



Annual Evaluation Report to the Iowa Department of Human Services

Fiscal Year 2012

Prevent Child Abuse Iowa

505 Fifth Avenue, Suite 900 Des Moines, Iowa 50309
515.244.2200 (tel)
800.CHILDREN
515.280.7835 (fax)
www.pcaiowa.org

This report was produced for the Iowa Department of Human Services by



In collaboration with
Hornby Zeller Associates, Inc.
373 Broadway
South Portland Maine 04106
207.773.9529
ME@hornbyzeller.com



TABLE OF CONTENTS

Title	Page
Chapter 1	
Summary of Iowa Child Abuse Prevention Program	1
Families Served by ICAPP	3
Overview of the Iowa Family Survey	4
ICAPP Protective Factors Results	5
Chapter 2	
Crisis Nursery Services	8
Chapter 3	
Respite Care Services	9
Chapter 4	
Parent Development and Education	11
Chapter 5	
Outreach and Follow up Services	14
Chapter 6	
Sexual Abuse Prevention Programs	16
Chapter 7	
Community Development Efforts	23
References	25



CHAPTER ONE SUMMARY OF THE IOWA CHILD ABUSE PREVENTION PROGRAM

The mission of Prevent Child Abuse Iowa (PCA Iowa) is to prevent child abuse in the entire state of Iowa. Since 1982, Prevent Child Abuse Iowa has administered the Iowa Child Abuse Prevention Program (ICAPP), which is supported by state and federal funding and an income tax check off. The appropriated funds go to the Department of Human Services (DHS), which then contracts with a private agency to administer the program. The Department also contracts individually with grant recipients to administer ICAPP-funded services.

In partnership with DHS, Prevent Child Abuse Iowa issues requests for proposals to over 65 local child abuse prevention councils for funding to provide services. These prevention councils are volunteer coalitions broadly representative of the governmental, business, service provider, consumer, and civic sectors of their communities. Each council assesses its community's service and support needs and submits a proposal for funding up to three prevention programs. This assessment requires prioritization among the community's needs, because councils can only request funds up to certain limits in order to ensure that state funds can reach as many counties in Iowa as possible.

Independent grant reviewers evaluate council proposals and recommend how the funds should be distributed. Their recommendations go to an advisory council not affiliated with Prevent Child Abuse Iowa or a child abuse prevention council. The advisory council makes the final decisions on what funding councils receive, subject to DHS approval. These decisions are challenging because council requests far exceed available grant funds. In fiscal year 2012, local child abuse prevention councils received grants totaling \$1,451,582 to develop and operate 134 projects in 92 counties. These projects provided service in one or more of five major areas: Community Development (\$12,533), Respite and Crisis Care Services (\$256,584), Parent Development (\$714,833), Outreach and Follow up Services (\$112,412), and Sexual Abuse Prevention (\$355,218).

Table 1 below details the services the local child abuse prevention councils provided in fiscal year 2012 (July 1, 2011 through June 30, 2012). Local child abuse prevention councils provided 65,441 hours of respite and crisis child care to 1,368 families with 1,711 children. A total of 4,621 parents attended parent development classes, and 572 participated in outreach and follow up services. A total of 42,344 children and 7,767 adults attended sexual abuse prevention classes. Prevention services overall helped 50,920 children. Providing services required 42,114 hours of volunteer time from 2,152 volunteers.

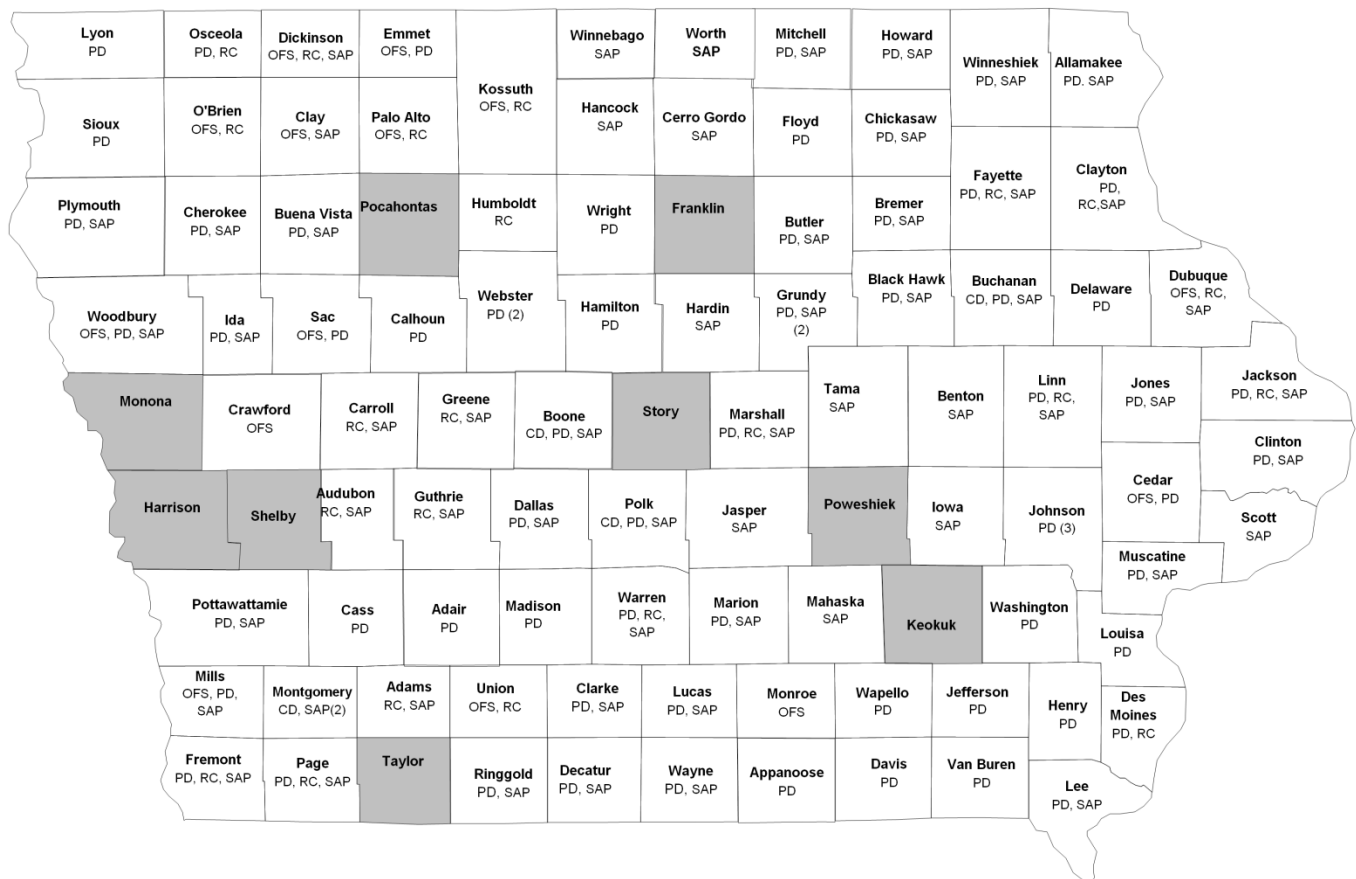
Table 1. Child Abuse Prevention Services, Fiscal Year 2012

Program	Funds Awarded	No. of Projects	Families Served	Parents/ Adults Served	Children Served	Hours of Care	Volunteers	Volunteer Hours
Community Development	\$12,533	4						
Outreach/ Follow Up	\$112,412	12	388	572	695		109	585
Parent Development	\$714,833	55	3,604	4,621	6,170		1,196	10,117
Respite/ Crisis Services	\$256,584	19	975	1,303	1,711	65,441	453	27,405
Sexual Abuse Prevention	\$355,218	44		7,767	42,344		394	4,007
Total	\$1,451,582	134	4,967	14,263	50,920	65,441	2,152	42,114



ICAPP grants provide a base of financial support for councils to offer prevention services and for community groups interested in preventing child abuse to pay the costs of starting new councils. As important as they are, the grants that councils receive are limited, averaging \$10,833 per project and \$15,951 per county in fiscal year 2012. Most projects need to supplement their ICAPP grants with significant local cash and in-kind support. Figure 1 shows the location of the six types of programs and services by county for fiscal year 2012.

