Office of Child Abuse Prevention Strategic Plan

2015 - 2020

Children and Family Services Division California Department of Social Services <u>www.childsworld.gov</u>



Table of Contents

THE OCAP STATEMENT OF STRATEGIC PLAN	4
Statement of the Problem	4
Adverse Childhood Experiences and Risk Factors	5
Economic Costs of Child Maltreatment	7
Prevention of Child Abuse and Neglect	7
Fostering Resilient Families	8
THE OFFICE OF CHILD ABUSE PREVENTION	9
The OCAP Fiscal Oversight Role	9
STRATEGIC PLAN PURPOSE AND PROCESS	10
Strategic Planning Process	10
Data Analysis Process	12
OCAP CORE VALUES	13
California Department of Social Service Child Welfare Initiatives	13
STRATEGIC PLAN	14
IMPACT AREAS AND GOALS	16
Impact Area 1:	16
Impact Area 2:	16
Impact Area 3:	16
IMPLEMENTATION PLAN PROCESS	17
Implementation Plan with Funding Detail - Year One (2015-16)	18
OCAP SPENDING PLAN	24
Summary - OCAP Expenditure Plan SFY 2015-16	24
REFERENCES	



Vision

No child suffers from abuse or neglect.

Mission

Impact Areas

To shape policy, build communities and empower families so that child abuse and neglect are prevented.

<u>Lift</u> the capacity of parents and prevention partners to protect children from abuse and neglect.

Link and unite prevention partners around a shared prevention agenda.

Leverage

partnerships across systems to promote and integrate statewide and local prevention agendas.

Quality: We support culturally responsive gold standard prevention services. Strengthen families: We respect and strengthen families through parent engagement in planning and problem solving. Research driven: We promote rigorous, evidence-based practice and policy development. We partner with stakeholders to guide Engage stakeholders: OCAP prevention. Core Engage experts: We engage experts to provide the expertise Values needed for quality prevention design and outcomes. Accountable: We model accountability, transparency and stewardship. Outcomes focused: We use data and a focus on outcomes as guide to all of our work. Innovative: We embrace technology and innovation.

THE OCAP STATEMENT OF STRATEGIC PLAN

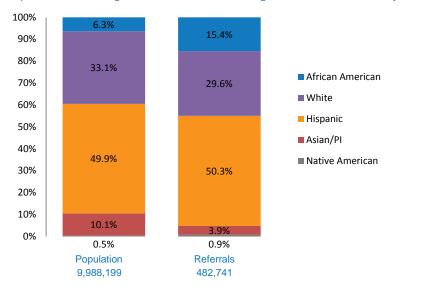
Statement of the Problem

In 2013, in California, 130 children died as the result of abuse and/or neglect.¹ An additional 482.229 children were referred to child welfare services as alleged victims of abuse and/or neglect. Of those found to be substantiated, almost three quarters were the result of neglect, 8.6 percent were physically abused and 4.7 percent were sexually abused. Furthermore, the federally funded Fourth National Incidence Study of Child Abuse and Neglect (2010) found that for the last two decades, three times as many children are maltreated each year as are actually reported to Child Protective Service (CPS) agencies.

Our youngest children are most vulnerable. Of all children who were found to be abused or neglected, almost half were five years of age or younger; of those almost a third were two years of age or younger. Additionally, between 70-80 percent of child fatalities in California occur before a child reaches five years of age.² The number of referrals and entries into child welfare for minority children are disproportionately large in comparison to their presence in the overall population (see Figure 1).³

Hispanic children represent 50 percent of the total child population in California. African American children represent six percent and Native American children represent four percent of the child population within the state. Yet, of referrals made to Child Welfare, African American children encompass 15 percent, and Native Americans represent one percent of the referrals. The number of referrals made to child welfare for minority children is disproportionately large in comparison to the overall population, and these populations over-represented are in California's child welfare system. Minority children are uniquely vulnerable to abuse and neglect which agrees with the Adverse Childhood Experiences (ACEs) findings, imperative making it to improve opportunities for minority children and families to access services to help them overcome challenges.

Figure 1:



Ethnic Population Percentages versus Ethnic Percentage in the Child Welfare System 2006

And while Hispanics comprise the largest share of both proportional presence in the general population and child welfare presence, questions arise as to whether the approaches we use to prevent and/or intervene in cases of abuse or neglect are sufficiently informed from a cultural perspective.

Children who suffer maltreatment have documented challenges as they enter adulthood. They have higher rates of physical, psychological and behavioral issues than those who do not suffer abuse.⁴ Children who have been abused and/or neglected are at increased risk for smoking, alcoholism, drug abuse and high-risk sexual behaviors. In addition, these children are 25 percent more likely to experience problems such as delinguency, teen pregnancy, low academic achievement, are less likely to have graduated from high school and 59 percent more likely to be arrested as a juvenile.⁵ As adults, children with a history of maltreatment are 28 percent more likely to engage in criminal behavior and 30 percent more likely to commit violent crimes than those who have experienced maltreatment not during childhood.6

Adverse Childhood Experiences and Risk Factors

Even when challenging circumstances do not lead to entry into the child welfare system, research confirms that children who face adverse experiences can suffer significant long-term challenges. The Adverse Childhood Experiences (ACE) Study, a collaborative effort between the U.S. Centers for Disease Control and Prevention (CDC) and Kaiser Permanente's Health Appraisal Clinic in San Diego, conducted assessments of the associations between childhood maltreatment and laterlife health and well-being. Also led by the CDC, the California Department of Public Health surveyed California residents (2009, 2011 and 2013) using the Behavioral Risk Factor Surveillance System (BRFSS). The BRFSS tool gathered comprehensive information on the health and health-related behaviors of California adults ages 18 and over.

The ACEs-related research indicates that a low-level of childhood adversity is common as 61.7 percent of Californians report at least one ACE. Only 16.7 percent of the California population report experiencing four or more ACEs. As the number of ACEs increase, individual income and education levels decrease. A child with four or more ACEs is 12.96 times as likely to be removed from their home and placed in foster care. Adults with four or more ACEs are more likely to report poor physical health and/or one or more poor days of mental health in the last 30 days, preventing participation in usual activities. They are more likely to be a smoker, engage in binge drinking and/or substance abuse and engage in risky sexual behavior.

