

**DISTRICT 3  
LOCAL PLANS FOR PREVENTION  
OF CHILD ABUSE, ABANDONMENT, AND  
NEGLECT**

**2005-2009**



## Local Child Abuse Prevention Plan

District 3

Counties included in plan Alachua, Bradford, Columbia, Dixie, Gilchrist, Hamilton, Lafayette, Levy, Putnam, Suwannee, Union

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## **I. Process used to develop the plan**

The Partnership for Strong Families (PSF) was fortunate to have in place local and regional prevention plans when the instruction was provided to the districts to create a prevention plan. PSF was awarded a prevention initiative grant in the spring of 2004. With these dollars, PSF contracted with the Child Abuse Prevention Project (CAPP) to develop 6 local task forces and one regional child abuse prevention task forces. One of the goals of these task forces was to develop prevention plan for their areas. CAPP is located at the University of Florida, College of Medicine; Department of Pediatrics has been serving a 16 county area of North Central Florida since 1983. CAPP is primarily a home visiting program that covers a 16 county North Central Florida rural geographic area serving approximately 650 families and over 1500 children per year. These home-based services are a user-friendly approach that provides weekly home visits to high risk families with the primary goal of improving parenting practices. The services offered are a combination of specific parent education interventions relative to the family constellation, and case management services that are aimed at improving overall family functioning.

Through the years, CAPP has been a partnership between the University and various agencies including the Department of Children and Families and the Department of Health. CAPP provides a variety of services including the Nurturing Program, Parent Education Groups, Professional Training Programs and Consultation, as well as having developed a Foster Parent Training Program. CAPP is staffed with licensed professionals and paraprofessionals whose goal is to enhance the nurturing skills of parents and help to educate and train the professional community, as well as the community at large, about the needs of children and families. The services offered are voluntary and free of charge to those families who qualify.

One of the primary goals in PSF's contract with CAPP from March 2004 through June 2004 was for each local task force as well as the regional task force to develop a plan for prevention of child abuse, neglect and abandonment. These plans were developed in order to guide the future activities of each task force. The plans include a comprehensive approach for the prevention of child abuse and neglect in each local community and they outline a plan to promote community awareness and education for child abuse and neglect prevention. Each of the local task forces gathered information and shared it with the district-wide task force for consolidation of efforts.

A community partnership approach to child welfare requires a significant shift in ownership so that everyone in a neighborhood believes they have a role in keeping children safe and supporting families. This partnership harnesses the

creative talents of neighborhood leaders, human services providers, the faith community and local organizations to work with the child protection agencies to enhance safety and well-being for all families.

With this in mind, The Child Abuse Prevention Project at the University of Florida Department of Pediatrics established **Child Abuse Prevention Task Forces** in each community in the North Central Florida area covering the following counties: Alachua, Bradford, Columbia, Dixie, Gilchrist, Hamilton, Lafayette, Levy, Levy, Putnam, Suwannee, and Union.

These Task Forces brought together a variety of community members who know and care about the families in their communities. Out of these local community Task Forces we were able to gather information about local resources for families, identify obstacles to service provision, brainstorm creative approaches to community based prevention and develop a Plan with goals for each community.

Human services agencies, schools, faith-based groups, health care facilities, businesses, and other agencies and organizations all have a stake in helping to prevent child abuse and neglect. Working in isolation, these groups often struggle to find the resources to make an impact on the lives of children and families. Working together in a community based group like the Prevention Task Force, they can combine resources to prevent physical and emotional harm to children, build strong families, and help communities thrive.

Overall, community collaboration for the prevention of child abuse and neglect provides many benefits, such as:

- Enabling prevention efforts by addressing the strengths and needs of individual families within the context of the local community.
- Linking child abuse prevention efforts to broader community initiatives and priorities.
- Creating a wider array of services based on specific community needs and resources.
- Assisting agencies, organizations and citizens in gaining access to community leaders, target audiences, and other resources.
- Helping communities shape the strategies and network of services based on their own resources, needs, and culture.
- Providing an opportunity for agencies and organizations to share in the costs of preventing child abuse and neglect.
- Shared grant procurement and grant writing expertise.
- Networking, sharing of resources, communication and facilitation of a coordinated community response.
- Assist in the transition to Community Based Care.

All child abuse prevention collaborations seek to strengthen and support families and decrease harm to children; however, they may take many different forms. Learning about a variety of approaches can guide a community in choosing the right one for them.

The community partnership approach has primarily been applied to reaching vulnerable families as a preventive support and serving families that come to the attention of the child protection system or other community helping systems before abuse occurs.

