ATTACHMENT 1:

CBCAP Conceptual Framework

CBCAP CONCEPTUAL FRAMEWORK (revised 10-19-06)

The purposes of the CBCAP program are: (1) to support community-based efforts to develop, operate, expand, and enhance, and where appropriate to network, initiatives aimed at the prevention of child abuse and neglect, (2) to support networks of coordinated resources and activities to better strengthen and support families to reduce the likelihood of child abuse and neglect; and (3) to foster understanding, appreciation, and knowledge of diverse populations in order to effectively prevent and treat child abuse and neglect.

SHORT-TERM & LONG-TERM OUTCOMES INPUTS **ACTIVITIES** OUTPUTS INTERMEDIATE OUTCOMES Individual and Family/ Relationships SAFETY DIRECT DIRECT Levels Numbers served Underlying Provide support Increase in the number of Children are protected through the conditions for parents families' needs assessed and from a buse and neglect. All families have continuum of connected to needed services Children are maintained preventive, family Promote the in herent strengths within their own communities in their own homes. centered, culturally but they also development of Increase in protective factors to Decrease in rate of first competent services experience parenting skills preventabuse or neglect by time victims. (i.e. family resource circumstances that parents and caregivers related to: Decrease in rate of first and support, parent bonding and attachment impact their ability to Improve access time perpetrators. education, mutual provide for children's to formal/in parental resilience support, home basic physical and knowledge of parenting and formal resources PERMANENCY visiting, respite care, socioemotional child development information and Support the needs. These risk social connections Children have referral) needs of factors increase for concrete support in times of permanency and stability individuals with families experiencing næd in their living situation. Number of parents geographic or social disabilities Decrease in risk factors associated The continuity of family involved with isolation, economic with reasons for service. relationships and program planning challenges, limited Commit to Community Level connections is preserved. and evaluation education or parent. Increase in the availability of for children. appropriate evidence-based and employment, leadership and inexperience with engagement evidence-informed programs WELL-BEING INDIRECT Increase in number of agencies positive parenting, or A public-private physical or mental developing and implementing Families have enhanced network of health issues. action plans to address capacity to provide for prevention and family meaningful parent involvement their children's needs. INDIRECT support programs TargetPopulation: Increase in coordination across Children's educational. Support All families, especially prevention, child welfare and physical and mental. networks of Number of funding those at risk for a buse other child and family service health needs are met. coordinated. mechanisms that or neglect. systems (i.e. substance abuse, Children have reso urces blend Federal, State. mental health, education, early opportunities for healthy local and private childhood, disability) Resources social and emotional funds Maximize and CAPTA. Title II. Increase and expansion of development. leverage funding Statewide networks of family Youth make a successful, Numbers reached for prevention Federal CBCA P. support and prevention programs self-sufficient transition through public Increase in the use of a funding, other to adulthood. Conduct public awareness and Federal funds and continuum of evaluation Diversity of families is awareness and education State and local approaches implemented embraced and supported. education Societal level matching funds to Numberofadvocacy support prevention Increase in private, State and CONTINUOUSIMPROVEMENT Advocate for activities efforts Federal funding for prevention Development of a culture of systemic change. and family support continuous improvement in Number of self-Increase in public understanding the strengthening of families Ongoina assessment, peer and engagement for the and the prevention of abuse assessmentand review evaluation prevention of child abuse and and neglect. evaluation and quality assurance

efforts

neglect

Links to Various Resource Materials

Please visit the websites listed below to download the relevant resource materials for this Program Instruction.

- a) Keeping Children and Families Safe Act, 2003
 Child Abuse Prevention and Treatment Act,
 Title II Community-Based Grants for the Prevention of Child Abuse and Neglect
 http://www.acf.hhs.gov/programs/cb/laws policies/cblaws/capta03/index.htm
- b) 45 CFR Part 92: UNIFORM ADMINISTRATIVE REQUIREMENTS FOR GRANTS AND COOPERATIVE AGREEMENTS TO STATE, LOCAL, AND TRIBAL GOVERNMENTS

 http://www.access.gpo.gov/nara/cfr/waisidx_03/45cfr92_03.html
- c) Links to ACF Fiscal Reporting Forms and HHS Grants Policy Statement http://www.acf.hhs.gov/grants/grants_resources.html
- d) Community-Based Child Abuse Prevention Program Lead Agency Contacts http://www.friendsnrc.org/contacts/contacts.asp
- e) Guidelines for CBCAP Lead Agencies on Evidence-based and Evidence-informed Programs and Practices (OMB PART Efficiency measure reporting) http://www.friendsnrc.org/CBCAP/PART/efficiencymeasure.htm

Attachment 3: CBCAP Annual Report Numbers Guidelines

| CBCAP Annual Report Participant Numbers Reporting Guidelines | | | |
|--------------------------------------------------------------|------------------------------------------------------------------------------------------|--|--|
| | DATA CHARACTERISTICS | | |
| Table | Table Children, Parents/ Caregivers and Families Who Received Preventive Direct Services | | |
| I. | From the State During the Year - FFY2008 | | |
| | Community-Based Child Abuse Prevention Program (CBCAP) Grant | | |
| SUMMARY DATA DEFINITION | | | |

