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OFFICE OF PROGRAM POLICY ANALYSIS AND
GOVERNMENT ACCOUNTABILITY



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RESEARCH MEMORANDUM

Department of Health and Department of Children and Families Child Abuse Prevention Programs Include Some Similar Functions, but Direct Duplication Is Minimal

August 25, 2009

Summary

As requested, OPPAGA examined whether duplication exists between the Department of Health's and the Department of Children and Families' child abuse prevention programs. Although many aspects of the programs differ, both programs perform similar functions in providing public education and conducting training for health and child welfare professionals. However, there is little direct duplication in the specific activities the programs perform to carry out these functions. We also examined the option of consolidating these activities within one department, but concluded that if the Legislature wishes to maintain the current level of effort for public awareness campaigns and training to prevent child abuse, there is no compelling reason to consolidate the programs.

Program Purpose, Organization, and Responsibilities

Children who have been abused or neglected are at risk of adverse and costly outcomes throughout their lives, including poor physical, behavioral, and mental health and difficulties in becoming and remaining self-sufficient. In an effort to avoid these negative outcomes, the Legislature funds child abuse prevention programs at the Department of Health and the Department of Children and Families to educate and support families and train health care and child welfare professionals.

Department of Health. The Department of Health's mission is to promote, protect, and improve the health of all people in Florida. In accordance with its mission, the department's Child Abuse Prevention Program identifies, develops, and coordinates strategies to prevent child abuse. These activities include printing and distributing prevention-related brochures to the general public and conducting training for health care and child welfare professionals. In addition, the program identifies, develops, procures, and manages grants for prevention and intervention services. For example, the division is providing quality assurance and contract monitoring to help the Florida Attorney General manage a federal grant for sexual abuse treatment programs.

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The department's Division of Prevention and Intervention administers the program.¹ Two division employees spend a portion of their time on child abuse prevention-related activities (65% and 55%, respectively) at an annual cost of \$96,250 in general revenue for salary and benefits. The program also spent \$53,652 in general revenue funds in Fiscal Year 2008-09 to print and distribute brochures and conduct training.

Department of Children and Families. The Department of Children and Families' mission is to protect the vulnerable, promote strong and economically self-sufficient families, and advance personal and family recovery and resiliency. In accordance with its mission, the department's Child Abuse Prevention and Intervention Program, which is administered by its Family Safety Program Office, develops and implements strategies to prevent child abuse and neglect.² Program staff manage contracts and conduct training for child welfare professionals. One office employee spends three-fourths of her time on child abuse prevention-related activities at an annual cost of \$70,559 in general revenue for salary and benefits.

To carry out child abuse prevention and intervention activities around the state, the department contracts with several providers. These include the Ounce of Prevention Fund of Florida, Inc. (Ounce of Prevention), which operates as the state chapter of Prevent Child Abuse America, conducts public education campaigns to prevent child abuse, and promotes parent support groups.³ The department also contracts with the Florida 2-1-1 Network to provide information and referral services to at-risk families. The department is using \$1.1 million from a federal Community-Based Child Abuse Prevention grant and general revenue to fund these contracts during the period from October 2008 through September 2009. The department also contracts with the Ounce of Prevention to administer the Healthy Families Program, which provides free home visiting services to high-risk families that are expecting a baby or who have a newborn. For Fiscal Year 2008-09, the Healthy Families contract was funded by \$28 million in federal Temporary Assistance to Needy Families and general revenue funds (\$6.3 and \$21.7 million, respectively).

The department also contracts with 20 community-based care lead agencies to provide a broad array of child welfare services, including child abuse prevention, family preservation, emergency shelter, foster care, and adoption, as part of its Child Protection and Permanency Program. In Fiscal Year 2008-09, the department's contracts with the lead agencies for providing child welfare services totaled \$723 million in federal and state funds. Of these funds, lead agencies spent approximately \$24 million on a wide range of child abuse prevention services for the general public, at-risk families, and families whose children have entered the child welfare system. Services include in-home visits, parenting skills training, respite care for children and parents, and early development screening. The major sources of funding for lead agency child abuse prevention services are federal Promoting Safe and Stable Families Act funds, the Title IV-E waiver, and general revenue.⁴

¹ The Division of Prevention and Intervention is housed within the Children's Medical Services Program.

² The department's Office of Family Safety administers the Child Abuse Prevention and Intervention Program.

