We designed a survey instrument to obtain information about states' use of federal funds for FPS services, plans for assessing impact, and impacts identified to date. We discussed development of the instrument with HHS headquarters staff and several state child welfare agency officials.

We pretested the instrument by telephone with the Title IV-B agency's FPS coordinator in two states—Indiana and New Jersey. We chose these states for our pretest because they had distributed their federal funds in different ways—one to counties to do their own planning and make service decisions and the other to programs directly based on state-level decisionmaking. We revised the instrument based on the results of the pretest.

In late June and early July 1996, we sent a copy of the instrument to the appropriate official of the child welfare agency in each of the 50 states and the District of Columbia. We offered the officials the option of completing the instrument in writing and returning it to us within 2 weeks. We interviewed by telephone those officials who did not return a completed instrument.

We did not verify the information obtained through the survey instrument. However, we conducted in-depth interviews in nine states to supplement information collected in the survey. In particular, we obtained additional

[11]See GAO/HEHS-95-112, June 15, 1995.

information about (1) the programs that these states initiated or expanded with federal funds, (2) how federal funds were distributed within the state, and (3) plans for rigorous evaluation, if any. We conducted seven interviews by telephone and two in person—one in Anne Arundel County, Maryland, and one in Sacramento County, California. In each state, we interviewed the same state-level individual(s) who responded to our survey. In five of these states—California, Iowa, Maryland, Texas, and Wisconsin—we also interviewed knowledgeable staff from a locality that had received federal funds. We selected these nine states because of their different size, location, and method for distributing federal funds.[12]

We conducted our work between May and September 1996, in accordance with generally accepted government auditing standards.

[12]We conducted in-depth interviews in Arkansas, California, Iowa, Maryland, New Hampshire, North Carolina, Oregon, Texas, and Wisconsin.

GAO Survey of State Child Welfare Agencies

This appendix presents our survey of state child welfare agencies regarding their use of Title IV-B, Subpart 2, funds for services. Each question includes the summary statistics and the actual number of respondents that answered the question. In each case, we use the format that we believe best represents the data, including frequencies, means, and ranges.

U.S. General Accounting Office 6/25/96

Interview of State Officials on OBRA 1993 and Family Preservation and Support Services

BACKGROUND INFORMATION (TO BE FILLED OUT BEFORE INTERVIEW AS MUCH AS POSSIBLE.)

A. State: _____ **51 Respondents**

B. Interviewee Information

NAME: _____

ADDRESS: _____

_____

_____

_____

TITLE: _____

PHONE #: (_____)_____-_____ FAX #: (_____)_____-_____

DATE OF INTERVIEW: _____/_____/_____ (Mo. Day Yr.) TIME OF INTERVIEW: _____

Hello, Mr./Ms. _____, my name is _____.
I am with the U.S. General Accounting Office (GAO), an agency of the Congress.

The Congress has asked us to study the nature and extent of new family preservation and support services since the enactment of OBRA 1993, and how states are assessing the impact of these services on families, children and communities. As part of the study, we are interviewing officials from all 50 states and the District of Columbia.

During the interview we will ask about the ways in which your state has used its Title IV-B Subpart 2 funds and about recent family preservation and support initiatives in your state. We are also interested in how your state plans to measure, or is measuring, the impact of family preservation and support services on families and children.

C. This interview should take about 45 minutes. Do you have the time to talk with me now?

1. [ ] Yes (IF "YES," GO TO E.),

2. [ ] No

D. When would be a good time to call you back?

E. O.K., let's begin.

1

USE OF OBRA FUNDS

First we'd like to discuss how OBRA funds are being used in your state. Let me clarify that, when we say "OBRA funds", we mean the federal family preservation and support funds provided by OBRA 1993--that is, Title IV-B Subpart 2 funds. Also, our focus is on only those OBRA funds that your state received for services--that is, those funds requiring a state match.

