

SUPPORTIVE
COMMUNITIES
RESILIENT
FAMILIES
THRIVING
CHILDREN

Indiana's Framework
for the Prevention of
Child Abuse & Neglect

COMMUNITY
IMPLEMENTATION
TOOLKIT



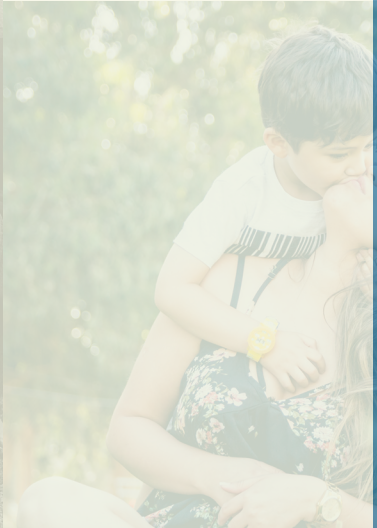
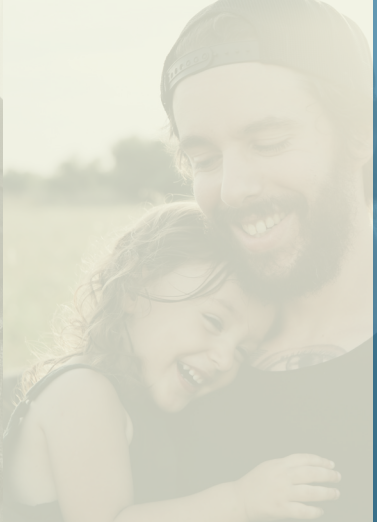


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We value the contribution of the statewide advisory team who provided strategic guidance throughout the development of the prevention framework and toolkit, and the project management team who developed the framework and toolkit.

We also acknowledge the overall work of Chapin Hall at the University of Chicago whose Child Maltreatment Prevention: A Planning Framework for Action we referenced as a guide for this project, along with Colorado and South Carolina whose frameworks we used as models.

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INTRODUCTION TO THE FRAMEWORK

SUPPORTIVE COMMUNITIES, RESILIENT FAMILIES, THRIVING CHILDREN

The purpose of Indiana's *Supportive Communities, Resilient Families, Thriving Children* framework is to create a statewide approach to achieve the vision that:

**ALL CHILDREN THRIVE IN SAFE, STABLE,
NURTURING, AND SUPPORTIVE FAMILIES
AND COMMUNITIES THAT FOSTER RESILIENCE
AND WELL-BEING.**

The framework provides a road map for the state and local communities to better support, empower, and protect families. It is centered on primary prevention efforts, or services and interventions available to the general population, to prevent child maltreatment before it happens. This toolkit is a resource to support local communities and leaders in implementing the framework and preventing child abuse and neglect.

This framework and toolkit will help communities increase the effectiveness, alignment, and coordination of existing child maltreatment prevention efforts and identify new opportunities to support the resilience and well-being of all children and families.

Child Abuse And Neglect In Indiana

The Child Abuse Prevention and Treatment Act (CAPTA) defines child abuse and neglect as “any recent act or failure to act on the part of a parent or caregiver that results in death, serious physical or emotional harm, sexual abuse, or exploitation, or an act or failure to act that presents an imminent risk of serious harm.”¹

As of 2017, Indiana had the second highest rate of child maltreatment in the nation. While the state saw a decrease in 2018 and 2019, **Indiana still has one of the highest rates of child maltreatment in the nation.**² In 2019, there were 28,799 victims of substantiated allegations of child maltreatment in Indiana, for a rate of 18.4 per 1,000 children. While the number of victims decreased since 2018 (32,799), this number has increased 8.1% since 2014 (26,634). In 2019, 61.9% of the total removals (8,641) involved

parental substance use as a contributing reason for the removal. This is a 2.8% increase from 2014. The most common form of substantiated allegations is neglect, which accounted for 82.9% of substantiated cases in 2018.³

Nationally, the child welfare landscape is experiencing a shift, with the introduction and implementation of the [Family First Prevention Services Act](#). This shift includes a focus on supporting families through additional prevention services and expanding funding opportunities. As Indiana considers how to direct resources upstream toward more preventative services, this framework will empower key stakeholders at both the state and local level to move the needle in preventing abuse and neglect for Indiana children.

¹ CAPTA Reauthorization Act of 2010 (P.L. 111-320), 42 U.S.C. § 5101, Note (§ 3)

² U.S. Department of Health & Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau. (2021). [Child maltreatment 2019](#).

³ Indiana Youth Institute. (2021). [2021 Indiana KIDS COUNT® data book: A profile of hoosier youth](#).

INTRODUCTION TO THE FRAMEWORK

Background

This project began in 2018, when the [Child Abuse Prevention Sub-Committee of the Commission on Improving the Status of Children](#) identified the possible need for a statewide child abuse prevention framework. Other states have developed similar frameworks, and other entities, such as the Centers for Disease Control and Prevention, have identified such frameworks as a promising practice.

The Sub-Committee reviewed several existing resources and statewide plans/frameworks, including the *Child Maltreatment Prevention: A Planning Framework for Action*, developed by Chapin Hall at the University of Chicago⁴, and statewide frameworks created by Colorado and South Carolina.

Based on its review, the Sub-Committee made a recommendation to the Commission that a framework be developed for Indiana. In May 2019, the Commission voted to approve the recommendation. The Indiana Department of Child Services (DCS) agreed to fund the development of the framework and this accompanying toolkit. DCS contracted Transform Consulting Group (TCG) to provide project management and research support for the development of this framework and toolkit. The Villages/Prevent Child Abuse Indiana and the Indiana Minority Health Coalition worked closely with DCS and TCG as key partners on this project.

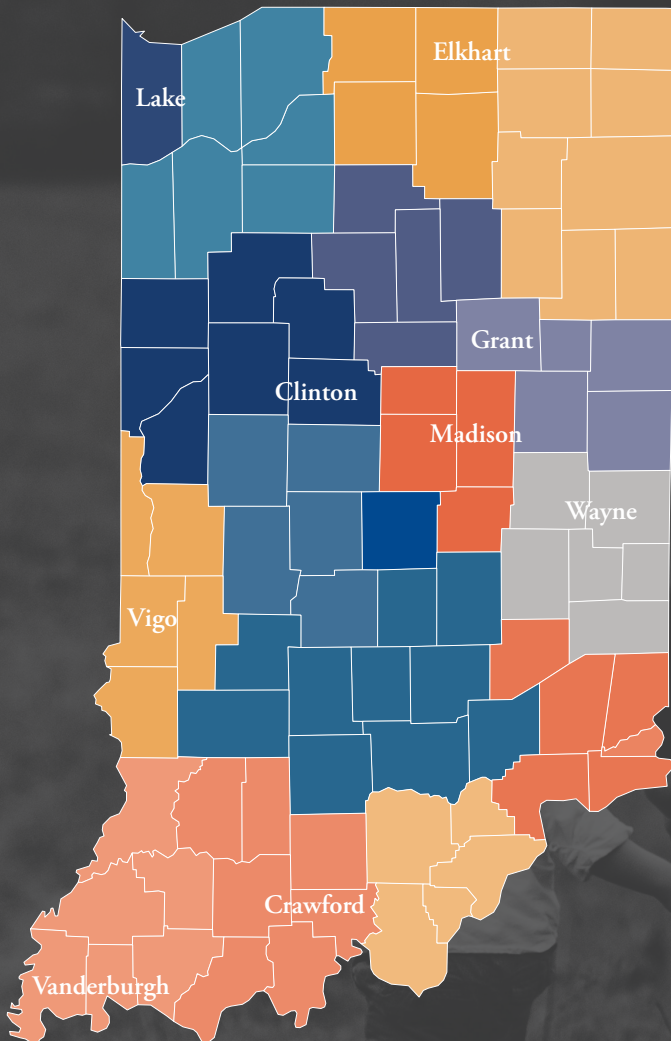
The project management team described above convened a statewide advisory team to provide strategic input in the planning and creation of this framework. This team represents multiple state agencies, prevention and advocacy leaders, philanthropic funders, and community partners from other sectors. A list of the advisory team members is included in the Acknowledgments section of this toolkit.

In addition to the feedback provided by this advisory team, the project management team solicited input from parents and community organizations in nine pilot counties, which can be found on the map on the following page. The project management and advisory team considered the following factors when selecting the pilot counties:

- Geographic distribution
- Rural and urban representation
- Demographic diversity
- Child maltreatment rate
- The existence of related initiatives

A total of 1,979 parent responses were collected. Two thirds of respondents (65%) reported living in a pilot county or one of the surrounding counties. The remaining responses came from other counties in the state. A total of 124 community organizations responded to the partner survey, 91% of whom reported living in a pilot county.

⁴Daro, D., Jarpe-Ratner, E., Karter, C., Crane, K., Bellamny, J., & Seay, K. (2017). *Child maltreatment prevention: A planning framework for action*. Chapin Hall at the University of Chicago.



Framework Components

The framework is made up of five core components. The actual components can be found in the corresponding framework document. The purpose of the components are as follows:

VISION STATEMENT:

The framework vision statement is the aspirational vision that we aim to achieve for Indiana.

GUIDING PRINCIPLES:

These principles serve as best standards for Indiana and local communities of what defines an effective prevention effort.

OUTCOMES:

The framework includes four overarching outcome domain areas where improvements would contribute to achieving Indiana's vision for children.

