



Nebraska Child Abuse Prevention Fund Board
Annual Report

Fiscal Year 2012-2013

The Nebraska Child Abuse Prevention Fund Board (NCAPF Board) administers grants to support research-based primary prevention through community collaborations. Grantees participate in training and receive technical assistance that is also provided through funding from the NCAPF Board. In 2012-2013, grant strategies focused on children from birth to 17,

from both high-risk and general population situations. A total of 208 children and 185 families were directly served.

All of the grants are evaluated to track whether children and families are seeing real benefits, and if the quality of the strategy is clear. Outcome data tracks progress and identifies areas for future improvement.

Key Finding

Parents who participated in PCIT with the children demonstrated significantly improved protective factors. Children who engaged in PCIT demonstrated a significant reduction in problem behaviors and parent tolerance increased.

Source: Interdisciplinary Program Evaluation, The University of Nebraska Medical Center's Munroe-Meyer Institute.

High Risk - Early Childhood and Elementary Years

Parent Child Interaction Therapy – PCIT

PCIT is a form of behavioral parent training developed for children ages 2-7 and their caregivers. It is an evidence-based strategy for children with emotional and behavioral disorders that emphasizes improving the parent-child relationship and changing interaction patterns.

Risk Factors: Reasons for referral into PCIT include disruptive behaviors such as noncompliance, to major acts of aggression.

- Four Nebraska Child Well Being Communities are currently implementing PCIT with support from NCAFP Board grants and other funds.
- 15 licensed mental health providers were trained to implement PCIT
- 100 children and their parents/caregivers were served

Results of participant responses to the FRIENDS Protective Factors Survey showed improvement across all areas of the Protective Factors, including parenting knowledge, social connections, family resilience and nurturing and attachment.

Data from the Eyberg Child Behavior Inventory show 66.7% of participating children had significant conduct problems with limited parent tolerance at entry. Upon completion, only 11.5% continued to have significant conduct problems and parent tolerance had increased.

PCIT received approval from Nebraska Medicaid as an approved practice for reimbursement during this grant year. The NCAFP Board investment in PCIT assisted rural communities to build capacity in an area known to be a health care shortage, i.e. licensed mental health practitioners trained in an early childhood intervention.

I had a 5-year old client that was referred for services by an agency that tries to keep children from being involved with child welfare. There were concerns about pushing, biting, hitting, refusal, fire starting... A major success was not only with the child's reduction of these negative behaviors, but with the mother's confidence in parenting.

—Dakota County Therapist

Key Finding

Parents who participated in PIWI with their children demonstrated significantly improved family resilience and also demonstrated smaller improvements in parenting knowledge, social connections and nurturing and attachment.

Source: Interdisciplinary Program Evaluation, The University of Nebraska Medical Center's Munroe-Meyer Institute.

General Population - Infancy and Early Childhood

Parents Interaction With Infants – PIWI

PIWI is an evidence-informed approach through the Center on Social and Emotional Foundations for Early Learning that strengthens parents' relationships with their young children from birth to age 2. PIWI promotes parenting that is competent, confident and mutually enjoyable. The facilitated small group structure of PIWI also enhances informal support networks for parents.

- 4 Nebraska Child Well Being Communities are currently implementing PIWI with support from NCAPF Board grants and other funds.
- 65 children and their families participated in PIWI groups.
- PIWI groups met 92% of the indicators for implementation with fidelity.

High Risk – Middle Grades and Older Youth

3-5-7 Permanency Quest

The 3-5-7 Model was developed to facilitate healing, reunification and recovery for children and youth ages 5-17 in the child welfare system. Community partners work to address the issues that may impede permanency for the child. The overarching objective is to help children find and maintain permanency with either their biological parents, adoptive parents or through a plan for aging out. A total of 24 children and 15 parents received direct services.

During each quarter, three foster or biological parents reported that they would have not been able to keep the child in their home without the support of 3-5-7.

Key Finding

Court processes made changes to better support children who experience trauma. Primary caregivers and children actively participated in addressing trauma.

Source: Interdisciplinary Program Evaluation, The University of Nebraska Medical Center's Munroe-Meyer Institute.