1. On what date were OBRA funds first made available to your state to use for services? (ENTER DATE.)

   _____/_____/_____ **Range-8/1/94 to 6/1/96**
   Month Day Year **n=51**

2. Did your state allocate its OBRA funds to **family preservation and support** programs directly, or did your state distribute funds to counties or other local governments for them to allocate to **family preservation and support** programs? (CHECK ONE.) **n=51**

   1. **24** Family preservation and support programs directly (GO TO QUESTION 7.)
   2. **22** Counties or other local governments
   3. **5** Both

3. As of now, how many counties have received OBRA funds to use for **family preservation and support services**? (ENTER NUMBER.) **n=27**

   1. _____ **Range=3-111**
      No. of counties **Mean=27.6**

4. Did these counties do localized planning to decide what **family preservation and support services** to fund? (CHECK ONE.) **n=27**

   1. **27** Yes
   2. **0** No

5. Did your state retain any of its OBRA funds at the the state level before distributing funds to counties? (CHECK ONE.) **n=27**

   1. **24** Yes => About what percentage was retained at the state level? _____%
      (ENTER PERCENTAGE.)
      Range=2-77%
      Mean=20.3%
   2. **3** No

6. How many counties are there in your state? **n=27**

   1. _____ **Range=3-256**
      No. of counties **Mean=65.4**

2

The next few questions ask about the use of OBRA funds that were available to your state for services. Again, we mean those Title IV-B Subpart funds requiring a state match.

7. Now I'd like to ask you about the use of OBRA funds in your state for activities that do not involve directly initiating or expanding **family preservation or family support services**. The question is, in your state... (CHECK ONE FOR EACH.)

Have any OBRA funds been used to...	Yes (1)	No (2)
1. Pay for broad-based planning activities that were not covered by the FY 1994 funds available for developing your state's 5-year plan--that is, those first-year funds requiring no state match? **n=51**	**17**	**34**
2. Pay for efforts to increase your state's capacity to provide **family preservation and support services**? Examples of this include *training staff* in cultural awareness or process changes; providing *technical assistance* to individuals, groups, and organizations that deliver family preservation and support services; conducting *research or evaluation* activities; and developing or improving *management information systems*. **n=51**	**38**	**13**
3. Fund the reporting of your state's progress toward achieving the goals set out in the 5-year plan? **n=51**	**24**	**27**
4. Pay for **family preservation and family support** administrative costs? These include costs for procurement, payroll processing, management, data processing and computer services, as well as other indirect costs. **n=51**	**38**	**13**
5. Pay for or fund any other activity that does not involve directly initiating or expanding **family preservation or family support services**? (IF "YES," ASK RESPONDENT TO PLEASE SPECIFY.) **n=51**	**4**	**47**

(IF ALL ITEMS IN QUESTION 7 ARE CHECKED "NO," GO TO QUESTION 9.)

8. Of the OBRA funds your state has received for services so far, about what percentage has been used for the activities you just mentioned? And, about what percentage has been used to directly initiate or expand **family preservation and support services**? (ENTER PERCENTAGE FOR EACH.) **n=46**

1.	**Range=1-84%** **Mean=19%**	for activities that do not directly involve initiating or expanding services, as mentioned in Question 7.
2.	**Range=16-99%** **Mean=81%**	for directly initiating or expanding services.
	100%	Total OBRA funds received for services

3

FAMILY PRESERVATION AND SUPPORT ACTIVITIES

Now we'd like to ask some questions about **family preservation and support services** that have been initiated or expanded with OBRA funds. We will begin by asking a series of questions about **family preservation services.**

Family Preservation Services

9. Before October 1, 1993, were any **family preservation services** provided in your state? (CHECK ONE.) **n=51**

   1. **50** Yes

   2. **1** No

10. Since your state first received OBRA funds for services, have any of these funds been used to implement any **family preservation services** in your state? (CHECK ONE.) **n=51**

   1. **45** Yes

   2. **6** No (GO TO QUESTION 16 ON PAGE 7.)

The next few questions ask about the number of **family preservation** programs that have been funded with OBRA dollars. Let me clarify that, when we say "program," we mean a type of program or model within which specific services are provided. Examples of **family preservation** programs could include the Homebuilders crisis intervention model, or a less intensive family reunification program. A particular program may be available at multiple sites, or funds may be distributed to multiple service-providers to implement a particular program. (FOR A MORE DETAILED DESCRIPTION OF DIFFERENT TYPES OF FAMILY PRESERVATION PROGRAMS OR MODELS, SEE PAGE 16 AT THE BACK OF THIS SURVEY.)

