

CALIBER

**RAPID RESPONSE TECHNICAL
ASSISTANCE PROJECT**

National Healthy Marriage Academy

Submitted in accordance with
IDIQ No. 233-01-0067
Task Order 19
February 2003

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National Healthy Marriage Academy

Prepared by:

Courtney J. Kakuska, Caliber Associates
Chandra Robinson, AFYA, Inc.

Project Manager:
Jeanette M. Hercik, Ph.D.

Caliber Associates
10530 Rosehaven Street
Suite 400
Fairfax, VA 22030
(703) 385-3200

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I. ACADEMY OVERVIEW

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The National Healthy Marriage Academy, held January 8 and 9 in Arlington, VA, provided an opportunity for representatives from several States to learn more about the Administration for Children and Families' (ACF) Healthy Marriage Initiative. ACF planned this Academy as an opportunity to answer several questions about the initiative, including:

What is the Healthy Marriage Initiative?

What role should the government play in a Healthy Marriage Initiative?

Why should State governments develop a Healthy Marriage Initiative?

Who should be the key players in a Healthy Marriage Initiative?

What are the steps to implement a Healthy Marriage Initiative?

How does a Healthy Marriage Initiative support a State's welfare reform agenda?

The Academy afforded States an opportunity to hear presentations from nationally recognized speakers, researchers, and Federal policy makers, as well as from other States with successful Healthy Marriage Initiatives.

II. ACADEMY BACKGROUND

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The Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) of 1996, which replaced the Aid for Families with Dependent Children (AFDC) program, devolves the operational authority for welfare programs to States while maintaining policy authority at the Federal level. States have great flexibility to develop Temporary Assistance for Needy Family (TANF) programs geared toward helping families achieve self-sufficiency. Under the TANF statute, States must use TANF funds and State Maintenance of Effort (MOE) funds towards four purposes:

Provide assistance to needy families so children may be cared for in their own homes or in the homes of relatives

End the dependence of needy parents on government benefits by promoting job preparation, work, and marriage

Prevent and reduce the incidence of out-of-wedlock pregnancies and establish annual numerical goals for preventing and reducing the incidence of these pregnancies

Encourage the formation and maintenance of two-parent families.

States have had success with increasing the self-sufficiency of families. Through the use of Federal and State MOE funds assistance, States have assisted families with the development of education and training skills in order to find sustainable employment. In addition, working families have received needed support such as child care, transportation, and housing. These efforts have led to unprecedented declines in State welfare caseloads.

The next critical step in solidifying the gains achieved thus far and fostering continual progress in stabilizing and strengthening families is to focus on marriage and family formation. Three of the four TANF goals are directed at marriage and family formation. In line with these goals, research on marriage and family formation/stabilization has proliferated in the recent past. Among the findings of that research are:

According to the U.S. Census Bureau 90% of the American population is projected to get married. The vast majority of couples who marry want it to be a lasting healthy, happy marriage. Research has shown that children growing up in households where their parents are in a healthy marriage have better outcomes in terms of education, physical and mental health and behavior. Research has also shown that men and women in healthy marriages are better off financially, physically, and emotionally. In order to increase the number of men, women and children who benefit from healthy marriages the administration of children and families has adopted the following mission statement:

To help couples, who choose for themselves, develop the skills and knowledge to form and sustain healthy marriages.

To help accomplish this mission the Administration for Children and Families' Healthy Marriage Initiative aims to support State's efforts to develop programs to support two-parent, married families in their efforts to become more self-sufficient. The National Healthy Marriage Academy is one component of a larger Federal outreach, education, and technical assistance effort to encourage States to build effective, high-quality healthy marriage programs.

III. ACADEMY SESSIONS

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The 2-day National Healthy Marriage Academy included presentations from States, researchers, Federal policy makers, and other recognized experts. This section describes those presentations.

1. WELCOMING SESSION—THE ROLE THE HEALTHY MARRIAGE INITIATIVE CAN PLAY IN WELFARE REFORM

Wade Horn, Ph.D., Assistant Secretary, Administration for Children and Families

Dr. Wade Horn, Assistant Secretary for Children and Families in the U.S. Department of Health and Human Services, welcomed Academy participants, beginning his remarks by defining his role as father as the most important thing he can do, the title “dad” being more valuable to him than any other. Trained as a child psychologist, Dr. Horn is primarily concerned with the negative impact broken homes have on children. One-third of all U.S. children live in a home absent a father, and of these, 40 percent have not seen their fathers in more than one year, and 50 percent have never set foot in their father’s home. Children growing up without their father are more likely to experience negative outcomes. In fact, father absence has been associated with myriad negative child outcomes, including greater likelihood of poverty, increased risk of drug use, poorer health, lower employment, more problematic behaviors in school and at home, increased risk of abuse, and an increased involvement in crime.

Dr. Horn made several recommendations regarding strengthening fathers and families.

Broaden our understanding of child support enforcement. The financial aspects of child support are essential, but not solitary. Children need their fathers involved in all aspects of their well-being—financial, emotional, academic, and psychological. Dr. Horn applauded TANF pass-through legislation where child support collected for families receiving TANF does not go to the State to reimburse them for TANF costs, but is “passed through” to the family. Research shows this program to be effective, at least in part, because fathers know the money they pay is reaching their children.

Support incarcerated parents. There are many reasons why parents are absent from their children’s homes. One such reason is incarceration. The Administration has proposed \$25 million to support connections between children and their incarcerated parents. The program will develop parenting skills and foster connections for families for whom reunification and involvement is appropriate. In cases where it is not appropriate, mentoring programs will provide children with the positive role models they need.

Dispel myths about the healthy families movement. Dr. Horn spent some time discussing what this movement is *not* about. Healthy marriages and families are not about compelling or coercing people to get married, forcing people to stay in abusive or dangerous marriages, government matchmaking, or the withdrawal of support from single parents. Further, the Healthy Marriage Initiative is not the government’s anti-poverty program. Rather, he argues, the movement is about three principles:

- **Healthy marriage.** The emphasis in this principle is on "healthier" marriages. The objective should be the support and encouragement of healthy marriages by offering programs designed to develop the skills couples require to be successful.
- **Non-neutrality.** Government should not be neutral about marriage. Government has a history of supporting life choices shown to have positive impacts on families and children. For example, the government supports home ownership because research indicates home owners are more invested in their communities; and in communities where a higher proportion of residents own their homes, challenges such as crime, vandalism, and juvenile delinquency are greatly reduced. Likewise, research indicates that married people and their children are better off in many dimensions. The government should not make the choice for people to get married, but it should be ready to support those who do make that choice.
- **Action.** Dr. Horn argues that we “can not be paralyzed by imperfect information.” That is, we don’t know everything there is to know about healthy marriages. But, we do know some things and we should be ready to move ahead with programs that have a reasonable history of success.

Dr. Horn articulated encouraging the formation and maintenance of two-parent, healthy married families as a goal for the Bush Administration. To this end, more resources are being proposed to support States’ efforts to develop and maintain Healthy Marriage Initiatives. Among these proposed resources are:

\$100 million in research, development, and technical assistance funds for community-based marriage initiatives. Grants are available to support a series of community saturation models.

\$100 million in State matching grants for policy development, pilot projects, innovations, and experimentation in the area of Healthy Marriage Initiatives. These grants will require a one-to-one match, but the State portion can be in-kind, and current spending can be counted toward the match. Grants should focus on evaluation and “what works,” and might focus on such issues as:

- Raising a marriage vision with low-income couples at the time of birth
- Working with young people (high school) on marriage skills education

- Combining funds with teen pregnancy prevention programs to integrate the marriage message
- Outreach and education to the already-married population to strengthen their relationships
- Outreach to troubled marriages
- Eliminate perceived barriers and misinformation regarding employment services versus marriage education.

Dr. Horn concluded his remarks and opened the floor to questions.

Q: Are there models that demonstrate effective intervention strategies for “broken” homes?

A: Yes. The Oklahoma Marriage Initiative Needs Assessment shows that the majority of respondents who have gone through a divorce or other relationship trauma support marriage education programs.

Q: What does the marketing of this initiative look like? What are the relationships with HHS for managing it?

A: Like the faith-based initiative, this initiative reaches across all agencies and offices within the Department.

Q: Several stakeholders, especially the domestic violence community, are concerned about involving faith-based organizations in the Healthy Marriage Initiative because they have too strong a stake in preserving marriages at all costs. What are your thoughts on that?

A: All applications for funding will have to address safety and prevention issues. The government will not support programs in which safety is not a primary concern.

Q: Is there any movement to combine housing with other services to support young families?

A: There is certainly room for that level of innovation in the structure of the proposed funding streams. It would be interesting to use public housing. Without the Super Waiver, there will be limits, but hopefully we’ll have something.

2. WORKING LUNCH—HEALTHY MARRIAGE EDUCATION: WHAT DOES IT ACTUALLY LOOK LIKE?

Michele Weiner-Davis, MSW, President, The Divorce Busting Center

Ms. Weiner-Davis, the luncheon speaker, framed her presentation by simulating a class session where audience members were taking her marriage course. The objective of the course is to identify and development the knowledge, skills, and abilities necessary to build and sustain healthy marriages.

According to Ms. Weiner-Davis, 50 percent of the divorces in this country occur within the first four years of marriage. One contributing factor to this statistic is the mistaken notion that passion alone will carry couples through difficult times. Couples, Ms. Weiner-Davis argues, “need a roadmap...in order to avoid faulty expectations.” Marriages have stages that are as equally predictable as those in child development. Knowing about these stages “takes the sting out” when couples encounter them, and skills can ameliorate the impacts of the hardships. However, some people come from a childhood with poor marriage role models and don’t have the knowledge or skills necessary to build successful marriages. Further, even if a person was raised in a good marriage, many of the skills they witnessed being used don’t work in today’s culture and environment.

In response to this, Ms. Weiner-Davis created “Keeping Love Alive,” a curriculum she has used in many settings, including in a Web-based format. The curriculum incorporates several essential principles:

It is applicable to all kinds of couples, in any point in their relationship, and in any relationship status.

It is easy to understand.

Couples see quick results, which is a powerful positive reinforcement

It addresses different levels of motivation (i.e. one spouse “drags” the other along).

It develops verbal communication skills which help in all aspects of life, because 90 percent of communication is non-verbal.

It provides an “anti-hopelessness measure.” You can’t give a couple the what and how without the why. This curriculum imparts inspiration.

The class itself consists of between six and seven learning modules, broken down into three main components:

Myth-busting session. This session begins with a relationship quiz where statements are read and participants are asked to judge them as “true” or “false.” Some interesting findings from this quiz are:

- Sixty-nine percent of the things couples fight about are unresolvable.

- Couples in long-term marriages are no more similar to one another than those couples who end up divorcing.
- A major obstacle to marital success is different concepts of loving. People tend to show love in the way they like to receive it, rather than showing love in the way their partner likes to receive it.

Goal-setting session. This session begins from the premise that few people actually set relationship goals. These would articulate what each spouse wants and how it might be achieved. To help facilitate the development of these goals, Ms. Weiner-Davis offers a “solution-oriented primer” that includes three features of workable goals:

- Workable goals must be positively stated. Couples should ask themselves “what would be different if my goal were achieved?”
- Workable goals must be action-oriented.
- Workable goals are small and manageable. Successful goals do not “bite off more than they can chew.”

The Blame Game. The primary lesson of the Blame Game is that it is not sufficient for one partner to want the other to change. If one person changes, the relationship changes. Ms. Weiner-Davis polled the audience about whether they knew one issue or complaint they could bring up that immediately puts their partner on the defensive. She argues that relationships also have issues that immediately bring about a positive reaction in the partners. These issues can bring about positive change.

3. HEALTHY MARRIAGE INITIATIVE EFFORTS AND LESSONS STATES AND REGIONS HAVE LEARNED ALONG THE WAY

Carlis Williams, Regional Administrator, ACF Region IV (Atlanta)

Moderators: Aaron Larson, TANF Program Specialist, ACF/OFA

John Horejsi, TANF Program Specialist, ACF/OFA

This session afforded States an opportunity to share what they have accomplished in implementing their Healthy Marriage Initiative and the lessons they have learned along the way. Carlis Williams offered some introductory remarks to frame the discussion. Ms. Williams articulated seven points necessary for the Healthy Marriage Initiative to be successful.

Articulate a vision. ACF has put forth a vision, and it must be “moved out” to the States and localities. This vision requires a far-reaching culture change and paradigm shift, and care must be taken to avoid unintended consequences.

Educate stakeholders about research findings on healthy marriages and child well-being.

Understand that attitudes about marriage vary by culture. The overall objective must be to achieve the best possible outcomes for America's children.

Establish a focal point for the initiative. There must be a "buck stops here" point of accountability.

Familiarize yourself with research, programs, and models. Learn from both experts and peers.

Develop partnerships: reach out to community- and faith-based organizations. They are established in the field and bring invaluable experience and expertise. Look to Alabama, Michigan, and Arizona for guidance.

Design an organic system. Allow the movement to grow from the Responsible Fatherhood movement.

Following Ms. Williams' remarks, States broke into two sessions to discuss their own experiences with the Healthy Marriage Initiative.

Connecticut

Child Support was the initial lead agency.

Community partnerships with faith-based organizations have been established.

The State designed a program with the Workforce Investment Board and Catholic Family Services to create a "no wrong door" system of information and referral for family stabilization services.