Figure 1. Counties with ICAPP-Funded Services in FY 2012



Key: CD = Community Development, OFS = Outreach/Follow-up, PD = Parent Development, RC = Respite Care, SAP = Sexual Abuse Prevention



Families Served by ICAPP

While the detailed demographics report was submitted to DHS separately, a brief summary of participant characteristics is useful in putting the evaluation results in context.

Demographic data in this report are based on surveys collected from July 2011 through June 2012. The report represents information from program participants who voluntarily shared demographic information and responses to the protective factors questions. Statewide, 2,715 total surveys were analyzed, 1,782 enrollment and 933 follow-up.

Family Demographic Summary	
83% women, 17% men 78% White, 13% Hispanic, 6% African American, 2% Native American or Alaskan Native 61% Married or Partnered 10% Separated or Divorced 28% Single	
Housing Status	
36% Own their home, 44% Rent, 18% Share or temporary	
Employment & Education Status	
50% Employed full or part time 21% In school 32% Had a high school diploma or GED 25% Had some college or vocational training 11% Had an Associate's degree 10% Had a Bachelor's degree 3% Had a Master's degree or higher	

Comparing the demographics of the families served to the 2010 US Census data for Iowa, there are some noticeable differences. For instance, statewide 91 percent of Iowans are White, and three percent are African American compared to 78 percent White and six percent African American among the families served. Five percent identify as Hispanic or Latino compared to 13 percent served. More married people responded than are in the state population and fewer caregivers are employed (50% among respondents compared to 64% in Iowa). More people in the population have some college education including undergraduate and graduate degrees (57%) than those served (49%).

Thinking a little more about the families who access Iowa's prevention programs, it is helpful to look at household income. For those who completed surveys, statewide 56 percent earned \$20,000 or less per year, (compared to the US Census data for 2010, just 14% earned less than \$25,000); 13 percent had annual incomes between \$20,000 and \$30,000; eight percent earned \$30,000 to \$40,000; and 22 percent earned \$40,000 or more, (again, the 2010 Census data showed that 60% of households in Iowa earned \$50,000 or more per year).



Overview of the Iowa Family Survey

PCA Iowa's role is to support the community agencies administering prevention services by overseeing program operations (practices and policies), providing training and technical assistance, assisting with evaluation and providing helpful feedback about the successes and challenges of the councils' efforts. PCA Iowa hired Hornby Zeller Associates, Inc. (HZA) to assist with the evaluation component and in particular to measure the protective factors in families participating in Outreach and Follow up, Respite Care and Crisis Nurseries, and Parent Development programs and services. HZA researched an adaptable tool to be used across most programs (with the exception of child sexual abuse prevention programs, which typically use a separate method of evaluation), to collect demographic information and measure the degree of change in protective factors of program participants. PCA Iowa decided to use the protective factors survey developed by FRIENDS National Resource Center for Community-Based Child Abuse Prevention and the University of Kansas Institute for Educational Research and Public Service, through funding provided by the US Department of Health and Human Services. This instrument is flexible in that it can be used with the majority of prevention projects, and can be given on paper or through the web. The survey in its current form, including additional sections that ask the required DHS risk factor questions, basic demographic questions, and services received by participants is called the *Iowa Family Survey*.

Iowa's prevention program grantees are required to use the *Iowa Family Survey* as part of their evaluation and continuous quality improvement process. By measuring the same variables across all programs, communities can get useful feedback that is relevant and immediately applicable to their work with children and families.

Programs can use their survey results to understand what changes have occurred in the individuals and families they serve. The *Iowa Family Survey* helps programs to:

- Describe the population(s) they serve;
- Assess the changes in any of the targeted protective factors; and
- Consider the protective factors and areas of programming that need more focus.

Considering the research questions and measurable objectives of this project, part of the methodology includes assuring the instrument accurately collects the desired data, answers the questions posed, and is as simple as possible for the majority of programs to complete. To that end, a great deal of effort was put into administering a survey that would give program staff confidence in the self-evaluation process.

Training and technical assistance webinars were provided to participating councils required to use the *Iowa Family Survey*. They were advised of possible pitfalls and helpful tips to avoid those pitfalls prior to administering the survey to families. Staff members were made aware that their role was to facilitate understanding and cooperation, not to tell participants how to answer questions, and were reminded that it was critical that the survey be presented in a consistent way to all participants. The survey was administered to newly enrolling families in 86 programs representing four program types across 76 counties in the state between July 2011 and June 2012.

This report includes service data and results of the *Iowa Family Survey* (protective factors survey) for each of the major program areas in fiscal year 2012. To compile the service delivery data, PCA Iowa uses information from quarterly reports listing services provided, program participation, and volunteer contributions. The protective factors questions were asked as part of the *Iowa Family Survey* which was administered by four of the five program types. Child sexual abuse prevention programs were excluded from this survey since curricula used for those prevention



efforts typically have their own evaluation forms. These questions were designed to be given to adult caregivers of children rather than children themselves or teachers who, in this case, received information about child sexual abuse prevention. Councils that were listed as part of the Community Development category were also excluded from the *Iowa Family Survey*.

The five protective factors are addressed by 20 questions, asking adult caregivers to make a self-assessment of each at enrollment and after participating in a program. Using a Likert-style agreement scale, participants rated a series of statements about their family, connection to the community, their parenting practices and perceived relationship with their child(ren). The scores for each domain are calculated based on a range from one as the lowest through seven as the highest possible. The responses to these statements provide a way to measure the protective factors in children's lives and can be examined all together as a group, compiled into five components, or interpreted separately, question by question. The table below, created by FRIENDS National Resource Center, provides a brief summary of the protective factors covered in the survey.

Table 2. Definitions of Protective Factors by FRIENDS NRC

Protective Factors Survey Components	
<i>Domain</i>	<i>Definition</i>
Family Functioning and Resiliency	Having adaptive skills and strategies to persevere in times of crisis. Family's ability to openly share positive and negative experiences and mobilize to accept, solve and manage problems.
Social Emotional Support	Perceived informal support (from family, friends and neighbors) that helps provide for emotional needs.
Concrete Support	Perceived access to tangible goods and services to help families cope with stress, particularly in times of crisis or intensified need.
Child Development and Knowledge of Parenting	Understanding and utilizing effective child management techniques and having age-appropriate expectations for children's abilities.
Nurturing and Attachment	The emotional tie along with a pattern of positive interaction between the parent and child that develops over time.

ICAPP Protective Factors Results

To help understand the program's impact in the community and determine whether or not services and activities are making a difference in the areas they were intended, HZA looked at the average scores in each domain at the beginning of program enrollment (pretest) and after program involvement (post test). Because the study took place over just one year, the group of participants that took the survey at enrollment and the group that took the survey at follow up could be different people, taking the version that they were eligible for at the time the surveys were offered. A significant number of surveys were able to be matched, however, which allows for a true comparison of pre to post results. For this year, 376 surveys were matched, results for which are shared here, and programs that submitted more than eight surveys were also provided data summaries explaining program-level results, even for those that were not able to be matched.

Expanding into more complex levels of analysis, HZA then looked at the effects of certain demographic characteristics on protective factors to determine if there were specific groups of people who made greater gains than



others. For instance, do families with certain living situations score better in the areas of Social Support? Do more highly-educated individuals score better on Knowledge of Child Development?

In general, the results show that the prevention programs in Iowa are effective for a wide variety of demographic groups. The statewide totals reflected that the percent of individuals showing a positive change exceeded those that expressed no change or even a negative change in all five domains. This graph illustrates the percent change of all participants in Iowa's prevention programs, based on the set of surveys that were matched from pretest to post test. The greatest gains were in the domains for Family Functioning and Child Development while the least improvement was in the Social Support domain.