INDICATORS:

Four to five indicators are included for each of the outcome domains. These indicators provide a way for Indiana and local communities to track their progress throughout implementation of this framework.

STRATEGIES:

The strategies included in the framework provide communities with ideas of prevention approaches and interventions they can use to move the needle in their community and work toward the framework's desired outcomes.

HOW TO USE THIS TOOLKIT

This prevention framework provides a road map for the state of Indiana and local communities to prevent maltreatment while promoting family and child well-being and resilience. This toolkit provides communities with the information and tools needed to implement the framework at the local level. This toolkit can be used by any organization and/or group that would like to align and strengthen prevention efforts in their community. The toolkit is organized by the following sections, which provide guidance on each step of the planning and implementation process:

ADOPT A COLLECTIVE IMPACT APPROACH



Bring together a cross-sector group of partners to work toward the common agenda of decreasing child maltreatment rates through the use of this framework. This section of the toolkit provides guidance on using a Collective Impact approach to accomplish this task.

IDENTIFY COMMUNITY NEEDS AND STRENGTHS



Identify the needs in your community by developing a community profile. It is also recommended that communities compile a catalogue of available family resources and services, in order to identify gaps. Solicit community and family feedback using a variety of methods. The needs and strengths identified through this process should then inform how your community implements the framework. This section of the toolkit provides guidance on what data to include in the community profile, suggested data sources, how to create a catalogue of existing resources and how to collect feedback from key stakeholders.

CREATE A COMMUNITY ACTION PLAN



Use your community data, stakeholder feedback, service assessment findings and evaluate the community's strengths and opportunities. This section of the toolkit provides guidance and a template for how to create a community action and implementation plan.

PROMOTE AWARENESS



Raise awareness about the work being done in your community. This section of the toolkit provides recommendations for how to launch an awareness campaign.

TRACK YOUR PROGRESS



Monitor your progress and assess your efforts in reaching your audience and achieving your desired goals and outcomes.



ADOPT A COLLECTIVE IMPACT APPROACH

The first step in implementing *Indiana's Supportive Communities, Resilient Families, Thriving Children* framework is to bring together a cross-sector group of partners to work toward the common agenda of decreasing child maltreatment rates. Collective Impact is a structured form of collaboration that allows diverse organizations and partners to come together and address a social problem that is too complex for any one agency to solve on its own.

Why Collective Impact

Preventing child maltreatment and creating supportive communities where families thrive is not a simple task. Everyone in the community must play a role in supporting families, whether it be as a neighbor, community organization, business, service provider, or in another capacity. Adopting a Collective Impact approach will help you bring key community members to the table to work together to improve outcomes for children and families.

A Collective Impact approach will help you facilitate public-private partnerships that truly lead to transformational change. Through this approach, you can convene representatives from multiple organizations and sectors to work toward a common goal. If your community is considering using a Collective Impact approach to prevent child maltreatment, first make sure the three preconditions for Collective Impact are in place:

1. **INFLUENTIAL CHAMPIONS:** Identify influential individuals who you can involve to champion your collective prevention efforts in the community.
2. **SUFFICIENT RESOURCES:** Make sure you have sufficient financial and social resources to support the planning and implementation process.
3. **URGENCY FOR CHANGE:** Identify reasons for urgency to address this issue of child maltreatment in new and different ways.

If any of these preconditions are not in place, you should focus on cultivating these elements before beginning the Collective Impact process to implement this framework. For example, if you do not have funding to support the work, consider connecting with your local community foundation, United Way, or local corporations to explore possible funding partnerships.

Getting Started With Collective Impact

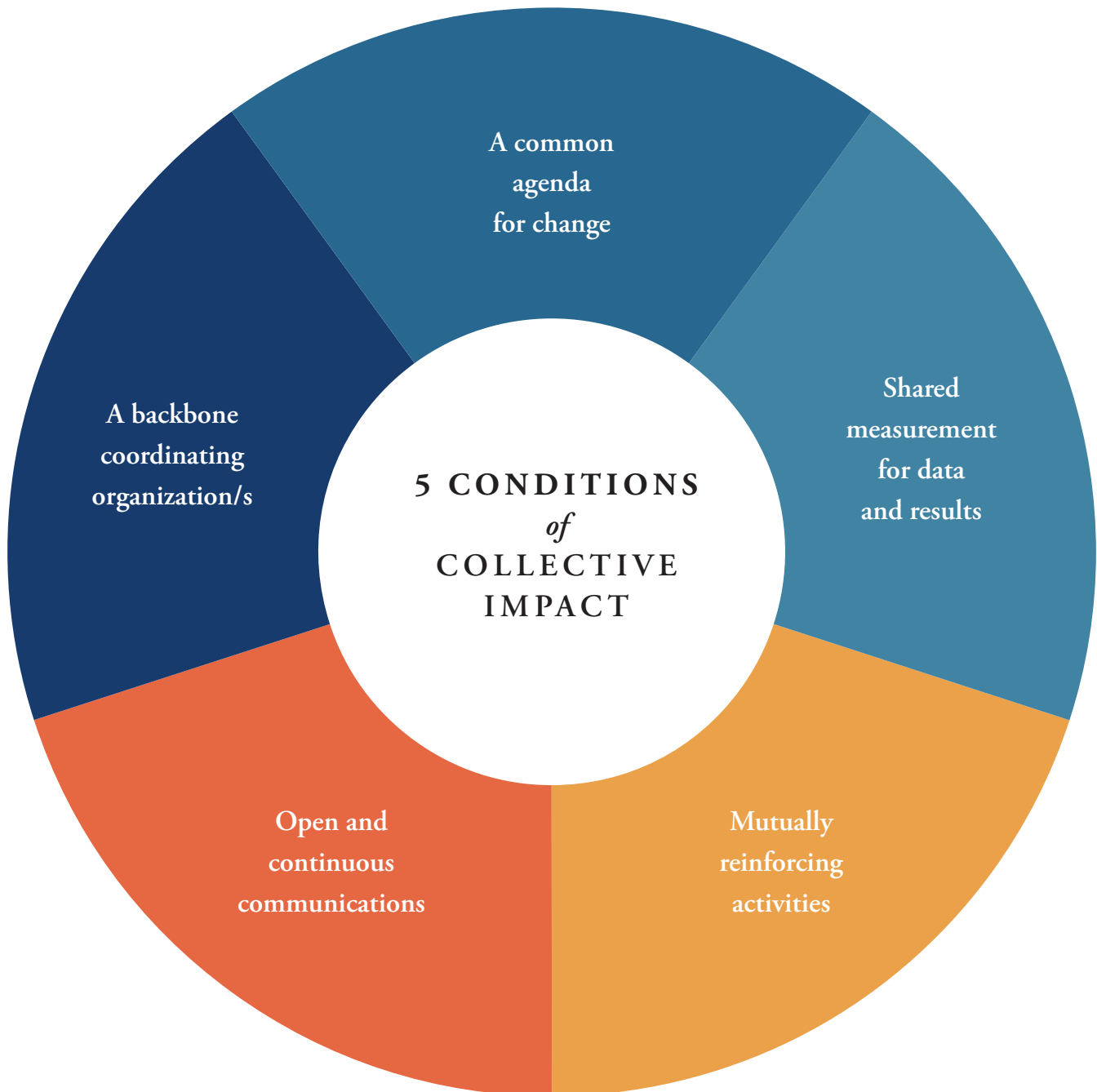
A Collective Impact approach to preventing child maltreatment and creating a supportive community should bring together multiple partners who are directly and indirectly affected by the issue. You will need to establish a core team of partners and stakeholders to work together and collaborate on this effort. Suggested partners include:

- Business
- Government
- K-12 Education
- Higher Education
- Health Care Services
- Child Care Providers
- Mental Health Providers
- Libraries
- Religious Entities
- Community or Resource Centers
- Philanthropic Funders
- Child Welfare Service Providers
- Families

The final partner included on this list is the most important—*Families!* When establishing the core team, it is crucial to center family voice and involve them in every part of the planning process.



Your community should also take steps to ensure that members of the core team are representative of your community, to promote equity and inclusion. When ensuring equitable representation consider the demographic makeup of your community (socio-economic status, race and ethnicity, education level).



Once you have established your core team, there are five conditions that, together, lead to meaningful results from the Collective Impact Approach.

- 1. COMMON AGENDA:** All participants have a shared vision for change including a common understanding of the problem. The participants have developed a joint approach to solving it through agreed upon actions. The common agenda for this work will be to establish and implement a community action plan to prevent child maltreatment. The toolkit provides more guidance on how to establish a common agenda in later sections.
- 2. SHARED MEASUREMENT:** Create a “baseline understanding” of where you are today in regard to the issue and reach agreement on key indicators. This prevention framework provides indicators for communities to adopt to track progress.
- 3. MUTUALLY REINFORCING ACTIVITIES:** When developing the common agenda, participants will take the lead on different activities – work they are most likely already doing – while still being coordinated through a mutually reinforcing plan of action with all participants. The goal is alignment and cohesion, not isolation. The aim of the framework is to align prevention efforts in an intentional and collaborative way.
- 4. CONTINUOUS COMMUNICATION:** Consistent and open communication is needed across the many players to build trust, assure mutual objectives, and stay up to date on progress. Once the cross-sector core team forms, they will establish a meeting schedule and other procedures to ensure continuous communication.
- 5. BACKBONE ORGANIZATION:** Creating and managing Collective Impact requires a dedicated lead agency with staff and a specific set of skills to serve as the backbone for the entire initiative and coordinate participating organizations. To implement the prevention framework, your community should identify a lead agency who will be responsible for coordinating the work and helping partners stay on track.

