



2019-2020

The Alabama Department Of  
Child Abuse & Neglect Prevention

# Evaluation Report

The Children's Trust Fund  
*Sallye Longshore, M.S., Ed.S., Director*





**Prevention programs funded by ADCANP/CTF have documented important positive effects for 68,163 adults and youth in Alabama served in 2019-2020. Evidence shows these programs enhance protective factors that are associated with the reduction of risks and the significant human and economic cost of child abuse and neglect in our state.**

The Alabama Department of Child Abuse and Neglect Prevention – The Children’s Trust Fund (ADCANP/CTF) continues to be at the forefront in the nation for supporting and evaluating prevention and family strengthening programs. As the only state agency designated to prevent child abuse and neglect, ADCANP/CTF is explicitly focused on educating Alabama communities in the ***Strengthening Families™ framework*** –a vital component in preventing child maltreatment. As a member of the National Alliance of Children’s Trust and Prevention Funds, as well as Prevent Child Abuse America, the ADCANP works to strengthen ALL families and to surround them with supportive communities, services and systems.

Every year, ADCANP/CTF secures resources to fund evidence-informed community programs committed to the prevention of child maltreatment. ADCANP/CTF advocates for children and the strengthening of families and funded programs incorporate the protective factors work in their service delivery. ADCANP/CTF is committed to investing in prevention programs for youth, mothers, fathers, and families throughout Alabama. Furthermore, ADCANP/CTF is committed to tracking program outcomes by investing in the documentation and evaluation of funded community partners’ efforts.

In recent years, the ADCANP/CTF Director and Evaluator received multiple invitations from other states, as well as national conferences and forums, to share the ADCANP/CTF’s best practices model for gathering data and documenting indicators of family strengthening across a large number of funded programs. Although the ability to do this was hindered during the response to the global COVID-19 pandemic, they were able to offer a featured presentation in March 2020 through an invited “Digital Dialogue” for The National Child Abuse and Neglect Technical Assistance and Strategic Dissemination Center (CANTASD), a service of the Children’s Bureau, Office on Child Abuse & Neglect, Administration for Children and Families, U.S. Department of Health and Human Services.

Since March 2020, the program service delivery model of the ADCANP/CTF funded agencies was upended as local organizations experienced unprecedented challenges. In the middle of the program year, the citizens of Alabama experienced school closings, stay-at-home orders which then moved to safer-at-home orders, directly impacting priority family needs and the design of community services. Impressively, ADCANP/CTF funded community partners adapted quickly, adjusting and restructuring their delivery of program services, and often pivoting to focus on the most pressing needs for economic, housing, and food security. Local agency staff further proved their value and continue to do so throughout this challenging experience. Individuals and families were supported and empowered through the innovative and creative efforts of hundreds of community partner agency staff. Virtual one-on-one sessions and group program delivery were timely and essential lifelines for families. The staff at ADCANP/CTF worked tirelessly to support funded program staff and created a COVID-19 Resource Guide for communities. This can be found on the [ADCANP/CTF website](#). While times remain uncertain, ADCANP/CTF and the programs it funds remain steadfast in networked efforts to strengthen families and reduce risks for children, one child and family at a time.

## History

The Alabama Department of Child Abuse and Neglect Prevention- The Children's Trust Fund was established in 1983 to address the state's problem of child neglect and maltreatment. While several state agencies existed to address the different aspects of child abuse, none specifically focused on combatting the issue by raising awareness and educating communities about preventing abuse before it occurs. **ADCANP/CTF remains the only state agency actively engaged in providing community-based prevention programs focused on promoting protective factors in families.** Throughout its 37 year history, ADCANP/CTF has provided direct funding support to hundreds of local agencies through a competitive grant process. These local organizations carry out the important work of building family strengths.

ADCANP/CTF firmly believes that by investing time and money upfront in individual and structural supports for families, we can ensure that children in our state grow up in a nurturing and supportive home. Prevention is much more cost effective than intervention. Research supports this prevention approach. A [2015 study](#) by the University of Alabama College of Human Environmental Science and Center for Business and Economic Research – Culverhouse College of Commerce reveals the enormous cost of intervention. They estimated services associated with child abuse and neglect incidents costs taxpayers **\$2.3 billion dollars every year**. The prevention of child maltreatment is both a social justice **and** an economic concern for Alabama.

In this report we highlight the evaluation results of ADCANP/CTF-funded programs' efforts to promote protective factors among the families and youth served throughout the state during the period of August 2019–August 2020.



# The Five Protective Factors:

## The Foundation of the Strengthening Families™ Framework

### What are the Five Protective Factors?

The Five Protective Factors are the foundation of the Strengthening Families™ approach. Extensive evidence supports the common sense notion that when these Protective Factors are present and robust in a family, the likelihood of abuse and neglect diminishes. Research also shows that these are the factors that create healthy environments for the optimal development of all children.



#### Parental Resilience

No one can eliminate stress from parenting, but building parental resilience can affect how a parent deals with stress. Parental resilience is the ability to constructively cope with and bounce back from all types of challenges. It is about creatively solving problems, building trusting relationships, maintaining a positive attitude, and seeking help when it is needed.



#### Knowledge of Parenting and Child Development

Having accurate information about raising young children and appropriate expectations for their behavior help parents better understand and care for children. It is important that information is available when parents need it, that is, when it is relevant to their life and their child. Parents whose own families used harsh discipline techniques or parents of children with developmental or behavior problems or special needs require extra support in building this Protective Factor.



#### Social and Emotional Competence of Children

A child's ability to interact positively with others, to self-regulate, and to effectively communicate his or her emotions has a great impact on the parent-child relationship. Children with challenging behaviors are more likely to be abused, so early identification and working with them helps keep their development on track and keeps them safe. Also, children who have experienced or witness violence need a safe environment that offers opportunities to develop normally.



#### Social Connections

Friends, family members, neighbors, and other members of a community provide emotional support and concrete assistance to parents. Social connections help parents build networks of support that serve multiple purposes: they can help parents develop and reinforce community norms around childrearing, provide assistance in times of need, and serve as a resource for parenting information or help solving problems. Because isolation is a common risk factor for abuse and neglect, parents who are isolated need support in building positive friendships.



#### Concrete Support in Times of Need

Parents need access to the types of concrete supports and services that can minimize the stress of difficult situations, such as a family crisis, a condition such as substance abuse, or stress associated with lack of resources. Building this Protective Factor is about helping to ensure the basic needs of a family, such as food, clothing, and shelter, are met and connecting parents and children to services, especially those that have a stigma associated with them, like domestic violence shelter or substance abuse counseling, in times of crisis.

Information provided by: Strengthening Families™, a project of the Center for the Study of Social Policy: [www.strengtheningfamilies.net](http://www.strengtheningfamilies.net)  
US Department of Health and Human Services Administration for Children and Families/Strengthening Families™ and Communities 2009 Resource Guide:  
[www.acf.hhs.gov/programs/cb](http://www.acf.hhs.gov/programs/cb)

In Project Year 2019-2020, ADCANP/CTF awarded grants from four primary federal and state funding streams to support two statewide initiatives and 151 community-based prevention programs. Grants were awarded to local programs across Alabama through a competitive grant proposal and review process.

**Records indicate these funded programs provided multi-session services to 68,163 adults and children. In addition, 614,320 individuals attended community awareness events, programs, and/or presentations.**

In total, **682,483** Alabama citizens were impacted by ADCANP/CTF-funded programs during the 2019-2020 grant period.

Impressively, in just the last 5 years (2015-2020), the total number of Alabama citizens **served** by ADCANP/CTF-funded multi-session services is **393,760** and the total number of citizens **impacted** by ADCANP/CTF funded programs (multi-session programs and community awareness presentation attendance) is **1,711,166**.

In this report, ADCANP/CTF features evaluation results from the 151 community-based programs funded by Community Based Child Abuse Prevention (CBCAP), Children First Trust Fund (CFTF), Education Trust Fund (ETF), and Department of Human Resources/Temporary Assistance for Needy Families (DHR/TANF) funds August 2019-August 2020. Research suggests several key activities as useful for the prevention of child maltreatment: raising public awareness, providing education and supports for parents – particularly those facing special challenges (e.g. low resources, special needs children), facilitating positive father involvement, and promoting youth's own awareness, knowledge, and skills related to resilience. **Therefore, the types of programs ADCANP/CTF funded include:**

- **parent education and support**
- **home visitation parent programs**
- **fatherhood programs**
- **respite care programs**
- **youth school-based, non school-based/after-school, & mentoring programs**
- **community awareness programs**

Although each program varies in approach, curriculum, and delivery method, common objectives are shared by programs in each area of emphasis. **All** programs have objectives that center on reducing risk factors for child maltreatment and promoting protective factors outlined at the beginning of this report.

From August 2019 to August 2020, ADCANP/CTF worked with an independent research team in Auburn University's Human Development and Family Studies to **conduct systematic data collection and evaluation of its funded programs**. All funded agencies invest time and effort in the collection of data from program participants throughout the year, using uniform surveys within each program type. This allows for the aggregation of data within program categories and results in meaningful information regarding the experiences of the average participant in each program area. **This systematic empirical assessment of prevention programs throughout the state is one of few such efforts in the United States.**

Because of the large number of citizens served, survey research methods are utilized and program participants respond to questions regarding their background and demographics, as well as their understanding, knowledge, and skills in many different areas relevant to healthy families and communities. The questionnaire uses a validated and efficient method of gathering information on baseline and post-program levels of each measure in order to assess for changes, using statistical analyses. At program completion, participants report their level of knowledge and skill in specific areas before and after their participation in the program. Previous research has supported the use of this retrospective-pre and post-program evaluation design as efficient and meaningful documentation of participants' perceptions of benefit from the program and the extent to which specific program objectives have been met. Research also indicates this design may be a more accurate strategy for documenting change. Participants tend to answer more honestly when taking a retrospective pre/post as compared to separate pre- and post-program surveys since participants may respond in a more socially desirable way prior to program start. They also tend to have better knowledge on which to assess pre-program levels after they have received information and skills training in the program. (Contact the authors of this report for more information on this survey research design and its validity.)

For analyses, data were aggregated across programs within each program type. Paired sample *t*-tests were conducted on each measure (some are global, singular items; some are multi-item scores) to identify **statistically significant changes from pre-program mean levels to post program mean levels**. Effect sizes for documented changes were calculated using the appropriate formula for paired data.

“This program helped make me a better mom. I learned that not only am I my child’s first teacher but I have learned that you don’t have to be perfect to be a parent. I also learned that we should listen to our children because they are the future of tomorrow. This program is wonderful and I hope it can reach other parents as it has me. Thank you for everything you have helped me with.”

- Parent education participant



# Participant Numbers & Demographics

Data on numbers of participants in ADCANP/CTF funded programs were taken from master lists of individuals who spent time in a program, demographic reports that most participants provided, and from presentation reports that documented the numbers of individuals who participated in community awareness activities provided by grantees in all program areas, including the community awareness program area.

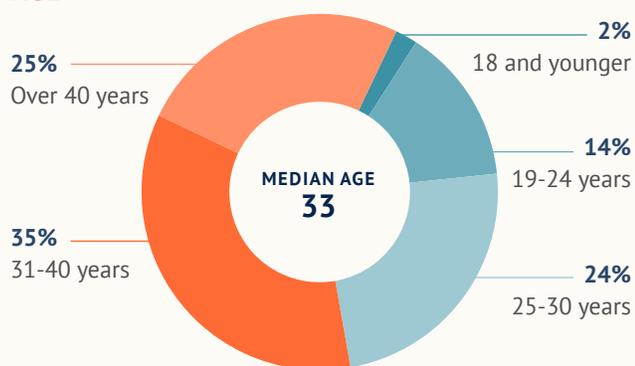
**13,028 adults** and **55,135 youth** were served in multi-session programs classes (i.e., parenting, respite care, fatherhood, or youth development). An additional **614,320 individuals** (youth and adults) participated in a community awareness event or presentation and learned more about prevention of child maltreatment. Community awareness activities also included helpful information shared through media and social media. Approximately **3,182,837** exposures/ impressions were generated.