Figure 2. Change in Protective Factors for All Programs Combined

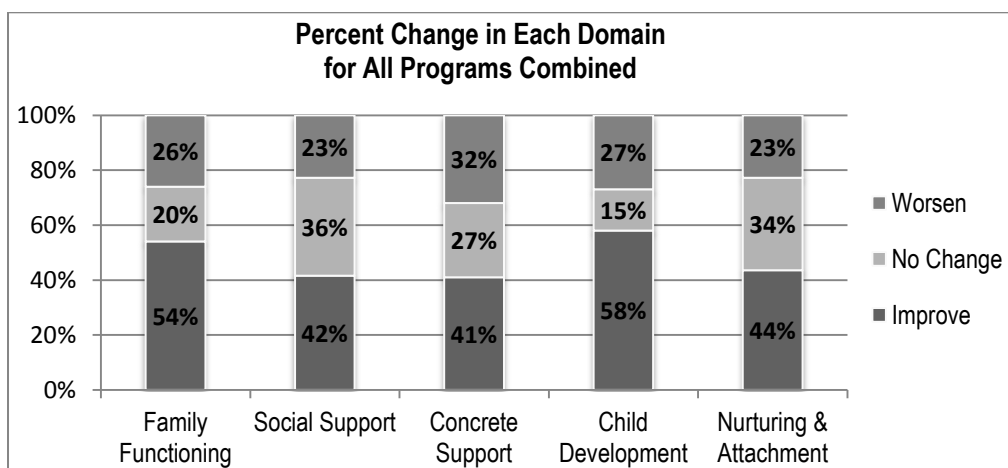


Figure 3 illustrates a second way to analyze results, by looking at the average scores from the pre and post tests in each protective factor domain. (These results will be elaborated on further by program type within the program's chapter throughout this report.) Looking at the overall results of this year's survey, all of the average scores at enrollment have a fairly high rating – ranging from 5.2 as the lowest to 6.2 as the highest. It is easy to see here, too, that the average score in all five factors increases, with the greatest increase in the area of Family Functioning. Nurturing and Attachment is the domain that starts with the highest average score (6.2) and increases to the highest average score (6.3) out of all five domains.

Figure 3. Average Protective Factors Scores for ICAPP Participants



When looking more closely at average score by program type, there was a similar trend in participants' responses. Since there are so few programs that offer care through Crisis Nurseries exclusively, those results are combined with Respite Care. Results for the two programs are reviewed separately in the following chapters of this report. All four program types: Respite Care and Crisis Nurseries (combined in the table as Respite and Crisis Care), Parent Development, and Outreach and Follow up had fairly high average scores at enrollment, almost all of which increased after participating in services or activities. The average scores for all program types are displayed here. The only score that decreases is in Nurturing and Attachment from Respite and Crisis Care participants, although the change is fractional; all other scores stayed the same or improved.

Protective Factors	Average Scores in Each Domain					
	Respite & Crisis Care		Parent Development		Outreach & Follow up	
	Pre	Post	Pre	Post	Pre	Post
Family Functioning & Resiliency	5.5	5.8	5.2	5.4	5.1	5.7
Social Emotional Support	5.9	6.1	5.9	6.0	5.6	6.1
Concrete Support	5.4	5.7	5.3	5.3	4.9	5.5
Child Development & Parenting	5.7	5.8	5.5	5.7	5.6	5.8
Nurturing & Attachment	6.3	6.2↓	6.1	6.3	6.4	6.4

In summary, the results of the *Iowa Family Survey* show that programs are having a positive impact on their participants. Overall, the greatest positive change is seen in the Child Development domain, followed by Family Functioning. Of the four major program types that participated in the survey, the Outreach and Follow up participants had the highest scores of all, in fact higher than the statewide averages in three out of five domains. These services are offered through individualized home visits or to groups in a public setting, depending on the community's identified need, and are generally targeted to a specific population. The results of this survey are very positive for PCA Iowa because they are consistent with the national research on prevention programs showing that programs designed to meet the unique needs of families through carefully structured curricula delivered in a variety of settings, and targeting the highest risk populations see the greatest positive change in protective factors (Barth, 2009; Gomby, 2005; Karoly et al., 2005.)

Knowing that prevention efforts are available throughout the entire state of Iowa, the demographics were examined to determine if there were trends in protective factors results. While indeed the outcomes were positive for all general groups, (i.e., genders, races or ethnicities, caregivers who were married or single, and living situations), the results for certain risk factors including mental illness, history of child abuse, and alcohol and drug use were examined to see if there were differences between those who possessed those risk factors through self report and those who did not. The most dramatic difference was observed in the area of Family Functioning for participants who indicated that they had been abused as children compared to those who had not been abused. For those who had been abused, 73 percent improved in Family Functioning compared to 50 percent improvement for those who had not been abused. For survey respondents who indicated that they had a mental illness, greater improvement was seen in all five domains compared to those who said they did not have a mental illness. For respondents that indicated that they abuse alcohol or drugs, their scores were lower at pretest *and* post test, in three out of five domains when compared to those that did not abuse substances. These results show that the prevention efforts have a greater positive effect on families where some risk factors are present.



CHAPTER TWO CRISIS NURSERIES

Family stress is a well-documented and significant factor in child abuse. Research shows very stressed parents are at higher risk of abusing their children; as the number of stresses increases, so does the risk of child abuse. Crisis nursery (CN) programs are intended to provide care and support at high stress times and, therefore, are a critical component of formal social support interventions deemed necessary to prevent child abuse and neglect. Their goal is to provide care for children and support for the family until the emergency situation is remedied. Support services may include parenting information and information regarding other community resources and agencies.

The Iowa crisis nursery programs were initiated in 1989, thanks to a federal demonstration grant that established several pilot sites. Crisis nursery projects funded by ICAPP provide a temporary, safe environment for children aged birth through 12 years whose parents are unable to meet their needs due to overwhelming circumstances or an emergency in their lives. These projects must use child care providers that meet state child care licensing or registration guidelines.

Crisis nursery services are available to families under stress 24 hours per day, seven days per week. Families may utilize the services for up to 72 hours at a time. Program staff conduct intake interviews, provide placement for the children, and offer advice and support to parents. Programs provide transportation to care when requested and will travel to pick up children if necessary.

Table 3 lists the crisis care services provided under the Respite Care Services category in fiscal year 2012 (July 1, 2011 through June 30, 2012). A total of 238 families with 452 children received 20,618 hours of crisis child care. The services required 20,782 hours of help from 77 volunteers.

Table 3. Crisis Nursery Services, Fiscal Year 2012

County	Funds Awarded	Families Served	Parents Served	Children Served	Hours of Care	Volunteers	Volunteer Hours
Audubon, Carroll, Greene, Guthrie	\$47,601	39	53	82	4,073	10	950
Buchanan	\$22,140	20	29	37	1,844	18	7,098
Fayette	\$4,428	22	33	53	768	5	107
Linn	\$34,850	73	80	126	6,668	14	6,064
Marshall	\$16,974	84	107	154	7,265	30	6,563
Total	\$125,993	238	302	452	20,618	77	20,782

As is noticeable in the table above, there are relatively few programs in Iowa that provide services through the Crisis Nurseries exclusively; most combine with Respite Care or other forms of support and service to the community. For 2012, five Crisis Nurseries submitted 104 surveys administered to new program participants, of those just 12 were able to be matched from enrollment to follow up. Therefore, the average score of all surveys submitted were examined to get some idea of participants' assessment of their protective factors (regardless of when they accessed services throughout the year). Since the Crisis Nurseries are similar to services provided through Respite Care, the two groups of results were combined for analysis in chapter one. Overall, the scores for both program types were comparable, with slightly lower average scores in Family Functioning and Social Support domains from the participants who access Crisis Nurseries. The average score declined slightly in Social Support and Nurturing and Attachment; these decreases were not significant and were based on just 12 respondents.



CHAPTER THREE RESPITE CARE

ICAPP-funded respite care (RC) programs provide parents with temporary relief from parenting responsibilities to reduce stress. Programs offer services through site- or home-based care. Service may be available at designated times or on short notice for crises.

However offered, RC programs benefit parents and children alike. Respite care services provide parents with a break from parenting. Parents can do whatever they choose while their children are in respite care. Some parents attend medical appointments or counseling sessions, run errands, or simply rest. Respite care services have been found to reduce feelings of tension, anxiety, depression, anger, hostility and overall stress levels in parents.

