Family Builders Program
Annual Report for
Fiscal Year 2002

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Executive Summary

This is the fifth annual report for the Family Builders Program. The primary purpose of the report is to provide information about the families served by the program, the program's impacts, and the issues surrounding program implementation. This information is essential to understanding the usefulness of the program and in guiding its future development and applications.

Background

The safety of children is a high priority goal for the Arizona Department of Economic Security (DES) and reports of abuse or neglect are investigated through its Division of Children, Youth and Families, Child Protective Services (CPS). In the past, CPS was unable to investigate all the child abuse and neglect reports it received, particularly during the late 1990s when a sharp increase occurred in the number of reports received. In FY1997, for example, CPS was able to investigate only 84 percent of reports. While CPS continued to investigate reports indicating a moderate to high risk for abuse, reports indicating low or potential risk often went uninvestigated due to resource constraints. DES realized that if the families who were having some difficulties, but had not reached the level of risk that would guarantee an investigation, did not get help, they would be subsequently reported with more serious allegations with greater risk to the children.

Because of this situation, DES identified the need for an alternative, or differential, system that includes at least two categories of initial response to allegations of child abuse and neglect. The first category of response is the traditional "investigative" approach that addresses serious safety issues that could lead to severance and/or criminal charges. The second category is an "assessment" approach that is directed at families who, if their needs are met, could be stabilized, thereby enabling them to better care for their children without ongoing support from the formal child welfare systems. Support for differential response systems has grown in the professional community, and as of early 2001, more than 12 states, including Florida, Michigan, Virginia, and Missouri, had initiated such systems (Schene, 2001).

The Arizona differential response system, the Family Builders Program, was authorized by the Legislature in 1997 and implemented by DES in January 1998 as a two-year pilot program serving the major urban areas of Arizona. During the pilot phase, the program received over $8 million in funding. In FY 2000, the program was reauthorized for 10 years by the Arizona Legislature, expanded to include several rural counties, and received $7,996,100 in funding. In FY 2001 the program once again received $7,999,000 in funding. In FY 2002, however, Family Builders received $6,197,000--a 22.5 percent decrease in funding due to a statewide budget deficit.

Since its inception, the Family Builders Program has responded to over 27,000 families throughout Arizona. Of those families, over 9,000 signed service plans and approximately 4,700 achieved the goals they set for themselves when they entered the program. In FY2002 over 6,500 families were referred to the program, 2,655 families were assessed, and 2,535 families signed a service plan.

Program Overview

The mission of the Family Builders program is to enhance parents' abilities to create safe, stable, and nurturing home environments that promote healthy child development and the safety of all family members. This goal is achieved through an innovative approach that encourages collaboration among social service and faith-based organizations and involves families as active partners in recognizing and developing families' strengths while addressing their needs.

DES contracts with private social service and faith-based organizations to implement the program in three DES districts: Maricopa County (District I), Pima County (District II), and portions of Coconino and Yavapai counties (District III). The contractors, in turn, work with over 100 collaborators to provide program services to clients.
The program consists of three primary phases: referral, assessment, and service. The referral phase is a two-step process designed to determine the eligibility of families for the program. Child abuse and/or neglect reports received on the CPS hotline are prioritized into one of four categories of risk: potential, low, moderate, or high. Only those reports that are classified as potential or low risk are considered for the program. Trained CPS District Coordinators then screen the potential and low risk reports to determine if the families are eligible and appropriate for Family Builders. Several characteristics, including allegations of physical and sexual abuse, automatically disqualify a report from the program while other factors, such as previous involvement with Family Builders, are used to decide if a family is appropriate for referral (see page 2 for more details on screening criteria).

Family Builders providers are required to make three attempts to contact referred families within a five-day period (excluding weekends and holidays). The first two attempts must be made within 48 business hours. If the provider is unable to contact the family after three personal attempts, a letter explaining the program and offering services is mailed within 48 business hours from the last personal attempt. If no response is received within seven days from the date the letter was mailed, the CPS Family Builders District Coordinator is advised and determines if the report should be investigated by CPS.

If the provider is unable to contact the family due to an incorrect address, the provider is required to immediately advise the Family Builders District Coordinator who will then check additional sources for an updated address. If a new address is located, the provider must contact the family within 48 business hours of receiving the new address.

Families who agree to participate are assessed to determine their strengths, resources, needs, concerns, and stressors. Family Builders providers are trained to conduct family-centered assessments that include conducting face-to-face interviews with family members and administering two written surveys. The results of the family-centered assessments are used to develop goals and tasks that form the basis of customized service plans. Families then receive services designed to meet the goals stated in the service plan.

Families Served in FY2002

During FY2002, the Family Builders Program received 6,914 referrals on 6,526 families. Approximately 390 families (6%) received two or more referrals to the program during the year. Family Builders providers contacted 85 percent (5,554 families out of 6,526) of the families referred, 2,655 agreed to be assessed, and 2,535 signed service plans. For the families who could not be contacted or choose not to participate in the program, their cases were closed and documented in the CPS CHILDS and Family Builders databases.

Demographics

Approximately 60 percent of the caregivers referred were white, 25 percent Hispanic or White/Hispanic, 6 percent African American, and 4 percent Native American. The average primary caregiver was female, white, unemployed, 35 years old, and either divorced, separated, or never married. The average secondary caregiver was male, white, married, employed full-time, a high school graduate, and 38 years old.

The average number of children per family was 2.4. Most children were under 12 years old and slightly less than half of the children were white while 36 percent were Hispanic or White/Hispanic.

The majority of families had a monthly income of less than $1,500, with the average being $1,055. Sources of income include wages, public assistance, child support, and unemployment.

Assessments

Of the families who were referred and contacted during the year, 2,655 families (48%) were assessed with the Family Risk Rating Scale and 1,106 families (20%) completed a Brief Family Assessment Scale survey at entry into the program.

The average risk scores on the assessments were low indicating low levels of risk for child abuse and/or neglect. This finding indicates that DES is meeting its goal of referring only families with a potential or low risk for child abuse and/or neglect.

Service Plans

Forty six percent (2,535) of the 5,554 families referred and contacted signed service plans in FY2002—an increase from the 42 percent who signed service plans in FY2001. Of the 2,535 service plans signed during FY2002, 1,176 were completed (46%), 654 (26%) were ongoing at the end of the fiscal year, and 705 (28%) were not completed.

Of the 2,535 families who signed service plans, 2,531 (99%) went on to receive some program services. After case management, which is provided for every family receiving services, the most common services provided were basic needs (e.g., shelter, financial assistance, food, clothing, utilities assistance), counseling, behavioral health services, and parenting training.

Ten providers contracted with DES to provide services during the fiscal year in three CPS districts of the state: Maricopa County (District I), Pima County (District II), and Coconino County (District III). Services were also provided in District VI (southeastern Arizona) for six months (i.e., through 12/31/01).

Impacts of the Family Builders Program

The families who sign and complete service plans show statistically significant decreases in their risk for child abuse and/or neglect. In addition, less than one percent of the families who signed a service plan in FY2002 received a subsequent, substantiated report within 6 months of case closure and only 1.5 percent received a subsequent, substantiated CPS report while their cases were ongoing.

Program Implementation Issues

Implementing the Family Builders Program efficiently and effectively requires three major components: sufficient resources, family participation, and high-quality data management.

Resources and Service Provisions

Because the Family Builders Program received less funding in FY2002 than in previous years (due to a statewide budget deficit), it was necessary for DES to reduce expenses while, at the same time, ensuring the safety of the children. First, it was determined that CPS investigators could absorb the abuse and neglect reports in certain areas of the state that would otherwise be referred to Family Builders. Therefore, the program was discontinued in District VI (southeastern Arizona) and limited to just the Flagstaff and Prescott areas in District III. In addition, referrals to the program were reduced by 19 percent statewide, with these cases being handled by CPS investigators. Second, DES personnel, working with program providers, decided that some program procedures and services could be streamlined or eliminated without harming the integrity of the program. As a result, expenditures were reduced by approximately 25 percent, but some program providers found it necessary to layoff Family Builders workers and all providers had to become more creative with fewer resources to address the needs of the families they serve.

Family Participation

Engaging families to participate in parenting programs such as Family Builders is a difficult task for several reasons. First, many families who are approached by Family Builders providers feel that they do not need services (i.e., the CPS report was unjustified). A CPS report does not mean, in fact, that there is a problem. Second, because the program is voluntary, families often simply refuse services. These two reasons alone account for nearly half of the families referred. Third, approximately 15 to 20 percent of the families referred cannot be contacted due to receiving incorrect addresses or the families moving out of the Family Builders service areas.

Of the families who were *referred and contacted* during FY2002, 46 percent signed service plans. This compares favorably to the rate of CPS recruitment for families with substantiated and unsubstantiated child abuse reports--approximately 31 percent of these families agree to participate in program services (Arizona Department of Economic Security, 2001).

The providers continue to develop creative solutions such as sending brochures and letters encouraging participation in the program and initiating innovative approaches to securing the needed services for the families.

Several providers throughout the state cite the lack of resources as barriers to program effectiveness. Some of the resources in short supply include mental health care facilities and professionals, affordable housing, and public transportation. In addition, many caregivers have difficulty securing employment that will support the family financially, making it difficult to address the families' underlying problems.

Data Management Issues

Due to challenges in training contractor staff on database procedures and flaws inherent in the design of the database, problems with data accuracy and completeness continue to occur. DES is addressing these issues through improved monitoring and database training, development of a database manual, and formation of a database project team that will conduct a system-wide review of the database to address flaws and database errors.