Figure 2: Adverse Childhood Experiences and Risk Factors



A high number of ACEs is correlated with the increased likelihood that a person will be the victim of intimate partner violence or sexual violence in adulthood. Findings from multiple studies using the ACEs metric reinforce the notion that adverse childhood experiences are risk factors with potential to negatively impact the wellbeing of both children and parents.

The three types of adverse childhood experiences studied were Abuse (physical, emotional. sexual), Neglect (physical, emotional and Household Dysfunction (mental illness. incarcerated relative, domestic violence. substance abuse. divorce). In some cases, such as the ACEs Abuse and Neglect categories, adverse childhood experiences describe the direct activity that can bring children into child welfare systems. In other cases. particularly in the Household Dysfunction ACEs category, the adverse experiences can be considered risk factors or 'drivers' associated with family dysfunction that can contribute to potential child abuse and/or For example, the Household neglect. Dysfunction categories of mental illness and

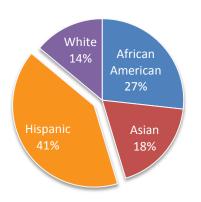
substance abuse are often cited as 'drivers' associated with a child's entry into child welfare system.⁷

Poverty is another major contributor or 'driver' into the child welfare system, particularly for child neglect which makes up 72 percent of substantiations in California.⁸

Addressing poverty as a major risk factor of child neglect is a promising practice and policy.⁹ The need to address poverty as a prevention strategy is particularly relevant for California. Approximately half (49.9%) of California's children live in or near poverty. In 2013, children under 5 years of age had higher poverty rates than older children (27.2% vs. 24.1%). The poverty rates are disproportionate for minority children (see Figure 3). The poverty rate for Hispanic children (34.6%) was more than double that of Asian (15.6%) and white (12.2%) children in California. The poverty rate among African American children was also high Poverty is present even with (23.3%). working family members. In California, 80.7 percent of poor children live in families with at least one adult working.

Figure 3:





Economic Costs of Child Maltreatment

In addition to the profound and tragic consequences for child, family and community, child maltreatment has serious economic costs to society. Impacts include health care costs, productivity losses, child welfare, criminal justice and special education costs.¹⁰ Child maltreatment has an estimated lifetime cost per child of \$210,000¹¹, and if the child dies, it is an economic cost of over \$1.2 million in medical costs and lost productivity¹². This means, using 2013 statistics for California, there is a total cost of over \$17.7 billion for a single year, just taking into account substantiated child maltreatment cases and child fatalities. If we consider that estimated child maltreatment numbers are three times higher, this would bring the cost up to \$52.8 billion.

There is interest in the financial impact of prevention although there is not a sufficient methodology to measure "that which has not yet happened." Studies conducted by the Michigan Children's Trust Fund (1992) estimated that the cost of responding to child maltreatment in Michigan was \$823 million annually, given the wide array of child welfare, health and justice system costs*. In contrast, the cost of providing prevention services to all first-time parents in Michigan was estimated at \$43 million annually. The study authors note that investments in prevention will not eliminate all child abuse but can be cost-effective even if prevention interventions achieve even modest reductions in abuse events.¹³ A similar study commissioned by the Colorado Children's Trust Fund estimated that responding to child maltreatment in Colorado costs approximately \$402 million In contrast, the prevention annually. strategy of home visitation for high-risk

Colorado families would cost less than six percent of that amount, just \$24 million annually.¹⁴

*Note: The above content was taken from Emerging Practices in the Prevention of Child Abuse and Neglect (2003), U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau, Office on Child Abuse and Neglect.

Prevention of Child Abuse and Neglect

The field of public health has had the greatest impact on the organization of a prevention framework using a pyramid model. This model is one of the most widely applied frameworks to describe prevention efforts. In this model, Primary efforts target the Prevention entire population through education and supports before problems arise. Primary prevention activities can such include strategies such as media and education campaigns and positive parenting and youth programs. The Secondary Prevention level targets families in need to alleviate identified problems and prevention escalation.

Secondary prevention interventions may also intervene in areas of risk factors associated with child neglect or abuse. Tertiary Prevention targets children experiencing maltreatment and their families. Though children who have experienced substantiated abuse or neglect are often removed from their biological homes to ensure their health and safety, children are also traumatized by their experiences and national studies report problematic outcomes for foster children. Prevention practices, services and supports can be the key to keeping families intact and children safe during challenging times.

California is re-thinking the child welfare system and actively looking for system improvements that include better assessment practices, better engagement practices, increased access to service provisions and community supports for families in need. The OCAP will seek to be a part of these efforts by building the prevention capacity of families, providers and communities across all levels of the prevention pyramid.

Fostering Resilient Families

Our understanding of the consequences of child maltreatment, including risk factors such as ACEs, has helped to generate a collective urgency to act. However, research has found that successful prevention strategies must both reduce risk factors and build protective factors to best safeguard the safety and well-being of children. Children need and deserve safe, secure, nurturing relationships and environments to thrive (citation from E4C).

One research-supported prevention strategy is to strengthen the family in ways that promote protective factors such as attachment and nurturing, parental resiliency, concrete supports in times of need, knowledge of parenting and child development, social connections and child social and emotional competence.¹⁵

"Protective factors are conditions in families and communities that, when present, increase the health and well-being of children and families. They are attributes that serve as buffers, helping parents who might otherwise be at risk of abusing their children to find resources, supports, or coping strategies that allow them to parent effectively, even under stress. For years, researchers have been studying both the risk factors common among families experiencing abuse and neglect and those factors that protect families who are under stress. There is growing interest in understanding the complex ways in which these risk and protective factors interact, within the context of a child's family, community and society, to affect both the incidence and consequences of abuse and neglect." (The Strengthening Families and Communities: 2010 Resource Guide - currently available at http://www.ok.gov)

THE OFFICE OF CHILD ABUSE PREVENTION

The Office of Child Abuse Prevention (OCAP) is a bureau within the California Department of Social Services (CDSS). The CDSS is the administrative structure that monitors the California Child Welfare System and is focused on ensuring child safety, permanence and wellbeing for children engaged or served by the child welfare system. The OCAP plays a valuable role to ensure that successful prevention strategies support and are integrated as part of the CDSS initiatives and activities. The prevention of child abuse and neglect is most effective when families can ensure their child's safety and well-being, thus do not engage or require child welfare involvement. The OCAP contends that when families are resilient, parents are more likely to withstand times of stress in ways that do not compromise a child's safety or well-being. Therefore, the OCAP will also seek to build resilient families and communities throughout California as an essential prevention strategy.