Child maltreatment is a tremendous challenge that no agency can hope to prevent alone. The Collective Impact approach fosters collaboration and establishes a diverse group of key stakeholders to elevate the importance of prevention.



IDENTIFY COMMUNITY NEEDS AND STRENGTHS



Once your core team begins the planning process, it is important to identify the needs in your community. Completing this research at the beginning of the process will help inform your plan and focus your efforts.

Create A Local Community Profile

Begin by creating a local community profile of key indicators related to children and families. Begin by looking at the rate of child maltreatment in your community. You can use the [Indiana Youth Institute \(IYI\) County Snapshots](#) to explore how the incidence of child abuse and neglect has changed in your community over the last several years. When studying this data consider the following:

- How has your community's child maltreatment rate changed over the last several years? Has it gotten better or worse?
- What has contributed to this change?

In addition to studying the rate of child maltreatment, assess how your community is performing on the indicators included in the prevention framework. You can find these indicators, along with their corresponding data source in Appendix A. Reviewing this data will help you and your stakeholders understand the issues currently facing families in your community. Other data sources you may want to explore include:

- [Casey Family Programs, Community Opportunity Map](#)
- [County Health Rankings & Roadmaps](#)
- [Indiana Indicators](#)

Catalogue Existing Services And Resources

As you work to identify the needs in your community, it is also recommended that you catalogue or compile a list of the existing programs, services, and resources available to families in your community. This will help you identify gaps and will inform your community action plan. To compile a list of the resources in your community, begin by asking your core team and other community members what resources and organizations they are aware of that are available to families.

As you go through this process, refer to the Indiana Community Connect Website: <https://indianacommunityconnect.in.gov/>. This site allows you to browse resources by various categories, such as, housing, employment, mental health and addiction, and more! You can also filter resources available by location.

You can find community mapping resources and a list of initiatives related to the prevention of child maltreatment in Appendix B. If these initiatives are present in your community, connect with them throughout the planning process to ensure your work is complementary rather than duplicative.



Collect Community Feedback

In addition to collecting the data previously described, it is also important to reach out to parents and community partners to understand their perspective and need(s). This feedback and engagement can build awareness in the community of the importance of this issue, bring new ideas, foster partnerships, and identify gaps to address.

Benefits of collecting community feedback:

- Community members can provide insights to potential opportunities and needs;
- Connecting with your stakeholders will increase trust and transparency;
- Dialoguing with stakeholders will provide opportunities for education and learning;
- Soliciting feedback and honoring the feedback you receive will foster authentic relationships with stakeholders;
- Ensuring equity and inclusion.

Target audiences to consider as you collect feedback:

- Equitable demographic representation of families in relation to culture, race and ethnicity, religion, age, gender identity, disability, and income level;
- Community partners, such as community service organizations, libraries, membership programs, mental health agencies, youth organizations, religious organizations, and philanthropic partners;
- Government agencies involved in medical and human health services, child welfare, and education.

There are several methods you can use to solicit feedback from key audiences to support the framework implementation efforts:

- Focus Groups
- Surveys
- Key Stakeholder Interviews
- Community Forums (i.e., Listening Sessions, Town Halls)

Appendix C includes examples of tools to help support communities complete the outreach and feedback collection process.

CREATE A COMMUNITY ACTION PLAN



As mentioned in the Introduction, the statewide advisory team guided the development of the framework and determined the outcomes, indicators, and strategies by researching best practices and reviewing similar frameworks. They also collected stakeholder input from families and community partners in the nine pilot communities.

While the state has created this overarching guiding framework, communities should tailor it and select the indicators and strategies that make sense for your community by creating a Community Action Plan. A Community Action Plan template can be found in Appendix D. Follow the steps below to create your plan!

Select Indicators

You should first begin by identifying the indicators in the framework that most closely align with your community's needs. Reference your local community profile and the needs identified through stakeholder feedback to inform the indicators you select. **Select 1-2 indicators for each of the outcome areas, with no more than 6 indicators in total.**

Determine Strategies

Once you have identified key indicators, you will then determine which strategies from the framework will help you improve your performance on those key indicators. When determining your strategies, you also need to think about what is already happening in your community and begin the process of aligning your work. **Consider the following questions:**

1. How can we build on existing prevention efforts happening in the community?
2. What gaps or opportunities have been identified during this process that we can address?
3. What can we do to ensure equitable access to the resources in our community?

The strategies included in the framework are high-level prevention approaches or interventions for you to consider. A brief description of each strategy can be found in Appendix E. You will then need to determine action items and specific ideas for what each intervention would involve. For example, if you decide to implement the strategy of Home Visiting, you will need to identify what Home Visiting model you would like to implement and who would be responsible for delivering that model. Appendix F provides resources where you can find research- and evidence-based practices and models. Appendix G includes a rating tool that will help you evaluate your ideas.

Develop A Public-Facing Plan

Once you have created your action plan, develop a one-page visual overview of your key goals and strategies that can be shared with the public. This does not need to include each action item, but should give general information about the following:

- The indicators, or community needs, you are working to impact
- The strategies and interventions you intend to implement
- A high-level expected implementation timeline

Example Community Action Plan

The table below is an example of what a community action plan could look like for one outcome domain and indicator. Select 1-2 indicators for each of the outcome areas, with no more than 6 indicators in total. For each indicator, you might choose one or multiple strategies to implement.

COMMUNITY ACTION PLAN

Instructions:

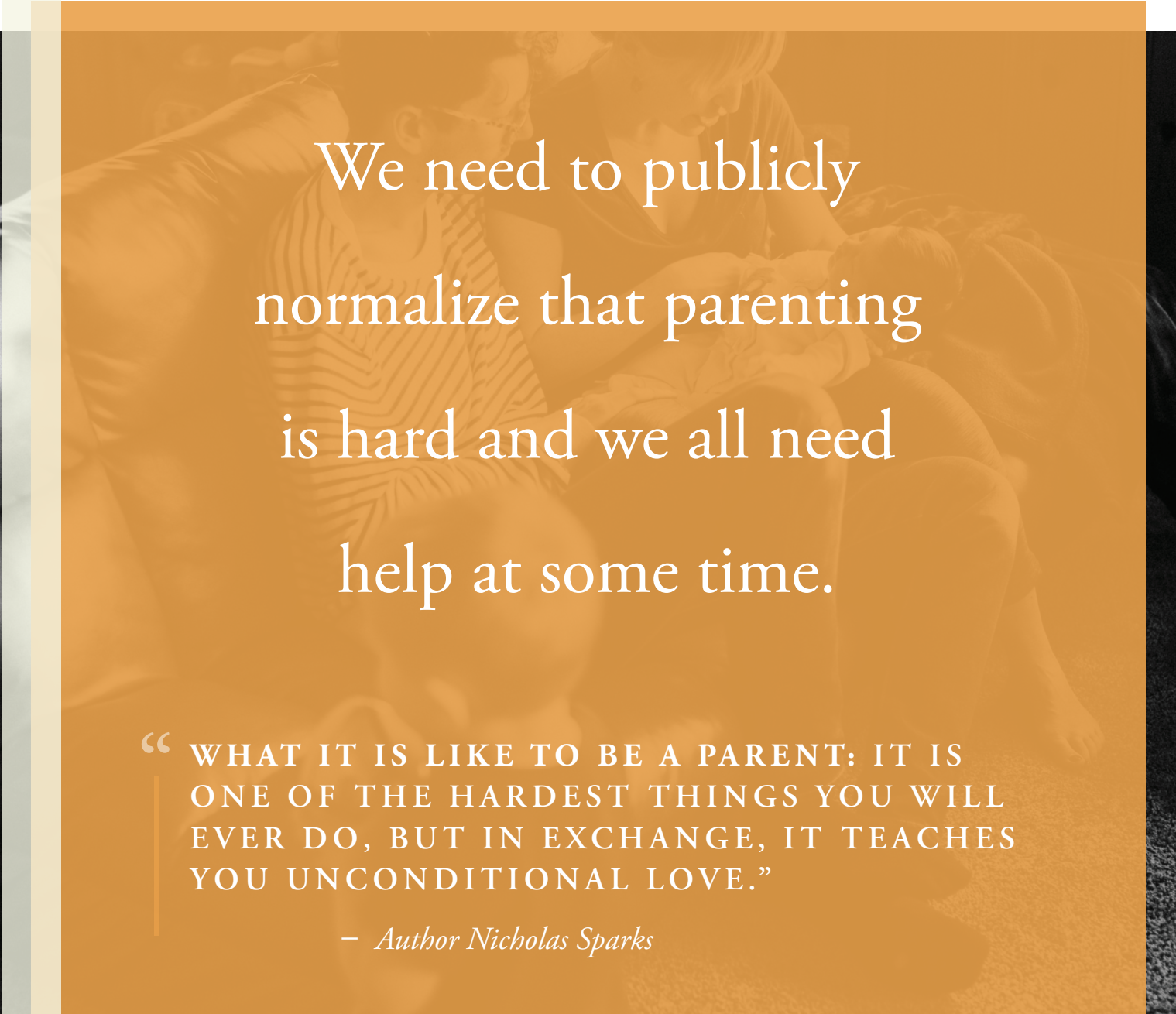
Developing an action plan is a helpful way to solidify activities and identify partners, financial resources, and other inputs that are important to initiating change in your community. Use this template to guide prevention efforts during your planning period. Action planning provides a detailed road map and lays the groundwork for implementation. You can revisit and modify the action plan as needed to meet the changing needs of your community.

