

HOPES Evaluation FY2015

Evaluation Brief | December 2016

HOPES I OVERVIEW

HOPES uses a two-pronged approach to prevent child maltreatment:

Direct services to families with certain risk factors



Support to community coalitions to increase awareness and capacity for prevention



Primary evidence-based parent education programs used in HOPES I:

PARENTS AS TEACHERS

SAFECARE

24/7 DAD

TRIPLE P

AVANCE

INCREDIBLE YEARS

Additional HOPES I services:

PERIOD OF PURPLE CRYING

WRAP AROUND

STEWARDS OF CHILDREN

CHILD CARE

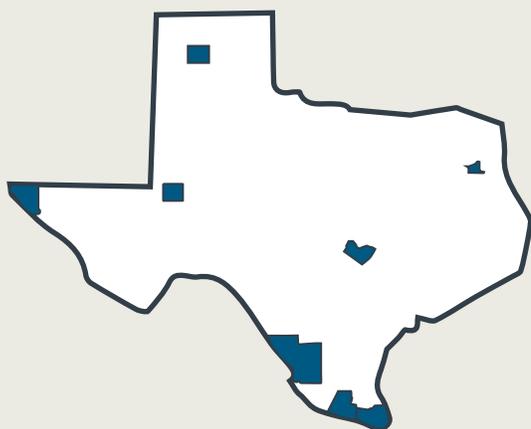
COALITION

EQUINE THERAPY

COUNSELING

BASIC NEEDS

The eight HOPES I primary counties:



Introduction

Healthy Outcomes through Prevention and Early Support (HOPES) is a program funded by the Prevention and Early Intervention Division (PEI) of the Texas Department of Family and Protective Services (DFPS). Its aim is to strengthen families with young children in order to prevent child abuse and neglect. Services are provided by program sites that use a variety of evidence-based parenting programs. HOPES also requires collaborations at the local level to increase community awareness and capacity around child maltreatment prevention.

Project HOPES was rolled-out in three phases, known as HOPES I, HOPES II, and HOPES III. HOPES I contracts were awarded to eight primary counties and executed in July 2014, with most sites starting work with clients in September 2014. This evaluation covers the time period of fiscal year 2015, September 1, 2014 to August 31, 2015.

A mixed-methods approach for data collection was used to gather information for this evaluation. Online surveys were completed by 110 staff and 132 community members across the eight HOPES I sites. Interviews and focus groups were conducted with 52 parents, 116 staff members and 42 coalition and/or community members. Administrative data from the PEI database was used to examine parent outcomes. Program sites' quarterly reports were used to determine coalition involvement, specific event participation, and total number of clients served.

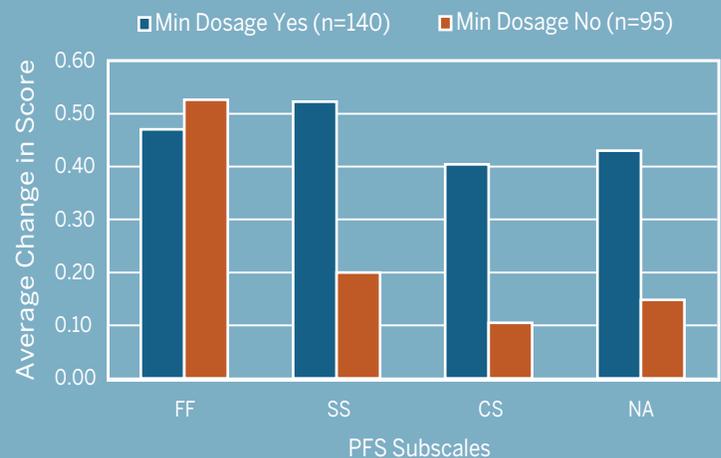
Since this was the first year of collecting data for HOPES, community level child maltreatment rates cannot be included in this evaluation. Once more time has passed, an impact on the community rates of child maltreatment will be assessed and included in future annual reports.