*Programs provided multi-session services and community awareness events to adults and children in all 7 congressional districts in Alabama during the one year grant period.*

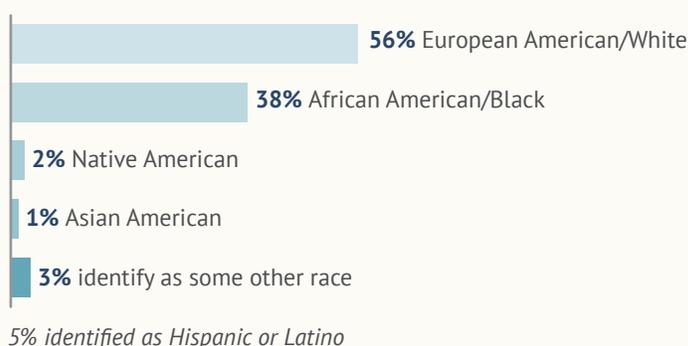
## Adult Demographics

Data on adult demographics come from across the program types: parent education, home visiting, fatherhood, and respite. Parents are predominantly European American/White or African American/Black and predominantly of lower socio-economic status, based on work status, education level, and income reported. Note: Adults who participated only in community awareness presentations did not provide demographic information.

### AGE



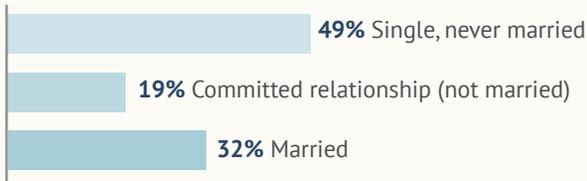
### RACE & ETHNICITY



### GENDER



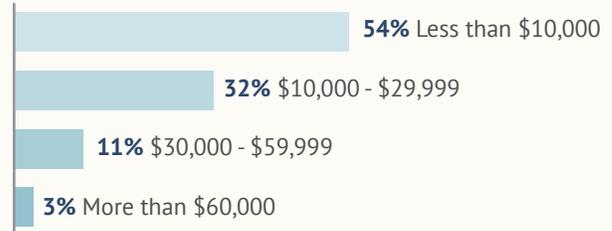
### RELATIONSHIP STATUS



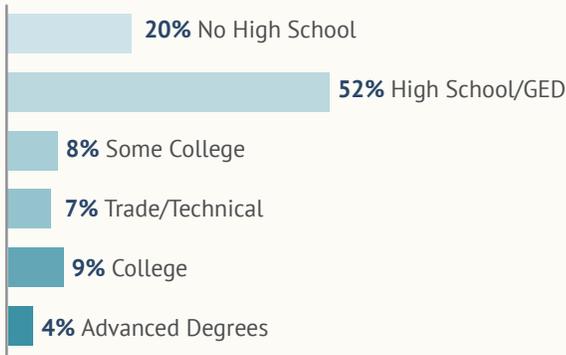
Additionally:

19% Had experienced a separation  
 13% Had experienced divorce  
 2% Had experienced being widowed

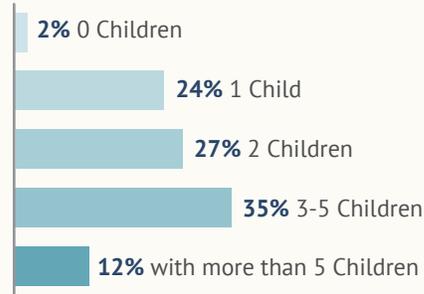
### ANNUAL INCOME LEVEL PRE-PROGRAM\*



### EDUCATION LEVEL PRE-PROGRAM\*



### NUMBER OF CHILDREN\*\*



### WORK STATUS PRE-PROGRAM\*



\*For participants (excluding students) over the age of 18.  
 \*\*Includes biological, step, adopted, and foster children

## Youth Demographics

Data on youth demographics come from school-based, non-school based/after school, and mentoring programs and indicate that participants were predominantly African American/Black or European American/White, balanced in gender, and diverse in age. Note: Youth who participated only in community awareness programs did not provide demographic information.

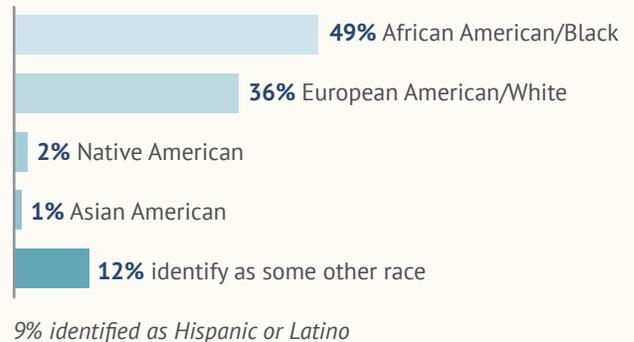
### GRADE



### GENDER



### RACE & ETHNICITY



# Parent Education & Home Visiting Programs

61 programs provided parent education/home visiting through hospital visits, group education, and home visits. **Common goals of home visiting/parent education programs noted in their proposals center on participant improvement in:**

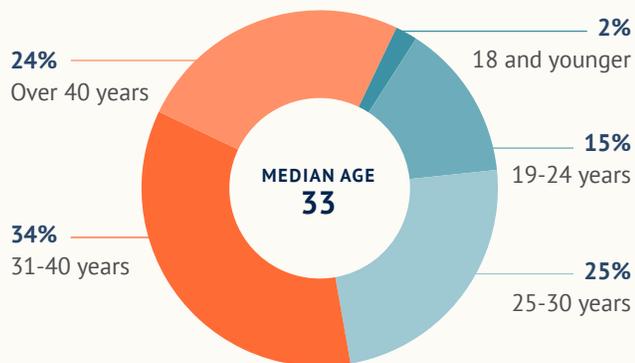
- stress management skills
- skills to manage maltreatment risk
- understanding various forms of child maltreatment
- medical care commitment
- positive parenting skills and child development knowledge
- knowledge of and use of support services
- use of informal support networks

*These goals promote elements of several protective factors emphasized by the “Strengthening Families™” framework (see results for this information).*

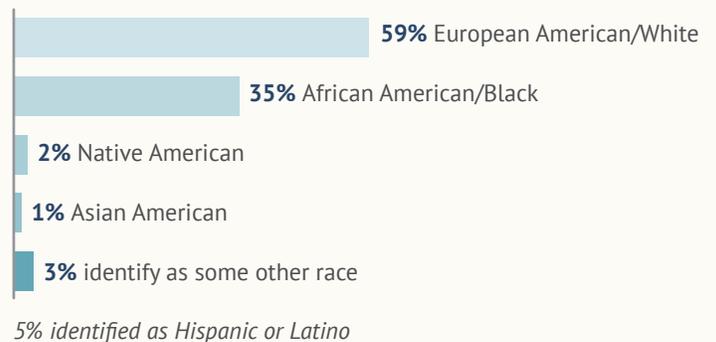
## Parent Education & Home Visiting Program Demographics

Similar to the overall demographics, parents in parent education classes and home visiting programs were predominantly European American/White or African American/Black and predominantly of lower socio-economic status, based on work status, education level, and income reported. Participants are predominantly women.

### AGE



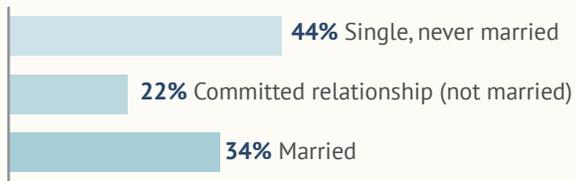
### RACE & ETHNICITY



### GENDER



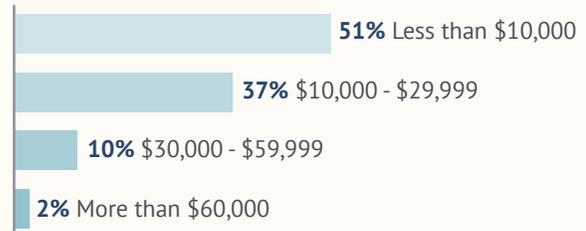
## RELATIONSHIP STATUS



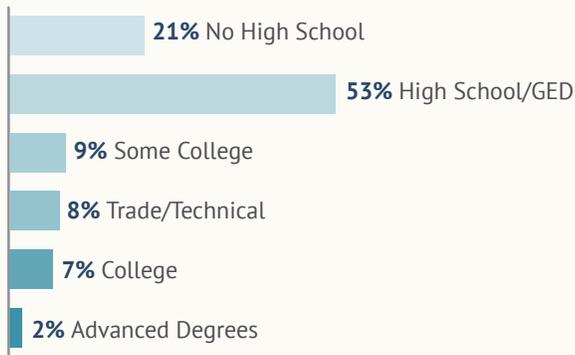
**Additionally:**

19% Had experienced a separation  
 15% Had experienced divorce  
 3% Had experienced being widowed

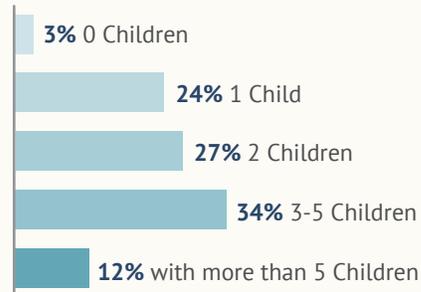
## ANNUAL INCOME LEVEL PRE-PROGRAM\*



## EDUCATION LEVEL PRE-PROGRAM\*



## NUMBER OF CHILDREN\*\*

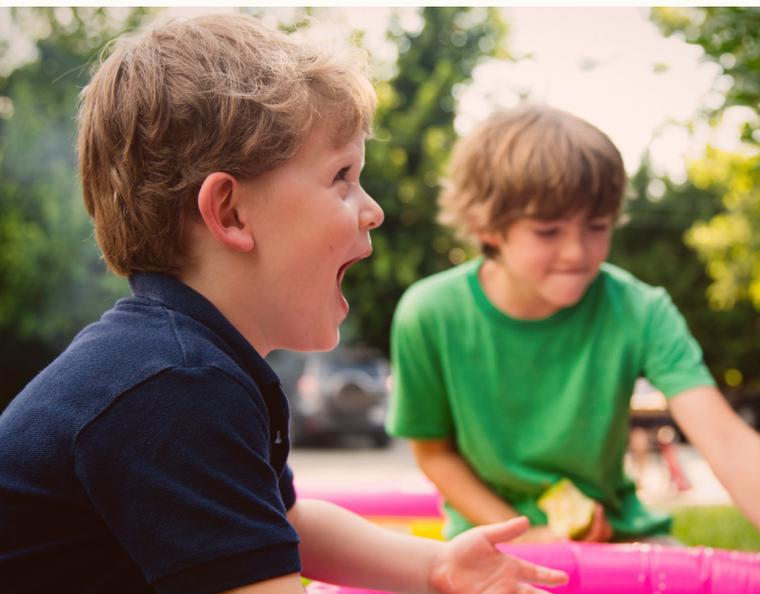


## WORK STATUS PRE-PROGRAM\*



\*For participants (excluding students) over the age of 18.