Outcome Domain	Key Indicators	Strategies	Action Items	Timeline	Resources Needed	Responsibility	Status
Child safety, well-being, and resilience	Rate of youth suicide	School-based programs	Meet with school partners and any other potential implementation partners	November 2021	Relationships with school and community partners	Core Team & School Partners	Completed
			Research evidence-based models for school programs	December 2021 - February 2022	Online clearinghouses/databases (see Appendix F)	Core Team & School Partners	In progress
			Select a program and identify possible funding sources	January-May 2022	Relationships with possible funders	Core Team & School Partners	Not started
			Implement program	August 2022	Materials for the program; Staff	School Partners	Not started

PROMOTE AWARENESS



An important part of primary prevention is promoting awareness about the resources available in your community. A thriving community is built with strong and healthy families. Promoting and communicating the need for engagement and support starts with communicating the WHY behind your community's desire for a different future. Once you have a public-facing, one-page visual of your action plan, you will create a communication strategy to promote the efforts happening in your community. The goals of this communication strategy should be to raise awareness about the plan and also encourage community members and families to engage with the efforts. You want to convey an encouraging message that reduces the stigma associated with asking for help.



We need to publicly
normalize that parenting
is hard and we all need
help at some time.

“WHAT IT IS LIKE TO BE A PARENT: IT IS ONE OF THE HARDEST THINGS YOU WILL EVER DO, BUT IN EXCHANGE, IT TEACHES YOU UNCONDITIONAL LOVE.”

– *Author Nicholas Sparks*

Throughout the Collective Impact Approach, creating consistent, open, and continuous communication practices will aid in the overall effectiveness and execution of your community’s action plan. **Refer to the following steps for ideas to build awareness:**

Focus on a Few Key Messages

Identify a handful of key messages that tie back to your community plan. Key talking points are critical messages that are important to all audiences in your community. You do not have to start from scratch, there are great resources available to guide you in crafting key messages, like [Prevent Child Abuse America’s Talking about Child Abuse and Neglect Prevention toolkit](#).

Make sure your key messages answer the following questions:

WHAT IS THE PROBLEM IN THE COMMUNITY?

- Communicate the local and the statewide reality of child maltreatment through simple and relevant data points will help position the issue.
- Include additional testimonials of lived experiences from key stakeholders to bring an emotional and personal level of understanding.

HOW DOES THIS INITIATIVE AFFECT ME?

- Normalize reaching out for help and support. We are all faced with the challenges of raising a family.
- Emphasize that everyone plays a role in supporting families and preventing child abuse and neglect. Every one of us can help connect friends, neighbors, and coworkers to support and resources within the community.

WHY IS THE COMMUNITY ADDRESSING CHILDHOOD MALTREATMENT?

- Emphasize positive messages about child well-being.
- Explain the importance of investing in children and families to ensure a prosperous future for your community.

HOW CAN INDIVIDUALS HELP?

- Include a Call to Action for your community such as one of these:
 - Take a survey
 - Attend an event
 - Spread awareness
 - Support a local nonprofit that supports families
 - Join a focus group
 - Learn more about local prevention efforts

HOW DOES THE COMMUNITY PLAN ON SOLVING IT?

- Share the top strategies and solutions in your community action plan.

Determine Your Awareness Strategies

Keep in mind that public relations, communications, and marketing will be utilized to communicate your vision and overall awareness strategy for decreasing childhood maltreatment.

These marketing strategies may include, but are not limited to the following:

- | | | |
|--|---|---|
| • Craft a website or landing pages | • Launch an Op-Ed series from key stakeholders in your local community’s newspapers | • sponsorships, and conduct speaking tours |
| • Establish a social media presence | • Initiate a media tour | • Create a billboard campaign |
| • Create outreach flyers and promotional materials, and post them in common places families visit (libraries, schools, laundromat, shopping centers) | • Send regular and ongoing press releases and communications | • Make short videos telling the story of your campaign |
| • Generate email campaigns | • Utilize paid media campaigns | • Utilize testimonials of success stories and challenges for key stakeholders |
| | • Host community events, seek | |

There are many ways to build awareness in your community. Be strategic and realistic about the capacity and resources of the core team. It is better to be consistent and clear within a simple communication plan that can be executed successfully.

TRACK YOUR PROGRESS



As you move through the implementation process, it is important to monitor your progress by collecting and tracking data. **This involves three main steps:**

1. Track Your Progress in Implementing the Plan

On at least a quarterly basis you should update your community action plan to reflect any progress you have made on the action steps. This is also a good time to reflect and identify new action steps if you are facing unanticipated challenges or needs.

Reflection questions to consider may include the following:

- How have the identified strategies been implemented?
- Are families accessing the available supports?
- What changes do we need to make to our action plan?
- What other stakeholders do we need to engage?
- What additional resources do we need?

For example, a challenge that you could face when introducing a new service is a lack of parent awareness and engagement. As part of your reflection process, you could identify potential changes to make to your outreach efforts to try to better connect with families.

2. Track Your Progress Using Your Identified Indicators

When you complete your community profile, you will collect baseline data for all of the framework indicators, including child maltreatment. As you move through the implementation plan, you should track progress using these indicators annually. **When tracking your child maltreatment rate, consider the following:**

- Has our child maltreatment rate improved, worsened, or remained consistent?
- Are there specific demographic groups that are more less likely to be affected?
- What strategies in our implementation plan are not being fully executed that we could leverage to address this indicator?

3. Celebrate Your Successes!

As you track your progress, it is important to take time to celebrate accomplishments and successes! Successes or “wins” may include the following:

- Your community introduced a new service or resource to support families
- A new partner joined the core team and is contributing to the plan
- You received positive feedback from families and/or community members
- Your community has improved its performance on one or more of your selected indicators



As you move through
the implementation process,
it is important to
monitor your progress
by collecting and
tracking data.

APPENDIX A: FRAMEWORK INDICATORS

OUTCOME DOMAIN 1: Child Safety, Well-Being, and Resilience

Indicators	Data Source
Child maltreatment rate	IYI County Snapshots (through a data share agreement with DCS) https://www.iyi.org/county-snapshots/
Rate of youth suicide	Indiana Department of Health (IDOH) https://gis.in.gov/apps/isdh/meta/stats_layers.htm
Number and percentage of youth and children who are up to date on immunizations	IDOH https://gis.in.gov/apps/isdh/meta/stats_layers.htm

OUTCOME DOMAIN 2: Adult and Family Stability, Well-Being, and Resilience

Indicators	Data Source
Number and percentage of pregnant women who report smoking or using other substances during pregnancy	IDOH https://gis.in.gov/apps/isdh/meta/stats_layers.htm?q=VAR_ID%20like%20%27BIRTH%27&prof=18
Number of deaths involving drug overdoses	Next Level Recovery https://www.in.gov/recovery/data/
Number and percentage of women under the age of 18 giving birth	IDOH https://gis.in.gov/apps/isdh/meta/stats_layers.htm?q=VAR_ID%20like%20%27BIRTH%27&prof=18
Percentage of families with children under 18 living below the ALICE Threshold	United Way (The ALICE Project) https://www.unitedforalice.org/indiana
Percentage of families with children under 18 with no caregiver in the labor force	American Community Survey 5-Year Estimates https://data.census.gov/cedsci/table?q=families%20in%20the%20labor%20force&q=0400000US08&tid=ACSST5Y2018.S2302&hidePreview=true

OUTCOME DOMAIN 3:

Consistent, High-Quality Caregiving by All Those Responsible for Meeting the Needs of Children

Indicators	Data Source
Number of families enrolled in evidence-based home visiting programs	The data source will vary based on the home visiting program(s) available in your community. Examples include: Nurse Family Partnership: https://www.nursefamilypartnership.org/locations/indiana/ Healthy Families Indiana: https://www.in.gov/dcs/prevention/healthy-families-indiana/ Early Head Start: https://www.in.gov/fssa/carefinder/head-start-and-early-head-start/
Percentage of infants, toddlers, and preschoolers who have access to affordable, high-quality child care	Indiana Early Learning Advisory Committee http://www.elacindiana.org/data/
Percentage of youth ages 5-18 who have access to out-of-school-time programming or child care*	America After 3pm Annual Report* http://afterschoolalliance.org/AA3PM/data/geo/Indiana/challenges
Percentage of caregivers who report that they are adjusting to the daily demands of raising children*	National Survey of Children's Health* https://www.childhealthdata.org/learn-about-the-nsch/NSCH

OUTCOME DOMAIN 4:

Safe, Supportive, and Equitable Communities

Indicators	Data Source
Percentage of households that are in census tracts with a high level of concentrated disadvantage	Calculated from a set of American Community Survey 5-Year Estimates indicators. Find more information here: http://www.amchp.org/programsandtopics/data-assessment/LifeCourseIndicatorDocuments/LC-06_ConcentratedDisad_Final-4-24-2014.pdf
Number of youth experiencing homelessness	IYI County Snapshots (through a data share agreement with the Indiana Department of Education) https://www.iyi.org/county-snapshots/
Percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, lack of kitchen facilities, or lack of plumbing facilities	County Health Rankings & Roadmaps https://www.countyhealthrankings.org/explore-health-rankings
Number of community resources and/or services available for families	This indicator can be measured when your core team creates a catalogue of available resources and services

*At this time, these data sources only provide state-level data, limiting the ability of local communities to track progress at the county or community level.