An important step in building community collaboration is deciding which agencies, organizations and individuals to include. Professionals should look beyond the traditional participants, including agencies and organizations that do not directly serve children and families or traditionally involvement themselves in child and family advocacy efforts. These organizations can play important roles in collaborative efforts by galvanizing additional support in the community. Professionals should also solicit the involvement of parents, other concerned community members, and partners that reflect the racial, ethnic, and cultural makeup of the community. This will help bring to the table a wide range of experiences, ideas, and perspectives.

The Child Abuse Prevention Task Forces we were able to garner interest and support from a variety of community stakeholders including:

- Parents – foster, adoptive and biological
- Concerned community members
- Elected officials
- Public Health
- Healthy Start
- Healthy Families
- Children’s Medical Services
- Substance abuse treatment providers
- Domestic violence shelters
- Mental Health service providers
- Child care organizations
- Early childhood organizations and programs
- Judicial – Guardian Ad Litem and Judges
- Law enforcement - Sheriff and local Police
- State Attorney Offices
- Child Advocacy Centers
- Child Protection Teams
- Local government and public agencies
- Churches and ministerial associations
- Child advocates
- Media
- Schools & School Boards

Social service organizations  
Department of Children and Families  
Community Based Care Providers – child protective system

## II. The Magnitude of Child Abuse in Our Community

The need for child abuse and neglect prevention in District 3 is evident when you look at the extraordinary number of unduplicated victims that had verified findings or some indicators of abuse and neglect. The total number of victims with verified findings or some indicators during fiscal year 2003-2004, by county in District 3 is listed below:

COUNTY	# OF VICTIMS
Alachua	1712
Bradford	268
Columbia	596
Dixie	143
Gilchrist	149
Hamilton	115
Lafayette	40
Levy	393
Putnam	727
Suwannee	336
Union	126
<b>TOTAL</b>	<b>4605</b>

On a positive note, there were a total of 4910 victims that had verified findings or some indicators of abuse and neglect during the fiscal year 2002-2003. Therefore, District 3 had a decrease of 305 victims. However, there continues to be much work needed with regards to prevention.

Using the *Florida's Children: Needs Assessment 2003/2004*, we looked at the child maltreatment rate per 1,000 children ages 0-18 for each county for the fiscal year 2001-2002. The majority of District 3 counties are in line with the state average of 20.7 cases per 1,000 children in the population. The Department of Children and Families has defined a 'case' as roughly 1.8 children. District 3 had two counties that stood out when looking at this measure. Levy County is considered one of the 17 counties in the state of Florida at 'most risk' due to the fact that they had a child maltreatment rate of 34.3 cases per 1,000 children in the population for fiscal year 2001-2002. Lafayette County is considered as one of the 17 counties in the state at 'least risk' due to a child maltreatment rate of 9.2 cases per 1,000 children in the population.

The next indicator we looked at to assess the magnitude of child abuse in our community was the percent of children re-abused within 6 months. This is defined as the number of children that had another substantiated or indicated report of child maltreatment within a 6 month period of an initial report, divided by the number of children maltreated. The state averages when looking at the time period between September 2003 and March 2004 was 9.1% of children were re-abused within 6 months. District 3 has four counties out of eleven that are considered at 'most risk' with regards to this indicator. The counties and their percent of children re-abused within 6 months are as follows:

COUNTY	% RE-ABUSED WITHIN 6 MONTHS
Dixie	16.7
Gilchrist	16.4
Hamilton	34.1
Suwannee	12.5

Putnam county is District 3's only county that is considered at 'least risk' on this indicator and they have 5.2% of children re-abused within a 6 month period of an initial report. It is apparent when looking at these statistics that child abuse continues to be a problem in our area and prevention efforts continue to be needed.

In order to continue to decrease the number of children that are abused and neglected, there are key programs and activities that have been identified. Below is a description of these programs with their targeted population that has been found to be important components of an effective and comprehensive community-based plan. These services exist in varying levels in our community.

A. PRIMARY PREVENTION programs and activities are available for the general population before child abuse and neglect has occurred. Such programs and activities may include:

*For New Mothers and their Infants:*

- Prenatal support programs to improve pregnancy outcomes and health among new mothers and young children, as well as prepare individuals for the job of parenting.
- Home visiting programs that start working with families prenatally through infancy to help parents manage the stresses of raising children, to prevent unhealthy patterns from developing, and to link parents with resources in the community.