11. How many types of **family preservation** programs or models in your state have been funded with OBRA dollars? (ENTER NUMBER OR CHECK "DON'T KNOW".) **n=45**

   1. _____ **n=36, Range=1-15, Mean=4.1**
   No. of types of programs or models

   2. **9** Don't know at state level

4

12. We are interested in learning more about these **family preservation services**. First, we'd like to know if OBRA funds have been used to introduce brand new programs, or were OBRA funds used to expand or enhance existing programs. Second, we'd like to know how many programs were brand new, expanded, or enhanced. The first question is this: Anywhere in your state, have OBRA funds been used to ... (CHECK ONE FOR EACH ITEM IN (A); IF "YES" IN (A), THEN CONTINUE TO (B).)

	(A) Have OBRA funds been used to... (CHECK ONE FOR EACH)				(B) How many types of **family preservation** programs or models are in this category? (ENTER NUMBER OR CHECK "DON'T KNOW")	
	Don't know (1)	No (2)	Yes (3)		No. of types of programs or models (1)	Don't know (2)
1. Introduce new **family preservation** programs that were not used before? **n=45**	**1**	**10**	**34**	If yes --->		
2. Expand existing **family preservation** programs to new locations? **n=45**	**3**	**14**	**28**	If yes --->		
3. Expand existing **family preservation** programs to reach more clients within the same service areas? **n=45**	**3**	**12**	**30**	If yes --->		
4. Enhance existing **family preservation** programs by providing more of an existing service or introducing new services to the same number of clients within the same service areas? **n=45**	**2**	**11**	**32**	If yes --->		
5. Do anything else regarding **family preservation services**? (PLEASE SPECIFY.) **n=45**	**3**	**39**	**3**	If yes --->		

13. Since your state first received OBRA funds for services, have any clients been served, who would not have been served, without the provision of OBRA funding for these **family preservation** programs? (CHECK ONE.) **n=45**

1. **43** Yes

2. **2** No

5

14. Consider your state's schedule for implementing OBRA-funded **family preservation services**. ***In general***, would you say that the implementation of **family preservation services** in your state, as of now, is very much ahead of schedule, slightly ahead of schedule, on schedule, slightly behind schedule, or very much behind schedule? (CHECK ONE.) **n=45**

1. **0** Very much ahead of schedule (GO TO QUESTION 16.)
2. **4** Slightly ahead of schedule (GO TO QUESTION 16.)
3. **19** On schedule (GO TO QUESTION 16.)
4. **16** Slightly behind schedule
5. **6** Very much behind schedule

15. Now, I'm going to mention some reasons why a state's implementation of **family preservation services** might be behind schedule. Please indicate if any of these reasons apply to your state. (CHECK ONE FOR EACH.)

Is implementation behind schedule because your state...	Yes (1)	No (2)
1. Received its OBRA funds later than it expected to receive them? **n=22**	**12**	**10**
2. Decided to delay action on **family preservation services** until federal welfare reform was complete? **n=22**	**5**	**17**
3. Delayed action on **family preservation services** until receiving federal guidance related to the implementation of OBRA 1993? **n=22**	**9**	**13**
4. Experienced delays in developing or producing the 5-year plan? **n=22**	**6**	**16**
5. Experienced delays in designing or developing the "new" **family preservation services**? **n=22**	**14**	**8**
6. Required an extended period of time to make changes to the existing service-delivery system before **family preservation services** could be implemented? These changes might include training staff on cultural awareness or process changes, collaborating with other related service providers, reorganizing departments, or changing service delivery processes. **n=22**	**10**	**12**
7. Experienced delays in any other pre-implementation activities? (IF "YES," PLEASE SPECIFY.) **n=22**	**14**	**8**

6

Family Support Services

Now we'd like to ask a series of questions about **family support services**.

16. Before October 1, 1993, were any **family support services** provided in your state? (CHECK ONE.) **n=51**

    1. **48** Yes

    2. **3** No

17. Since your state first received OBRA funds for services, have any of these funds been used to implement any **family support services** in your state? (CHECK ONE.) **n=51**

    1. **50** Yes

    2. **1** No (GO TO QUESTION 23 ON PAGE 10.)

