

<b>Learning Conversation Notes</b>									
<b>Name of Partner: Placer Women's Center – PEACE for Families</b>	<b>Date: February 22, 2007</b>								
<b>Number of Children Served: 11 Eight children were from Placer County</b>	<b>Ages:</b> 0 yr (3), 1 yr (2), 2 yr (0), 3 yr (2), 4 yr (3), 5 yr (1)								
<b>When Served: August 1, 2006 through January 31, 2007</b>	<table border="0"> <tr> <td><b>Gender:</b></td> <td><b>Ethnicity:</b></td> </tr> <tr> <td>6-Male</td> <td>7 - Caucasian</td> </tr> <tr> <td>5-Female</td> <td>1 – Hispanic</td> </tr> <tr> <td></td> <td>3 – Other</td> </tr> </table>	<b>Gender:</b>	<b>Ethnicity:</b>	6-Male	7 - Caucasian	5-Female	1 – Hispanic		3 – Other
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<b>Report Participants: Data extraction and Demographic tool=Gina Herum; Charts and Analysis=Claudia Nakata, Tatiana Ivanic; Financial Sustainability Plan=Jenni Toedtemeier</b>									
<b>Outcomes:</b> <ul style="list-style-type: none"> <li>• <b>Mothers use positive communication and parenting to keep their children safe, healthy, at home, learning and supported.</b></li> <li>• <b>A financial stability plan will continue to exist and be implemented.</b></li> </ul>									
<b>Performance Measures:</b> <ul style="list-style-type: none"> <li>• <b>Demographic (age, gender, and when service provided) utilizing First 5 Placer Demographic Tool</b></li> <li>• <b>Placer Early Childhood Outcome Screens</b></li> <li>• <b>Updates on financial sustainability plan</b></li> </ul>									

**What is this data telling us about achievement of outcomes?**

**Demographics**

There are eight mothers and 11 children in this timeframe. While the mean age of the 11 children was statistically 2.1, the majority of children coming into the shelter are 3 and 4 years old. Three of the 11 children were infants (under 1).

Four of the eight mothers (5 children) are originally from Placer County (Roseville, Auburn, Sheridan), representing 45% of the children. The other four mothers (6 children) are from other areas (Sacramento, Carmichael, Menlo Park). Of the four out-of-county mothers, two have remained in Placer County. One of them is currently in our supportive housing program and resides in Auburn with her 2 children; the other lives in Placer County with her 1 child but is not part of our program. Out of the 11 children served for this timeframe, 8 have remained in Placer County (73%).

2 siblings over 5 years were also served during this period. These two siblings remain in Placer County.

**Program Strategies:**

Two weekly classes emphasize how brain development is affected when children 0-5 are exposed to domestic violence – even if the child wasn't physically harmed or directly approached by the abuser. The mothers served during this time frame were exceptionally receptive to this material and responded to other programs with great enthusiasm.

Parent Child Interactive Therapy (PCIT), where mothers are coached via ear piece while interacting with their child(ren) continues. Crisis Counselors and Case Managers are well versed in the methods used and re-emphasize the models with the moms on a daily basis. The result has been very positive, with moms teaming up to guide each other's children; the children receive a consistent message from all shelter adults and develop a level of trust as they learn they can predict the outcome of their own behaviors.

### **First 5 Partner Collaborations:**

Collaboration with other agencies has provided additional benefits for our clients. With three infants in the shelter, the benefits of breastfeeding have been emphasized and our moms have been referred to WIC and the Breastfeeding Coalition of Placer County. Along this line for a healthier environment, a push to lower the smoking rate among shelter clients has been in force and clients are encouraged to attend smoking cessation classes at KIIS (Kids Involuntarily Inhaling Secondhand Smoke). Various staff members have been actively involved with some clients who are participating in the STEP program – attending wrap around meetings and providing advocate support at court hearings. Referrals to Child Abuse Prevention Council/Family Resource Centers and Golden Sierra Lifeskills have resulted in our clients' participating in educational classes and additional parent-child activities. MDIC was approached regarding therapist participation in the interview panels and this will be handled on a case by case basis.

### **Financial Sustainability**

The report is attached.

### **Early Childhood Outcome Screens**

The outcome screen data is attached.

Outcome screening forms are completed for all 0-5 clients (and everyone else as well) at entry into the shelter and again at exit. Length of stay at the safe house can range from three days (emergency) to eight months. The standard domestic violence program is 60 days, with an additional six months if there is chemical or alcohol dependency.

### **Indicator 1: Cared for, protected and receiving the necessities of life**

No declines, two remained at 1 (1 child stayed only one day, 1 child returned to abuser with mother)

### **Indicator 2: Not being physically, sexually or emotionally abused by others**

One decline, two exited at 1 (1 child stayed only one day, 1 child returned to abuser with mother)

### **Indicator 3: Not at risk of injury or illness**

One decline, three exited at 1 (1 child stayed only one day, 1 child returned to abuser with mother, 1 child observed in car with DUI mother – CPS report filed)

### **Indicator 4: Demonstrates appropriate self-comforting behavior**

The one blank score was a typo. This score should have been reported as a 4.