*For Parents:*

- Parent education and support programs to help parents develop adequate child-rearing knowledge and skills and provide a network of support to parents adjusting to new roles.



- Affordable, accessible, quality child care programs to provide positive modeling and contact for parents and children and enhance the development and education of young children.
- Parental respite care to reduce stress on parents.
- Substance abuse and domestic violence prevention/treatment programs.

*For School-aged Children:*

- Life skills training to equip children with the diverse skills, knowledge, and information they need to cope successfully with the challenges of childhood and adolescence, as well as provide children with skills to help them protect themselves from abuse.

*For the Community:*

- Public education and media campaigns to increase public knowledge and awareness of child abuse and neglect, and how individuals can make a difference in preventing it.
- Transportation so that families can access needed services and maintain employment.
- Adequate and affordable daycare so that parents can work and access needed services.
- Job training and employment services accessible and adequate to meet the needs of the local community.
- Reasonable parental leave policies and flexible work schedules for employed parents to facilitate positive attachments and help to balance their work and family responsibilities.

B. SECONDARY PREVENTION programs and activities are offered to families whose circumstances make abuse more likely to occur. Such programs and activities may include:

*For Parents:*

- Home visitor services to high-risk mothers.
- Parent aide programs to provide a supportive, one-on-one relationship for parents who may be at risk of maltreating their children.
- Respite care and support programs for parents of children with special needs.

*For Families:*

- Substance abuse treatment programs for mothers and families with young children.
- Crisis care programs and emergency services to provide immediate support to parents and children in times of exceptional stress or crisis.
- Family resource centers or schools that offer information and referral and a variety of social services to families in low-income neighborhoods.

C. TERTIARY PREVENTION, or treatment programs, provides services to families after child abuse or neglect has occurred in order to prevent the recurrence of maltreatment and to help the child and family recover. Such programs and activities may include:

*For Children:*

- Treatment and therapeutic care to minimize the long-term effects of abuse and prevent an intergenerational repetition of family violence.
- Survivor support groups for children who have been abused.

*For Families:*

- Treatment and therapy for abusers.
- Rehabilitative services for the biological family.
- Mental health services for children and families where abuse or neglect has occurred to improve family communication and functioning.
- Self-help and mutual aid groups to provide non-judgmental support and assistance to parents and families who are struggling with changing abusive or neglectful patterns.
- Support for foster families.

Since the causes of child abuse and neglect are complex, experts agree that an effective approach for preventing the problem must respond to a wide range of needs and concerns. By focusing on the protective factors that prevent child maltreatment and the risk factors that contribute to it, a community can develop a comprehensive strategy that offers a broad spectrum of services and supports for all families. These risk factors and protective factors were widely discussed in all the Task Forces in an effort to identify the most pressing needs and the most effective approaches. First, we will discuss the community protective factors and strengths. Then, we will take a look at our community challenges and risk factors.

### **III. Community Protective Factors and Strengths**

It is somewhat difficult to generalize our community protective and risk factors since District 3 is made of many communities with different strengths and needs. However, there are some general trends that are apparent when looking at the *Florida's Children: Needs Assessment 2003/2004*. There are five factors in three out of the four domains assessed where the majority of our counties are similar or better the state statistics. These three domains are the economic domain, education domain and the socio-emotional domain. The economic domain is important due to the fact that children living poverty are more likely to have multiple problems as they become adults. The more education a person has the less likelihood a person will live in poverty. This along with the fact that the more education a parent has the less likely child maltreatment occurs are two reasons that the education domain is important. Although there are fewer socio-emotional factors measured in the assessment, the stability of the family has a major effect on child maltreatment. The following five protective factors are general strengths of the 11 counties that make up District 3:

- Under the economic domain, District 3 has 10 counties that are similar or better than the state average with regards to the percentage of homes that are owner occupied. Three of these counties are considered some of the

best in the state with regards to this statistic and they are the Dixie, Levy and Gilchrist counties also known as the Tri-County.

- Also under the economic domain, we have 7 counties that rank similar to the rest of the state when looking at the rate of job growth. Since the majority of counties are extremely rural, this statistic certainly varies from year to year depending on the industry that enters and exits a particular community.
- There are two indicators under the education domain where District 3 overall shows strengths. The first of the community protective factors are the 6 counties that considered at 'least risk' compared to the rest of the state with regards to the percentage of D and F schools. This is certainly a community strength in Gilchrist, Lafayette, Levy, Putnam, Suwannee, and Union counties. However the rest of our counties are at the opposite end which will be discussed in the community challenges section below.
- The second indicator under the education domain is the percentage of kindergarten children that are ready to learn. We have nine counties that are consistent with or better than the state average with regards to this strength under the education domain. There are three counties out of the nine counties that are considered at 'least risk' on this indicator which include Gilchrist, Hamilton and Putnam counties.
- The final strength falls under the socio-emotional domain. District 3 has 10 out of 11 counties that are equal or better than the state average with regards to the percentage of two parent households. Lafayette, Suwannee and Union counties are considered at 'least risk' in the state when looking at this standard. This may be the most positive strength our communities can draw upon and certainly is the most prevalent strength amongst our diverse communities.