The next few questions ask about the number of **family support** programs that have been funded with OBRA dollars. Let me clarify that, when we say "program," we mean a type of program or model within which specific services are provided. Examples of some **family support** programs that have been replicated around the country include: comprehensive/community family support programs like the Parents Services Project that originated in the San Francisco Bay Area; child abuse and neglect prevention programs like Hawaii's Healthy Start model; and school readiness programs like HIPPY and Parents as Teachers (PAT). A particular program may be available at multiple sites, or funds may be distributed to multiple service-providers to implement a particular program. (FOR A MORE DETAILED DESCRIPTION OF DIFFERENT TYPES OF FAMILY SUPPORT PROGRAMS OR MODELS, SEE PAGES 16 AND 17 AT THE BACK OF THIS SURVEY.)

18. How many types of **family support** programs or models in your state have been funded with OBRA dollars? (ENTER NUMBER OR CHECK "DON'T KNOW".) **n=50**

    1. _____ **n=37, Range=1-35, Mean=7.4**
    No. of types of programs or models

    2. **13** Don't know at state level

7

19. We are interested in learning more about these **family support services**. First, we'd like to know if OBRA funds have been used to introduce brand new programs, or were OBRA funds used to expand or enhance existing programs. Second, we'd like to know how many programs were brand new, expanded, or enhanced. The first question is this: Anywhere in your state, have OBRA funds been used to ... (CHECK ONE FOR EACH ITEM IN (A); IF "YES" IN (A), THEN CONTINUE TO (B).)

	(A) Have OBRA funds been used to... (CHECK ONE FOR EACH)				(B) How many types of **family support** programs or models are in this category? (ENTER NUMBER OR CHECK "DON'T KNOW")	
	Don't know (1)	No (2)	Yes (3)		No. of types of programs or models (1)	Don't know (2)
1. Introduce new **family support** programs that were not used before? **n=50**	**2**	**7**	**41**	If yes --->		
2. Expand existing **family support** programs to new locations? **n=50**	**2**	**16**	**32**	If yes --->		
3. Expand existing **family support** programs to reach more clients within the same service areas? **n=50**	**1**	**14**	**35**	If yes --->		
4. Enhance existing **family support** programs by providing more of an existing service or introducing new services to the same number of clients within the same service areas? **n=50**	**2**	**17**	**31**	If yes --->		
5. Do anything else regarding **family support services**? (PLEASE SPECIFY.) **n=50**	**5**	**44**	**1**	If yes --->		

20. Since your state first received OBRA funds for services, have any clients been served, who would not have been served, without the provision of OBRA funding for these **family support** programs? (CHECK ONE.) **n=50**

1. **49** Yes

2. **1** No

8

21. Consider your state's schedule for implementing OBRA-funded **family support services**. ***In general***, would you say that the implementation of **family support services** in your state, as of now, is very much ahead of schedule, slightly ahead of schedule, on schedule, slightly behind schedule, or very much behind schedule? (CHECK ONE.) **n=50**

1. **1** Very much ahead of schedule (GO TO QUESTION 23.)
2. **4** Slightly ahead of schedule (GO TO QUESTION 23.)
3. **23** On schedule (GO TO QUESTION 23.)
4. **17** Slightly behind schedule
5. **5** Very much behind schedule

22. Now, I'm going to mention some reasons why a state's implementation of **family support services** might be behind schedule. Please indicate if any of these reasons apply to your state. (CHECK ONE FOR EACH.)

Is implementation behind schedule because your state...	Yes (1)	No (2)
1. Received its OBRA funds later than it expected to receive them? **n=22**	**9**	**13**
2. Decided to delay action on **family support services** until federal welfare reform was complete? **n=22**	**4**	**18**
3. Delayed action on **family support services** until receiving federal guidance related to the implementation of OBRA 1993? **n=22**	**7**	**15**
4. Experienced delays in developing or producing the 5-year plan? **n=22**	**5**	**17**
5. Experienced delays in designing or developing the "new" **family support services**? **n=22**	**15**	**7**
6. Required an extended period of time to make changes to the existing service-delivery system before **family support services** could be implemented? These changes might include training staff on cultural awareness or process changes, collaborating with other related service providers, reorganizing departments, or changing service delivery processes. **n=22**	**13**	**9**
7. Experienced delays in any other pre-implementation activities? (IF "YES," PLEASE SPECIFY.) **n=22**	**13**	**9**

9

IMPACT OF FAMILY PRESERVATION AND FAMILY SUPPORT SERVICES

Now, I'd like to ask you about any results achieved by OBRA-funded **family preservation and support services**. Again, when we say "OBRA funds", we mean Title IV-B Subpart 2 funds.