Preventive direct services under CBCAP are beneficial activities aimed at preventing child abuse and neglect. Such activities may be directed at the general population or specific populations identified as being increased risk of abusing or neglecting their children. The primary focus of these activities are to better strengthen and support families by increasing protective factors and reducing the risk factors that can reduce the likelihood of abuse or neglect. The five primary protective factors to be increased by the preventive direct services include: bonding and attachment, parental resilience, knowledge of parenting and child development, social connections, and concrete support in times of need. The primary risk factors that may be addressed include caregiver problems with mental health, substance abuse, and family and community violence, and other negative conditions in the child and family's life situation. Ultimately, the goals of these activities are to increase the strength and stability of families, to increase parents' confidence and competence in their parenting abilities, to afford children a stable and supportive environment and to increase the safety, permanency and well-being of children and families. Such activities do not include information and referral, one-time public education events, or public awareness campaigns.

INSTRUCTIONS / ERROR CONDITIONS

This is the number of children and number of families who received services aimed at preventing child abuse and neglect during the year. These services may be directed at specific populations identified as being at increased risk of becoming abusive or they may provide direct services to the general population. Direct services means that the services must be provided to an individual or family and the <u>planned</u> duration of the services should be more than a one-time event. Some examples of preventative direct services include: voluntary home visiting, parenting programs, parent mutual support, respite care, family resource centers, or other family support programs. If the participant only attends the direct service for one-time and drops out, they should still be counted in this category since the planned duration was for more than one-time.

The data should reflect recipients of direct services funded by the CBCAP program. Direct services funded by CBCAP should reflect the Federal CBCAP funds plus the amount for the State's required 20% match as reflected in their application for this year's funding. (Note: Some States include more than a 20% match in their application). Since a number of States blend the CBCAP with other Federal, State and local funding, these States will need to indicate the total funding from all other sources, including CBCAP, and indicate the percentage of CBCAP funding that is part of the total.

The data should not include recipients of information and referral services, one-time public education events, and other public awareness campaigns. The recipients of these activities should be counted <u>separately</u> as part of Public Awareness Activities (see Table III).

The items in this section request data on recipients of preventive direct services under the CBCAP program. Data on the number of children, parents and the number of families receiving these services is requested. The three possibilities are provided since some programs report by "family," "parent/ caregiver" and others report by "child." In answering these questions, to the extent possible, you should NOT duplicate your counts.

This is the number of children, parents/ caregivers, and families who received services aimed at preventing child abuse and neglect during the year funded by a Community-Based Child Abuse Prevention Program (CBCAP) Grant. The total number should also include the number of adults/ children with disabilities who are receiving direct services.

STATE DATA

Can the State provide data for this item? (Y=Yes, N=No) []

Total Number of Children who received preventative direct services:

Total Number of Parents/ caregivers who received preventative direct services:

Total Number of Families who received preventative direct services:

STATE COMMENTARY / CONSTRUCTION LOGIC

The State should provide additional information about the numbers being reported above and the primary source of the data. If multiple funding sources are included in the recipient numbers, please indicate the total funding from all other sources, including CBCAP, and indicate the percentage of CBCAP funding that is part of that total. If no data is available, the State should provide an explanation why the data cannot reported.

| CBCAP Annual Report Participant Numbers Reporting Guidelines | | | | |
|--------------------------------------------------------------|--------------------------------------------------------------------------------------------|--|--|--|
| | DATA CHARACTERISTICS | | | |
| Table II. | le Children, Parents/ Caregivers with Disabilities Who Received Preventive Direct Services | | | |
| II. | From the State During the Year - FFY2008 | | | |
| | Community-Based Child Abuse Prevention Program (CBCAP) Grant | | | |
| CHMMADY DATA DEFINITION | | | | |

SUMMARY DATA DEFINITION

Preventive direct services under CBCAP are beneficial activities aimed at preventing child abuse and neglect. Such activities may be directed at the general population or specific populations identified as being increased risk of abusing or neglecting their children. The primary focus of these activities are to better strengthen and support families by increasing protective factors and reducing the risk factors that can reduce the likelihood of abuse or neglect. The five primary protective factors to be increased by the preventive direct services include: bonding and attachment, parental resilience, knowledge of parenting and child development, social connections, and concrete support in times of need. The primary risk factors that may be addressed include caregiver problems with mental health, substance abuse, and family and community violence, and other negative conditions in the child and family's life situation. Ultimately, the goals of these activities are to increase the strength and stability of families, to increase parents' confidence and competence in their parenting abilities, to afford children a stable and supportive environment and to increase the safety, permanency and well-being of children and families. Such activities do not include information and referral, one-time public education events, or public awareness campaigns.

INSTRUCTIONS / ERROR CONDITIONS

This is the number of children and adults/ caregivers with disabilities who received services aimed at preventing child abuse and neglect during the year. These services may be directed at specific populations identified as being at increased risk of becoming abusive or they may provide direct services to the general population. Direct services means that the services must be provided to an individual or family and the <u>planned</u> duration of the services should be more than a one-time event. Some examples of preventative direct services include: voluntary home visiting, parenting programs, parent mutual support, respite care, family resource centers, or other family support programs. If the participant only attends the direct service for one-time and drops out, they should still be counted in this category since the planned duration was for more than one-time.