Program Administration and Costs

Two Family Builders specialists, located in the DES Central Office, provide oversight to the Family Builders Program. These specialists conduct site visits every four months to monitor each Family Builders Program site, provide technical assistance to providers, process monthly provider billings, and ensure that the requirements of the program evaluation are met. The specialists also provide ongoing training on all aspects of the program to new and existing Family Builders employees.

The Community Partnership meetings for Family Builders providers occur on a quarterly basis. Members include providers, relevant DES staff, a child advocacy organization, and representatives from the Office of the Auditor General. These meetings provide a forum to address operative and policy issues in a proactive manner. They further provide an opportunity for DES and the providers to share information and knowledge about service delivery.

The average costs for the Family Builders program per family are as follows:

Referral:	$ 198.80
Assessment:	$ 204.66
Service Plan:	$ 1,413.29
Closure:	$ 355.91

Summary

In FY2002 the Family Builders Program continued to assist families in need. Approximately 2,500 families signed service plans and were assisted in addressing their immediate needs while building upon their strengths for long-term growth and stability. As a result, these families showed small, but statistically significant reductions in their levels of risk for child abuse and/or neglect as measured by two risk assessment instruments. The families who sign service plans also receive fewer subsequent, substantiated CPS reports than do families who are referred, but do not participate in the program.

The program experienced a 22.5 percent budget cut in FY2002 which led to fewer families being referred to the program, and, subsequently, being served by the program. In addition, it was necessary to eliminate some program services not legislatively mandated and a few providers laid off Family Builders workers.

The program's performance in participant recruitment and retention continues to compare favorably with similar programs. Approximately 48 percent of the families contacted agree to participate and 46 percent completed the program.

Introduction

Background

The safety of children is a high priority goal for the Arizona Department of Economic Security (DES) and reports of abuse or neglect are investigated through its Division of Children, Youth and Families, Child Protective Services (CPS). In the past, CPS was unable to investigate all the child abuse and neglect reports it received, particularly during the late 1990s when a sharp increase occurred in the number of reports received. In FY1997, for example, CPS was able to investigate only 84 percent of reports. While CPS continued to investigate reports indicating a moderate to high risk for abuse, reports indicating low or potential risk often went uninvestigated due resource constraints. DES realized that if the families who were having some difficulties, but had not reached the level of risk that would guarantee an investigation, did not get help, they would be subsequently reported with more serious allegations with greater risk to the children.

Because of this situation, DES identified the need for an alternative, or differential, system that includes at least two categories of initial response to allegations of child abuse and neglect. The first category is the traditional "investigative" approach that addresses serious safety issues that could lead to severance and/or criminal charges. The second category is an "assessment" approach that is directed at families who could be stabilized if their needs are met, thereby enabling them to better care for their children. Under this system, substantiation as the gateway to services is greatly diminished and the level of need stands as the criteria for opening the case (Schene, 2001).

According to Schene (2001), there are many potential benefits of a differential response system including:

- The most serious cases will be readily apparent and immediate action will be facilitated.
- More services and supports will be available to vulnerable children and their families, and they will work together more effectively.
- Community responsibility for the protection of children will increase with both formal and informal resources playing a stronger role in the lives of vulnerable children.
- Parents will be more motivated to change the behaviors that put their children at continued risk of abuse or neglect.

Support for differential response systems has grown in the professional community, and as of early 2001, more than 12 states, including Florida, Michigan, Virginia, and Missouri, had initiated such systems (Schene, 2001).

The Arizona differential response system, the Family Builders Program, was authorized by the Legislature (HB 2256) in 1997 as a two-year pilot program and was implemented by DES in January 1998. During this two-year pilot phase, the program served nearly 4,600 families in Maricopa and Pima counties and received over $8 million in funding from the Legislature.

During Fiscal Year 1999-2000 (FY2000), the program was reauthorized for 10 years by the Arizona Legislature through Senate Bill 1136 [see §8-815 (Title 8, Chapter 10, Article 1) of the Arizona Revised Statutes] and received nearly $8 million in funding. In FY2001 the program received $7,999,000 from the legislature and was expanded to include Yavapai, Coconino, Navajo, and Apache counties in northern Arizona and Graham, Greenlee, Cochise, and Santa Cruz counties in southeastern Arizona.

In Fiscal Year 2001-2002 (FY2002), the program experienced a $1.8 million (22.5%) decrease in funding due to a statewide budget deficit. In response, DES developed a reduction plan that had as its main goal the continuing safety of the children. It was determined that CPS investigators could absorb the abuse and neglect reports in certain areas of the state that would otherwise be referred to the program. As a result, the program was discontinued in District VI (southeastern Arizona) and reduced to only the Flagstaff and Prescott areas in District III. Statewide, referrals to the program were reduced by 19 percent, with these cases being handled by CPS investigators. DES personnel, working with program providers, further reduced expenses by approximately 25 percent. Moreover, despite these efforts, it was necessary for DES to identify an additional $1.2 million to keep the program functioning.

Program Overview

The Family Builders Program is designed to serve families with a potential or low risk for child abuse and/or neglect through a variety of services offered by government agencies and private social service and faith-based organizations. This collaborative approach underscores the primary philosophy of the program: *Families that are referred to the program present a diverse range of intervention needs that require flexible responses from the service providers.* Providers must strive to make services appropriate, accessible, and culturally sensitive by customizing services to match each family's strengths and needs.

Other important principles guiding the program include:

- Family members are treated as partners in identifying and developing a service plan that builds on family strengths and resources while addressing their needs, concerns, and stressors.
- Family participation is voluntary.
- Families are assisted in establishing reasonable goals using community-based support networks to reduce their reliance on formal support systems such as welfare programs.
- The Family Builders case is closed when families' goals are achieved.

Child safety is the highest priority throughout the Family Builders Program process and is ensured through two primary methods: 1) a two-stage triage process that occurs during the referral phase and, 2) service providers refer cases back to CPS when signs of abuse or neglect are evident.

Child abuse and/or neglect reports received on the CPS hotline are prioritized via a triage system into one of four categories of risk: potential, low, moderate, or high.

Only those reports that are classified as potential or low risk are considered for the program. Trained CPS Family Builders District Coordinators further screen the potential and low risk reports to determine if the families are eligible and appropriate for Family Builders. The following characteristics automatically disqualify a report:

- death of a child due to physical abuse or neglect,
- physical or sexual abuse,
- untreated medical problems causing pain or debilitation,
- child is ward of the state,
- investigation was court-ordered,
- immediate out-of-home placement for child is required,
- child is currently placed out of the home,
- parent is unwed minor,
- parent is not protecting child from abuse by person not living in the home,
- a CPS case is already open, or
- prior dependency case or termination of parental rights.

Once a report has been screened for the above characteristics, the coordinators also take into consideration the following factors before referring a report to Family Builders:

- number, severity, and length of time between prior reports and allegations,
- quality of previous involvement with Family Builders (i.e., refused services or did not pursue goals),
- age of the child: reports are more likely to be sent to CPS for investigation if the child is not of school age, and
- current allegation shows signs of increased risk when compared with priors.

When a report that is referred to a Family Builders' provider was a close call between Family Builders and a CPS investigation, the rationale used to support this choice is documented in CHILDS by the coordinators.

When a report is referred to the providers they are required to make three attempts to locate the family within a five-day period (excluding weekends and holidays). The first two attempts must be made within 48 business hours. If the provider is unable to contact the family after three personal attempts, a letter explaining the program and offering services is mailed within 48 business hours from the last personal attempt. If no response is received within seven days from the date the letter was mailed, the report is referred back to the CPS Family Builders District Coordinator who determines if the report should be investigated by CPS.

If the provider is unable to contact the family due to an incorrect address, the provider must immediately advise the Family Builders District Coordinator who will check additional sources for an updated address. If a new address is located, the provider must contact the family within 48 business hours of receiving the new address.

Families who agree to participate are assessed to determine their strengths, resources, needs, concerns, and stressors. Family Builders providers are trained to conduct family centered assessments that include conducting face-to-face interviews with family members and administering two written surveys. The results of the family centered assessments are used to develop goals and tasks that form the basis of

customized service plans. Families then receive services designed to meet the goals stated in the service plan.

DES contracts with private social service and faith-based organizations to implement the program in three DES districts: District I (Maricopa County); District II (Pima County); and District III (Coconino and Yavapai counties). DES also contracted with providers in District VI (Cochise, Graham, Greenlee, and Santa Cruz counties) for the first half of the fiscal year—funding was cut for District VI on January 1, 2002.

The primary goal of the program is to enhance parents' abilities to create safe, stable, and nurturing home environments that promote the safety of all family members and healthy child development. The program objectives are to: 1) increase the safety of children in their family homes, and 2) increase parenting competence or effectiveness.

Program Data Collection Methods

The primary data collection methods for the program include an Access 97 database designed specifically for the program and two surveys that measure the level of risk for child abuse and/or neglect. The program providers are responsible for collecting demographic, service, and cost information on their participants and entering it into the database. They are also responsible for the completion of the risk assessment surveys and entering the scores into the database. The providers submit their monthly data to DES where it is downloaded into a central database for review and monitoring. DES has faced unique challenges with the database including design flaws and difficulties in training contractor staff on proper data entry methods and maintaining compliance with database requirements. DES is addressing these challenges through improved monitoring and database training techniques, the development of a database manual, and the formation of a database project team that will conduct a system-wide review of the database to correct flaws and data entry errors.

Report Purpose and Overview

This is the fifth annual report for the Family Builders Program. The primary purpose of the report is to present information on program impacts and issues and on families referred to and served by the program during the year. This information is essential to understanding the usefulness of the program and in guiding its future development and applications.

