



Serving Alabama Families through Prevention Programs

EVALUATION REPORT: 2015-2021 CUMULATIVE SUMMARY

The Alabama Department Of
Child Abuse & Neglect Prevention

The Children's Trust Fund of Alabama
Sallye R. Longshore, M.S., Ed.S., Director







Background and Overview

The Alabama Department of Child Abuse and Neglect Prevention—The Children’s Trust Fund of Alabama—was established in 1983 to address the state’s problem of child neglect and maltreatment. While several state agencies existed to address the consequences of child abuse, none *specifically* focused on combatting the issue, raising awareness, and educating communities before it occurred. **ADCANP/CTF remains the only state agency actively engaged in providing community-based prevention programs focused on promoting protective factors in families.**

Throughout its 38-year history, ADCANP/CTF has provided direct funding support to hundreds of local agencies each year through a competitive grant process. These local organizations carry out the important work of building family strengths.

Under the oversight and guidance of the ADCANP/CTF Director, Sallye R. Longshore, a total of 182 different programs have been awarded grant funds to prevent child abuse and neglect within their communities. This cumulative summary report highlights the **collective accomplishments of the ADCANP/CTF during the 2015-2021 project years.**



ADCANP/CTF is the *only* state agency designated to prevent child maltreatment by building family strengths.

During just the past 6 years, ADCANP/CTF has secured—through contracts and competitive grants—**over \$38 million in resources to fund evidence-informed community programs committed to the prevention of child maltreatment.** ADCANP/CTF advocates for children and the strengthening of families.

Effectively securing and increasing the amount of funds awarded to community-based programs is no small feat, particularly when resources for family assistance are scarce. Under the guidance and leadership of Sallye R. Longshore, the ADCANP/CTF Director, **there has been a 415% increase in funding for program awards to community-based agencies and programs reducing the risk of child maltreatment from 2015 to 2021.** Funding awarded to programs increased nearly **\$4.5 million** in just the last two years. This continued growth allows for program expansion, employment opportunities for additional staff, and greater outreach to Alabama children and families.

As a member of the National Alliance of Children’s Trust and Prevention Funds, as well as Prevent Child Abuse America, the ADCANP/CTF works to strengthen **ALL** families and to surround them with supportive communities, services, and systems.

Partnering for Impact

ADCANP/CTF, under the leadership of Director Longshore, serves as a central force for child advocacy and continues to grow important partnerships and alliances to promote a comprehensive approach to family strengthening and preventing child abuse and neglect across the state. The following reflects only a few of the more recent and remarkable efforts:

- ADCANP/CTF received grants in 2020 and 2021 from the Alabama Department of Mental Health and partnered with the Alabama Network of Family Resource Centers to **provide 22 annual virtual trainings on Strengthening Families™ – Preventing and Addressing Trauma.**

The one-day training sessions were upbeat and interactive, and participants had a broader understanding of the long-term effects of childhood trauma and Strengthening Families™: Bringing the Protective Factors Framework to Life in Your Work. Participants shared ideas with others and came up with concrete steps for individuals and communities to support strong families.

The trainings reached over 800 participants, including grantee agency staff, teachers, higher education professionals, mental health workers, substance abuse prevention workers, DHR staff, juvenile probation officers, youth service workers, and housing authorities.

Training participants provide services in all **67 counties** in Alabama and other states, including Georgia and North Carolina.

- ADCANP/CTF **served a vital role in the passage and implementation of Erin's Law in Alabama.** Erin's Law provides students, school personnel, and parents with skills to identify and report suspected sexual abuse. Erin's Law also mandates that school personnel complete Mandatory Reporter training annually.
- At the beginning of 2018, ADCANP/CTF **obtained the rights to provide screenings of "Resilience," a documentary film** illuminating how trailblazers in pediatrics, education, and child welfare are using cutting-edge science and field-tested therapies to protect children from the insidious effects of toxic stress. ADCANP/CTF and partners provided numerous screenings in communities across the state. Following the screenings, ADCANP/CTF facilitated discussion panels to initiate the conversation on Adverse Childhood Experiences (ACEs) and identify potential next steps for communities moving forward.
- **ADCANP/CTF established the first Parent Advisory Council (PAC), in 2020.** Nine parents from across the state were appointed and a PAC orientation was held for all new members. As a strategic partner with ADCANP/CTF, the PAC ensures there are strong parent voices helping to shape programs, services, and strategies that result in enhanced outcomes for children and families across the state. Parent council members provide a diverse perspective in prevention strategies and resources in helping support Alabama families and children. More information about the Parent Advisory Council and the PAC members can be found here: <https://ctf.alabama.gov/parent-advisory-council/>.
- ADCANP/CTF partnered with the University of Alabama College of Human Environmental Science and Center for Business and Economic Research, Culverhouse College of Business to **release the 2021 study on the enormous cost of intervention.** Services associated with child abuse and neglect incidents are estimated to cost taxpayers **\$3.7 billion dollars every year.** This is an increase of \$1.4 billion dollars compared to the study conducted in 2015. The study can be downloaded here: <https://tinyurl.com/yc6yn9x2>

The study authors note that this significant cost of child maltreatment to the state also is a conservative estimate because it is based on just the first-time child maltreatment victim cohort for 2018 and does not include associated costs to families (including extended ones) and communities that are known to occur.

ADCANP/CTF firmly believes that by investing time and money upfront in individual and structural supports for families, we can ensure that children in our state grow up in a nurturing and supportive home. Additionally, prevention is much more cost effective than intervention. **Based on the UA report and the number of first-time child maltreatment incidences reported, the average cost of intervention is \$368,416 per case. In contrast, prevention is much more cost-effective. The average cost per participant in an ADCANP/CTF-funded program is \$53 for adults and \$11 for youth.** The prevention of child maltreatment is both a social justice and an economic concern for Alabama.

- **ADCANP/CTF is only one of 6 state agencies selected to be a part of the Prevention Mindset Institute (PMI).** PMI is being led by FRIENDS, the national technical assistance group for Community Based Child Abuse and Prevention (CBCAP). This involvement means Alabama is on the forefront of child maltreatment prevention.
- FRIENDS highlighted ADCANP/CTF for their **robust, quality program evaluation efforts**. Read the full highlight article here: <https://tinyurl.com/2p9384dh>
- **ADCANP/CTF enhanced their partnership with the Alabama Department of Mental Health and serves as a founding partner of First Alabama**, the Alabama Association for Infant and Early Childhood Mental Health.
- ADCANP/CTF has an **extensive, collaborative partnership with the Alabama Department of Human Resources (DHR)**. DHR designates funding to ADCANP/CTF for the Temporary Assistance for Needy Families (TANF) Fatherhood Programs and the Strengthening Families Through Fathers (SFTF) pilot study.

The SFTF program model explicitly incorporated the Strengthening Families™ Protective Factors Framework™ and provided focused attention, enhanced case management, and extended fatherhood program services for participants. Download the Framework here: <https://tinyurl.com/35db3fy6>.

Auburn University's Human Development and Family Science Department researchers conducted a **study evaluating the effectiveness of the SFTF model** in comparison to traditional fatherhood programs over a one-year period. While all fatherhood programs **result in significant improvements for the average participant in multiple areas up to a year after program completion**, those in the SFTF program model **demonstrated added benefits in relationship functioning and financial responsibility**. More information about the SFTF pilot study and the encouraging, extant findings can be found here: <https://tinyurl.com/35db3fy6>.

- ADCANP/CTF partnered with DHR to **conduct a Strengthening Families™ Summer Enhancement Project** in the summer of 2021 for school-aged children and families. This initiative has proven successful in three “hubs” in Alabama serving high-poverty families. This innovative program will be extended and expanded into this school year based on the success of the summer program.

National Visibility

ADCANP/CTF is consistently recognized for its partnerships, outreach, and evaluation efforts by federal partners. Over just the past 6 years, Director Longshore and the evaluation team have presented at the following national conferences and webinars:

- National Community-Based Child Abuse Prevention (CBCAP) Conference – August 2016
- Alabama Department of Human Resources TANF and Family Assistance Conference – May 2017
- National Council on Family Relations Conference – November 2017
- National Community-Based Child Abuse Prevention (CBCAP) Conference – July 2018
- National Conference on Child Abuse and Neglect (NCCAN) – August 2018

- Strengthening Families Annual Summit – October 2018
- National Council on Family Relations Annual Conference – November 2018
- Doing What Matters for Children Conference – January 2019
- National Conference on Child Abuse and Neglect (NCCAN) – April 2019
- National Child Welfare Evaluation Summit – August 2019
- Alabama Chapter of the American Academy of Pediatrics – September 2019
- Prevent Child Abuse America National Conference – September 2019
- Children’s Bureau Digital Dialog Presentation – March 2020
- National Governor’s Association webinar on child and family wellbeing – September 2020
- Research and Evaluation Conference on Self-Sufficiency (RECS) – October 2020
- National Conference on Child Abuse and Neglect (NCCAN) – July 2021
- Alabama Department of Human Resources TANF and Family Assistance Conference – October 2021
- National Council on Family Relations Annual Conference – November 2021

Outreach and Impact

As evidenced through hard work, strong collaboration, and effective leadership, the Alabama Department of Child Abuse and Neglect Prevention—The Children’s Trust Fund of Alabama (ADCANP/CTF) continues to be at the forefront in the nation for supporting and evaluating prevention and family strengthening programs.

In this 6-year cumulative summary report, we highlight the evaluation results of ADCANP/CTF-funded programs’ efforts to promote protective factors among the families and youth served throughout the state during the period of August 2015 – September 2021.



Prevention programs funded by ADCANP/CTF have consistently documented important positive effects for 554,667 adults and youth in Alabama served in the past 6 years (2015-2021) under the leadership of Director Sallye R. Longshore.

Evidence shows these programs enhance protective factors that are associated with the reduction of risks and the significant human and economic cost of child abuse and neglect in our state.

As the only state agency designated to prevent child abuse and neglect, ADCANP/CTF is explicitly focused on educating Alabama communities in the **Strengthening Families™ framework – a vital component in preventing child maltreatment**. This framework utilizes the Protective Factors Framework (C.S.S.P., 2018; Browne, 2014) that emphasizes key, research-based factors for strengthening families and reducing risks for children. These elements provide a framework for prevention program target outcomes and objectives.

The Five Protective Factors:

The Foundation of the Strengthening Families™ Framework

WHAT ARE THE FIVE PROTECTIVE FACTORS?

The Five Protective Factors are the foundation of the Strengthening Families™ approach. Extensive evidence supports the commonsense notion that when these Protective Factors are present and robust in a family, the likelihood of abuse and neglect diminishes. Research also shows that these are the factors that create healthy environments for the optimal development of all children.



Parental Resilience

No one can eliminate stress from parenting but building parental resilience can affect how a parent deals with stress. Parental resilience is the ability to constructively cope with and bounce back from all types of challenges. It is about creatively solving problems, building trusting relationships, maintaining a positive attitude, and seeking help when it is needed.



Knowledge of Parenting and Child Development

Having accurate information about raising young children and appropriate expectations for their behavior help parents better understand and care for children. It is important that information is available when parents need it, that is, when it is relevant to their life and their child. Parents whose own families used harsh discipline techniques or parents of children with developmental or behavior problems or special needs require extra support in building this Protective Factor.



Social and Emotional Competence of Children

A child's ability to interact positively with others, to self-regulate, and to effectively communicate his or her emotions has a great impact on the parent-child relationship. Children with challenging behaviors are more likely to be abused, so early identification and working with them helps keep their development on track and keeps them safe. Also, children who have experienced or witness violence need a safe environment that offers opportunities to develop normally.



Social Connections

Friends, family members, neighbors, and other members of a community provide emotional support and concrete assistance to parents. Social connections help parents build networks of support that serve multiple purposes: they can help parents develop and reinforce community norms around childrearing, provide assistance in times of need, and serve as a resource for parenting information or help solving problems. Because isolation is a common risk factor for abuse and neglect, parents who are isolated need support in building positive friendships.



Concrete Support in Times of Need

Parents need access to the types of concrete supports and services that can minimize the stress of difficult situations, such as a family crisis, a condition such as substance abuse, or stress associated with lack of resources. Building this Protective Factor is about helping to ensure the basic needs of a family, such as food, clothing, and shelter, are met and connecting parents and children to services, especially those that have a stigma associated with them, like domestic violence shelter or substance abuse counseling, in times of crisis.

Information provided by: Strengthening Families™, a project of the Center for the Study of Social Policy: www.strengtheningfamilies.net
US Department of Health and Human Services Administration for Children and Families/Strengthening Families™ and Communities 2009 Resource Guide:
www.acf.hhs.gov/programs/cb

During 2015-2021, ADCANP/CTF awarded grants from four primary federal and state funding streams to support two statewide initiatives and 182 community-based prevention programs. Grants were awarded to local programs across Alabama through a competitive grant proposal and review process.

Impressively, the total number of Alabama citizens (adults and youth) served by ADCANP/CTF-funded multi-session services in just the last 6 years (2015-2021) is **554,667** and the total number of citizens impacted by ADCANP/CTF funded programs (multi-session programs plus public awareness and training activities) is **4,475,298**.