The data should reflect recipients of direct services funded by the CBCAP program. Direct services funded by CBCAP should reflect the Federal CBCAP funds plus the amount for the State's required 20% match as reflected in their application for this year's funding. (Note: Some States include more than a 20% match in their application). Since a number of States blend the CBCAP with other Federal, State and local funding, these States will need to indicate the total funding from all other sources, including CBCAP, and indicate the percentage of CBCAP funding that is part of the total.

The data should not include recipients of information and referral services, one-time public education events, and other public awareness campaigns. The recipients of these activities should be counted <u>separately</u> as part of Public Awareness Activities (see Table III).

The items in this section request data on recipients (adults/ children) of preventive direct services under the CBCAP program who also have a disability. The definition of a person with disability has the same meaning for a child or adult with disability under the Individuals with Disabilities Education Act (IDEA). (For more information, visit: http://ericec.org/digests/e560.html)

Data on the number of children and/ or parents with disabilities receiving these services is requested. The numbers for Table II should be a subset of the total numbers from Table I.

This is the number of children and/or parents/ caregivers with disabilities who received direct services aimed at preventing child abuse and neglect during the year funded by a Community-Based Child Abuse Prevention Program (CBCAP) Grant.

STATE DATA

Can the State provide data for this item? (Y=Yes, N=No) []

Total Number of Children with disabilities who received preventative direct services:

Total Number of Parents/ caregivers with disabilities who received preventative direct services:

STATE COMMENTARY / CONSTRUCTION LOGIC

The State should provide additional information about the numbers being reported above and the primary source of the data. If multiple funding sources are included in the recipient numbers, please indicate the total funding from all other sources, including CBCAP, and indicate the percentage of CBCAP funding that is part of that total. If no data is available, the State should provide an explanation why the data cannot reported.

| CBCAP Annual Report Participant Numbers Reporting Guidelines | | | |
|--------------------------------------------------------------|----------------------------------------------------------------------------|--|--|
| DATA CHARACTERISTICS | | | |
| Table | Individuals Who Received Public Awareness or Public Information Activities | | |
| III. | From the State During the Year - FFY2008 | | |
| Table III. | Community-Based Child Abuse Prevention Program (CBCAP) Grant | | |
| SUMMARY DATA DEFINITION | | | |

Public awareness or public education activities under CBCAP are beneficial activities that focus on the healthy and positive development of parents and the promotion of child abuse and neglect prevention activities. These activities can include public education and outreach, information and referral regarding community and social services that are available for families, and public awareness campaigns. Such activities are usually directed at the general population but may also be targeted for specific populations or communities identified at increased risk of abuse or neglect. The primary focus of these activities are to better strengthen and support individuals, families, the community and society by providing information about available family support an prevention resources in the community, increasing the public understanding of the importance of the prevention of child abuse and neglect and increasing community ownership and involvement in prevention activities. Over the long term, it is anticipated that these activities contribute to increasing the safety, permanency and well-being of all children and families.

INSTRUCTIONS / ERROR CONDITIONS

This is the number of individuals received public awareness or public education activities aimed at preventing child abuse and neglect during the year. These services may be directed to the general population or at specific populations identified as being at increased risk of abuse or neglect. These activities may be a one-time event or a series of public education and information sessions. These activities may also include provide information and referral to the community through the telephone, in-person, or through a mail out or website. Some examples of public awareness, public education or information and referral activities include: Blue Ribbon or other Child Abuse Prevention Month campaigns, conducting a public information fair at a local festival, presenting information about child abuse prevention to various agencies or the general public, television or radio ads, newsletter mailing, parent support hotlines, information and referral websites, etc.

The data should reflect the individuals who received or were exposed to the public awareness or public education activities funded by the CBCAP program. Direct services funded by CBCAP should reflect the Federal CBCAP funds plus the amount for the State's required 20% match as reflected in their application for this year's funding. (Note: Some States include more than a 20% match in their application). Since a number of States blend the CBCAP with other Federal, State and local funding, these States will need to indicate the total funding from all other sources, including CBCAP, and indicate the percentage of CBCAP funding that is part of the total.

The items in this section request data on recipients of public awareness or public education activities conducted under the CBCAP program. Data on the number of individuals receiving or exposed to these activities is requested. Since it is difficult to provide an exact number of individuals who may have received the public awareness or public education activities, States are advised to provide the most accurate estimate based on the number of participants that reasonably received these activities. For example, the total can include the number of participants in public education session or workshop, the number of newsletters mailed out, the number of individuals who called a parent support line, the number of people exposed to the television or radio ads, etc.

This is the number of individuals who received public awareness and/or public education activities aimed at preventing child abuse and neglect during the year funded by a Community-Based Child Abuse Prevention Program (CBCAP) Grant.