Training and Technical Assistance

- Nebraska Children worked with masters-level trainers at Oklahoma University Health Sciences College to ensure high-quality training and support for therapists to provide Parent Child Interaction Therapy (PCIT). Two grantee community teams were accepted to participate in the PCIT National Learning Collaborative.
- Nebraska Children conducted two trainings in PIWI for grantees from four community grantees of the NCAPF Board for a total of 62 persons.
- Nebraska Children also supported a peer learning session for community grantees and state partners which included information on Results Based Accountability.
- Grantee communities offered 18 child abuse prevention focused training events for a total of 247 participants.

For more information, visit www.preventchildabusene.org.

Public Awareness and Education

Local Child Abuse Prevention Councils used awareness messaging and promotional items from two toolkits to reach most of the counties in Nebraska.

- Approximately 13,000 products promoting Rethink Your Reaction were distributed to parents through venues including small parent education groups and large community family events.
- Approximately 12,500 pinwheels promoting Pinwheels for Prevention were part of displays from Omaha to Chadron during April, Child Abuse Prevention Month.
- Additionally, local Child Abuse Prevention Councils placed over 180 ads in newspapers, newsletters and on radio and television.

Other key partners in public awareness distribution and support included local businesses, elementary schools, early childhood professionals, Omni Behavioral Health, Jewish Family Service, Building Bright Futures, Nebraska Families Collaborative and the Nebraska Federation of Women's Clubs.

Through Nebraska Children, a new prevention website, www.preventchildabusene.org, was launched and positive parenting information was distributed through:

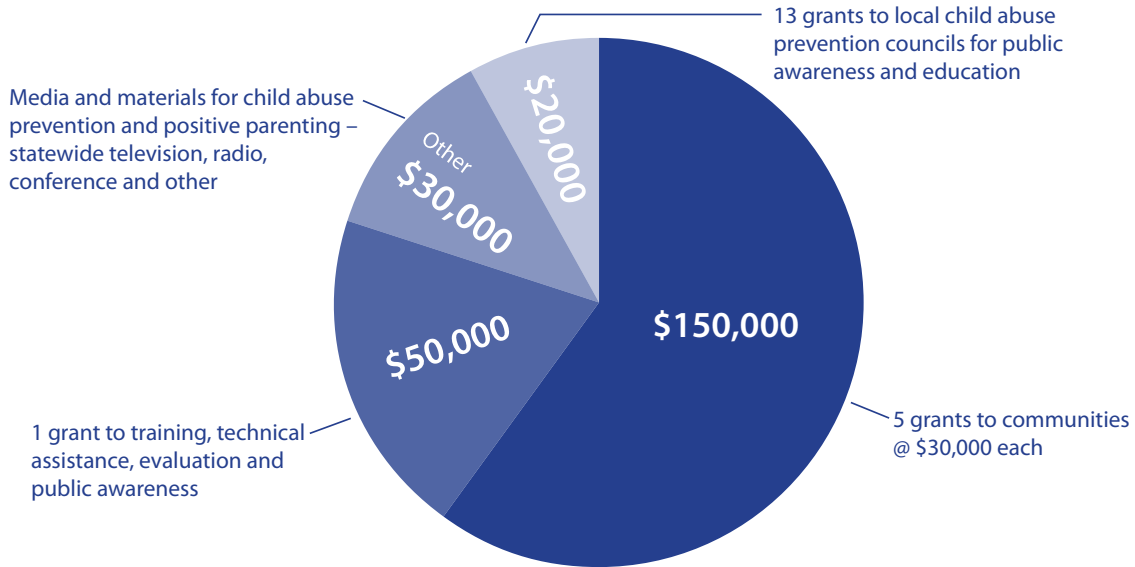
- Nebraska Radio Network
- KOLN/KGIN, “Moms Everyday”
- NET Television
- Social Media



Financials

Annual budget = \$250,000

Match and in-kind
from grantees = over \$60,000



Board of Directors 2012-2013

NCAPF is administered by the Nebraska Health and Human Services System and is governed by a nine-member Board, nominated by the Governor and approved by the State Legislature.

District I

Rev. Dr. Rebecca Brown, Lincoln

Brandon Verzal, Lincoln

District II

Martha Parker, Omaha

Denise Pecha, Omaha

District III

Joni Kuzma, Grand Island

Camille Ohri, O'Neill

Member-At-Large

Dr. Mary Fran Flood, Lincoln

Personnel Required by Statute

Two representatives of the Nebraska Department of Health and Human Services as appointed by the Thomas Pristow and Dr. Joseph Acierno.

Report prepared by Nebraska Children