23. We realize it may be too early to have done this, but has your state gathered any information on the results achieved so far by OBRA-funded... (CHECK ONE FOR EACH.) **n=51**

	Yes (1)	No (2)
1. **Family preservation services**?	**9**	**42**
2. **Family support services**?	**9**	**42**

(IF "NO" TO BOTH **family preservation** AND **family support** SERVICES, THEN GO TO QUESTION 28 ON PAGE 13.)

24. Now, I'm going to mention some measures that might be used to assess the impact of **family preservation or family support services**. First, we'd like to know if the measure was used. If so, we'd like to know if it was used to assess the impact of **family presevation services**, **family support services**, or both. The first question is this: For OBRA-funded **family preservation or family support services**, did anyone in your state measure... (CHECK ONE FOR EACH ITEM IN (A); IF "YES" IN (A), THEN CONTINUE TO (B).)

		(A) Did anyone measure... (CHECK ONE FOR EACH)			(B) Was it used for family preservation (FP) services, family support (FS) services, or both?
		No (1)	Yes (2)	If yes --->	(ENTER "**FP**", "**FS**", OR "BOTH")
1.	The number of children, families, or clients served? **n=10**	**0**	**10**		
2.	The extent to which the needs of vulnerable or at-risk children and families were met? **n=10**	**5**	**5**		
3.	The number of foster care placements prevented or number of family reunifications? **n=10**	**4**	**6**		
4.	Changes in the well-being of children, including each child's development, school performance or readiness? **n=10**	**6**	**4**		
5.	Changes in parent-child relationships, family satisfaction, or family functioning? **n=10**	**5**	**5**		
6.	Changes in the community, such as in the number of child abuse/neglect reports, in poverty rates, in birth rates, or in childhood mortality rates? **n=10**	**3**	**7**		

10

	(A) Did anyone measure... (CHECK ONE FOR EACH)			(B) Was it used for family preservation (FP) services, family support (FS) services, or both?
	No (1)	Yes (2)	If yes --->	(ENTER "**FP**", "**FS**", OR "BOTH")
7. Changes to the service-delivery system, such as in caseloads or expenditures? **n=10**	**5**	**5**		
8. Other changes to the service-delivery system, such as changes in the extent of collaboration, coordination, and inclusiveness? **n=10**	**2**	**8**		
9. Still other changes to the service-delivery system, such as in staffing levels, staff training, number of cases per worker, or timeliness of services? **n=10**	**6**	**4**		
10. Cost effectiveness? **n=22**	**8**	**2**		
11. Which types of services work best for certain groups of clients? **n=22**	**7**	**3**		
12. Anything else? (IF "YES," PLEASE SPECIFY) **n=10**	**7**	**3**		

25. We would like any information you might have on specific results of OBRA-funded **family preservation** or **family support** services in your state. Could you mail or fax to us any documentation? **n=10**

1. **7** Yes => I will tell you where to mail or fax this information at the conclusion of this interview.

2. **3** No

11

26. I am going to now mention some ways in which the impact of OBRA-funded **family preservation** or **family suppor**t services might be assessed. To your knowledge, in your state, ... (CHECK ONE FOR EACH.)

Has anyone assessed the impact of OBRA-funded services by...	Yes (1)	No (2)
1. Monitoring indicators? **n=10**	**9**	**1**
2. Preparing periodic progress reports? **n=10**	**8**	**2**
3. Reviewing individual case records? **n=10**	**2**	**8**
4. Surveying clients? **n=10**	**5**	**5**
5. Reviewing specific family preservation or family support programs? **n=10**	**4**	**6**
6. Reviewing portions or all of your state's child and family service-delivery system? **n=10**	**5**	**5**
7. Doing anything else? (IF "YES," PLEASE SPECIFY.) **n=10**	**2**	**8**

27. To your knowledge, has anyone in your state conducted a formal evaluation--that is, an evaluation that utilized an experimental design--to assess the effectiveness of OBRA-funded... (CHECK ONE FOR EACH.) **n=10**

	Yes (1)	No (2)
1. **Family preservation services**?	**1**	**9**
2. **Family support services**?	**0**	**10**

12

Plans to Assess Impact

We are interested in your state's plans for assessing the impact of **family preservation** and **family support** services on children, families, and communities.