Connecticut is suffering from budget crisis.

There is a strong fatherhood message, but they lack funds for the environmental scan they'd like to conduct.

New Jersey

The faith-based community has had a significant impact.

The philosophical agreement is in place.

Concern remains over funding and the availability of grants.

Clergy are very committed.

The Concerned Pastors of Trenton and Vicinity are working on all purposes of TANF. They are more explicit about healthy marriage and calling on leadership to push for a statewide initiative.

New York

Has not been a governor's initiative

Outreach efforts underway regarding purpose

Tracking local community marriage covenants

Marriage message in home-visiting programs

Parenting education required in high school

Cornell University offers pre-parenting training

Syracuse University offers Parent's Success Initiative for non-custodial parents; program builds relationships and stabilizes families; focus is on child well-being.

Colorado

Governor's Strengthening Families Initiative and Conference¹

Executive Order to "do no harm to families" in program design and execution

1999 Legislation to eliminate marriage penalty

"Grandparent Bill" allows children to stay in the home without CWS placement; support payments flow directly to the home

Using TANF money to improve child support payments

Awareness is there, but more education on topic is needed

Some counties (El Paso, Mesa) working on TANF purposes III and IV

Support from Governor's office and ACF Region VIII are essential

Planning a "policy-level" conference that will focus on more than marriage: youth development, family literacy, charitable choice, responsible fatherhood

Hired research consultant to scan national landscape and develop action plans.

¹ See Conference Report at http://www.calib.com/peerta/policies/pdf/colorado_strength.pdf.

Arizona

Passed legislation to create marriage and communications commission, made up of stakeholders from public, private, and nonprofit sectors

Let RFP for marriage skills-building workshops in March 2001; hired 11 contractors to conduct workshops; total of 226 workshops attended by 740 couples; total of 539 couples completed the training sequence

Recognized value of voucher to provide marriage skills workshops (TANF pays 85 percent of cost)

Developed *Marriage Handbook* via an outside contractor; available at all marriage license locations; lists available workshops and locations

“Culture of divorce” a challenge; education can overcome and teach value

Focus on costs versus benefits

Helpful to have an outsider develop the program

Informing community/conducting outreach important; RFP required respondents to include a marketing plan; in second year of contracts, there will be funds dedicated to supporting marketing efforts

Cultural sensitivity critically important

There must be both faith-based and secular alternatives available.

Idaho

Pilot project in a town of 60,000 people for marriage covenant; marriage license and voucher from the city required for a marriage in the city; in order to get license and voucher, must attend class

Working with the First Lady of Utah, Jackie Leavitt.

Following the State comments, Moderator Aaron Larson of OFA reminded the group of several things:

We can learn from past success and past mistakes. States “don’t have to step on the same landmines.”

One of the main goals of The Healthy Marriage Initiative is to increase percentage of children being raised by parents in healthy marriages.

Ninety percent of Americans will marry. They want long-term happy healthy marriages.

In a concurrent session, the second group of States were sharing their experiences.

North Carolina

Just starting on the issue of healthy marriage

Currently working on developing a fatherhood initiative

Great deal of fear about entering the Healthy Marriage Initiative arena; primarily because of the implications of attaching public assistance to marriage and domestic violence concerns

Working with domestic violence and child welfare stakeholders to encourage support and build partnerships.

Arkansas

Healthy Marriage Initiative high on the Governor's agenda

Need better buy-in from legislators.

Passed covenant marriage law

Eliminated the marriage penalty

Encouraging clergy to promote marriage

Implemented statewide television spots to promote healthy marriages

Working to develop a model for marriage education programs

Would like to run pilot projects.

West Virginia

Provides a \$100 increase in TANF benefit to married couples

Developed a fatherhood initiative with TANF dollars; this initiative may support some work on marriage.

Mississippi

Early in the planning stages of developing a Healthy Marriage Initiative

Fatherhood initiative has a component targeting marriage

Currently have abstinence programs targeting teens

Has Family First Resource Centers

Implemented a 6-month marriage disregard.

Texas

“We have a lot of lessons to be learned”

Took \$3 out of marriage license fee to develop a handbook on marriage

At the “information gathering stage.”

Virginia

At the early planning stages of developing a Healthy Marriage Initiative

Still gathering information, particularly in the youth arena; interested in youth’s views/ideas/perceptions regarding marriage

Have a very strong fatherhood initiative

Child support enforcement office currently conducting a demonstration project that involves working with two model fatherhood programs in VA to promote/support marriage

Lesson learned—define boundaries early.

Florida

Developed publications on healthy children and the connection with healthy marriages

Divorce rate in Tallahassee dropped 16 percent

In 2002, endorsed the “PAIRS” programs as a marriage education model; have implemented both Christian and Jewish versions; Muslim PAIRS currently under development

In April 2003, Florida will hold a statewide summit on child well-being to address faith, ethnicity and relationship type (heterosexual, homosexual) as they relate to healthy marriage

Currently preparing to fund a marriage program

Passed legislation that gave an incentive for participating in marriage preparation.

4. PLENARY PANEL—MARRIAGE EDUCATION: WHAT’S OUT THERE AND WHAT’S EFFECTIVE AND HOW TO INCORPORATE IT INTO YOUR INITIATIVE

Christopher Gersten, Principal Deputy Assistant Secretary for Children and Families, ACF
Naomi Goldstein, Director, Division of Child and Family Development, Office of Planning, Research, and Evaluation, ACF

Bill Coffin, Special Assistant for Marriage Education, Office of the Secretary, ACF

Mr. Gersten opened his remarks by describing ACF’s vision for a series of community Healthy Marriage Initiatives. He described the vision as “saturation model,” meaning that initiatives include a broad base of coalition partners. Community Healthy Marriage Initiatives should combine resources from multiple agencies, all of whose missions include supporting healthy marriages, and reducing out-of-wedlock births. Potential partners will vary by State, but might include:

Child support enforcement

Community action agencies

Extension services

Faith- and community-based organizations

Media

Schools

TANF programs

Universities.

Mr. Gersten also articulated the advantages of choosing one curriculum and using it across all programs. This allows for shared resources and joint fundraising.

In order to be best positioned to compete successfully for the proposed grants, Mr. Gersten encouraged States to create coalitions and begin working now. At the State level, TANF, the Safe and Stable Families Act, and the Office of Refugee Resettlement are all possible avenues for current funding.

Bill Coffin, Special Assistant for Marriage Education in the Office of the Secretary, presented a communication facilitation and listening technique called “The Floor.” For more information on the Speaker/Listener technique see www.prepinc.com. The principles of this process—effective listening, paraphrasing, and sharing both speaking and listening responsibilities—are “common sense, but not common practice.” Mr. Coffin also articulated three essentials of a couples primary coping system. According to David Mace founder of the Association for Couples in Marriage Enrichment they are:

Commitment to ongoing growth and change

Good communication skills

Ability to deal with inevitable conflict and anger in marriage.

Following Mr. Coffin’s comments, Naomi Goldstein of the Office of Planning, Research, and Evaluation in HHS, began her presentation by discussing the existing evidence that services can help couples who choose marriage to develop the skills they need to build healthy marriages. Dr. Goldstein covered six main points. First, most people want to marry—people across demographic groups want, expect, and value marriage. Over ninety percent of people describe a happy marriage as “very important” or as one of their “most important” life goals.

Second, we know what factors predict marital stability and satisfaction and child well-being. . This knowledge can underpin the education methods used. Some of these factors may be changeable at the time of an intervention, and others may not. For instance, whether parents divorced as a child, a history of cohabitation, a previous divorce, religious differences, young age of partners, or a lower economic status are all risk factors that are likely to be unchangeable at the time of an intervention. Conversely, potentially malleable risk factors include the ability to communicate positively and effectively, managing conflicts, physical aggression, attitudes, commitment and motivation..

Third, a variety of interventions have been developed based on knowledge about what predicts marital success. Fourth, some interventions have been empirically tested, showing that people can learn to change behavioral risk factors. Overall these studies provide evidence that couples can learn to communicate more positively, reducing the behaviors that predict marital dissatisfaction and breakup as well as poor child outcomes. Some studies also directly demonstrate reductions in divorce. One synthesis found that across a range of studies, the average participant in a marriage preparation or enrichment program was better off than 67 percent of non-participants, in terms of marital satisfaction and skills. Effects did not vary across education level, income, gender, religion, or length of marriage. Effects were larger for couples in a state of distress upon entering a program, and also diminished over time.

Fifth, the extant research findings, while promising, have some limitations. They are too often based on small, non-representative samples and lack adequate experimental design or long-term follow up. In addition, they , have not generally focused on low-income populations and/or unmarried parents, -or included child-level outcome measurement. Finally, a number of evaluations are currently underway that address these gaps, including research sponsored by ACF.

5. POLICY AND HEALTHY MARRIAGES

Jack Tweedie, Department Manager, Children and Families, National Conference of State Legislatures

Courtney Smith, Senior Policy Analyst, National Governors Association

Michael Fishman, Senior Vice President, The Lewin Group

Mack Storrs,

Mr. Storrs opened the session by describing the funding proposed for President Bush's healthy marriage initiative, and giving a synopsis of the funding Section 103, *Promotion of Family Formation and Healthy Marriage*, of the House-passed TANF Reauthorization Bill, HR 4, *Personal Responsibility, Work, and Family Promotion Act of 2003*.

Section 103 requires TANF State plans to provide for the equal treatment of married, two-parent families, and repeals the high-performance bonus available to States for reductions in out-of-wedlock births, replacing it with authorization of expenditures for marriage promotion activities including:

Public advertising campaigns on the value of marriage and the skills needed to increase marital stability and health.

Education in high schools on the value of marriage, relationship skills, and budgeting.

Marriage education, marriage skills, and relationship skills programs, that may include parenting skills, financial management, conflict resolution, and job and career advancement, for non-married pregnant women and non-married expectant fathers.

Pre-marital education and marriage skills training for engaged couples and for couples or individuals interested in marriage.

Marriage enhancement and marriage skills training programs for married couples.

Divorce reduction programs that teach relationship skills.

Marriage mentoring programs which use married couples as role models and mentors in at-risk communities.

Programs to reduce the disincentives to marriage in means-tested aid programs, if offered in conjunction with any activity described in this subparagraph.

Following Mr. Storrs, Mr. Fishman comments were related directly to the findings of a Lewin Group study on State policies to promote marriage. The project aimed to measure activities specific to marriage (e.g., premarital counseling) rather than those with an indirect connection (e.g., child support enforcement), was not limited to policies targeting the TANF population, followed programs developed both pre- and post-PRWORA, and catalogued both enacted and proposed interventions.

The methodology for this short-term project included the convening of an expert panel and a review of secondary sources. The study focused on several types of interventions and initiatives. Findings about each of these initiatives are presented below:

Campaigns, commissions and proclamations

Two States launched campaigns to reduce divorce rates by 33 percent or more.

Two State proposed media campaigns to highlight benefits of marriage, but the bills failed.

Five States launched commissions to implement specific policies.

Three States issued proclamations.

Divorce laws and procedures

Covenant marriage laws passed in 3 States, proposed in 25

Modification to no-fault divorce laws passed in 1 State, addressed by 16

Mandatory education on effects of divorce enacted in 19 States, considered in 9.

Marriage and relationship preparation and education

Incentives for marriage preparation passed in four States, introduced in nine.

- Fee reductions (passed)
- Increased waiting periods (proposed)
- Tax credits (proposed)

Marriage education for adults passed in 9 States, introduced in 13 others

- Pre- or post-marriage
- Not mutually exclusive of incentives

State funding for marriage preparation and support

- Of six States, five use TANF funds.

State tax policies

State EITCs enacted in 16 States, generally operating as a percentage of the Federal credit

Provisions to eliminate or ease State marriage penalties include:

- Flat tax (6 States)
- Tax brackets for married couples twice as wide (8 States)
- Brackets wider, but not doubled—reduce but not eliminate marriage penalty— (7 States)
- Use of one return by married couples but pay taxes on separate income (10 States)
- No income tax (9 States).

State transfer policies (Medicaid and TANF)

General Issues

Do two-parent families have to meet additional requirements to be eligible (e.g., 100-hour, recent work history rules) or is eligibility based solely on financial circumstances?

How are assistance units defined and income and resources counted for purposes of determining eligibility (i.e., deeming rules)?

Deeming Issues—see Exhibit I

EXHIBIT I DEEMING ISSUES		
	TANF	Medicaid
Two parents, children in common	If paternity established, income of both counted regardless of marital status	If paternity established, income of both counted regardless of marital status
Cohabitors, no children in common	No Federal anti-deeming provisions; State policy determines which income(s) to include	Federal anti-deeming provision bars States from denying benefits to child based on income of parent with no legal duty to support child—income of non-parent not counted
Cohabitors, some children in common but not others	All children considered part of assistance units; income of both parents counted	Income would be counted as described in above scenario
Marriage	If no children in common, State policy determines if income of step-parent is counted; if some children in common, all children are part of the assistance unit; step-parent income counted	If no children in common, or some children in common, State law determines whether step-parent is legally responsible for step-child; if so, income counted; for children in common, income counted

TANF policies

- Thirty-three States base eligibility for two-parent families solely on financial circumstances
- Nine States provide marriage incentives to recipients; disregard all income of new spouse (biological or step-parent) for three to six months; disregard income of step-parent if family is below specified needs standard; include step-parents as eligible members of household; add \$100 to monthly benefit of married couples.