California offers a sizeable challenge when considering how to effectively target statewide prevention efforts that make a difference. One consideration is that California is a county-based system and each local community and/or county designs and implements their own prevention services. The OCAP is responsible for both statewide prevention endeavors and monitoring local prevention activities as part of federal requirements. In summary, the OCAP's priority objectives are to:

- 1. Promote an agenda to prevent child abuse and neglect both statewide and as part of the CDSS work.
- 2. Maintain responsibility to effectively utilize multiple state and federal preventionfocused funding streams, ensuring compliance with all governing legislation.

The OCAP Fiscal Oversight Role

In total, the OCAP provides oversight to approximately \$86 million dollars of funding a year. These funds are utilized throughout the continuum of child welfare, from prevention to intervention to after care. Specific funding streams in which the OCAP oversees include: the federal grants to California for the Child Abuse Prevention and Treatment Act (CAPTA), the Community-Based Child Abuse Prevention (CBCAP) program, and the Promoting Safe and Stable Families (PSSF) program, as well as the state Child Abuse Prevention, Intervention and Treatment Act (CAPIT), the State Children's Trust Fund (SCTF) and the State Family Preservation Fund (SFP).

A majority of these funds have been realigned and go directly to counties. In a county administered child welfare system, counties may choose how to best allocate funds received from OCAP in order to support their communities. The OCAP partners with CDSS' Children's Services Outcomes and Accountability Bureau (CSOAB) and counties to facilitate California's Child and Family Service Review (C-CFSR) process. In this process, the OCAP's Prevention Network Development consultants and CSOAB consultants provide C-CFSR orientations to County staff, establishing clear objectives of the C-CFSR process. Stakeholder engagement is highly encouraged and supported throughout. Counties engage stakeholders to identify county strengths and needs. Counties invite peer counties to review their child welfare system, as well.

The combination of stakeholder input, peer review information and data is reviewed, evaluated and analyzed to inform the County Self-Assessment (CSA). Based on the CSA findings, the County develops a System Improvement Plan (SIP) which remains in effect for a 5 year period. The PND consultants provide support and technical assistance throughout the C-CFSR process. In accordance with the varying communities, a wide variety of prevention services are funded. Nevertheless, the OCAP consultants strongly encourage Counties to support evidence-based programs or promising practices with performance measures to better ensure desired outcomes are achieved. Once the C-CFSR process is completed and the SIP is established, the OCAP consultants provide continuous quality improvement consultation to counties and monitor any changes in activities. As part of continuous quality improvement assistance, PND consultants visit counties and funded partner organizations within the county, twice each calendar year. Some OCAP funding is used to implement statewide mandates. These funds also provide the resources for a wide variety of activities and services, such as training and TA to community based organizations, parent engagement and leadership, the utilization of experts in the field, research and innovation, public awareness campaigns as well as prevention measurement tools and systems. The OCAP unit, Family and Community Support Services (FCSS), prepares all request for proposals, requests for application and contracts. FCSS staff provide oversight to grants and contracts, performing site visits, reviewing reports, and ensuing funded partners achieve their scopes of work.

To ensure the OCAP is a good steward of public and private funds, maximizing resources through leveraging, resource pooling, fiscal accountability and return on investment is required. Through partnership and collaboration, the OCAP is able to leverage and support children, families and communities in a more effective manner.

STRATEGIC PLAN PURPOSE AND PROCESS

The purpose of this plan is to articulate the OCAP's vision and plan for preventing child abuse and neglect in California. The plan describes the core values that guide all the work that the OCAP does and the specific goals, objectives and activities that will be implemented to achieve overarching goals. The plan will be utilized by the OCAP to direct program and funding activities over the next five years (2015-20). The plan also serves to communicate to the residents of California about the work of the OCAP.

Strategic Planning Process

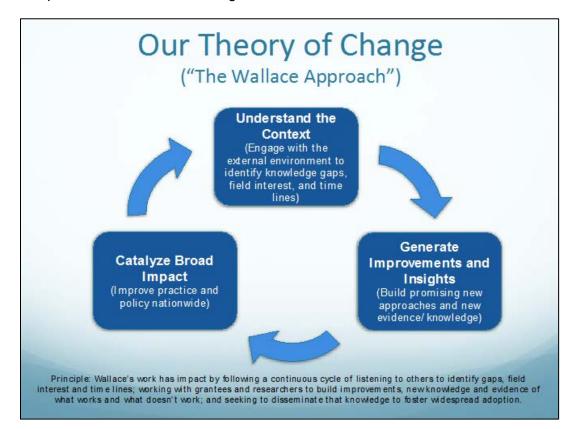
The OCAP strategic planning process used data from a wide variety of sources including community input, expert consultation, prevention literature review and review of key CDSS initiatives. In addition, strategic plan objectives were aligned with required funding mandates and key CDSS initiatives impacting the prevention field. A summary of the strategic planning timeline and activities is as follows:

- October, 2013 October, 2014
 - Strategic planning process and internal asset assessment conducted with the OCAP staff and leadership.

- Interview, small focus group and small convening data collected from a wide variety of stakeholders to include stakeholder meetings with representatives from local Child Abuse Prevention Councils (CAPCs), parent representatives and representatives from a spectrum of family-support organizations.
- Larger convening's data collected from family-support field leaders.
- Consultation with leading state and national prevention experts and leadership of organizations and county agencies that serve as prevention partners.
- Consultation with philanthropic organizations with a history of funding prevention efforts and the family-support field.
- Dissemination and analysis of a Prevention Needs Survey distributed to 65 policy and practice leaders.
- External Situational Assessment Report to survey the field for current standards and emerging trends in key topics relevant to child abuse prevention.
- Review and assessment of linkages with other CDSS Child Welfare initiatives.
- November, 2014 May, 2015
 - The OCAP Strategic Plan is drafted (January, 2015).
 - Disseminated Strategic Plan draft (January, 2015) for community input through town hall meetings and via California Family Resource Center Association website.
- May, 2015 August, 2015
 - Aligned Strategic Plan with CDSS key initiative and OCAP funding mandates.
 - Revised Strategic Plan and developed Implementation Plan.
- September, 2015
 - Distributed OCAP Strategic Plan with aligned Implementation Plan draft for executive review and approval.