28. Now, I'm going to mention some measures that might be used to assess the impact of **family preservation or family support services**. First, we'd like to know if the measure will be used in your state. If so, we'd like to know if it will be used to assess the impact of **family presevation services**, **family support services**, or both. The first question is this: For OBRA-funded **family preservation or family support services**, does anyone in your state plan to measure... (CHECK ONE FOR EACH ITEM IN (A); IF "YES" IN (A), THEN CONTINUE TO (B).)

		(A) Will anyone measure... (CHECK ONE FOR EACH)			(B) Will it be used for family preservation (FP) services, family support (FS) services, or both?
		No (1)	Yes (2)	If yes --->	(ENTER "**FP**", "**FS**", OR "BOTH")
1.	The number of children, families, or clients served? **n=51**	**0**	**51**		
2.	The extent to which the needs of vulnerable or at-risk children and families were met? **n=51**	**9**	**42**		
3.	The number of foster care placements prevented or number of family reunifications? **n=51**	**16**	**35**		
4.	Changes in the well-being of children, including each child's development, school performance or readiness? **n=51**	**14**	**37**		
5.	Changes in parent-child relationships, family satisfaction, or family functioning? **n=51**	**6**	**45**		
6.	Changes in the community, such as in the number of child abuse/neglect reports, in poverty rates, in birth rates, or in childhood mortality rates? **n=51**	**6**	**45**		
7.	Changes to the service-delivery system, such as in caseloads or expenditures? **n=51**	**19**	**32**		
8.	Other changes to the service-delivery system, such as changes in the extent of collaboration, coordination, and inclusiveness? **n=51**	**4**	**47**		
9.	Still other changes to the service-delivery system, such as in staffing levels, staff training, number of cases per worker, or timeliness of services? **n=51**	**21**	**30**		
10.	Cost effectiveness? **n=51**	**19**	**32**		

13

	(A) Will anyone measure... (CHECK ONE FOR EACH)			(B) Will it be used for family preservation (FP) services, family support (FS) services, or both?
	No (1)	Yes (2)	If yes --->	(ENTER "**FP**", "**FS**", OR "BOTH")
11. Which types of services work best for certain groups of clients? **n=51**	**16**	**35**		
12. Anything else? (IF "YES," PLEASE SPECIFY) **n=51**	**42**	**9**		

(IF ALL ITEMS IN QUESTION 28 ARE CHECKED "NO," GO TO QUESTION 30.)

29. We are interested in examples of specific measures that will be used to assess the impact of OBRA-funded **family preseravtion or family support services**. Does your state's 5-year plan describe any of the measures that you just mentioned? (CHECK ONE.) **n=51**

    1. **35** Yes => Please mail or fax us the relevant pages from your state plan. I will tell you where to send this information at the conclusion of this interview.

    2. **16** No

30. I am going to now mention some ways in which the impact of OBRA-funded **family preservation** or **family support** services might be assessed. To your knowledge, in your state, ... (CHECK ONE FOR EACH.)

Will anyone assess the impact of OBRA-funded services by...	Yes (1)	No (2)
1. Monitoring indicators? **n=51**	**50**	**1**
2. Preparing periodic progress reports? **n=51**	**49**	**2**
3. Reviewing individual case records? **n=51**	**26**	**25**
4. Surveying clients? **n=51**	**45**	**6**
5. Reviewing specific family preservation or family support programs? **n=51**	**46**	**5**
6. Reviewing portions or all of your state's child and family service-delivery system? **n=51**	**39**	**12**
7. Doing anything else? (IF "YES," PLEASE SPECIFY.) **n=51**	**12**	**39**

14

31. To your knowledge, will anyone in your state conduct a formal evaluation--that is, an evaluation that will utilize an experimental design--to assess the effectiveness of OBRA-funded... (CHECK ONE FOR EACH.) **n=51**

	Yes (1)	No (2)
1. **Family preservation services**?	**8**	**43**
2. **Family support services**?	**8**	**43**

REQUEST FOR OTHER DATA

32. For background purposes, we are interested in other data that may be included in your state's 5-year plan. Does your state's plan include any data that portrays either graphically, in tables, or in narrative, any aspect of child welfare at or before the time the 5-year plan was developed? **n=51**

1. **38** Yes => Please mail or fax us the relevant pages from your state plan.