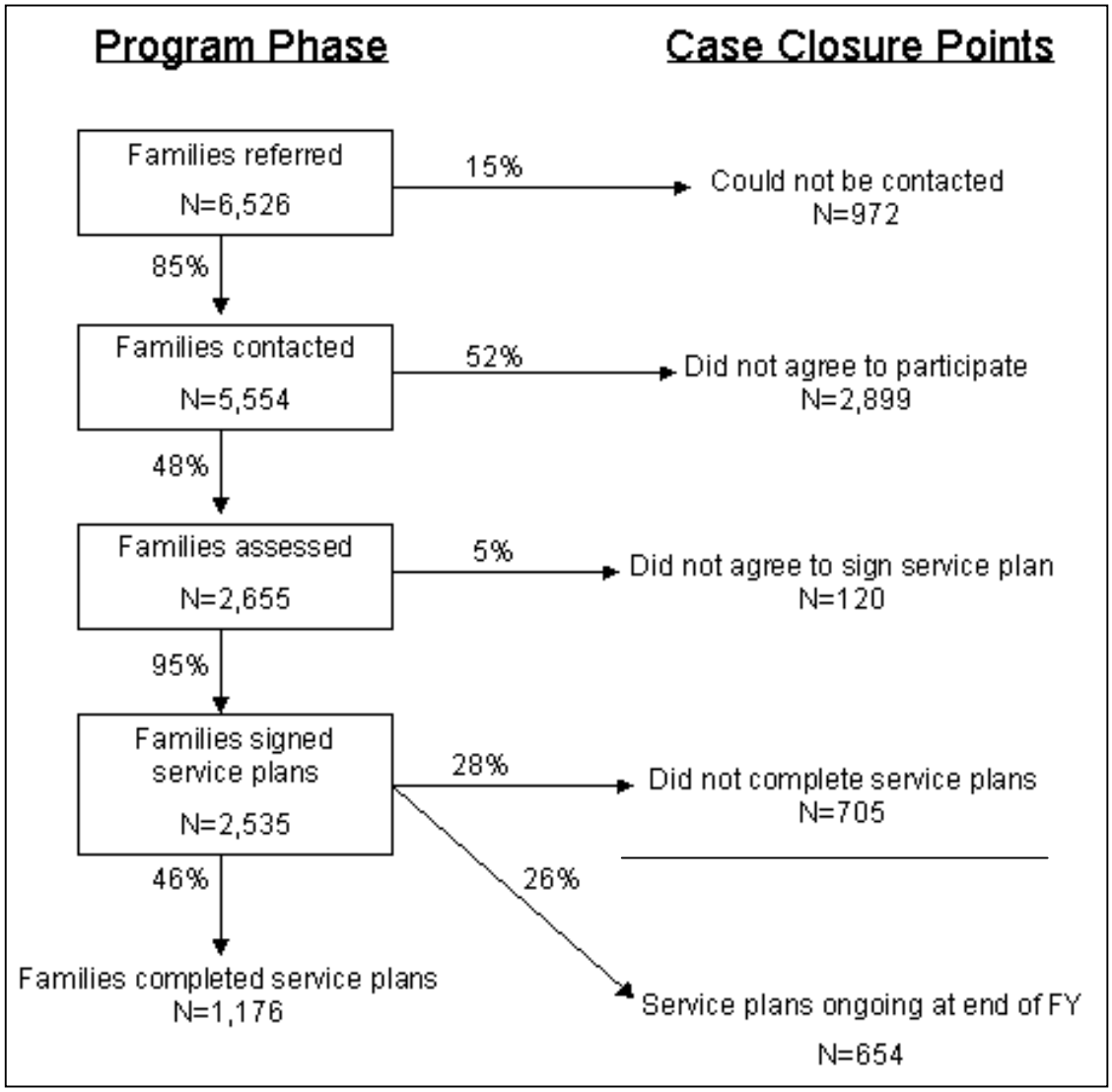
The statistics cited in this report were derived from data contained in the Family Builders Program database and the CPS CHILDS database. The Family Builders database is a data repository for information related to all phases of the program: referrals, assessments, service plans, service provisions, and case closures. The CHILDS database contains information regarding subsequent, substantiated reports filed on families who participated in the program and on families who were referred, but declined services.

The remainder of this report is organized into four major sections. The first section contains information about the families referred to and served by the program during the fiscal year. The second and third sections provide information about the impacts of the program, the extent to which DES is meeting its stated program objectives and goals, and the challenges DES faces in implementing the Family Builders Program. Finally, the fourth section contains information about program administration and costs.

Families Served by the Family Builders Program

Families are served by the Family Builders Program through referral, assessment, and service plan processes that occur in phases. At each phase, families decide whether or not to pursue their involvement with the program, thereby providing several case closure points for the program. This is illustrated in Figure 1 using data from families referred in FY2002. As can be seen, most families who choose not to participate do so upon initial contact. For example, in FY2002, 52 percent of the families contacted did not agree to participate. However, when families do decide to participate, they are more likely than not to complete the program (i.e., achieve the goals they identify in the service plans). In FY2002, 46 percent of the service plan signers completed the goals they identified for themselves during the year, 26 percent had cases ongoing at the end of the fiscal year, and 28 percent did not complete their service plans. Since the inception of the program, 52 percent of the families who signed service plans completed the program.

Figure 1. Family Builders Program Flow Chart – FY2002

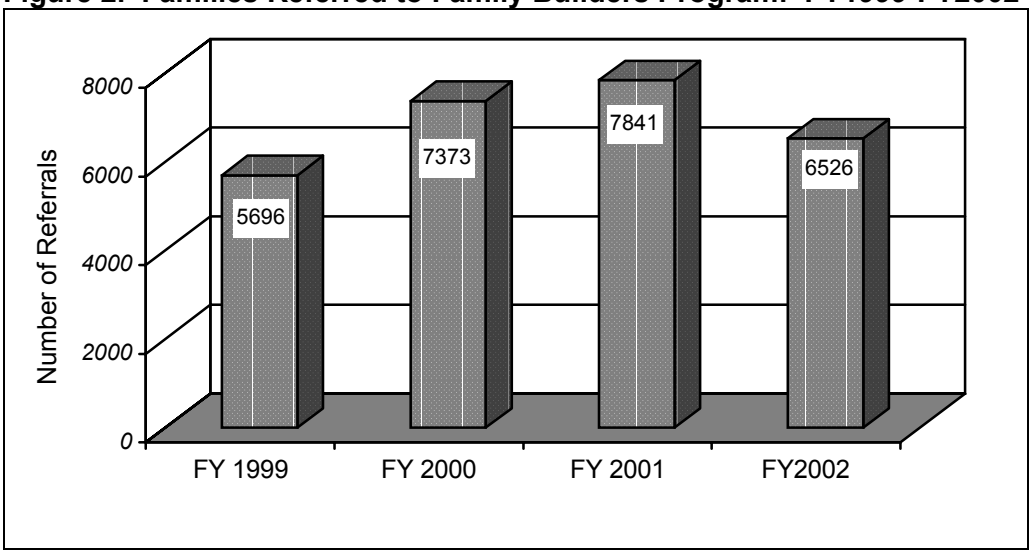


In the remainder of this section detailed information about the numbers of referrals received, assessments conducted, service plans signed and completed, and services provided in FY2002 is presented. In addition, demographic profiles of the primary and secondary caregivers and their children are provided, including information about the levels of risk families present with for child abuse and/or neglect.

Referrals

In FY 2002, the program received 6,914 referrals on 6,526 families. Approximately 390 families received two or more referrals during the year. As reflected in Figure 2, the number of families referred to the program increased through FY2001 and then declined by 17 percent in FY2002. This decrease can be attributed to budget cuts stemming from a statewide budget deficit.

Figure 2. Families Referred to Family Builders Program: FY1999-FY2002



Demographics of Families Referred During FY2002

Family Builders providers collect demographic information about the caregivers and children of the families referred to the program. The tables and figures presented in the remainder of this section include information collected on the families referred during FY2002. Information about age, gender, and ethnicity is collected on most of the caregivers and their children. Information about the caregivers' employment, education, marital status, and income is collected to a lesser extent, with only 25 to 50 percent of the families having this information entered into the database. The number of families for which data were collected is reported for each variable.

Primary and Secondary Caregivers

Primary caregivers are the adult members of the family who are directly responsible for childcare. Secondary caregivers, on the other hand, are adult members of the family who play a lesser role in childcare, but who provide support to the primary caregiver.

Tables 1 and 2 contain information about primary and secondary caregivers. Most of the primary caregivers were white females who completed high school. Most were married and unemployed at the time of the referral. Their average age was 35. The majority of secondary caregivers were white males who were married, employed full-time, and high school graduates. Their average age at the time of referral was 38.

Table 1. Characteristics of Primary and Secondary Caregivers Referred in FY2002

Demographic	Primary Caregiver		Secondary Caregiver	
	Number	Percent	Number	Percent
Gender				
Female	5935	91.6%	507	15.6%
Male	545	8.4%	2752	84.4%
Totals[a]:	6480	100.0%	3259	100%
Ethnicity				
White	3176	59.2%	1598	61.2%
White/Hispanic	559	10.4%	256	9.8%
Hispanic	953	17.8%	481	18.4%
African American	320	6%	120	4.6%
Native American	236	4.4%	91	3.5%
Asian/Pacific Islander	50	0.9%	26	1.0%
Mixed	40	0.7%	20	0.8%
Other	33	0.6%	17	0.7%
Totals[a]:	5367	100.0%	2609	100.0%
Age				
<20	138	2.6%	25	1.1%
20-25	776	14.5%	229	10%
26-35	2124	39.7%	786	34.3%
36-50	2092	39.1%	1020	44.5%
>50	223	4.2%	232	10.1%
Totals[a]:	5353	100.0%	2292	100.0%
Relationship to Children				
Parent	5590	96.2%	2200	69.8%
Grandparent	147	2.4%	247	7.8%
Other Relative	54	0.9%	65	2.1%
Other	35	0.6%	638	20.3%
Totals[a]:	6226	100.0%	3150	100.0%

[a]Totals vary depending on the number of caregivers in each category for which information was collected (i.e., unknown and missing data are not reported in this table).