Respite services provided by licensed and/or registered child care providers benefit children by assuring a safe and comforting environment for them. Children often enjoy and learn from interacting and socializing with other children, as well as through participating in fun games and activities in a nurturing place.

Table 4 summarizes the data from the 16 respite care projects funded by ICAPP in fiscal year 2012 (July 1, 2011 to June 30, 2012). A total of 737 families with 1,259 children received 44,823 hours of respite child care. Programs benefited from 376 volunteers providing 6,623 hours of service.

Table 4. Respite Care Services, Fiscal Year 2012

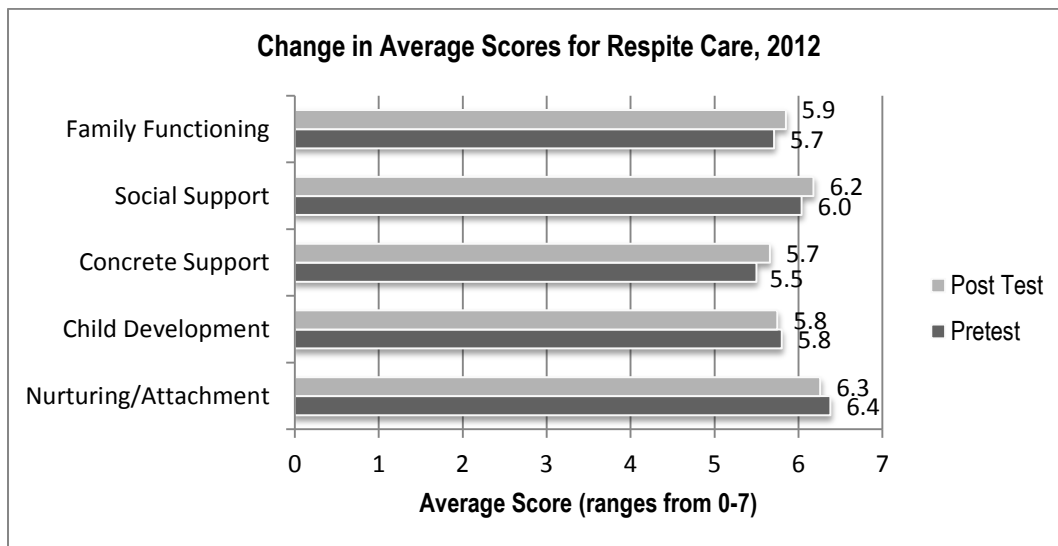
County	Funds Awarded	Families Served	Parents Served	Children Served	Hours of Care	Volunteers	Volunteer Hours
Adams	\$1,804	9	14	16	313	8	78
Audubon, Carroll, Greene, Guthrie	\$47,601	172	268	304	8,221	30	2,650
Clay	\$2,870	66	83	80	2,163	8	214
Clayton	\$4,631	34	34	65	743	44	222
Des Moines	\$1,978	26	43	45	753	0	0
Dickinson*	\$17,681	42	42	59	4,173	61	162
Dubuque	\$25,830	28	28	68	8,325	9	16
Fremont, Page	\$2,638	6	9	11	404	1	80
Humboldt	\$10,198	63	118	121	3,285	12	300
Jackson	\$2,870	4	6	5	672	4	34
Kossuth*	\$9,840	49	97	77	302	2	302
Linn	\$34,850	36	45	69	1,367	12	1,429
O'Brien, Osceola	\$5,510	13	27	32	1,575	30	201
Palo Alto	\$5,546	20	27	27	1,803	4	125
Union	\$7,114	19	19	32	737	20	60
Warren	\$32,080	150	206	248	9,987	131	750
Total	\$256,584	737	1,066	1,259	44,823	376	6,623

*May data; June data not received



The sixteen Respite Care programs submitted a total of 366 surveys, 42 of which were able to be matched for analysis of change in protective factors from enrollment to follow up. The average scores for pretest and post test are illustrated in Figure 4; scores improve in four out of five domains, with a slight decrease in the Nurturing and Attachment average score from 6.4 at enrollment compared to 6.3 at follow up.

Figure 4. Average Protective Factors Scores for Respite Services



CHAPTER FOUR PARENT DEVELOPMENT AND EDUCATION

The quality and consistency of parenting significantly affects the possibility of child abuse and is a critical factor child development. Parents who can meet their own basic needs successfully, have realistic expectations of children, and have knowledge of effective behavior management techniques are less likely to abuse their children. Consequently, most parent development (PD) and outreach and follow up programs focus on issues such as: communication skills, problem solving and stress management techniques, behavior management, and typical child development.

Prevention programs can be effective in reducing the incidence of child abuse and neglect. Because there is such diversity in the types of programs offered and service delivery options suggested, it is difficult to know precisely which components or strategies are most effective in parent support programs. What is known, however, based on research to date, is that programs that target the highest risk populations see the greatest positive effect (Gonzalez & MacMillan, 2008; Huebner, 2002). According to a meta-analysis of prevention programs targeted to work with parents with young children, “the greatest benefits are seen in programs that begin prenatally or at birth, and provide services for more than six months,” or for home visiting: a minimum of twelve visits (MacLeod & Nelson, 2000 as cited in Huebner, 2002). Parenting programs can be held in group classes, home-based sessions, or office meetings depending on the needs of the family and the community. The length of the program varies depending on the curriculum used and service provided. For example, the *Nurturing Program* is a popular curriculum that generally meets on a weekly basis for several months, while the *Parents as Teachers* curriculum is a home-based program that targets parents with newborns and follows each family until the child is five years of age.

Some examples of these types of parent development programs in Iowa that administered the *Iowa Family Survey* to measure protective factors include: *Love and Logic*, the *Incredible Years*, *Active Parenting*, and *Systematic Training for Effective Parenting (STEP)*.

Table 5 presents service data for local councils that received ICAPP funding for 55 parent development programs in fiscal year 2012 (July 1, 2011 to June 30, 2012). A total of 4,621 parents with 6,170 children received parenting instruction in 7,828 in-home and 2,677 group sessions. Almost 1,200 volunteers contributed 10,117 hours of service to the PD programs.

Table 5. Parent Development Services, Fiscal Year 2012

County	Funds Awarded	Families Served	Parents Served	Children Served	In-Home Sessions	Group Sessions	Volunteers	Volunteer Hours
Adair	\$10,849	14	15	21	165	0	8	24
Allamakee, Howard, Winneshiek	\$16,477	32	54	77	0	20	10	89
Appanoose, Monroe	\$7,589	119	145	145	0	207	27	220
Black Hawk	\$20,812	256	283	297	590	81	6	190
Boone	\$19,680	150	237	240	40	81	17	251
Bremer	\$3,280	20	24	41	174	0	0	0
Buchanan	\$22,140	37	53	64	414	66	10	411
Buena Vista, Cherokee, Ida, Plymouth	\$19,321	60	86	88	88	52	23	74
Butler	\$2,952	16	25	49	157	0	0	0
Calhoun	\$6,376	121	121	285	0	48	0	0
Calhoun, Webster	\$11,956	46	48	73	0	59	11	116
Cass	\$10,747	30	34	38	99	21	36	68