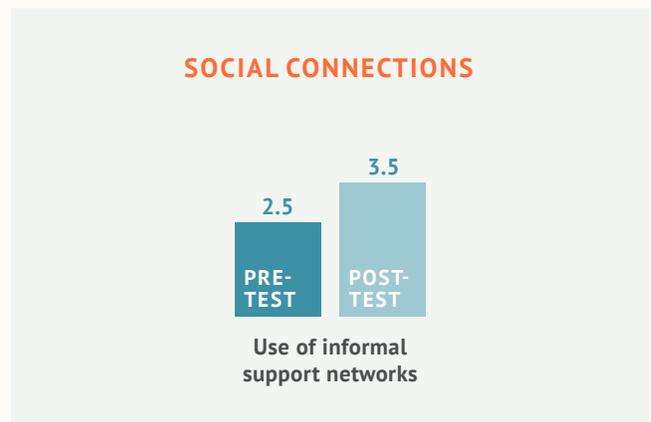
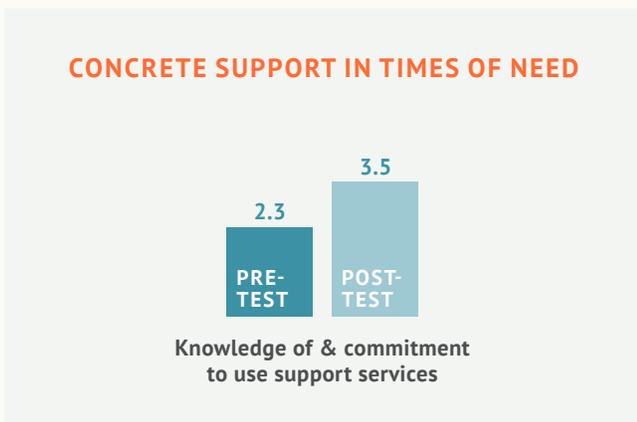
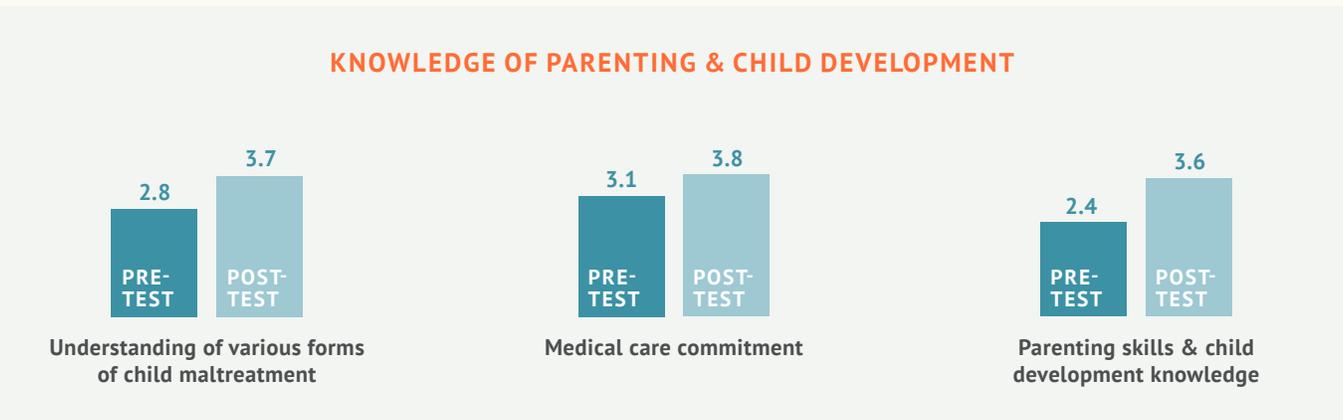
\*\*Includes biological, step, adopted, and foster children



“Being around other children during the activities helped my son begin to get over not being ashamed around strangers. He was taught how to be kind and show love and respect for himself and others. He also learned a little Spanish. Full of love for the staff.”

- Home visiting participant

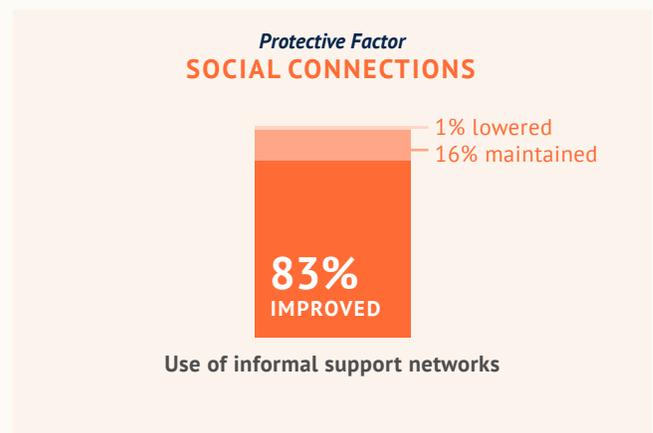
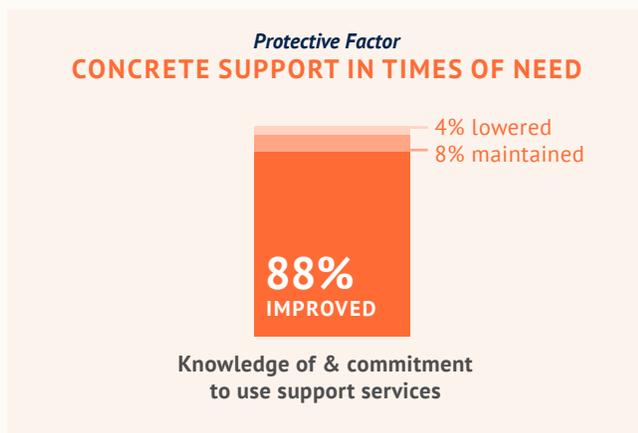
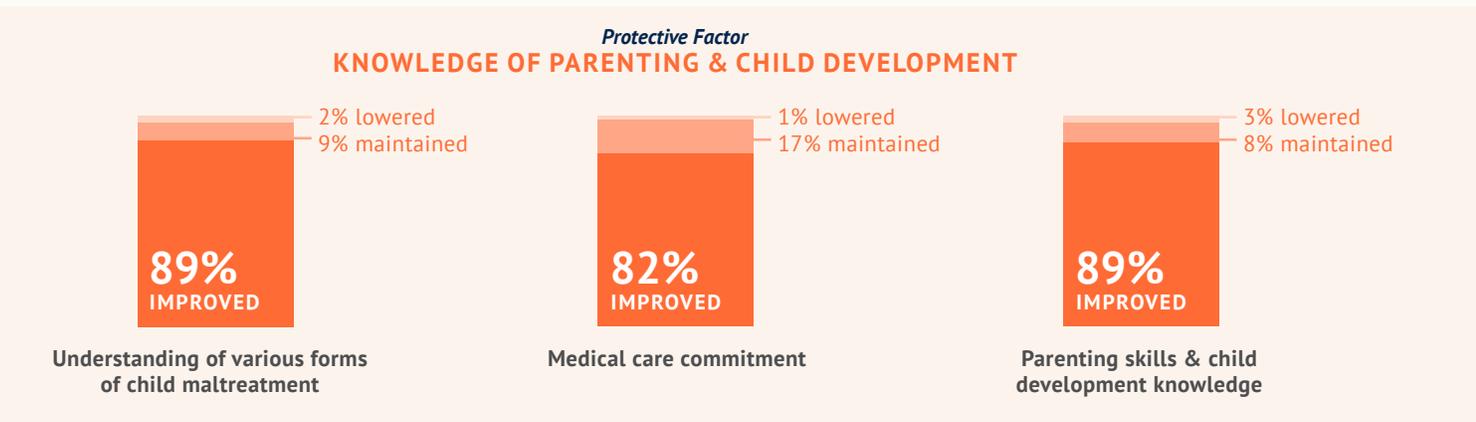
A sample of Parenting Program participants (n=2,391) responded to an assessment of 7 goals using a scale of 1 – 4. Analyses of measures (some using multi-item scores; reliabilities [Cronbach’s  $\alpha$ ] range from .77 - .90) using paired sample *t*-tests revealed statistically significant ( $p < .001$ ) improvements for participants, on average, in ALL targeted areas from pre-program to post-program. The effect sizes ranged from .86-1.36. The average magnitude of the effect sizes for these improvements was 1.11 and can be considered large (i.e. .25 small effect, .50 moderate effect, .75 large effect).



Paired sample *t*-test tables with results for testing mean score differences from pre-program to post-program are located on page 34 in the appendix.

## Key Changes

While the pre/post average score comparison is essential for testing for statistically significant change, descriptive analyses also were examined to determine the percentage of participants in parenting programs who reported improvement in their individual scores from pre-program to post-program. We found a majority of parents rated themselves as improved in each area assessed.



“This parenting class has helped me to be more of an active listener and more actively engaged with my child; I have learned how to control my stress also.”  
- Parent education participant

“My facilitator did a fantastic job instructing her parenting class online via ZOOM, amid the COVID-19 pandemic precautions. The curriculum had numerous “real-life” examples to make it super relatable to the everyday scenarios that we face as parents, making it easy to understand & realistic to incorporate into my routine. The curriculum introduced a much more positive & mindful approach to parenting that will help in aiding your children’s negative behavior, while at the same time empowering both the child & the parent, through positive mindsets & feedback to your child, that will allow him/her to use their energy successfully while also building upon their self-confidence & a positive self-image, that will in turn, result in them being able to identify with their best self. I left the class excited to try out this new parenting approach with my own children. I foresee a much closer, confident, content & structured family unit, in my near future. For that, I could not be more grateful to have had the opportunity to be a part of this parenting class. Thank you!!!”

**-Parent education participant**



“My husband and I have been using this program for a few months now we have taken several classes which includes the teen parenting class. We have learned how to have better conversations with our son using the new methods we were taught, how to get to a better understanding between us all and how to handle situations that arise without yelling, arguing or not speaking. This program has helped us in so many ways it is hard to just pinpoint on one thing. Not only has it helped us with our communication with our son it has also helped us with communication between each other. I am so very thankful for the time our facilitator has spent with us and all the wonderful things we now know how to implement into our everyday lives.”

**- Home visiting participant**



# Respite Care Programs

7 programs provided respite care services and parent information for parents and children with special needs. **Common goals of respite programs noted in their proposals center on participant improvement in:**

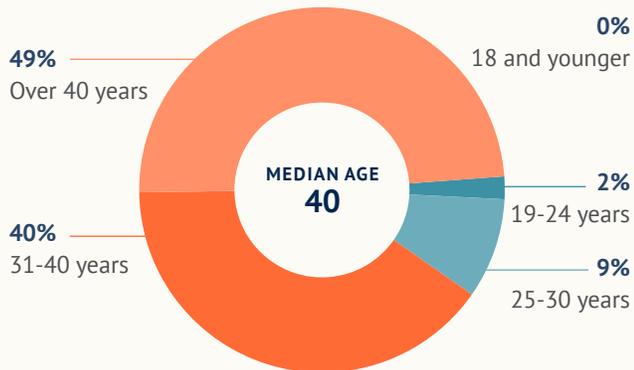
- stress level
- positive view of the child
- knowledge of and use of support services
- use of informal supportive social networks

*These goals promote elements of several protective factors emphasized by the “Strengthening Families™” framework (see results for this information).*

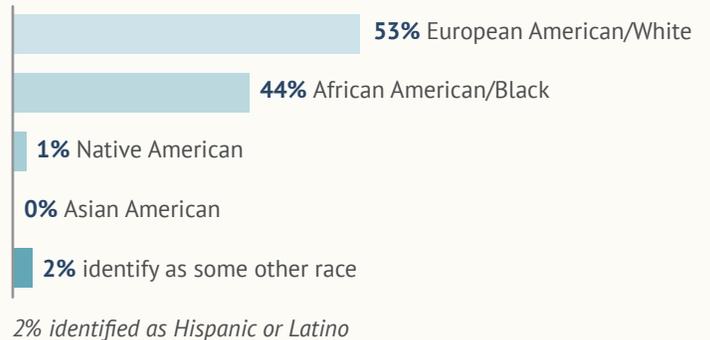
## Respite Care Program Demographics

Similar to the overall demographics, parents in respite care programs are predominantly European American/White or African American/Black and predominantly of lower socio-economic status, based on work status, education level, and income reported. Participants are predominantly women.