STATE DATA

Can the State provide data for this item? (Y=Yes, N=No) []

Total number of individuals who received or were exposed to public awareness or public education activities:

STATE COMMENTARY / CONSTRUCTION LOGIC

| The State should provide additional information about the numbers being reported above and the primary source of the data. If multiple funding sources are included in the recipient numbers, please indicate the total funding from all other sources, including CBCAP, and indicate the percentage of CBCAP funding that is part of that total. If no data is available, the State should provide an explanation why the data cannot reported. |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| |
| |
| |
| |
| |
| |
| |
| |

List of Programs for Potential Coordination and Collaboration with CBCAP

Respite Care

Respite care programs are designed to alleviate social, economic and financial stress among families of children with disabilities or children who are chronically or terminally ill. They provide short-term, in-home or out-of-home nonmedical child care. Respite care provides families or primary caregivers with periods of temporary relief from the pressures of demanding child care routines and lessens the intensity of severe family stress. Respite care programs generally provide 24-hour services, access to medical services, referral to counseling and therapy, staff training including child abuse/neglect reporting responsibilities and public awareness efforts. (For information about these programs in your State, visit the ARCH National Respite and Resource Center website at: http://www.archrespite.org).

Respite services continue to be an important component of a full continuum of child abuse prevention and family resource services, and are included as services for funding under the CBCAP program. (See section 207(3), section 209(3)(B) and (c)(v)&(5).)

Crisis Nurseries

Crisis nurseries are child care facilities that provide a safe environment when the chance of neglect or abuse in the home increases. The programs offer parents the option of "time out," as a preventive measure to reduce the likelihood of child maltreatment. They are designed to: (1) offer a safe environment as a resource for children at risk of abuse; (2) deliver non-punitive, non-threatening services as a resource to care-givers of at-risk children, and (3) utilize existing community-based services to further diminish the potential for the maltreatment of children in families experiencing crisis. (For information about programs in your State, visit the website http://www.archrespite.org.)

Child Care Programs

The Child Care and Development Fund (CCDF), established as a result of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (Pub. L. 104-193) assists low-income families and those transitioning off welfare to obtain child care so they can work or attend training and education programs. This program provides subsidized child care services to eligible parents as long as the child care providers meet basic health and safety requirements set by States and Tribes, including the prevention and control of infectious diseases, environmental safety, and minimum health and safety training. For more information, please visit the National Child Care Information Center at: http://nccic.org/.

Head Start Programs

Head Start is a Federal program for infants, toddlers, and preschool children from low-income families. The Head Start program is operated by a variety of faith- and community-based agencies, including Community Action Agencies, nonprofit organizations, and school systems. These programs provide comprehensive services to meet the educational, emotional, social, health, nutritional and psychological needs of our most vulnerable children, including children with disabilities. An essential component of every Head Start program is the involvement of parents in parent education, program planning and other administrative and managerial activities. For more information, visit the Head Start Information and Publication Center at: http://www.headstartinfo.org/

The Administration on Developmental Disabilities (ADD)

ADD is the lead agency within the U.S. Department of Health and Human Services, Administration for Children and Families, responsible for planning and carrying out programs which promote the self-sufficiency and protect the rights of persons with developmental disabilities. ADD's major goal is to work in partnership with State governments, local communities and the private sector to increase the social and economic integration of individuals with developmental disabilities.

ADD funds Family Support 360 grantees which are used to support one-stop centers to provide family support services for families of individuals with disabilities. There are currently 21 grantees across the country funded for this purpose and CBCAP Lead Agencies are strongly encouraged to collaborate with these entities when they are present in their States. For more information on this program, visit: http://www.acf.hhs.gov/programs/add/pns/pnsfs360.html

For more information about ADD, visit their website at: http://www.acf.hhs.gov/programs/add/

Child Support Enforcement Access and Visitation Programs

Funds are provided to enable States to create programs which support and facilitate access and visitation by non-custodial parents with their children. Activities may include mediation, counseling, education, development of parenting plans, visitation enforcement and development of guidelines for visitation and alternative custody arrangements. For more information, please visit the ACF Office of Child Support Enforcement at: http://www.acf.hhs.gov/programs/cse/.

Temporary Assistance to Needy Families (TANF)

The TANF program, which is time limited, assists families with children when the parents or other responsible relatives cannot provide for the family's basic needs. The Federal government provides grants to States to run the TANF program. States have broad flexibility to carry out their programs. The States, not the Federal government, decide on the design of the program, the type and amount of assistance payments, the range of other services to be provided, and the rules for determining who is eligible for benefits. For more information, please visit the ACF Office of Family Assistance at: http://www.acf.hhs.gov/prgorams/ofa To get the location of your local or State welfare office, you can go to the web site sponsored by the American Public Human Services Association at http://www.aphsa.org/home/StateContacts.asp.

Maternal and Child Health Bureau (MCHB) Title V Program

The specific purpose of the title V Block Grants to the States is the creation of Federal-State partnerships to develop service systems in our nation's communities that can meet the critical challenges facing maternal and child health, including (partial list): significantly reducing infant mortality; providing comprehensive care for women before, during, and after pregnancy and childbirth; providing preventive and primary care services for children and adolescents; providing comprehensive care for children and adolescents with special health care needs; preventing injury and violence; and putting into community practice national standards and guidelines (e.g., prenatal care; healthy and safe child care; and health supervision of infants, children, and adolescents). For more information, visit: http://mchb.hrsa.gov/programs/

Early Childhood Comprehensive Systems (ECCS) Program. The MCHB launched the State Maternal and Child Health Early Childhood Comprehensive Systems Initiative (ECCS) to implement the MCHB Strategic Plan for Early Childhood Health. The purpose of ECCS is to support States and communities in their efforts to build and integrate early childhood service systems that address the critical components of access to comprehensive health services and medical homes; social-emotional development and mental health of young children; early care and education; parenting education and family support. The first ECCS grants were issued in 2003. Since that time 49 States, the District of Columbia, Guam, the Republic of Palau and the Commonwealths of Puerto Rico and the Mariana Islands have participated in ECCS. Almost all of these grantees have now developed a plan for building a comprehensive system for young children. For more information, visit: http://www.state-eccs.org/

Faith-based and community organizations (often referred to as FBO/CBOs).