Table 2. Employment, Education, and Marital Status of Primary and Secondary Caregivers Referred in FY2002

Demographic	Primary Caregiver		Secondary Caregiver	
	Number	Percent	Number	Percent
Employment Status				
Full-time	1213	39.1%	913	63%
Part-time	326	10.5%	129	8.9%
Unemployed	1560	50.3%	407	28.1%
Totals[a]:	3394	100%	1449	100%
Education Level Completed				
Less than High School	862	33%	338	28.2%
High school degree/GED	782	29.9%	431	36%
Some College	560	21.4%	195	16.3%
Vocational/technical	121	4.6%	48	4%
College Degree	287	11%	186	15.5%
Totals[a]:	3881	100%	1198	100%
Marital Status				
Married	1425	39.6%	1318	65.9%
Separated	441	12.3%	96	4.8%
Divorced	875	24.3%	269	13.5%
Widowed	95	2.6%	18	0.9%
Never married	760	21.1%	299	15%
Totals[a]:	3596	100%	2000	100%

[a]Totals vary depending on the number of caregivers in each category for which information was collected (i.e., unknown and missing data are not reported in this table).

The Children

The majority of families referred to the program have less than 3 children, with the average being 2.4 children per family. However, approximately 3 percent of the families have more than 5 children with a few families having 11 or more children.

Figures 3 and 4 contain information about the age and ethnicity of the children. As can be seen, most children were 6 to 11 years old at the time of referral and white (non-Hispanic) children represented nearly 50 percent of the children in the program.

Figure 3. Percentage of Children by Age

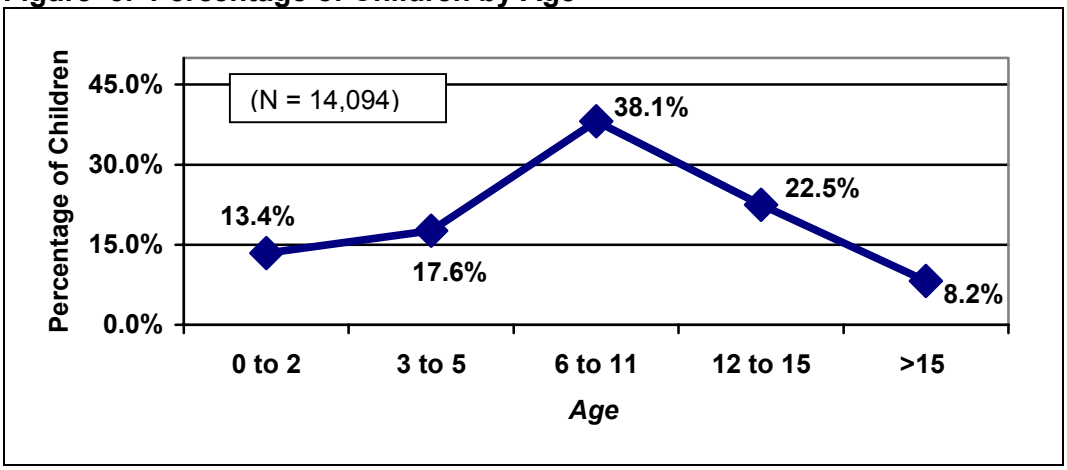
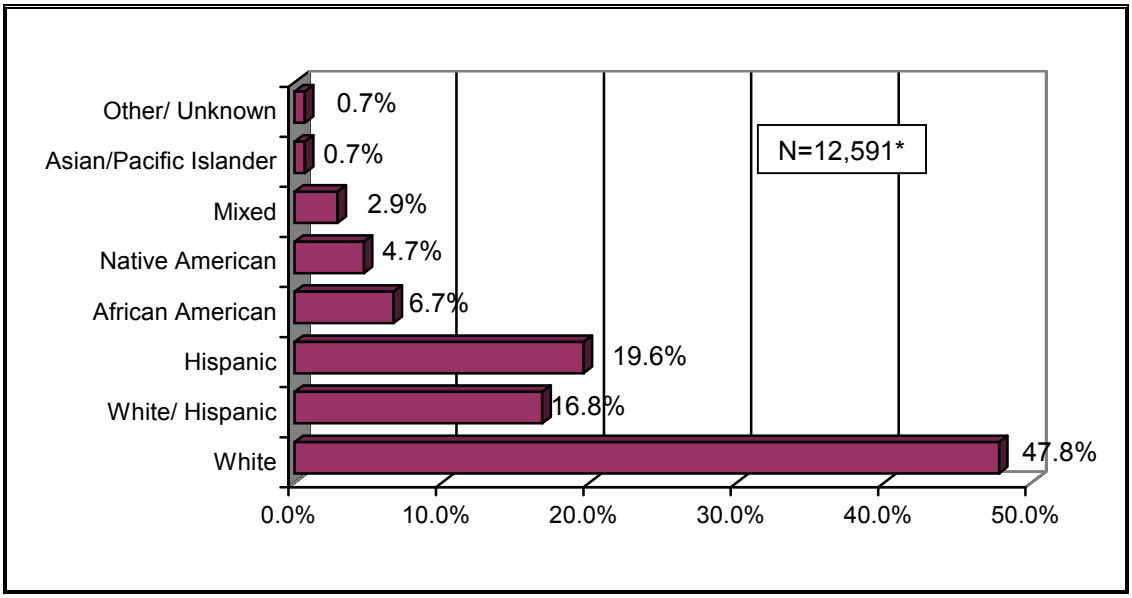


Figure 4. Ethnicity of Children in Families Referred to Family Builders Program in FY2002

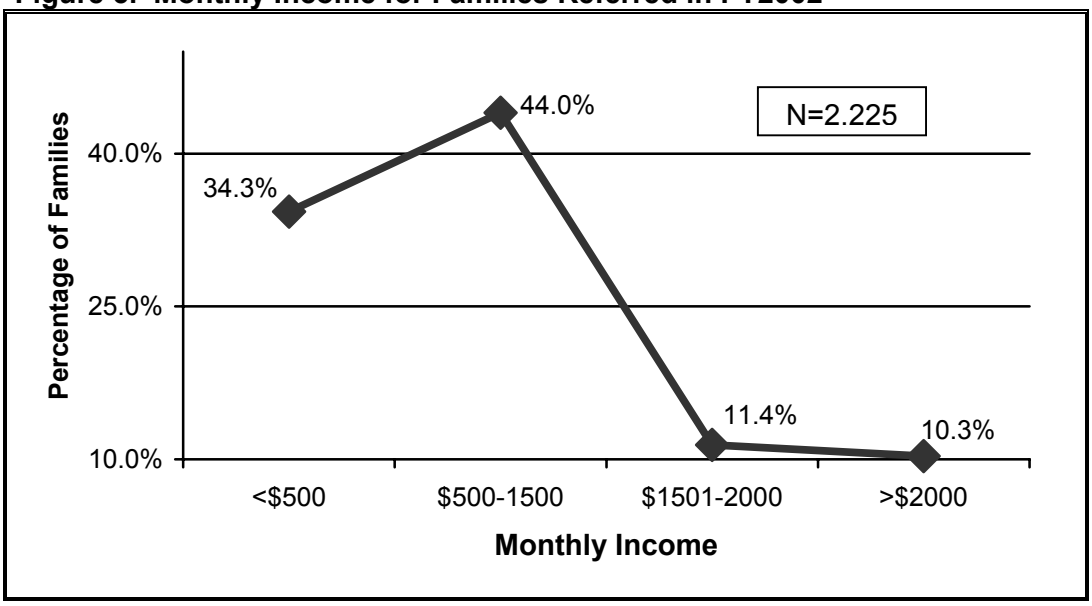


*N differs from Figure 3 due to discrepancies in data collection (i.e., more information is collected about age than ethnicity).

Monthly Income

As reported at the time of referral, most families (57%) received less than $1,500 in income per month (see Figure 5), with the average being $1,055. The primary sources of income included wages, public assistance, child support, and unemployment.

Figure 5. Monthly Income for Families Referred in FY2002



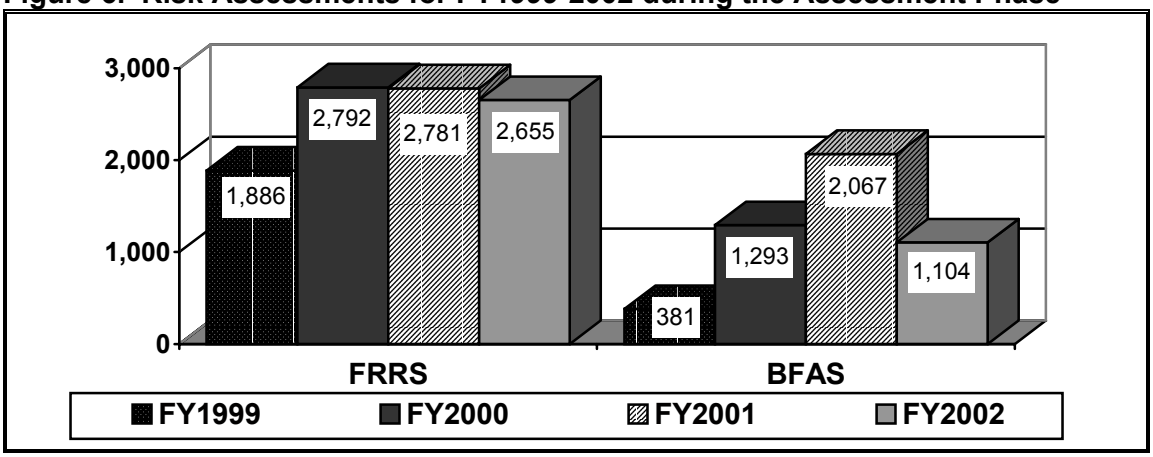
Assessments

Families who agree to participate in the program must complete an assessment phase prior to developing and signing a service plan. Family Builders providers are trained to conduct family-centered assessments during home visits using face-to-face interviews with family members. The assessments address several factors associated with child abuse and neglect including family support systems and strengths, substance abuse, stressors, parenting skills, and economic needs. The results of the assessments are used to develop goals and tasks that form the basis of customized service plans.