In this report, ADCANP/CTF features 6 years of aggregated evaluation results from the 182 community-based programs funded by Community Based Child Abuse Prevention (CBCAP), Children First Trust Fund (CFTF), Education Trust Fund (ETF), and Department of Human Resources/Temporary Assistance for Needy Families (DHR/TANF) funds from August 2015 – August 2021. Research suggests several key activities as useful for the prevention of child maltreatment: raising public awareness, providing education and supports for parents – particularly those facing special challenges (e.g., low resources, special needs children), facilitating positive father involvement, and promoting youth’s own awareness, knowledge, and skills related to resilience. **Therefore, the types of programs ADCANP/CTF funded include:**

- Parent Education and Support
- Home Visitation Parent Programs
- Fatherhood Programs
- Respite Care Programs
- Youth School-Based, Non School-Based/ After-School, & Mentoring Programs
- Public Awareness and Training Programs

“

... because of the information and examples I got from my Parent Educator, I started having “family meetings” once a week. The entire family participates, including the children’s father, and I have seen a remarkable improvement in the children’s attitudes and behavior.”

– Home Visiting Participant 2021



Although each program varies in approach, curriculum, and delivery method, common objectives are shared by programs in each area of emphasis. All programs have objectives that center on reducing risk factors for child maltreatment and promoting protective factors outlined at the beginning of this report.

From August 2015 to August 2021, ADCANP/CTF worked with an independent research team of faculty, staff and students from Auburn University's Human Development and Family Science department to **conduct systematic data collection and evaluation of its funded programs**. A total of 182 ADCANP/CTF-funded programs invested time and effort in the collection of data from program participants throughout the year, using uniform surveys within each program type. This allows for the aggregation of data within program categories and results in meaningful information regarding the experiences of the average participant in each program area. **This systematic empirical assessment of prevention programs throughout the state is one of few such efforts in the United States.**

Because of the large number of citizens served, survey research methods are utilized and program participants respond to questions regarding their background and demographics, as well as their understanding, knowledge, and skills in many different areas relevant to healthy families and communities.

The questionnaire uses a validated and efficient method of gathering information on baseline and post-program levels of each measure in order to assess for changes, using statistical analyses. Upon entering the program, participants report demographic and background information. At program completion, participants report their level of knowledge and skill in specific areas before and after their participation in the program.

Previous research has supported the use of this retrospective pre- and post-program evaluation design* as efficient and meaningful documentation of participants' perceptions of benefit from the program and the extent to which specific program objectives have been met. Research also indicates this design may be a more accurate strategy for documenting change. Participants tend to answer more honestly when taking a retrospective pre/post approach as compared to separate pre- and post-program surveys since participants may respond in a more socially desirable way prior to program start. They also tend to have better knowledge on which to assess pre-program levels after they have received information and skills training in the program.

For the 2015-2021 project year analyses, data were aggregated across programs within each program type across a 6-year project period, 2015-2021. The Auburn University evaluation team compared average scores on all measures at two timepoints: when participants began the program and when they completed the program. Paired sample t-tests were conducted on each measure (some are global, singular items; some are multi-item scores) to identify statistically significant changes from pre-program mean levels to post-program mean levels. Effect sizes for documented changes were calculated using the appropriate formula for paired data.



*Contact the authors of this report for more information on this survey research design and its validity.

2015-2021 BY THE NUMBERS

The Alabama Department of Child Abuse and Neglect Prevention under the leadership of Sallye R. Longshore, Director, has documented in just the last 6 years **a broad distribution of resources and outreach** to the citizens of Alabama through a large number of community-based agencies and organizations. These efforts have **enhanced protective factors** that are associated with the **reduction of risks** and the significant human and economic cost of child abuse and neglect in our state.



ADCANP has a
38 year history

of collaborating with community-based agencies and organizations that serve children and families in Alabama.

Over \$38 million

has been awarded through a competitive grant process to community-based agencies to support prevention programs.



\$31,404,421

was awarded for programs serving parents.



\$7,264,652

was awarded for programs serving youth.



The available funding for program awards

increased from 2015 to 2021 by 415%.

216,701 adults

participated in multi-session programs.



337,966 youth

participated in multi-session programs.

3,920,631 individuals

impacted by public awareness activities.



45,296,417 citizens

viewed prevention information through various media outlets.



More than 180

different prevention programs for youth and parents have been provided.



Over 500 front-line workers

are involved annually around the state in providing prevention programs and services.



Over 80

local, state, and national presentations and publications have been presented on the prevention program evaluation findings.

All 7 districts

and **100% of counties** in Alabama were directly impacted by prevention program resources provided by ADCANP.



Over 110 different agencies

around the state have been funded to provide prevention programs in their communities.



Over 100 undergraduate and graduate students

at Auburn University have been involved in learning about and reporting on program evaluations for prevention programs in Alabama.



100% of target outcomes

for parenting and home visitation programs, fatherhood programs, respite care programs, and youth programs show **statistically significant improvements** after program participation. These outcomes are indicators of enhanced protective factors for children.





Participant Numbers & Demographics

Data on numbers of participants in ADCANP/CTF funded programs were taken from master lists of individuals who spent time in a program, demographic reports that most participants provided, and from presentation reports that documented the numbers of individuals who participated in public awareness and training activities provided by grantees in all program areas, including the Public Awareness and Training program area.

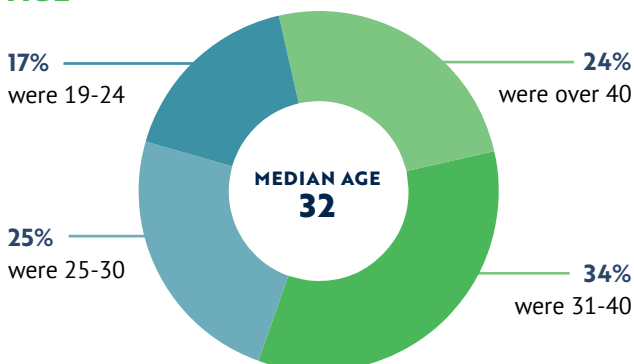
216,701 adults and 337,966 youth were served in multi-session programs classes (i.e., parenting, respite care, fatherhood, or youth development) in the 6-year span. An additional **3,920,631 individuals** (youth and adults) participated in a public awareness activity or presentation and learned more about prevention of child maltreatment. Community Awareness activities also included helpful information shared through media and social media. Approximately 45,296,417 exposures/ impressions were generated.

Programs provided multi-session services and community awareness events to adults and children in all 7 congressional districts in Alabama.

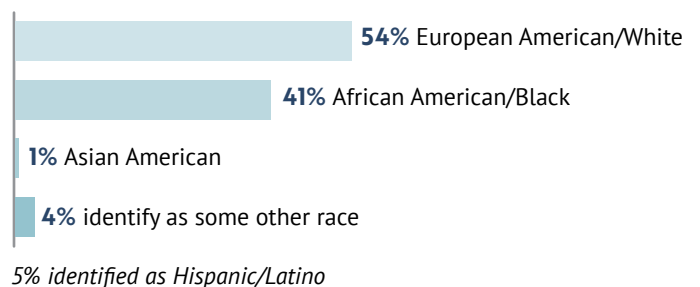
Adult Demographics

Data on adult demographics come from across the program types: parent education, home visiting, fatherhood, and respite. Parents are predominantly European American/White or African American/Black and predominantly of lower socio-economic status, based on work status, education level, and income reported. *Note: Adults who participated only in community awareness presentations did not provide demographic information.*

AGE



RACE & ETHNICITY

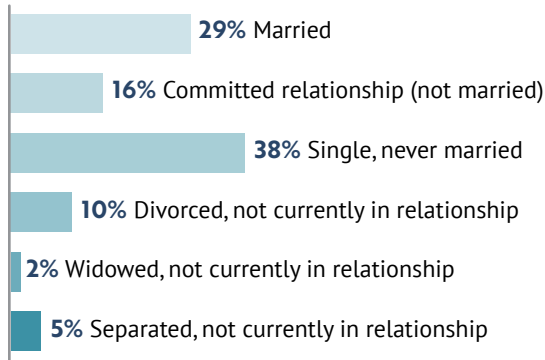


GENDER

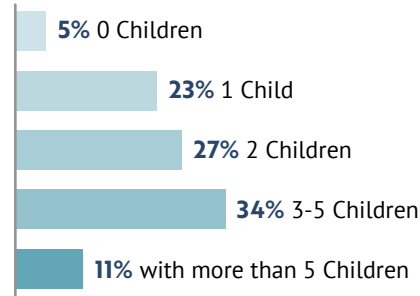
68% FEMALE

32% MALE

RELATIONSHIP STATUS



NUMBER OF CHILDREN*

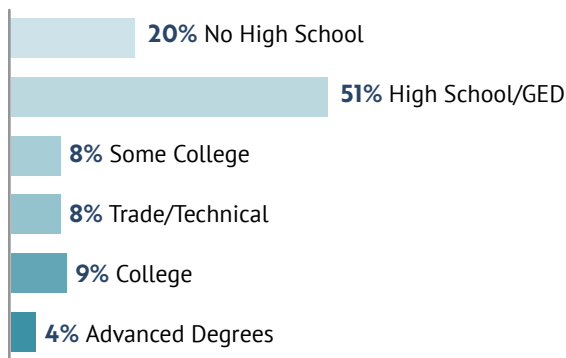


*Includes biological, step, adopted, and foster children

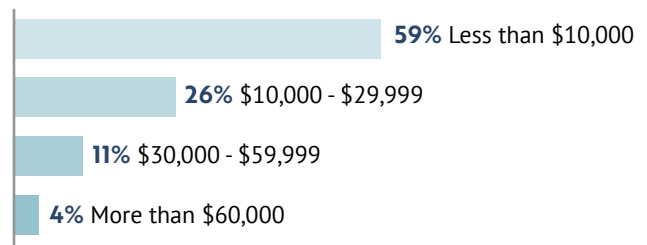
WORK STATUS PRE-PROGRAM**



EDUCATION LEVEL PRE-PROGRAM**



ANNUAL INCOME LEVEL PRE-PROGRAM**



**For individual participants (excluding students) over the age of 18

Youth Demographics

Data on youth demographics come from school-based, non-school based/after school, and mentoring programs and indicate that participants were predominantly African American/Black or European American/White, balanced in gender, and diverse in age.

Note: Youth who participated only in community awareness programs did not provide demographic information.

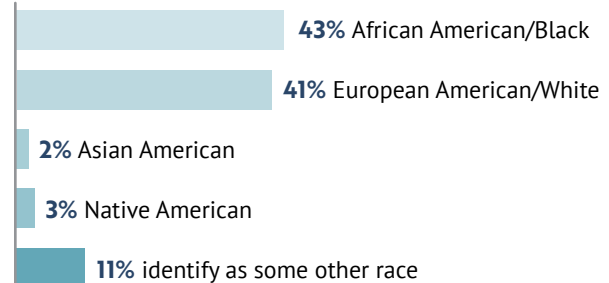
GRADE



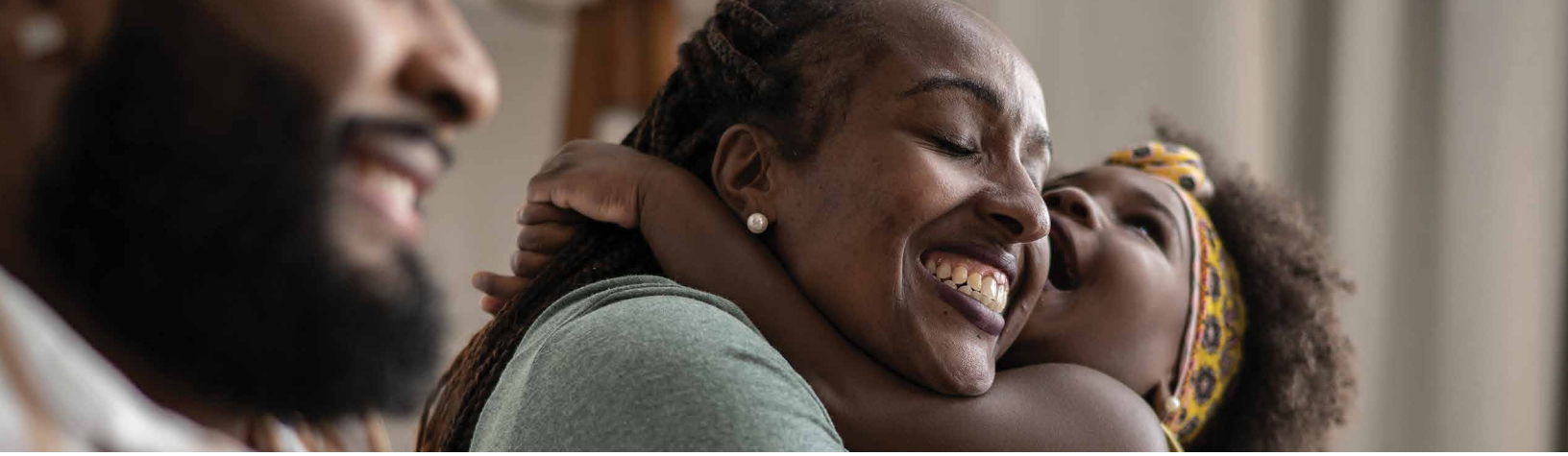
GENDER



RACE & ETHNICITY



9% identified as Hispanic or Latino



Parent Education & Home Visiting Programs

During project years 2015-2021, a total of 84 programs provided parent education/home visiting through hospital visits, group education, and home visits. Common goals of home visiting/parent education programs noted in their proposals center on participant improvement in:

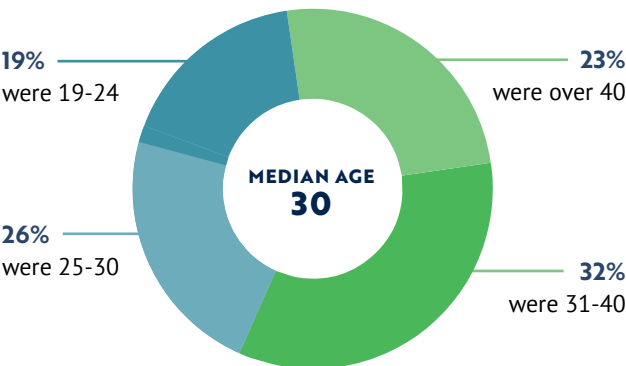
- stress management skills
- skills to manage maltreatment risk
- understanding of various forms of child maltreatment
- medical care commitment
- positive parenting skills and child development knowledge
- knowledge of and use of support services
- use of informal support networks

These goals promote elements of several protective factors emphasized by the “Strengthening Families™” framework (see results for this information).