Data Analysis Process

Both quantitative and qualitative methods were employed to analyze and triangulate the findings. A recursive process was employed where plan priorities were drafted and reviewed against findings from multiple sources. It is envisioned that, while the OCAP Strategic Plan serves as a blueprint to describe current and future activities, it will also be thoughtfully adapted to meet new challenges and opportunities over the next five years. The Wallace approach, detailed on the following graph describes the strategic planning data collection and analysis process utilized to develop the OCAP Strategic Plan.¹⁶ In addition, this approach will be used ongoing to ensure that requisite and robust prevention efforts are available in California and inform adaptations of the OCAP Strategic Plan.



OCAP CORE VALUES

The OCAP staff participated at key points in the process to articulate Core Values. The Core Values guided the Strategic Planning process and will continue to guide the policies and practices of the OCAP.

CORE VALUES	
Quality:	We support culturally responsive, gold standard prevention services.
Strengthen Families:	We respect and strengthen families through parent engagement in planning and problem solving.
Research driven:	We promote rigorous, evidence-based practice and policy development.
Engage stakeholders:	We partner with stakeholders to guide prevention.
Engage experts:	We engage experts to provide the expertise needed for quality prevention design and outcomes.
Accountable:	We model accountability, transparency and stewardship.
Data and outcomes focused:	We use data and a focus on outcomes as a guide to all of our work.
Innovative:	We embrace technology and innovation.

California Department of Social Service Child Welfare Initiatives

The OCAP met with multiple bureaus within the CDSS to identify and strengthen statewide prevention efforts. Some current primary initiatives of the CDSS that impact the prevention field and inform the Strategic Plan include:

- ▶ Federal Title IV-E Waiver monies to incentivize and support counties in finding creative ways to strengthen families and prevent the removal of children.
- Child fatality data reviews to inform the assessment process, the engagement of families at-risk, the resources available to support families and to evaluate policies of child welfare.
- Identifying, assessing and responding to the commercial sexual exploitation of children.
- Improving data collection methods and evaluation of service outcomes for children and families.

STRATEGIC PLAN

Vision: No child suffers from abuse or neglect.

Mission: To shape policy, build communities and empower families so that child abuse and neglect are prevented.

Guiding Priorities: The OCAP seeks to provide a transparent blueprint for the types of activities that are prioritized. Prioritized activities will 1) align with the strategic plan and 2) address unmet prevention needs. Cost-benefit is a consideration in that projects and activities that efficiently and effectively embed multiple strategic impact areas are preferred. Whenever possible, the OCAP will work to leverage funding and promote a prevention agenda as part of policy, business and philanthropic priorities.

The OCAP's activities and funding strategies are informed by the following six guiding priorities:

- Promoting Strengths-Based Approaches: Maltreatment has a profound impact on children. Adverse childhood experiences shape the child's development and health both immediately and across a lifetime. Adults, particularly families, can be the lever for both prevention and amelioration of child maltreatment. The OCAP takes the position that resilient families, with knowledge of parenting and resources to meet their basic needs, are better equipped to address life's challenges and adversity in ways that also protect children. The OCAP promotes the wide-spread incorporation of family strengthening approaches, such as integrating protective factors, as an essential prevention strategy.
- 2. Engaging and Empowering Parents: Engagement of at-risk, marginalized and/or under-serviced parents is crucial to any significant change in child abuse and neglect rates. Parents are not only the beneficiaries of prevention-focused services but are critical stakeholders. Parent input is also essential to inform statewide prevention efforts. The OCAP will advance approaches to meaningfully empower parents as they support and advocate for their families and inform prevention service and policy systems.
- 3. Focus on High Need Populations: Children of families challenged with mental health issues, substance abuse, a history of abuse and neglect and/or poverty are more likely to enter the child welfare systems. In addition, national and state data reveal that several populations are over-represented in child welfare systems and/or uniquely vulnerable to abuse and neglect. The OCAP is committed to assisting to solve these disparity challenges and address drivers that contribute to child abuse and neglect. Priority funding will focus on prevention strategies to address the needs of children and families impacted by:
 - a. Over-representation in child welfare systems
 - b. Child neglect
 - c. At-risk infants and children

- d. Vulnerable families with a history of mental illness, substance abuse or a history of abuse and neglect
- e. Poverty and/or economic challenges that impact families
- 4. Cultural Responsivity and Relevance: California is enriched by the multitude of perspectives inherent in a culturally diverse population. Implicit culturally responsive practices and policies will be integrated as in activities supported by the OCAP. The OCAP will seek to ensure culturally responsive and relevant resources, best practice models and implementation tools are shared with counties and community-based prevention partners.
- 5. Effective, Data-Driven Approaches: The OCAP will promote the use of evidencebased practices and policies whenever possible. It is understood that emerging, innovative approaches have the potential to inform the field but may not yet meet the evidence-based evidentiary standard. Furthermore, the field of implementation science has demonstrated that it is not enough to have high quality interventions available. Without specific focused attention to implementation, needed services are less likely to be effective. It is expected that all prevention approaches advocated by the OCAP are the best available evidence and, at a minimum, are data-informed, implemented with fidelity and employ high-quality assessment strategies to monitor outcomes.
- 6. Building Prevention Partnerships: The prevention of child abuse and neglect is the responsibility of all. Best practice advocates that statewide and local prevention partners work collectively to support resilient families and thriving children. A priority task will be the cultivation and development of effective collaborations to prevent child maltreatment. Capacity building, the pursuit and dissemination of effective or promising service models and catalyzing resource development for communities to build local prevention partnerships for maximum impact are all goals of the OCAP.