#### **IV. Community Challenges and Risk Factors**

When looking at the *Florida's Children: Needs Assessment 2003/2004*, unfortunately the community challenges and risk factors seem to outnumber the community strengths. This should be seen not a negative but as an opportunity for improvement. The following are 8 risk factors in the three of the four domains where the majority of our counties rank high:

- Child poverty rate under the economic domain is a major concern for our communities. Five of our counties rank "at most risk" for this indicator and the rest of our counties are similar to the state average. The five counties at 'most risk' include Dixie, Hamilton, Lafayette, Levy and Putnam. Members of the task forces see this indicator as one of the most important

with regards to child abuse and neglect since poverty is linked to poor outcomes for children.

- There are three risk factors that stand out for our district under the education domain. The first one is the percentage of D and F schools. As discussed previously, the district is polarized on this factor with 5 counties being considered at 'most risk' for this factor and 6 counties considered 'at least risk'. The counties that are at 'most risk' include two of our most populated counties which are Alachua and Columbia counties which translate to more of our children being at risk with regards to this indicator.
- The second challenge under the education domain is the percentage of elementary school children that attend special education classes. District 3 has 6 counties that are considered at 'most risk' on this indicator.
- The final risk factor under the education domain that stands out is percentage of children currently on waiting lists for subsidized childcare. We have 6 counties that are at 'most risk' for this indicator.
- Under the health and safety domain, there are four risk factors that are concerning. The first challenge is rate of children under receiving health insurance. Dixie, Hamilton, Lafayette, Levy and Putnam counties all rank at 'most risk' for this indicator.
- The next indicator under the health and safety domain is birth spacing. District 3 has 5 counties that rank at 'most risk' for this risk factor. Those counties include Dixie, Gilchrist, Lafayette, Putnam and Union.
- The child death rate for District 3 is definitely a factor that needs further research. In 2002, District 3 has 7 counties that rank at 'most risk' for this indicator which is obviously concerning and numbers for 2003 did not improve.
- The final factor under the health and safety domain is the percentage of pregnant women who smoke. There are 6 counties in District 3 that rank at 'most risk' for this indicator. They include Bradford, Dixie, Gilchrist, Levy, Suwannee, and Union counties.

## **V. Prioritized Community Needs Related to the Prevention of Child Abuse, Neglect, and Abandonment**

All 6 of the District 3 Child Abuse Prevention Task Forces agreed that there were some common needs related to the prevention of child abuse, neglect and abandonment in our communities. The following priorities represent the overall

feelings the members of the six task forces have about the services that are missing or inadequate and that might be attainable with limited or no funding.

## **PRIORITY #1**

### *Parent Education and Support*

All the communities expressed the need for more parent education and support services. Specifically home-based services are needed due to geography, lack of transportation, and history of poor attendance at groups. The home also provides additional information for assessment, which will more accurately guide intervention. Most Counties spoke to the need for an increase in programs like Family Builders, which works with protective service cases where there are indicators of abuse or neglect, Healthy Families and the Nurturing Program, that work with prevention cases with no indicators.

Parent education groups are considered a more effective intervention in facilities where parents are a “captive audience”, such as GED programs, correctional facilities or drug treatment facilities.

There was also a concern about gaps in services for families reunifying after foster care. There is a need for in-home services for those families to prevent re-abuse/neglect and to spare the child and the system a repeat stay in foster care.

Some Counties wanted to see more support for foster parents; with groups or in-home services to help reduce disruptions in placements of foster children and in recruitment of new foster parents.

- Increase in-home parent education and support services

## **PRIORITY #2**

### *Family mentoring*

In many communities, the idea arose to develop mentoring programs for families, especially young families. There are mentoring programs for children, but many times these are unable to access the parents and home life, where many of the problems can best be solved.

- Explore developing a volunteer mentoring program for families. These could be coordinated through local churches or civic groups.

## **PRIORITY #3**

## *Resource Development and Coordination*

Two main problems exist in our communities.