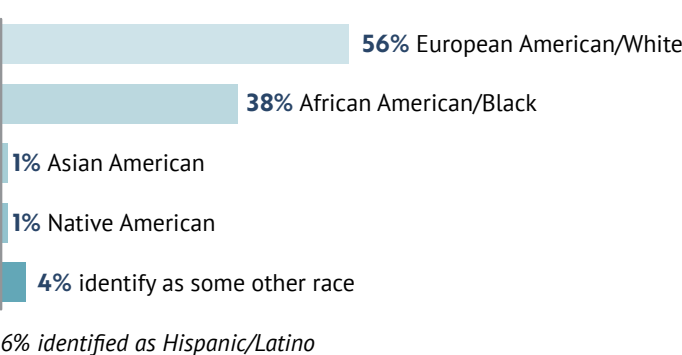
Parent Education & Home Visiting Program Demographics

Like the overall demographics, parents in Parent Education classes and Home Visiting programs were predominantly European American/White or African American/Black and predominantly of lower socio-economic status, based on work status, education level, and income reported. Participants are predominantly women.

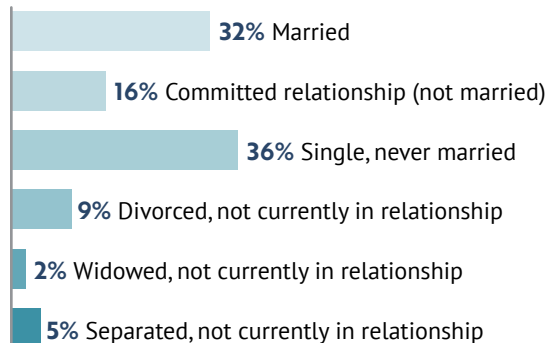
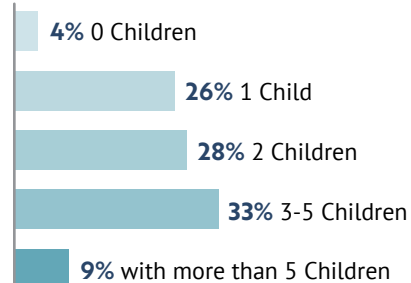
AGE



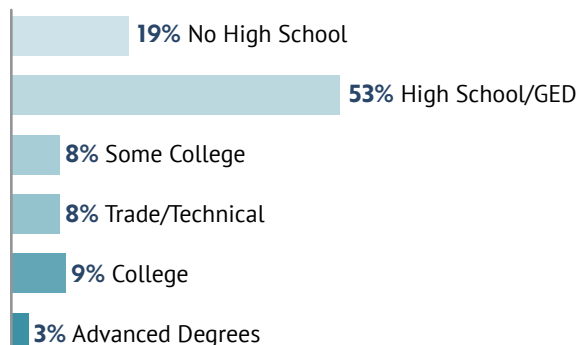
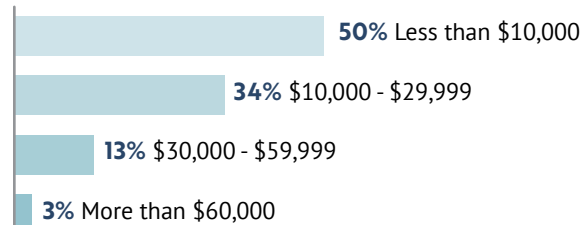
RACE & ETHNICITY



1%

IDENTIFIED AS HAVING ANOTHER
GENDER OTHER THAN MALE OR FEMALE**GENDER****80% FEMALE****19% MALE****RELATIONSHIP STATUS****NUMBER OF CHILDREN***

*Includes biological, step, adopted, and foster children

WORK STATUS PRE-PROGRAM****46% NOT WORKING FOR PAY****17% PART-TIME****37% FULL-TIME****EDUCATION LEVEL PRE-PROGRAM******ANNUAL INCOME LEVEL PRE-PROGRAM****

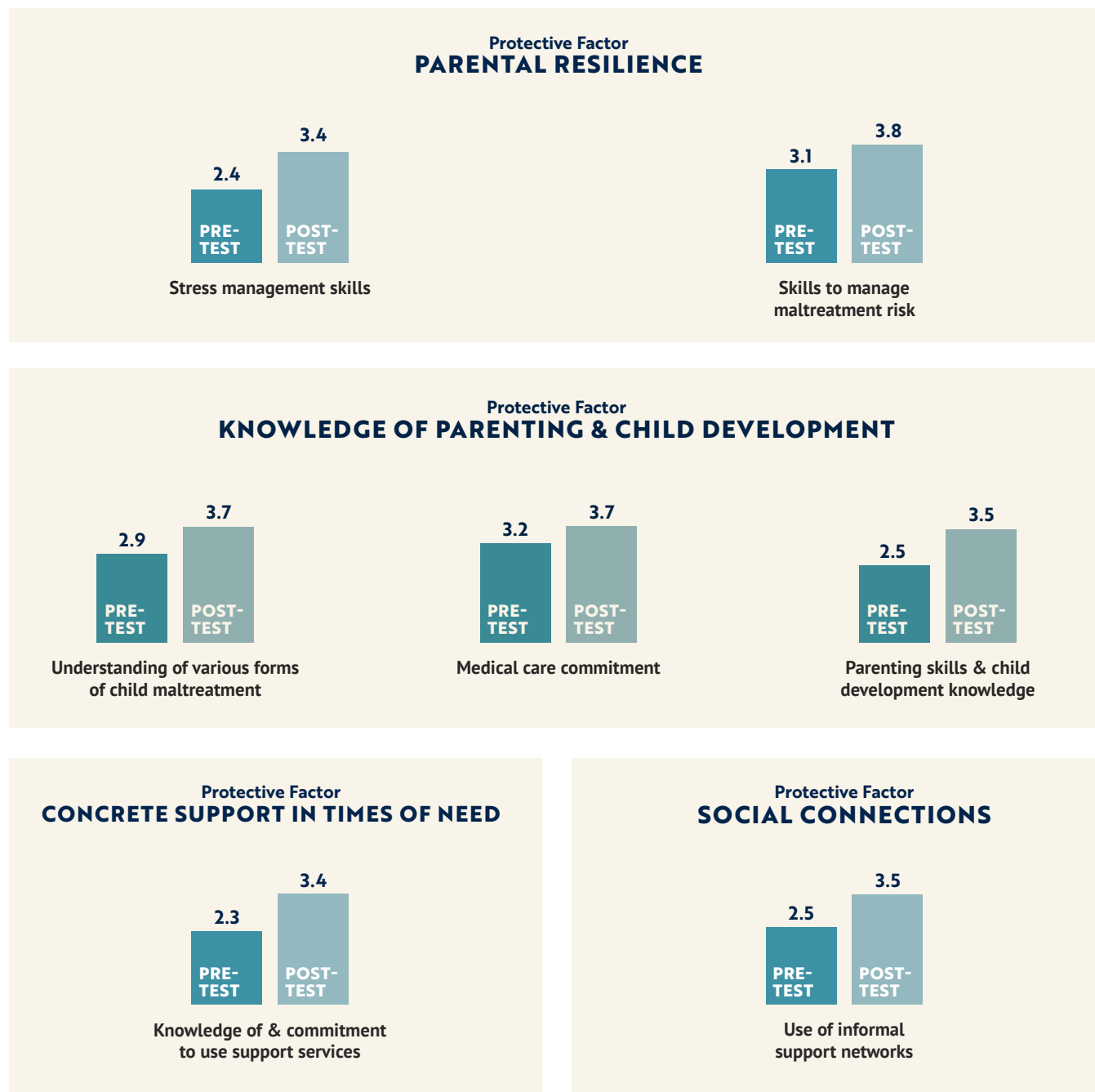
**For individual participants (excluding students) over the age of 18

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You just have to be willing to take the help from people...I always used to not want to take help from people because I was so used to doing it on my own. It has meant a lot to have people who care and...taking their time out to want to do this and help you."

– Home Visiting Participant 2015-2016

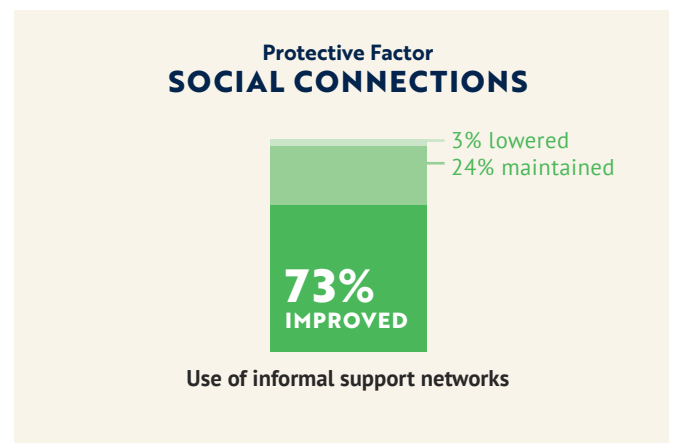
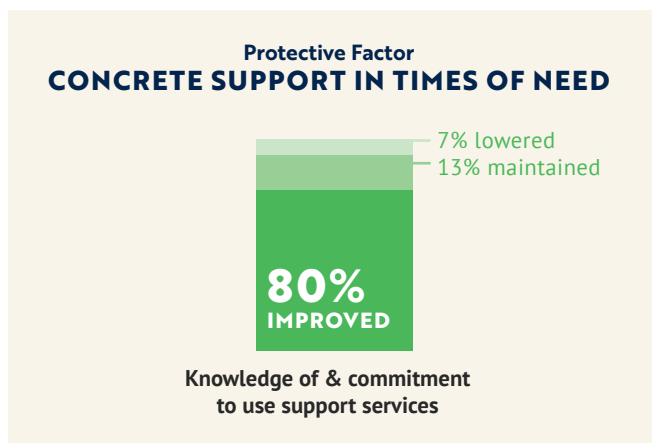
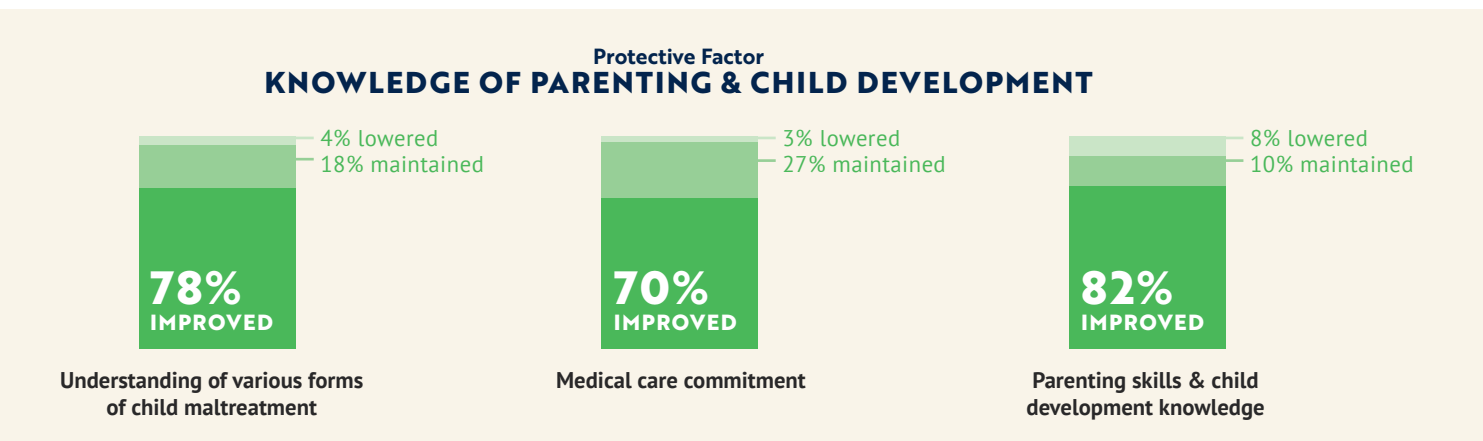
A sample of Parenting Program participants ($n=20,494$) responded to an assessment of 7 goals using a scale of 1 - 4. Analyses of measures (some using multi-item scores; reliabilities [Cronbach's α] range from .75 - .91) using paired sample t -tests revealed statistically significant ($p<.001$) improvements for participants, on average, in ALL targeted areas from pre-program to post-program. The effect sizes ranged from .65 to 1.17. The average magnitude of the effect sizes for these improvements was .96 and can be considered large (i.e., .25 small effect, .50 moderate effect, .75 large effect).



Paired sample t -test tables with results for testing mean score differences from pre-program to post-program are located on page 38 in the appendix.

