

# A Decade of Prevention

The Gaining Ground Initiative and the 2005  
NCIOM Task Force on Child Abuse Prevention

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# Presentation Goals

- The State of Child Maltreatment Prevention Efforts in NC (@ 2003)
- The Gaining Ground Initiative
- Focus and Goals of the 2005 NCIOM Task Force on Child Abuse Prevention

# Thinking About CM Prevention....

- A Conceptual Framework: The Waves of Prevention (Deborah Daro)
  - Wave 1. The Prevention Concept (1974-1980). The modern response to child abuse and neglect as a social problem.
  - Wave 2. The Prevention Continuum (1980 – 1990). Let a thousand flowers bloom.
  - Wave 3. The Prevention System (1990 – early 2000's). Weeding the garden based on empirical research and developmental theory.

# The State of Prevention: A Decade Ago

- In early 2000's, questions emerging at PCANNC that began with “What does good look like?”
- Critical issues that needed to be addressed:
  - Public leadership for child maltreatment prevention
  - Connecting agencies/programs as part of a more organized “system”
  - Measuring incidence in the population (surveillance)
  - Public awareness messages undermining prevention efforts
  - Few evidence-based prevention programs
  - Little research on public policy impacts on child maltreatment
  - Limited funding needing more strategic investment in what works and across “silos”

# The Gaining Ground Initiative

- Multi-year initiative funded by The Duke Endowment and spearheaded by PCANC to conduct research, create partnerships, and develop recommendations and strategies to address the issues of leadership, surveillance, etc.
- Multiple consultants and agencies contributed to the initiative
  - Research and publications on evidence-based programs, home visiting service array, evidence-based communications, and funding analysis.
  - Products developed to inform a NCIOM Task Force beginning in 2004
- A critical strategy of Gaining Ground was the development of a statewide task force to create collective (public/private/research/philanthropic) understanding and investment in child maltreatment prevention priorities

# The NCIOM Task Force on CM Prevention

- Co-convened by the NC Institute of Medicine and PCA North Carolina
- Co-chaired by DHHS Secretary Carmen Hooker Odom and Dr. Marian Earls
- 51 members representing state agencies, legislators, health professionals, family service providers, the faith community, educators, and business community
- Began in late 2004, with recommendations released in 2005
- Goals: Create a statewide blueprint (state plan) for CM prevention with focus on the issues identified in Gaining Ground as critical for the state to advance

# The NCIOM Task Force Accomplishments

- Development of a vision for children, families, and communities
  - Community support of parenting and families
- Development of a set of principles to guide development of a child maltreatment prevention system in NC
  - Principles can be adopted at the local level to help guide prevention services in communities
- 37 recommendations targeting child maltreatment prevention efforts in the state
  - Most targeted at state agencies, but implications for funding and programmatic direction at the local level

# NCIOM Task Force Recommendations

37 Recommendations focus on six issue areas:

- Establishing state-level, public leadership for child abuse prevention
- Establish comprehensive data monitoring system to measure incidence of child maltreatment
- Change social norms through public health awareness and education strategies
- Increase the use of evidence-based and promising child abuse prevention and family strengthening programs in North Carolina.
- Infuse child maltreatment prevention strategies into the practice of professionals already working with families and children (e.g., childcare providers, pediatricians, public health nurses).
- Ensure sufficient funding for child maltreatment prevention by increasing revenue to the NC Children's Trust Fund and increasing funding for child abuse prevention programs.



# 2014: A few thoughts on progress

- Paradigm shift: Essentials for Childhood; Safe, Stable, Nurturing Relationships for Children (compared to early conceptualizations of child abuse prevention in 1970's)
- Child abuse prevention has been adopted as a public health priority at the national and state levels. Leadership, financial support, and technical assistance to help build infrastructure, leadership, and systems.
- Widespread use of “well-framed” communications about child abuse prevention: brain architecture, toxic stress, and new work on framing sexual abuse prevention.
- Significant increase in use of research and evidence in decision-making about programmatic implementation.
- Significant increase in implementation of evidence-based and promising child abuse prevention and family strengthening programs in North Carolina
- Collaboration on funding to leverage/maximize limited resources: DPH, DSS, The Duke Endowment, Smart Start, Kate B. Reynolds and others have braided funding for EBPs and other strategies

# 2014: A few thoughts for the future

- A collective impact framework
- Political and public will to care for **all** children (and recognize that children come in a package with families and communities)
- Policy research agenda – focused on changing the environments in which families and communities raise children
- Continue to build on the research and systems-building efforts focused on pregnancy and early childhood
- Sustainability (financially, organizationally) of fledgling programs (e.g., Nurse-Family Partnership, Incredible Years, Adolescent Pregnancy Prevention programs, etc.) within systems and communities undergoing enormous change and strain
- Building community capacity to sustain prevention efforts