IMPACT AREAS AND GOALS

The OCAP will focus its work around three Impact Areas connected to its vision, mission and guiding priorities. Three specific approaches anchor the strategic plan goals and activities: lift, link, and leverage.

Impact Area 1:

Lift the capacity of parents and prevention partners to protect children from abuse and neglect.

The OCAP seeks to lift and build the capacity of parents and prevention partners to understand, deliver, evaluate and advocate for the prevention of child abuse and neglect.

- **1.1** Widely disseminate culturally responsive resources and tools that promote the prevention of child abuse and neglect.
- **1.2** Build the capacity of at-risk parents to productively engage in their children's lives and meaningfully contribute as system partners and advocates.
- **1.3** Strengthen the capacity of providers and prevention networks to build resiliency in families and effectively implement prevention practices, particularly for families over-represented in the child welfare system.

Impact Area 2:

Link and unite prevention partners around a shared prevention agenda.

Link and cultivate beneficial prevention-focused partnerships to create shared language, efficiency and reach of local and statewide prevention efforts. Prevention partners are broadly defined to include, for example, parents, family-support agencies, tribes, health providers, providers of basic needs services and those engaged in community development.

- **2.1** Partner with communities to map and strengthen a comprehensive, accessible, unified network of sustainable family-support organizations, able to collaborate effectively in meeting the needs of at-risk children and families.
- **2.2** Advance the use of prevention data and performance measures to maximize the effectiveness of prevention efforts for vulnerable children and families.

Impact Area 3:

<u>Leverage</u> partnerships across systems to promote and integrate statewide and local prevention agendas.

All Californians have both the obligation and the privilege to protect children from harm. The OCAP seeks to leverage prevention efforts across systems, facilitate philanthropic investment and embed prevention strategies as part of policy.

3.1 Advance innovative partnerships that increase and leverage prevention funds and/or embed prevention-focused policies.

IMPLEMENTATION PLAN PROCESS

The Implementation Plan links the types and resource for each of the OCAP activities with the Strategic Plan Impact Areas and Goals noted below. A new Implementation Plan will be developed each State Fiscal Year. Any annual modification to the Strategic Plan will be noted. The processes through which the OCAP activities will be addressed or resourced include:

- Grant or Contract Grants or contracts distribute funds available to the OCAP through private, State and national funding streams. Contracts and grants are coordinated and monitored by the OCAP leadership and staff. Typically, a contract is in effect when the OCAP will own a tangible product at the end of the project and a grant is in effect when the OCAP will not derive any tangible product from the project.
- Staff The OCAP consultants and staff will resource and/or provide leadership for designated prevention-focused TA to county child welfare departments and other prevention activities.

Impact Area 1:

Lift the capacity of parents and prevention partners to protect children from abuse and neglect.

The OCAP seeks to lift and build the capacity of parents and prevention partners to understand, deliver, evaluate and advocate for the prevention of child abuse and neglect.

Goal 1.1: Widely disseminate culturally responsive resources and tools that promote the prevention of child abuse and neglect.

Year 2 Activities	Contract	Grant	Staff	Funding
Public Awareness Prevention Campaigns			~	
Materials and tools developed for Safely Surrendered Baby, Safe to Sleep, Commercially Sexually Exploited Children (CSEC) and General Prevention.				\$130,000
Mandated Reporter Online Training and Web Site		~	~	
Web-based e-learning tools for general and specialized mandated reporters.				\$119,950
Rady - one year maintenance.				¢110,000
Development of new web-based training.				
Safely Surrender Baby Hotline		~		
Statewide hotline to prevent abandonment of children.				\$ 50,000
Strategies 2.0 Web Site and E-Blasts		~	~	Embedded in Strategies
Web Site and electronic dissemination of prevention trends, resources, models and local prevention news.				grant.
Kids' Plate Marketing			~	
Marketing materials to promote SCTF funds through Kids' Plate election in each county.				\$ 50,000
Children's Law Center	~		~	
Develop policies and procedures for Commercially Sexually Exploited Children (CSEC) also in the child welfare system.				\$159,981
SCTF On-line Donation Button	~		v	
Supports the OCAP's ability to receive on-line donations.				\$ 5,000
Strategies 2.0 E-Learning Development and In- Person Trainings		~	~	Embedded in Strategies grant.
Strategies 2.0 will develop e-learning opportunities, develop curriculums and provide in-person regional trainings.				

Goal 1.2: Build the capacity of at-risk parents to productively engage in their children's lives and meaningfully contribute as system partners and advocates.

Year 2 Activities	Contract	Grant	Staff	Funding
Lead4Tomorrow – Parent Leadership		~	~	
Training and mentorship for parents to represent parental concerns at the child welfare system level and within their communities, utilizing the Family Hui model with the incorporation of ACEs.				\$ 213,000

Goal 1.3: Strengthen the capacity of providers and prevention networks to build resiliency in families and effectively implement prevention practices, particularly for families over-represented in the child welfare system.

Year 2 Activities	Contract	Grant	Staff	Funding
California Evidence-Based Clearinghouse (CEBC) for Child Welfare		~	~	\$635,525
A clearinghouse to inform the field about the quality ratings of available interventions and the relevance of the intervention to child welfare and prevention services.				\$666,626
Implementation Science Project (CEBC)		~	~	Embedded as part
Resources and TA (limited) in implementation science integrated as part of the CEBC website.				of CEBC grant.
Strategies 2.0 Trainings, Webinars and TA		~	~	
Comprehensive capacity building resources for family-support agencies, offered statewide. Priority given to Community-in-Unity and Innovative Partnerships grantees for TA.				\$2,500,000
				Strategies contract – all regions – in current grant.
California-Children and Family Services Review (C-CFSR) TA			~	Conducted by
Assistance to develop County Self-Assessments, County System Improvement Plans, and provide continuous quality improvement TA.				OCAP staff.
Community-in-Unity		~	~	
Seed grants for collective impact projects that unify community				\$325,000
leaders around the shared goal of reducing child abuse and neglect by specifically addressing poverty and substance abuse issues.				(Projects will be supported with TA provided by Strategies 2.0)

Impact Area 2:

Link and unite prevention partners around a shared prevention agenda.