Key Changes

Descriptive analyses also were examined to provide a clearer picture of the numbers of participants who experienced changes. Each year, we calculated the percentage of participants who reported improvement in their individual scores from pre-program to post-program, maintained their score, or declined. For these cumulative results, we averaged across the 6 year period. Consistently, a large portion rated themselves as improved in each area assessed.



“These parenting classes have helped me to see that discipline and punishment are two different things.”

– Parent Education Participant 2021



// My whole world changed due to COVID. I found myself at home with my five kids doing virtual learning. I learn so much in the parenting sessions. For instance, the parent educator showed me how to create a schedule using pictures to help my six-year-old with his anxiety. She also helped me remember that I am doing my best during these challenging times."

– Parent Education Participant 2021



Respite Care Programs

During project years 2015-2021, a total of 9 programs provided respite care services and parent information for parents and children with special needs. Common goals of respite programs noted in their proposals center on participant improvement in:

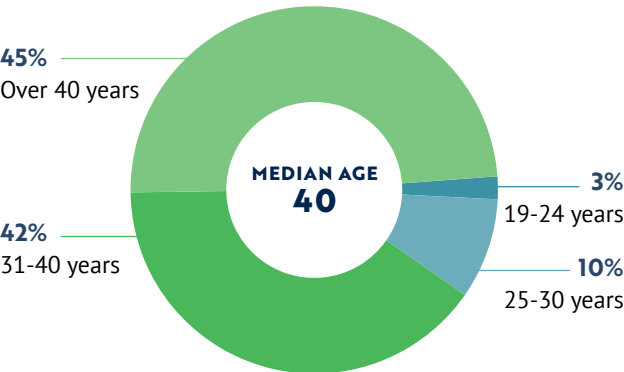
- stress level
- positive view of the child
- knowledge of and use of support services
- use of informal supportive social networks

These goals promote elements of several protective factors emphasized by the “Strengthening Families™” framework (see results for this information).

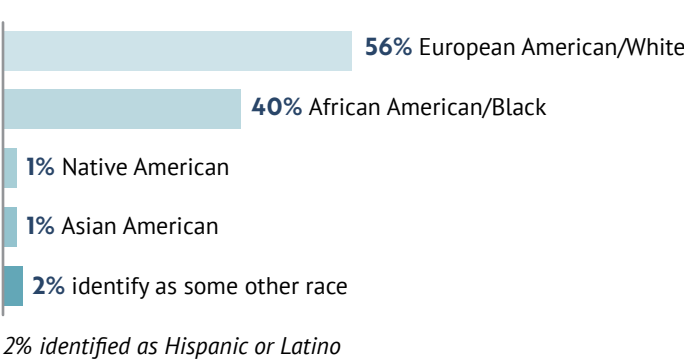
Respite Care Program Demographics

Like the overall demographics, parents in Respite Care programs are predominantly European American/White or African American/Black and predominantly of lower socio-economic status, based on work status, education level, and income reported. Participants are predominantly women.

AGE



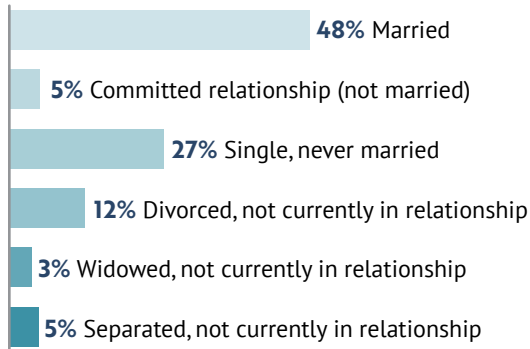
RACE & ETHNICITY



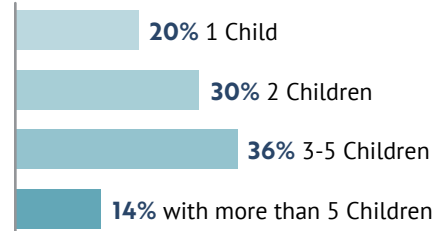
GENDER



RELATIONSHIP STATUS



NUMBER OF CHILDREN*

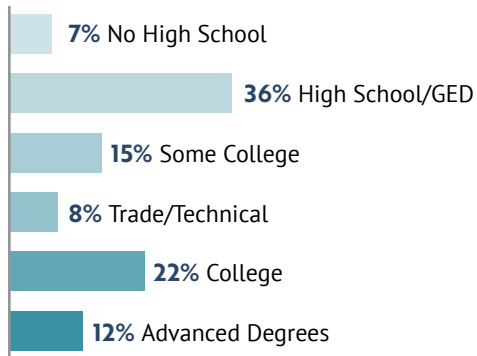


*Includes biological, step, adopted, and foster children

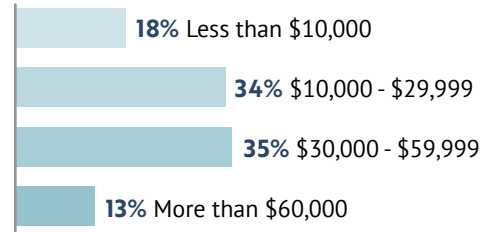
WORK STATUS PRE-PROGRAM**



EDUCATION LEVEL PRE-PROGRAM**



ANNUAL INCOME LEVEL PRE-PROGRAM**



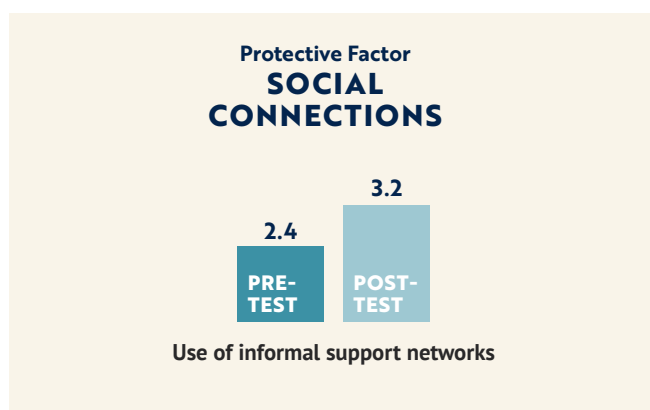
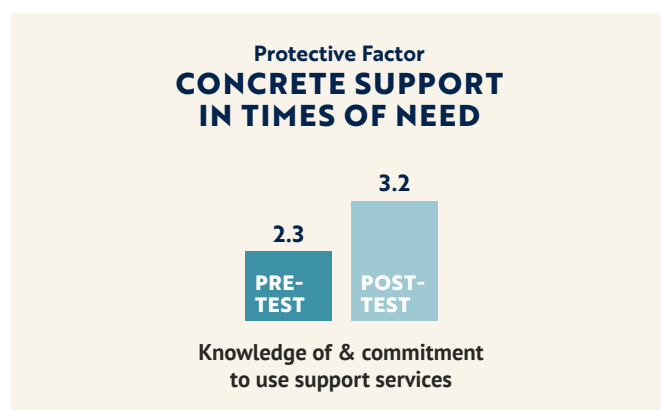
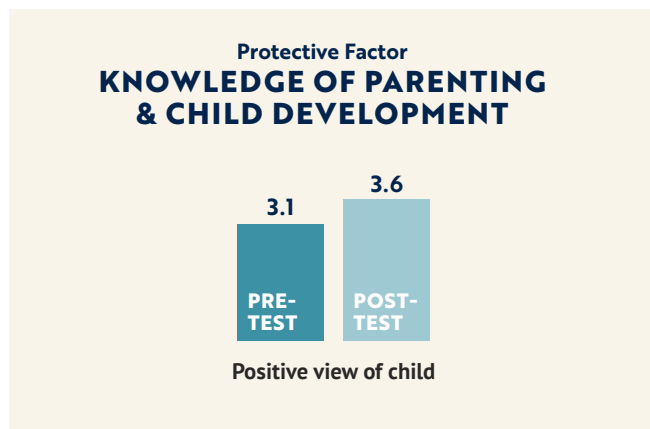
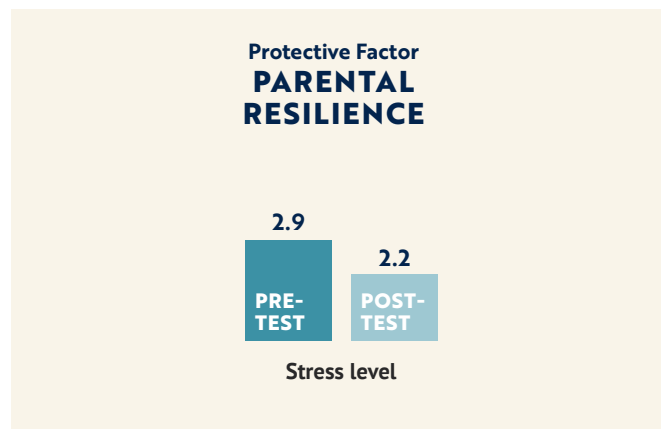
**For individual participants (excluding students) over the age of 18

// I was able to attend a marriage enrichment seminar due to financial support from the respite program. My husband and family are so grateful!"

– Respite Care Program Participant 2017-2018



A sample of Respite Care program participants (n =2,048) responded to an assessment of 4 goals using a scale of 1 - 4. Analyses of measures (some using multi-item scores; reliabilities [Cronbach's α] range from .76 - .89) using paired sample *t*-tests revealed statistically significant ($p < .001$) improvements for participants, on average, in ALL targeted areas from pre-program to post-program. The effect sizes ranged from .65 to .95. The average magnitude of the effect sizes for these improvements was .84 and can be considered large (i.e., .25 small effect, .50 moderate effect, .75 large effect).



Paired sample *t*-test tables with results for testing mean score differences from pre-program to post-program are located on page 38 in the appendix.



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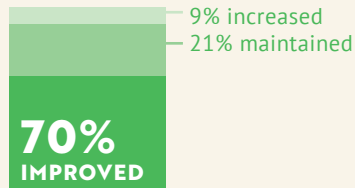
**Life is a lot less stressful
at home now thanks to
respite program staff."**

– Respite Care Program Participant 2015-2016

Key Changes

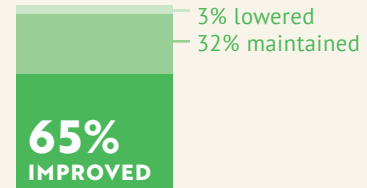
Descriptive analyses also were examined to provide a clearer picture of the numbers of participants who experienced changes. Each year, we calculated the percentage of participants who reported improvement in their individual scores from pre-program to post-program, maintained their score, or declined. For these cumulative results, we averaged across the 6 year period. Consistently, a large portion rated themselves as improved in each area assessed.

Protective Factor **PARENTAL RESILIENCE**



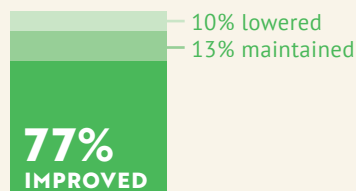
Stress level

Protective Factor **KNOWLEDGE OF PARENTING & CHILD DEVELOPMENT**



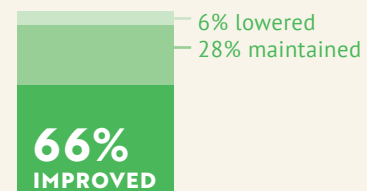
Positive view of child

Protective Factor **CONCRETE SUPPORT IN TIMES OF NEED**



Knowledge of & commitment
to use support services

Protective Factor **SOCIAL CONNECTIONS**



Use of informal support networks

//

I support and appreciate the much-needed respite care, and the parent education programs. It has helped me become a better mother to my autistic son and learn better coping skills and most importantly, how to take time for me. I cannot stress the importance of this program in providing for the whole family—parent and child.”

– Respite Care Participant 2021



//

We were so excited to hear about a program that would assist our family. Due to my daughter's medical needs, we cannot just leave her with just any childcare worker. So, you can imagine how often we ever get a 'date night' or even a chance to run errands without her in-tow. Before the respite program, it was never done as all our funds go toward her medical needs and care."

– Respite Care Participant 2018-2019



Fatherhood Programs

DHR/TANF (Alabama Department of Human Resources, Family Assistance Division, which oversees Temporary Assistance for Needy Families; TANF funds) provided funding for 24 Fatherhood programs and the Children First Trust Fund (CFTF) provided funding for an additional 4 programs. Fatherhood programs provide case management and classes. They focus on enhancing employability through education and job skills training. They also provide educational information on child development and positive parenting strategies and emphasize the value of positive involvement with children and child support obligation compliance. Mothers are invited to participate in classes as well. Common goals of fatherhood programs noted in their proposals center on participant outcomes in:

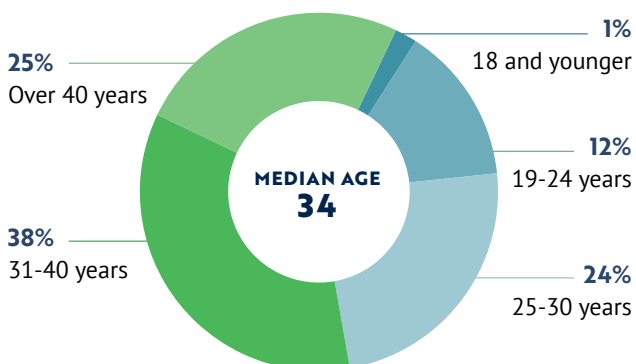
- positive relationship skills
- enhanced coparenting quality
- dating abuse prevention skills
- cooperation with child support enforcement (CSE) & commitment to pay child support
- greater work and education commitment
- greater use of support services
- positive parenting skills
- enhanced parent involvement & relationship quality with child
- enhanced child adjustment

These goals promote elements of several protective factors emphasized by the “Strengthening Families™” framework (see results for this information).