### AGE



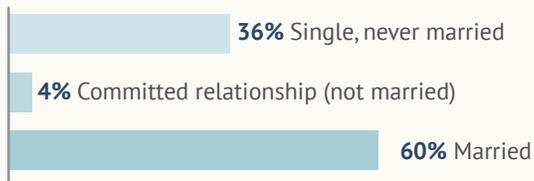
### RACE & ETHNICITY



### GENDER



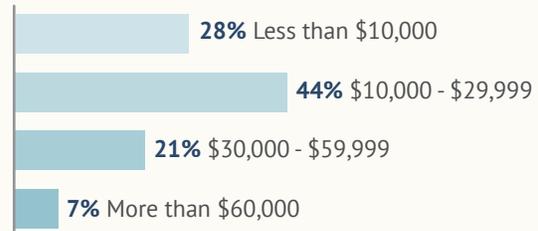
## RELATIONSHIP STATUS



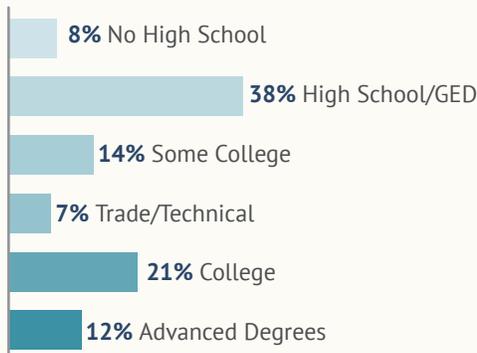
**Additionally:**

12% Had experienced a separation  
 19% Had experienced divorce  
 6% Had experienced being widowed

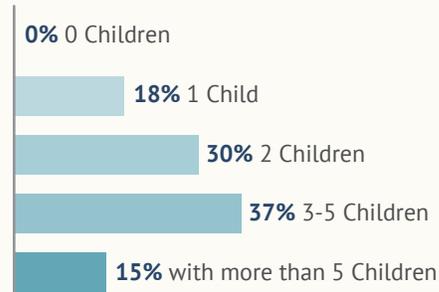
## ANNUAL INCOME LEVEL PRE-PROGRAM\*



## EDUCATION LEVEL PRE-PROGRAM\*



## NUMBER OF CHILDREN\*\*



## WORK STATUS PRE-PROGRAM\*



\*For participants (excluding students) over the age of 18.

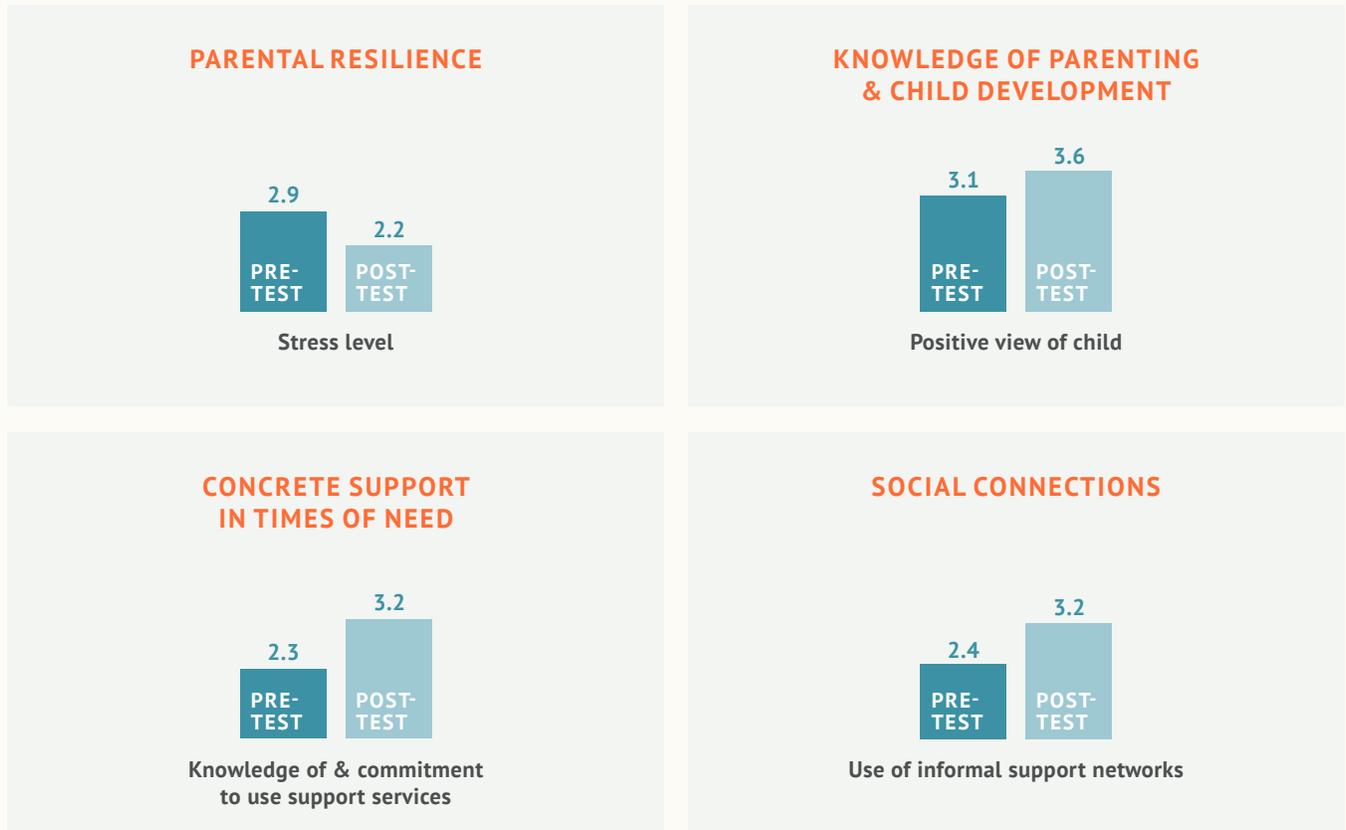
\*\*Includes biological, step, adopted, and foster children



“I can’t say how hard it is to parent two children with autism alone. [This program] has helped me so much to connect, see my children differently, and feel like I can make it through. The pandemic has felt impossible, but I have used the program and the support I got to get through each day better than before.”

- Respite care program participant

A sample of Respite Care program participants (n=374) responded to an assessment of 4 goals using a scale of 1 – 4. Analyses of measures (some using multi-item scores; reliabilities [Cronbach’s  $\alpha$ ] range from .74 - .89) using paired sample *t*-tests revealed statistically significant ( $p < .001$ ) improvements for participants, on average, in ALL targeted areas from pre-program to post-program. The effect sizes ranged from .60-1.00. The average magnitude of the effect sizes for these improvements was .78 and can be considered large (i.e. .25 small effect, .50 moderate effect, .75 large effect).



Paired sample *t*-test tables with results for testing mean score differences from pre-program to post-program are located on page 34 in the appendix.

“This program helps me to be able to have a much needed ‘Date Night’ with my husband.”

-Respite care program participant

## Key Changes

While the pre/post average score comparison is essential for testing for statistically significant change, descriptive analyses also were examined to determine the percentage of participants in respite programs who reported improvement in their individual scores from pre-program to post-program. We found a majority of parents rated themselves as improved in each area assessed.



“Not only did UCP help ease our anxiety about an uncertain future, they have helped us see how bright that future can be. They have supported us every step of the way.”

– Respite care program participant

# Fatherhood Programs

DHR/TANF (Alabama Department of Human Resources, Family Assistance Division, which oversees Temporary Assistance for Needy Families; TANF funds) provided funding for 24 fatherhood programs and the Children First Trust Fund (CFTF) provided funding for an additional 4 programs. Fatherhood programs provide case management and classes. They focus on enhancing employability through education and job skills training. They also provide educational information on child development and positive parenting strategies and emphasize the value of positive involvement with children and child support obligation compliance. Mothers are invited to participate in classes as well.

Common goals of fatherhood programs noted in their proposals center on participant outcomes in:

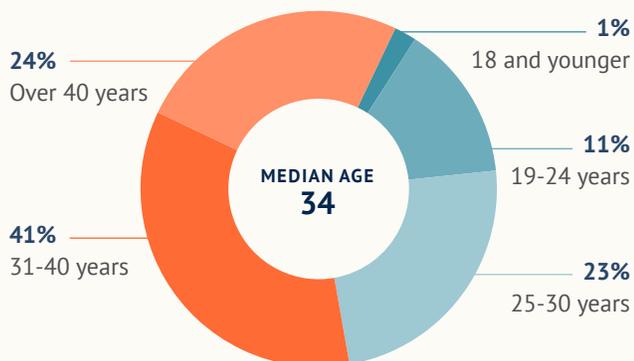
- positive relationship skills
- enhanced coparenting quality
- dating abuse prevention skills
- cooperation with child support enforcement (CSE) & commitment to pay child support
- greater work and education commitment
- greater use of support services
- positive parenting skills
- enhanced parent involvement & relationship quality with child
- enhanced child adjustment

*These goals promote elements of several protective factors emphasized by the “Strengthening Families™” framework (see results for this information).*

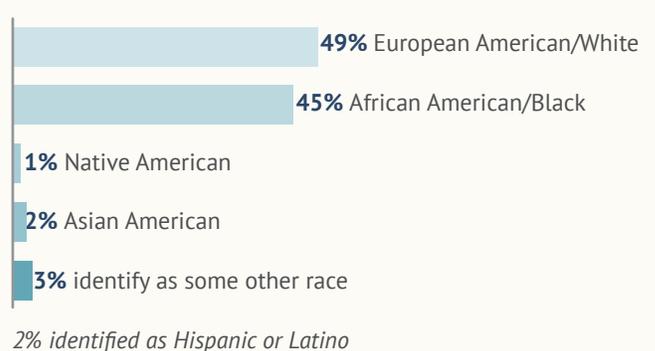
## Fatherhood Program Demographics

Individuals who participated in fatherhood programs were predominantly European American/White or African American/Black and predominantly of lower socio-economic status, based on work status, education level, and income reported. Participants were predominantly men.

### AGE



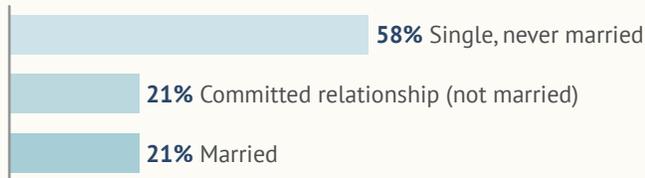
### RACE & ETHNICITY



### GENDER



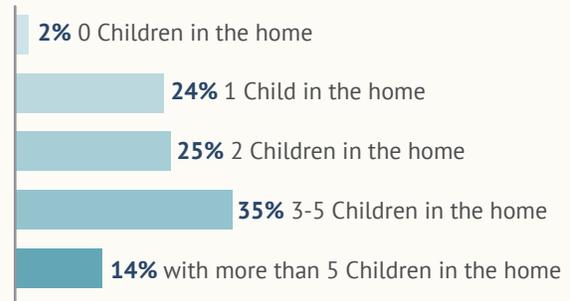
## RELATIONSHIP STATUS



### Additionally:

28% Had experienced a separation  
 21% Had experienced divorce  
 2% Had experienced being widowed

