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a program of Prevent Child Abuse America

**Healthy Families America Overview
2014 TANF Region VIII State Meeting
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Rationale for HFA – The WHY behind what we do

2009 Statistics:

- 20.6 % of abuse occurred to children <1
- 48% of fatalities were children < 1
- 34% of abuse occurred under the age of 4
- 79% of fatalities occurred under the age of 4
- 81.2% of abuse was committed by one or both parents
- 71% of fatalities were committed by one or both parents



The Adverse Childhood Experiences

- **ACE Study** – More than a decade and more than 17,000 individuals
 - CDC & Kaiser Health Plan's Department of Preventive Medicine in San Diego, CA
- Connection between ACE & physical and mental health of adults including the major causes for adult mortality in the United States
- Early childhood trauma contributes to serious health issues later in life



Who participates in HFA?

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Community determines the population

- first time, teen, Medicaid eligible,

Typically

- Childhood history of abuse
- Poverty
- Single
- Lack of education
- Isolated
- DV, Mental Health, Substance Abuse & Cognitive Delay

Responsive to Ethnic Diversity, but more importantly parenting beliefs, values and traditions





Our Philosophy: Early nurturing relationships are the foundation for life-long healthy development.

▪ **Relationships:**

Positive Parent Child Interaction & Healthy Attachment

In order for children to grow into loving, nurturing adults they must:

- experience, regulate, and express emotions
- form close and secure interpersonal relationships
- explore the environment and learn

▪ **Strength-based:**

- Parents are active participants in the helping process
- All parents have strengths – often untapped or unrecognized
- Strengths foster motivation for growth
- Strengths are internal and environmental

▪ **Parallel Process:**

When staff treat parents with respect and demonstrate that they value the relationship with them, the parents will in turn be more likely to show respect for and value their children.



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Our Philosophy Continued...

- **Family-Centered:**
 - The best place for children to grow up is in families.
 - Providing services that engage, involves, strengthens, and supports families is the most effective approach to ensuring children's safety, permanency, and well-being.
 - Father involvement greatly impacts the future success of children
- **Culturally Sensitive:**
 - Family needs, health beliefs, coping mechanisms and child rearing practices vary by population - thus, interventions should reflect this variation;
 - Failure to value diversity in its many forms (e.g., cultural, language, racial, geographic and ethnic) may restrict a home visitor's ability to establish quality relationships with families; and
 - A home visitor's failure to establish strong relationships with families based on mutual respect and understanding will limit the opportunity for providers and families to work together.
- **Reflective Practice:**
 - Thoughtfully considering one's own experiences in applying knowledge to practice;
 - Being supported in supervision by attending to the emotional content of the work and how reactions to this content may impact outcomes; and,
 - Way of promoting the development of autonomous, qualified and self-directed professionals.



What is HFA like for participants?

Comprehensive Assessment:

- *Determine families most likely to benefit*
- *Refer to community resources*
- *Used as single point of entry*
- *Enables staff to service plan*
- *Families feel valued and listened to*

Focus on Parent as well as the Child

- *Alliance with parents*
- *Meet parent needs*
- *Change parents' perceptions of child and of parenting*



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What is HFA like for participants?

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Creative Outreach & Family Goal Planning:

- *Help parents change their perception of the world*

Service Intensity:

- *Weekly for a minimum of 6 months after birth*
- *Decreases as family competencies increase*
- *Offered 3-5 years*

Child Development Curriculum

- *Relationship focused*
- *Interactive*
- *Brain Development*



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What is HFA like for participants?

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Developmental Screens

- *Used to determine need for referral*
- *Engagement of parents*
- *Look ahead to future*

▪ ***Medical Homes & Immunizations***

- *Well Child Visits*
- *Preventative Care*

▪ ***Linkages & Referrals***

- *Parents and Child*



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Why Implementing Agencies Like HFA...

Scalability

- *Start small & grow over time*
- *Effective program design – rural, small cities, & urban areas*
- *Expand target population over time*

Flexibility

- *Target population*
- *Child development & parent-child interaction curricula*
- *Staffing requirements*



Why Implementing Agencies Like HFA...

Comprehensive Training:

- *Parent Survey*
- *Integrated Strategies for Home Visitors*
- *Wraparound Training – Distance Learning*

Standards to ensure model fidelity

- *Provides Assurance*
- *Accreditation*
- *Refined as model continues to be improved through research*





Why Implementing Agencies Like HFA...

HFA State System Infrastructure

- *Training & Technical Assistance*
- *Policies & Procedures*
- *Data & Evaluation,*
- *CQI, & Administration*

Technical Assistance & Support

- *Program planning, development & implementation*
- *Site Development Guide*
- *Best Practice Standards*

Provided in Several Ways

- *Telephone & Email*
- *On-site*
- *Webinars for Program Managers*



What Agencies Implement HFA?

Typically Depends on Funding Source

Family Education & Resource Centers

Hospitals

Health Departments & VNAs

Child Welfare Agencies

Schools & Universities





Questions & Answers?