Table 5. Parent Development Services, Fiscal Year 2012

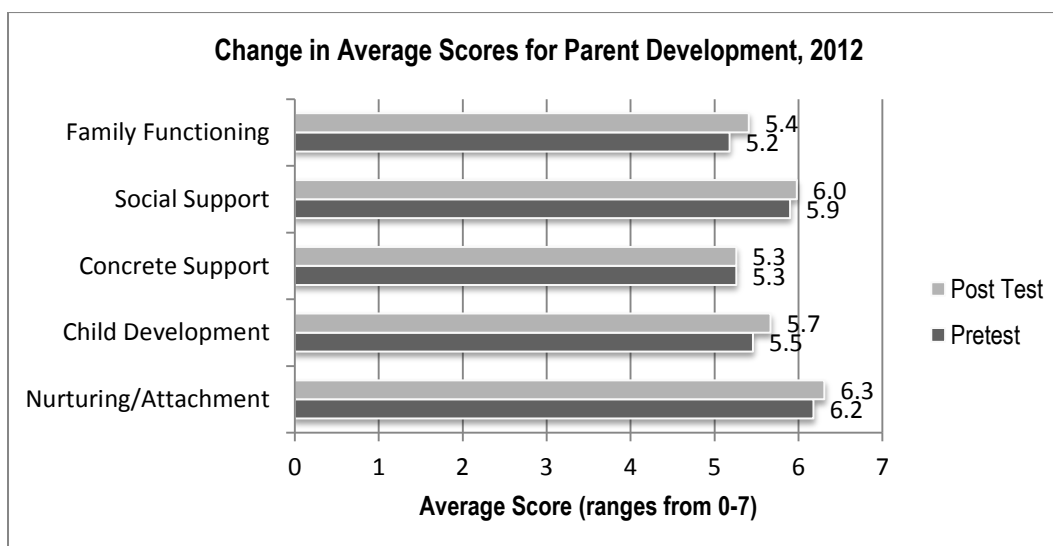
County	Funds Awarded	Families Served	Parents Served	Children Served	In-Home Sessions	Group Sessions	Volunteers	Volunteer Hours
Cedar-Group	\$4,825	5	5	10	0	4	11	53
Cedar-In Home	\$6,560	24	38	51	247	0	0	0
Cherokee, Ida	\$6,478	118	180	82	0	44	0	0
Chickasaw	\$7,380	68	80	152	458	12	8	86
Clarke, Decatur, Ringgold, Wayne	\$53,005	85	104	179	122	119	44	498
Clayton	\$2,850	19	21	39	0	18	22	245
Clinton	\$11,070	47	51	48	735	0	0	0
Dallas	\$34,900	139	160	197	56	70	11	109
Davis	\$3,584	11	12	12	0	45	12	144
Delaware	\$24,529	23	38	33	502	0	32	172
Des Moines	\$12,604	41	63	78	0	211	82	1,384
Dubuque	\$13,284	23	32	43	261	0	0	0
Emmet	\$6,993	179	229	558	0	15	59	208
Fayette	\$13,120	30	43	40	221	15	7	143
Floyd, Mitchell	\$24,600	137	186	288	994	17	37	605
Fremont, Page	\$2,668	139	186	292	0	24	8	130
Grundy	\$2,985	35	36	44	0	23	11	60
Hamilton, Wright	\$16,327	189	258	414	15	34	89	275
Henry	\$9,984	42	50	57	0	69	1	3
Jackson	\$11,070	40	50	43	631	0	0	0
Jefferson, Wapello	\$9,354	124	171	129	0	360	24	326
Johnson-UAY	\$8,511	32	32	28	0	90	10	164
Johnson-Nest	\$9,446	31	32	26	0	29	27	37
Johnson	\$5,978	16	58	63	0	28	5	68
Jones	\$7,380	32	54	45	433	0	4	8
Lee	\$15,236	63	84	91	0	72	62	504
Linn	\$5,330	80	80	95	0	64	0	0
Louisa	\$18,692	66	85	110	0	54	16	234
Lucas	\$12,860	71	79	160	0	55	15	117
Marion	\$6,433	25	30	46	0	23	0	0
Marshall	\$15,580	40	75	107	404	0	56	170
Mills	\$16,400	26	36	39	116	15	0	0
Mitchell, Winnebago	\$14,760	18	21	30	0	32	8	8
Muscatine	\$24,454	136	147	128	0	118	2	472
O'Brien, Osceola	\$1,476	19	24	29	0	21	183	1,733
Polk	\$15,521	135	142	344	0	99	35	135
Pottawattamie	\$7,490	40	45	87	0	34	6	63
Sac	\$6,669	18	32	20	111	0	0	0
Van Buren	\$27,542	142	168	216	556	32	52	52
Warren	\$9,840	29	44	20	0	43	91	291
Washington	\$10,277	30	34	34	116	0	0	0
Webster	\$11,210	16	32	105	0	15	1	57
Woodbury	\$29,520	120	169	140	123	138	17	120
Total	\$714,834	3,604	4,621	6,170	7,828	2,677	1,196	10,117



There were 1,732 surveys submitted by the programs listed in the tables above, 315 of which were able to be matched for analysis of change in protective factors from enrollment to follow up. Based on those matched surveys, participants in the PD programs showed the greatest positive change in the areas of Child Development (61% had higher scores at follow up) and Family Functioning (57% had higher scores at follow up). The lowest positive change was noticed in Concrete Support, with 41 percent indicating they improved in this domain, 32 percent noting they decreased, and 27 percent saying they experienced no change in Concrete Support.

The average scores for PD participants are reflected in Figure 5; increases are observed in almost every domain, with the exception of Concrete Support, which stayed the same. These scores were very similar to the statewide averages discussed in chapter one.

Figure 5. Average Protective Factors Scores for Parent Development and Education



CHAPTER FIVE OUTREACH AND FOLLOW UP SERVICES

Outreach and Follow up programs are largely community-based and typically part of a continuum of services and can be similar in design and intent to parent development programs. They are most effective when part of a network of providers or agencies. Families who access outreach services may need support or assistance with basic needs, health services, family issues or crisis intervention, and information about social service programs (to name a few). Many times outreach services are delivered through home visitation and may be offered universally or by targeting specific populations. Gomby cautions in her comprehensive review of home visiting (2005), that “simply targeting services to the neediest or highest risk families (e.g., teens, women with low coping skills) is not sufficient. Program services and curricula must also help the families they serve change the underlying risk factors.” Home visiting is widely recognized as a model designed to promote the protective factors of the family system while preventing child abuse and neglect. The federal Health Resources and Services Administration (HRSA) has identified seven evidence-based models that have been found to meet criteria of effectiveness. In Iowa, the models currently used that meet these criteria are: Parents as Teachers (PAT) and Healthy Families America (HFA), though other outreach services are in place as well.

Table 6 presents service data for the local councils who received ICAPP funding for 12 Outreach and Follow up Services in fiscal year 2012 (July 1, 2011 to June 30, 2012). A total of 572 parents with 695 children received instruction. Programs provided parenting instruction in 2,723 in-home and 434 group sessions. More than 100 volunteers dedicated 585 hours of service to the programs.

Table 6. Outreach and Follow up Services, Fiscal Year 2012

<i>County</i>	<i>Funds Awarded</i>	<i>Families Served</i>	<i>Parents Served</i>	<i>Children Served</i>	<i>In-Home Sessions</i>	<i>Group Sessions</i>	<i>Volunteers</i>	<i>Volunteer Hours</i>
Cedar	\$8,564	13	18	25	27	2	35	149
Clay	\$4,931	11	18	18	155	0	3	26
Crawford	\$15,176	17	30	38	244	0	0	0
Dickinson	\$4,383	25	42	42	205	0	3	25
Emmet	\$4,875	27	39	45	382	0	3	27
Kossuth	\$4,383	19	27	36	275	0	3	25
Mills*	\$14,760	71	103	75	171	20	23	135
Monroe	\$19,680	34	53	49	551	0	0	0
Palo Alto	\$4,383	19	28	41	265	0	3	27
Sac	\$7,380	7	7	10	70	0	0	0
Union	\$10,776	12	16	12	147	0	36	171
Woodbury	\$13,120	133	191	304	231	412	0	0
Total	\$112,413	388	572	695	2,723	434	109	585