³ Prevent Child Abuse America is an advocacy organization with the mission of preventing the abuse and neglect of the nation's children. The Ounce of Prevention Fund of Florida, Inc., is the state's chapter of Prevent Child Abuse America and implements and promotes statewide child abuse prevention strategies.

⁴ Promoting Safe and Stable Families is authorized under the federal Social Security Act, Title IV-B, to promote and protect the welfare of children including preventing abuse and neglect. In 2006, Florida received approval of the first statewide waiver for flexible use of foster care funds under title IV-E of the Social Security Act. The waiver allows federal IV-E foster care funds to be used for a wide variety of child welfare purposes rather than being restricted to out-of-home care, as normally the case under federal law. This permits funds to be used for

The two programs perform some similar functions, but the degree of duplication is minimal

Although the Department of Children and Families’ Child Abuse Prevention and Intervention Program has a number of responsibilities that are not addressed by the Department of Health’s Child Abuse Prevention Program, the departments’ programs perform two similar functions: conducting public education campaigns and providing training to health care and child welfare professionals. However, the programs differ in the topics covered and how they distribute information to the public. They also focus on different topics and use different settings to provide training. The programs coordinate their efforts to prevent duplication and maximize use of funding for these activities.

Both programs conduct public education campaigns and provide training that target similar audiences. As shown in Exhibit 1, both departments conduct public education campaigns to educate parents about dangers to their children, promote good parenting skills, and provide training on child abuse prevention for professionals involved with child welfare programs.

Exhibit 1

The Department of Health’s and the Department of Children and Families’ Child Abuse Prevention Programs Performed Similar Functions During Fiscal Year 2008-09

Department of Health	Department of Children and Families
Public Education	
<ul style="list-style-type: none"> ▪ Provide brochures to parents that describe the dangers of shaking infants and young children; distributed statewide throughout the year ▪ Provide brochures and posters to the general public on parenting skills; available through its website 	<ul style="list-style-type: none"> ▪ Provided brochures to parents on safe infant sleep environments in Leon, Hillsborough, and Miami-Dade counties in June 2009 ▪ Provide the general public a community resource packet (includes a parent handbook, advocate resource booklet, and poster) and public service announcements for radio and television every April ▪ Broadcast public service announcements on preventing drowning during June 2009
Training	
<ul style="list-style-type: none"> ▪ Provide training to health care and child welfare professionals on various child abuse prevention topics related to the causes and effects of child abuse 	<ul style="list-style-type: none"> ▪ Provide training at child welfare professionals’ conferences on various child abuse prevention topics related to administering child abuse prevention programs

Source: OPPAGA analysis.

The programs typically cover different topics and use different delivery systems to educate the public. The Department of Health’s public education campaigns primarily focus on the shaken baby syndrome. The department is required by s. 411.233, *Florida Statutes*, to educate the public about the dangers of shaking infants. In conjunction with this responsibility, the department also issues brochures to parents on how to cope with crying infants. In contrast, during the past year, the Department of Children and Families’ campaigns have included educating parents about safe infant sleep environments and how to prevent drowning. The department’s campaigns also provide general information for parents, child abuse prevention

child welfare services including prevention, diversion from out-of-home placement through intensive in-home services, and reunification when it can be accomplished safely and permanently, as well as for foster care.

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advocates, and the community on topics such as recognizing signs of child abuse, tips for preventing child injuries, and healthy child development.⁵

The two departments use different delivery systems for their public education campaigns. The Department of Health primarily distributes its public education brochures through facilities such as birthing centers, home birth providers, county health departments, doctors' offices, hospitals, and child care facilities. In contrast, the Department of Children and Families focuses on media campaigns by holding press conferences, writing news articles, and placing radio and television public service announcements. It also distributes information through its existing network of service providers, such as the Healthy Families Program, community-based care lead agencies, and its child protective investigators.

The programs focus on different topics and use different venues to provide training to health and child welfare professionals. During Fiscal Year 2008-09, the Department of Health provided training on issues primarily related to how abuse affects children, such as how childhood maltreatment is linked to poor health outcomes, the effects of shaken baby syndrome, and the effects of substance abuse on adolescent brain development. In comparison, the Department of Children and Families conducted training to help professionals administer child abuse prevention programs, such as funding strategies and techniques for educating the public about child abuse prevention.