State vital statistics

Marriage data

- Two States do not collect data, one no longer publishes data due to concerns about accuracy
- Thirteen States report fairly limited data (e.g., total number, rate, county)
- Eleven States provide demographic data (e.g., age, race)
- Twenty-three States include detailed information (e.g., previous marital status)

Divorce data

- Three States do not collect data; one no longer publishes due to concerns about accuracy; two deemed by States as unreliable
- Nineteen States report basic information (e.g., number of divorces, rates)
- Twenty-five States provide additional information and detail (e.g., age, race, number of children, length of marriage, number of previous marriages).

Marriage support and promotion

Four States incorporate relationship skills into home visitation programs or target fragile families

Six States have mentoring, education, or counseling programs that aim to strengthen relationships; some focus on the TANF populations, while others focus more broadly

Five States include marriage components in statewide fatherhood initiatives.

Youth education and development

School-based marriage education enacted in five States, proposed in four; Florida requires marriage education in all high schools

Twenty States emphasize abstinence until marriage in schools and in programs that target youth

- Two States incorporate abstinence until marriage in statewide sex education policy
- Fourteen States emphasize abstinence in their Section 510 Title V-funded programs
- Five States undertook media campaigns to promote abstinence until marriage.

Mr. Fishman articulated the need for States to consider building evaluation components into their Healthy Marriage Initiative designs from the beginning. He encouraged States to work with researchers to develop appropriate evaluation design methodologies.

The final report from the Lewin Group's study is available on-line at <http://aspe.hhs.gov/hsp/marriage02f/>.

6. STATE MODELS—LESSONS LEARNED FROM THE OKLAHOMA AND ARIZONA HEALTHY MARRIAGE INITIATIVES: HOW TO PLAN AND IMPLEMENT A HEALTHY MARRIAGE INITIATIVE TO SUPPORT SELF-SUFFICIENCY EFFORTS

Mary Myrick, Director, Oklahoma Marriage Initiative, Public Strategies
Senator Mark Anderson, State Legislator, Arizona

The Oklahoma Story

The Oklahoma Marriage Initiative (OMI) grew out of a concern over high poverty rates in the State. Initiative planners decided to use a then-surplus of TANF monies to fund the project and quickly learned that the divorce rate was an outgrowth of a larger problem. Through a research study conducted by Oklahoma State University, the necessary hard data to understand the problem were obtained: low economic well-being was tied to the high divorce rate. OSU’s findings informed initiative plans and allowed stakeholders to define what would be considered a “success” for the initiative and to set measurable goals.

To date, OMI has trained nearly 600 providers in the PREP system of marriage education and preparation. There are adaptations for Christian, Jewish, and African-American families. The principles of each remain the same, but the stories are presented in more culturally relevant ways. They have trained faith-based organizations, high schools, community action agencies, corrections departments, police (especially the “domestic shift”), and offer training to anyone who works with families.

Ms. Myrick offered several lessons learned for State Healthy Marriage Initiative planners:

The ability to demonstrate access to the low-income population is very important.

Leadership is critical.

Partnerships between service providers and evaluators facilitate better information gathering and, ultimately, more informed evaluations.

Build a sustainable capacity.

Don’t begin with a PR campaign, begin with services. You don’t want to drive up a demand for services you’re not ready to deliver.

Control the message of your initiative.

Be honest about what you know and what you don't. Learn from other's successes and challenges.

Be instructive without a judgmental attitude.

The Arizona Story

State Senator Mark Anderson described the impetus of Arizona's Healthy Marriage Initiative as a realization that government was being too responsive to divorce (by paying for such services as child support enforcement), and should instead consider being proactive to prevent divorces. In 2000, a Bill was passed to let an RFA for community-based organizations to provide marriage training services. While several misconceptions had to be overcome, they were ultimately successful by bringing discordant voices to the table and addressing their concerns honestly. For example, the domestic violence community was very concerned about the initiative. Honest dialogue with initiative planners led to a requirement that all grant applications address domestic violence.

Senator Anderson cautioned other States to be sure to include funds for a marketing and outreach campaign as a part of any Healthy Marriage Initiative. In the initial grant competition, providers were each responsible for marketing their own services, with varying sets of skills and results. In addition to earmarking financial resources for marketing purposes, Senator Anderson recommended using at least one provider with expertise in outreach to low-income and minority communities. By providing participants with trainers with whom they share certain commonalities, trainers are "naturally credible" sources of information for workshop participants. Senator Anderson also recommended including funding for evaluation in the grants.

In Arizona, clients access information on the Healthy Marriage Initiative at TANF entry. Healthy marriage workshops are counted as an allowable work activity under State TANF guidelines.

7. **ECONOMIC GROWTH AND THE HEALTHY MARRIAGE INITIATIVE: HOW A HEALTHY MARRIAGE INITIATIVE CAN SUPPORT THE ECONOMIC GROWTH OF YOUR STATE**

Commissioner Howard Hendrick, Cabinet Secretary, Oklahoma Department of Health and Human Services

The Oklahoma Marriage Initiative grew, in part, out of a concern regarding Oklahoma's high divorce rate and low per capita income. Economists at Oklahoma State University documented the interrelated nature of these two dynamics saying they "hold hands. They push and pull each other." These economists found that "negative social indicators were impacting the economy" in Oklahoma.

In response to these findings, Governor Frank Keating, articulated four goals to impact marriage, divorce and family:

- Reduce divorce rate
- Reduce out-of-wedlock births
- Reduce alcohol and drug addiction
- Reduce child abuse and neglect.

These goals were no small undertaking for a State nearly leading the nation in divorces. In addition, in nearly half of Oklahoma's counties, petitions for divorce exceeded applications for marriage licenses. The relationship culture was one of significant cohabitation motivated by avoiding a tax penalty or to "test" the relationships before marrying, and the proliferation of single parent households accounted for the most robust demographic trend in the State. Out-of-wedlock births had steadily increased from 12.5 percent of all births in 1976 to a projected 39 percent for 2006.

In planning their Healthy Marriage Initiative, Oklahoma drew on the research findings of Dr. Ronald Mincy of Columbia University and on *The Case for Marriage* by Dr. Linda Waite and Dr. Maggie Gallagher, both of which report significantly different characteristics for married versus unmarried people.

Dr. Mincy's research indicates that for children born into married families, there is an increase in the marriage rate and a decrease in unwed births. There is also an increase in the proportion of children who will remain in married families (a positive cyclical effect), and an

increase in the proportion of parents who eventually marry. For married parents, there are better outcomes in education, substance abuse, employment, and earnings.²

Drs. Waite and Gallagher describe marriage as “a public institution, not merely a private choice” and associate marriage with several positive outcomes, including a longer, healthier life; earning more money and accumulating more wealth; and improved physical, spiritual, and material outcomes. Specifically, Drs. Waite and Gallagher find that married people are more fulfilled in all aspects of life, and that they experience less violence. They report that for men, the impact of divorce on life expectancy is equivalent to smoking a pack of cigarettes per day.

The Oklahoma Marriage Initiative has shown that not only do carefully planned and executed State marriage promotion programs reduce the cost of “artificial family supports” like child support enforcement, food stamps, and Medicaid; but they reduce demand for public services, improve child well-being, and improve life expectancy and quality, health, and material gain.

In conclusion, Commissioner Hendrick reiterated that “marriage is an economic issue” that, when healthy, enhances both individual and collective economic well-being. Marital success and well-being can be improved by marital education programs; and family strengthening programs are effective and do contribute to the economic well-being of individual families.

8. LESSONS LEARNED FROM THE CHATTANOOGA AND GRAND RAPIDS COMMUNITY-WIDE HEALTHY MARRIAGE INITIATIVES: HOW TO PLAN AND IMPLEMENT A COMMUNITY-WIDE HEALTHY MARRIAGE INITIATIVE TO SUPPORT SELF-SUFFICIENCY

Mark Eastburg, Ph.D., Vice Chair, Healthy Marriages of Grand Rapids, Pine Rest Family Institute

Rozario Slack, Director of Fathering and Urban Initiatives, First Things First, Chattanooga, Tennessee

Senator Bill Hardiman, State Legislator, Michigan, Healthy Marriages of Grand Rapids

Dr. Eastburg and Senator Hardiman began this session by briefly describing Healthy Marriages of Grand Rapids (HMGR), a 6-year-old Community Marriage Project built on the principles of a courtship period, premarital education, and marriage enrichment. In order to be successful in healthy marriage education, HMGR has found three things necessary:

² Kakuska, C. (November 2002). *ACF Rapid Response Colorado Strengthening Families Conference*. http://www.calib.com/peerta/policies/pdf/colorado_strength.pdf.

A committed champion—someone who is recognized and respected in the community.

A clear vision with a broad constituency but targeted goals—HMGR’s goals were defined as percent targets over 10 years in reduction of children born out-of-wedlock and divorce rate and an increase in the number of couples receiving marriage preparation services.

Coalition building efforts—bring together stakeholders and facilitate conversation, share mistakes and draw on community role models.

Healthy Marriages Grand Rapids is organized into task forces: Clergy, Legal/Judicial, Business, and African-American Clergy, each of which brings a certain piece of the picture to the table. Together, these Task Forces can leverage the resources HMGR needs. They reach out to media and are present at certain special events (e.g., bridal fairs). They cooperate with researchers at local colleges and universities to collect baseline data and to inform future directions and to “course correct.”

Rozario Slack of First Things First, Chattanooga, TN, is in the business of impacting a culture and mind set. His objective is to make fatherhood and marriage “cool again” and to help young men avoid the “baby-mama drama.” Mr. Slack recognizes the need for “credible, trusted messengers” to get this message out and that the message needs to be packaged for different audiences. What resonates with one subset of the population will not necessarily resonate with another. Mr. Slack offered several lessons learned:

Take the long view—Systemic change takes time and some initiatives require a long-term commitment. Change agents must be willing to serve patiently, build credibility and develop relationship, that can enable them to have a real impact on the public policy agenda.

Creating systemic cultural change requires developing multiple levels of advocacy. Consistent, patient, fact-based advocacy on family formation, father involvement, health and other risks for children in single-parent families can have an impact on public policy over time.

Every situation is an opportunity to talk about healthy marriage.

Determined advocates can have a powerful impact, even without the benefit of a local organization such as First Things First.

Communicate clearly and listen to your supporters. Listen carefully to what your constituency is telling you they need.

Develop a network to learn when (and who) to ask for help, and when to offer help.

Build a strategic partnership with the news media

Promote issues, not agendas. By promoting issues, you can develop a reputation as a “viable, fair news source.”

Strategically target and work with key agencies and opinion leaders who are in a position of influence over family policy.

Identify credible representatives.

Tap into the resources offered by the faith community.

Be willing to tackle tough or controversial issues.

Failure is not a bad thing if you learn from it.

Use research often and honestly.

Identify obstacles and develop specific strategies to overcome them.

Transforming a community is all about relationships.

The messenger must fit the message. The messenger needs to have credibility in the community. Train a variety of volunteers and area professionals. Take care to remember that the *message* transcends cultural boundaries.

Take advantage of multiple marriage education curriculums. To maximize your efforts, glean from the myriad of curricula that have been developed to meet the needs of different segments of your community.

9. WORKING LUNCH—STRATEGIC PLANNING FOR STARTING A HEALTHY MARRIAGE INITIATIVE TO SUPPORT YOUR WELFARE REFORM EFFORTS

Senator Mark Anderson, State Legislator, Arizona

Commissioner Howard Hendrick, Cabinet Secretary, Oklahoma Department of Health and Human Services

First Lady of Utah, Jackie Leavitt

Brent Barlow, Ph.D., Chair, Utah Governor’s Commission on Marriage

State Senator Mark Anderson of Arizona opened the working lunch by articulating the three main messages of his earlier presentation. In order to build a successful Healthy Marriage Initiative, States should:

Draw on what others have done to legitimize efforts

Appeal to the budget conscious: the proactive nature of the Healthy Marriage Initiative makes it a cost saving proposition

Be proactive with the media; share materials with them.

Following Senator Anderson, Oklahoma Commissioner of Health and Human Services Howard Hendricks offered his thoughts on the essential underpinnings of a successful Healthy Marriage Initiative. From his perspective, the Healthy Marriage Initiative:

Reduces the demand for artificial family supports (e.g., child support) by bolstering natural family supports

Is a research-based, defensible public expenditure

Builds on the notion that transition moments (e.g., birth of a child) are teachable moments, when people are open to learning new skills and techniques

Supports culture change; for example, Oklahoma hospitals are changing their understanding of child birth from a medical event to a “family development” event.

Utah First Lady Jackie Leavitt and Dr. Brent Barlow, Chair of the Governor’s Commission on Marriage in Utah, spoke about the Healthy Marriage Initiative in their State. The Governor’s office has developed many opportunities to recognize, celebrate, and educate couples about healthy marriage. There are annual conferences, the Governor’s Commission, and “Gold Medal Marriages” where couples are recognized for achievement in marriage. They have developed a video and a Web site (<http://www.utahmarriage.org/>) to support the initiative. Utah also runs a Home Visitors program.

One of the operating principles in Utah is that the Healthy Marriage Initiative has “room for everyone.” It is important to “collaborate rather than compete.” Utah advises Healthy Marriage Initiative planners not to underestimate the value of potential partners, but to “launch all boats.” Dr. Barlow undertook a study to measure the financial cost of divorces in Utah. He found that each divorce costs \$20,000. When resources are limited, it is especially important to prioritize needs.