These organizations are a vitally important resource in our communities. They demonstrate care and compassion to those most in need by providing a rich diversity of programs, small and large. Faith-based and community organizations have unique strengths that government cannot duplicate. They often operate very close to the daily lives of individuals and families in need and thus can reach needy individuals and families that government cannot. For more information about the HHS Center for Faith-Based and Community Initiatives, visit: http://www.hhs.gov/fbci/.

For more information about the Compassion Capital Fund at ACF, which helps faith-based and community groups build capacity and improve their ability to provide social services to those in need, please visit: http://www.acf.hhs.gov/programs/ccf/.

Various Prevention and Family Support Programs

There are a variety of prevention and family support programs existing across the country. The report, *Emerging Practices in the Prevention of Child Abuse and Neglect* provides an overview of the landscape of prevention programs. A copy of the report is available at: http://www.childwelfare.gov/preventing/programs/whatworks/report/report.pdf

These programs range from national models implemented broadly in States, to unique local agency programs with a long history of service to their communities. They are funded from diverse sources and contribute to a network that provides a full continuum of community-based family resource services. A few examples of such programs are:

Home Instruction Program for Preschool Youngsters (HIPPY). HIPPY is an early childhood instruction program for educationally disadvantaged parents to use with their preschool children. Paraprofessional home visitors from the community instruct parents in the use of HIPPY materials. For more information, visit their website at http://www.hippyusa.org/

Nurse Family Partnership (NFP). NFP is a home visiting program that uses public health nurses, to help improve the health and social functioning of low income, first-time mothers, their babies, and families. For more information, visit their website at: http://www.nursefamilypartnership.org/

Parents As Teachers (PAT). PAT is a home-school-community partnership for parents of children 0-3 that is designed to help parents give their children the best possible start in life by providing timely information on child development and ways to encourage learning. For more information, visit their website at: http://www.parentsasteachers.org/

Parents Anonymous (PA). PA is a national organization that oversees a network of accredited organizations and the operation of approximately 1,000 Parents Anonymous Programs which offer mutual support and self-help services to alleviate the stresses of parenting, build self-esteem, teach new parenting skills, and promote parent leadership. To find out about PA chapters in your State, please visit their website at: http://www.parentsanonymous.org

Prevent Child Abuse America (PCA). PCA is a national organization with State and local chapters in every State. Their mission is to provide information, public education and awareness and various services for the prevention of child abuse and neglect. For more information about PCA chapters in your State, visit their website at: http://www.preventchildabuse.org/. In addition, PCA collaborates with Circle of Parents, a national network of parent mutual support programs. For more information, visit: http://www.circleofparents.org

Strengthening Families Through Early Care and Education

Strengthening Families is a new strategy to reduce child abuse and neglect which uses early childhood programs' everyday activities to build protective factors around children and their families

http://www.cssp.org/doris_duke/index.html

Coordination and Collaboration with the Child and Family Services Review (CFSR)/Program Improvement Plan (PIP) and the Child and Family Services Plan (CFSP)/Annual Progress and Services Report (APSR) Processes

Below are some suggested ways in which the CBCAP programs can work more closely with the child welfare agencies in their States:

- CBCAP lead agency contacts and/or members of their prevention network can become
 more active participants in various stakeholder meetings and planning committees related
 to the CFSR/Program Improvement Plan (PIP) and Child and Family Services Plan
 (CFSP)/Annual Progress and Services Report (APSR). Review the goals and objectives
 of the CFSR/PIP and CFSP/APSR and identify which of them are related to child abuse
 prevention, family support and family strengthening. Schedule meetings with
 representatives from the child welfare agency to discuss ways to collaborate and
 coordinate efforts. The ACF Regional Office also is available to help facilitate this
 process.
- CBCAP lead agencies can use the relevant sections of the CFSR Statewide Assessment, PIP and/or CFSP that pertains to prevention programs as part of the required description of the inventory of unmet needs in the State.
- Prepare the CBCAP plan by incorporating the relevant goals and objectives contained in
 the State's CFSR/PIP and CFSP/APSR. Lead agencies may choose to place a stronger
 emphasis on prevention-related goals identified in these two processes as part of their
 CBCAP program plans. For example, if the CFSR finds that the lack of prevention
 resources is a prime concern, and the State child welfare agency is required to redirect its
 resources to address this area, the CBCAP program may identify specific programs and
 activities that will be focused on those issues.
- CBCAP lead agencies can work with the child welfare agency to pool the title IV-B
 prevention and family support funding with their CBCAP funds and issue a joint Request
 for Proposals to fund programs that meet the shared goals and objectives of the two
 programs.
- CBCAP lead agencies can work with the State's child protective services (CPS) system
 to plan and develop triage procedures and differential/alternative response systems to
 refer children not at imminent risk of harm to community organizations or voluntary
 preventive services. Developing triage procedures is a provision of the Basic State Grant
 for CPS agencies outlined in the Child Abuse Prevention and Treatment Act, 2003
 requirements.

