

Regular Meeting 1/09/03

TO: Juvenile Welfare Board Members

FROM: James E. Mills, Executive Director 
Browning Spence, Director of Community Planning and Research 

Healthy Families Pinellas Annual Evaluation Report (FY 2001-2002)

This is the October 2001 to September 2002 annual evaluation report submitted in partial fulfillment of the contract between the JWB (Juvenile Welfare Board) of Pinellas county and USF (University of South Florida), calling for an independent evaluation of the Healthy Families Pinellas program. Data included in this report are the latest available from the program; dates are specified for statistics provided.

Healthy Families Pinellas (HFP) operates with technical support from Healthy Families America, using critical elements designed to reduce the incidence of child abuse and neglect. The program provides services in targeted census tracts in north, south, and mid-Pinellas County. HFP is based primarily on best practice research and is funded by the JWB and Healthy Families Florida. The latter funds a team in Tarpon Springs and a team in Largo; the other ten teams are funded by the JWB. Family participation is voluntary. From its inception, HFP's fundamental goal has been to identify overburdened families and provide intensive home visiting services to reduce the risk of child abuse and neglect (i.e., verified maltreatment). Families are assessed for risk using the Healthy Families Florida Assessment Tool. Assessment is accomplished by Family Assessment Workers either pre-natally or in the hospital at time of birth. If risk factors are sufficiently high families are invited to participate in HFP, beginning a process expected to last from three to five years.

Families, once accepted into the program, receive intensive home visits by multi-disciplinary staff that includes: paraprofessional family support workers under the supervision of professional field supervisors, Family Advocates (which are licensed clinical social workers), a housing and employment specialist, and registered nurses. HFP is supported by a collaboration composed of the Pinellas County Health Department, Family Service Centers, Inc., the YWCA of Tampa Bay, Bayfront Medical Center, and Morton Plant Mease Health Care. The program has developed more than 75 affiliate agreements with a range of other service providers in the community. As of September 30, 2002, 1,444 families had been served in FY 01-02. During FY 01-02, participating hospitals identified and screened a total of 2,575 mothers of whom 593 (23%) were referred for home visiting services.

The evaluation has continued the transition from program monitoring to long-term issues such as indicators of program success, follow-up with families after graduation from the program, and annually tracking the school readiness and progress of HFP children. Furthermore, the evaluation team continued implementing exit and follow up interviews and established methods to maintain contact with families after they graduate. The evaluation team receives data annually from the School Board, which allows HFP to track the school readiness of HFP children. However, this year the data has not yet been received, therefore it will be reported in the semi-annual report submitted in April 2003.

The evaluators conclude the program has been very successful in meeting its primary goal of reducing verified abuse or maltreatment. The verified maltreatment rate for the period October 1, 2001 through September 30, 2002 was 2.09%. The Healthy Families evaluation team calculates this rate by using the number of cases with verified maltreatment as the numerator, and the number of all active families as the denominator. There were 24 cases of verified maltreatment among approximately 1150 active families, which results in a maltreatment rate of 2.09%¹. In an effort to interpret this rate, the Healthy Families evaluation team obtained information on verified maltreatments from the Department of Children and Families (DCF). That data for fiscal year 2000 – 2001 (the most recent year for which data are available) shows that 49.19 children per 1,000 children in Pinellas County were the victims of verified maltreatment. The 2.09% rate among Healthy Families cases can be extrapolated to 20.9 cases per 1,000 families. Even so, the comparison is indirect, because Healthy Families measures maltreatment at the level of a case (i.e., a family with an unspecified number of children), and DCF measures maltreatment at the level of an individual child. Also, DCF provides information on maltreatment for children age birth to 18, and Healthy Families serves high-risk families where children are generally much younger. The Research and Evaluation Center has requested that the evaluation team re-calculate its rate based on number of children being served in Healthy Families, and to locate the most specific information available from DCF on verified maltreatment (for example, by age of child).

Exit interviews conducted with families completing services continue to demonstrate a high level of satisfaction with HFP. Analysis of the exit interviews conducted to date reveal that respondents are committed to the well-being of their families, view discipline in a positive way, and feel that education, reading, and meeting with their children's teachers are important. Respondents report being satisfied with HFP, the home visits and their family support workers. Respondents also seem to have a sound perspective about what they need to do to be good parents, and feel their personal and family relationships have improved as a result of their participation in HFP. There is also evidence for the enduring effectiveness of the program in that there is no degradation of families' scores on follow-up interviews even as late as three years after graduation.

During the reporting period a survey of currently enrolled families' attitudes toward the program in general and of families' attitudes toward goal setting was conducted. Data indicate that program participants are highly satisfied with the program regardless of level or length of time with the program. Likewise, families report positive attitudes toward goals and goal-setting behavior. During the reporting period a survey of currently employed family support workers' attitudes toward their jobs was conducted. Overall, satisfaction with their jobs was high. The pattern of satisfaction found for nine specific facets of their jobs was consistent with national norms of people in similar professions.

One indicator of family progress in the program is changes in family functioning as measured by the Family Functioning Style Scale (FFSS). Enough data was collected this year to allow for a more powerful analysis of scores than in the past. Results unambiguously demonstrated that family functioning has improved significantly over the

1. The evaluators did not report the total number of active families used to calculate this rate. The estimate, based on data in the report, is that 24 cases of verified maltreatment occurred among approximately 1150 families, resulting in 2.09% of all active families having a verified report of maltreatment.

course of participants' tenure in the program. Improvements were evidenced on three of the five FFSS scales. These scales include family commitment, coping strategies, and interaction patterns. Moreover, overall FFSS scores showed improvement over time.

In summary, HFP continues to perform in an exemplary manner, achieving its objectives and meeting the needs of at-risk families in its designated operational areas.

The full report is available from the Research and Evaluation Center upon request.

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