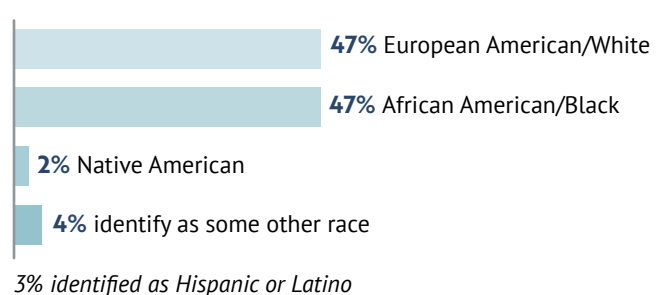
Fatherhood Program Demographics

Parents who participated in Fatherhood programs were predominantly European-American/White or African American/Black and predominantly of lower socio-economic status, based on work status, education level, and income reported. Participants were predominantly men.

AGE



RACE & ETHNICITY

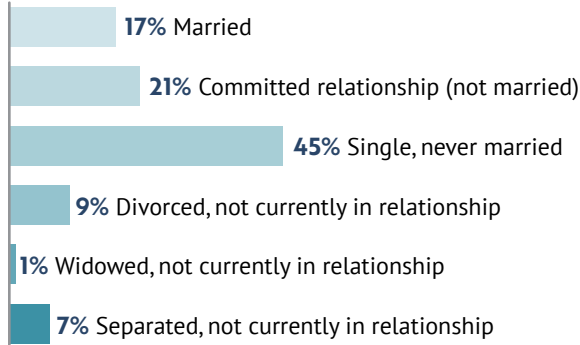


GENDER

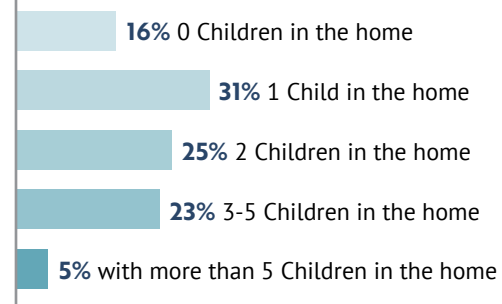
74% MALE

26% FEMALE

RELATIONSHIP STATUS



NUMBER OF CHILDREN LIVING IN THE HOME SOME OR ALL OF THE TIME*



**Includes biological, step, adopted, and foster children*

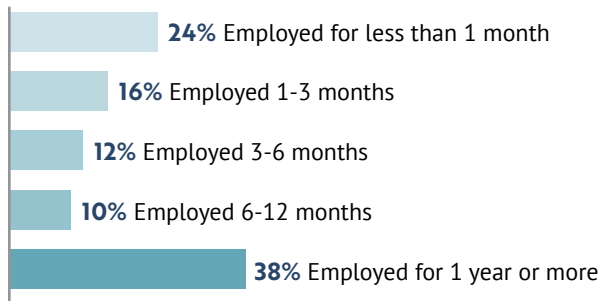
WORK STATUS PRE-PROGRAM**

57% NOT WORKING FOR PAY

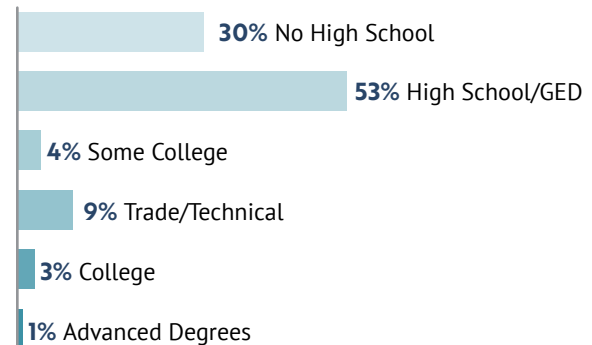
12% PART-TIME

31% FULL-TIME

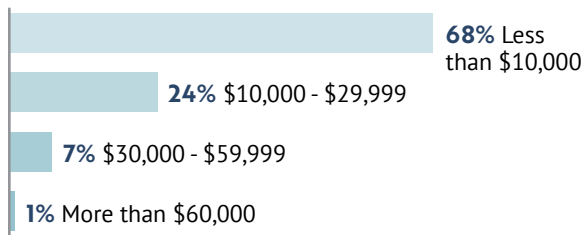
LONGEVITY OF CURRENT EMPLOYMENT**



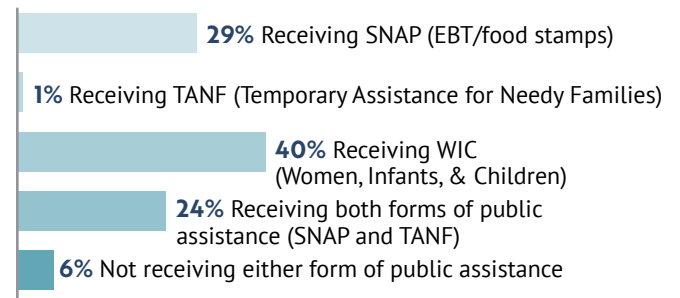
EDUCATION LEVEL PRE-PROGRAM**



ANNUAL INCOME LEVEL PRE-PROGRAM**

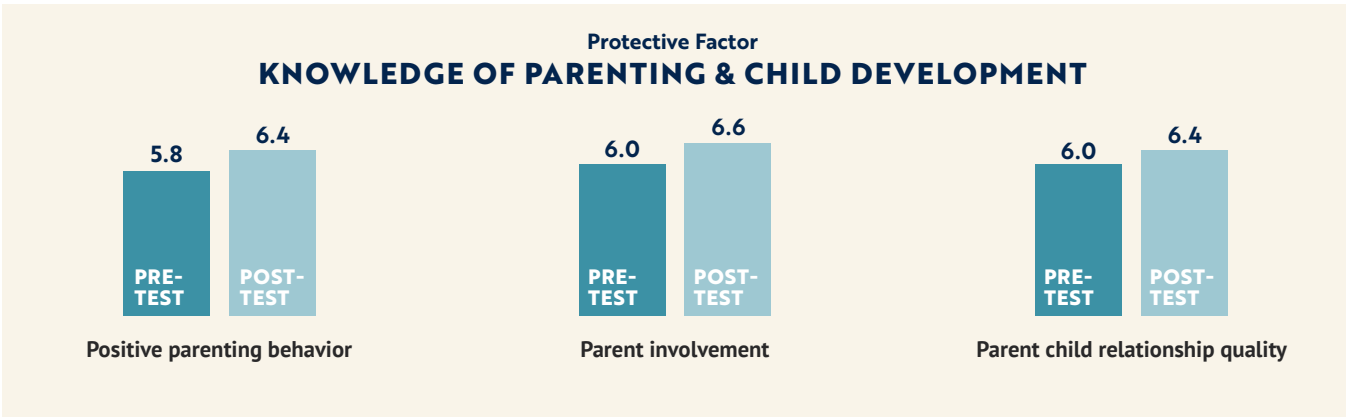
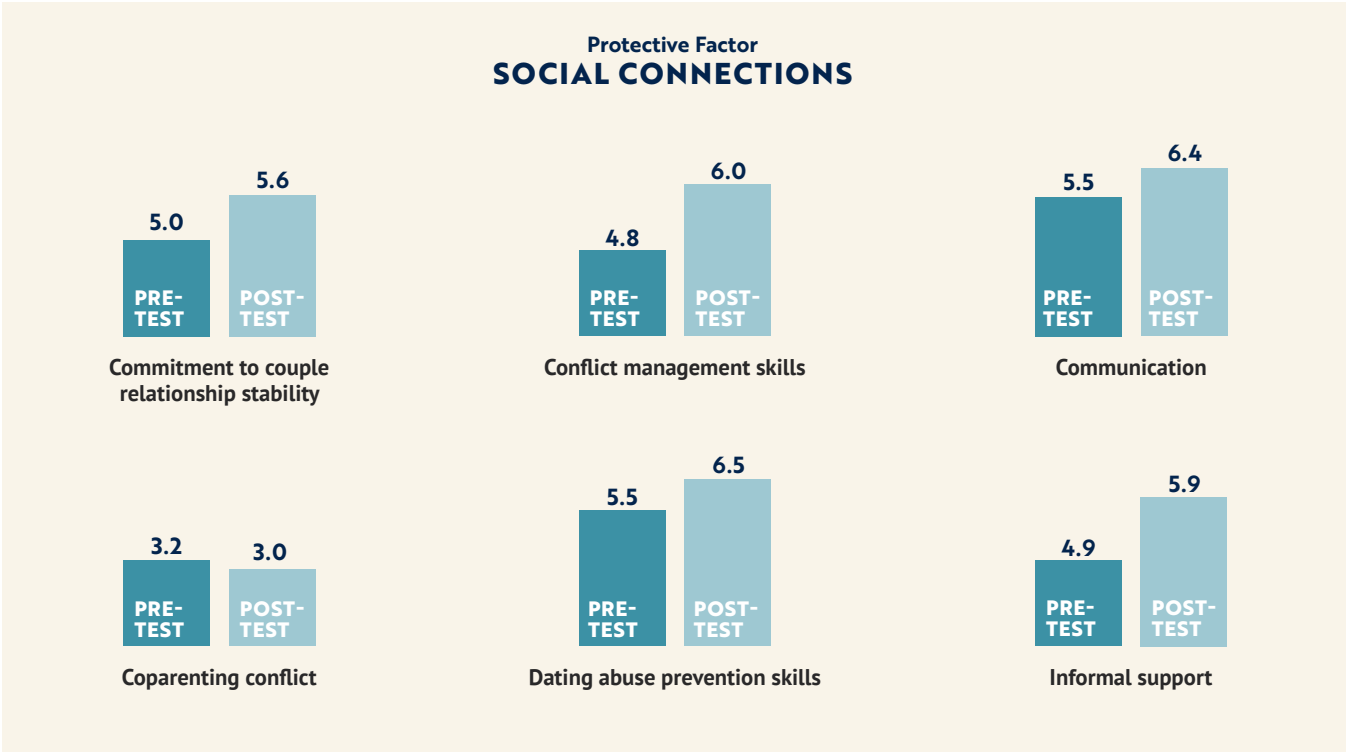


PUBLIC ASSISTANCE**



***For individual participants (excluding students) over the age of 18*

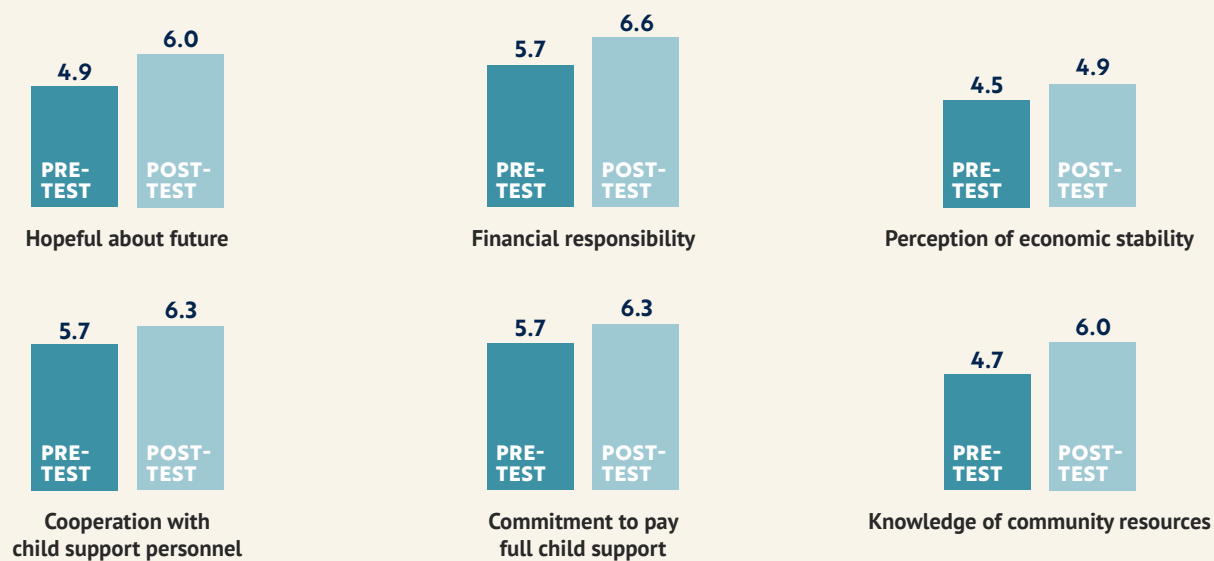
A sample of Fatherhood program participants ($n=9,013$) responded to an assessment of 19 goals common across programs using a scale of 1 - 7. Analyses of measures (some using multi-item scores; reliabilities [Cronbach's α] range from .72 to .86) using paired sample t-tests revealed statistically significant ($p<.001$) improvements for participants, on average, in all but one targeted area (i.e., depression) from pre-program to post-program. The effect sizes ranged from .23 to .69. The average magnitude of the effect sizes for these improvements was .48 and can be considered moderate (i.e., .25 small effect, .50 moderate effect, .75 large effect).



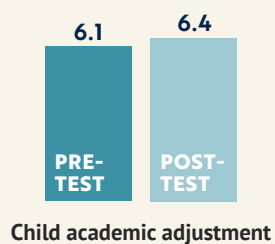
The Fatherhood class has been very fulfilling and has taught me even though I have made mistakes I can still be a good dad and person. I can be productive and a good role model for my children."