APPENDIX B: COMMUNITY MAPPING & RELATED INITIATIVES

As you work to identify the needs in your community, catalogue or compile a list of the existing programs, services, and resources available to families in your community. This will help you identify gaps and will inform your community action plan. During this process, you may want to reference community mapping resources like [*Community Youth Mapping: A Tool for Youth Participation and Program Design*](#).

The advisory team identified the following existing initiatives (local or statewide) that are working to support child abuse prevention. If these initiatives are present in your community, connect with them throughout the planning process to ensure your work is complementary rather than duplicative.

Annual Forum on Child Abuse and Neglect Planning Group

<https://pcalakecounty.org/>

Prevent Child Abuse Lake County has a planning group that collaborates with a variety of community organizations each year to hold an Annual Forum on Child Abuse and Neglect. The forum brings together professionals and concerned citizens to discuss issues and raise awareness.

CarePortal

<https://www.careportal.org/>

CarePortal aims to support children and families in crisis. CarePortal is a technology platform that connects children and families to faith-based community programs to strengthen child welfare resources in communities. The Indiana CarePortal pilot program was established in 2019 to connect the Department of Child Services to faith-based communities that can provide additional resources and support. CarePortal is active in Madison and Marion counties.

Child Safety Forward

<https://thehill.com/opinion/civil-rights/476247-a-preventative-approach-to-reducing-child-abuse-and-neglect-fatalities>

Child Safety Forward is focused on reducing child maltreatment related fatalities. The Indiana Department of Health and partners, including Community Partners for Child Safety, will conduct a two-phase project in three target counties (Clark, Delaware, and Grant counties) whose child fatality rate is higher than the state average.

Community Partners for Child Safety Program

<https://www.in.gov/dcs/2455.htm>

Community Partners for Child Safety (CPCS) is a statewide secondary prevention initiative. CPCS is a service continuum that builds community support for families. The purpose of CPCS is to develop a child abuse prevention service array that can be delivered in every region of the state. As a secondary prevention intervention, the goal is to intervene with at-risk families to preserve the family structure so that a referral to DCS will not be necessary.

Indiana System of Care

<https://www.in.gov/fssa/dmha/youthservices/about-indianas-system-of-care/>

The mission statement of Indiana System of Care (SOC) is: Communities coming together to support the mental wellness of young people in the interest of building resilience and hope for families. SOC is the connecting of all service delivery systems for youth and their families (Mental health, educational services, vocational services, health services, substance use disorder services, recreational services, social services, juvenile justice services, etc.).

My Healthy Baby: Indiana's OB Navigator Program

<https://www.in.gov/myhealthybaby/>

The My Healthy Baby program (previously called Indiana's OB Navigator Program) is a collaboration between the Indiana Department of Health, the Indiana Family and Social Services

Administration, and the Indiana Department of Child Services. It was established by House Enrolled Act 1007, which was signed into law by Governor Eric Holcomb in 2019. The goal of this program is to identify women early in their pregnancies and connect them with an OB navigator – a home visitor who provides personalized guidance and support to a woman during her pregnancy and at least the first six to 12 months after her baby's birth. In 2020, My Healthy Baby launched in the following 22 counties: Allen, Bartholomew, Blackford, Cass, Clark, Crawford, Delaware, Dubois, Fulton, Grant, Henry, Jay, Lake, LaPorte, Madison, Marion, Martin, Miami, Randolph, Shelby, St. Joseph, and Wayne.

Prevent Child Abuse Indiana

<https://www.pcain.org/>

Prevent Child Abuse Indiana (PCAI), a division of The Villages, is a chartered state chapter of Prevent Child Abuse America. PCAI serves as a crucial prevention resource and aims to be the voice in Indiana for preventing child abuse in all forms. Their activities include increasing awareness of child maltreatment and informing communities about solutions, serving as a resource for families and organizations, advocating for expanded and improved programs and policies to prevent child maltreatment, and fostering a statewide network committed to child abuse prevention.

Project AWARE

<https://www.projectawarein.org/>

The Indiana Department of Education (IDOE) received a Project Advancing Wellness and Resilience Education (AWARE) grant through the Substance Abuse and Mental Health Services Administration (SAMHSA). The purpose of this grant is to build or expand the capacity of state educational agencies, in partnership with mental health agencies overseeing school-age youth and local educational agencies (LEAs), to:

- Increase awareness of mental health issues among school-age youth;
- Provide training for school personnel and other adults who interact with school-age youth to detect and respond to mental health issues; and
- Connect school-age youth, who may have behavioral health issues or serious mental illness in their families, to needed services.

Project AWARE Indiana first worked to develop demonstration sites with three communities and LEAs in the fall of 2018: Avon Community School Corporation, Perry Central Community School Corporation, and Vigo County School Corporation. This work was expanded to include a second cohort including eight additional LEAs: Hamilton Southeastern Schools, Westfield Washington Schools, Evansville Vanderburgh School Corporation, MSD of Wayne Township, South Bend Community School Corporation, Southeast Neighborhood School of Excellence, Sheridan Community Schools, and Milan Community School Corporation.

Safe Families for Children

<https://safe-families.org/>

Founded in 2003, Safe Families for Children surrounds families in crisis with a caring, compassionate community. Safe Families for Children aims to keep families together by providing family-like supports to families in crisis. This national organization has several Indiana chapters which serve the following counties: Adams, Allen, Boone, Dekalb, Elkhart, Hamilton, Hancock, Hendricks, Huntington, Jasper, Johnson, Kosciusko, Lake, LaPorte, Madison, Marion, Marshall, Monroe, Newton, Noble, Porter, Pulaski, Shelby, Starke, St. Joseph, Tippecanoe, Tipton, Wells, White, and Whitley.

Strengthening Indiana Families

<https://strengtheninginfamilies.org/>

Researchers in the Indiana University School of Social Work received a 5-year, \$2.74 million grant from the Children's Bureau—an office of the Administration on Children, Youth and Families in the U.S. Department of Health and Human Services—to address child maltreatment in Indiana. The program is a partnership with the Indiana Department of Child Services; the Indiana Department of Health; the Indiana Family and Social Services Administration; Children's Bureau; the Commission on Improving the Status of Children in Indiana; and partners in Delaware, Grant, Madison, and Tipton counties, where the project will be implemented. One of the primary goals of this program is to establish family resource centers in the participating counties, in addition to the creation of public awareness campaigns to de-stigmatize the need for parenting training and support.

APPENDIX C: EXAMPLE DATA COLLECTION TOOLS

FAMILY SURVEY

Introduction

We want to know more about the support and resources families need to help them care for their children. Please help us by completing this survey. Your individual answers will remain confidential. The survey should take 10 minutes to complete.

1. Communities often have organizations that support families. Are you familiar with the following organizations in your community? Have you used these organizations? *(Please select all that apply)*

Organization:	Are you familiar with the organization?		Have you used the organization?	
	YES	NO	YES	NO
Religious or faith organizations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hospital/urgent care clinics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Primary care doctors or pediatricians	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Neighborhood watch organization or resident, tenant, or homeowner's association	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parent organizations that work with schools like the Parent Teacher Association (PTA) or school improvement councils	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sport or recreational programs for children and youth (e.g., Little League, scouting, music/dance programs)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Child care or preschool programs for children under 5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Before-school, after-school, or summer programs for school-age youth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Libraries	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parenting education/support programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Home visiting programs (i.e., Nurse Family Partnership, Healthy Families Indiana, Early Head Start)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family Resource Centers (community-based, family-focused facilities that provide programs and services based on the needs of the families)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Respite care (emergency temporary care for young children or children with disabilities)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. How much do you agree with the following statements?

	STRONGLY DISAGREE	DISAGREE	AGREE	STRONGLY AGREE	DON'T KNOW
I can generally get to where I need to go in my community.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel safe in my neighborhood.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My community is overall clean and well kept.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People generally can find work in or near my community.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I can find help with child care in my community when I need it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am very satisfied with my neighborhood as a place to live.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My community has educational opportunities for children.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. People have different ways of describing their community. How well do the following statements describe your community?

	NOT AT ALL	SOMEWHAT	MOSTLY	ALL OF THE TIME	DON'T KNOW
If I had an emergency, even people I do not know in this community would be willing to help.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People here know they can get help from the community if they are in trouble.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People can depend on each other in this community.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My friends in this community are a part of my everyday activities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Living in this community gives me a secure feeling.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
This is a very good community to bring up children.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

APPENDIX C: EXAMPLE DATA COLLECTION TOOLS

4. In the past 30 days, have you asked a neighbor or friend to:

	NO	ONCE	MORE THAN ONCE
Look after your child(ren) on a regular basis (e.g., weekly or daily)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Look after your child(ren) when something unexpected happened?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Run an errand for you, help you with shopping, give you a ride somewhere, or help you around the house with a chore or repair?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lend you things like money, tools, food, or clothing?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Give you some advice or information about raising your child(ren)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Family Supports

The next few questions ask about your family and the resources you may need.

5. Many families have a number of strengths as well as challenges. From the statements listed below, please indicate how well each characteristic describes your family.