Link and cultivate beneficial prevention-focused partnerships to create shared language, efficiency and reach of local and statewide prevention efforts. Prevention partners are broadly defined to include, for example, parents, family-support agencies, tribes, health providers, providers of basic needs services and those engaged in community development.

Goal 2.1: Partner with communities to map and strengthen a comprehensive, accessible, unified network of sustainable family-support organizations, able to collaborate effectively in meeting the needs of at-risk children and families.

Year 2 Activities	Contract	Grant	Staff	Funding
<u>Citizen Review Panels</u> Citizen panels that examine and advise on child welfare outcomes.		~	v	\$ 50,000
Community in Unity 5 Collective Impact to mitigate child abuse and neglect.		~	r	See above
Innovative Partnerships 6 CAPC coalitions working in unison to mitigate child abuse and neglect		~	~	\$210,000

Goal 2.2: Advance the use of prevention data and performance measures to maximize the effectiveness of prevention efforts for vulnerable children and families.

Year 2 Activities	Contract	Grant	Staff	Funding
Strategies Trainings and Webinars		V	~	Embedded as part of Strategies grant
C-CFSR Advisement and TA			~	OCAP consultants' activity.
Predictive Analytics at Intake in Child Welfare Research and Development (R&D) of predictive analytics to more effectively support at-risk families reported to child welfare.		V	~	\$95,000
OCAP Reporting and Evaluation System Efforts to Outcomes (ETO) Database to support prevention outcome monitoring.	~		~	\$200,000

Impact Area 3:

Leverage partnerships across systems to promote and integrate statewide and local prevention agendas.

All Californians have both the obligation and the privilege to protect children from harm. The OCAP seeks to leverage prevention efforts across systems, facilitate philanthropic investment and embed prevention strategies as part of policy.

Goal 3.1: Advance innovative partnerships that increase and leverage prevention funds and/or embed prevention-focused policies.

Year 2 Activities	Contract	Grant	Staff	Funding
Backbone Organization of Essentials for Childhood			~	FCSS Staff Time
Partnership between OCAP and the Department of Public Health. Collective Impact approach to improving child health and well- being in CA.				
Child Welfare Council, Prevention and Early Intervention Committee Technical Assistance		~	~	Embedded as part of Strategies 2.0
Support the committee activities, including CRP outcomes.				grant.
Innovative Partnerships		~	~	
CAPC collaborative support grants provided to 6 regions of the				
State.				See Above
On the Verge		~	~	
 SH Cowell Foundation Partnership: Emerging Leaders Program 				\$250,000
A pilot program to support Family Resource Center (FRC) leaders, empower the voices of parents, build community leaders and train in effective collaborations that move the community needs upward.				
SH Cowell Foundation Partnership: Vehicles for Change		~	~	
The creation and dissemination of a reference guide to describe the changes faced by FRCs over the last 15 years and trending and innovative practices/models for today.				\$ 126,246

Summary - OCAP Expenditure Plan SFY 2015-16

		OCAP Managed Funds											Division Managed Funds					otal Fund
rant vner	Project		САРТА		CBCAP	SCTF		SSB	PACT	CSEC	Totals by Category		CAPIT		SFP	PSSF		
	DA # (Catalog of Federal Domestic Assistance) →		93.669		93.590											93.56		
	gement and Leadership										\$ 213,342							
······	rents Anonymous	\$	50,000							ľ		(s	50
Pa	rent Services Project	\$	40,836	\$	122,507				1					<u> </u>			\$	163
ntifu Dro	mote and Develop Best Practices & Resources										\$ 869.681							
	ildren's Law Center (CSEC)	S	150,000						1	Ĩ	3 009,001	(1	s	150
	1 Resource Data Base	ŝ	100,000														s	10
·····	1 Demo Website	Š	218,000														s	21
	1 LA Safely Surrender Baby Hotline	*	210,000				s	50,000	÷								s	5
	F Grant						•	50,000	S 10	0.000							s	10
	hicles for Change	s	76.681						9 IV	0,000							s	7
·····	Survey and Assessment	Š	100,000	¢	75.000												s	
			100,000	•	75,000				.i			i		.i		1		
	lse of Experts										\$ 1,810,000						,	
·····	izen Review Panels	\$	50,000									ļ					S	5
Pre	edictive Analytics Research/SAS Database	\$	170,000														\$	17
Em	erging Leaders Program	\$	250,000									ļ					\$	25
CE	BC	\$	515,000														\$	51
	ovative Partnerships (R&D, CAPCs support, Partner Meetings - Performance																	
	asures; Advise on Evaluation)	\$	225,000									ļ					\$	22
Su	staining Targeted Solutions	\$	600,000								j	L					\$	60
seminati	on/Replication										\$ 2,520,000							
	ategies - Region 1 Youth for Change	s	362,500	s	221,250	\$ 221,2	50			Ĩ		(s	80
	rategies - Region 2 Interface	S	455,000	S	227,500	\$ 227,5	00							•			\$	91
·····	rategies - Region 3 Childrens Bureau	\$	402,500	\$	201,250	\$ 201,2	50					}					\$	80
	Management										\$ 200,000	-						
	Measurement			_	200.000						\$ 200,000			Y		Y	s	
į Eli	O Reporting and Evaluation System	l		S	200,000		l			l	J	L					3	20
olic Awar	eness Campaign & Education										\$ 440,000	,						
Ma	Indated Reporter Training Maintenance	\$	100,000														\$	10
Ma	indated Reporter Website Redesign	\$	100,000															
Kid	Is Plate Marketing					\$ 45,0	00					L					\$	4
SC	TF Online Donation					\$ 20,0	00					ļ						
Pre	evention Public Awareness Campaigns (SSB, Safe to Sleep, General Prevention)	\$	125,000															
CS	EC Prevention - Development of Prevention Materials (target: teens and parents)	\$	50,000									l					\$	5
unty Allo	cations										\$ 2,007,983					\$ 80,034,792		
SF		Y					·····		1	Ĩ	2,007,000	·····		s	34,345,000	÷ 00,004,702	s	34,34
	r .PTT											\$	13,395,000	~	01,040,000		S	13,39
·····	ICAP			S	2.007.983				1				10,000,000				s	2,00
PS				*	2,001,303											\$ 32,294,792	s S	32,29
												·						
	tal OCAP Anticipated	\$	4,140,517		3,055,490	\$ 715,0	00 \$	50,000	\$ 10	0,000	\$ 8,061,006	\$	13,395,000	\$	34,345,000	\$ 112,329,584	\$	87,85
	ate Support	S	260,000	S	300,000				1			1		1		1	1	

*This chart identifies the total anticipated funding needs for each project (which may involve multiple contracts) for the fiscal year, encumbered and to be encumbered.