– Fatherhood Program Participant 2017-2018

Protective Factor
CONCRETE SUPPORT IN TIMES OF NEED

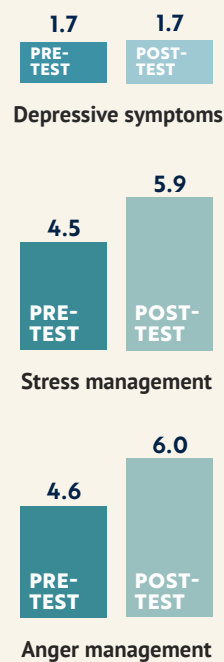


Protective Factor
SOCIAL AND EMOTIONAL COMPETENCE OF CHILDREN



Paired sample *t*-test tables with results for testing mean score differences from pre-program to post-program are located on page 39 in the appendix.

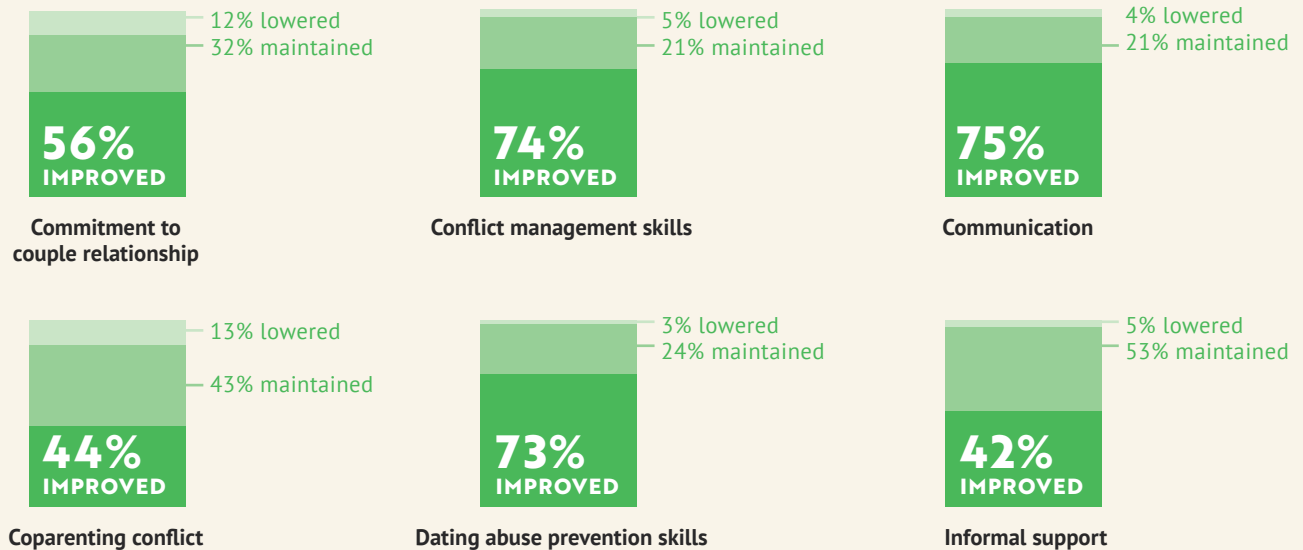
Protective Factor
PARENTAL RESILIENCE



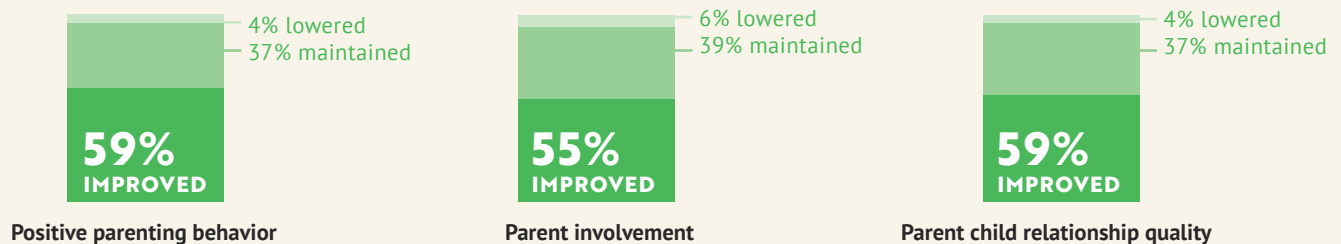
Key Changes

Descriptive analyses also were examined to provide a clearer picture of the numbers of participants who experienced changes. Each year, we calculated the percentage of participants who reported improvement in their individual scores from pre-program to post-program, maintained their score, or declined. For these cumulative results, we averaged across the 6 year period. Consistently, a large portion rated themselves as improved in each area assessed.

Protective Factor SOCIAL CONNECTIONS



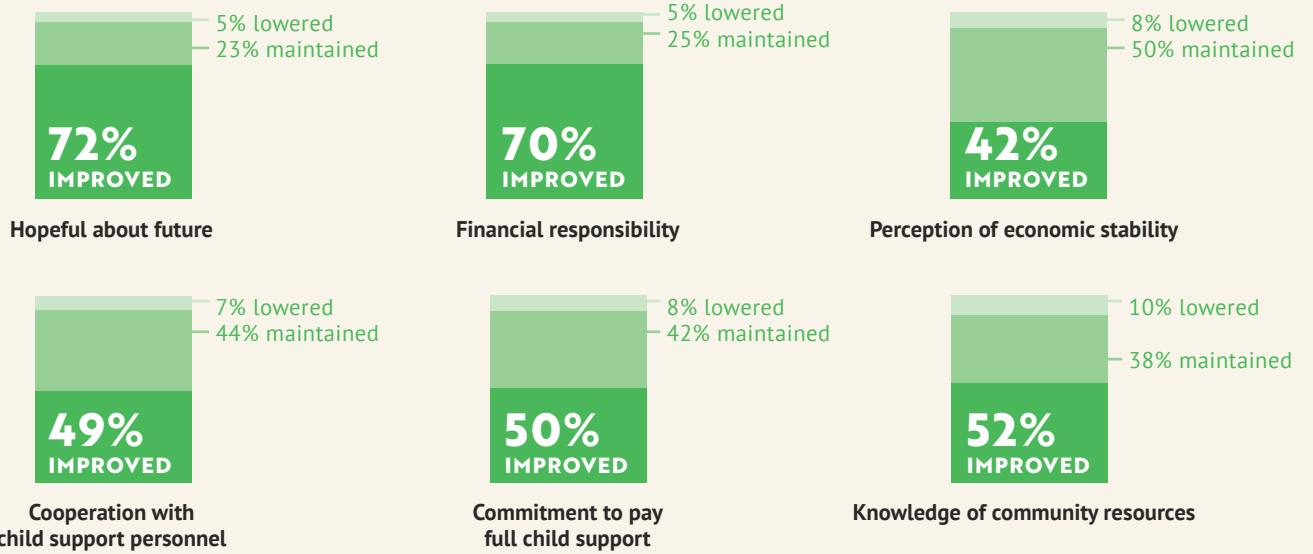
Protective Factor KNOWLEDGE OF PARENTING & CHILD DEVELOPMENT



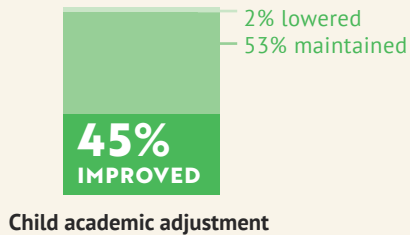
Being in the fatherhood program allowed me to obtain a job after being released out of prison, open up a checking account, and buy a car which allowed me to go back and forth to work and provide for my kids/family."

– Fatherhood Program Participant 2019-2020

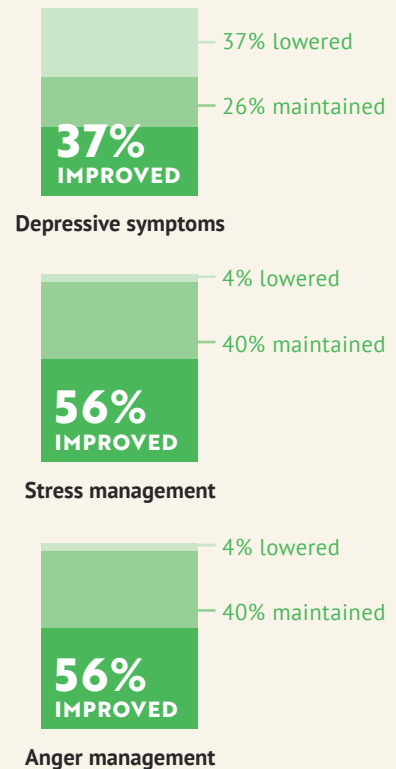
Protective Factor
CONCRETE SUPPORT IN TIMES OF NEED



Protective Factor
**SOCIAL AND EMOTIONAL
COMPETENCE OF CHILDREN**



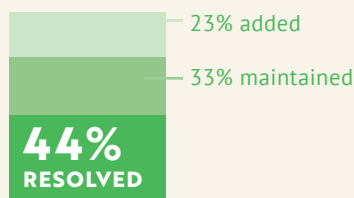
Protective Factor
PARENTAL RESILIENCE



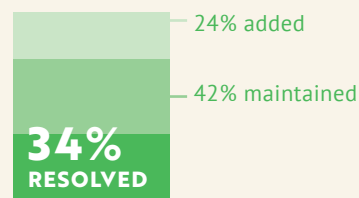
Fatherhood Challenges

Fathers also indicated improvements in some challenges. Below we detail the proportion of fathers across several years who indicated that an area of challenge prior to the program was now no longer a problem or challenge after participation. *These improvements are notable given that many of these areas represent systemic and structural challenges and barriers that are more difficult to address by local agencies offering individually focused programs.*

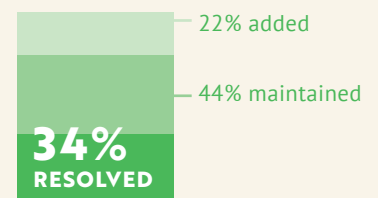
FATHERHOOD CHALLENGES



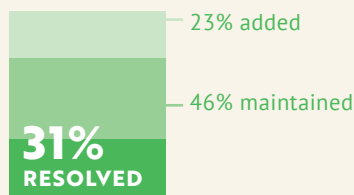
Unemployment



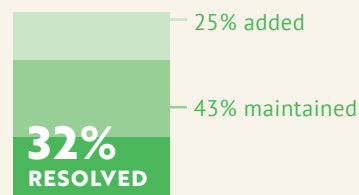
Not having a steady place to live



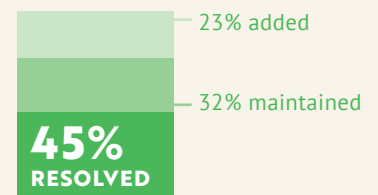
Drug/alcohol abuse



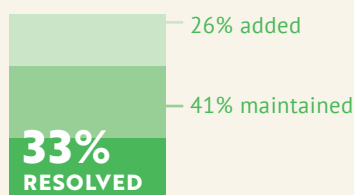
Physical health problems



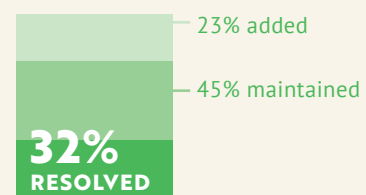
Living too far from your child(ren)



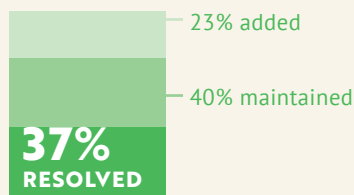
Keeping a job when you have one



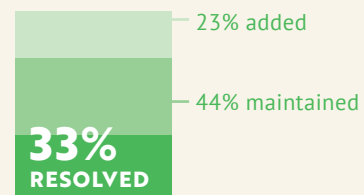
Not knowing how to deal with family or civil court



Transportation issues



Not having health insurance for your child(ren)



Not having health insurance for yourself



“ I love my family to death, even when I didn’t love myself. They really motivated me and they really got me thinking right and they didn’t make me feel like they were just saying it because it was their job. They really looked at me and said, ‘no you can do it.’”

– Fatherhood Program Participant 2015-2016



Youth Programs

3rd – 5th Grade

Youth in 3rd – 12th grade around the state were served through 65 programs that included a variety of school-based, non-school-based/after school, and mentoring programs. These programs varied in their emphasis, but all were focused on reducing risks for children and enhancing their well-being by promoting the protective factor: social and emotional competence of children. Common goals of programs noted in their proposals for youth in 3rd-5th grade center on participant improvement in:

- social skill development
- improved abuse awareness
- self-confidence
- emotion identification and regulation
- enhanced assertiveness
- cooperative behavior

3rd – 5th Grade Demographics

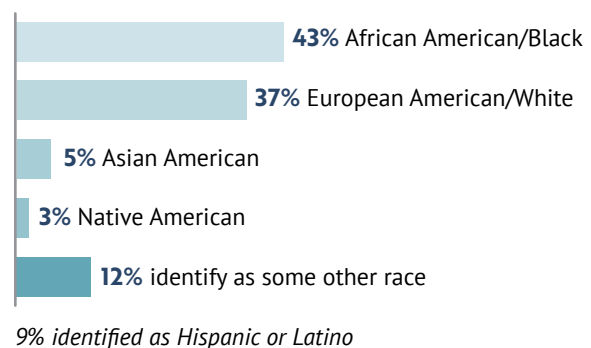
Data on youth demographics from school-based, non-school based/after school, and mentoring programs offered to children in 3rd – 5th grade indicate that participants were predominantly African American/Black or European American/White, balanced in gender, and diverse in age.