	RARELY	ON OCCASION	MOST OF THE TIME
In my family, we talk about problems.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In my family, we take time to listen to each other.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My family pulls together when things are stressful.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My family is able to solve our problems.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My family can consistently meet our basic material needs (e.g., food, clothing, and shelter).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Members of my family are physically healthy.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Members of my family are emotionally healthy.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My family enjoys spending time together.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My family is able to find resources in the community when we need them.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. Raising children can be challenging. Please indicate how often each statement applies to you in thinking about the relationship with your youngest child living in your home.

	RARELY	ON OCCASION	MOST OF THE TIME
I know how to help my child.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I believe my child misbehaves just to upset me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I praise my child when they behave well.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
When I discipline my child, I lose control.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am happy being with my child.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My child and I are very close to each other.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am able to soothe my child when they are upset.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I spend time with my child doing what they like to do.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I know what to expect from my child as they grow and develop.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. Do the following community services/resources meet the needs of your family?

	THIS SERVICE/ RESOURCE IS NOT AVAILABLE.	NO. THIS SERVICE/ RESOURCE IS AVAILABLE, BUT IS NOT MEETING MY FAMILY'S NEEDS.	YES, THIS SERVICE/ RESOURCE IS MEETING MY FAMILY'S NEEDS.	MY FAMILY DOES NOT NEED THIS SERVICE.
Adult Education (GED, ESL)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Affordable housing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employment opportunities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Job training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parent support/education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community center with free activities for families	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Child care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Services for my child who has a disability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medical care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mental health treatment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Substance use disorder treatment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Domestic violence services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Transportation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Affordable quality food	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

APPENDIX C: EXAMPLE DATA COLLECTION TOOLS

8. For those services where you selected "No. This service/resource is available, but is not meeting my family's needs," please explain why it is not meeting your needs.

9. What other community services/resources does your family need?

Tell Us About Yourself

1. Do you have children under the age of 18?

Please check one answer.

- Yes
- Children are older than 18
- No children
- Yes, I am raising other children
(grandchildren, nieces/nephews, etc.)

2. How many children under the age of 18 are currently living with you?

- 0
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10+

3. Do you share caregiving responsibilities for your child(ren) with another adult on a regular basis?

- Yes
- No
- Other _____

4. Who is responsible for disciplining your child in your household?

5. How long have you been with your current employer or had an independent business?

- Less than 1 year
- 1-5 years
- 6-15 years
- 16-25 years
- Over 25 years
- I am not employed
- I am retired
- I am a homemaker/caregiver
- Other: please specify _____

6. Do you receive assistance from any of these programs?

Please select all that you receive assistance from.

- SNAP (food assistance)
- Medicaid / Health coverage / CHIP
- Cash Assistance (TANF)
- Child Care Assistance Vouchers (CCDF / On My Way Pre-K)
- Women, Infants, and Children Benefits (WIC)
- First Steps Early Intervention
- Home Visiting assistance (Nurse Family Partnership, Healthy Families Indiana, Early Head Start)
- None of the above
- Prefer not to answer

7. How long have you resided in your current residence?

- Less than 1 year
- 1-5 years
- 6-15 years
- 16-25 years
- Over 25 years
- Other: please specify _____

8. Please specify your gender identity.

- Male
- Female
- Nonbinary/Gender nonconforming
- Transgender
- Prefer not to answer
- Prefer to self-describe _____

9. Which ethnicity/race best describes you?

(please select all that apply)

- African American or Black
- American Indian or Alaska Native
- Asian American
- Hispanic or Latino American
- White
- Other
- Prefer not to answer _____

10. What is your age?

- 18-24
- 25-34
- 35-44
- 45-54
- 55-64
- 65 or above
- Prefer not to answer

11. What is your highest level of education?

- Less than high school
- High school graduate/GED
- Some college/postsecondary school/technical school
- College graduate
- Graduate degree(s)
- Prefer not to answer

12. What is your estimated household income per year?

- Under \$10,000
- \$10,000 to \$29,999
- \$30,000 to \$49,999
- \$50,000 to \$74,999
- \$75,000 or over
- Prefer not to answer

APPENDIX C: EXAMPLE DATA COLLECTION TOOLS

COMMUNITY PARTNER SURVEY

Introduction

Our community is exploring how we can better prevent child abuse and neglect, and we need your help! We want to know more about the support and resources families need to help them care for their children. Please help us by completing this survey. Your individual answers will remain confidential. The survey should take 10 minutes to complete.

Community Needs and Resources

1. We would like to learn about the organizations that support families in your community. Do families in your community have access to support from the following organizations? *(Please select all that apply)*

	YES	NO	DON'T KNOW
Religious or faith organizations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hospital/urgent care clinics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Primary care doctors or pediatricians	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Neighborhood watch organization or resident, tenant, or homeowner's association	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parent organizations that work with schools like the Parent Teacher Association (PTA) or school improvement councils	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sport or recreational programs for children and youth (e.g., Little League, scouting, music/dance programs)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Child care or preschool programs for children under 5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Before-school, after-school, or summer programs for school-age youth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Libraries	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parenting education/support programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Home visiting programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family Resource Centers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Respite or emergency care for young children or children with disabilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. How much do you agree with the following statements?

	STRONGLY DISAGREE	DISAGREE	AGREE	STRONGLY AGREE	DON'T KNOW
My community is overall clean and well kept.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People can generally find work in or near my community.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People can generally find help with child care in my community when they need it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My community has educational opportunities for children.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People in this community are willing to help their neighbors/friends with everyday parenting needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People here know they can get help from the community if they are in trouble.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People can depend on each other in this community.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Families with children in this community have access to formal supports in helping them to raise their children.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Families with children in this community have access to informal supports (i.e., support of neighbors, supportive social relationships) in helping them to raise their children.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
This is a very good community to bring up children.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. For any statements you disagreed with, please explain why you selected this answer.

APPENDIX C: EXAMPLE DATA COLLECTION TOOLS

4. Do the following community services/resources meet the needs of families in your community?

	THIS SERVICE/ RESOURCE IS NOT AVAILABLE.	NO. THIS SERVICE/ RESOURCE IS AVAILABLE, BUT IS NOT MEETING THE NEEDS OF FAMILIES.	YES, THIS SERVICE/ RESOURCE IS MEETING THE NEEDS OF FAMILIES.	OTHER
Adult Education (GED, ESL)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Affordable housing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employment opportunities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Job training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parent support/education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community center with free activities for families	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Child care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Services for my child who has a disability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medical care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mental health treatment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Substance use disorder treatment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Domestic violence services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Transportation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Affordable quality food	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. For those services where you selected "No. This service/resource is available, but is not meeting the needs of families," please explain why it is not meeting the needs of families.

6. What other community services/resources do families in your community need?

Child Maltreatment in Your Community

1. Do you know how the rate of child maltreatment has changed in your county over the last 3-5 years?

- It has increased
- It has decreased
- It has stayed the same
- I don't know

2. If you responded that it has either increased or decreased, what do you think has contributed to this change?

3. What efforts are currently underway in your community to prevent child abuse and neglect?

Tell Us About Yourself

1. Do you have children under the age of 18?

Please check one answer.

- Yes
- Children are older than 18
- No children
- Yes, I am raising other children (grandchildren, nieces/nephews, etc.)

2. Please specify your gender identity.

- Male
- Female
- Nonbinary/Gender nonconforming
- Transgender
- Prefer not to answer
- Prefer to self-describe _____

3. What is your age?

- 18-24
- 25-34
- 35-44
- 45-54
- 55-64
- 65 or above
- Prefer not to answer

4. Which ethnicity/race best describes you?

Select all that apply.

- African American or Black
- American Indian or Alaska Native
- Asian American
- Hispanic or Latino American
- White
- Other _____
- Prefer not to answer

5. Do you represent any of the following organization types?

Select all that apply.

- Government
- Business
- Health care
- Philanthropy
- Economic development
- Education
- Nonprofit
- Religious
- Other (please specify): _____
- None of the above

APPENDIX C: EXAMPLE DATA COLLECTION TOOLS

EXAMPLES QUESTIONS FOR FOCUS GROUPS, COMMUNITY FORUMS, AND STAKEHOLDER INTERVIEWS

Questions for parents/families:

- What resources, services, or organizations in your community do you find most helpful and supportive in terms of raising your children?
- What resources, services, or organizations in your community do you use most often?
- What resources, services, or organizations are not present in your community that you think would be helpful?
- Where do you go to find resources for your child and/or family?
- How can your community better support you as a parent/caregiver?
- What are the top three challenges or needs that your family is currently experiencing?
- Is there anything else you would like to mention today?

Questions for community organizations/partners:

- Do you know how your community's child maltreatment rate has changed over the last 3-5 years (improved, worsened, stayed the same)?
- What do you think has contributed to the change in the child maltreatment rate?
- How is your organization working to impact the rate of child maltreatment?
- What resources do the families you serve request most often?
- What resources do you need to better support families in your community?

Questions for the community at large:

- Do you know how your community's child maltreatment rate has changed over the last 3-5 years (improved, worsened, stayed the same)?
- What do you think has contributed to the change in the child maltreatment rate?
- What do you know about local efforts to prevent the occurrence of child maltreatment in your community?
- What can you do to prevent child maltreatment?