SUMMARY—OCAP EXPENDITURE PLAN SFY 2016-17

			OCAP Managed	Funds		Divis	Tota	al Funds		
rant øner	Project	САРТА	CBCAP	SCTF	SSB	CAPIT	SFP	PSSF		
	CFDA # (Catalog of Federal Domestic Assistance) >	93.669	93.590					93.56		
f the ca	pacity of parents and prevention partners to protect children from abuse									
neglect ulation:	. Priority focus on strengths-based approaches and high-need									
Î	Parent Leadership	106,500	106,500	ľ						213,0
	Children's Law Center	159, 981.21								
	ACF Grant									
	Citizen Review Panels	50,000								50,
	Prevention Public Awareness Campaigns (SSB, Safe to Sleep, General Prevention)			130,000						130,
	CSEC Prevention - Development of Prevention Materials (target: teens and parents)			75,000						75
	Mandated Reporter Maintenance, and Creation of New Site	120,000		35,000						155
									\$	623,
< and u	ite prevention partners around a shared prevention agenda using effectiv	ve data-driven appro-	aches.							
Ĩ	CEBC	635,525					Ì			635
	211 LA Safely Surrender Baby Hotline				50,000					50
	ETO Reporting and Evaluation System		200,000							200
	Strategies	1,500,000	500,000	500,000						2,500
·····	Community in Unity		325,000							325
	Predictive Analytics Research/SAS Database	95,000								95,
	Predictive Analytics Research/SAS Database	95,000							\$	95, 3,805,5
	Predictive Analytics Research/SAS Database	95,000							\$	
		.*	as.						\$	
ERAGE	partnerships across systems to promote and integrate statewide and lo	cal prevention agend	as.	50,000					\$	3,805,9
ERAGE	partnerships across systems to promote and integrate statewide and low	cal prevention agend	as.	50,000					\$	3,805,9 126
ERAGE	partnerships across systems to promote and integrate statewide and lo	cal prevention agend	las. 210.000	50,000					*	3,805,9 126 250
ERAGE	partnerships across systems to promote and integrate statewide and low Vehicles for Change Dissemenation On the Verge nnovative Partnerships (CAPC Coalition Support)	cal prevention agend							*	3,805,1 126 250 210
ERAGE	partnerships across systems to promote and integrate statewide and low Vehicles for Change Dissemenation On the Verge nnovative Partnerships (CAPC Coalition Support) Kids Plate Marketing	cal prevention agend		50,000					\$	3,805, 126 250 210 50
ERAGE	partnerships across systems to promote and integrate statewide and low Vehicles for Change Dissemenation On the Verge nnovative Partnerships (CAPC Coalition Support)	cal prevention agend								3,805, 126 250 210 50
ERAGE	partnerships across systems to promote and integrate statewide and low Vehicles for Change Dissemenation On the Verge nnovative Partnerships (CAPC Coalition Support) Kids Plate Marketing	cal prevention agend		50,000					* 	3,805, 126 250 210 50
ERAGE	partnerships across systems to promote and integrate statewide and low Vehicles for Change Dissemenation On the Verge nnovative Partnerships (CAPC Coalition Support) (ids Plate Marketing SCTF Online Donation	cal prevention agend		50,000						3,805, 126 250 210 50
ERAGE	partnerships across systems to promote and integrate statewide and low Vehicles for Change Dissemenation On the Verge nnovative Partnerships (CAPC Coalition Support) (ids Plate Marketing SCTF Online Donation	cal prevention agend		50,000			34 345 000			3,805, 126 250 210 50 5 641,
ERAGE	partnerships across systems to promote and integrate statewide and low Vehicles for Change Dissemenation On the Verge nnovative Partnerships (CAPC Coalition Support) (ids Plate Marketing SCTF Online Donation Reations SFP	cal prevention agend		50,000		13 395 000	34,345,000			3,805, 126 250 210 50 50 641, 34,345
ERAGE	partnerships across systems to promote and integrate statewide and low Vehicles for Change Dissemenation On the Verge nnovative Partnerships (CAPC Coalition Support) (ids Plate Marketing BCTF Online Donation CAPT Online Donation SEP CAPIT	cal prevention agend	210,000	50,000		13,395,000	34,345,000			3,805. 126 250 210 50 641. 34,345 13,395
ERAGE	partnerships across systems to promote and integrate statewide and low Vehicles for Change Dissemenation On the Verge nnovative Partnerships (CAPC Coalition Support) (ids Plate Marketing BCTF Online Donation BCTF Online Donation BCTF Online Donation BCTF Online Donation BCTP CAPIT CBCAP	cal prevention agend		50,000		13,395,000	34,345,000			3,805, 126 250 210 50 5 641, 34,345 13,395 2,007
ERAGE	partnerships across systems to promote and integrate statewide and low Vehicles for Change Dissemenation On the Verge nnovative Partnerships (CAPC Coalition Support) (ids Plate Marketing BCTF Online Donation CAPT Online Donation SEP CAPIT	cal prevention agend	210,000	50,000		13,395,000	34,345,000		*	3,805, 126 250 210 50 641,3 34,345 13,395 2,007 30,000
ERAGE	partnerships across systems to promote and integrate statewide and low Vehicles for Change Dissemenation On the Verge nnovative Partnerships (CAPC Coalition Support) (ids Plate Marketing BCTF Online Donation BCTF Online Donation BCTF Online Donation BCTF Online Donation BCTP CAPIT CBCAP	cal prevention agend	210,000	50,000		13,395,000	34,345,000	30,000,000	*	3,805, 126 250 210 50 641, 34,345 13,395 2,007 30,000
ERAGE	partnerships across systems to promote and integrate statewide and low Vehicles for Change Dissemenation On the Verge nnovative Partnerships (CAPC Coalition Support) (ids Plate Marketing BCTF Online Donation BCTF Online Donation BCTF Online Donation BCTF Online Donation BCTP CAPIT CBCAP	cal prevention agend	210,000	50,000		13,335,000	34,345,000	30,000,000	*	3,805, 126 250 210 50 641,3 34,345 13,395 2,007 30,000
ERAGE	partnerships across systems to promote and integrate statewide and low Vehicles for Change Dissemenation On the Verge nnovative Partnerships (CAPC Coalition Support) (ids Plate Marketing SCTF Online Donation SCTF Online Donation SERP CAPIT DBCAP PSSF	cal prevention agend 76,246 250,000	210,000	5,000	50,000				*	3,805,1 126 250 210 50 641,2 34,345 13,395 2,007 30,000 79,747,3
ERAGE	partnerships across systems to promote and integrate statewide and low Vehicles for Change Dissemenation On the Verge nnovative Partnerships (CAPC Coalition Support) (ids Plate Marketing BCTF Online Donation BCTF Online Donation BCTF Online Donation BCTF Online Donation BCTP CAPIT CBCAP	cal prevention agend	210,000	50,000	50,000	13,395,000	34,345,000	30,000,000	*	