2. **13** No

33. (IF "YES" TO QUESTIONS 25, 29, or 32.) You can mail or fax us (1) documentation related to results of family preservation/family support services in your state, (2) those sections of your state's 5-year plan related to measures that will be used to assess the impacts of these services, or (3) those sections of the state plan related to child welfare data to:

U.S. General Accounting Office
Attn: Ms. Karen Lyons
Federal Office Building
2800 Cottage Way Room W-2326
Sacramento, CA 95825

The fax number is 916-974-1202

If you have any questions, you can call me at 916-974-3341 (California time).

That concludes this interview. Thank you very much for your time and cooperation.

15

DEFINITIONS

We define **family preservation services** and **family support services** as they appear in the Omnibus Budget Reconciliation Act of 1993:

-- **Family preservation services** are typically designed to help families at risk or in crisis. Services may be designed to (1) prevent foster care placement, (2) reunify families, (3) place children in other permanent living arrangements, such as adoption or legal guardianship, (4) provide followup care to reunified families, (5) provide respite care for parents and other caregivers, and/or (6) improve parenting skills.

-- **Family support services** are primarily community-based preventive activities designed to promote the well-being of children and families. Services are designed to (1) increase the strength and stability of families, (2) increase parents' confidence and competence in their parenting abilities, (3) afford children a stable and supportive family environment, and (4) otherwise enhance child development.

The terms, **family preservation program** and **family support program**, refer to the type of program or model within which specific services are provided. A particular program may be available at multiple sites, or funds may be distributed to multiple service-providers to implement a particular program.

Family preservation programs are often distinguished by one of the following theoretical approaches or models:

-- **Crisis intervention technique** forms the basis for the Behavioral Science Institute's **Homebuilders** model. Key program characteristics include: contact with the family within 24 hours of the crisis; caseload sizes of one or two families per worker; service duration of 4 to 6 weeks; provision of both concrete services and counseling; staff availability to families on a 24-hour basis; and an average of 20 hours of service per family per week.

-- **Family systems technique** is a model typified by the **FAMILIES** program, originated in Iowa. Attention is focused on the way family members interact with one another and seeks to correct dysfunction by working on the family's interaction with the community. Teams of workers carry a caseload of 10 to 12 families; families are seen in their own homes for an average of four and one-half months; and both concrete and therapeutic services are provided.

-- **Therapeutic family treatment** is a model that relies less on the provision of concrete and supportive services and more on family therapy. One of the first such programs was the **Intensive Family Services Program** which began in Oregon. Treatment is less intensive than the Homebuilders model and can be delivered in either an office or home setting. Workers carry a caseload of about 11 families and service duration is 90 days with weekly followup services provided for an average of 3 to 5 1/2 months.

-- Some **family preservation programs** use slight variations of these existing models or hybrids of several models.

Family support programs can be categorized by their type, which is closely aligned with their mission. Common program types are: (with nationally recognized programs and models in parentheses)

-- **Comprehensive/community family support programs** offer a wide array of services and typically serve multiple populations, such as teen parents, juvenile offenders, and jobless adults. Programs tend to be community-based and open to the entire community. Program components may include some of the more narrowly focused family support programs listed below. (Parent Services Project)

16

- **Child abuse and neglect prevention programs** serve at-risk populations and focus on prevention of abuse and neglect by working to eliminate social isolation. Programs link families to one another and to services, including homevisiting, parenting education classes, peer support groups, and child-related services. (The Nurturing Program; Hawaii's Healthy Start (replicated through Healthy Families America))

- **Economic self-sufficiency programs** serve unemployed and/or underemployed parents by offering extensive job preparation, skills development workshops, training sessions, and job placement services. Most programs also provide comprehensive services for families, including referral to other community agencies, mental health services, and tax/legal assistance. (Comprehensive Child Development Program (federal program))