The providers are also responsible for administering two written surveys that quantify the level of risk for child abuse and neglect: the Family Risk Rating Scales risk assessment instrument and the Brief Family Assessment Scales. The providers complete the Family Risk Rating Scale based on their interviews with the families, while the Brief Family Assessment Scale is a self-report instrument completed by the families. Providers completed 2,655 Family Risk Rating Scale assessments and 1,104 families completed a Brief Family Assessment Scales during the assessment phase.

During FY2002, DES discontinued use of the Brief Family Assessment Scale per the developers who withdrew it from the public domain. This accounts for the large decrease in the number of completed Brief Family Assessment Scales during FY2002 (see Figure 6). DES piloted a shorter 16-item family functioning survey that is based on the F-COPES (Family Crisis Oriented Personal Evaluation Scales), developed by McCubbin, Olson, and Larsen (McCubbin, Thompson, & McCubbin, 1996). DES will decide in January 2003 if this instrument will be used to replace the Brief Family Assessment Scales.

Figure 6. Risk Assessments for FY1999-2002 during the Assessment Phase



The two risk assessments instruments were also administered to families when their cases are closed to track changes in risk scores while in the program. A statistical analysis of the changes in scores is presented in the *Impacts of the Family Builders Program* section below.

Average Scores

The Family Risk Rating Scale is designed to measure parental characteristics and family conditions that are believed to be predictors of child abuse and/or neglect and translate them into risk scores. The Brief Family Assessment Scales is a self-assessment instrument that family members complete to help them identify their strengths and weaknesses by rating themselves on as many as 76 items. The results are also translated into risk scores. The Brief Family Assessment Scales has a lower completion rate than the Family Risk Rating Scale in part because people who are illiterate, semi-literate, or do not read or speak English, cannot complete it.

Risk scores on the Family Risk Rating Scale can range from a low of 1 to a high of 6 on the parent-centered, economic-centered, and child-centered scales associated with this assessment. A higher score indicates greater risk. The average scores for the 2,655 families assessed were 1.49, 1.43, and 1.53 on the parent-centered scale, child-centered scale, and economic-centered scale, respectively. These scores indicate low levels of risk for child abuse and/or neglect, and suggest that DES is referring only families with a potential- or low-risk for child abuse.

The Brief Family Assessment Scales includes seven scales: personal stress, family support, economic stress, aggressive behavior, child problems, drug use, and alcohol use. The average scores on these scales for the 1,104 families who completed a Brief Family Assessment Scales ranged from 8.01 on the drug use scale to 37.02 on the economic stress scale. The scores on each scale can range from 0 (low risk) to 100 (high risk).

Service Plans

After the families are assessed, the providers and families work together to establish goals and create customized service plans that are designed to build on the families' strengths and resources while addressing their needs, concerns and stressors. The families who sign customized service plans are given the opportunity to receive services that range from counseling to emergency finances and supplies. Families continue to receive services until their goals are achieved (i.e., their service plans are completed) or they no longer desire services.

The number of service plans signed during the year increased steadily from FY1999 through FY2001, but declined slightly in FY2002 to 2,535 (see Table 3). This decrease can be attributed to program budget cuts that resulted in fewer referrals and, therefore, fewer families that could potentially participate in the program.

Although the number of service plans signed decreased in FY2002, the number of service plans completed (i.e., families achieved goals specified in service plans) *increased* by 8 percent, from 1,083 in FY2001 to 1,176 in FY2002 (see Table 3). This also represents an increase in the *percentage* of service plans completed. In FY2002, 46 percent of the services plans signed during the year were completed compared with 41 to 43 percent completed during the previous four fiscal years (see Table 3).

Table 3. Service Plans Signed and Completed During the Year: FY1999-FY2002

Fiscal Year	Service Plans		
	Number signed	Number completed	Percent completed
1999	1481	623	42.1
2000	2433	1041	42.8
2001	2622	1083	41.3
2002	2535	1176	46.4
Totals:	9071	3923	43.2

At the end of the fiscal year, service plans that were signed during the year can either be: 1) completed (achieved goals), 2) not completed (i.e., case was closed prior to achieving goals), or 3) ongoing (i.e., case still open). At the end of FY2002, 26 percent (654) of the signed service plans were ongoing, 28 percent (705) were not completed, and, as mentioned above, 46 percent (1,176) were completed (see Table 4). The percentage of families who did not complete their service plans during the year has increased steadily from 5 percent in FY2000 to 28 percent in FY2002. It is unclear whether this increase is the result of program characteristics or changes in data entry procedures for the program database.

Table 4. Service Plan Status at End of FY2002

Signed Service Plans	Number	Percent
Completed (achieved goals)	1176	46.4%
Not completed (case closed without achieving goals specified in service plan)	705	27.8%
Ongoing	654	25.8%
Totals:	2535	100%

Families who complete their service plans spend more time on average in the program than families who do not complete their service plans (see Table 5).

Table 5. Average Length of Service for Families Who Completed Service Plans vs. Families Who Did Not Complete Service Plans

Signed Service Plans	Length of Service (months)[a]	
	Range	Average
Completed (achieved their goals)	.13-9.93	3.2
Not completed (case closed before service plan completed)	.00-7.86	2.5

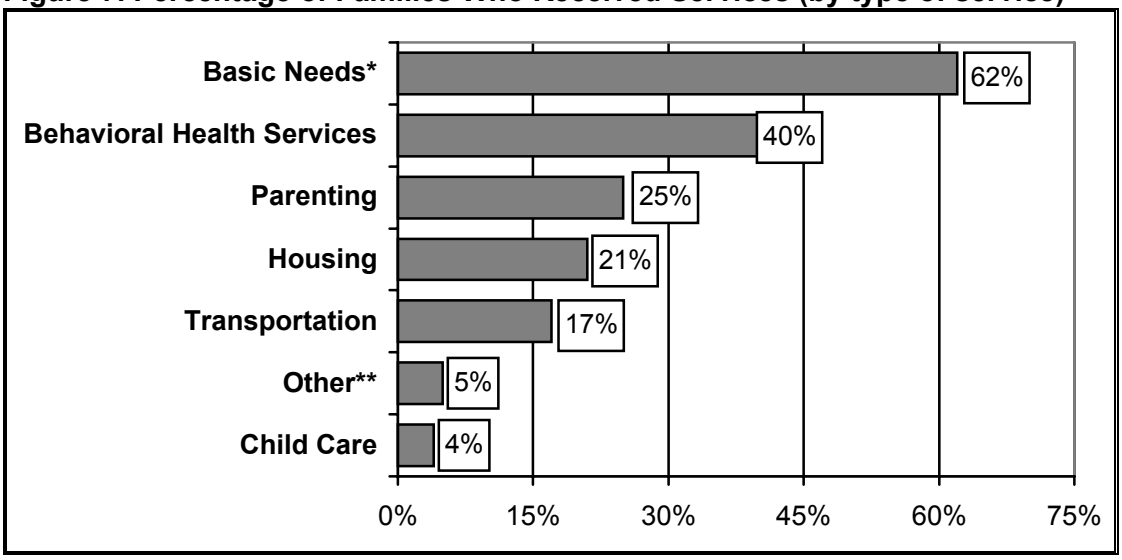
[a] Calculated from date service plan signed until date case closed

Program Services and Service Providers

Of the 2,535 families who signed service plans during the year, 2,531 (99%) went on to receive program services. Family Builders providers conduct case management, which involves arranging for and ensuring access to program services (e.g., counseling and substance abuse treatment), for every family receiving services. As shown in Figure 7, the most common services provided after case management were basic needs and behavioral health services. Basic needs include services that families require to function on a daily basis such as housing searches, food, clothing, utilities assistance, and emergency supplies and funds.

Families usually receive more than one service from the providers. For example, families can receive both counseling and basic needs services. Therefore, many families are included in more than one of the service types listed in Figure 7.

Figure 7. Percentage of Families Who Received Services (by type of service)



* "Basic needs" includes: housing search, emergency financial assistance, emergency supplies, WIC
** "Other" includes: shelter, family preservation, city and county parks and recreation departments activities

DES contracted with ten service providers during FY2002 to cover four Family Builders geographic areas (Districts I, II, III, and IV) until mid-year (1/1/02) and three geographic areas (Districts I, II, and III) for the remainder of the year. These providers and the areas they served are listed in Table 6. See the *Provider Profiles and Success Stories* in the Appendix for specific information about each provider.