APPENDIX D: COMMUNITY ACTION PLAN TEMPLATE

COMMUNITY ACTION PLAN

Instructions:

Developing an action plan is a helpful way to solidify activities and identify partners, financial resources, and other inputs that are important to initiating change in your community. Use this template to guide prevention efforts during your planning period. Action planning provides a detailed road map and lays the groundwork for implementation.

You can revisit and modify the action plan as needed to meet the changing needs of your community.

Outcome Domain	Key Indicators	Strategies	Action Items	Timeline	Resources Needed	Responsibility	Status
Child safety, well-being, and resilience	Rate of youth suicide	School-based programs	Meet with school partners and any other potential implementation partners	November 2021	Relationships with school and community partners	Core Team & School Partners	Completed
			Research evidence-based models for school programs	December 2021 - February 2022	Online clearinghouses/databases (see Appendix F)	Core Team & School Partners	In progress
			Select a program and identify possible funding sources	January-May 2022	Relationships with possible funders	Core Team & School Partners	Not started
			Implement program	August 2022	Materials for the program; Staff	School Partners	Not started

APPENDIX E: DESCRIPTION OF FRAMEWORK STRATEGIES

Community-Level Education and Awareness Campaigns

When identifying prevention approaches and strategies, it is crucial that a community develop an understanding of community-level impacts on child maltreatment. This can help to inform community-level interventions, like [Strengthening Families](#), establishing early learning communities, and partnering intentionally with key community anchor institutions like public libraries.

The work of [Prevent Child Abuse Indiana](#) and local Prevent Child Abuse Councils is an example of a community-level intervention to build increased awareness and understanding of child maltreatment and promote community-wide solutions.

Family Resource Centers

Family Resource Centers are community-based or school-based, flexible, family-focused, and culturally sensitive hubs of support and resources that provide programs and targeted services based on the needs and interests of families. They usually provide many of the services included in this strategy list (parent education and skill training, home visiting, two-generation programming, mental health services, child care, assistance with economic needs, etc.).

The [Strengthening Indiana Families](#) project is working to pilot four Family Resource Centers in the following counties: Delaware, Grant, Madison, and Tipton.

High-Quality Child Care and Out-of-School-Time Programming

Another strategy to consider is ensuring access to affordable, high-quality child care and out-of-school-time programming, a crucial need for children and families. You can find more information about the child care and out-of-school-time programming available in your community through the [Indiana Afterschool Network](#), [Indiana Child Care Finder](#), and the [Indiana Early Learning Advisory Committee](#).

Home Visiting

Home visiting during pregnancy and early childhood has been found to have positive impacts in several areas including child development, parental capacity, and in decreasing the frequency of child maltreatment.

Examples of widely implemented and studied models include [Nurse Family Partnership](#), [Healthy Families America](#), [Early Head Start](#) and [Parents as Teachers](#). Nurse Family Partnership is currently available in 39 Indiana counties, while Healthy Families America is offered in all 92 (<https://www.in.gov/dcs/2459.htm>). Parents as Teachers, which is privately funded, is available in two counties (according to their online database). Early Head Start is another program model that is solely federally funded, with home-based services currently offered in 49 counties. [My Healthy Baby](#), previously known as the OB Navigator Program, is working to establish a network of services and support that connects eligible pregnant women to a home visitor.

Innovations in Federal and State Funding

Federal and state funding innovations can play a crucial role in prevention work at both the state and community level. Innovations suggested by Chapin Hall include:

- Flexible funding for the integration of social and educational services during medical care;
- Flexible spending grants that allow states to fund prevention programs without requiring them to spend down funds available for foster care;
- Funding to address barriers to medical care; and
- The provision of concrete supports to alleviate the stressors of poverty.

The Family First Prevention Services Act is an example of a funding innovation that allowed for more flexibility by providing states with the option to reallocate Title IV-E funding to support more prevention-related programming and supports. [The Indiana Kids First Trust Fund](#), which raises funds for primary and secondary prevention through license plate sales, filing fee surcharges, and contributions, is another example of a funding innovation.

Integrated Care

Integrated health care models involve establishing a multi-disciplinary, coordinated system that ensures families are referred to appropriate services and levels of support. This type of approach often involves health care, child welfare, education, mental/behavioral health, and other relevant disciplines. Implementation may involve co-located service providers or training primary care practitioners to better identify family needs and refer them to appropriate community services.

[The Indiana System of Care](#) (SOC) is a current related initiative that strives to bring communities together to support the mental wellness of young people in the interest of building resilience and hope for families. SOC is the connecting of all service delivery systems for youth and their families (mental health, educational services, vocational services, health services, substance use disorder services, recreational services, social services, juvenile justice services, etc.).

Mental Health Services

It is also crucial that children, parents, and families have access to mental health screening and services. Community Mental Health Centers (CMHCs) provide essential mental health care, based in a variety of settings (home-based, school-based, outpatient, inpatient). A catalogue of Indiana CMHCs can be found at <http://indianacouncil.org/providers>.

Parenting Education Programs

Parenting education programs are a promising approach to reduce risk factors and strengthen protective factors. Parenting education programs may focus on topics such as child development, positive parent-child relationships, and behavior management. There are formal parenting education programs that have been researched and studied, and there are informal parenting education programs.

The [Incredible Years](#), [Triple P - Positive Parenting Program](#), and [Parent Cafes](#) are examples of parenting education programs that have been found to be associated with positive outcomes. These prevention models are being implemented in Indiana in local communities through private funding and partners, and there is not currently a statewide effort funding one of these programs.

Southeast Indiana is offering the Incredible Years program in eight counties. Elkhart County has a county-wide initiative to implement the Triple P - Positive Parenting Program. Parent Cafes have been implemented in several communities across the state with some funding from the Division of Mental Health and Addiction and private funding. There may also be other research-based parenting education programs being offered to parents around the state.

Some states serve as exemplary models of how to implement parenting education programs to all parents. North Carolina

made Triple P's online supports available to all families in the largest rollout in the country, providing free access to parents and caregivers. The state used a total of \$1.7 million in funding from the U.S. Health Resources and Services Administration's Maternal and Child Health Block Grant and state funding through the North Carolina Department of Health and Human Services' Division of Public Health and Division of Social Services to make this rollout possible.

Parent Substance Use Disorder Screening and Treatment Programs

Another individualized service strategy is parental substance use disorder screening and treatment. Research has shown that caregivers involved in the child welfare system who have worked with individual counselors or recovery coaches have experienced better outcomes.

Family drug courts, which coordinate treatment and provide other resources to caregivers involved in the child welfare system, have also been found to improve caregiver outcomes. There are several Indiana counties with family treatment drug courts, including Clark and Marion counties who received 2018 Family Treatment Drug Courts Grant awards from SAMHSA to "expand or enhance substance use disorder treatment services in existing family treatment drug courts."

School-Based Programs

School-based prevention programs have been found to help strengthen protective factors and address issues like bullying, violence, and sexual abuse/assault. One example of an effective school-based program, focusing on sexual abuse prevention, is [Stewards of Children](#). This program educates adults on how to prevent and recognize child sexual abuse. As part of their Prevention Matters initiative, the Richard M. Fairbanks Foundation compiled a list of school-based substance use prevention programs. More information can be found here: <https://www.rmff.org/2018/01/proven-school-based-prevention-programs-one-key-tackling-addiction-opeoids-drugs/>.

APPENDIX E: DESCRIPTION OF FRAMEWORK STRATEGIES

Trauma-Informed Care

Another strategy for communities to consider is ensuring trauma-informed care is incorporated by entities that have touchpoints with children and families (child care, schools, family-serving nonprofit organizations, etc.). Trauma-informed care is a strengths-based approach that recognizes trauma that children, families, and staff experience and responds by promoting safety, choice, collaboration, trustworthiness, and empowerment. This should be considered by communities as they select possible interventions or models to implement. Communities may also consider how they can provide training or guidance to local organizations regarding how to incorporate trauma-informed practices.

Two-Generation Programs

Two-generation programs aim to address the multi-generational nature of child maltreatment risk factors by including caregiver interventions like parenting education, job training, and economic support in combination with early learning and other child-focused supports. Two-generation programs may include mobility coaching, case management, and other individualized support.

The [United Way of Central Indiana \(UWCI\)](#) received federal funding to implement their [Great Families](#) two-generation program, which combined the Center for Working Families programs with early learning program partners. UWCI now has a [Family Opportunity Fund](#) to support their two-generation work.

[Goodwill of Central and Southern Indiana](#) has a two-generation program that builds on the Nurse Family Partnership home visiting program by having “Goodwill Guides” provide wraparound economic and education services (through their Excel Centers) that complement the health focus of Nurse Family Partnership.

Warmlines

Warmlines provide early intervention and support to prevent crises before they happen. Warmlines are usually staffed by volunteers or paid staff who have experienced mental health conditions and can provide peer support services. An example of an Indiana warmline is 800-933-5397, which is run by [KEY Consumer](#). Additional examples would be Indiana 211 and ISDH’s mom helpline, both resources dedicated to assist people in finding resources.

APPENDIX F: EVIDENCE-BASED RESOURCES

There are several clearinghouses and online resources that your community can use to identify programs and models to implement:

[California Evidence-Based Clearinghouse for Child Welfare](#)

[Evidence-Based Practice Directory](#)

[Home Visiting Evidence of Effectiveness – HOMVEE](#)

[Social Programs That Work](#)

[SAMHSA Evidence-Based Practices Resource Center](#)

[Title IV-E Prevention Services Clearinghouse](#)

[What Works Clearinghouse](#)

APPENDIX G: INTERVENTION RATING TOOL

When identifying possible models or interventions you would like to implement, it is important to assess the ideas you come up with in relation to a number of criteria. For each of your ideas, rate your agreement with the following criteria statements on a scale of 1-5, with 1 being *strongly disagree* and 5 being *strongly agree*.