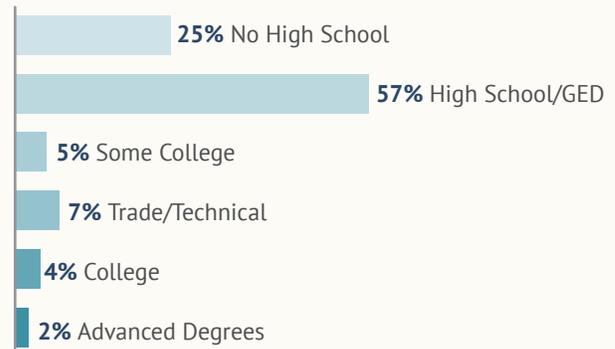
## NUMBER OF CHILDREN LIVING IN THE HOME SOME OR ALL OF THE TIME\*



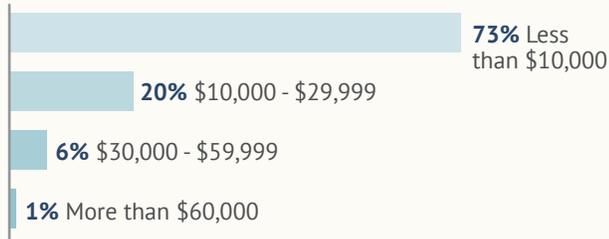
## LONGEVITY OF CURRENT EMPLOYMENT\*\*



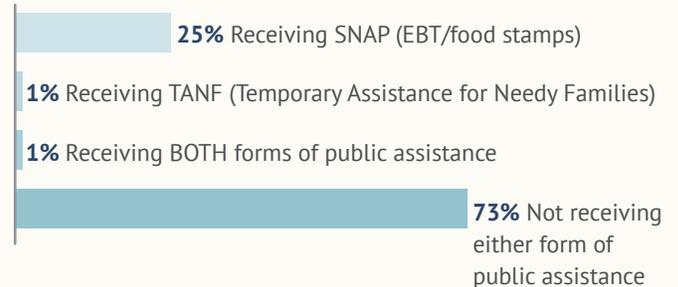
## EDUCATION LEVEL PRE-PROGRAM\*\*



## ANNUAL INCOME LEVEL PRE-PROGRAM\*\*



## PUBLIC ASSISTANCE\*\*



## WORK STATUS PRE-PROGRAM\*\*



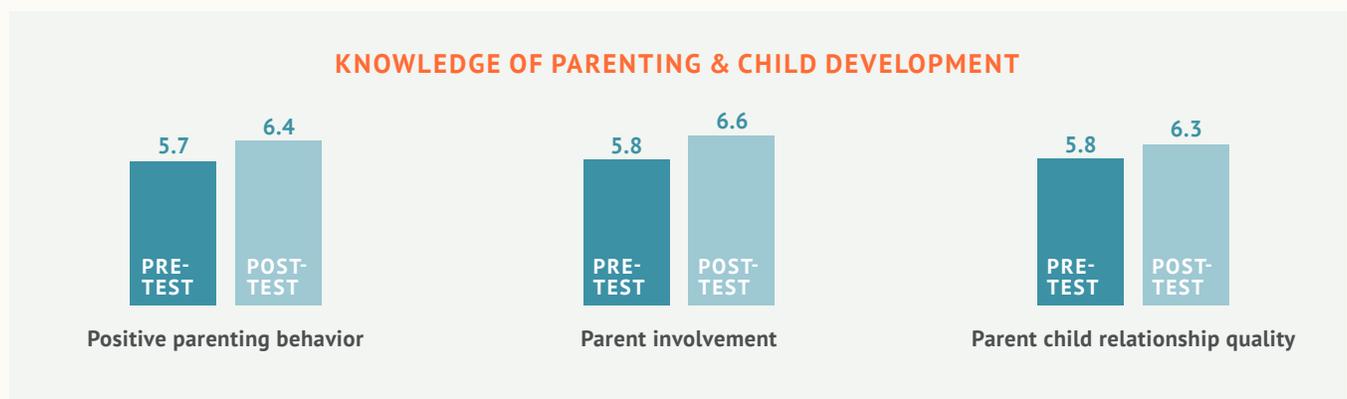
## COURT REFERRAL



\*Includes biological, step, adopted, and foster children

\*\* For participants (excluding students) over the age of 18.

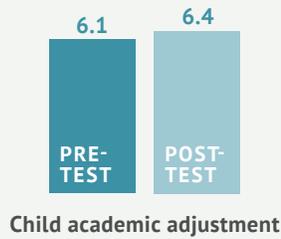
A sample of Fatherhood program participants (n=1,419) responded to an assessment of 17 goals common across programs using a scale of 1 – 7. Analyses of measures (some using multi-item scores; reliabilities [Cronbach’s  $\alpha$ ] range from .73 - .85) using paired sample *t*-tests revealed statistically significant ( $p < .001$ ) improvements for participants, on average, in all but one targeted areas from pre-program to post-program. The effect sizes ranged from .21-.82. The average magnitude of the effect sizes for these improvements was .62 and can be considered moderate (i.e. .25 small effect, .50 moderate effect, .75 large effect).



## CONCRETE SUPPORT IN TIMES OF NEED



## SOCIAL AND EMOTIONAL COMPETENCE OF CHILDREN



## PARENTAL RESILIENCE



Paired sample *t*-test tables with results for testing mean score differences from pre-program to post-program are located on page 35 in the appendix.



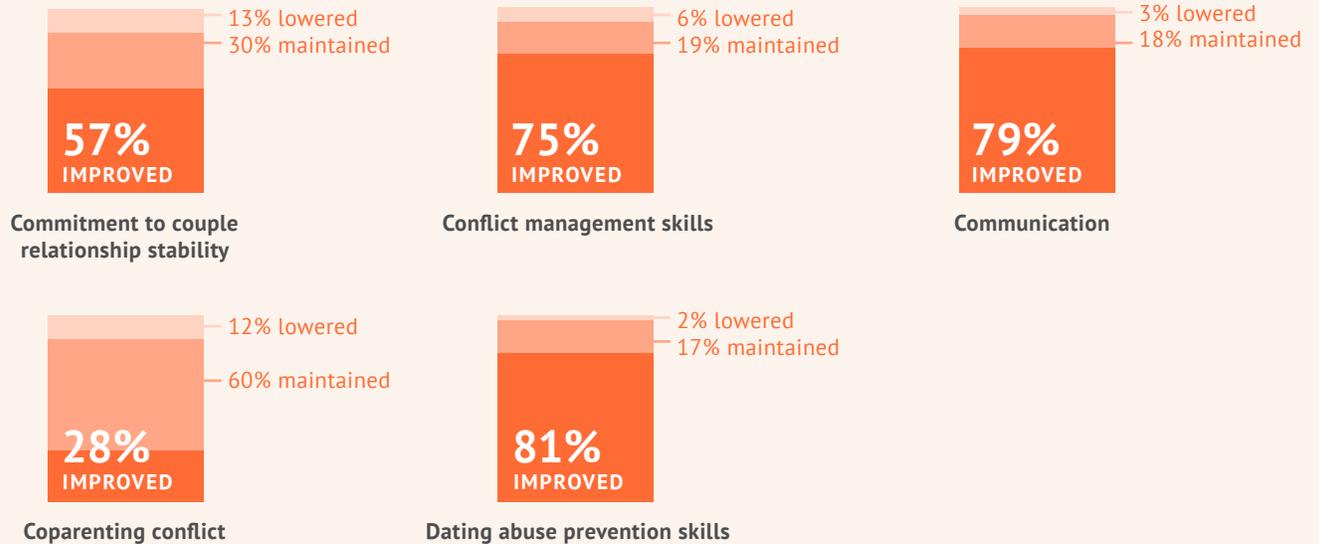
“Since I began working with the program my visits with my daughter resumed after not seeing her for 17 months and five days. I am learning through the virtual workshops and case management how to control my anger, my spirit and how to deal with my bitterness towards my child’s mother. It’s good to have an advocate someone to talk to who understands from a father’s perspective. The system is sometimes set up to brake a man but the Parenting Matters Program and staff advocates for us, encourages us and supports us.”

- Fatherhood program participant

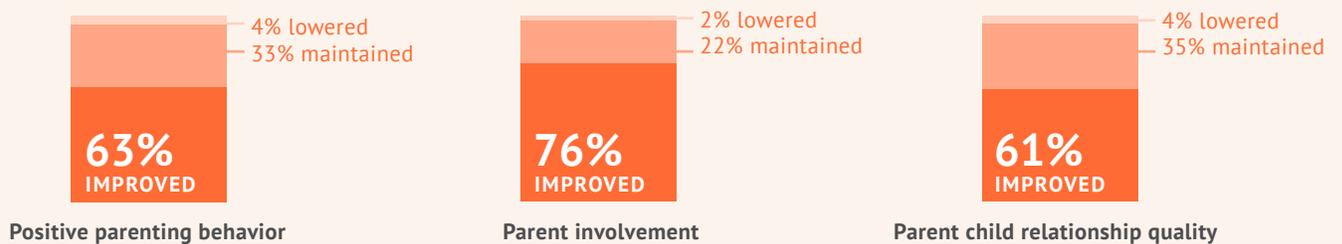
## Key Changes

While the pre/post average score comparison is essential for testing for statistically significant change, descriptive analyses also were examined to determine the percentage of participants in fatherhood programs who reported improvement in their individual scores from pre-program to post-program. We found a majority of parents rated themselves as improved in each area assessed.

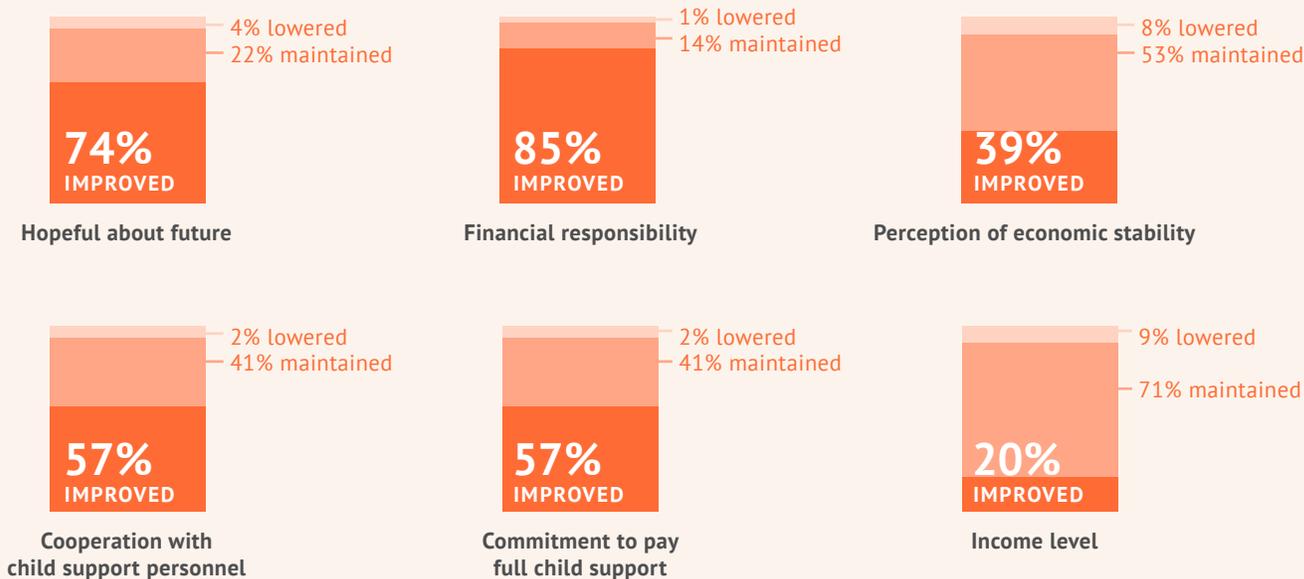
### Protective Factor SOCIAL CONNECTIONS



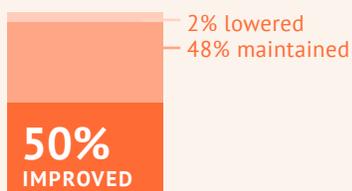
### Protective Factor KNOWLEDGE OF PARENTING & CHILD DEVELOPMENT



*Protective Factor*  
**CONCRETE SUPPORT IN TIMES OF NEED**

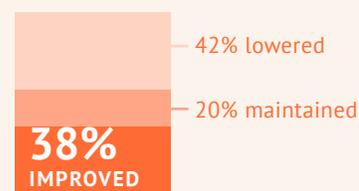


*Protective Factor*  
**SOCIAL AND EMOTIONAL  
 COMPETENCE OF CHILDREN**



Child academic adjustment

*Protective Factor*  
**PARENTAL RESILIENCE**



Depressive symptoms

Seventy-six percent of fathers who reported not paying any child support at pre-test reported paying some or all their child support obligation at post-test. Fatherhood program participants reported paying a total of **\$605,307.35** in child support from October 2019 to September 2020.

“The fatherhood program helped me secure really great housing, then taught me how to give back to the community by volunteering my time at the local food and clothing ministry. I found a place to connect with others at the fatherhood program in my community.”