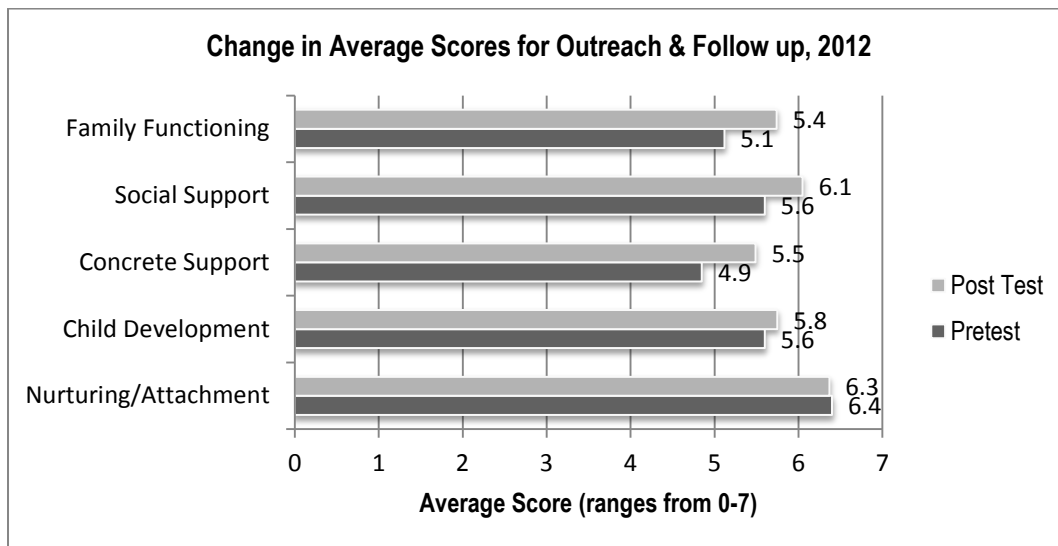
*May data; June data not received.

There were 140 surveys submitted by the Outreach and Follow up programs listed in the table above, 95 of which were able to be matched for analysis of change in protective factors from pretest to post test. The respondents in Outreach and Follow up programs scored lower than statewide averages in Family Functioning (47% positive) and Social Support (37% positive). These survey respondents scored higher than statewide averages in three domains: Child Development (67% positive), Nurturing and Attachment (60% positive), and Concrete Support (42% positive).



In Figure 6 it is easy to see there is improvement in average scores for Outreach and Follow up participants in four out of five domains, though the area that stays about the same (nurturing/attachment) has a very high initial score, which leaves little room for increase.

Figure 6. Average Protective Factors Scores for Outreach and Follow up Services



CHAPTER SIX SEXUAL ABUSE PREVENTION

Given the secrecy surrounding sexual abuse, prevention experts thought the best way to reduce the risk was to educate children. As a result, teaching children to protect themselves remains a core component of prevention programs today. Using this approach, sexual abuse prevention (SAP) programs attempt to reach children to stop abuse before it occurs, with programming most often occurring in a preschool/school setting.

Research on sexual abuse prevention indicates the following components are critical for effective programs:

- Teaching children a wide variety of concepts including: defining sexual abuse, identifying potential perpetrators, including abuse by relatives, family friends and others known to the family, and describing the range of sexually-abusive behaviors;
- Assuring children that abuse is never the child's fault;
- Developing self-protection skills such as - assertiveness, communication, problem-solving, saying no, and telling an adult - that will protect children in a variety of situations;
- Customizing presentations to match children's age, developmental, educational, cultural and cognitive level;
- Using behavioral skills training format: instruction, modeling, rehearsal and feedback;
- Providing multiple sessions a year for several years to reinforce knowledge and skill building; and
- Educating and involving teachers, school personnel and parents when developing, implementing and evaluating programs.

The majority of ICAPP-funded SAP programs address children from preschool through the sixth grade. Some counties purchase specific sexual abuse prevention curricula, while others design or modify instruction. A few counties offer programming designed specifically for children with special needs, given the greater risk of victimization these children face. A few specific curricula used by ICAPP programs include: *Ready, Set, Know* (an Iowa State University Extension self-protection program for children pre-school through third grade); and *Care for Kids* (a comprehensive program that provides early educators, parents and other professionals with information, materials and resources to communicate positive messages about healthy sexuality to young children).

In addition to educating children, prevention programs are now focusing on the need to teach adults how to keep children safe from abuse. ICAPP-funded programs teach adults by including sexual abuse prevention information in home visiting programs, group-based parent education programs, and public awareness activities. The curriculum most often used is *Nurturing Healthy Sexual Development*, which teaches participants the scope of sexual abuse, to better understand the sexual development of children, how to respond to children's sexual behaviors and questions, and to understand the connection between healthy sexuality and child sexual abuse prevention.

ICAPP funds are supporting 44 SAP projects, with several councils providing services in multiple counties. The following tables present the data for fiscal year 2012 (July 1, 2011 through June 30, 2012). Table 7 (next page) shows information for child-focused services. A total of 2,809 adults and 42,344 children received information about sexual abuse prevention through 3,697 children's presentations.

Table 8 (page 22) shows the information for services directed towards adults. Almost 5,000 adults received instruction about sexual abuse prevention through 274 adult education sessions and 191 public awareness presentations. Providing these services required the help of 470 volunteers contributing 2,294 volunteer hours (not in a table).



Table 7. Sexual Abuse Prevention Services for Children, Fiscal Year 2012

<i>County</i>	<i>Funds Awarded</i>	<i>Number of Sessions</i>	<i>Children Attending</i>	<i>Adults Attending</i>
Allamakee, Howard, Winneshiek	\$8,073	54	174	0
Audubon, Carroll, Greene, Guthrie	\$7,380	44	197	0
Benton	\$6,560	12	29	5
Black Hawk	\$17,299	290	6,148	665
Boone	\$7,347	35	374	29
Bremer	\$12,320	104	2,059	119
Buena Vista, Cherokee, Ida, Plymouth	\$16,426	36	659	41
Butler	\$3,280	30	505	38
Cerro Gordo, Hancock, Mitchell, Winnebago, Worth	\$14,498	58	1,308	88
Chickasaw	\$6,757	42	539	27
Clarke, Decatur, Ringgold, Wayne	\$37,104	103	1,919	144
Clay*	\$2,870	64	1,326	121
Clayton	\$9,603	200	1,377	118
Clinton	\$9,113	32	649	53
Dallas	\$7,872	283	1,430	0
Dickinson*	\$3,112	27	686	53
Dubuque	\$5,166	1	10	6
Fayette	\$4,018	35	317	59
Floyd	\$2,870	16	888	37
Grundy -Save	\$4,264	21	500	53
Grundy -TCOYB	\$3,731	44	960	61
Hardin, Marshall, Tama	\$35,414	828	4,431	268
Iowa	\$5,740	12	34	3
Jackson	\$9,113	17	437	63
Jasper	\$1,722	76	1,659	105
Jones	\$6,560	24	57	5
Lee	\$4,228	18	37	5
Linn	\$7,216	24	76	14
Lucas*	\$5,769	13	216	22
Mahaska, Marion	\$10,998	185	3,530	171
Mills	\$10,963	83	930	59
Montgomery-Empower	\$12,664	30	2,210	2
Montgomery-Ready Set Know	\$2,476	36	344	18
Muscatine	\$5,619	4	15	24
Pottawattamie	\$14,350	234	4,876	250
Sac	\$2,454	42	825	83
Scott	\$11,437	380	400	0
Warren	\$3,344	160	213	0
Total	\$339,728	3,697	42,344	2,809

*May data; June data not received



Table 8. Sexual Abuse Prevention Services for Adults, Fiscal Year 2012

<i>County</i>	<i>Funds Awarded</i>	<i>Adult Education</i>		<i>Public Awareness</i>	
		<i>Number of Sessions</i>	<i>Adults Attending</i>	<i>Number of Presentations</i>	<i>Adults Attending</i>
Allamakee, Howard, Winneshiek	\$8,073	3	42	0	0
Audubon, Carroll, Greene, Guthrie	\$7,380	2	29	9	106
Benton	\$6,560	1	6	0	0
Black Hawk	\$17,299	17	155	28	563
Boone	\$7,347	11	72	19	48
Bremer	\$12,320	7	10	0	0
Buena Vista, Cherokee, Ida, Plymouth	\$16,426	2	16	0	0
Cerro Gordo, Hancock, Mitchell, Winnebago, Worth	\$14,498	4	21	0	0
Clayton	\$9,603	14	49	12	379
Clinton	\$9,113	2	31	9	63
Dallas	\$7,872	40	724	38	858
Dubuque	\$5,166	17	58	0	0
Fayette	\$4,018	2	11	2	45
Fremont, Page	\$339	5	16	0	0
Grundy-TCOYB	\$3,731	1	9	0	0
Hardin, Marshall, Tama	\$35,414	15	79	3	29
Iowa	\$5,740	1	5	0	0
Jackson	\$9,113	5	286	6	30
Jasper	\$1,722	12	23	2	28
Jones	\$6,560	2	10	1	8
Linn	\$7,216	4	12	4	46
Lucas*	\$5,769	13	216	22	5
Mahaska, Marion	\$10,998	3	20	0	0
Mills	\$10,963	34	15	0	0
Montgomery-Empower	\$12,664	0	0	33	190
Muscatine	\$5,619	8	17	1	11
Polk	\$2,394	7	154	0	0
Scott	\$11,437	23	193	1	10
Warren	\$3,344	11	110	0	0
Woodbury	\$2,952	8	62	1	88
Total	\$261,648	274	2,451	191	2,507