10. PLENARY PANEL—HOW DO YOU BUILD A COALITION, FUND, AND EVALUATE YOUR HEALTHY MARRIAGE INITIATIVE?

Jerry Regier, Secretary, Florida Department of Children and Families

Reverend George Young, Holy Temple Baptist Church, Oklahoma City

Beth Stanford, Education Director, Oklahoma Coalition Against Domestic Violence and Sexual Assault

Beginning with Secretary Regier, this panel discussed the steps necessary to build, sustain, and evaluate a Healthy Marriage Initiative.

Secretary Regier offered several lessons learned from his time in Oklahoma and in Florida:

Educate all stakeholders separately. Identify the relevant groups, draw on other locations, and access TA to reach out to key constituencies.

Come together at the right time.

Hire an expert in communications strategy to help you implement your outreach plan. Using contractors allows someone to concentrate more fully on the project. Develop an innovative and bold way of thinking.

Start with a hill you can climb.

Make whatever you do big enough to draw a crowd. Big things require a policy initiative and leadership from the top.

Involve real workers to implement the program. This includes TANF caseworkers, WIC managers, people in touch with your client families.

Don't re-create the wheel. Use existing systems and resources (e.g., hospitals) to encourage an “organic paradigm shift.”

Collaborate with key partners (e.g., universities) for research and baseline data. Build a relationship with researchers, bipartisan legislators, bar associations, faith leaders and anyone else with an investment in the success of families and children.

Reverend George Young sees passion as the first, key ingredient in a successful Healthy Marriage Initiative. Many clergy would welcome the chance to be involved, but either are not approached or lack the tools necessary to be effective. Reverend Young emphasizes the importance of giving couples something to start with and encouraging them to “focus on the marriage, not the wedding” because “relationships go deeper than government policy.” Effective intervention is critical because, according to Reverend Young, the demise of the family leads to the failure of the community, which robs the community of resources to support failing families.

Representing one of the essential partners in the Healthy Marriage Initiative, Beth Sanford of the Oklahoma Coalition Against Domestic Violence and Sexual Assault discussed the concerns of the domestic violence community and strategies planners might use to ease their concerns and partner effectively with them. Ms. Sanford reminded the attendees that while disagreement on the definition of intimate partner violence (IPV) clouds statistics on prevalence, caseworkers see victims of IPV everyday, whether or not they realize it. Staff must be trained on the issues of power and control so they can recognize victims when they do attempt to access services. Further, staff must be trained on safety issues, both for victims and for themselves, should perpetrators attempt to retaliate against someone they see as supporting a victim's attempts to leave an abusive situation.

Ms. Sanford offered the following suggestions for reaching the domestic violence community and ensuring their concerns are addressed as Healthy Marriage Initiatives are formulated:

Understand and appreciate that coalitions such as the one Ms. Sanford represents are often the only voice victims have. Recognize that and treat them as such.

Remember that the coalition will always emphasize safety. This is not synonymous with arguing for divorce. The priorities are not necessarily different, but they can sound that way.

Recognize that the coalitions know a great deal about domestic violence, what works, and what doesn't. They will have ideas and suggestions that should be taken seriously.

11. WHERE DO WE GO FROM HERE?

Wade Horn, Ph.D., Assistant Secretary for Children and Families
Andrew Bush, Director, OFA/ACF

In this concluding session, States were asked to respond to three questions:

What will you take from this meeting?

Where will you go from here? What are your next steps?

What are the ways the Administration for Children and Families and other Federal officials can help?

New York

Learned a lot about program ideas, options, and processes (e.g., building coalitions).
The conference also helped us formulate strategies to work with the domestic violence community on this initiative.

The next step is to explore and locate funding alternatives.

ACF can help by providing resources (meetings and program ideas) and TA events.
Would like a meeting in Syracuse to pull together key groups and form a coalition around this issue.

North Carolina

Learned a great deal from Oklahoma, especially from their lessons learned.

The next step is to explore the available funding streams and political climate in home State.

ACF can help by continuing to provide information on this initiative.

Nevada

Became aware of new organizations, possible TA resources. This conference has prompted us to begin considering the options of a local vs. State initiative.

The next steps is to talk to administration and determine their vision. May put together a summit to begin dialogue and coalition building.

ACF can help by providing funding and needed TA (e.g., education and clarification on “healthy” marriage).

Idaho

The resources were abundant and the economic information beneficial.

The next step is to develop a project plan and submit it to State administration.

ACF can help by providing continual support.

Colorado

Learned not to let the Healthy Marriage Initiative drift along. Realize we need innovative ideas to bring the domestic violence community to the table.

The next steps are to develop action plans and formulate a direction.

ACF can provide funding, more information on existing funds, and TA.

New Jersey

This meeting showed the need to bring the domestic violence community in right away. It also provided opportunities for networking while highlighting pitfalls, challenges, and opportunities to get legislation passed. It was helpful to meet key individuals.

The next steps are to continue coalition building, rallying faith-based organizations. Will send position papers to clergy and seminaries, and reach out to domestic violence, gay, and lesbian communities.

ACF can help by sharing information and providing TA.

Connecticut

The Oklahoma, Michigan, and Arizona experiences provided beneficial information to take back. Developed understanding of “healthy” marriage versus marriage.

The next step is to build the political will to act on this information.

ACF can help by providing data on marriage and child well-being. TA is needed.

Florida

Developed appreciation of Florida’s place in the overall initiative; realized we’re not alone in our slow progress.

The next steps are to identify coalitions, begin major planning, and present ideas to the governor.

ACF can help with TA, data, and more flexibility with current funds.

Texas

Allowed for information gathering, identification of groups to work with and allowed me to form connections.

The next step is continued short- and long-term planning.

ACF can help by providing continual support.

Arkansas

Key organizations that shared dialogue were great.

The next steps is to work with legislators.

ACF updates and samples of curricula would be great.

Mississippi

Showed that more work is needed. The lessons learned from other States was helpful.

Next steps are to work with the domestic violence community and present information to executive-level officials.

ACF can help with a Healthy Marriage Initiative conference in Mississippi and guidance on TANF (once reauthorized).

West Virginia

Information on the economic aspects of the Healthy Marriage Initiative was helpful.

The next steps are to develop a one-page paper that captures the importance of healthy marriages and to talk to key individuals to determine what is currently being done about healthy marriages.

ACF can provide e-mail updates on legislation.

Virginia

Showed that our coalition needs tweaking. We must invite others to the table.

Meeting also allowed for networking, defined what a Healthy Marriage Initiative is and is not, and illustrated the need to prepare for resistance.

The next steps are to strengthen our coalition and begin strategic planning.

ACF can provide TA and funding.

Arizona

Learned the need to create more data.

The next step is to broaden the coalition.

ACF TA on program design would be helpful.

At the conclusion of the State-level feedback, Dr. Horn closed the meeting by offering the his thoughts on the “takeaway” points from the conference:

The Healthy Marriage Initiative is a thoughtful, empirical approach to improve the lives of children.

Activity concerning this issue is already underway.

There are ways to discuss this issue around the sensitive issues of domestic violence and single-parent homes.

The Federal government is here to help by providing resources and technical assistance.

This is an exciting issue. It is cutting edge.

IV. CONCLUSION

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The Office of Family Assistance National Marriage Academy brought several States together to work through the philosophical and programmatic issues surrounding the Healthy Marriage Initiative. States benefited from presentations from Federal policy makers, State administrators, local providers, and researcher/practitioners. As evidenced by the feedback provided in the closing session, States left the Academy able to develop action plans for building coalitions and moving their Healthy Marriage Initiatives forward.

Participants each meeting received an Academy Workbook that provided exercises to help them operationalize the presentations and resources they might consider useful in planning and operating their own Healthy Marriage Initiative. A listing of these resources is reproduced on the following pages.

State participants had an opportunity to evaluate the Academy sessions. Results of these evaluations are presented in Appendix C.



RESOURCE LISTING



The following resources are available to pick up at the Resource Table.

Acting on What We Know: The Hope of Prevention
Arizona's Marriage Education Legislation
Current Federal Funding Streams for Family Formation Activities
Divorce Education
Families Northwest
First Things First: Chattanooga, TN
Florida Passes Nation's Most Sweeping Reform of Marriage Law
Governor's Initiatives
Healthy Marriages Grand Rapids
How States Can Strengthen Marriage: Marriage Strengthening and Preservation
Legislation
Marriage Education and Government Policy: Helping Couples Who Choose Marriage
Achieve Success
Marriage Education for Youth
Maryland's Act on Family Law, Marriage License Fees, and Premarital Education
Courses
Oklahoma Marriage Initiative: Ground Breaking Study Shows Support for Marriage
Education
Premarital and Marriage Education
South Carolina's Marriage Commission
State Policies to Promote Marriage
Strengthening Families with Children Born Out-of-Wedlock
Strengthening Healthy Marriages: A Compendium of Approaches
Strengthening Marriages in Your Community: 101 Ways to Get you Started
Summary of Research on Marriage Education/Marriage Counseling
Tennessee Marriage Education Legislation
Texas Association of Marriage and Family Therapy
The State of Our Unions 2002: The National Marriage Project
What is Healthy Marriage?



WEB RESOURCES



The following Web-based resources may be of interest as you develop your Healthy Marriage Initiative

1998/99 Update to the Washington Marriage Report at

http://www.familiesnorthwest.org/pdf/reports/1998_99marriage.pdf

A Report to Iowa Governor Thomas J. Vilsack from the Task Force for Responsible

Fatherhood at http://www.dhs.state.ia.us/fatherhood/complete_report_to_governor.html

ACF Office of Refugee Resettlement Web-based Program Planning for Healthy Marriages

Grants at <http://www.acf.hhs.gov/programs/orr/programs/marrige grants.htm>

ACF West-Central Hub Family Stabilization Workshop at

<http://www.calib.com/peerta/policies/pdf/rapid.pdf>

Coalition Building for Healthy Marriage and Responsible Fatherhood Community

Demonstration Initiatives Draft document from the Lewin Group

Cohabitation, Marriage, Divorce, and Remarriage in the United States

http://www.cdc.gov/nchs/data/series/sr_23/sr23_022.pdf

Collection of Indicator Data for Healthy Marriage Initiatives. Draft document from the Lewin Group

Colorado Strengthening Families Conference at

http://www.calib.com/peerta/policies/pdf/colorado_strength.pdf

Covenant Marriage in Arizona at <http://www.supreme.state.az.us/dr/Pdf/covenant.pdf>

Department of Health and Human Services, Administration for Children and Families at

<http://www.acf.hhs.gov>

Developing a Healthy Marriage Initiative for Your State Final Report

http://www.calib.com/peerta/pdf/long_marriage.pdf

First Things First at <http://www.firstthings.org/>

Healthy Marriages Grand Rapids at <http://www.ggrcmarriagepolicy.org/>

Marriage and Welfare Reform: The Overwhelming Evidence that Marriage Works at

<http://www.heritage.org/research/welfare/bg1606.cfm>

National Conference of State Legislatures at <http://www.ncsl.org>

National Governors Association at <http://www.nga.org>

Office of the First Lady of Utah at <http://www.utah.gov/firstlady/>

Oklahoma Coalition Against Domestic Violence and Sexual Assault at

<http://www.ocadvsa.org/>

Oklahoma Marriage Initiative at <http://www.okmarriage.org/>

PREP, Inc. (Prevention and Relationship Enhancement Program) at <http://www.prepinc.com>

Reforming Welfare to Increase Independence and Strengthen Families at

<http://www.whitehouse.gov/infocus/welfare reform/fact-sheet.html>

State of Arizona at <http://www.az.gov>

State of Arizona at <http://www.az.gov>

State of Florida Department of Children and Families at http://www.state.fl.us/cf_web/

State of Oklahoma at <http://www.state.ok.us/>

State of Tennessee at <http://www.state.tn.us/>

State of Utah Governor's Commission on Marriage

<http://www.families.utah.gov/marriage.html>

The Alliance for Marriage at <http://www.allianceformarriage.org>

The Coalition for Marriage, Family, and Couples Education at

<http://www.smartmarriages.com>

The Dibble Fund for Marriage Education at <http://www.buildingrelationshipskills.org>

The Effects of Divorce on Children at <http://www.hec.ohio->

[state.edu/famlife/divorce/effects.htm](http://www.hec.ohio-state.edu/famlife/divorce/effects.htm)

The Lewin Group at <http://www.lewin.com>

The Lewin Group at <http://www.lewin.com>

The National Marriage Project at <http://marriage.rutgers.edu/about.htm>

The Oklahoma Marriage Initiative at <http://www.okmarriage.org/about.htm>

The Welfare Peer Technical Assistance Network's Innovative Programs page at

http://www.calib.com/peerta/inn_prog/index.cfm

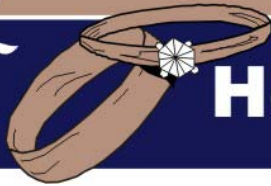
The White House Focus on Welfare Reform at

<http://www.whitehouse.gov/infocus/welfarereform/>

Working Towards Independence: President Bush's Welfare Reform Proposal at

<http://www.whitehouse.gov/news/releases/2002/02/welfare-reform-announcement-book.pdf>

**APPENDIX A:
ACADEMY AGENDA**



Developing a Healthy Marriage Initiative

Arlington, VA January 8 - 9, 2003

AGENDA

Wednesday, January 8, 2003

8:30 a.m. - 10:00 a.m.

