Keeping Kids Alive Symposium

Proof That It Can Be Done

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Sacramento County
Getting to know the Sacramento County CDRT

- Sacramento County CDRT created in 1989
- Review all child deaths 0 thru 17 years
- Collecting data and reporting annually since 1990 - 18 years of data
- Maintains an ongoing relationship with the Sacramento County Board of Supervisors
- Funded through the Sacramento County Children’s Trust Fund
- Coordinated by Child Abuse Prevention Council
CDRT Mission Statement

- Ensure that all child abuse and neglect fatalities are identified
- Enhance the investigation of all child deaths through multi-agency review
- Develop a statistical description of all child deaths as an overall indicator of the status of children
- Develop recommendations for the prevention and response to child deaths based on the reviews and statistical information
Sacramento County
CDRT Findings

- One-third to one-quarter of all child deaths were injury related and preventable. (2001-2007)
- Majority of perpetrators of CAN homicides are parents of the decedent. (2001-2007)
Sacramento County CDRT Findings

- Children under one year of age continue to represent the majority of all child deaths. (2004-2007)
- Sleep-related infant deaths, including SIDS and unexpected infant deaths of undetermined cause, have leveled at a constant in Sacto County since 1995. (2000-2003)
- Drowning deaths are the highest in 16 years. (2006)
Sacramento County CDRT Recommendations

- Support and provide funding for prevention and early-intervention programs such as home visitation. (1997-2007)
- Support implementation, continuation and expansion of public education campaigns aimed at modifiable adult behaviors to educate parents/caregivers on preventable deaths via home visits, hospitals, and FRCs.
- Develop a comprehensive drowning prevention education strategy using best practice methods. (2006)
What Can Be Done?
A New Assessment Process

- In 2002 Sacramento County CDRT received one-year planning grant
- Purpose: Implement a new assessment process for 12 years of CDRT data
- Collaborative to Reduce Child Fatalities
- Process applied would result in development of programs to reduce preventable child fatalities
What Can Be Done? Collaborative to Reduce Child Fatalities

- Develop a CDRT sponsored broad-based community collaborative to address CDRT injury-related and preventable recommendations.
- Identify and define the problem using CDRT data.
- Develop a community profile to focus and prioritize neighborhood efforts to reduce injury-related deaths.
- Develop a process for stakeholder and community/neighborhood input.
What Can Be Done?
Collaborative to Reduce Child Fatalities

- Develop a comprehensive literature review including best practices
- Develop a strategic plan including a program model and a plan of action
- Pilot test and evaluate the program model
- Revise program model based on pilot
- Develop a sustainability plan
What Can Be Done? Collaborative to Reduce Child Fatalities

- **Process Outcomes**
  - A community profile to focus and prioritize prevention efforts
  - Increased education and awareness among agencies and communities/neighborhoods
  - A comprehensive strategic plan and sustainability plan.
What Can Be Done?

Convene Collaborative Partners

- Develop a CDRT sponsored broad-based community collaborative to address CDRT injury-related and preventable recommendations

  - Collaborative partners determined by preventable death/injury addressing
    - Hospitals
    - County Agencies (CPS, PH, WIC, etc)
    - CBO’s
    - Residents of targeted communities
    - Local Police & Fire Departments
    - Home Visitation & FRC programs
What Can Be Done?
Identify & Define Needs & Assets

- Identify and define the problem using CDRT data
  - Demographics (Age, Gender, etc)
  - Geography – County Neighborhoods
  - Risk Factors - Family, Environmental, Situational

- Develop a community profile to focus and prioritize neighborhood efforts to reduce injury-related deaths
  - Neighborhood/Community Assets
  - Neighborhood Service Providers
What Can Be Done?
Community and Professional Input

Develop a process for stakeholder and community/neighborhood input

Did you know this was happening?
Why is it happening?
How can it be prevented?

- Neighborhood Focus Groups
- Professional Questionnaires/Surveys
- Stakeholder/Partner Interviews
What Can Be Done? Utilizing the Process Data

- Develop a comprehensive literature review including best practices
  - CDRT data, Neighborhood assets, Community and Stakeholder input inform the best practice review
    - California Evidence-Based Clearinghouse
    - Conference with national experts
What Can Be Done?
Develop the Prevention Strategy

Family Support Collaborative
- Established in 1999 by Board of Supervisors
- Public/Private partnership with County agencies (CPS) and CBO’s
- Services in neighborhoods where children are most at-risk for child abuse & neglect
- Birth & Beyond Community Response - Home Visitation & Family Resource Centers strategy
- David Olds Model – NFP Public Health strategy
What Can Be Done?
Develop the Prevention Strategy

Birth & Beyond Community Response

- Core County safety net to prevent child abuse and neglect – 1000 HV families served yearly
- HV targeted to pregnant moms or newborns up to 6 months old – does not serve CPS families
- Ongoing QA thru B&B committee structure (training, policies & procedures, management)
- Local, State and Federal funding totals have fluctuated throughout the 10 years
Birth & Beyond Outcomes

Birth & Beyond Community Response

- CPS Recidivism Outcomes for Families - Rigorous Comparison Group Evaluation
  - 2/3 of families who received B&B HV services did NOT re-enter the CPS system
  - 88% of families with no prior CPS history had no CPS involvement
  - Participation in B&B delays the onset of CPS recidivism for families who do enter CPS
2007-2010
Safe Beginnings Project

- Joint project of Child Abuse Prevention Council of Sacramento & Greater Sacramento Safe Kids
- GOAL - Reduce infant sleep-related deaths and drowning injuries and deaths in children 0-5 years of age” (2010)
- Funding from CA Kids Plate License
- INPUT RESULTS: Over 90% of stakeholders and parents felt parent education and community awareness were the #1 priority
Safe Beginnings Project Strategic Plan

- Develop an infant safe-sleeping and drowning prevention message for a public awareness campaign to educate parents and caregivers
- Develop a infant safe-sleeping and drowning prevention training module to increase the knowledge of parents in the targeted neighborhoods
- Develop an infant safe-sleeping and drowning prevention training module to train service providers
- Implement the Cribs for Kids program (UCDMC)
- Review effectiveness of County pool safety measures
Questions and Comments

You are welcome to contact me

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