1. Not enough services for families.
2. When services exist, they are not accessible or known by the community.

- Fundraising

All the Counties recognized the need to raise funds for specific gaps in services for the families in their community.

- Explore developing a regional committee that could provide technical assistance for the Counties, particularly the small rural Counties, to pursue grants and funding opportunities. This would include providing assistance to churches who are becoming interested in taking advantage of a State wide faith-based child welfare initiative.
- Use the Task Forces as a group to explore the idea of local Children Services Councils which could support local initiatives and efforts.

- Resource List

Most Counties felt that they did not know the resources available, or the listings that are provided by various organizations are not useable. Some areas want a local number with a local person answering the phone to guide folks.

- Ideally - coordinate local resource guides, 211 initiatives and United Way efforts into one guide/website that is up to date and lists all the formal and informal helping systems in that community.
- Through the Task Forces, inform the community (through meetings and through the Task Force website) of resource lists.
- Develop a Prevention Task Force List Serve for all the Counties, where providers can get all the latest information on classes, availabilities of resources and help with specific family problems.

## **PRIORITY #4**

### *Public Media Campaign*

A media campaign was discussed in all the Task Forces and it seems to have two aspects to it. First, we want to educate the public about child abuse and prevention to facilitate their involvement, their support and their understanding. Second, we want to reach families with a message about asking for help. It was felt that families do not make use of local helping systems because there is a stigma associated with getting help and fear of being reported to authorities.

- Through the local Task Forces, develop media campaigns specific to the needs of the community.
- Access Prevent Child Abuse America and its Florida affiliate Ounce of Prevention for technical assistance.
- Develop materials that could be used region wide.

## **PRIORITY #5**

### *Training*

Most communities wanted to provide some training to schools, churches and businesses or civic organizations. It was felt that the Task Force, with all the expertise of the members and their organizations, could be used as a community resource to provide speakers, trainings and workshops about child abuse, prevention and parenting.

- Develop a PowerPoint presentation that could be used by Task Force members.
- Have a County or regional subcommittee of the Task Force that could serve as a speaker's bureau.
- Develop and/or acquire materials for children.
- Work with the schools to distribute materials or modules about prevention to augment what they are already doing as far as training on child abuse.

## **PRIORITY #6**

### *Respite care*

Families need help caring for their children, especially "special needs" children, during times of stress.

- Explore having local chapters of the Florida Respite Coalition.
- Develop parent-led cooperatives for respite care.

## VI. GOALS, MEASURABLE OBJECTIVES AND STRATEGIES TO ACHIEVE EACH OBJECTIVE

In order to develop an awareness of available services, the Partnership for Strong Families created a list of current contracted services being provided to abused and neglected children as well as a list of prevention services in District 3. This was one of the steps taken in order to develop goals, objectives and strategies for the priorities listed in the previous section. These lists are attached as Appendix A and B of this document.

The 6 local task forces developed goals, objectives and strategies that they felt were obtainable with little or no support from any established organization or funding source. The task forces believe that these grassroots' efforts can and will make a difference in their local communities. The members of these task forces chose their priorities based on their knowledge of their communities and not necessarily what the Florida's Children: Needs Assessment 2003/2004 pointed to as potential indicators. With that said, the goals, objectives and strategies mentioned below address various risk indicators and will reduce the child maltreatment rates and the percentage of children re-abused within 6 months within their communities if the strategies are executed as planned.

### Priority 1: Parent Education and Support

**Goal Statement:** Provide more parent education and support to families in our district.

#### Measurable objective(s):

#### Alachua County

1. By June 30, 2008, parent education and support focusing on child abuse prevention will be provided to all after school care programs.
2. By June 30, 2010, parent education and support focusing on child abuse prevention will be provided to teen parents.
3. By June 30, 2010, educational materials will be distributed to all pediatrician offices and hospitals.

