

## **Minority Youth and Family Initiative Polk County**

The Polk County program uses the following strategies:

- **Culturally competent service providers,**
- **Embedded neighborhood-based care workers working in tandem with a DHS case manager,**
- **Family poverty is included in case planning, and**
- **More frequent and intensive family contacts with the worker than are currently offered by other more traditional programs.**

### **Project Description:**

A “Comprehensive Service Network” for “Youth of Color” in Polk County has been developed to take 15 families, provide case coordination and insure case specific results for all youth and families in the program. Under this program all youth and families referred for services will be assessed with oversight by DHS. Assessments include the North Carolina Family Assessment Scale (NCFAS) and the Colorado Risk Assessment Scale. Based on these assessments services are provided in the least restrictive, most culturally responsive, effective and efficient manner. The Project works closely with DHS to determine case specific outcomes.

The organizational design is a collaboration of The Directors’ Council (TDC) and other provider organizations pooling their resources to address risk factors associated with over-representation in juvenile justice and child welfare in African/American families. These risk factors include family management problems, substance abuse, education, poverty and poor community connectedness. The project is family focused serving families where one or more family members are DHS involved. The goal is to empower the family as a unit to mitigate future involvement with either DHS or the court system. This is accomplished through a strengths-based and family centered approach.

The project employs African/American caseworkers responsible for developing a comprehensive care plan for all families referred to the project. Based on information provided by DHS and through in-home family assessment, the care plan identifies the family strengths and needs to ensure each family becomes self-sufficient without further involvement of the public child welfare system. This means that in addition to the psycho/social needs of the family, family income, health, housing, food, clothing, and educational needs are also considered and addressed.

When referrals are made the project case manager will attend meetings to ensure that the unique cultural and ethnic needs of the family are taken into consideration when services are planned and provided. Additionally, one African/American care worker will be employed to act as a coach/helper to the families in the project. This person is available to the families when needed to help the family manage everyday needs. For example, depending on family needs, they may provide emergency transportation, help plan and prepare meals when needed, and assist with emergency child care aiding the family in successful working through

the demands of daily living. The primary focus of these activities will be to model appropriate behaviors while teaching the family how to successfully function independently.

### **Target Population and Referral Process:**

This Project serves 15 African/American families who have a minimum of 2 children in the home and with at least one youth receiving services from DHS. Eligible families for this project will have a founded abuse or neglect report or an adjudicated CINA or delinquency with no youth in the family over 12 years of age. Each family agrees to voluntary participation in the project. Cases will be assigned to the project by DHS following assessment. Upon referral the project case manager an initial meeting is held with the family to explain the program. The referral packet includes the initial NCFAS and DHS service plan.

### **Community Involvement in the Planning Process**

Community groups have met since at least 2001 developing a model that would provide culturally competent evidenced-based practice in minority communities in Polk County. Through a process of narrowing the field to the most appropriate approach, community groups have in the past identified desirable models as those characterized by the following:

- Services must be based in the community.
- Services and supports must be individualized, built on strengths, and meet the needs of children and families across life domains to promote success, safety, and permanence in home, school, and community.
- The process must be culturally competent, building on the unique values, preferences, and strengths of children and families, and their communities.
- Families must be full and active partners in every level of the process.
- Extended families are very significant according to research and should be involved whenever possible.
- Principles should be followed where interventions are team-driven involving the family, child, natural supports, agencies, and community services working together to develop, implement, and evaluate the individualized service plan.
- Child and family teams must have adequate, flexible approaches, and flexible funding.
- Plans must include a balance of formal services and informal community and family resources.
- An unconditional commitment to serve children and families is essential.
- The plan should be developed and implemented based on an interagency, community-based collaborative process.
- Outcomes must be determined and measured against a current system baseline (treatment as usual or TAU), for the program (fidelity), and for the individual child and family.
- Access to a policy group is essential in organizational plan

## **Project Outcomes:**

- Improve academic performance and reduce drop out rates for youth through increased participation and involvement in school.
- Help increase the health, and educational or vocational level of custodial parent/s through referrals to programs offered by participating organizations that are equipped to provide culturally appropriate services. The goal is to increase family income through earnings.
- No subsequent abuse, neglect or family violence in families participating in the project.
- Families will show gains on the NCFAS rating scale.

It is further anticipated that this project will test whether using culturally competent service providers, indigenous neighborhood-based care workers, addressing family poverty in case planning and using increased and intensive family contacts improves outcomes for African American children, youth and families in Polk County. This specialized programming using small caseloads will allow staff to focus on client results and allow for the development of a model that can be replicated.

## **Program Monitoring and Evaluation**

Outcomes of similar interventions have been measured by looking at several factors. Youth in residential treatment, clinical scales measuring mental health and substance abuse issues, recidivism rates, and reports of abuse and neglect are appropriate measures. Measures of the intervention process or “treatment fidelity” is also important to measure. The project works with the University of Iowa DMC Resource Center, Minority Youth and Families Initiative (DMC-MYFI) to evaluate the program model and outcomes. The evaluation method incorporates a process and outcome approach. The primary focus of the evaluation is effectiveness of using culturally responsive and sensitive interventions in working with African/American children, youth and families. The final evaluation report will be submitted to DHS for planning future services to minority youth and families.

A community advisory committee meets monthly to monitor program operations. The advisory committee monthly review allows the program to improve operations as information indicates changes are needed. The advisory committee comprises representatives from the community at-large, TDC, DHS and the University of Iowa.