*May data; June data not received

ICAPP projects asked adults attending child-focused instruction to evaluate the instruction they observed. Questions asked if:

- The information matched the students' developmental level;
- The program used behavioral skills training and a variety of presentation methods;
- The instruction adequately covered information about sexual abuse;
- The students seemed to understand the concepts taught;
- The students had the time to practice the skills taught.



PCA Iowa received 870 surveys concerning child-focused SAP instruction. The next two tables summarize participant responses to these questions.

Table 9 (below) summarizes responses regarding aspects of the instruction offered. The first question asked if the program was appropriately designed to match the students' developmental levels. A total of 632 respondents (75%) said they *strongly agreed*, and 203 (24%) *agreed*. Five respondents (0.5%) *disagreed* and two *strongly disagreed* (0.2 percent). The second question asked if the program used behavioral skills training. A total of 579 respondents (74%) said they *strongly agreed*, while 202 (26%) *agreed*. Five respondents (0.5%) *disagreed*, and two (0.2%) *strongly disagreed*. A third question asked if the program used a variety of presentation methods. This question received more negative responses. A total of 513 respondents (61%) said they *strongly agreed*, and 287 (34%) *agreed*. Thirty-four respondents (4%) *disagreed* and one *strongly disagreed* (0.1%).

Table 9. Instructional Level, Skill Development, and Presentation Methods

County	Program matched developmental level				Program used behavioral skills training				Used variety of presentation methods			
	SA	A	D	SD	SA	A	D	SD	SA	A	D	SD
Allamakee, Howard, Winneshiek	5	4	0	0	6	3	0	0	3	6	0	0
Audubon, Carroll, Greene, Guthrie	46	16	0	0	49	16	0	0	34	27	1	0
Benton	2	5	0	0	2	5	0	0	2	5	0	0
Black Hawk	130	32	1	0	103	32	1	0	118	45	1	0
Cerro Gordo, Hancock, Mitchell, Winnebago, Worth	22	25	1	0	15	25	1	0	17	24	7	0
Clinton	16	21	2	1	11	21	2	1	13	19	7	0
Floyd	36	23	0	0	28	23	0	0	34	22	3	0
Grundy	21	2	0	0	19	2	0	0	19	4	0	0
Jackson	4	8	0	0	4	8	0	0	6	6	0	0
Jasper	51	10	0	0	49	10	0	0	38	22	1	0
Linn	4	4	0	0	6	4	0	0	3	5	0	0
Mahaska, Marion	110	26	0	1	101	26	0	1	65	60	6	0
Muscatine	0	1	1	0	0	1	1	0	0	0	1	1
Pottawattamie	183	16	0	0	185	16	0	0	161	38	0	0
Scott	2	10	0	0	1	10	0	0	0	4	7	0
Total	632	203	5	2	579	202	5	2	513	287	34	1

SA= Strongly agree; A = Agree; D= Disagree; SD = Strongly disagree

Table 10 (next page) summarizes responses from adults regarding student understanding and skill development. One question asked if the program adequately covered useful and understandable information about sexual abuse. A total of 598 respondents (71%) said they *strongly agreed*, while 233 (28%) *agreed*. Eight respondents (1%) *disagreed*, and two (0.2%) *strongly disagreed*. A second question asked if students seemed to understand the concepts taught. A total of 515 respondents (62%) said they *strongly agreed*, while 307 (37%) *agreed*. Thirteen respondents (2%) *disagreed* and one *strongly disagreed* (0.2%). A third question asked if respondents thought the students had the opportunity to practice what they were taught. A total of 492 respondents (60%) said they *strongly agreed*, while 283 (34%) *agreed*. Forty-five respondents (6%) *disagreed*, and four (0.5%) *strongly disagreed*.



Table 10. Adequacy of Information, Student Understanding, and Opportunity to Practice

County	Sexual abuse information adequately covered				Students seemed to understand the concepts taught				Students had the opportunity to practice			
	SA	A	D	SD	SA	A	D	SD	SA	A	D	SD
Allamakee, Howard, Winneshiek	7	2	0	0	6	3	0	0	6	3	0	0
Audubon, Carroll, Greene, Guthrie	39	23	0	0	44	17	1	0	41	19	1	0
Benton	4	3	0	0	3	4	0	0	3	4	0	0
Black Hawk	121	42	0	0	98	62	3	0	80	71	5	0
Cerro Gordo, Hancock, Mitchell, Winnebago, Worth	22	22	4	0	20	24	4	0	6	26	13	1
Clinton	15	22	1	1	14	22	3	1	9	16	11	2
Floyd	37	21	1	0	27	29	1	0	19	32	5	0
Grundy	20	3	0	0	16	7	0	0	15	6	1	0
Jackson	4	8	0	0	3	9	0	0	2	10	0	0
Jasper	46	15	0	0	40	21	0	0	30	29	2	0
Linn	3	5	0	0	2	6	0	0	2	4	2	0
Mahaska, Marion	102	33	1	1	85	49	0	1	98	32	4	1
Muscatine	1	1	0	0	0	2	0	0	0	2	0	0
Pottawattamie	176	23	0	0	156	42	0	0	180	19	0	0
Scott	1	10	1	0	1	10	1	0	1	10	1	0
Total	598	233	8	2	515	307	13	2	492	283	45	4

SA= Strongly agree; A = Agree; D= Disagree; SD = Strongly disagree

ICAPP projects also asked those attending adult-focused child sexual abuse prevention instruction to state whether the instruction improved their abilities in several areas. The next series of tables summarize the participant responses to questions about whether instruction improved their abilities to:

- Identify appropriate or inappropriate sexual behaviors;
- Understand grooming behaviors of potential perpetrators;
- Talk to their child(ren) about sexual abuse;
- Protect their child(ren) from sexual abuse;
- Get help for a child if sexual abuse is suspected.

Table 11 (next page) summarizes whether participants agreed that the training improved their abilities to identify appropriate or inappropriate sexual behaviors of children and the behavior of potential perpetrators. Participants responded similarly to both questions, with almost all saying they *strongly agreed* or *agreed* that the training improved their abilities to identify appropriate or inappropriate sexual behaviors of children. No more than five respondents to either question stated they *disagreed* or *strongly disagreed*. Table 11 also summarizes answers as to whether participants thought the instruction improved their understanding of the grooming behaviors of potential perpetrators. A total of 166 respondents (41%) *strongly agreed* and 215 (54%) *agreed* with the question, while 16 respondents (4%) marked that they *disagreed* and four (1%) noted they *strongly disagreed*.