Note: Youth who participated only in community awareness programs did not provide demographic information.

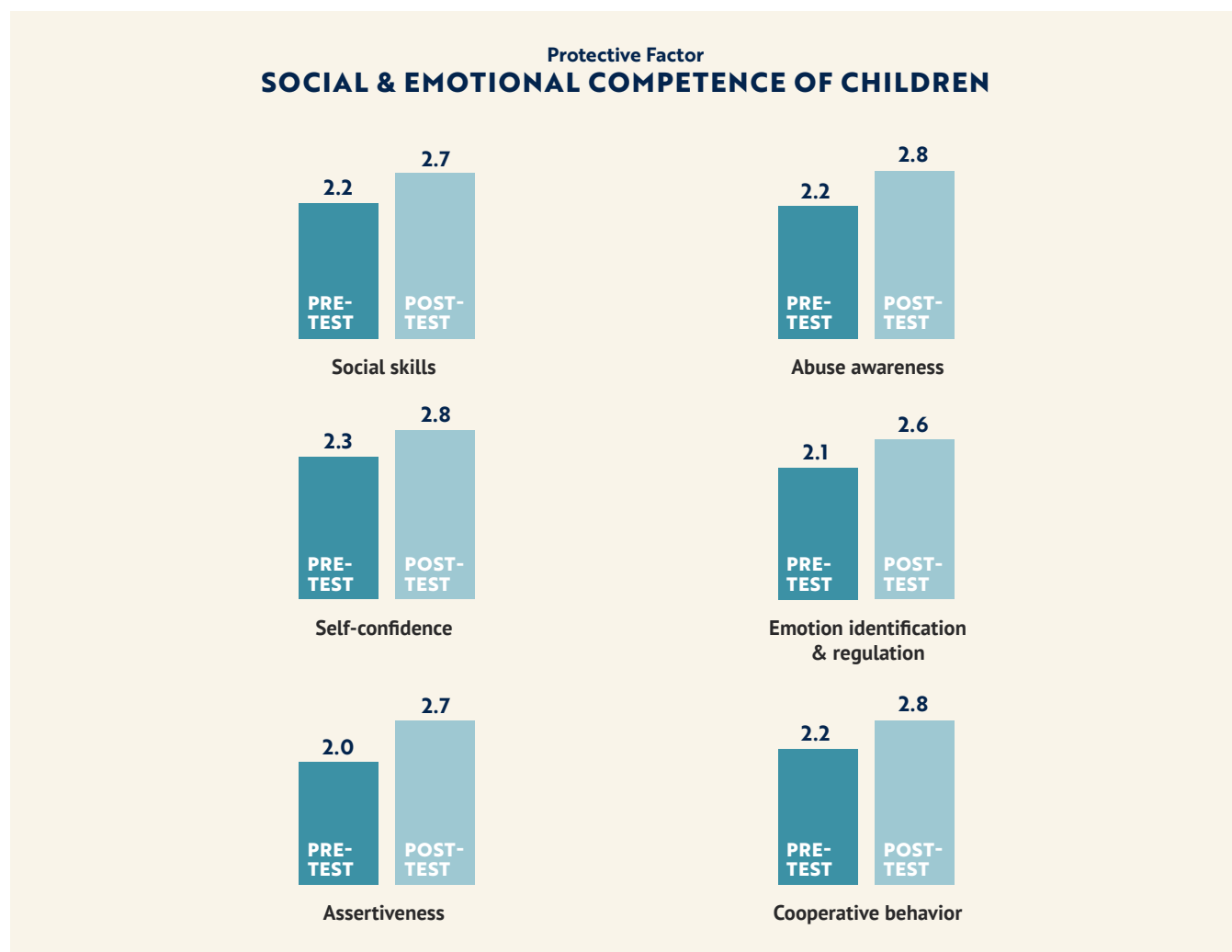
GENDER



RACE & ETHNICITY



A sample of 3rd – 5th grade participants (n=24,019) responded to an assessment of 6 goals using a scale of 1 - 3. Analyses of measures (some using multi-item scores; reliabilities [Cronbach's α] range from .64 - .65) using paired sample t-tests revealed statistically significant ($p < .001$) improvements for participants, on average, in ALL targeted areas from pre-program to post-program. The effect sizes ranged from .60 to .94. The average magnitude of the effect sizes for these improvements was .75 and can be considered large (i.e., .25 small effect, .50 moderate effect, .75 large effect).



Paired sample t-test tables with results for testing mean score differences from pre-program to post-program are located on page 40 in the appendix.



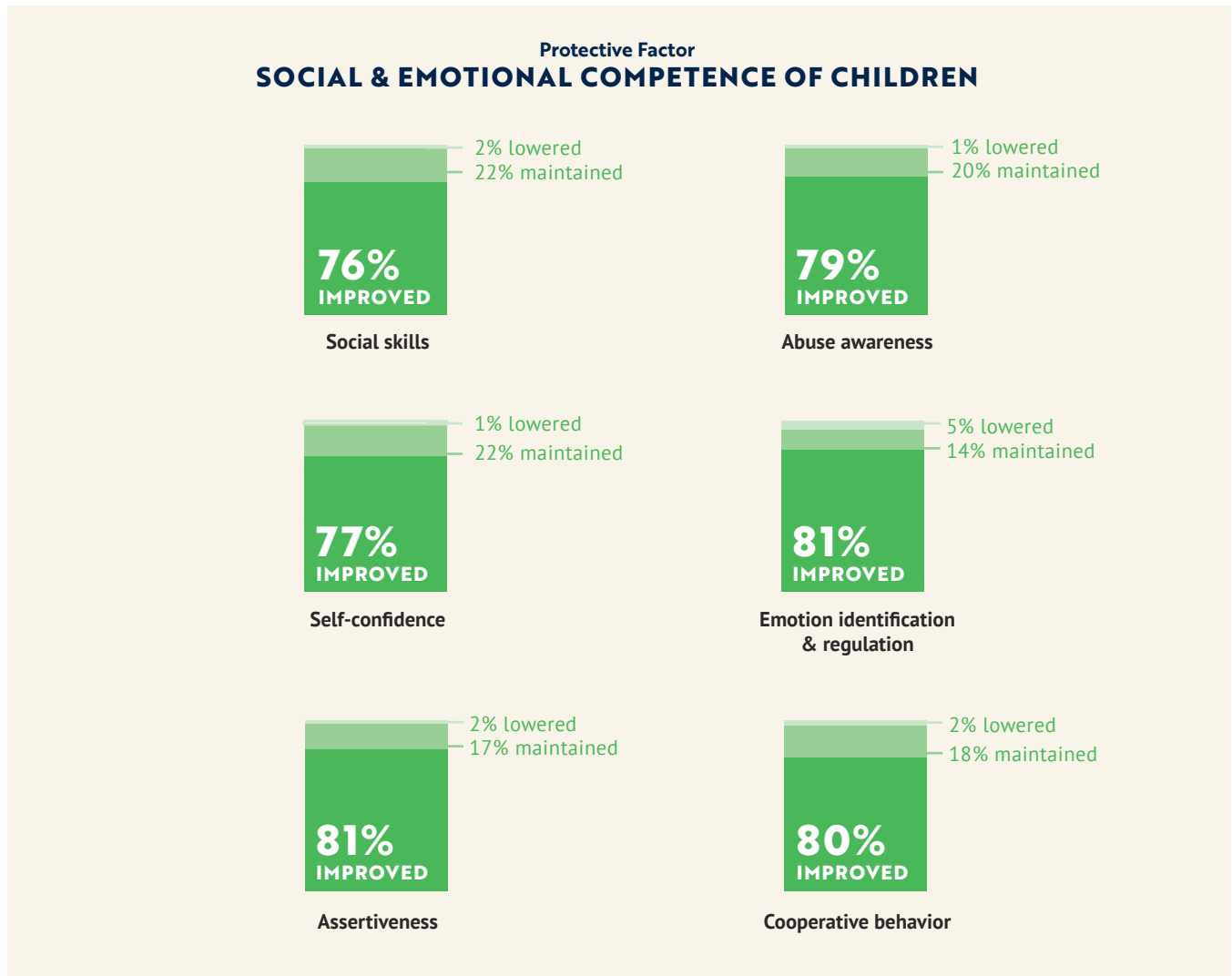
I have learned a lot, like learning how to manage time and learning how to try new things. The program allows me to get out of the house more and teaches me how to start using my voice."

– Youth Mentoring Program Participant 2020-2021



Key Changes

Descriptive analyses also were examined to provide a clearer picture of the numbers of participants who experienced changes. Each year, we calculated the percentage of participants who reported improvement in their individual scores from pre-program to post-program, maintained their score, or declined. For these cumulative results, we averaged across the 6 year period. Consistently, a large portion rated themselves as improved in each area assessed.



//

I want to be just like her, she graduated from college, and I want to graduate from college."

– Youth Mentoring Program Participant 2015-2016



Youth Programs

6th – 12th Grade

Youth in 3rd – 12th grade around the state were served through 65 programs that included a variety of school-based, non-school-based/after school, and mentoring programs. These programs varied in their emphasis, but all were focused on reducing risks for children and enhancing their well-being by promoting the protective factor: social and emotional competence of children. Common goals of programs noted in their proposals for youth in 6th – 12th grade center on participant improvement in:

- emotion knowledge
- self-confidence
- social competence
- commitment to avoid risky & delinquent behavior
- cooperative behavior
- abuse awareness & resourcefulness

6th – 12th Grade Demographics

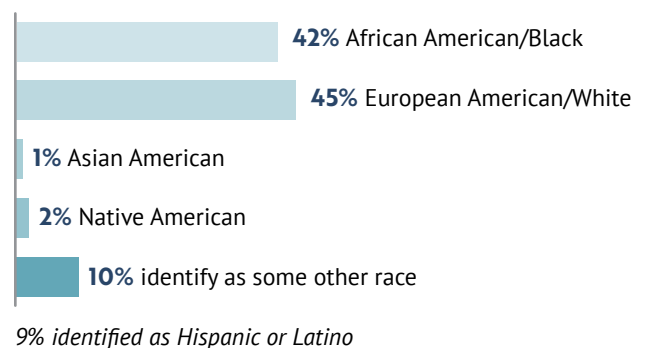
Data on youth demographics from school-based, non-school based/after school, and mentoring programs offered to children in 6th – 12th grade indicate that participants were predominantly African American/Black or European American/White, balanced in gender, and diverse in age.

Note: Youth who participated only in community awareness programs did not provide demographic information.

GENDER



RACE & ETHNICITY



A sample of 6th – 12th grade participants (n=20,241) responded to an assessment of 7 goals using a scale of 1 – 3. Analyses of measures (some using multi-item scores; reliabilities [Cronbach’s α] range from .67 - .72) using paired sample t-tests revealed statistically significant ($p < .001$) improvements for participants, on average, in ALL targeted areas from pre-program to post-program. The effect sizes ranged from .57 to .80. The average magnitude of the effect sizes for these improvements was .67 and can be considered moderate to large (i.e., .25 small effect, .50 moderate effect, .75 large effect).



Paired sample t-test tables with results for testing mean score differences from pre-program to post-program are located on page 40 in the appendix.

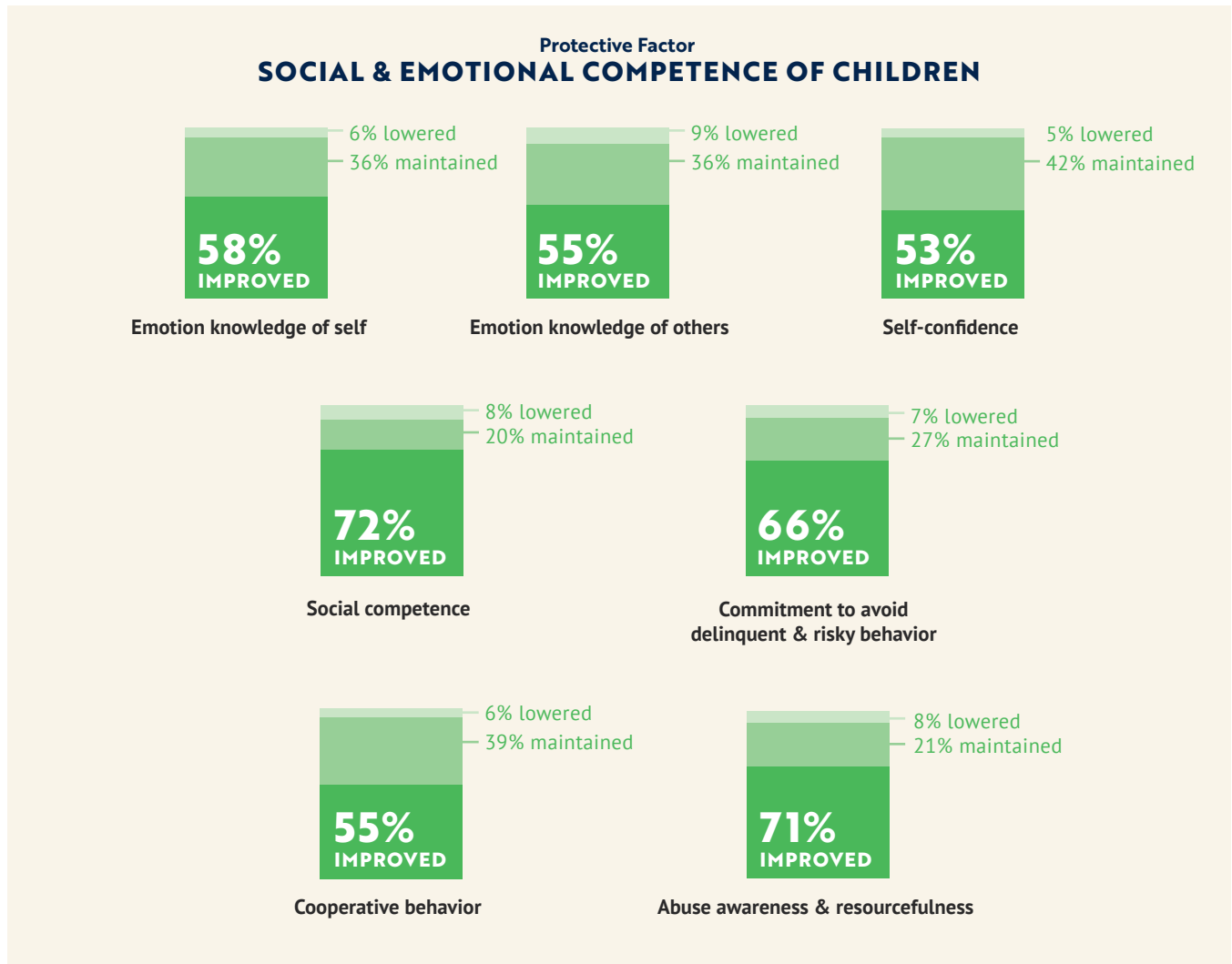
//

My son’s Big Brother match is the best thing that has happened to us. They treat my son just like family. They love him and they treat me and my other son just like family as well.”