• ACF also believes that Responsible Fatherhood, Positive Youth Development, Faith-based and Community outreach, and Rural Initiatives merit special attention. CBCAP lead agencies are encouraged to identify ways to support the efforts of these initiatives. Please see Attachment 6 for more information.

For more information about the Child Welfare Services and Promoting Safe and Stable Families programs, contact: Eileen West at (202) 205-8438, email: eileen.west@acf.hhs.gov.

For more information about the Child and Family Services Reviews, please visit the Children's Bureau website at: http://www.acf.hhs.gov/programs/cb

Overview of the HHS/ACF Healthy Marriage, Responsible Fatherhood, Positive Youth Development, Rural, and Faith-Based and Community Initiatives

HHS/ACF Key Priorities and Initiatives

The current Administration has developed several major initiatives in areas that it feels will benefit children, adults and society. The Department's Healthy Marriages, Responsible Fatherhood, Positive Youth Development, Rural, and Faith-based and Community initiatives can be promoted among the populations that ACF serves. All should fit with the overall goals of the safety, permanency and well-being of children. We encourage States to propose creative approaches to achieving the goals of these initiatives in the context of the child abuse prevention and child welfare system. The following is a brief description of each initiative:

Healthy Marriage

The Healthy Marriage initiative encourages services to strengthen parental relationships and promote healthy marriages. This initiative's mission is "Helping couples, who choose marriage for themselves, to develop the skills and knowledge necessary to form and sustain healthy marriages." ACF is working with its partners across the country to develop community-wide initiatives to promote healthy marriages and strengthen families. These initiatives will bring together government agencies, faith-based and community organizations, and other partners to offer the knowledge, skills and resources needed to build and sustain healthy marriages. If your State is interested in starting a healthy marriage initiative, or if you are aware of a community initiative already forming, ACF can support those efforts. The next two pages provide more details on this initiative.

Responsible Fatherhood

This initiative's goal is to help men become responsible, committed and involved fathers. The following principles guide the Responsible Fatherhood initiative: (1) all fathers can be important contributors to the well-being of their children; (2) parents are partners in raising their children, even when they do not live in the same household; (3) the roles fathers play in families are diverse and related to cultural and community norms; (4) men should receive the education and support necessary to prepare them for the responsibility of parenthood; and (5) government can encourage and promote father involvement through its programs and through its own workforce policies. For more information, visit http://fatherhood.hhs.gov/Marriage/index.shtml

Positive Youth Development

This initiative includes promoting a philosophy of working with youth that models ongoing relationships with adult mentors; safe places with structured activities; healthy lifestyles; opportunities to acquire marketable skills; and opportunities for community service and civic participation. The Positive Youth Development effort involves several agencies within ACF. The Family and Youth Services Bureau (FYSB) and the Children's Bureau emphasize positive

youth development in the Runaway and Homeless Youth Discretionary Grant program and in the Chafee Foster Care Independence Program, respectively. ACF provides additional technical assistance to States through its National Resource Center on Youth Development. For more information, visit: www.nrcys.ou.edu/nrcyd.htm.

Faith-Based and Community Initiatives

In January 2001, President Bush issued Executive Order 13198 that established five (5) Centers for Faith-Based and Community Initiatives within five Federal Departments, one of which was the U.S. Department of Health and Human Services. The President charged each of these Centers with coordinating Department efforts to eliminate policy barriers that prevent faith-based and other community organizations from participating in the provision of social services. We encourage States to include faith-based and community organizations in the coordination of title IV-B and CBCAP related community programs and to include these organizations as subgrantees or contractors as appropriate. For more information about the HHS Center for Faith-Based and Community Initiatives, visit: http://www.hhs.gov/fbci/.

Rural Initiative

The Department's Rural Initiative is aimed at doing "a better job of expanding and improving the provision of health care and social services in rural America." There are 54 million Americans who live in rural areas. We encourage States to determine ways to enhance and strengthen programs and services in their rural areas. For more information, visit the HHS Rural Assistance Center at: http://www.raconline.org.

Healthy Marriage Matters to ACF

Background

Research suggests that family structure is related to child well-being. All things being equal, children who grow up in married, two-parent families do better on a host of outcomes than those who do not. Further, many social problems affecting children, families, and communities could be prevented if more children grew up in healthy, intact families. Examples of social science findings include:

- Married couples seem to build more wealth on average than singles or cohabiting couples, thus decreasing the likelihood that their children will grow up in poverty.
- Children who live in a two-parent, married household enjoy better physical health, on average, than children in non-married households.
- Marriage reduces the risk of adults and children either perpetrating, or being victimized by, violent crime.