- **Family literacy programs** focus on generating literacy competency in parents and children. Programs are often linked with community-based organizations, including libraries and family learning centers. (Parent and Child Education (PACE); Even Start (federal program); FAMILY MATH; National Center for Family Literacy; SERS Family Learning Centers)

- **Infant and child health and development programs** serve families from prebirth until the child reaches the age of 3. Programs are often home-based and incorporate a strong emphasis on health and nutrition. Many programs are linked to healthcare facilities, including hospitals, clinics, and community health facilities. (Maternal Infant Health Outreach Worker (MIHOW) Project)

- **School readiness/achievement programs** primarily aim at preparing children for school success. In addition to cognitive skills, many programs stress the development of children's competencies in social, emotional, and physical domains. (Home Instruction Program for Preschool Youngsters (HIPPY); Parents as Teachers (PAT); Teachers Involve Parents in Schoolwork (TIPS))

- **Situation-specific programs** are designed to meet the unique needs of families in specific situations, including homeless families, rural families, refugee families, military families, families with incarcerated members, and single-parent families. (Single Parent Resource Center)

- **Special needs programs** primarily serve families whose children have special developmental needs or disabilities. Most programs focus on providing parents with information to enable them to cope with the additional stresses of nurturing special needs children. (Family, Infant, and Preschool Program (FIPP))

- **Substance abuse prevention programs** are sometimes designed for all children and families and are preventive in orientation; in other cases, programs target children and youth known to be at-risk or live in substance abusing family situations. Programs aim at strengthening self-esteem and promoting healthy lifestyles. (Families and Schools Together (FAST))

- **Wellness programs** serve families who are dealing with normal stresses of parenting. Programs offer a wide range of support to families in the area of parenting education. These programs tend to be co-located--at YWCAs, health councils, and religious service organizations--often functioning as a supplementary service for adults. (Child Rearing Program; Effective Parenting Information for Children (EPIC); The Mothers' Center; Parents Place)

Comments From the Department of Health and Human Services

DEPARTMENT OF HEALTH & HUMAN SERVICES

ADMINISTRATION FOR CHILDREN AND FAMILIES
Office of the Assistant Secretary, Suite 600
370 L'Enfant Promenade, S.W.
Washington, D.C. 20447

January 10, 1997

Mr. Mark V. Nadel
Associate Director
Income Security Issues
U.S. General Accounting Office
Washington, D.C. 20548

Dear Mr. Nadel:

The Administration for Children and Families appreciates the opportunity to comment on the draft report, "CHILD WELFARE: States' Progress in Implementing Family Preservation and Support Services" (GAO-HEHS-97-34).

In general, the findings of this report are consistent with the information we have received regarding the implementation of the family preservation and support program. The report states that the implementation of these programs has been slower than anticipated, therefore, the full impact of the programs is uncertain at this stage. However, as the report notes, there have been some initial positive outcomes. These are:

- States have significantly focused on developing family support services, thus providing a balance between the availability of family preservation and family support services.
- States have created new programs or expanded previously existing programs in the areas of both family preservation and family support.
- States have been able to offer services to families and children who otherwise might not have been served.

Another finding that the Department's Administration for Children and Families believes is important is that the Federal family preservation and support funds served as a catalyst for collaboration among three levels of government (Federal, State and local), and across multiple programs in a comprehensive planning process. The comprehensive planning process responded to the needs of communities and families and was instrumental in creating additional funds, both governmental and private, to achieve the established goals.

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We look forward to continued work with the States, both through the Federally funded evaluations and other independent studies, to assess and evaluate the impact of the family preservation and support services on families and children. It is through these efforts that we expect to receive rigorous information and data on both family preservation and support programs for the first time.

We hope that these comments are useful to you as you prepare your final report.

Sincerely,

Olivia A. Golden

Olivia A. Golden
Acting Assistant Secretary
for Children and Families

GAO Contact and Acknowledgments

GAO Contact

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Acknowledgments

In addition to those named above, the following individuals made important contributions to this report: Patricia L. Elston conducted both the nationwide survey and in-depth interviews for a portion of the states and coauthored the report; Deborah A. Moberly performed these same tasks and conducted computerized analyses of the survey data; and Joel I. Grossman assisted in developing, pretesting, and finalizing the survey instrument.

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