Registration and Networking Continental Breakfast

10:00 a.m. - 11:30 a.m.

Welcoming Session - The Role the Healthy Marriage Initiative Can Play in Welfare Reform

Wade Horn, Ph.D., *Assistant Secretary, Administration for Children and Families (ACF)*

Moderators: Andrew Bush, *Director, Office of Family Assistance (OFA), ACF*

Lois Bell, *Director, Division of State and Territory TANF Management, ACF*

During this opening session, Dr. Horn will answer the following questions: What is the healthy marriage initiative and what role can it play in welfare reform? Why should government have a healthy marriage initiative? How might government implement a healthy marriage initiative? Dr. Horn will field questions during the last session of the workshop on Thursday.

11:30 a.m. - 1:15 p.m.

Working Lunch - Healthy Marriage Education: What Does It Actually Look Like?

Michele Weiner-Davis, MSW, *President, The Divorce Busting Center*

Andrew Bush, *Director, OFA, ACF*

This session will give participants the opportunity to hear one of the leading healthy marriage educators teach some of the skills and knowledge that increase people's chances of forming and sustaining healthy marriages.

1:15 p.m. - 1:25 p.m.

Break

1:25 p.m. - 3:00 p.m.

Healthy Marriage Initiative Efforts and Lessons States and Regions Have Learned Along the Way

Carlis Williams, *Regional Administrator, Region IV, ACF*

Moderators: John Horejsi, *TANF Program Specialist, OFA, ACF*

Aaron Larson, *TANF Program Specialist, OFA, ACF*

Each State participating in the workshop will be given 10 minutes to share what they have accomplished in implementing their healthy marriage initiative and the lessons learned along the way. Participants will be divided into two groups for this session; notes will be taken to share with the States in the other group.

Wednesday, January 8, 2003 (continued)

3:00 p.m. - 3:15 p.m.

Break

3:15 p.m. - 5:00 p.m.

Plenary Panel - Marriage Education: What's Out There and What's Effective and How to Incorporate it Into Your Initiative

Christopher Gersten, *Principal Deputy Assistant Secretary for Children and Families, ACF*

Naomi Goldstein, *Director, Division of Child and Family Development, Office of Planning, Research, and Evaluation, ACF*

Bill Coffin, *Special Assistant for Marriage Education, Office of the Assistant Secretary, ACF*

Moderator: Paul Maiers, *TANF Program Specialist, OFA, ACF*

Participants will receive an overview of the different marriage and pre-marital education programs and a brief synopsis of the research that supports the effectiveness of these programs, as well as strategies for incorporating marriage education into their initiative.

Thursday, January 9, 2003

7:30 a.m. - 8:30 a.m.

Networking Continental Breakfast

8:30 a.m. - 9:45 a.m.

Policy and Healthy Marriages

(Two Concurrent Sessions)

Jack Tweedie, *Department Manager, Children and Families, National Conference of State Legislatures*

Courtney Smith, *Senior Policy Analyst, National Governors Association*

Michael Fishman, *Senior Vice President, The Lewin Group*

Moderator: Mack Storrs, *Senior Policy Analyst, OFA, ACF*

During this session, participants will discuss various policy strategies that could be used in conjunction with helping people gain the skills and knowledge that increase their chances of forming and maintaining healthy marriages.

State Models: Lessons Learned from the Oklahoma and Arizona Healthy Marriage Initiatives: How to Plan and Implement a Healthy Marriage Initiative to Support Self-sufficiency Efforts

Mary Myrick, *Director of the Oklahoma Marriage Initiative, Public Strategies*

Senator Mark Anderson, *State Legislator, Arizona*

Moderator: Aaron Larson, *TANF Program Specialist, OFA, ACF*

During this session, Oklahoma and Arizona will give a brief overview of their healthy marriage initiatives and will then discuss the lessons they have learned during the implementation of their initiatives over the past 3 years.

9:45 a.m. - 10:00 a.m.

Break

Thursday, January 9, 2003 (continued)

10:00 a.m. - 11:20 a.m.
(Two Concurrent Sessions)

**Economic Growth and the Healthy Marriage Initiative:
How a Healthy Marriage Initiative Can Support the
Economic Growth of Your State**

Commissioner Howard Hendrick, *Cabinet Secretary,
Oklahoma Department of Health and Human Services*
Moderator: Marcia Salovitz, *TANF Program Specialist, OFA, ACF*

During this session, participants will learn how their states' economic health is tied to the health of the marriages in their states.

**Lessons Learned from the Chattanooga and Grand Rapids
Community-wide Healthy Marriage Initiatives: How to Plan
and Implement a Community-wide Healthy Marriage
Initiative to Support Self-sufficiency**

Mark Eastburg Ph.D., *Vice Chair,
Healthy Marriages of Grand Rapids, Pine Rest Family Institute*
Rozario Slack, *Director of Fathering and Urban Initiatives,
First Things First of Chattanooga, Tennessee*
Senator Bill Hardiman, *State Legislator,
Healthy Marriages of Grand Rapids, Michigan*
Moderator: Lisa Washington-Thomas, *TANF Program Specialist, OFA, ACF*

During this session, the presenters will give a brief overview of their healthy marriage initiatives and will then discuss their lessons they have learned during the implementation of their initiatives over the past 5 years.

11:20 a.m. - 1:15 p.m.

**Working Lunch - Strategic Planning for Starting a Healthy Marriage
Initiative to Support Your Welfare Reform Efforts**

Senator Mark Anderson, *State Legislator, Arizona*
Commissioner Howard Hendrick, *Cabinet Secretary,
Oklahoma Department of Health and Human Services*
First Lady Jackie Leavitt, *Utah*
Brent Barlow, Ph.D., *Chair, Utah Governor's Commission on Marriage*
Moderator: Grant Collins, *Chief of Staff, OFA, ACF*

Strategies for assessing the political environment, putting healthy marriages on the public agenda, and communicating effectively about healthy marriage programs will be discussed. This session will allow participants to recognize individual circumstances and barriers to establishing healthy marriage initiatives, and begin thinking about strategic plans to facilitate the establishment of a healthy marriage initiative in their State that will support their welfare reform efforts.

1:15 p.m. - 1:25 p.m.

Break

Thursday, January 9, 2003 (continued)

1:25 p.m. - 2:45 p.m.

Plenary Panel - How Do You Build a Coalition, Fund, and Evaluate Your Healthy Marriage Initiative?

Secretary Jerry Regier, *Florida Department of Children and Families*
Reverend George Young, *Holy Temple Baptist Church, Oklahoma City*
Beth Stanford, *Education Director,*

Oklahoma Coalition Against Domestic Violence and Sexual Assault
Mack Storrs, *Senior Policy Analyst, OFA, ACF*

TBA, *The Lewin Evaluation Group*

Moderator: April Kaplan, *Deputy Director, OFA, ACF*

This session will cover strategies and tips for forming a healthy marriage coalition with state, local, and faith-based partners. This session will also allow participants to hear about current and future federal funding streams for healthy marriage initiatives as well as how to attract private funds for your initiative. A brief presentation will be given on things to be considered in developing evaluation design options to measure the implementation process and community impact of a healthy marriage initiative.

2:45 p.m. - 3:00 p.m.

Break

3:00 p.m. - 4:30 p.m.

Where Do We Go From Here?

Moderators: Wade Horn, Ph.D., *Assistant Secretary, ACF*

Andrew Bush, *Director, OFA, ACF*

During this session, participants will discuss practical next steps that they plan to take when they return to their offices. Participants will also be given the opportunity to ask Dr. Horn questions about the healthy marriage initiative and offer suggestions on how ACF can better support their efforts.

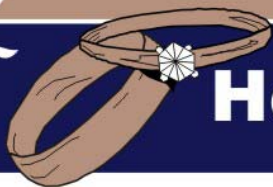
4:30 p.m. - 5:00 p.m.

Closing Remarks and Evaluation

Andrew Bush, *Director, OFA, ACF*

Lois Bell, *Director, Division of State and Territory TANF Management, ACF*

APPENDIX B:
ACADEMY SPEAKERS AND PARTICIPANTS



Developing a
Healthy Marriage Initiative
Arlington, VA January 8 - 9, 2003

PARTICIPANT LIST

Francesca Adler-Baeder

Department of Human Development and Family
Studies
286 Spidle Hall
Auburn University
Auburn, AL 36849
Phone: (334) 844-3234
Fax: (334) 844-4515
Email: adlerfr@auburn.edu

Richard Albertson

Chairman
Florida Commission on Responsible Fatherhood
3904 Leane Drive
Tallahassee, FL 32309
Phone: (850) 668-3700
Fax: (850) 893-0932
Email: richalbert@aol.com

Mark Anderson

State Senator
Arizona State Senate
1700 West Washington
Phoenix, AZ 85007
Phone: (602) 542-3160
Email: markanderson@integrity.com

Todd Areson

Manager, Research and Contract Administration
Virginia Division of Child Support Enforcement
Virginia Department of Social Services
730 East Broad Street, 4th Floor
Richmond, VA 23219
Phone: (804) 692-1463
Fax: (804) 692-2410
Email: txa900@dcse.dss.state.va.us

Darrell Armstrong

Pastor
Shiloh Baptist Church
340 S. Howard Woodson, Jr. Way
Trenton, NJ 08618
Phone: (609) 695-5700

Brent Barlow

Chair
Utah Governor's Commission on Marriage
111 State Capitol
Salt Lake City, UT 84114
Phone: (801) 538-1533
Fax: (801) 538-1304
Email: brentabarlow@aol.com

Marihelen (Midge) Barrett

Vice President
The Lewin Group
3130 Fairview Park
Falls Church, VA 22034
Phone: (703) 269-5719
Fax: (703) 269-5501
Email: midge.barrett@lewin.com

Michael Bentley

Citizen and Community Services Coordinator
Governor's Office
State of Mississippi
P.O. Box 139
Jackson, MS 39205
Phone: (601) 359-3853
Fax: (601) 576-2791
Email: mbentley@governor.state.ms.us

Elaine Bowen

Associate Director
West Virginia University Extension Service
604 Knapp Hall
P.O. Box 603
Morgantown, WV 26506
Phone: (304) 293-2694
Fax: (304) 293-7599
Email: epbowen@mail.wvu.edu

Vera Butler

Director, TANF Policy
Mississippi Department of Human Services
P.O. Box 352
Jackson, MS 39202
Phone: (601) 359-4853
Fax: (601) 359-4435
Email: vbutler@mdhs.state.ms.us

Ruth Carter

Associate Agency
Family and Youth Development
University of Arizona
4341 East Broadway
Phoenix, AZ 85040
Phone: (602) 470-8086
Fax: (602) 470-8092
Email: rcarter@ag.arizona.edu

Barbara Cigainero

Texas Works Director
Texas Department of Human Services
701 West 51st Street
Austin, TX 78751
Phone: (512) 438-2972
Fax: (512) 438-3735
Email: barbara.cigainero@dhs.state.tx.us

David Cunningham

Executive Director
The National Organization of Black County
Officials, Inc.
440 First Street, NW, Suite 410
Washington, DC 20001
Phone: (202) 347-6953
Fax: (202) 393-6596
Email: dcunningham@naco.org

Robin Dion

Senior Researcher
Mathematica Policy Research, Inc.
600 Maryland Avenue, SW, Suite 550
Washington, DC 20023
Phone: (202) 484-5262
Fax: (202) 863-1763
Email: rdion@mathematica-mpr.com

Mark Eastburg

Vice Chair, Healthy Marriages Grand Rapids
Pine Rest Family Institute
300 68th Street SE
Grand Rapids, MI 49501
Phone: (616) 831-2607
Fax: (616) 455-5360
Email: mark.eastburg@pinerest.org

Peggy Edwards

Marriage Learning Center
515 Pride Avenue
Herndon, VA 20170
Phone: (703) 689-2120
Email: pegandsam@earthlink.net

Michael Fishman

Senior Vice President
The Lewin Group
3130 Fairview Park Drive
Falls Church, VA 22042
Phone: (703) 269-5655
Fax: (703) 269-5503
Email: mike.fishman@lewin.com

H. Wallace Goddard

Extension Family Life Specialist
University of Arkansas Cooperative Extension
Box 391
Little Rock, AR 72203
Phone: (501) 671-2104
Fax: (501) 671-2294
Email: wgoddard@uaex.edu

Leo Godzich

President
National Association of Marriage Enhancement
(NAME)
13613 North Cave Creek Road
Phoenix, AZ 85022
Phone: (602) 404-7400
Fax: (602) 787-5606
Email: leogodzich@earthlink.net

Jerry Hancock

Contracts Management Supervisor
Arizona Department of Economic Security
Office of Policy Planning and Project Control
1789 West Jefferson, 4th Floor NE
Phoenix, AZ 85007
Phone: (602) 542-3882
Fax: (602) 542-6000
Email: jhancock@mail.de.state.az.us

Bill Hardiman

Michigan State Senate
P.O. Box 30036
Lansing, MI 48909
Phone: (517) 373-1801
Fax: (517) 373-5801
Email: hardima@cs.com