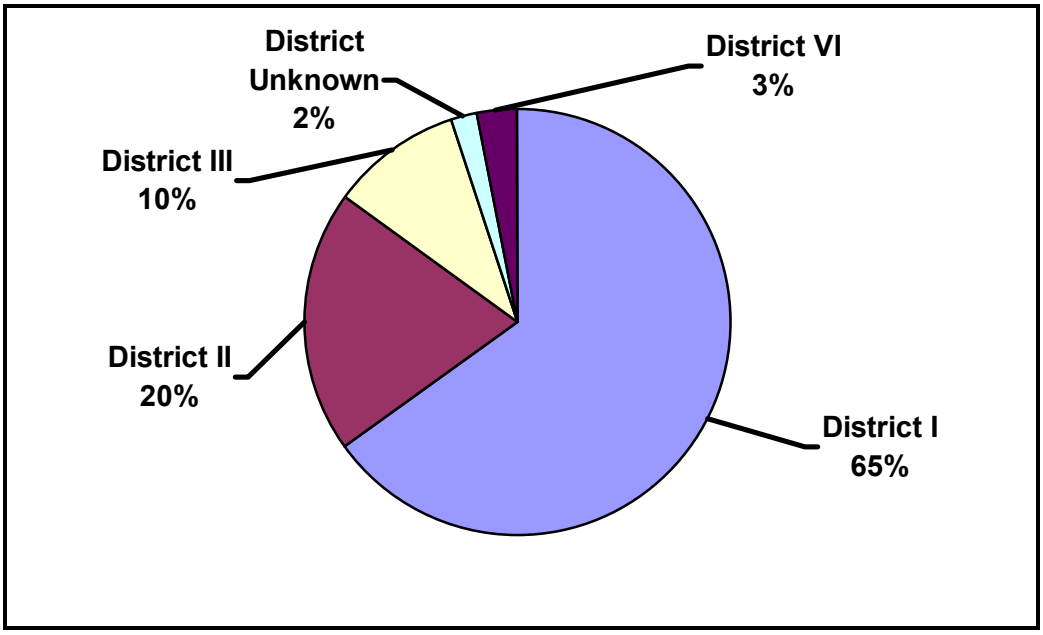
Table 6. Family Builders Providers and the Areas They Serve

Provider	District(s) Served	Counties Served
Arizona Baptist Children's Services	I	Maricopa County
Arizona's Children Association	I	Maricopa County
Arizona Partnership for Children (AzPaC)	I, II, III	Maricopa County, Pima County Coconino County
Black Family and Child Services, Inc.	I	Maricopa County
Child & Family Resources, Inc.	I, VI [a]	Maricopa County
Family Now (CARENOW)	I	Maricopa County
Humanities Resource Builders	I	Maricopa County
Marana Unified School District	II	Pima County
Our Town Family Center	II	Pima County
Westside Social Services	I	Maricopa County

[a] Provided services to District VI until 1/1/02.

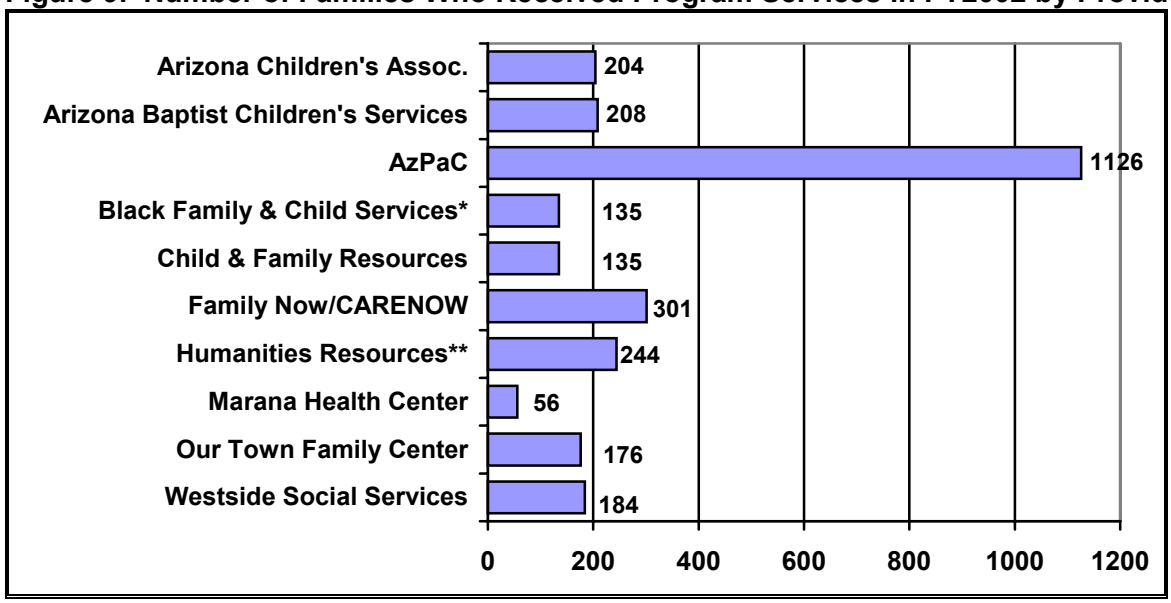
Figure 8 shows the percentage of families who received services within each CPS district. District 1, which encompasses Maricopa County, provides the highest percentage of services, followed by District 2 (Pima County).

Figure 8. Percentage of Families Served by CPS District



AzPaC, which serves Districts I, II, and III, served the most families, while Marana Health Center, which serves a small portion of District II, served the least families. Figure 9 provides a summary of the number of families served by each of the providers.

Figure 9. Number of Families Who Received Program Services in FY2002 by Provider



*Stopped receiving referral in 1/31/02 **Started receiving referrals on 2/1/02

Cases Closed in FY2002

Eighty six percent (5,617 out of 6,526) of the families who were referred to the program had their cases closed during the fiscal year. The most common reasons for case closure were: 1) the family refused services, 2) the service plan was completed, and 3) the providers were unable to contact the family. Table 7 presents a list of closure reasons and the percent each reason represents of the total cases closed during the year.

Table 7. Case Closure Reasons for FY2002

Case Closure Reason	Number of Cases	Percent of Cases Closed
Providers unable to contact families	972	17.3%
Family refused services	2258	40.2%
Family completed service plan	1204[a]	21.4%
Family decided services not needed or did not pursue services	655	11.7%
CPS case opened or case referred back to CPS	138	2.5%
Unknown	85	1.5%
Other[b]	305	5.4%
Total:	5617	100%

[a] Includes 28 families who had no record in the database of signing a service plan
[b]Other includes: children no longer in home, family moved, and subsequent referrals.

Impacts of the Family Builders Program

The intended impacts of the Family Builders Program are to reduce the levels of risk for child abuse and/or neglect and the number of subsequent, substantiated CPS reports. DES has developed the following program objectives and outcome measures that can be used as benchmarks for success in these key areas:

- Of the families who receive services through the program (i.e., sign service plans), 99 percent will show a reduction in risk on at least one risk scale.
- No more than 5 percent of the families who receive program services will receive a subsequent, substantiated CPS report within 6 months of case closure.

In the remainder of this section, the intended impacts are discussed in detail and compared against the specific outcome measures identified by DES. In addition, some success stories written by the providers about families who have participated in the program are included to provide further insight into the impacts of the Family Builders program.

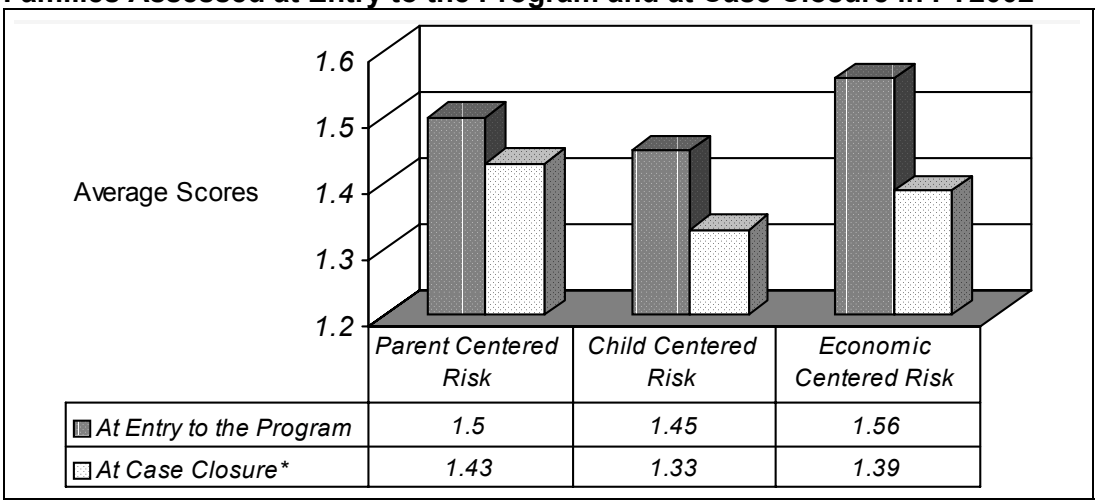
Reduction in Risk for Child Abuse and/or Neglect

Family Builders providers complete comprehensive assessments of the families that include interviews and the administration of two surveys to determine the levels of risk for child abuse and/or neglect. The Family Risk Rating Scale and the Brief Family Assessment Scale surveys are completed at two points in time: at entry into the program (i.e., during assessment phase), and again at case closure (see *Assessments* section for more details on these instruments).

As in previous years, families who completed assessments at entry to the program and again at case closure showed small, but statistically significant reductions in their average risk scores for child abuse and/or neglect (see Figures 10 and 11).