#### Strategies:

What will be done?	Who will oversee?	Who will do it?	Start Date:	Finish Date:
1a) Develop a comprehensive list of all after school programs and the director's	Child Abuse Prevention Project, Partnership for Strong Families	Alachua County Child Abuse Prevention Task force members, Alachua County	July 1, 2005	June 30, 2008



<p>name/contact information for each program.  <b>1b)</b> Make initial contact with directors.  <b>1c)</b> Develop plan with directors to provide parent education and support and begin outreach</p>		School Board		
<p><b>2a)</b> Develop a comprehensive list of all schools and other organizations currently providing services to teen parents and the director's name/contact information for each program.  <b>2b)</b> Make initial contact with directors.  <b>2c)</b> Develop plan with directors to provide parent education and support to teen parents in Alachua County.</p>	Child Abuse Prevention Project, Partnership for Strong Families	Alachua County Child Abuse Prevention Task force members, Alachua County School Board	July 1, 2005	Ongoing
<p><b>3a)</b> Develop a comprehensive list of all pediatricians and other medical providers in Alachua County  <b>3b) Produce</b> parent education materials for distribution.  <b>3c)</b> Schedule meetings with office managers and Directors of nursing to discuss child</p>	Child Abuse Prevention Project, Partnership for Strong Families	Alachua County Child Abuse Prevention Task force members, Alachua County Health Dept and private medical providers	July 1 2005	June 30, 2010

abuse prevention and provide them with materials				
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**Measurable objective(s):**

**Columbia County**

1. By June 30, 2010, faith based parent education programs will be implemented in Columbia County.

**Strategies:**

<b>What will be done?</b>	<b>Who will oversee?</b>	<b>Who will do it?</b>	<b>Start Date:</b>	<b>Finish Date:</b>
<b>1a)</b> Develop a comprehensive list of churches in Columbia County. <b>1b)</b> Solicit support from churches to pilot "Parenting God's Way" <b>1c)</b> Implement program county wide.	Child Abuse Prevention Project, Partnership for Strong Families	Columbia County Child Abuse Prevention Task force members, Ministerial Alliance, local churches	July 1, 2005	June 30, 2010

**Measurable objective(s):**

**Bradford/Union County**

1. By June 20, 2008, parent education videos will be distributed and played in all health departments, medical clinics, and private doctor's offices waiting rooms

**Strategies:**

<b>What will be done?</b>	<b>Who will oversee?</b>	<b>Who will do it?</b>	<b>Start Date:</b>	<b>Finish Date:</b>
<b>1a)</b> Develop a comprehensive list of medical providers in Bradford/Union County. <b>1b)</b> Identify funding source for purchases or	Child Abuse Prevention Project, Partnership for Strong Families	Bradford/Union County Child Abuse Prevention Task Force members, Bradford/Union medical community	July 1, 2005	On-going

<p>creating child abuse prevention videos.</p> <p><b>1c)</b> Solicit support from the medical community to play videos continuously in waiting rooms.</p> <p><b>1d)</b> Distribute videos and ensure they are replaced if necessary.</p>				
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**Measurable objective(s):**

**Suwannee/Lafayette/Hamilton Counties**

1. By June 30, 2010, there will be a volunteer that goes to the Lafayette Health Dept Pediatric Clinic once per week to provide parent education and support.
2. By June 30, 2010, a program to provide parent education and support will be established in the Suwannee/Lafayette/Hamilton county area using interns from local community colleges.

**Strategies:**

<b>What will be done?</b>	<b>Who will oversee?</b>	<b>Who will do it?</b>	<b>Start Date:</b>	<b>Finish Date:</b>
<p><b>1a)</b> Design a program that addresses Lafayette Health Dept. client's needs</p> <p><b>1b)</b> Recruit a pool of qualified volunteers to provide the service.</p> <p><b>1c)</b> Implement program.</p>	Child Abuse Prevention Project, Partnership for Strong Families	Suwannee, Hamilton and Lafayette County Child Abuse Prevention Task force members, Lafayette Health Dept. community volunteers	July 1, 2005	June 30, 2010
<p><b>2a)</b> Develop relationships with institutions that can provide students needing internships. Establish a pool of interns.</p>	Child Abuse Prevention Project, Partnership for Strong Families	Suwannee, Hamilton and Lafayette County Child Abuse Prevention Task force members, educational institutions,	July 1, 2005	June 30, 2010

<p><b>2b)</b> Identify organizations that would provide space for parenting education program</p> <p><b>2c)</b> Determine what curriculum to use.</p> <p><b>2d)</b> Provide service.</p>		student interns		
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**Priority 2: Family Mentoring**

**Goal statement(s):** Develop volunteer mentoring programs for young families to assist with issues as they arise.

**Measurable objective(s):**

**Bradford/Union Counties:**

1. By June 30, 2010, local churches will implement volunteer family mentoring programs to serve young families in their communities.