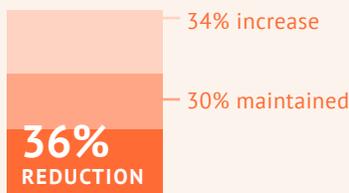
-Fatherhood program participant

# Fatherhood Challenges

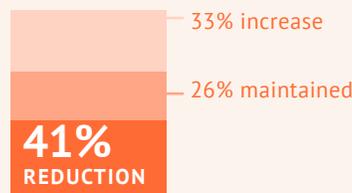
## (FH Challenges ONLY)

Fathers also rated a list of areas on the level of challenge using a scale of 1-4, with 1 indicating no challenge and 4 indicating a major challenge. We descriptively examined the percentage of participants in fatherhood programs who reported improvement (i.e., reduction in the level of challenge) in their individual ratings from pre-program to post-program. A large portion of program participants reported improvements in each area of challenge. Notably, many of these areas represent systemic and structural challenges and barriers that are more difficult to address by local agencies offering individually-focused programs.

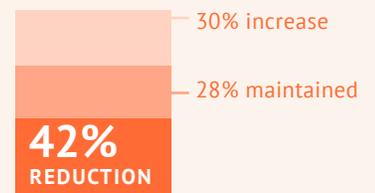
### FATHERHOOD CHALLENGES



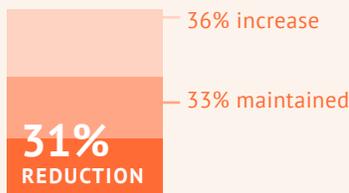
Unemployment



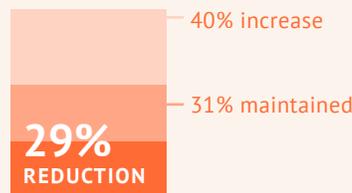
Not having a steady place to live



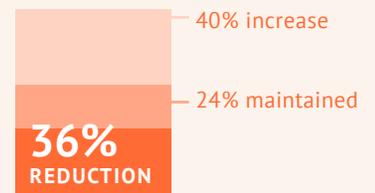
Drug/alcohol abuse



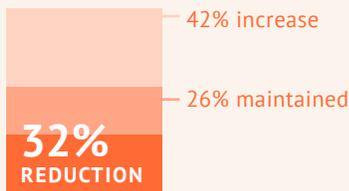
Physical health problems



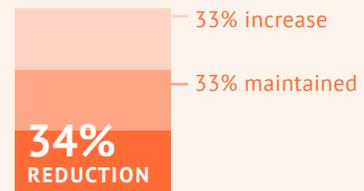
Living too far from your child(ren)



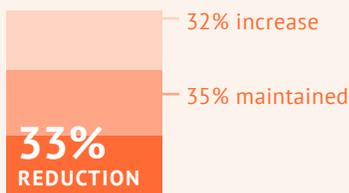
Keeping a job when you have one



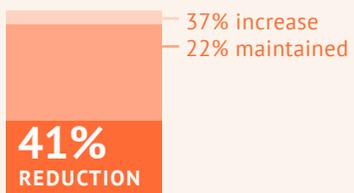
Not knowing how to deal with family or civil court



Transportation issues



Not having health insurance for yourself



Not having health insurance for your child(ren)

“The fatherhood initiative definitely has shown me how to take the initiative as a father and be a better person altogether. Thank you for helping me with getting a job.”

-Fatherhood program participant

“The [dads] program helped me resolve miscommunication between me and my kids’ mother. If it had not been for the program I still would be making poor financial and unlawful decisions. This program is like my second family.”

- Fatherhood program participant

“These classes have changed the way I talk to my kids and they tell me so much more about their lives than before. We have a much stronger relationship now.”

- Fatherhood program participant



# Youth Programs

## 3rd – 5th Grade

Youth in 3rd-12th grade around the state were served through 41 programs that included a variety of school-based, non-school-based/after school, and mentoring programs. These programs varied in their emphasis, but all were focused on reducing risks for children and enhancing their well-being by promoting the protective factor: social and emotional competence of children.

**Common goals of programs noted in their proposals for youth in 3rd-5th grade center on participant improvement in:**

- social skill development
- improved abuse awareness
- self confidence
- emotion identification and regulation
- enhanced assertiveness
- cooperative behavior

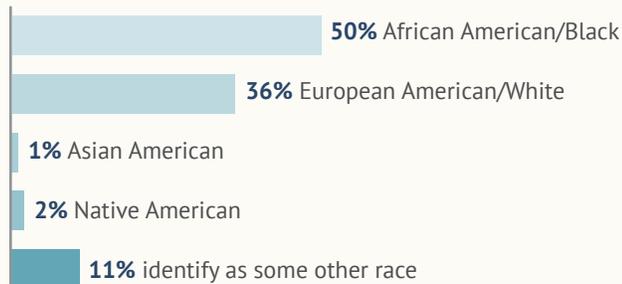
## 3rd – 5th Grade Demographics

Data on youth demographics from school-based, non-school based/after school, and mentoring programs offered to children in 3rd – 5th grade indicate that participants were predominantly African American/Black or European American/White, balanced in gender, and diverse in age. Note: Youth who participated only in community awareness programs did not provide demographic information.

### GENDER



### RACE & ETHNICITY

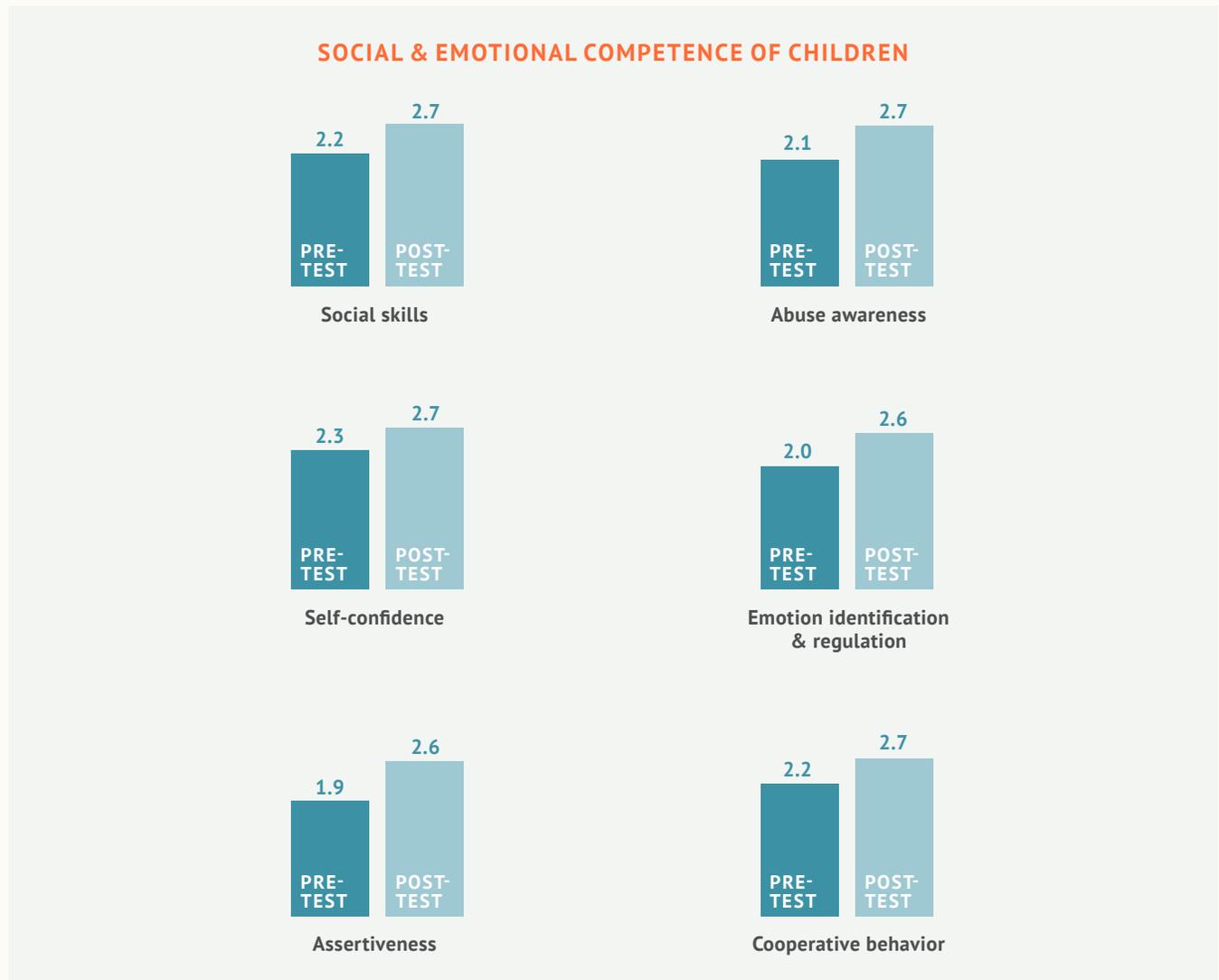


*8% identified as Hispanic or Latino*

“I have learned that I didn’t have to fit in just to be like other people. I can just be me because nobody else can.”

– Youth mentoring program participant; “little sister”

A sample of 3rd – 5th grade participants (n=2,579) responded to an assessment of 6 goals using a scale of 1 – 3. Analyses of measures (some using multi-item scores; reliabilities [Cronbach’s  $\alpha$ ] range from .63 - .69) using paired sample *t*-tests revealed statistically significant ( $p < .001$ ) improvements for participants, on average, in ALL targeted areas from pre-program to post-program. The effect sizes ranged from .70-.99. The average magnitude of the effect sizes for these improvements was .86 and can be considered large (i.e. .25 small effect, .50 moderate effect, .75 large effect).



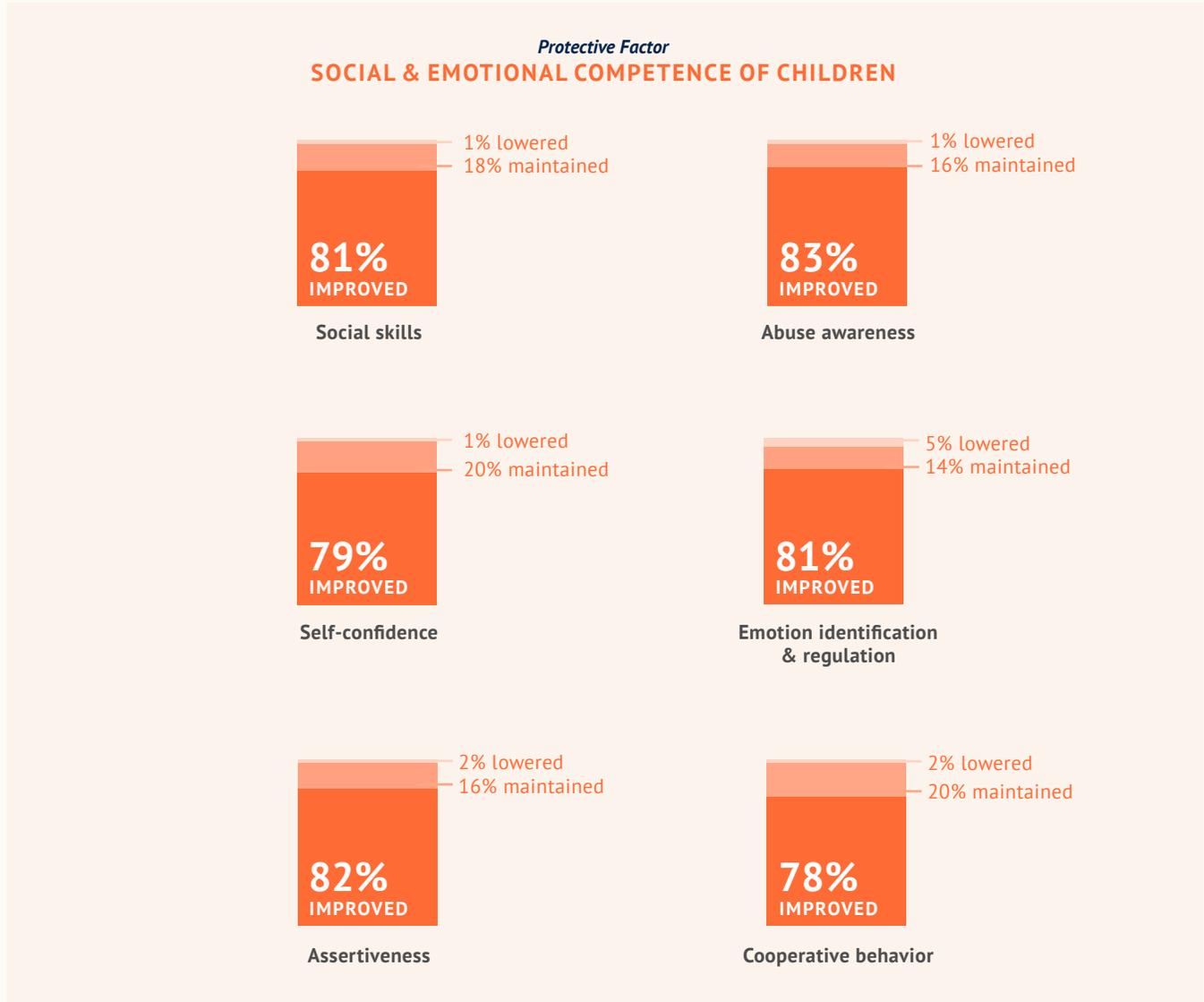
Paired sample *t*-test tables with results for testing mean score differences from pre-program to post-program are located on page 36 in the appendix.