Table 11. Improvement in Ability to Identify Behaviors

County	Identify appropriate sexual behaviors				Identify inappropriate sexual behaviors				Understand grooming behaviors of potential perpetrators			
	SA	A	D	SD	SA	A	D	SD	SA	A	D	SD
Allamakee, Howard, Winneshiek	20	11	0	0	22	9	0	0	19	12	0	0
Audubon, Carroll, Greene, Guthrie	4	14	0	0	5	13	0	0	4	14	0	0
Benton	5	1	0	0	5	1	0	0	5	1	0	0
Black Hawk	51	60	2	0	55	57	1	0	40	67	5	0
Boone	11	24	0	1	11	24	0	1	12	15	5	4
Cerro Gordo, Hancock, Mitchell, Winnebago, Worth	8	4	0	0	8	4	0	0	7	4	0	0
Fayette	5	2	0	0	4	3	0	0	2	5	0	0
Fremont, Page	8	6	0	0	8	6	0	0	5	9	0	0
Hardin, Marshall, Tama	51	27	0	0	54	24	0	0	31	46	1	0
Iowa	2	2	0	0	2	2	0	0	1	3	0	0
Jasper	6	1	0	0	5	2	0	0	1	6	0	0
Jones	2	3	2	0	1	5	1	0	1	2	4	0
Linn	4	4	0	0	4	4	0	0	3	5	0	0
Lucas	3	2	0	0	3	2	0	0	3	2	0	0
Mahaska, Marion	10	7	0	0	10	7	0	0	9	8	0	0
Muscatine	20	11	0	0	18	12	1	0	20	10	1	0
Polk	7	2	0	0	6	3	0	0	3	6	0	0
Total	217	181	4	1	221	178	3	1	166	215	16	4

SA= Strongly agree; A = Agree; D= Disagree; SD = Strongly disagree

Table 12 (next page) summarizes the responses as to whether participants agreed that the training improved their abilities to talk to their child about sexual abuse, protect a child from sexual abuse, or get help if she or he suspects a child has been sexually abused. A total of 263 (65%) of respondents *strongly agreed* that the training improved their ability to talk to a child about sexual abuse, and 138 (32%) *agreed*. Only one respondent *disagreed*. Two-thirds of respondents (68%) *strongly agreed* that the training improved their abilities both to protect children from sexual abuse and to get help for a child suspected of being sexually abused. Only five respondents *disagreed* or *strongly disagreed* to either question.



Table 12. Improvement in Ability of Adult Participant to Talk About and Protect Children from Sexual Abuse

County	Talk to child about sexual abuse				Protect children from sexual abuse				Get help for a child suspected of being sexually abused			
	SA	A	D	SD	SA	A	D	SD	SA	A	D	SD
Allamakee, Howard, Winneshiek	19	11	1	0	24	6	1	0	22	9	0	0
Audubon, Carroll, Greene, Guthrie	5	13	0	0	8	10	0	0	5	13	0	0
Benton	5	1	0	0	5	1	0	0	5	1	0	0
Black Hawk	100	14	0	0	90	26	0	0	55	57	1	0
Boone	17	19	0	0	14	21	0	0	11	24	0	1
Cerro Gordo, Hancock, Mitchell, Winnebago, Worth	9	3	0	0	8	4	0	0	8	4	0	0
Fayette	5	2	0	0	6	1	0	0	4	3	0	0
Fremont, Page	9	5	0	0	9	5	0	0	8	6	0	0
Hardin, Marshall, Tama	38	39	0	0	53	25	0	0	54	24	0	0
Iowa	3	1	0	0	2	2	0	0	2	2	0	0
Jasper	4	3	0	0	6	1	0	0	5	2	0	0
Jones	4	3	0	0	3	4	0	0	1	5	1	0
Linn	4	4	0	0	5	3	0	0	4	4	0	0
Lucas	4	1	0	0	4	1	0	0	3	2	0	0
Mahaska, Marion	8	9	0	0	8	9	0	0	10	7	0	0
Muscatine	23	7	0	0	23	7	0	0	18	12	1	0
Polk	6	3	0	0	5	4	0	0	6	3	0	0
Total	263	138	1	0	273	130	1	0	221	178	3	1

SA= Strongly agree; A = Agree; D= Disagree; SD = Strongly disagree



CHAPTER SEVEN COMMUNITY DEVELOPMENT EFFORTS

Community Development (CD) grants assist councils in generating awareness and action toward child abuse prevention goals in their communities. Grants can be used for council development, community needs assessments, program development, public awareness, community mobilization, collaboration, or network building. These grants made up a small percentage of the overall amount of ICAPP money awarded in FY 2012.

Four councils received CD grants in FY 2012. A brief description of their activities is as follows:

Boone County – Implementation of a Shared Leadership in Action approach, whereby community trainings build competencies among parents and community members to better support individuals and families in need.

The program worked on engaging Parent Partners and other parent leaders, starting with seven presentations to 54 community members and ten parents in the first quarter of the year. The program worked with the Parent Partner Steering Committee, giving eight more community presentations in the second and third quarters. The project included assisting the council in putting together its annual “Charity Auction,” which is supported by 34 community entities. In the last quarter, activities included presentations to Rotary Club and Boone City Council members.

Cerro Gordo, Hancock, Mitchell, Winnebago, and Worth Counties – This multi-county project sought to hold meetings in each county to raise awareness of the council’s child abuse prevention efforts and how community members can get involved.

In the first quarter, the council worked on recruiting new members, developing a list of community organizations, and developing, printing, and editing a council brochure to give out at community awareness events and presentations. The council drafted an updated brochure and worked on building a partnership with the United Way, which also sought the council’s input on its health committee. A new child abuse prevention committee has also been established. The project completed brochures as a tool for community events, which included presentations at church events. The United Way helped to expand membership and contacts.

Montgomery County – Implementation of monthly *Circles 4 Support* meetings, using the *Beyond Welfare* model, where families and community members come together to share a meal with the goal of connecting individuals to others in their community that can offer support.

In the first quarter, council meetings focused on introducing the *Circles 4 Support* program in the community, including identifying training opportunities and potential facilitators. The council also sought to develop a half-day workshop on poverty, possibly including a poverty simulation. The *Circles 4 Support* efforts continued in the second quarter, which included a commitment from a local church to add the *Circles* group to their existing Soup Kitchen. The *Circles 4 Support* officially began meeting in January, with 22 participants. The council continued to hold support groups and promote them to invite new members. In the fourth quarter, the council met monthly with eight to ten community stakeholders to develop a work plan for its *Circles* project.

Polk County – The *HOPE! Drama Troupe* is a group of high school students that help raise awareness of child abuse in the community by providing presentations to school-age students and others in the Des Moines area.

After identifying its participants, the drama troupe held its annual retreat to learn about child abuse and risk behaviors. Consisting of 27 students and two facilitators, the troupe met weekly in the first quarter to write and



rehearse its 2011-2012 script. In the second quarter, the troupe made three middle and high school presentations, using the 30-minute vignette presentation about child abuse it developed. In the third quarter, the troupe continued to meet to work on their vignettes and present about child abuse to local groups. They reached over 300 middle school students and 100 adults at the Drug Endangered Children (DEC) conference.

In the last quarter, the project held auditions for next school year's drama troupe. Twenty-eight students learned that they would be participating in the troupe. The troupe also selected a new director for 2012-13, who teaches theatre arts and serves as Director of Theatre at a large metro high school.



REFERENCES

- Barth, R. P. (2009). Preventing Child Abuse and Neglect with Parent Training: Evidence and Opportunities. *Future of Children*, 19(2), p.95-118. Retrieved from EBSCOhost, July 2011.
- FRIENDS National Resource Center for Community- Based Child Abuse Prevention and the University of Kansas Institute for Educational Research and Public Service. (2012). *The Protective Factors Survey*. Available from <http://friendsnrc.org/protective-factors-survey>
- Gomby, D.S. (2005). *Home Visitation in 2005: Outcomes for Children and Parents*. Committee for Economic Development, Invest in Kids Working Group. Invest in Kids Working Paper No. 7. Retrieved July, 2011 from www.ced.org/projects/kids.shtml
- Gonzalez, A. and MacMillan, H. L., (2008). Preventing Child Maltreatment: An Evidence-Based Update. *Journal of Postgraduate Medicine*. 54(4). p.280- 286.
- Huebner, C.E. (2002). Evaluation of a Clinic-Based Parent Education Program to Reduce the Risk of Infant and Toddler Maltreatment. *Public Health Nursing*. Vol. 19 No. 5. p.377-389.
- Karoly, L.A., Kilburn, R.M., Cannon, J.S. (2005). *Early Childhood Interventions: Proven Results, Future Promise*. RAND Labor and Populations. Available at www.rand.org/publications/MG/MG341