**Strategies:**

<b>What will be done?</b>	<b>Who will oversee?</b>	<b>Who will do it?</b>	<b>Start Date:</b>	<b>Finish Date:</b>
<p><b>1a)</b> Compile a list of all church and contact info.</p> <p><b>1b)</b> Survey local churches for level of interest</p> <p><b>1c)</b> Develop mentoring program to implement in local churches.</p> <p><b>1d)</b> Pilot project in one or two churches.</p> <p><b>1e)</b> Provide training and marketing for the project.</p>	Child Abuse Prevention Project, Partnership for Strong Families	Bradford/Union County Child Abuse Prevention Task force members, Bradford/Union church community and ministerial alliance	July 1, 2005	June 30, 2010

**Measurable objective(s):**

**Dixie/Levy/Gilchrist Counties:**

1. By June 30, 2010, local churches will implement volunteer marriage support programs to serve young families in their communities.

**Strategies:**

<b>What will be done?</b>	<b>Who will oversee?</b>	<b>Who will do it?</b>	<b>Start Date:</b>	<b>Finish Date:</b>
<b>1a)</b> Compile a list of all church and contact info. <b>1b)</b> Survey local churches for level of interest <b>1c)</b> Develop mentoring program to implement in local churches. <b>1d)</b> Pilot project in one or two churches. <b>1e)</b> Provide training and marketing for the project.	Child Abuse Prevention Project, Partnership for Strong Families	Dixie/Levy/Gilchrist County Child Abuse Prevention Task force members, Dixie, Levy and Gilchrist church community and ministerial alliance	July 1, 2005	June 30, 2010

**Priority 3: Resource Development and Coordination**

**Goal statement(s):** Develop more resources in order that more services can be available for our families and ensure that the community is aware of the services that do exist.

**Measurable objective(s):**

**Dixie/Levy/Gilchrist Counties:**

1. By June 30, 2007, a local phone number will exist for families needing services and support.

2. By June 30, 2010, the Tri-County task force will partner with existing 5013C organizations in order to fundraise and receive donations to further local prevention efforts.

**Strategies:**

<b>What will be done?</b>	<b>Who will oversee?</b>	<b>Who will do it?</b>	<b>Start Date:</b>	<b>Finish Date:</b>
<p><b>1a)</b> Survey local organizations that may have an interest in supporting a resource hotline</p> <p><b>1b)</b> Research existing similar services that are already available in other areas.</p> <p><b>1c)</b> Assist with identifying funding if necessary.</p> <p><b>1d)</b> Update and expand comprehensive list of services in the local area.</p>	Child Abuse Prevention Project, Partnership for Strong Families	Dixie, Levy and Gilchrist County Child Abuse Prevention Task force members, United Way 211 service,	July 1, 2005	June 30, 2007
<p><b>2a)</b> Survey local organizations that may have an interest in supporting prevention efforts.</p> <p><b>2b)</b> Partner with existing 5013C organization.</p> <p><b>2c)</b> Plan fundraisers</p> <p><b>2d)</b> Develop spending plan with new dollars focusing on prevention efforts</p>	Child Abuse Prevention Project, Partnership for Strong Families	Dixie, Levy and Gilchrist County Child Abuse Prevention Task force members	July 1, 2005	June 30, 2010

**Priority 4: Public Media Campaign**

**Goal statement(s):** Educate the public about child abuse and prevention to facilitate their involvement, their support and their understanding. Empower families to ask for help when they need it.

**Measurable objective(s):**

**Alachua County:**

1. By June 30, 2010, a media campaign for the prevention of child abuse will be developed and implemented by the task force in Alachua County.

**Strategies:**

<b>What will be done?</b>	<b>Who will oversee?</b>	<b>Who will do it?</b>	<b>Start Date:</b>	<b>Finish Date:</b>
<p><b>1a)</b> Recruit advertising/marketing individuals to donate their services</p> <p><b>1b)</b> Develop effective prevention materials to be used in print, radio and TV.</p> <p><b>1c)</b> Look for potential funding sources if necessary.</p> <p><b>1d)</b> Identify the most effective venues for advertising in local communities.</p>	Child Abuse Prevention Project, Partnership for Strong Families	Alachua County Child Abuse Prevention Task force members, local media representatives	July 1, 2005	June 30, 2010

**Priority 5: Training**

**Goal statement(s):** Provide training to schools and churches in order that all community members are knowledgeable about child abuse, prevention and parenting.