Although both departments have provided training at conferences, they typically differ in how they provide access to this training. The Department of Health trained child protection teams, child welfare professionals, parent groups, child advocates, and health care and other professionals involved in child protection at hospitals, child welfare conferences, and meetings.⁶ The department also makes videos available through websites. The Department of Children and Families trained child welfare professionals at two child welfare conferences. The Department of Children and Families also provides technical assistance to community-based care lead agencies and publishes a monthly article in its Family Safety Training Bulletin on various child abuse prevention topics.

The departments coordinate their activities to avoid duplication and maximize the use of child abuse prevention funds. Program staff from each department report that they are in regular contact via email or telephone. These staff members also participate in multiple workgroups on how to achieve the goals in the state's Child Abuse Prevention and Permanency Plan, January 2009-June 2010.⁷

Appendix A shows the funding sources and amounts for the two departments' public education campaigns and training to prevent child abuse.

⁵ The department selected the topics of safe sleep environments and drowning based on data in Florida Child Abuse Death Review annual reports that showed these were leading causes of child deaths during 2007 and 2008.

⁶ The Child Protection Team Program is a medically directed, multidisciplinary statewide program designed to supplement the child protection investigation activities of local sheriffs' offices and the Department of Children and Families in complex cases of child abuse and neglect.

⁷ Section 39.001, *F.S.*, requires the Governor's Office of Adoption and Child Protection to develop a comprehensive plan for the promotion of adoption, support of adoptive families, and prevention of abuse, abandonment, and neglect of children. The office's Florida Child Abuse Prevention and Permanency Plan, which was released in December 2008 specifies 20 goals for preventing child abuse, abandonment, and neglect. To implement the plan, the office formed workgroups to track the progress made in achieving each goal.

Options for Legislative Consideration

Child abuse prevention fits within both departments' missions. Since there are some similarities between functions performed by the two programs, one option would be to consolidate these activities within one department. We concluded that if the Legislature wishes to maintain the current level of effort for public awareness campaigns and training to prevent child abuse, there is no compelling reason to consolidate the two programs.

Although consolidation could eliminate any duplicative functions and centralize accountability for child abuse prevention programs, this change would not produce material cost savings. Because the two departments cover different topics in their public education campaigns and use different settings to provide training, consolidating these responsibilities would not reduce the need for staff or funding. Moreover, consolidating the programs would incur transition costs that could negate any potential savings that could occur during the first year.

Another disadvantage of consolidation is that it could create complexities in distributing federal Community-Based Child Abuse Prevention Grant funds. The Governor has designated the Department of Children and Families as the state lead agency to apply for and receive federal Community-Based Child Abuse Prevention Grant funding which the department uses for several types of child abuse prevention activities. If the activities were consolidated in the Department of Health, the Department of Children and Families would need to execute and monitor an interagency agreement with the Department of Health to provide the funds necessary to conduct any transferred activities. The Department of Health would need to initially cover the costs of these activities and then submit invoices to the Department of Children and Families for reimbursement. Consolidating the programs in the Department of Children and Families would avoid this issue.

Consolidating the two programs would also make it more difficult to use the two departments' community networks and resources for delivering child abuse prevention information. Since the two departments use different community networks and resources, consolidating the activities within one department could result in losing one of these delivery mechanisms. The departments currently coordinate to prevent direct duplication of public awareness campaigns and training.

Appendix A

Several Funding Sources Support Child Abuse Prevention Activities

Agency	Activity	Funding Source		Funding By Source	Total Federal and State Funding
Department of Children and Families	General child abuse prevention public education campaign	Federal	Community-Based Child Abuse Prevention Grant	\$195,200	\$244,000
		State	Tobacco Settlement Trust Fund	\$48,800	
	Drowning prevention public service announcements	State	General revenue	\$100,000	\$100,000
	Safe Infant Sleep public education campaign	Federal	Community-Based Child Abuse Prevention Grant	\$70,575	\$97,715
		State	Community-Based Child Abuse Prevention State Match	\$17,644	
		State	Community-Based Child Abuse Prevention State Leveraged Funds ¹	\$9,496	
	Training	State	Tobacco Settlement Trust Fund		\$60,000
TOTAL				\$501,715	
Department of Health	Shaken baby syndrome brochures and distribution	State	General revenue	\$18,400	\$18,400
	Training	State	General revenue	\$35,252	\$35,252
	TOTAL				\$53,652

¹ Leveraged funds are those monies that were received by the Department of Children and Families, the designated lead agency for the Community-Based Child Abuse Prevention federal grant, from private, state, or other non-federal sources.

Source: OPPAGA analysis of information provided by the Department of Children and Families and the Department of Health.