Howard H. Hendrick

Director of Human Services
Oklahoma Department of Human Services
P.O. Box 25352
Oklahoma City, OK 73105
Phone: (405) 521-6462
Fax: (405) 521-6458
Email: cheryl.willie@okdhs.org

James Hensley

Program Manager
West Virginia Department of Health
and Human Services
Office of Family Support
350 Capitol Street, Room B-18
Charleston, WV 25301
Phone: (304) 558-2679
Fax: (304) 558-2059
Email: angelaferguson@wvdhhr.org

Alan M. Hershey

Senior Fellow
Mathematica Policy Research, Inc.
P.O. Box 2393
Princeton, NJ 08534
Phone: (609) 275-2384
Fax: (609) 799-0005
Email: ahershey@mathematica-mpr.com

Angela J. Huebner

Assistant Professor/Extension Specialist
Virginia Tech/Virginia Cooperation Extension
Northern Virginia Graduate Center
7054 Haycock Road, Room 202G
Falls Church, VA 22043
Phone: (703) 538-8491
Fax: (703) 538-8465
Email: ahuebner@vt.edu

Courtney L. Jarchow

Policy Associate
National Conference of State Legislatures
7700 East First Place
Denver, CO 80230
Phone: (303) 856-1437
Email: courtney.jarchow@ncsl.org

Jacalyn Leavitt

First Lady
State of Utah
111 State Capitol
Salt Lake City, UT 84114
Phone: (801) 538-1533
Fax: (801) 538-1304
Email: mreese@utah.gov

Minchin G. Lewis

City Auditor
City of Syracuse
433 City Hall
Syracuse, NY 13202
Phone: (315) 448-8477
Fax: (315) 448-8475
Email: minchlewis@aol.com

Kevin Loveland

Director
Division of Family Services
Department of Social Services
25 Sigourney Street
Hartford, CT 06106
Phone: (860) 424-5031
Fax: (860) 951-2996
Email: kevin.loveland@po.state.ct.us

Luis Macias

Director
Texas Workforce Development
101 East 15th, 504T
Austin, TX 78778
Phone: (512) 936-0697
Fax: (512) 463-2799
Email: luis.macias@twc.state.tx.us

Wayne Matthews

Associate Professor and Human Development
Specialist
North Carolina State University
North Carolina Cooperative Extension
Box 7605, NCSU, Ricks Hall 101
Raleigh, NC 27695
Phone: (919) 515-9139
Fax: (919) 515-2786
Email: wayne_matthews@ncsu.edu

Sharrie McIntosh

Senior Manager
The Lewin Group
3130 Fairview Park Drive, Suite 800
Falls Church, VA 22042
Phone: (703) 269-5651
Email: sharrie.mcintosh@lewin.com

Matthew Munyon

Executive Director
Florida's Commission on Responsible
Fatherhood
111 North Gadsden Street, Suite 200
Tallahassee, FL 32309
Phone: (850) 488-4952
Fax: (850) 921-9070
Email: mmunyon@ounce.org

Mary Myrick

President
Public Strategies, Inc.
301 Northwest 63rd, Suite 215
Oklahoma City, OK 73116
Phone: (405) 848-2171
Fax: (405) 848-2078
Email: mary@publicstrategies.com

Lorraine K. Noval

Special Assistant to the Commissioner
Office of Temporary and Disability Assistance
40 North Pearl Street, 16th Floor
Albany, NY 12243
Phone: (518) 474-9516
Fax: (518) 486-6935
Email: lorraine.noval@dfa.state.ny.us

Mark Nowak

Senior Manager
The Lewin Group
3130 Fairview Park Drive, Suite 800
Falls Church, VA 22042
Phone: (703) 269-5682
Fax: (703) 269-5503
Email: mark.nowak@lewin.com

Tammy Payne

Deputy Administrator
Statewide Self Reliance Programs
Department of Health and Welfare
P.O. Box 83720
Boise, ID 83720
Phone: (208) 334-0699
Fax: (208) 334-5817
Email: paynet2@idhw.state.id.us

Tom Peterson

Director of Operations
Parents Educating Parents, Inc.
P.O. Box 4025
Hampton, VA 23664
Phone: (757) 851-6100
Fax: (757) 851-6100
Email: healthymarriages@pepinc.org

Earl Pinto

Special Assistant
Commissioner of ACYF
Administration for Children and Families
330 C Street, SW
Washington, DC 20444
Phone: (202) 690-6437
Fax: (202) 205-9721
Email: epinto@acf.hhs.gov

Daniel Pollock

Policy Advisor
Governor James McGreevey's Policy Office
P.O. Box 001
Trenton, NJ 08625
Phone: (609) 777-2540
Fax: (609) 777-4081
Email: daniel.pollock@gov.state.nj.us

John Posey

Assistant Director
New Jersey Department of Human Services
3 Quakerbridge Plaza
P.O. Box 716
Trenton, NJ 08625
Phone: (609) 588-2000
Fax: (609) 588-7240
Email: jposey@dhs.state.nj.us

Chris Pyle

Director of Family Policy
Governor's Office
State Capitol, Suite 120
Little Rock, AR 72201
Phone: (501) 682-2325
Fax: (501) 682-3596
Email: chris.pyle@gov.state.ar.us

Jerry Regier

Secretary
Florida Department of Children and Families
1317 Winewood Boulevard
Tallahassee, FL 32399
Phone: (850) 487-1111
Fax: (850) 922-2993
Email: jerry.regier@myflorida.com

Kevin Richards

Director, Colorado Works Program
Colorado Department of Human Services
1575 Sherman Street
Denver, CO 80203
Phone: (303) 866-2054
Fax: (303) 866-5488
Email: kevin.richards@state.co.us

Angela Rodgers

Governor's Office for Community Policy
1700 West Washington
Phoenix, AZ 85007
Phone: (623) 521-9432
Email: akroddgers@earthlink.net

Rota Rosaschi

Chief, Employment and Support Services
Nevada State Welfare Division
1470 East College Parkway
Carson City, NV 89706
Phone: (775) 684-0610
Fax: (775) 684-0617
Email: rosaschi@welfare.state.nv.us

Amy Sampson

Senior Policy Advisor
Governor's Office, Policy and Initiatives
120 State Capitol
200 East Colfax Avenue
Denver, CO 80203
Phone: (303) 866-6485
Fax: (303) 866-6368
Email: amy.sampson@state.co.us

Mary Sibley

Deputy Policy Director
Governor's Office of Policy
125 West State Street
P.O. Box 001
Trenton, NJ 08610
Phone: (609) 777-1251
Fax: (609) 777-4081
Email: sasha.corchado@gov.state.nj.us

Jean Simpson

Education Specialist
Head Start Bureau
330 C Street
Washington, DC 20043
Phone: (202) 205-8421
Fax: (202) 401-5916
Email: jsimpson@acf.hhs.gov

Rozario Slack

Director of Fathering
First Things First
701 Cherokee Boulevard, Suite 230
Chattanooga, TN 37405
Phone: (423) 267-5383
Fax: (423) 267-8876

Courtney Smith

Senior Policy Analyst
National Governor's Association
444 North Capitol Street, Suite 267
Washington, DC 20001
Phone: (202) 624-5300
Fax: (202) 624-5313

Diane Sollee

Director
Smart Marriages
5310 Belt Road, NW
Washington, DC 20015
Email: diane@martmarriages.com

Sidonie Squier

Welfare Reform Director
Florida Department of Children and Families
1317 Winewood Boulevard
Building 3, Room 102
Tallahassee, FL 32399-0700
Phone: (850) 921-5567
Fax: (850) 922-5581
Email: sidonie_squier@dcf.state.fl.us

Beth Stanford

Director of Education
Oklahoma Coalition Against Domestic
Violence and Sexual Assault
P.O. Box 135
Poteau, OK 74953
Phone: (918) 647-5814
Fax: (918) 649-3772
Email: ocdvsa-se@clnk.com

Sheri Steisel

NCSL
444 North Capitol Street, NW
Washington, DC 20001
Phone: (202) 624-8693
Fax: (202) 737-1069
Email: sheri.steisel@ncsl.org

Leland Sullivan

Chief of Child Support
Welfare Human Resources
1470 East College Parkway
Carson City, NV 89706
Phone: (775) 684-0698
Fax: (775) 684-0702
Email: lsullivan@welfare.state.nv.us

John Thomas

Assistant Director
Family Council
414 S. Pulaski, Suite 2
Little Rock, AR 72201
Phone: (501) 375-7000
Fax: (501) 375-7040
Email: john.thomas@familycouncil.org

Mark Thompson

State Representative
Arizona House of Representatives
1700 West Washington Street
Phoenix, AZ 85007
Phone: (602) 542-4225
Fax: (602) 417-3127
Email: markthompson@cox.net

Robert Tures

Marriage Educator
The Couples Workshop and
Strong Families Flagstaff
222 North Verde
Flagstaff, AZ 86001
Phone: (928) 779-5118
Fax: (928) 556-3094
Email: skills@couplestworkshopflag.com

Jack Tweedie

Director, Children and Families Program
National Conference of State Legislatures
1700 East First Place
Denver, CO 80230
Phone: (303) 364-7700
Fax: (303) 364-7800
Email: jactkweedie@ncsl.org

Jim Underwood

Human Services Policy Director
Governor's Office
1100 San Jacinto
Austin, TX 78711
Phone: (512) 463-2000
Fax: (512) 463-8158
Email: junderwood@governor.state.tx.us

Michele Weiner-Davis

Director
The Divorce Busting Center
P.O. Box 197
Woodstock, IL 60098
Phone: (815) 337-8000
Fax: (815) 337-8014
Email: michele@divorcebusting.com

George Young

Pastor
Holy Temple Baptist Church
1540 NE 50th Street
Oklahoma City, OK 73111
Phone: (405) 424-1860
Fax: (405) 427-3866
Email: geysr@aol.com

FEDERAL STAFF

Gary Allen

Teams Administrator
Department of Health and Human Services
Administration for Children and Families
601 East 12th Street, Room 276
Kansas City, MO 64106
Phone: (816) 426-3981
Fax: (816) 426-2888
Email: gallen@acf.hhs.gov

Barbara Andrews

Lead Program Liaison Specialist
Department of Health and Human Services
Administration for Children and Families
26 Federal Plaza, Room 4114
New York, NY 10278
Phone: (212) 264-2890
Fax: (212) 264-4881
Email: bandrews@acf.hhs.gov

David Arnaudo

Director, Planning, Research and Evaluation
Office of Child Support Enforcement
370 L'Enfant Promenade, SW
Washington, DC 20447
Phone: (202) 401-5364
Fax: (202) 401-5642
Email: darnaudo@acf.hhs.gov

Pheon Beal

Director, Division of Social Services
Department of Health and Human Services
325 North Salisbury Sstreet
Albemarle Building, MSC #2401
Raleigh, NC 27699
Phone: (919) 733-3055
Fax: (919) 733-9386
Email: pheon.beal@ncmail.net

Lois Bell

Director
Division of Technical Assistance and Training
Department of Health and Human Services
Administration for Children and Families
Office of Family Assistance
370 L'Enfant Promenade, SW, 5th Floor East
Washington, DC 20447
Phone: (202) 401-9317
Fax: (202) 205-5887
Email: lbell@acf.hhs.gov

Kimberley Berlin

Special Assistant to the Commissioner
Department of Health and Human Services
Administration for Children and Families
370 L'Enfant Promenade, SW
Washington, DC 20447
Phone: (202) 401-5068
Fax: (202) 401-5665
Email: klberlin@acf.hhs.gov

Larry Brendel

Program Manager
Department of Health and Human Services
Administration for Children and Families
1301 Young Street, Room 945
Dallas, TX 75202
Phone: (214) 767-6236
Fax: (214) 767-8890
Email: lbrendel@acf.hhs.gov

Pat Brown

Office Director
Department of Health and Human Services
Administration for Children and Families
601 East 12th Street, Room 276
Kansas City, MO 64106
Phone: (816) 426-3981
Fax: (816) 426-2888
Email: pbrown@acf.hhs.gov

Beverly Bunn

Staff Assistant for Marriage Education
Administration for Children and Families
370 L'Enfant Promenade, SW
Washington, DC 20447
Phone: (202) 401-5240
Fax: (202) 401-5770
Email: bbunn@acf.hhs.gov

Andrew Bush

Director
Department of Health and Human Services
Administration for Children and Families
370 L'Enfant Promenade, SW
Washington, DC 20447
Phone: (202) 401-9275
Fax: (202) 401-4746
Email: abush@acf.hhs.gov

Loren Bussert

Program Analyst
Department of Health and Human Services
Administration for Children and Families
Office of Refugee Settlement
370 L'Enfant Promenade, SW
Washington, DC 20043
Phone: (202) 401-4732
Fax: (202) 401-5487
Email: lbussert@acf.hhs.gov

James Butler

Family Program Specialist
Administration for Children and Families
Office of Family Assistance
370 L'Enfant Promenade, SW
Washington, DC 20447
Phone: (202) 401-9284
Email: jdbutler@acf.hhs.gov

Nancye Campbell

Research Analyst
Department of Health and Human Services
Administration for Children and Families
370 L'Enfant Promenade, SW, 7th Floor
Washington, DC 20447
Phone: (202) 401-5760
Fax: (202) 205-3598
Email: ncampbell@acf.hhs.gov

Bill Coffin

Special Assistant for Marriage Education

Department of Health and Human Services
Administration for Children and Families
901 D Street, SW
Washington, DC 20447
Phone: (202) 260-1550
Fax: (202) 401-5770
Email: bcoffin@acf.hhs.gov