**Measurable objective(s):**

**Alachua County:**

1. By June 30, 2010, training will be provided for teachers, guidance counselors, and students from each school.

**Strategies:**

<b>What will be done?</b>	<b>Who will oversee?</b>	<b>Who will do it?</b>	<b>Start Date:</b>	<b>Finish Date:</b>
<p><b>1a)</b> Develop materials and power point presentation.</p> <p><b>1b)</b> Identify which task force members are willing to speak.</p> <p><b>1c)</b> Coordinate with the school system in scheduling</p>	Child Abuse Prevention Project, Partnership for Strong Families	Alachua County Child Abuse Prevention Task force members, Alachua County school system	Available now	On-going

speaking engagements.				
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**Measurable objective(s):**

**Columbia and Dixie/Levy/Gilchrist Counties:**

1. By June 30, 2010, training will be provided in local churches so that members are knowledgeable about child abuse, prevention and parenting.

**Strategies:**

<b>What will be done?</b>	<b>Who will oversee?</b>	<b>Who will do it?</b>	<b>Start Date:</b>	<b>Finish Date:</b>
<p><b>1a)</b> Develop materials and power point presentation.</p> <p><b>1b)</b> Identify which task force members are willing to speak.</p> <p><b>1c)</b> Coordinate with local church in scheduling speaking engagements.</p>	Child Abuse Prevention Project, Partnership for Strong Families	Columbia and the Tri-County County Child Abuse Prevention Task force members, Local churches	Available now	On-going

**Priority 6: Respite Care**

**Goal statement(s):** Assist families in times of stress by providing respite care for their children.

**Measurable objective(s):**

**Bradford/Union Counties:**

1. By June 30, 2010, Bradford/Union Counties will have respite services available for stressed families dealing with special needs children.

**Strategies:**

<b>What will be done?</b>	<b>Who will oversee?</b>	<b>Who will do it?</b>	<b>Start Date:</b>	<b>Finish Date:</b>
<p><b>1a)</b> Contact the Florida Respite Coalition to explore</p>	Child Abuse Prevention Project, Partnership for	Bradford/Union County Child Abuse Prevention Task	July 1, 2005	Ongoing



<p>possibility of having a local chapter</p> <p><b>1b)</b> Develop parent-led cooperatives for respite care.</p> <p><b>1c)</b> Identify sources of referrals for those needing respite.</p> <p><b>1d)</b> Look for potential funding sources if necessary.</p>	<p>Strong Families</p>	<p>force members, Florida Respite Coalition</p>		
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## VII. LOCAL AND STATEWIDE ACTION REQUESTS

Locally, there is a great need for all the organizations that provide services to children and families to come together and promote better communication. Once better communication is established, the system needs to look at how organizations can combine existing resources to provide a higher quality of service to the people in our community.

Statewide, child abuse prevention dollars need to be increased. Although there have been some modest improvements, there seems to be a lack of importance placed in this area in our state legislature and there likely will not be any dramatic changes in current statistics if this shift does not occur. The second statewide action request is for community-based care agencies to have more flexibility with the contract dollars received from the Department of Children and Families. The state has awarded these agencies contracts to provide child welfare services and should allow CBC's flexibility in order to best meet the needs of the clients in their communities.





## APPENDIX B

Partnership for Strong Families has contracts with the following agencies that are **currently serving** abused, abandoned, and neglected children and their families in our community:

Program	2004/2005 Contract Amount	Number of Children/Families Served in 2003		Impact of Program		Does This Address a Community Priority? (Y or N)	Keep, Increase, or Reduce
		Children	Families	Protective factors increased	Risk factors decreased		
CHS-Adoptions	\$1,031,344.00					Yes	Keep
Meridian	\$1,794,391.00					Yes	Keep
FPS	\$1,806,277.00					Yes	Keep
CHS-care mgmt	\$645,228.00					Yes	Keep
Florida Mentor	\$80,000.00					Yes	Keep
CHS – intensive in-home	\$988,460.00					Yes	Keep
CHS – Visitation Center	\$85,167.00					Yes	Keep

Alachua County – 8 <sup>th</sup> circuit	\$34,200.00					Yes	Keep
UF	\$184,962.00					Yes	Keep
Corner Drugstore-IL	\$408,191.00					Yes	Keep
Corner Drugstore-emergency shelter	\$119,280.00					Yes	Keep
Resolutions Health Alliance	\$23,524.00					Yes	Keep
Neighbor to Family	\$99,667.00					Yes	Keep
Craft Group Home	Unit cost					Yes	Keep
Florida Baptist Children's Home	Unit cost					Yes	Keep
Florida Sheriffs Ranch	Unit cost					Yes	Keep
Girls and Boys Town	Unit cost					Yes	Keep

Heart of Florida	Unit cost					Yes	Keep
Pleasant Place	Unit cost					Yes	Keep
World Good News	Unit cost					Yes	Keep