Congress acknowledged the importance of married-couple families when it reformed the welfare system in 1996. The 1996 legislation stipulated that three out of the four purposes of the Temporary Assistance for Needy Families (TANF) program either directly or indirectly promote healthy marriages. President Bush echoed this sentiment when he indicated that healthy marriages would be a focus of his Administration. In proclaiming National Family Week in November 2001, he noted:

"My Administration is committed to strengthening the American family. Many oneparent families are also a source of comfort and reassurance, yet a family with a mom and dad who are committed to marriage and devote themselves to their children helps provide children a sound foundation for success. Government can support families by promoting policies that help strengthen the institution of marriage and help parents rear their children in positive and healthy environments."

ACF Healthy Marriage Initiative

The ACF Healthy Marriage Initiative aims to help couples who choose marriage for themselves to develop the skills and knowledge necessary to form and sustain healthy marriages. In practical terms, it involves:

- Developing demonstrations. In consultation with States, a number of communities have approached ACF to conduct healthy marriage demonstration projects. These are broad-based efforts to work with key community sectors (e.g., local governments, businesses, civic organizations, nonprofits) to strengthen marriages.
- *Emphasizing marriage in Federal programs*. ACF's program offices will promote healthy marriages in every appropriate program. For example, marriage education and enrichment services could be provided, alongside existing services, to low-income couples who utilize Refugee Resettlement, Children's Bureau, Community Services, or TANF services.
- *Conducting research*. This initiative will use existing funds to explore the types of marriage strengthening services that exist and their effectiveness, so that future resources can be targeted more wisely.
- *Training*. The initiative will provide training about healthy marriage issues to interested Federal ACF staff.

This initiative is *not* about:

- Trapping anyone in an abusive or violent relationship.
- Forcing anyone to get or stay married.
- Running a Federal dating service.
- Withdrawing supports from or diminishing in any way, either directly or indirectly, the important work of single parents.

Additional Information

ACYF-CB-PI-02-05 included numerous suggestions for implementation of the Healthy Marriage initiative. This PI is available from the Children's Bureau website at: http://www.acf.hhs.gov/programs/cb/laws_policies/policy/pi/2002/pi0205.htm

For more information on the Healthy Marriage initiative, visit the ACF website at: http://www.acf.hhs.gov/healthymarriage/

STATE CHIEF EXECUTIVE OFFICER ASSURANCE STATEMENT

COMMUNITY-BASED GRANTS FOR THE PREVENTION OF CHILD ABUSE AND NEGLECT PROGRAM (TITLE II OF THE CAPTA AMENDMENTS OF 2003 (P.L. 108-36))

STATE CHIEF EXECUTIVE OFFICER'S ASSURANCE STATEMENT

| | ef Executive Officer of the State of, I am providing lead agency, administer the funds, and assume the obligations imp | |
|---------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Based (| Grants for the Prevention of Child Abuse and Neglect award. I furthesible for providing | |
| (A) | Community-based and prevention focused programs and activitie child abuse and neglect (through networks where appropriate) copartnerships directed by interdisciplinary structures with balance members, parents, and public and private nonprofit service proviworking in partnership with families with children with disabilities | nposed of local, collaborative, public-private d representation from private and public sector ders and individuals and organizations experienced in |
| (B) | Direction to an interdisciplinary, collaborative, public-private strupublic sector members, parents, and public sector and private nor | |
| (C) | Direction and oversight to the network through identified goals ar accountability, the provision of leveraged or combined funding fro assessment and planning activities, the provision of training, techn evaluation functions; | om Federal, State and private sources, centralized |
| (D) | A demonstrated commitment to parental participation in the development and prevention-focused programs and activities designed to and neglect (through networks where appropriate); | |
| (E) | A demonstrated ability to work with State and community-based continuum of preventive, family-centered, comprehensive services | |
| (F) | The capacity to provide operational support (both financial and p evaluation assistance to community-based and prevention-focused support families to prevent child abuse and neglect, through innov delivery mechanisms; and | programs and activities designed to strengthen and |
| (G) | Integration of its efforts with individuals and organizations experichildren with disabilities, parents with disabilities and with the chand demonstrate a financial commitment to those activities. | |
| | | |
| (Signa | ature of Chief Executive Officer) | (Date) |

OMB Control # 0970-0155 (Expires 06/30/2008)

STATE LEAD AGENCY ASSURANCE STATEMENT

COMMUNITY-BASED GRANTS FOR THE PREVENTION OF

CHILD ABUSE AND NEGLECT PROGRAM

(TITLE II OF THE CAPTA AMENDMENTS OF 2003 (P.L. 108-36))

STATE LEAD AGENCY ASSURANCE STATEMENT

| STATE: | LEAD AGENCY: | |
|----------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| State to be the Lead Agency responsibl | which has been designated by the Chief Executive Officer e to administer the funds and assume the obligations imponumity-Based Grants for the Prevention of Child Abuse as are provided: | sed by |
| ` ' | entory of current unmet needs and current community-base | ed and |

- (A) A description of the inventory of current unmet needs and current community-based and prevention-focused programs and activities to prevent child abuse and neglect, and other family resource services operating in the State, will be included with the Annual Performance Report (and subsequent year's reports);
- (B) Funds received under this title will supplement, not supplant, other State and local public funds designated for the start-up, maintenance, expansion, and redesign of community-based and prevention-focused programs and activities to strengthen and support families to prevent child abuse and neglect;
- (C) The State has the capacity to ensure the meaningful involvement of parents who are consumers and who can provide leadership in the planning, implementation, and evaluation of the programs and policy decisions of the applicant agency in accomplishing the desired outcomes for such efforts; and
- (D) The lead agency will provide the Secretary with reports at such time and containing such information as the Secretary may require (and every year on the same date for the life of the grant).