Grant Collins

Chief of Staff
Department of Health and Human Services
Administration for Children and Families
Office of Family Assistance
370 L'Enfant Promenade, SW, 5th Floor East
Washington, DC 20447
Phone: (202) 401-9275
Fax: (202) 401-4746
Email: grcollins@acf.hhs.gov

Diann Dawson

Director, Office of Regional Operations
Administration for Children and Families
370 L'Enfant Promenade, SW
Washington, DC 20447
Phone: (202) 401-4802
Fax: (202) 401-5706
Email: ddawson@acf.hhs.gov

Al Fleming

Program Specialist
Administration for Children and Families
Office of Family Assistance
370 L'Enfant Promenade, SW
Washington, DC 20447
Phone: (202) 401-4977
Fax: (000) 000-0000
Email: afleming@acf.hhs.gov

Christopher Gersten

Principal Deputy Assistant Secretary
for Children and Families
Department of Health and Human Services
370 L'Enfant Promenade, SW
Washington, DC 20447
Phone: (202) 401-5180
Email: cgersten@acf.hhs.gov

Naomi Goldstein

Director, Division of Child and Family
Development
Department of Health and Human Services

Office of Planning, Research and Evaluation,
Administration for Children and Families
370 L'Enfant Promenade, SW
Washington, DC 20447
Phone: (202) 205-3604
Fax: (202) 205-3598
Email: ngoldstein@acf.hhs.gov

Joseph Grubbs

Program Analyst
Department of Health and Human Services
Administration for Children and Families
370 L'Enfant Promenade, SW, 7th Floor
Washington, DC 20447
Phone: (202) 401-5750
Fax: (202) 205-3598
Email: jgrubbs@acf.hhs.gov

Vince Herberholt

Associate Regional Administrator
Department of Health and Human Services
Administration for Children and Families
Seattle Regional Office
2201 Sixth Avenue, Suite 600
Seattle, WA 98121
Phone: (206) 615-3662
Fax: (206) 615-2574
Email: vherberholt@acf.hhs.gov

Mary Ann Higgins

Regional Administrator
Department of Health and Human Services
Administration for Children and Families
26 Federal Plaza, Room 4114
New York, NY 10278
Phone: (212) 264-2890
Fax: (212) 264-4881
Email: mhiggins@acf.hhs.gov

John Horejsi

TANF Program Specialist
Division of State and Territory
TANF Management
Department of Health and Human Services
Administration for Children and Families
Office of Family Assistance
370 L'Enfant Promenade, SW, 5th Floor East
Washington, DC 20447
Phone: (202) 401-5031
Fax: (202) 205-5887
Email: jhorejsi@acf.hhs.gov

Wade F. Horn

Assistant Secretary for Children and Families
Department of Health and Human Services
Administration for Children and Families
370 L'Enfant Promenade, SW
Washington, DC 20447
Phone: (202) 401-2337
Fax: (202) 401-4678

April Kaplan

Deputy Director
Department of Health and Human Services
Administration for Children and Families
370 L'Enfant Promenade, SW
Washington, DC 20447
Phone: (202) 401-5138
Fax: (202) 205-5887
Email: akaplan@acf.hhs.gov

John Kersey

Associate Director
Department of Health and Human Services
Administration for Children and Families
50 United Nations Plaza, Room 377
San Francisco, CA 94102
Phone: (415) 437-8415
Fax: (415) 437-8436
Email: jkersey@acf.hhs.gov

Steven Krasner

Team Liaison
Department of Health and Human Services
Administration for Children and Families
233 North Michigan Avenue, Suite 400
Chicago, IL 60601
Phone: (312) 353-3265
Fax: (312) 886-5373
Email: skrasner@acf.hhs.gov

Aaron Larson

TANF Program Specialist
Division of State and Territory
TANF Management
Department of Health and Human Services
Administration for Children and Families
Office of Family Assistance
370 L'Enfant Promenade, SW, 5th Floor East
Washington, DC 20447
Phone: (202) 401-4619
Fax: (202) 205-5887
Email: alarson@acf.hhs.gov

Marilyn Lasky

Children and Families Program Specialist
Department of Health and Human Services
Administration for Children and Families
Region I
JFK Federal Building, Room 2000
Boston, MA 02203
Phone: (617) 565-1151
Fax: (617) 565-2493
Email: mlasky@acf.hhs.gov

Paul Maiers

Program Specialist
Division of State and Territory
TANF Management
Department of Health and Human Services
Administration for Children and Families
Office of Family Assistance
370 L'Enfant Promenade, SW
Washington, DC 20447
Phone: (202) 401-5438
Fax: (202) 205-5887
Email: pmaiers@acf.hhs.gov

Dennis Minkler

Program Manager
Department of Health and Human Services
Administration for Children and Families
26 Federal Plaza, Room 4114
New York, NY 10278
Phone: (212) 264-2890
Fax: (212) 264-0013
Email: dminkler@acf.hhs.gov

Howard Rolston

Director
Planning, Research and Evaluation
Administration for Children and Families
901 D Street, SW, 7th Floor West
Washington, DC 20447
Phone: (202) 401-9220
Fax: (202) 205-3598
Email: hrolston@acf.hhs.gov

Betty Ritchie

TANF Program Specialist
Department of Health and Human Services
Administration for Children and Families
Atlanta Federal Center
61 Forsyth Street, SW, Suite 4M60
Atlanta, GA 30303
Phone: (404) 562-2938
Fax: (404) 562-2985
Email: britchie@acf.hhs.gov

Marcia Salovitz

TANF Program Specialist
Division of State and Territory
TANF Management
Department of Health and Human Services
Administration for Children and Families
Office of Family Assistance
370 L'Enfant Promenade, SW, 5th Floor East
Washington, DC 20447
Phone: (202) 401-5459
Fax: (202) 205-5887
Email: msalovitz@acf.hhs.gov

Mack Storrs

Senior Policy Analyst
Department of Health and Human Services
Administration for Children and Families
Office of Family Assistance
370 L'Enfant Plaza, SW
Washington, DC 20447
Phone: (202) 401-9290
Fax: (202) 205-5887
Email: mstorrs@acf.hhs.gov

Ramona Warren

Manager, Special Initiatives
Department of Health and Human Services
Administration for Children and Families
61 Forsyth Street, SW, Suite 4M60
Atlanta, GA 30303
Phone: (404) 562-2892
Fax: (404) 562-3088
Email: rwarren@acf.hhs.gov

Lisa Washington-Thomas

TANF Program Specialist
Division of State and Territory
TANF Management
Department of Health and Human Services
Administration for Children and Families
Division of Technical Assistance and Training
370 L'Enfant Promenade, SW, 5th Floor East
Washington, DC 20447
Phone: (202) 401-5141
Fax: (202) 205-5887
Email: lwashington@acf.hhs.gov

Kent Wilcox

Department of Health and Human Services
Administration for Children and Families
233 North Michigan Avenue, Suite 400
Chicago, IL 60601
Phone: (312) 886-6375
Fax: (000) 000-0000
Email: kwilcox@acf.hhs.gov

Carlis Williams

Southeast Regional Administrator
Department of Health and Human Services
Administration for Children and Families
61 Forsyth Street, Suite 4M60
Atlanta, GA 30303
Phone: (404) 562-2900
Fax: (404) 562-2981
Email: cwilliams@acf.hhs.gov

Vicki Wright

Children and Families Program Specialist
Administration for Children and Families
Children's Bureau
330 C Street, SW
Washington, DC 20447
Phone: (202) 401-0406
Fax: (202) 401-5917
Email: vwright@ach.hhs.gov

Robert Williams

Area Director, Area VI
Department of Human Services
Division of County Operation
700 South Main
P.O. Box 1437, Suite 302
Little Rock, AR 72203
Phone: (501) 682-6081
Fax: (501) 682-6087
Email: robert.williams@mail.state.ar.us

CONTRACT STAFF

Robin Dade

Project Coordinator
AFYA, Inc.
6930 Carroll Avenue, Suite 820
Takoma Park, MD 20912
Phone: (301) 270-0841
Fax: (301) 270-3441
Email: rdade@afyainc.com

Courtney J. Kakuska

Associate
Caliber Associates
10530 Rosehaven Street, Suite 400
Fairfax, VA 22030
Phone: (703) 385-3200
Fax: (703) 385-3206
Email: kakuskac@calib.com

Harry R. Day, Ph.D.

Project Director
AFYA, Inc.
6930 Carroll Avenue, Suite 820
Takoma Park, MD 20912
Phone: (301) 270-0841
Fax: (301) 270-3441
Email: hday@afyainc.com

Chandra Robinson, M.S.W.

Technical Assistance Coordinator
AFYA, Inc.
6930 Carroll Avenue, Suite 820
Takoma Park, MD 20912
Phone: (301) 270-0841
Fax: (301) 270-3441
Email: crobinson@afyainc.com

Jeanette Hercik, Ph.D.

Senior Associate
Caliber Associates
10530 Rosehaven Street, Suite 400
Fairfax, VA 22030
Phone: (703) 385-3200
Fax: (703) 385-3206
Email: hercijk@calib.com

Shani Rolle, M.S.

Research Assistant
AFYA, Inc.
6930 Carroll Avenue, Suite 820
Takoma Park, MD 20912
Phone: (301) 270-0841
Fax: (301) 270-3441
Email: srolle@afyainc.com

APPENDIX C:
ACADEMY EVALUATIONS

ACADEMY FEATURES			
	RATINGS	NUMBER OF RESPONSES	PERCENTAGE OF TOTAL RESPONSES
KNOWLEDGE DEVELOPMENT (5=EXCELLENT, 1=POOR)	5	6	35%
	4	6	35%
	3	5	29%
	2	0	0%
	1	0	0%
TRAVEL AND LOGISTICAL INFORMATION (5=EXCELLENT, 1=POOR)	5	3	18%
	4	6	37%
	3	4	25%
	2	2	12%
	1	1	6%
SESSION ORIENTATION/ FLOW OF DAY (5=EXCELLENT, 1=POOR)	5	5	29%
	4	5	29%
	3	7	41%
	2	0	0%
	1	0	0%

ADDITIONAL COMMENTS CITED:

- ◆ Good Academy.
- ◆ It was difficult to get advance agenda information. It could have been an internal problem for our state.

SESSION ONE: WELCOME			
THE ROLE THE HEALTHY MARRIAGE INITIATIVE CAN PLAY IN WELFARE REFORM			
	RATINGS	NUMBER OF RESPONSES	PERCENTAGE OF TOTAL RESPONSES
CONTENT OF THE PRESENTATION ENHANCED MY UNDERSTANDING OF THE HEALTHY MARRIAGE INITIATIVE (5=STRONGLY AGREE, 1=STRONGLY DISAGREE)	5	14	63%
	4	7	31%
	3	1	4%
	2	0	0%
	1	0	0%
SPEAKERS WERE KNOWLEDGABLE IN THE SUBJECT AREAS AND ACTIVELY ENGAGED THE AUDIENCE (5=STRONGLY AGREE, 1=STRONGLY DISAGREE)	5	15	68%
	4	6	27%
	3	1	4%
	2	0	0%
	1	0	0%

ADDITIONAL COMMENTS CITED:

- ◆ It will be easy to follow a leader that believes and is committed to the vision!
- ◆ Wade Horn is always great.
- ◆ Dr. Horn was an excellent speaker.
- ◆ It is always beneficial to share with Wade Horn.
- ◆ High degree of engagement and understanding.
- ◆ Dr. Wade did an excellent job.

SESSION TWO: WORKING LUNCH			
HEALTHY MARRIAGE EDUCATION: WHAT DOES IT ACTUALLY LOOK LIKE?			
	RATINGS	NUMBER OF RESPONSES	PERCENTAGE OF TOTAL RESPONSES
CONTENT OF THE PRESENTATION ENHANCED MY UNDERSTANDING OF THE HEALTHY MARRIAGE INITIATIVE (5=STRONGLY AGREE, 1=STRONGLY DISAGREE)	5	8	36%
	4	9	41%
	3	2	9%
	2	2	9%
	1	0	0%
SPEAKERS WERE KNOWLEDGABLE IN THE SUBJECT AREAS AND ACTIVELY ENGAGED THE AUDIENCE (5=STRONGLY AGREE, 1=STRONGLY DISAGREE)	5	14	63%
	4	6	27%
	3	1	5%
	2	0	0%
	1	1	4%

ADDITIONAL COMMENTS CITED:

- ◆ Excellent presentation!
- ◆ Great presentation, please invite back!
- ◆ Session was not designed to enhance understanding of the initiative, but it was good.
- ◆ Getting this exposure was highly useful. Great presenter.

**SESSION THREE:
HEALTHY MARRIAGE INITIATIVE EFFORTS & LESSONS STATES AND REGIONS
HAVE LEARNED ALONG THE WAY**

	RATINGS	NUMBER OF RESPONSES	PERCENTAGE OF TOTAL RESPONSES
CONTENT OF THE PRESENTATION ENHANCED MY UNDERSTANDING OF THE HEALTHY MARRIAGE INITIATIVE (5=STRONGLY AGREE, 1=STRONGLY DISAGREE)	5	7	31%
	4	8	36%
	3	7	31%
	2	0	0%
	1	0	0%
SPEAKERS WERE KNOWLEDGABLE IN THE SUBJECT AREAS AND ACTIVELY ENGAGED THE AUDIENCE (5=STRONGLY AGREE, 1=STRONGLY DISAGREE)	5	5	23%
	4	14	66%
	3	2	9%
	2	0	0%
	1	0	0%

ADDITIONAL COMMENTS CITED:

- ◆ Impressed by the work of a couple of states: Florida and Oklahoma.
- ◆ Most states are here to learn, so had little to offer.
- ◆ Good to hear where other states are and to learn new ways and some results of things tried.
- ◆ This was very uneven because states were at such different parts—some just beginning.
- ◆ Will notes be made available?