*This chart identifies the total anticipated funding needs for each project (which may involve multiple contracts) for the fiscal year, encumbered and to be encumbered.

- ¹<u>Calendar Year SOC 826 Forms Submitted by Counties</u>. n.d. 16 September 2015 http://www.childsworld.ca.gov/res/pdf/ChildFatalityChart.pdf>.
- ²<u>Child Fatalities/Near Fatalities Resulting From Abuse And/Or Neglect</u>. n.d. 16 September 2015 http://www.childsworld.ca.gov/PG2370.htm.
- ³Putnam-Hornstein, Emily. <u>Child Welfare in California:Ethnic/Racial Disproportionality</u> and <u>Disparity</u>. Berkeley, 2008.
- ⁴ Federal law defines child abuse and neglect as, at a minimum, "any recent act or failure to act on the part of a parent or caretaker, which results in death, serious physical or emotional harm, sexual abuse or exploitation, or an act or failure to act which presents an imminent risk of serious harm" to a child. (42 U.S.C. §5106g)

⁵ Ibid. n.d.

⁶ Ibid. n.d.

- ⁷ "Injury Prevention & Control: Division of Violence Prevention." 13 May 2014. <u>Centers</u> <u>for Disease Control and Prevention.</u> 28 September 2015 http://www.cdc.gov/violenceprevention/acestudy/.
- ⁸ "Poverty and Economic Conditions." n.d. <u>Child Welfare Information Gateway.</u> 28 September 2015 https://www.childwelfare.gov/topics/can/factors/contribute/environmental/poverty/ y/>.
- ⁹ "Addressing Poverty as a Major Risk Factor in Child." n.d. 16 September 2015 http://aia.berkeley.edu/media/2011_teleconferences/poverty/Protecting 20Children 20Article 20on 20Poverty 20and 20Neglect.pdf>.

¹⁰ Ibid. n.d.

¹¹ <u>Injury Prevention & Control : Division of Violence Prevention</u>. n.d. 16 September 2015 http://www.cdc.gov/violenceprevention/childmaltreatment/consequences.html.

¹² Ibid. n.d.

¹³Noor, Ismail, Robert A Caldwell and Deborah Strong. "The Costs Of Child Abuse vs. Child Abuse Prevention: A Decade of Michigan's Experience." 20 September 2003. 28 September 2015 <https://www.michigan.gov/documents/ctf/The_Costs_Of_Child_Abuse_vs_2215 97_7.pdf>.

- ¹⁴ Gould, M and O'Brien T. <u>Colorado counts the cost of child abuse</u>. n.d. 28 September 2015 <http://pillsworld.blogspot.com/2008/07/colorado-counts-cost.html>.
- ¹⁵ <u>Center for the Study of Social Policy</u>. 2015. 28 September 2015 http://www.cssp.org/>.
- ¹⁶<u>Our Approach to Philanthropy</u>. 2015. 28 September 2015 ">http://www.wallacefoundation.org/learn-about-wallace/approach-and-strategy/Pages/our-approach-to-philanthropy.aspx>">http://www.wallacefoundation.org/learn-about-wallace/approach-and-strategy/Pages/our-approach-to-philanthropy.aspx>">http://www.wallacefoundation.org/learn-about-wallace/approach-and-strategy/Pages/our-approach-to-philanthropy.aspx>">http://www.wallacefoundation.org/learn-about-wallace/approach-and-strategy/Pages/our-approach-to-philanthropy.aspx>">http://www.wallacefoundation.org/learn-about-wallace/approach-and-strategy/Pages/our-approach-to-philanthropy.aspx>">http://www.wallacefoundation.org/learn-about-wallace/approach-and-strategy/Pages/our-approach-to-philanthropy.aspx>">http://www.wallacefoundation.org/learn-about-wallace/approach-and-strategy/Pages/our-approach-to-philanthropy.aspx>">http://www.wallacefoundation.org/learn-about-wallace/approach-and-strategy/Pages/our-approach-to-philanthropy.aspx>">http://www.wallacefoundation.org/learn-about-wallace/approach-and-strategy/Pages/our-approach-to-philanthropy.aspx>">http://www.wallacefoundation.org/learn-about-wallace/approach-and-strategy/Pages/our-approach-to-philanthropy.aspx>">http://www.wallacefoundation.org/learn-about-wallace/approach-and-strategy/Pages/our-approach-to-philanthropy.aspx>">http://www.wallacefoundation.org/learn-about-wallace/approach-and-strategy/Pages/our-approach-to-philanthropy.aspx>">http://www.wallacefoundation.org/learn-about-wallace/approach-and-strategy/Pages/our-approach-to-philanthropy.aspx>">http://www.wallacefoundation.org/learn-about-wallace/approach-and-strategy/Pages/our-approach-about-wallace/approach-about-wallace/approach-about-wallace/approach-about-wallace/approach-about-wallace/approach-about-wallace/approach-about-wallace/approach-about-wallace/approach-about-wallace/approach-about-wallace/approach-about-wallac