This brief provides a summary of key findings. Please see full report for detailed analyses, full list of findings, and methodological limitations.

Parents reported that HOPES programs educated them on proper discipline and positive ways to engage with their children, helped connect them to other parents, and provide them a trusted support network.

“[The skills learned in the program] allowed me to develop a better relationship with my child. We’ve grown closer, I’m able to deal with him a lot better than I was when I first started, a year ago. I’ve come a long ways with my relationship with my son.”
-Program Participant

Average Change in Protective Factors Subscales for HOPES Participants with Closed Case, by Minimum Dosage Received



Note: FF = Family Functioning; SS = Social Support; CS = Concrete Support; NA = Nurturing and Attachment
 For subscale definitions, see: <http://friendsnrc.org/protective-factors-survey>

Reach & Impact

Findings suggest that HOPES I has been successful in increasing protective factors in families and assisting communities. HOPES sites reached an estimated 36,000 individuals through community programs, including community fairs, events at parks, libraries, children’s museums, conferences and professional trainings and various other services. While this number may include some duplicated individuals, it suggests that sites actively engaged their communities in child maltreatment prevention.

HOPES I served 2,803 individuals from 1,370 families, with direct services such as evidence-based parent education programs, counseling, childcare, and case management. In looking at families who closed cases in FY2015, protective factor scores increased on all subscales. While caution should be taken when interpreting subscale scores, these findings suggest that families increased protective factors that may ultimately reduce child maltreatment. Qualitative data provide additional evidence that HOPES has reduced family stress, increased parental empowerment, and led to positive changes in parent and child interactions for participants.

A HOPES SUCCESS STORY

A former foster youth’s journey to break the cycle of child maltreatment

Laura*, a 19 year-old mother, recently completed the SafeCare program provided by a HOPES program site. Laura gave birth to her daughter one month after she left the foster care system. Laura’s primary concern is breaking the cycle of child maltreatment; she expressed that she never wanted her daughter to enter the foster care system. Even though Laura has multiple responsibilities as a wife, mother of an infant and full-time college student, she enrolled in Project HOPES and worked out a home visit schedule around her class and work schedule. Through the SafeCare lessons, she learned how to care for and bond with her infant, how to child-proof her home, and how to care for a sick infant. With her home visitor, she was able to honestly address her concerns about raising a child appropriately since she had never had a strong parental role model. She developed a plan for managing stressors associated with being a young working mother with a full class schedule. Laura is thriving with the tools and support needed to parent her daughter and break the cycle of child maltreatment.

(*name changed)

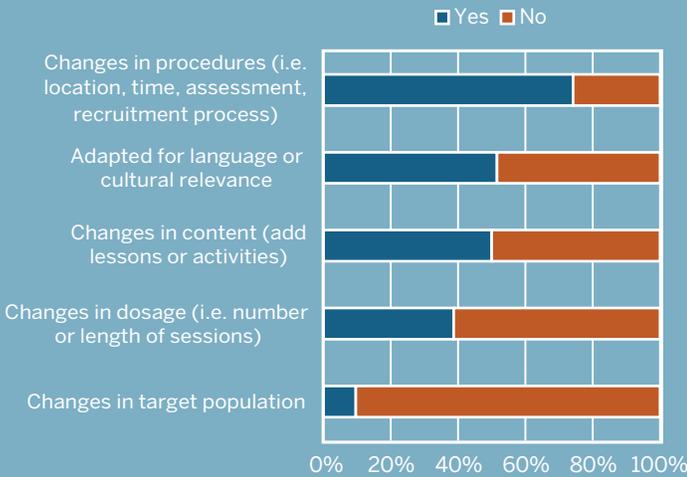
PROCESS FINDINGS

Based on staff survey responses, 37% reported making modifications to evidence-based models; often in order to meet client needs.