– Youth Mentoring Program Participant 2020-2021

Key Changes

Descriptive analyses also were examined to provide a clearer picture of the numbers of participants who experienced changes. Each year, we calculated the percentage of participants who reported improvement in their individual scores from pre-program to post-program, maintained their score, or declined. For these cumulative results, we averaged across the 6 year period. Consistently, a large portion rated themselves as improved in each area assessed.



//

Your program has helped me so much. You have taught me that it is ok to ask for help and it is ok to tell someone if something is going on with me or someone that I know and that I won't get in trouble. Thank you!"

– 7th Grade Student in School-Based Program 2018-2019



“ Having my Big Sister is the best thing ever. I’m the only one in my class to have one so it makes me feel special to have her. We do a lot of stuff together like play on the playground, play with Playdough, make bracelets, and do school work. Oh, her and my dad have the same name too.” (Dad is deceased)

– Youth Program Participant 2020-2021

Public Awareness and Training Programs

There were 19 programs funded to conduct Public Awareness activities. These programs provided information to professionals and community members on child abuse and neglect to raise awareness and increase 1) the likelihood of reporting suspected child abuse and neglect and 2) the use of services provided for family support and child abuse and neglect situations. Public Awareness and Training activities also address common risks identified as barriers to health and success (i.e., preventing tobacco use and/or tobacco cessation for youth). Public Awareness and Training programs were especially beneficial to communities during the recent years of the global pandemic. Families were able to reach out and receive assistance and resources due to these programs' continued awareness efforts within communities.

Additionally, many of the Youth, Parent Education and Home Visiting, Respite, and Fatherhood programs also made efforts to raise community awareness about community resources and child abuse and neglect and documented their efforts.

Due to the large numbers attending public awareness and training programs, individual surveys were not administered to these participants. Staff tracked the number of face-to-face encounters and reported these to the evaluation team monthly and quarterly.



Public Awareness and Training programs/presentations directly served a total of 3,920,631 individuals.

Staff also tracked exposures to other community and public awareness efforts implemented within communities through various media outlets, such as billboards, radio and newspaper ads, agency websites, and social media (Facebook, Instagram, and Snapchat).



45,296,417 exposures/impressions were documented.



Big Brothers Big Sisters has been presenting (in person and virtually) with our juvenile detention center students for years! The awareness BBBS brings to topics my students may not otherwise know about has had such a positive impact on them. They also supply them with resources they can utilize once they are back home in order to establish and maintain a healthy, successful life."

– Public Awareness and Training Program Participant 2020-2021



Parent Education & Home Visiting Programs

TABLE 1. PAIRED SAMPLE t-TEST FOR MEAN CHANGE OVER TIME

	Pre-Test		Post-Test				
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>	<i>df</i>	<i>t</i>	Cohen's <i>d</i>
PARENTAL RESILIENCE							
Stress Management Skills	2.37	.82	3.43	.64	17939	-148.32***	1.12
Skills to Manage Maltreatment Risk	3.11	.82	3.78	.45	17718	-108.12***	.81
KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT							
Understanding of Various Forms of Child Maltreatment	2.86	.81	3.65	.54	17842	-126.66***	.95
Medical Care Commitment	3.17	.90	3.73	.51	17662	-85.85***	.65
Parenting Skills & Child Development Knowledge	2.48	.75	3.54	.59	17938	-156.60***	1.17
CONCRETE SUPPORT IN TIMES OF NEED							
Knowledge of & Use of Support Services	2.29	.83	3.44	.62	17965	-156.33***	1.16
SOCIAL CONNECTIONS							
Use of Informal Supportive Networks	2.54	.99	3.47	.70	17771	-117.67***	.88

*** $p < .001$. Cohen's *d* reported in absolute values.

Respite Care Programs

TABLE 2. PAIRED SAMPLE t-TEST FOR MEAN CHANGE OVER TIME

	Pre-Test		Post-Test				
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>	<i>df</i>	<i>t</i>	Cohen's <i>d</i>
PARENTAL RESILIENCE							
Stress Level^	2.90	.81	2.19	.64	1781	40.23***	.95
Positive View of Child	3.05	.80	3.58	.60	1995	-28.89***	.65
Knowledge of & Use of Support Services	2.25	.83	3.19	.71	2019	-40.44***	.90
Use of Informal Supportive Networks	2.36	.92	3.19	.76	2001	-37.93***	.85

*** $p < .001$. Cohen's *d* reported in absolute values. ^reductions are desired for these measures.

Fatherhood Programs

TABLE 3. PAIRED SAMPLE t-TEST FOR MEAN CHANGE OVER TIME

	Pre-Test		Post-Test				
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>	<i>df</i>	<i>t</i>	Cohen's <i>d</i>
SOCIAL CONNECTIONS							
Commitment to Couple Relationship Stability	5.04	1.96	5.55	1.89	7059	-26.35***	.31
Conflict Management Skills	4.78	1.74	6.01	1.27	8033	-60.37***	.67
Communication	5.47	1.61	6.41	1.15	8083	-51.60***	.57
Coparenting Conflict ^	3.19	1.92	3.01	1.84	6657	18.36***	.23
Dating Abuse Prevention Skills	5.49	1.88	6.45	1.20	7917	-47.44***	.53
Informal Support	4.94	1.95	5.94	1.53	2419	-27.88***	.57
CONCRETE SUPPORT IN TIMES OF NEED							
Hopeful About Future	4.93	1.73	6.03	1.18	8144	-58.11***	.64
Financial Responsibility	5.65	1.77	6.62	.99	8095	-47.37***	.53
Perception of Economic Stability	4.49	2.08	4.91	1.96	7685	-20.66***	.24
Cooperation with Child Support Personnel	5.69	2.08	6.30	1.95	5117	-24.06***	.34
Commitment to Pay Full Child Support	5.67	2.14	6.29	1.75	5015	-27.75***	.39
Knowledge of Community Resources	4.70	1.97	5.95	1.48	2414	-33.54***	.68
KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT							
Positive Parenting Behavior	5.77	1.40	6.36	1.07	7634	-43.35***	.50
Parent Involvement	6.02	1.53	6.60	1.28	7513	-29.43***	.34
Parent Child Relationship Quality	5.95	1.45	6.37	1.20	7753	-31.98***	.36
SOCIAL AND EMOTIONAL COMPETENCE OF CHILDREN							
Child Academic Adjustment	6.10	1.53	6.43	1.23	6616	-24.69***	.30
PARENT RESILIENCE							
Depressive Symptoms	1.66	0.59	1.67	0.59	2298	-.37	
Stress Management	4.50	2.02	5.88	1.60	4442	-45.78***	.69
Anger Management	4.59	2.05	5.97	1.57	4446	-45.10***	.68

*** $p < .001$. Cohen's d reported in absolute values. ^reductions are desired for these measures.

3rd – 5th Grade

TABLE 4. PAIRED SAMPLE t-TEST FOR MEAN CHANGE OVER TIME

	Pre-Test		Post-Test				
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>	<i>df</i>	<i>t</i>	Cohen's <i>d</i>
SOCIAL AND EMOTIONAL COMPETENCE OF CHILDREN							
Social Skills	2.17	.76	2.71	.67	22886	-94.11***	.62
Abuse Awareness	2.19	.85	2.76	.53	22712	-101.41***	.67
Self-Confidence	2.34	.75	2.78	.49	22708	-90.18***	.60
Emotion Identification & Regulation	2.07	.55	2.63	.44	23433	-138.50***	.91
Assertiveness	1.95	.73	2.68	.55	23038	-143.24***	.94
Cooperative Behavior	2.24	.65	2.75	.43	23299	-118.50***	.78

****p*<.001. Cohen's *d* reported in absolute values.

6th – 12th Grade

TABLE 5. PAIRED SAMPLE t-TEST FOR MEAN CHANGE OVER TIME

	Pre-Test		Post-Test				
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>	<i>df</i>	<i>t</i>	Cohen's <i>d</i>
SOCIAL AND EMOTIONAL COMPETENCE OF CHILDREN							
Emotion Knowledge of Self	2.63	.92	3.17	.86	19167	-87.22***	.63
Emotion Knowledge of Others	2.52	.88	3.08	.88	19190	-89.25***	.64
Self-Confidence	2.78	.88	3.28	.81	19127	-82.53***	.60
Social Competence	2.68	.64	3.22	.61	19654	-112.47***	.80
Commitment to Avoid Delinquent & Risky Behavior	3.18	.71	3.50	.58	19582	-80.42***	.58
Cooperative Behavior	2.75	.90	3.26	.80	19342	-85.38***	.61
Abuse Awareness & Resourcefulness	2.70	.75	3.29	.64	19538	-112.11***	.80

****p*<.001. Cohen's *d* reported in absolute values.

Reflections

For the past six years, the Auburn University evaluation team has had the extraordinary opportunity to partner with and document the work of ADCANP-funded programs. We wish to express our appreciation to Sallye R. Longshore, the visionary ADCANP Director, for entrusting us with this important responsibility for the past 6 years. We thought it was appropriate to pause and reflect on and summarize the impact that has occurred thus far under her leadership, and we are energized and excited about the planned work together in the years ahead.

Words cannot adequately express how much we value the years of collaboration and partnership with Sallye, her devoted Deputy Director Tracy Plummer, and her dedicated staff and Board of Directors. The unwavering support and continued investment in the evaluation of prevention programs is a model for the rest of the country. Working for you, with you, and with the people of Alabama is truly an honor and privilege for us, the evaluation team.

C.S. Lewis said, "You can't go back and change the beginning, but you can start where you are and change the ending." Child maltreatment unfortunately has occurred for many generations, but importantly, individuals' experiences in prevention programs in Alabama may be changing the course. This 6-year cumulative evaluation report provides evidence that **child maltreatment risk is consistently reduced in Alabama year after year by ADCANP-funded programs**. Over 500 hard-working state and community agency staff every year are devoted to meeting community members where they are and working with them to strengthen their individual knowledge and skills, thus strengthening families and ensuring reduced risks for children.

As evidence of program effects accumulated, we were privileged to see these efforts expanded significantly. Complacency was not an option for Sallye and ADCANP. From the beginning of her appointment as Director, she has worked tirelessly to secure more award dollars each year to expand and support more programs so more lives could be positively impacted by ADCANP-funded programs. Incredibly, since 2015, the available funding for prevention program awards increased by 415%.

While this summary report provides strong evidence for consistent, predictable program effectiveness, we acknowledge that our evaluation of prevention programs is necessarily limited. We strive to empower program participants to share program effects through evaluation surveys, but we are mindful of not burdening participants with extensive data collection. We center our evaluation on common goals for programs. Our evaluation results, therefore, provide an empirically valid view of many key benefits for individuals and families in ADCANP-funded prevention programs. We recognize that all programs have additional and unique goals and we acknowledge that there is much significant impact in the immediate and in the long-term that is observed and experienced but remains undocumented. ADCANP and program staff hear these stories and we have collected some through video documentation. Collectively, quantitative results and the individual voices resonate and affirm the value of these prevention efforts. We note that in the last two years, in particular, their hard work has been a lifeline to so many as families continue to face uncertainties and challenges that can only be overcome through education, relationships, support, and compassion.

We want to commend ADCANP/CTF, their staff, and the grantee agency staff for demonstrating resilience during the challenging times of this program year. You embraced the challenges yet again, created opportunities, and restructured strategies to accomplish and even expand your projects' goals. You invested in collecting evaluation information. We continue to be invested in providing meaningful and useful analyses of the data for agencies, the ADCANP/CTF staff and Board, and ADCANP/CTF funding sources. We hope you will share widely this report that demonstrates the impressive cumulative outreach and some of the many positive effects for children and families in Alabama that you have had. It is clear that you have changed the ending for so many towards a healthy, productive future. Your work matters and we are honored to help tell your story.

PY 2015-2021 Report

SUBMITTED IN MARCH 2022 BY:

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