



CHAPIN HALL

CENTER FOR CHILDREN
AT THE UNIVERSITY OF CHICAGO

***Creating Effective
Prevention Systems To Nurture
Children and Strengthen Families***

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Key Concepts

- Review the changes in prevention thinking and program planning over the past 30 years
- Identify the most promising lessons emerging from this evolutionary process for defining effective programs, staffing patterns and organizations
- Identify procedures for better integrating new knowledge into the planning process

Prevention's Evolutionary Path

- Wave 1: Definition and Awareness (1962-1980)
- Wave 2: The Service Continuum (1980's)
- Wave 3: The Developmental Paradigm (1990's)
- Wave 4: The Community Paradigm

Wave 1: Definition and Awareness

- **Focus:** Public education/awareness
- **Lessons Learned:**
 - Social problems are often more complex and difficult to define than first imagined
 - Serious cases are generally only a small proportion of the total concern
 - Social problems are a function of multiple personality, environmental and cultural challenges

Wave 2: Expanded Service Options

- **Focus:** Support a variety of interventions
- **Lessons Learned:**
 - Change is possible but not universal--many high risk children were left behind
 - Not all programs should be replicated – selection must be strategic
 - Early intervention with new parents/young children offered the greatest promise in reaching selected outcomes

Wave 3: The Developmental Paradigm

- **Focus:** Reach *ALL* new borns
- **Lessons Learned:**
 - Empirical evidence confirms home visitation benefits but underscores limitations
 - Community matters but how parents draw on community resources (both formal and informal) and how to strengthen these linkages remain unclear

Wave 4: The Community Paradigm

- **Focus:** Supportive communities/integrated systems
- **Planning Parameters:**
 - Early intervention
 - Require programs to embrace evidence-informed practice
 - Create systems to support continuous program improvement

Quality Services As *Leverage* Not Solution

- **Technical solutions to strengthening systemic capacity**
 - Supporting diverse, high-quality programs and supportive services for new parents
- **Adaptive challenges to strengthening systemic capacity**
 - Creating a culture which validates seeking help and giving help
 - Altering institutional structures and openness to collaboration and shared responsibility for common objectives
 - Altering the political process to embrace investment in young children

Creating “Learning Environments”

- Effective programs
- Effective and well-supported staff
- Effective community organizations
- Effective systems
- Effective quality control

Effective Interventions

- Theoretical integrity
- Intervention targets the earliest stages of the developmental process
- Employs persistent, but respectful outreach methods to engage multi-problem families
- Systematically examines the needs of the target population across a number of domains
- Builds a context that offers ongoing support and provides access to other interventions

Effective Staffing Plans

- Prevention is about building relationships not delivering a product – hire relationship builders
- For the most intensive services, maintain low caseloads (15 per worker)
- Provide staff comprehensive initial and in-service training opportunities
- Provide staff multiple opportunities for individual and group supervision

Effective Community Organizations

- Strong leadership at staff and board level
- Open and inclusive management culture
- Resource stability both fiscal and human
- Transparent and accessible performance data

Characteristics of Effective Systems

- Cross agency agreement on a common vision and set of shared outcomes
- Utilize diverse resource streams – human & fiscal
- Build in stages – self-sufficient components that can link to other options as they emerge
- Integrated data systems where information is shared across agencies to both monitor impacts and build knowledge
- All service is local – quality is critical so insure local providers “own” the product

Evidence-Based Decision Making

- Carefully review research findings in light of your theoretical assumptions and participant needs
- Value both implementation and outcome research
- Seek programs that recognize the need for continuous self-assessment and adaptation
- Be as critical of potentially positive findings as you are of negative findings
- Accept the fact that not all things can be “proven”

Building for Quality

- Determine common outcomes and indicators
- Identify elements of programs suitable for monitoring
- Create reporting system to monitor performance “in real time”
- Use data to identify programs facing challenges and benchmarks needing revision

Red/Green Charts

Benchmark	“A”	“B”	“C”
Seen within 30 days	Green	Green	Green
Achieve target service levels	Green	RED	Green
Retained at least 12 months	RED	RED	RED
Provided “medical home”	Green	RED	RED
Assessments completed	Green	RED	Green

For additional information:

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Staying the Course

The Great Society asks not how much, but how good; not only how to create wealth but how to use it; not only how fast we are going, but where we are headed.

It proposes as the first test for a nation: the quality of its people.

This kind of society will not flower spontaneously from swelling riches and surging power.

It will not be the gift of government or the creation of presidents. It will require of every American, for many generations, both faith in the destination and the fortitude to make the journey.

And like freedom itself, it will always be challenge and not fulfillment.

LBJ (1965)