INTERVENTION IDEA:	
Criteria Statements	Rating
This idea is prevention focused, meaning it occurs before child maltreatment has occurred.	
This idea aligns with Indiana's Framework for the Prevention of Child Maltreatment.	
This idea relates to one or more of the outcome domains included in the Framework.	
This idea relates to one or more of the strategies included in the Framework.	
This idea is feasible for our community to implement/accomplish.	
The effectiveness of this intervention idea is supported by research.	
We believe this intervention idea will positively impact our community and contribute to the prevention of child maltreatment.	
Average rating:	

Once you have completed this table for each of your intervention ideas, consider those with the highest ranking and identify which most closely align with the indicators and strategies you have included in your community action plan.

APPENDIX H: FUND DEVELOPMENT TOOLS

The work of community change is not simple and will require significant human and financial resources. As the community comes together through the collective impact process the need for additional funding will become increasingly clear. From the beginning, the community should begin assessing and developing a strategy for fund development to support the work.

Ultimately, your community is joining in the mission and vision of *children to thrive in safe, stable, nurturing, and supportive families and communities to foster resilience and well-being.*

As diverse stakeholders come together to achieve the mission and impact their community the need for resources will become a factor in successful implementation. Financial support is available from a variety of sources both private and public and will most likely take a diverse approach in raising the funds required for desired impact and outcomes. The collective impact team will need to complete the following steps as they prepare to meet the needs of this community.

STEP 1: Identify funding needs

STEP 2: Identify funding resources and strategy

STEP 3: Assess Grant Readiness

Identify Funding Needs

Reviewing the team's capacity to sustain and produce change in the community will be no simple task. As individual organizations and members come together it will be important for each member to come prepared with the resources they can provide to the group. This could be an agency providing time or access to a subject matter expert, facility support, project management support, or actual financial resources available.

The group will need to identify the estimated project expense which include but is not limited to the following:

- Backbone or project management support
- Program and oversight costs
- Project operational expenses
- Marketing and Communication costs
- Fundraising or grant management expenses

Identify Funding Sources And Strategy

Prior to seeking out funding, the community team will need to identify its current financial resources, and prepare to plan for the additional funding needed to accomplish the goal. Here are several ways for the team to generate funding capacity:

- Donations from individual and philanthropic partners
- In-kind donations or contributions
- Membership dues
- Grants
- Lead organization supplies capacity to support the work

Successful fundraising and grants come from creating well thought out plans. Building and sustaining relational fundraising or grant programs takes considerable time and investment prior to launching the community initiative.

APPENDIX H: FUND DEVELOPMENT TOOLS

Assess Grant Readiness

Grant writing is one strategy for raising funds to accelerate the impact and serve the community. There are two types of grants: foundations and government and both come with their benefits and challenges.

Foundations grants can be community and public, private and family, or corporate. Some benefit to foundation giving is the funding is usually broad in scope, fairly flexible, more relational, and less cumbersome in application. Some challenges include limited timelines and smaller award amounts. Also, foundations operate on a more relationship-oriented basis which can be a benefit and a challenge as it requires more capacity to support the relationship and meet the needs of both parties.

Here are some good places to start in your search:

FOUNDATION GRANTS:

- [Foundation Center Online Directory](#)
- [Grant Station](#)
- Trade Associations where Foundations are members. In Indiana, we have the [Indiana Philanthropy Alliance](#). There are similar trade associations in other states.

Government grants are awarded at the federal level, state level, and local level. The benefits of government grants are usually awarded in larger amounts and gifted over multiple years. Also, they are more stable funding sources that can have lasting impact on long-term goals. However, the challenges to these grants are the prescriptive and rigorous guidelines and requirements associated. The application process for these grants can be cumbersome and often require more information, a proven track record of success, and strong systems in place. Finally, these grants require a robust reporting and accounting process for awardees.

Here are some good place to start your research:

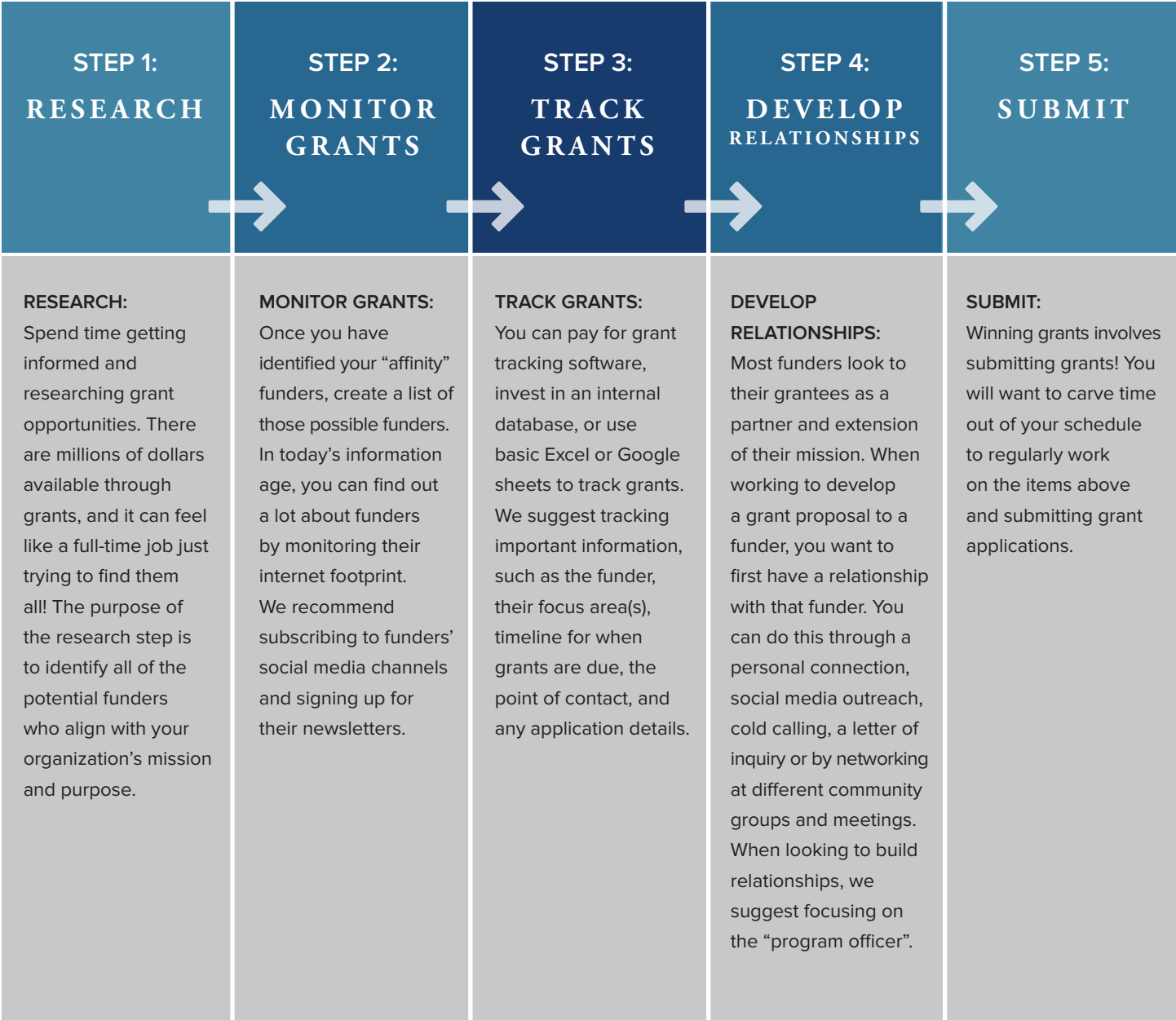
- [Recovery.gov](#)
- [USA.gov](#)
- [Benefits.gov](#)
- [Department of Health & Humans Services](#)
- [Grants.gov](#)
- [IN.gov](#)

Regardless of the type of grant this Collective Impact Team will need to assess their grant readiness to begin applying for funding. Below is a simple grant ready checklist designed to help you begin:

- Leadership Assessment:**
Is the core leadership team engaged and on the same page? Are you actively meeting and contributing time and talent to the project?
- Mission, Vision, and Goals Alignment:**
Is there alignment on the mission, vision, and goals for the future of this project?
- Accounting Practices and Systems:**
Are their policies and procedures in place to ensure proper accounting of funds received?
- Operating Budget Defined:**
Are there clear operational budget outlines for expenses and does it support needing additional funds?
- Strategic Plan Active:**
Is there a strategic plan for this project and does it align with the grant maker?
- History of Effectiveness:**
Is there a track record of accomplishing goals and fulfilling requirements from within this group?
- Project Capacity:**
Is there sufficient capacity (staff, infrastructure, and resources) to manage the project if awarded the grant funding?

5 Steps For Grant Writing

Now that you have been declared grant ready the hard work of the grant application process is ready to begin. There are 5 steps to the application process shown below:



**SUPPORTIVE
COMMUNITIES**

**RESILIENT
FAMILIES**

**THRIVING
CHILDREN**

Indiana's Framework
for the Prevention of
Child Abuse & Neglect