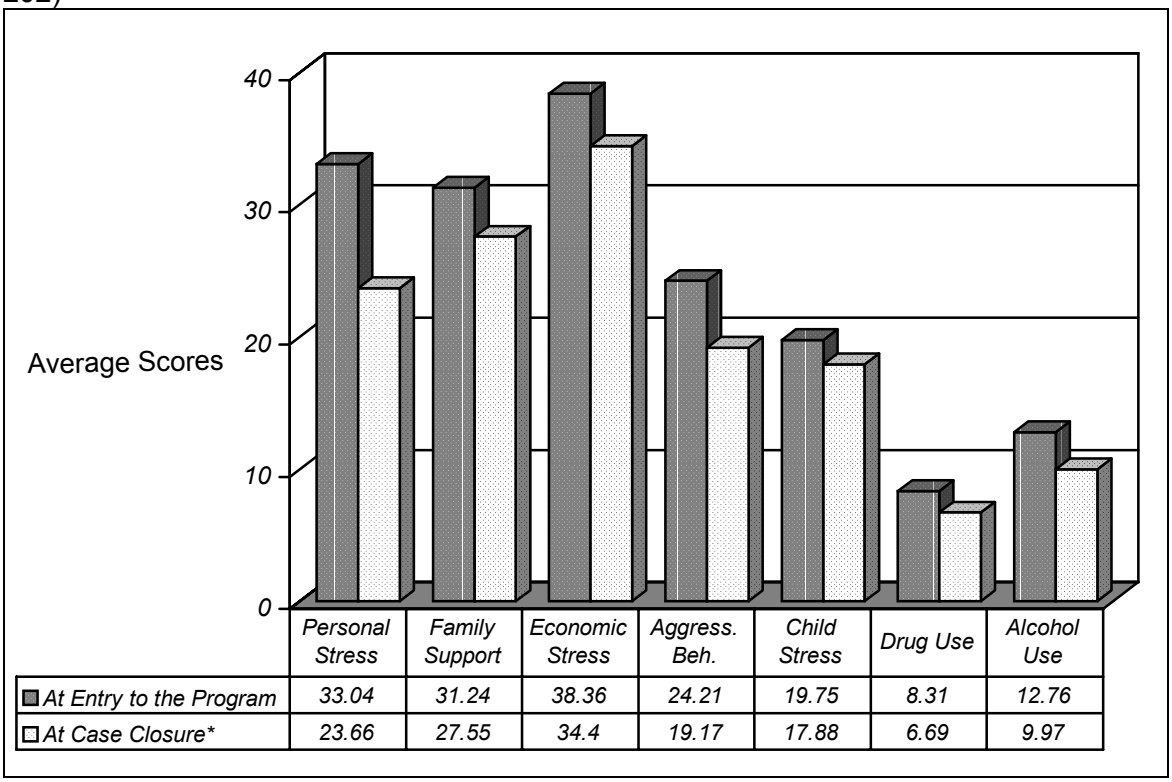
In addition, the program is meeting its objective of 99 percent of the families who sign service plans reducing their risk on at least one scale on the Family Risk Rating Scale.

Figure 10. Changes in Average Scores on the Family Risk Rating Scale for Families Assessed at Entry to the Program and at Case Closure in FY2002



*All decreases in scores statistically significant (paired samples t-test, p =.00)

Figure 11. Changes in Average Scores on Brief Family Assessment Scales for Families Assessed at Entry to the Program and at Case Closure in FY2002 (N = 202)



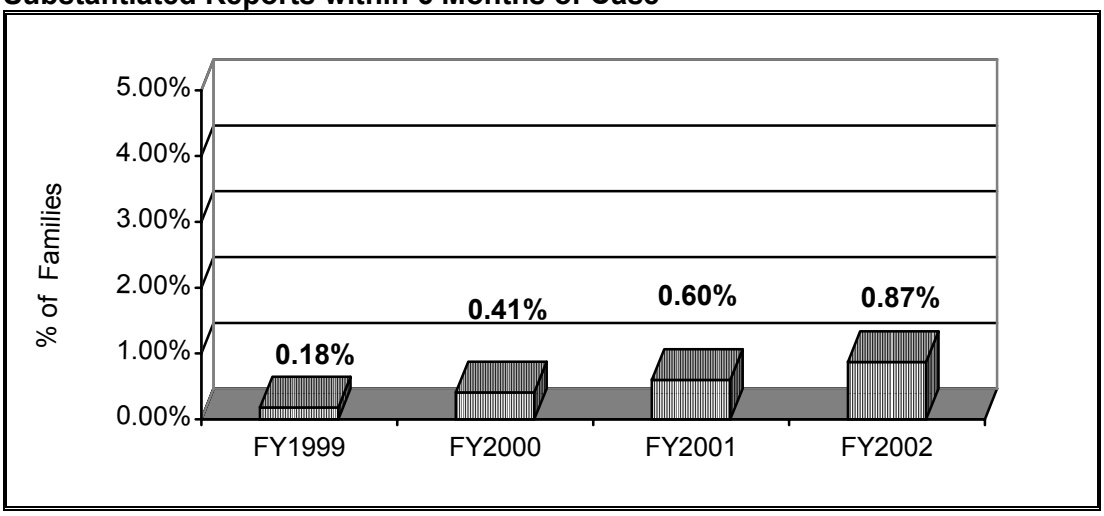
*Decreases in scores are statistically significant (paired samples t-test, p < .05)

Subsequent, Substantiated CPS Reports

Service Plan Signers

Another primary objective of the program is to reduce the number of substantiated CPS reports of child abuse and/or neglect received by service plan signers after they leave the program. The DES benchmark for this outcome is that no more than 5 percent of these families will receive substantiated reports within 6 months of case closure. As shown in Figure 12, the program has consistently exceeded its objective for subsequent, substantiated reports. During each of the past 4 years, less than 1 percent of the families who signed service plans received substantiated CPS reports within 6 months of case closure.

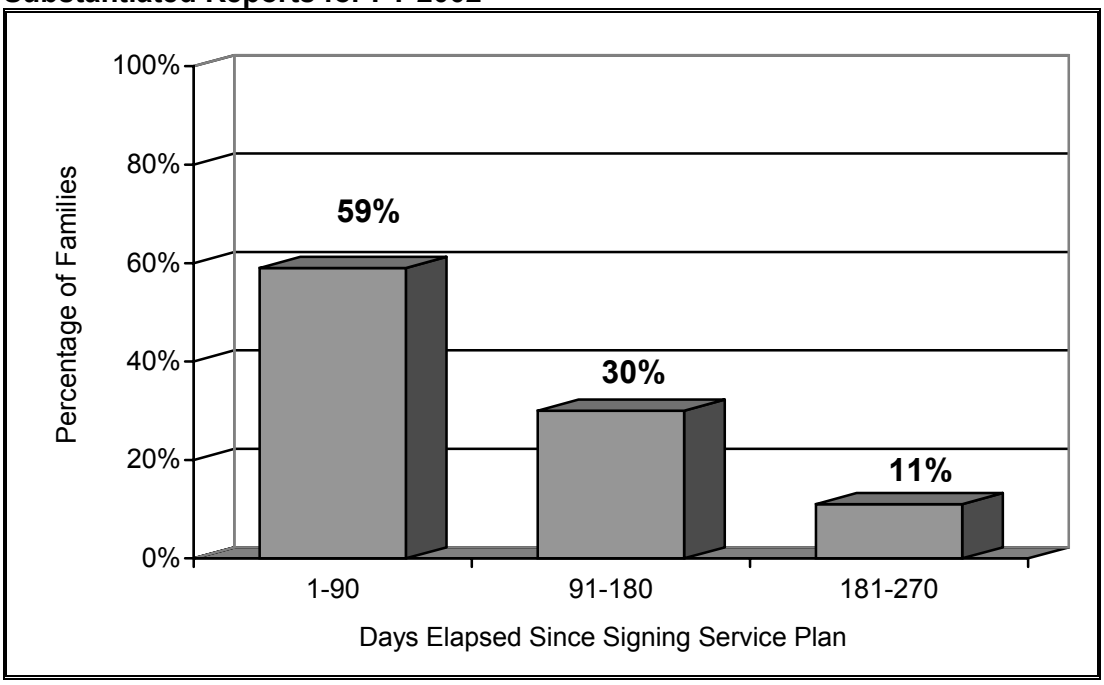
Figure 12. Percentage of Families Who Signed Service Plans with Substantiated Reports within 6 Months of Case



In FY2002, 22 (0.87%) of the 2,535 families who signed service plans received a substantiated report within 6 months of case closure (see Figure 12). Of those substantiated reports, 45 percent were low risk, 14 percent were moderate risk, and 40 percent were high risk.

It is important to note that some families who sign service plans also receive substantiated reports while still participating in the program. In FY2002, 38 (1.5%) of the 2,535 families who signed service plans received substantiated reports while their cases were ongoing. In fact, most of the substantiated reports in FY2002 were received within 1 to 90 days of signing the service plan (regardless of whether or not the case was closed) (see Figure 13). One explanation for this could be that the families are generally under close scrutiny by Family Builders specialists during this period that may lead to the discovery of additional reportable activities.

Figure 13. Days Elapsed Between Signing Service Plans and Receiving Substantiated Reports for FY 2002



Service Plan Signers vs. Non-service Plan Signers

Families who sign service plans tend to have a lower rate of subsequent, substantiated reports than do families who are referred to the program but do not sign service plans. In FY2002, 1.2 percent (48 out of 3,991) of the families who were referred but did not sign a service plan received a subsequent, substantiated report within 6 months of case closure, while only 0.87 percent of the families who signed service plans received a subsequent, substantiated report (see Table 8). Similarly, since the inception of the program, 1.8 percent of the families who did not sign service plans received a substantiated report versus 1.7 percent for families who did sign service plans.

Table 8. Comparison of Substantiated Report Rates for Families Who Signed Service Plans vs. Families Who Did Not Sign Service Plans

Service Plan Status	Percent of Families with Substantiated Reports	
	FY2002	Since Inception
Families who signed service plans	0.87%	1.7%
Families who did not sign service plans	1.2%	1.8%

Success Stories

The impacts of the Family Builders Program can also be seen through the individual stories of the families served. Each year program providers submit stories that highlight some of the positive changes experienced by the families. Four of these stories are presented below. To review additional success stories, please turn to the Provider Profiles and Success Stories in the Appendix.