SESSION FOUR: PLENARY PANEL			
MARRIAGE EDUCATION: WHAT'S OUT THERE, WHAT'S EFFECTIVE, & HOW TO INCORPORATE IT INTO YOUR INITIATIVE			
	RATINGS	NUMBER OF RESPONSES	PERCENTAGE OF TOTAL RESPONSES
CONTENT OF THE PRESENTATION ENHANCED MY UNDERSTANDING OF THE HEALTHY MARRIAGE INITIATIVE (5=STRONGLY AGREE, 1=STRONGLY DISAGREE)	5	6	27%
	4	9	40%
	3	5	22%
	2	2	9%
	1	0	0%
SPEAKERS WERE KNOWLEDGABLE IN THE SUBJECT AREAS AND ACTIVELY ENGAGED THE AUDIENCE (5=STRONGLY AGREE, 1=STRONGLY DISAGREE)	5	7	33%
	4	10	46%
	3	4	19%
	2	0	0%
	1	0	0%

ADDITIONAL COMMENTS CITED:

- ◆ The chart should have been a power point.
- ◆ Coffin was good—presentation on resources was too short, and was repeated the following day.
- ◆ The funding discussion was helpful.

**SESSION FIVE:
POLICY & HEALTHY MARRIAGES**

	RATINGS	NUMBER OF RESPONSES	PERCENTAGE OF TOTAL RESPONSES
CONTENT OF THE PRESENTATION ENHANCED MY UNDERSTANDING OF THE HEALTHY MARRIAGE INITIATIVE (5=STRONGLY AGREE, 1=STRONGLY DISAGREE)	5	2	22%
	4	4	44%
	3	3	33%
	2	0	0%
	1	0	0%
SPEAKERS WERE KNOWLEDGABLE IN THE SUBJECT AREAS AND ACTIVELY ENGAGED THE AUDIENCE (5=STRONGLY AGREE, 1=STRONGLY DISAGREE)	5	2	22%
	4	5	55%
	3	2	22%
	2	0	0%
	1	0	0%

ADDITIONAL COMMENTS CITED:

- ◆ Tweedy was good. Lewin Group's data was too general.

SESSION SIX: STATE MODELS

LESSONS LEARNED FROM THE OKLAHOMA & ARIZONA HEALTHY MARRIAGE INITIATIVE: HOW TO PLAN & IMPLEMENT A HEALTHY MARRIAGE INITIATIVE TO SUPPORT SELF- SUFFICIENCY EFFORTS?

	RATINGS	NUMBER OF RESPONSES	PERCENTAGE OF TOTAL RESPONSES
CONTENT OF THE PRESENTATION ENHANCED MY UNDERSTANDING OF THE HEALTHY MARRIAGE INITIATIVE (5=STRONGLY AGREE, 1=STRONGLY DISAGREE)	5	8	47%
	4	8	47%
	3	0	0%
	2	0	0%
	1	1	5%
SPEAKERS WERE KNOWLEDGABLE IN THE SUBJECT AREAS AND ACTIVELY ENGAGED THE AUDIENCE (5=STRONGLY AGREE, 1=STRONGLY DISAGREE)	5	10	58%
	4	7	41%
	3	0	0%
	2	0	0%
	1	0	0%

ADDITIONAL COMMENTS CITED:

- ◆ Very valuable!
- ◆ Really got the flavor of what's going on in Oklahoma and Arizona—two good perspectives.
- ◆ The continued exchange of information about states and exposure to different methods.

SESSION SEVEN: LESSONS LEARNED FROM THE CHATTANOOGA & GRAND RAPIDS COMMUNITY- WIDE HEALTHY MARRIAGE INITIATIVES: HOW TO PLAN & IMPLEMENT A COMMUNITY-WIDE INITIATIVE TO SUPPORT SELF- SUFFICIENCY?			
	RATINGS	NUMBER OF RESPONSES	PERCENTAGE OF TOTAL RESPONSES
CONTENT OF THE PRESENTATION ENHANCED MY UNDERSTANDING OF THE HEALTHY MARRIAGE INITIATIVE (5=STRONGLY AGREE, 1=STRONGLY DISAGREE)	5	6	40%
	4	8	53%
	3	1	6%
	2	0	0%
	1	0	0%
SPEAKERS WERE KNOWLEDGABLE IN THE SUBJECT AREAS AND ACTIVELY ENGAGED THE AUDIENCE (5=STRONGLY AGREE, 1=STRONGLY DISAGREE)	5	9	60%
	4	6	40%
	3	0	0%
	2	0	0%
	1	0	0%

ADDITIONAL COMMENTS CITED:

- ◆ It was once again the benefit of dialoguing with others and keeping the conversation alive
- ◆ The best! Bill was great! Mark, great presentation. First Things First—great!
- ◆ Eastburg was very good. Rozario was good as well. Not entirely relevant to state efforts to implement a marriage initiative.

SESSION EIGHT: STATE MODELS			
STRATEGIC PLANNING FOR STARTING A HEALTHY MARRIAGE INITIATIVE TO SUPPORT YOUR WELFARE REFORM EFFORTS			
	RATINGS	NUMBER OF RESPONSES	PERCENTAGE OF TOTAL RESPONSES
CONTENT OF THE PRESENTATION ENHANCED MY UNDERSTANDING OF THE HEALTHY MARRIAGE INITIATIVE (5=STRONGLY AGREE, 1=STRONGLY DISAGREE)	5	4	21%
	4	10	52%
	3	5	26%
	2	0	0%
	1	0	0%
SPEAKERS WERE KNOWLEDGABLE IN THE SUBJECT AREAS AND ACTIVELY ENGAGED THE AUDIENCE (5=STRONGLY AGREE, 1=STRONGLY DISAGREE)	5	7	35%
	4	8	40%
	3	5	25%
	2	0	0%
	1	0	0%

ADDITIONAL COMMENTS CITED:

- ◆ The exposure of state-policy movement toward encouraging marriages was beneficial.
- ◆ Wasn't clear whether or not there was a template or format available in our materials?
- ◆ Utah presenters were very good and helpful.

SESSION NINE: PLENARY PANEL			
HOW DO YOU BUILD A COALITION FUND, & EVALUATE YOUR HEALTHY MARRIAGE INITIATIVE?			
	RATINGS	NUMBER OF RESPONSES	PERCENTAGE OF TOTAL RESPONSES
CONTENT OF THE PRESENTATION ENHANCED MY UNDERSTANDING OF THE HEALTHY MARRIAGE INITIATIVE (5=STRONGLY AGREE, 1=STRONGLY DISAGREE)	5	8	44%
	4	5	27%
	3	5	27%
	2	0	0%
	1	0	0%
SPEAKERS WERE KNOWLEDGABLE IN THE SUBJECT AREAS AND ACTIVELY ENGAGED THE AUDIENCE (5=STRONGLY AGREE, 1=STRONGLY DISAGREE)	5	8	40%
	4	11	55%
	3	1	5%
	2	0	0%
	1	0	0%

ADDITIONAL COMMENTS CITED:

- ◆ Reverend Young’s passion needs to be packaged and marketed! Invite George Young back again, excellent and very engaging presenter.
- ◆ Reverend Young Rocks!
- ◆ Great content—well rounded panel.

**SESSION TEN:
WHERE DO WE GO FROM HERE?**

	RATINGS	NUMBER OF RESPONSES	PERCENTAGE OF TOTAL RESPONSES
CONTENT OF THE PRESENTATION ENHANCED MY UNDERSTANDING OF THE HEALTHY MARRIAGE INITIATIVE (5=STRONGLY AGREE, 1=STRONGLY DISAGREE)	5	5	31%
	4	8	50%
	3	3	18%
	2	0	0%
	1	0	0%
SPEAKERS WERE KNOWLEDGABLE IN THE SUBJECT AREAS AND ACTIVELY ENGAGED THE AUDIENCE (5=STRONGLY AGREE, 1=STRONGLY DISAGREE)	5	6	37%
	4	8	50%
	3	2	12%
	2	0	0%
	1	0	0%

ADDITIONAL COMMENTS CITED:

- ◆ Session is more useful now as we process all the information received.
- ◆ Good Conclusion!

DESCRIBE THE BENEFITS TO YOU ANTICIPATE AS A RESULT OF THIS ACADEMY:

- ◆ Take back ideas and see how we can put them back in place.
- ◆ It will rev up our engines—this has been inspiring. We'll access these great resources that you have put at our fingertips.
- ◆ Helps to formulate overall program that may work in Colorado.
- ◆ I will be meeting with the Assistant Director of the Cooperative Extension
- ◆ Services to discuss what we as educators can offer to the State Child and Family Services in NYS.
- ◆ Better coordination within the State; more commitment.
- ◆ Great Resource Book!
- ◆ We have been brainstorming trying to select the best components (activities) for our program. This academy has provided guidance in this area.
- ◆ The discussion on funding sources will also help in the development of our program.
- ◆ Program ideas and funding alternatives.
- ◆ Helps us organize our efforts. We have a few fledgling efforts and we need to see how we build off that energy.
- ◆ Gives me a place to start.
- ◆ Since most of the states seem to be in the preliminary stages of the Healthy Marriage Initiative, I am hopeful that within the next couple of years, some of these states will be able to share better/best practices once implemented.
- ◆ Equipped with information to educate State policymakers.
- ◆ Tools to develop a State plan and course of action.

IDENTIFY WHAT WAS MOST USEFUL ABOUT THIS ACADEMY:

- ◆ My first exposure, so everything was beneficial.
- ◆ Networking and contacts; resources
- ◆ Information provided by Wade Horn and ACF was very helpful. Knowing where State funding source is helps.
- ◆ Commitment to this issue and best ways to approach.
- ◆ Materials from all the States.
- ◆ I especially liked the exposure to the training techniques of Michele Weiner-Davis and Bill Coffin.
- ◆ Learning what other communities have implemented and new ideas to implement in our community.
- ◆ Hopefully it will be a catalyst to allow the States to go back and put together many of the various pieces that perhaps already exist to develop a holistic “family strengthening program.”
- ◆ Getting together with other stakeholders from the State and discussing the possibilities.
- ◆ The resources that were available were useful in assisting with the development of our program. I have spoken one-on-one with several of the speakers and received valuable information.
- ◆ Connection to action-oriented people on a national basis.
- ◆ The exchange of methods.
- ◆ Getting the broad perspective from so many different sectors; hearing from the faith-based sector and the domestic violence sector was helpful in pulling together my thoughts.
- ◆ There is research, knowledge, and practical experience that I can build on.
- ◆ Having the exposure and gaining some of the knowledge and techniques used and experienced in the various States.
- ◆ Identifying potential federal funding streams and learning about what it will take to access them.
- ◆ Data on the subject of marriage; Oklahoma’s economic strategies; great networking opportunity
- ◆ A few of the State/Agency presentations.

HOW COULD THIS ACADEMY HAVE BETTER MET YOUR NEEDS?

- ◆ More time to recruit a State team to attend.
- ◆ Have caseworkers, Head Start, etc. attend to describe how their agency works on a day-to-day basis.
- ◆ What the RFP will look like. Examples of applications made to private grantors for healthy marriage programs.
- ◆ Not possible!
- ◆ Added tools, handouts, etc. to arsenal of tools to provide TA to States in region.
- ◆ More options during concurrent sessions—smaller sessions to facilitate discussion. Some info on basic marriage findings?
- ◆ Provide funding for technical assistance. Videotape the conferences: this will allow is to share the information with our staff. Sometimes hearing the speaker has a greater impact than reading someone's notes from the meeting.
- ◆ I wish more people from Syracuse could have participated.
- ◆ It was beneficial to me in its present form.
- ◆ Need the statistical information that supports making this a State and National priority.
- ◆ It would have been beneficial if some of the states/presenters discussed more about their practical experiences with the TANF client as it relates to the marriage initiative and the results thus far.
- ◆ Used more visuals.

OTHER COMMENTS:

- ◆ Thanks for the conference.
- ◆ Plan a national satellite videoconference for more to participate across the nation. Not many of us are able to go to the Smart Marriages Conference. This conference was my first Healthy Marriage Academy. I wouldn't have been able to attend if the HHS did not pay for my registration (thank you for the opportunity!).
- ◆ Well done! Thanks for your partnership.
- ◆ Good Conference.
- ◆ Thank you! This was a great help. The time was well spent!
- ◆ Very well organized. Excellent content. Good accommodations. Perhaps you could have used more power point presentations (with notes in binder) for more formal presentations. The ones that were used were very helpful.
- ◆ I appreciate being invited to this conference. Yes, it was helpful.
- ◆ For any state or states who has a successful healthy initiative with some of their TANF customers within their states, it might be helpful to invite a few of those couples to next year's academy if they are willing to share their experiences before a large group.
- ◆ I believe!