### **Indicator 5 and 6: Free of disease/illness and receiving nutritious foods**

All eleven children improved in these areas. Mothers are encouraged to participate in smoking cessation programs and referred to breast feeding support groups. Curriculums in two weekly groups emphasize the importance of healthy eating and providing a wide range of fresh foods for the family.

**Indicator 7: Free of exposure to illicit drugs, alcohol, tobacco and other hazards**

One decline (stayed only one day), four remained at 1 (2 entered housing with mom who smoked heavily, 1 returned to abuser, 1 mother tested positive for drugs)

**Indicator 8: Engages in unrestricted play time**

All eleven showed improvement in this area.

**Indicator 9: Achieving appropriate level of physical development.**

All but one child showed improvement in this area; 1 child indicated a hearing impairment and speech problem and on exit had not yet been assessed or diagnosed (shared custody with long-distant father made it difficult to arrange).

**Indicator 10: Achieving appropriate level of emotional development**

All children improved in this area except the child who was in the program for only one day. A more stable and resourced counseling staff, including case management and on-going interaction with crisis counselor staff, combined with PCIT (Parent Child Interactive Therapy) has resulted in the overall improved emotional stability in this group of children.

**Indicator 11 and 12: Living in a safe/stable/nurturing environment and interacting appropriately with other persons**

All children improved in this area except the child who was in the program for only one day. The collaboration between Crisis Counselors, Therapists and moms have created a consistent message to all children in the safe house; this cooperative theme builds trust and generates a harmonious mood in the house.

**Indicator 13: Participating in a learning environment with appropriate interactive enrichment activities**

Except for the one child in the program for a day, all children improved in this area. An activity curriculum (attached) created by child care specialists (current public school and Head Start teachers) has been implemented and is being used by all care givers. Reading Time has been expanded to allow all moms to exit with several books for each child to continue this evening ritual with their children.

**Indicators 14, 15 and 16: Achieving appropriate levels of learning/speech development; experiencing age-appropriate social relationships with other children.**

No declines. Two children exited at 1 or 2: one child with hearing difficulties, one child was there only one day. All children have group time with a child care specialist eight times per week. Activities include Art, Music, Reading Time and Dramatic Play. "Free time" outside is also included as weather permits.

**Indicators 17 through 20: Formal support network, positive relationship with child, positive parenting and knowledge/ability to foster the child's development**

One decline (returned to abuser with mother) and one remained at level 1 (in the safe house for one day). The combination of counseling and education encouraged the moms to take a more active role in their child's development.

### **In what ways will we apply what we have learned from our data?**

Collaboration between the Crisis Counselors, Case Managers, Therapists and Moms results in a positive outcome for the children. We will continue to push this collaborative method and stress the importance of 0-5 brain development; it had a motivating impact on the moms.

Giving clients a multitude of resources (First 5 Partners) to address the non-domestic violence areas of their lives increased the optimism levels of our mothers. Being given these choices has helped create a positive atmosphere among our clients, which is passed down to the children, who have also demonstrated improvements in their own attitudes and behaviors. We will continue to encourage our mothers to seek additional community resources to augment their progression toward a positive, stable life.

### **Other points that were made during analysis:**

- Again, the length of stay at the safe house is proportionate to the level of improvement seen in the relationship and development of moms and children. There were some unique challenges, as two mothers grappled with custody issues and had their children only part of the time during their stay.
- Another important factor is the consistent interpretation of the score values. It was noted that, upon analysis, managers did not agree with a case manager's assessment of "5" to several indicators for two siblings. Proper staff calibration of each score will be discussed with appropriate staff.
- Different personalities respond differently to education, guidance and structure. Varying personalities living in an enclosed, structured environment react differently to others' stress and trauma. Sometimes the collective personalities result in a "happy" house. Sometimes not. The level of cooperation and cohesiveness, based on the different personalities, can directly affect the motivation and progress of the children, regardless of age.
- Two mothers were challenged by child custody issues, and did not have consistent access to their (3) children. While their children's stay at the safe house reflected only 11, 12 and 8 days, their mothers followed the program for 51 days and 230 days. On-going education made it possible for these moms to re-establish a strong, nurturing relationship with their child(ren) between the gaps in custody. Currently both mothers are out of the shelter and maintaining either full time or consistent living arrangements with their children.

### **From the Last Conversation (August 17, 2006)**

- A survey to measure continued success (or not) will be administered to families completing our housing program; three month and nine month evaluations will be attempted. These surveys will measure the progress of the entire family unit rather than just 0-5 children (Claudia)
- The tracking of Placer County families being referred to out of county shelters will begin in the next reporting period (Gina, Claudia, Tatiana).

### **Next Steps:**

- Establish with Data Collections the means to track families being referred to out of county shelters (Gina, Claudia, Tatiana)
- Work on establishing a uniform interpretation of assessment scores to ensure a standardized assessment of all clients (Tatiana).
- Schedule follow up with "graduated" clients to analyze short term success after the program. Administer surveys that measure the mom's perception of her children's health and development (Claudia, Tatiana)