“I think what’s unique with HOPES is the population we’re trying to reach, there are a lot of needs and so, the way our plan of operation was written, I feel like the expectation of the caseload is very high for the needs and the intensity of the needs that the families have.”

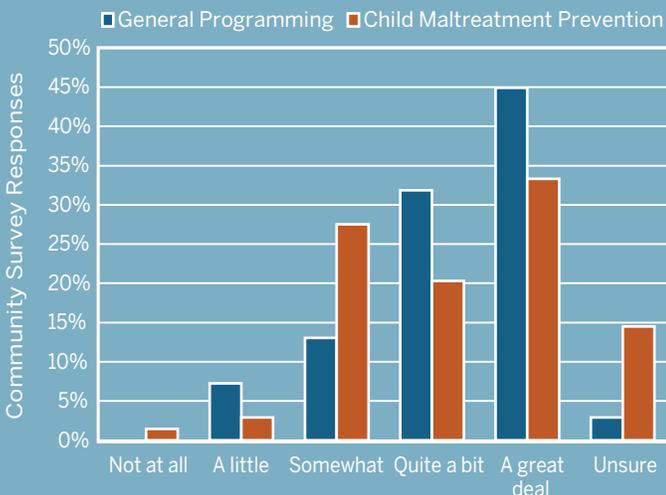
-Staff Member

Types of Adaptations Made



While 77% of community survey respondents believed their early childhood coalition was “quite a bit” or “a great deal” effective in mobilizing resources for general community programming, only 53% indicated the same for child maltreatment prevention.

Coalition effectiveness at mobilizing resources and supporting programming



Implementation

The evaluation of HOPES implementation revealed several program strengths: (1) parent education programs are well-liked by staff and clients, (2) staff have developed strong, trusting relationships with parents, and (3) supplemental services like case management and counseling are benefiting families.

Along with these strengths are opportunities for growth. While there is considerable variability across the sites, in general, implementation challenges suggest the need for: (1) improved program marketing, outreach, and engagement, especially of fathers and families with the highest needs, (2) assistance for staff on balancing evidence-based program fidelity with families’ case management needs, (3) adjustment of agency flex time and caseload policies to reflect the realities of providing home visiting services to high needs families; and (4) staff training and professional development related to cultural competency, ethical boundaries and how to address crisis situations, especially for staff without a social work or counseling background.

Coalitions

Findings regarding coalition functioning indicate a high level of collaboration in the community and a clear commitment to continue to work together on issues related to child welfare. One area of growth for some coalitions is to develop a clearer vision and actionable strategy for child maltreatment prevention.



RECOMMENDATIONS

1 Continue support of community-based child maltreatment prevention programs	2 Shift to an evidence-informed framework to allow for increased flexibility in programming	3 Adjust performance based contracting requirements
4 Maintain the community-based approach of HOPES	5 Dedicate time for program start-up and provide guidance on outreach	6 Support staff through professional development, training and official guidance
7 Provide guidance on incorporating child maltreatment prevention into coalition goals	8 Expand data collection to include screening for key risk factors	 See full report for additional recommendations and complete explanations

LOOKING FORWARD

HOPES is a new and developing program, and since data collection for this evaluation, many changes have already been made. In response to agency feedback, PEI has made changes to HOPES II and HOPES III contracts. Additionally, PEI is developing a new, more robust database system that will hopefully incorporate the data collection recommendations within this report.

HOPES program sites also have reported that they have learned from first year implementation challenges and are making changes to address them. The effects of these process changes from year to year will be evaluated in subsequent reports. Future evaluation reports will also include data from a caregiver survey designed by the research team. This survey will supplement data from the PFS with information about additional risk and protective factors related to child maltreatment.

Overall, those who were interviewed for this study were very supportive and hopeful about the long-term impact of the program.

“ I think some of the best programs, sometimes you don't realize how good they were until ten, fifteen years later. Because – and that's what I would hope HOPES would be, that what's happening now, because it is helping that next generation. ”

-Community Member