“One outing that exemplifies the impact of our match is when [my mentee] visited my office on one of the school’s annual BBS end of year field trip that my firm sponsored. She sat down in my office chair and looked at me so seriously and said that she wanted to do this “one” day. She of course didn’t really understand what I do exactly, but she simply saw something to aspire to.”

- Youth mentoring program participant; “big sister”

## Key Changes

While the pre/post average score comparison is essential for testing for statistically significant change, descriptive analyses also were examined to determine the percentage of participants in youth programs who reported improvement in their individual scores from pre-program to post-program. We found a majority of youth rated themselves as improved in each area assessed.



“I am in the 5th grade and go to the after-school program. They help me learn to be confident and get along with everyone.”

- After school program participant

# Youth Programs

## 6th – 12th Grade

Youth in 3rd-12th grade around the state were served through 41 programs that included a variety of school-based, non-school-based/after school, and mentoring programs. These programs varied in their emphasis, but all were focused on reducing risks for children and enhancing their well-being by promoting the protective factor: social and emotional competence of children.

**Common goals of programs noted in their proposals for youth in 6th-12th grade center on participant improvement in:**

- **emotion knowledge**
- **self confidence**
- **social competence**
- **commitment to avoid risky & delinquent behavior**
- **cooperative behavior**
- **abuse awareness & resourcefulness**

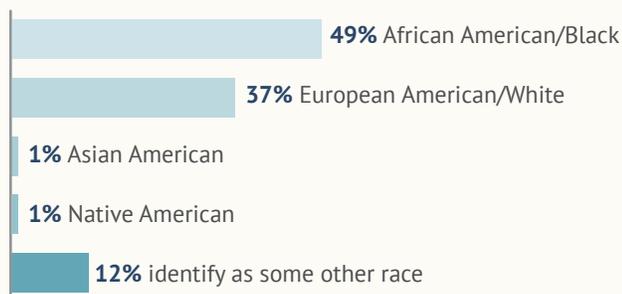
## 6<sup>th</sup> – 12<sup>th</sup> Grade Demographics

Data on youth demographics from school-based, non-school based/after school, and mentoring programs offered to children in 6th-12th grade indicate that participants were predominantly African American/Black or European American/White, balanced in gender, and diverse in age. Note: Youth who participated only in community awareness programs did not provide demographic information.

### GENDER



### RACE & ETHNICITY

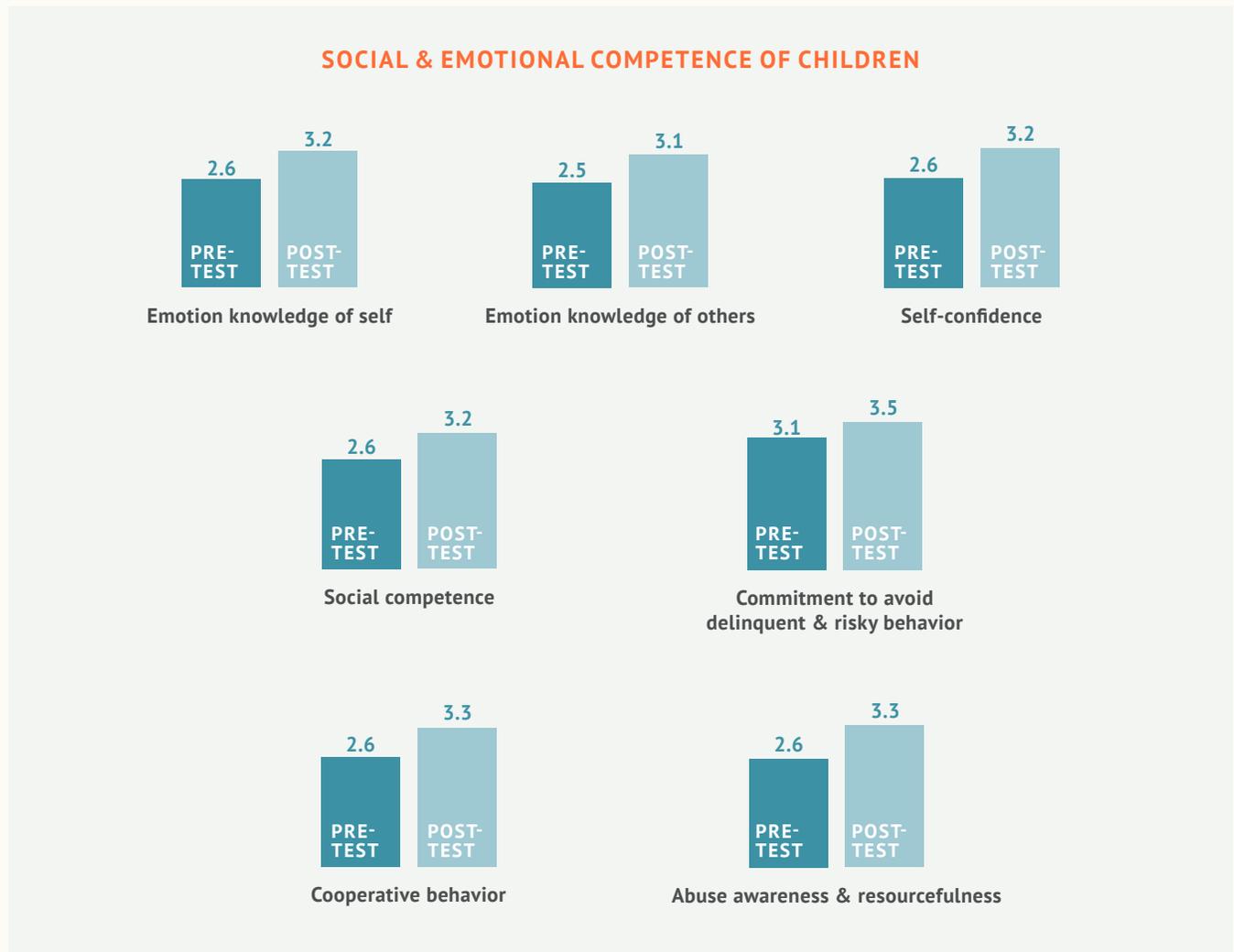


*10% identified as Hispanic or Latino*

“Because of you and this program, I know I want to work with kids and one day come back to the organization and help anyway I can. Thank you for having such an effect on my life.”

– Youth school-based program participant

A sample of 6th-12th grade participants (n=1,961) responded to an assessment of 7 goals using a scale of 1 – 3. Analyses of measures (some using multi-item scores; reliabilities [Cronbach’s  $\alpha$ ] range from .62 - .75) using paired sample *t*-tests revealed statistically significant ( $p < .001$ ) improvements for participants, on average, in ALL targeted areas from pre-program to post-program. The effect sizes ranged from .74-1.11. The average magnitude of the effect sizes for these improvements was .89 and can be considered large (i.e. .25 small effect, .50 moderate effect, .75 large effect).



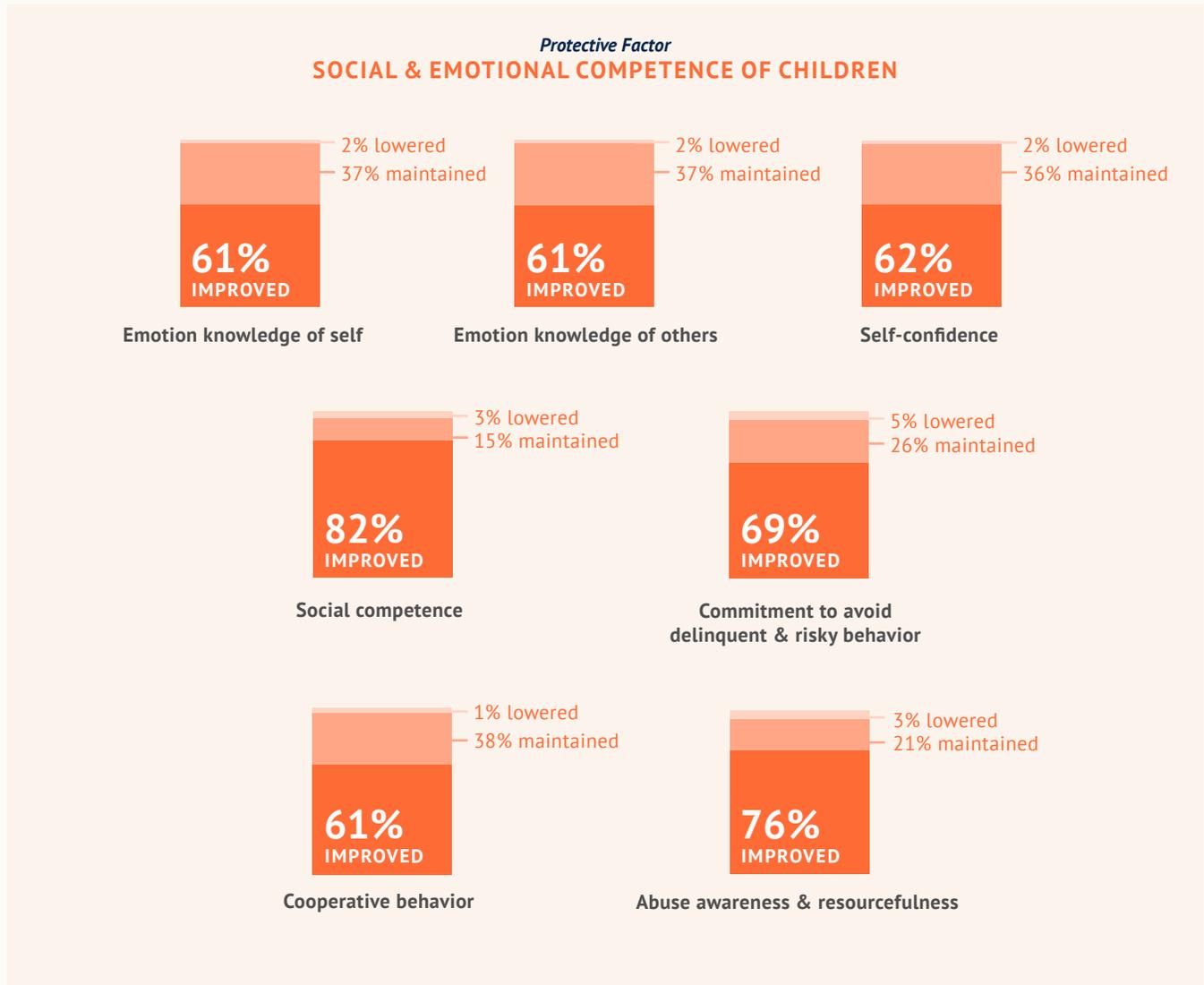
Paired sample *t*-test tables with results for testing mean score differences from pre-program to post-program are located on page 36 in the appendix.