Arizona's Children Association

A family with four children ranging from 2 to 10 years old was referred to the Family Builders program because the children were outside without proper shoes or clothing asking neighbors for food. While completing the assessment, the family reported that they were behind in their utilities and were struggling with unforeseen medical bills. With the help of Family Builders specialist, the family received financial resources, clothing vouchers, and assistance in setting up a chore chart. They also developed budgeting skills and learned behavioral management techniques.

AzPaC

A single mother with an 11-year-old son was referred to Family Builders because the mother had problems with depression and alcohol that had led to neglecting her son for many years. The mother had committed herself to a psychiatric hospital to deal with her depression and alcohol problems. Her son was not attending school on a regular basis, nor were basic needs being provided in the home. The relative who was caring for the son was attempting to obtain custody of the child. Mom was put on anti-depressants and Family Builders offered help and encouragement when Mom started alcohol treatment. Family Builders provided financial assistance to help the family through the rough spots until she found a new job. Through Family Builders, mother and son also began counseling and with the newfound stability in the home, the son began attending school on a regular basis. Mom has been sober for four months and was able to find affordable housing. Family Builders will stay involved with the family for another two months to continue providing emotional support to further help stabilize the family and reinforce gains also accomplished.

Marana Health Center

A single father, with four children under the age of nine, came into the program because of unsafe living conditions in the house and yard. The family needed assistance in cleaning their yard and repairing their home that was partially burned in a fire. Additionally, the family car was not operating and the father was unable to obtain a job due to transportation problems. Finally, the children were not current in their immunization and dental checkups. Family Builders rented a U-haul trailer and truck for the family to use in cleaning their yard, offered referrals to community organizations that assist in home repair,

assisted the family in repairing their car so that the father could pursue full-time work, and assisted in scheduling and transporting the children to immunization clinics and dental appointments. Currently, the unsafe living conditions in the yard no longer exist, the family home is receiving repairs, the family car is operating, and the children are up-to-date in their immunizations and dental check-ups.

Westside Social Services

Westside Social Services received a referral stating a mother's five children would be outside for long periods of time in the heat of the day, sometimes without shirts or shoes. The mother reported to her case manager that the children played outdoors because the house they live in is very small and has no air conditioning. The mother was also expecting a baby in late October and was under doctor's orders to not work until the baby was born. The case manager helped the mother find affordable housing that was larger and had air conditioning. Westside Social Services also purchased school clothing and needed baby items. A referral was also submitted to Section 8 Housing. The mother and her sons are all doing fine in their new home. She expressed her appreciation for the help she received from Family Builders.

Although these families are considered to be at low or potential risk for child abuse and/or neglect, these stories highlight the serious situations many families are in when referred to Family Builders. Further, it is apparent from these stories that Family Builders plays a vital role in helping to stabilize families who are otherwise struggling to meet even the basic child care responsibilities. Without the intervention of the Family Builders program, the families' abilities to cope would quite likely be further tested potentially leading to more serious instances of child abuse or neglect.

Program Implementation Issues

Implementing the Family Builders Program efficiently and effectively requires three major components: sufficient resources, family participation, and high-quality data management. These three components are discussed briefly in the remainder of this section.

Resources and Service Provisions

As the result of a statewide budget deficit, Family Builders experienced a 22.5 percent decrease in funding in FY2002 that had a large impact on the program. First, it led to a decrease in the number of families the program served during the year. Across the state, there was a 19 percent reduction in referrals and the program was discontinued in District VI on January 1, 2002 and limited to the Prescott and Flagstaff areas of District III.

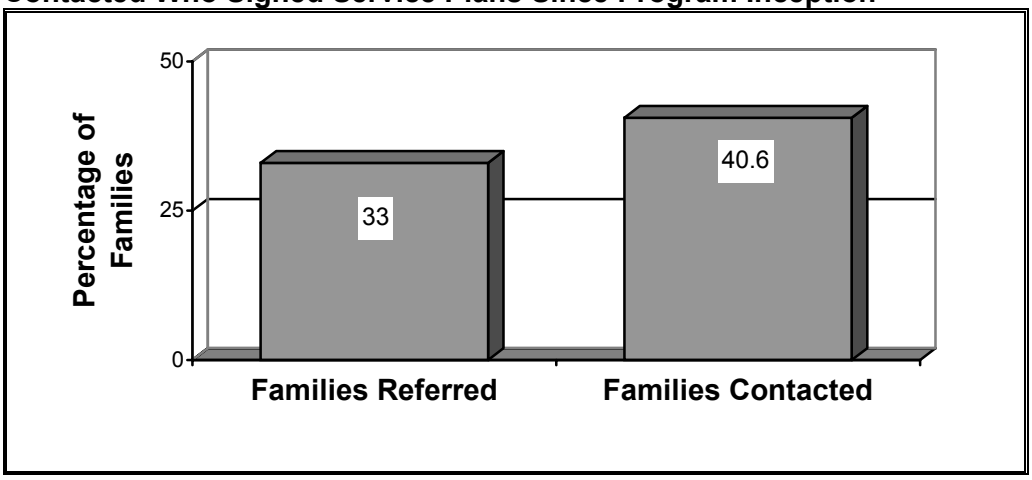
Second, reductions in expenses were necessary. DES staff, working with program providers, determined that some program requirements could be changed that would reduce expenses without affecting the safety of the children. In order to maintain program integrity, budget cuts for services were limited to 25 percent. However, many services still had to be eliminated. Despite these efforts to minimize costs, it was necessary for DES to identify an additional $1.2 million to keep the program functioning. In addition, some program providers found it necessary to layoff Family Builders workers and all had to become more creative with fewer resources to address the needs of the families they serve.

Family Participation

Engaging families to participate in parenting programs such as Family Builders is a difficult task for several reasons. First, many families who are approached by Family Builders providers feel that they do not need services (i.e., the CPS report was unjustified), and, in fact, a CPS report does not always mean that there is a problem. Second, because the program is voluntary, families often simply refuse services. These two reasons alone account for the non-provision of services to nearly half of the families referred. Third, approximately 15 to 20 percent of the families referred cannot be contacted due to incorrect addresses or the families moving out of the Family Builders service areas.

Since the inception of the program, 33 percent of the families who were referred signed service plans. However, of the referred families who were *contacted*, 41 percent signed service plans (see Figure 14). This compares favorably to the rate of CPS recruitment for families with substantiated and unsubstantiated child abuse reports--approximately 31 percent of these families agree to participate in program services (Arizona Department of Economic Security, 2001).

Figure 14. Comparison of Percentages of Families Referred and Families Contacted Who Signed Service Plans Since Program Inception



Of the families who sign service plans, approximately 52 percent complete them (i.e., achieve the goals they developed as part of the plan). When compared with similar programs that offer parenting and family services, Family Builders performs well. For example, 40 to 60 percent of the families who seek outpatient treatment discontinue services before completion of treatment and many do not stay in treatment for very long (Kazdin, et.al., 1997). In the Arizona's Promoting Safe and Stable Families program, 57 percent of the families who received at least 2 hours of service had completed their services at discharge (LeCroy & Milligan Associates, 2001).

Data Management

DES has faced several data quality issues related to the database that was developed specifically for the program. Difficulties in training contractor staff on proper data entry methods and maintaining compliance with database requirements have led to missing and inaccurate information in the database. Design flaws inherent in the database have also contributed to the problems with data accuracy and completeness. DES is addressing these issues through improved monitoring and database training techniques, development of a database manual, and formation of a database project team that will conduct a system-wide review of the database to correct flaws and data entry errors.

Program Administration and Costs

There are two Family Builders Program specialists located in the Central Office that provide oversight to the Family Builders program. These specialists conduct site visits every four months to monitor each Family Builders program site. They also provide technical assistance to providers, process monthly provider billings, and ensure that the requirements of the program evaluation are met. The specialists provide training on an ongoing basis throughout the year to all new and existing Family Builders employees. The areas addressed in training include:

- Basic orientation to Family Builders
- Child abuse and neglect criteria
- What is Family Centered Practice?
- Using and administering the pre and post Brief Family Assessment Scale and the pre and post Family Risk Assessment Scale
- Policies and procedures of the Family Builders Program
- How to make a CPS report and mandatory reporting
- Conducting the Family Centered Assessment
- Developing the Family Centered Service Plan
- Using forms and the requirements at each phase of service
- Interviewing for family strengths and resources
- Extensive assessment and service plan training.

The Community Partnership meeting for Family Builders providers occurs on a quarterly basis. Membership includes providers, relevant DES staff, a child advocacy organization, and representatives from the Office of the Auditor General. These meetings provide a forum for members to identify and resolve operative and policy issues in a proactive manner. They further provide an opportunity for DES and the providers to share information and knowledge about service delivery.

Average Costs of Referrals, Assessments, and Services

The average costs for the Family Builders Program per family are as follows:

- Referral: $ 198.80
- Assessment: $ 204.66
- Service plan: $ 1,413.29
- Closure: $ 355.91

Summary

In FY2002 the Family Builders Program continued to assist families in need. Approximately 2,500 families signed service plans and were assisted in addressing their immediate needs while building upon their strengths for long-term growth and stability. As a result, these families showed small, but statistically significant reductions in their levels of risk for child abuse and/or neglect as measured by two risk assessment instruments. The families who sign service plans also receive fewer subsequent, substantiated CPS reports than do families who are referred, but do not participate in the program.

The program experienced a 22.5 percent budget cut in FY2002 which led to fewer families being referred to the program, and, subsequently, being served by the program. In addition, it was necessary to eliminate some program services not legislatively mandated and a few providers had to layoff Family Builders workers.

The program's performance in participant recruitment and retention continues to compare favorably with similar programs. Approximately 48 percent of the families contacted agree to participate and 46 percent completed the program.

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