“They came to my school for an intervention program. Some things they taught us were life skills, to not do drugs, true friendship, and communication. I feel it was a great program because it helped and greatly influenced the youth around me and my peers. The program also provided a secure source of mentors to talk to and for us to open up and express our emotions and feelings.”

– Youth school-based program participant

## Key Changes

While the pre/post average score comparison is essential for testing for statistically significant change, descriptive analyses also were examined to determine the percentage of participants in youth programs who reported improvement in their individual scores from pre-program to post-program. We found a majority of youth rated themselves as improved in each area assessed.



“I am so glad the school-based program taught me how sexual abuse can happen and what I can do.”

- Youth school-based program participant

“My relationship with [my mentee] grew immensely throughout the short period of time that we were able to meet. When we first started spending time together she appeared hesitant to connect and very timid. It proved difficult to keep her occupied and to have in-depth conversations about her day for instance.

However, the more time we spent together, the more walls were let down and I was able to get a real glimpse of who she is and what she enjoys. She never fails to impress me!

Her laugh is so contagious, and I’m ready for school to start back so we can play hide and seek or blow bubbles again.

Being able to make a difference in a child’s life means the world to me. Sometimes a child needs someone that they can trust and come to when things get tough.

***If I am able to be that person for her, then my time as her mentor will have been worth it.”***

– Mentor in mentoring school-based program



# Community Awareness Programs

There were 14 programs funded to specifically conduct community awareness activities. These programs provided information to professionals and community members on child abuse and neglect in an effort to raise awareness and increase 1) the likelihood of reporting suspected child abuse and neglect and 2) the use of services provided for family support and child abuse and neglect situations. Community awareness activities also address common risks identified as barriers to health and success (i.e., preventing tobacco use and/or tobacco cessation for youth). Community awareness programs were especially beneficial to communities during the recent months of the global pandemic. Families were able to reach out and receive assistance and resources due to these programs' continued awareness efforts within communities.

Additionally, many of the youth, parent education and home visiting, respite, and fatherhood programs also made efforts to raise community awareness about community resources and child abuse and neglect and documented their efforts.

Due to the large numbers attending community awareness programs, individual surveys were not administered to these participants. Staff tracked the number of face to face encounters and reported these to the evaluation team monthly and quarterly.

## Community awareness programs/presentations directly served 614,320 individuals.

Staff also tracked exposures to other community awareness efforts implemented within communities through various media outlets, such as billboards, radio and newspaper ads, agency websites, and social media (Facebook, Instagram, and Snapchat).

## 3,182,837 exposures/impressions were documented.



“This training taught me important skills in recognizing signs of child sexual abuse and how to properly respond and report it. Also the importance of listening to children, telling them I believe them and only asking them open ended questions to keep from confusing and possibly re-traumatizing the victim.”

– Community awareness program participant

# Appendix

## Parent Education & Home Visiting Programs

**TABLE 1. PAIRED SAMPLE *t*-TEST FOR MEAN CHANGE OVER TIME**

	Pre-Test		Post-Test		<i>df</i>	<i>t</i>	Cohen's <i>d</i>
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>			
<b>PARENTAL RESILIENCE</b>							
Stress Management Skills	2.30	.79	3.49	.68	2358	-60.16***	1.24
Skills to Manage Maltreatment Risk	3.03	.86	3.80	.43	2329	-43.57***	.99
<b>KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT</b>							
Understanding of Various Forms of Child Maltreatment	2.81	.79	3.71	.55	2337	-50.31***	1.07
Medical Care Commitment	3.11	.86	3.76	.49	2314	-38.77***	.86
Parenting Skills & Child Development Knowledge	2.42	.72	3.58	.54	2356	-65.08***	1.36
<b>CONCRETE SUPPORT IN TIMES OF NEED</b>							
Knowledge of & Use of Support Services	2.26	.81	3.49	.61	2360	-62.27***	1.31
<b>SOCIAL CONNECTIONS</b>							
Use of Informal Supportive Networks	2.48	1.07	3.48	.67	2330	-43.47***	.94

\*\*\**p*<.001. Cohen's *d* reported in absolute values.

## Respite Care Programs

**TABLE 2. PAIRED SAMPLE *t*-TEST FOR MEAN CHANGE OVER TIME.**

	Pre-Test		Post-Test		<i>df</i>	<i>t</i>	Cohen's <i>d</i>
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>			
<b>PARENTAL RESILIENCE</b>							
Stress Level	2.85	.83	2.20	.63	373	18.65***	1.00
Positive View of Child	3.07	.84	3.57	.62	369	-11.11***	.60
Knowledge of & Use of Support Services	2.31	.82	3.16	.73	373	-15.39***	.80
Use of Informal Supportive Networks	2.43	.94	3.15	.78	370	-14.03***	.73

\*\*\**p*<.001. Cohen's *d* reported in absolute values. ^reductions are desired for these measures.

# Fatherhood Programs

**TABLE 3. PAIRED SAMPLE *t*-TEST FOR MEAN CHANGE OVER TIME.**

	Pre-Test		Post-Test		<i>df</i>	<i>t</i>	Cohen's <i>d</i>
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>			
<b>SOCIAL CONNECTIONS</b>							
Commitment to Couple Relationship Stability	4.62	1.89	5.35	1.89	945	-12.88***	.27
Conflict Management Skills	4.33	1.56	5.91	1.14	1175	-30.40***	.82
Communication	5.15	1.58	6.37	1.00	1171	-25.92***	.79
Coparenting Conflict ^	3.16	2.02	2.63	1.84	1037	10.94***	.51
Dating Abuse Prevention Skills	5.31	1.88	6.50	1.12	1151	-22.18***	.69
<b>CONCRETE SUPPORT IN TIMES OF NEED</b>							
Hopeful About Future	4.72	1.70	6.03	1.11	1169	-25.76***	.78
Financial Responsibility	5.37	1.85	6.62	.82	1170	-23.18***	.75
Perception of Economic Stability	4.24	1.92	4.78	2.00	1105	-10.27***	.31
Cooperation with Child Support Personnel	5.19	2.01	6.07	1.61	624	-13.17***	.54
Commitment to Pay Full Child Support	5.22	2.07	6.06	1.64	594	-12.59***	.63
Income	1.96	1.57	2.24	1.70	1211	7.41***	.21
Job Status ^	.59	.86	1.70	.46	1202	-32.16***	.29
<b>KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT</b>							
Positive Parenting Behavior	5.65	1.42	6.38	.97	1085	-19.01***	.61
Parent Involvement	5.81	1.50	6.60	.88	1103	-18.78***	.61
Parent Child Relationship Quality	5.77	1.50	6.31	1.12	1104	-16.18***	.52
<b>SOCIAL AND EMOTIONAL COMPETENCE OF CHILDREN</b>							
Child Academic Adjustment	6.05	1.47	6.44	1.10	925	-11.05***	.38
<b>PARENTAL RESILIENCE</b>							
Depressive Symptoms	1.62	.57	1.63	.55	866	-.43	.02

\*\*\**p*<.001. Cohen's *d* reported in absolute values.

# 3rd-5th Grade

**TABLE 4. PAIRED SAMPLE *t*-TEST FOR MEAN CHANGE OVER TIME.**

	Pre-Test		Post-Test			<i>t</i>	Cohen's <i>d</i>
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>	<i>df</i>		
<b>SOCIAL AND EMOTIONAL COMPETENCE OF CHILDREN</b>							
Social Skills	2.15	.73	2.71	.53	2499	-38.79***	.79
Abuse Awareness	2.14	.80	2.72	.55	2486	-38.76***	.80
Self Confidence	2.25	.75	2.74	.53	2466	-33.81***	.70
Emotion Identification & Regulation	2.04	.56	2.62	.43	2550	-49.19***	.99
Assertiveness	1.89	.73	2.61	.58	2509	-48.28***	.98
Cooperative Behavior	2.19	.66	2.73	.45	2543	-43.48***	.90

\*\*\**p*<.001. Cohen's *d* reported in absolute values.

# 6th-12th Grade

**TABLE 5. PAIRED SAMPLE *t*-TEST FOR MEAN CHANGE OVER TIME.**

	Pre-Test		Post-Test			<i>t</i>	Cohen's <i>d</i>
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>	<i>df</i>		
<b>SOCIAL AND EMOTIONAL COMPETENCE OF CHILDREN</b>							
Emotion Knowledge of Self	2.55	.93	3.19	.78	1917	-35.14***	.81
Emotion Knowledge of Others	2.46	.87	3.12	.78	1918	-36.89***	.85
Self Confidence	2.59	.88	3.23	.78	1908	-36.44***	.84
Social Competence	2.57	.64	3.24	.54	1939	-48.35***	1.11
Commitment to Avoid Delinquent & Risky Behavior	3.12	.63	3.45	.54	1941	-31.48***	.74
Cooperative Behavior	2.64	.88	3.26	.77	1922	-35.58***	.83
Abuse Awareness & Resourcefulness	2.62	.75	3.34	.57	1934	-44.33***	1.04

\*\*\**p*<.001. Cohen's *d* reported in absolute values.

# Reflections

As the Evaluation Team at Auburn University, we wish to express our appreciation to Sallye Longshore, the visionary ADCANP Director, for extending to us this remarkable opportunity to partner in the effort to document ADCANP grantees' work. We feel so fortunate to work with her, the dedicated Deputy Director Tracy Plummer, and their committed staff and Board of Directors. We value greatly this long-time partnership and your unwavering support and continued investment in the evaluation of programs and us, the research team. It is truly an honor and privilege to work for you, with you, and in service to the people of Alabama.

Clearly, the story in this evaluation report belongs to the hard-working, compassionate community agency staff. It is our privilege to document even a small portion of the positive influence you have on individuals' and families' lives in Alabama. We understand fully that your outreach and connection extend well beyond what we are able to gather information on in any given year. There is no question that this evidence of attaining several goals in the short-term are indicators of broader, long-term impact you are having in so many people's lives. We know you hear these stories and along with our presentation of numbers, the quotes you offer from individuals about the power of your work reminds us every day that each experience and each story is uniquely their own. Collectively, the voices resonate and affirm the value of this effort. And this year, in particular, your hard work has been a lifeline to so many as we face uncertainties and challenges that can only be overcome through community, relationships, support, and compassion.

We want to commend ADCANP/CTF, their staff, and the grantee agency staff for demonstrating resilience during the challenging times of this program year. You embraced the challenges, created opportunities and restructured strategies to accomplish and even expand your projects' goals. We continue to be invested in providing meaningful and useful information for agencies, the ADCANP/CTF staff and Board, and ADCANP/CTF funding sources and hope you will share this report that demonstrates the outreach and some of the positive effects for children and families in Alabama that you have had. Through this turbulent time, may we move forward to the upcoming project year with a renewed energy and belief that...

“...what lies behind us and what lies before us are tiny matters compared to what lies within us.”

**-Ralph Waldo Emerson**

# **PY 2019-2020 Report**

*submitted in October by:*

## **PROJECT DIRECTOR**

Francesca Adler-Baeder, Ph.D., CFLE  
*Professor, Human Development  
and Family Studies*

## **PROJECT STAFF**

Ami Landers, M.S., CFLE  
*Project Manager*

Julianne McGill, Ph.D., CFLE  
*Research Assistant Professor*

Rachel Odomes  
*Program Analyst*

Donna Roland  
*Outreach Administrator III*

Addison Braddock  
*Graduate Research Assistant*

## **UNDERGRADUATE RESEARCH ASSISTANTS**

Kyra Smith  
Madison Strichik  
Mya Osley  
Brendan Thomas  
Zoey Davis  
Lauren Portera  
Claire Suddarth  
India Bower  
Merrill Ann Culverhouse  
Sara Hilbun  
Olivia Depew

## **LAYOUT/DESIGN**

Spearca Communications



The Alabama Department Of  
Child Abuse And Neglect Prevention



The Children's  
Trust Fund

60 Commerce Street, Suite 1000  
Montgomery, AL 36103

phone: (334) 262-2951  
fax: (334) 262-1026  
[www.ctf.alabama.gov](http://www.ctf.alabama.gov)