| (Signature | of Responsible Lead Agency Administrator) |
|------------|-------------------------------------------|
| (Ту | ped Name and Title of Administrator) |
| | (Date) |

Leveraged Funds Worksheet
With Example Worksheet and Guidance for Differentiation Between
Leveraged and Match Funds

LEVERAGED FUNDS WORKSHEET for FY 2008 APPLICATION

| STATE: | LEAD AGENCY: |
|--------|--------------|
|--------|--------------|

| AMOUNT OF CLAIM | DATE(S) FUNDS WERE RECEIVED AND BUDGETED BY LEAD AGENCYBUDGETED/SPENT | | SOURCE OF FUNDS BEING CLAIMED | PURPOSE FOR WHICH FUNDS WERE BUDGETED AND SPENT |
|--------------------|-----------------------------------------------------------------------|--|----------------------------------|----------------------------------------------------------|
| \$ | | | | |
| | | | | |
| \$ | | | | |
| | | | | |
| \$ | | | | |
| | | | | |
| \$ | | | | |
| | | | | |
| \$ | | | | |
| \$ | | | | |
| | | | | |

| STATE: | LEAD AGENCY: | Pa | age of |
|--------------------|-----------------------------------------------------------------------|----------------------------------|----------------------------------------------------------|
| AMOUNT OF CLAIM | DATE(S) FUNDS WERE RECEIVED AND BUDGETED BY LEAD AGENCYBUDGETED/SPENT | SOURCE OF FUNDS BEING CLAIMED | PURPOSE FOR WHICH FUNDS WERE BUDGETED AND SPENT |
| \$ | | | |
| \$ | | | |
| \$ | | | |
| \$ | | | |
| J. | | | |
| \$ | | | |

| AMOUNT OF CLAIM | DATE(S) FUNDS WERE RECEIVED AND BUDGETED BY LEAD AGENCYBUDGETED/SPENT | SOURCE OF FUNDS BEING CLAIMED | PURPOSE FOR WHICH FUNDS WERE BUDGETED AND SPENT | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------|----------------------------------|----------------------------------------------------------|--|
| \$ | | | | |
| Ψ | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| \$ | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| \$ | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| INCENTIVE CLAIM ASSURANCE: All amounts figured into this claim are non-Federal monies that have been leveraged by the State, directed through the CBCAP lead agency submitting the application, and budgeted and spent in FFY 2007 (i.e. 10/1/06 – 9/30/07) to support community-based and prevention-focused programs and activities designed to strengthen and support families to prevent child abuse and neglect, as defined in the legislation, that coordinate resources among a range of existing public and private organizations for the purposes defined under this Title. No funds claimed here have been claimed to leverage any other source of Federal funds. State and non-Federal funds that are being used to meet the maintenance of effort, match or other cost-sharing requirements for other Federal funding are not eligible to be claimed. | | | | |
| TOTAL CLAIM | | | | |
| | PREPARED BY: (Fiscal Agent) | (Date) | | |
| | (1 iscai Ageiit) | (Date) | | |
| \$ | SUBMITTED BY: | | | |
| | (Lead Agency Authori | ty) (Date) | | |
| | | | | |

LEVERAGED FUNDS - EXAMPLE WORKSHEET

| STATE: | LEAD AGENCY: | |
|--------|--------------|--|
|--------|--------------|--|

| AMOUNT OF CLAIM | DATE(S) FUNDS WERE RECEIVED AND BUDGETED BY LEAD AGENCYBUDGETED/ SPENT | | SOURCE OF FUNDS BEING CLAIMED | PURPOSE FOR WHICH FUNDS WERE BUDGETED AND SPENT | |
|--------------------|------------------------------------------------------------------------|---------|-------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| \$ 37,948.00 | Monthly Instal. May'07- Sept'07 | 10/1/06 | Tax Checkoffs/Pvt. Contributions | 3 respite care programs for rural communities in XXX county, XXX county, and XXX county, to expand services available through our Inter-agency Agreement with "Child Care Services". | |
| \$ 1,500,000.00 | 7/1/07 | 9/1/07 | State Appropriation | 129 (one per county) School-based Parent Education programs for young & single parents | |
| \$ 50,000.00 | 11/9/06 | 5/19/07 | Foundation Gift (United Way) | 5 training programs (one in each geographic region) to recruit & train parents as community interagency leaders/partners. | |

INCENTIVE CLAIM ASSURANCE: All amounts figured into this claim are non-Federal monies that have been leveraged by the State, directed through the CBCAP lead agency submitting the application, and <u>budgeted and spent</u> in FFY 2007 (i.e. 10/1/06 - 9/30/07) to support community-based and prevention-focused programs and activities designed to strengthen and support families to prevent child abuse and neglect, as defined in the legislation, that coordinate resources among a range of existing public and private organizations for the purposes defined under this Title. No funds claimed here have been claimed to leverage any other source of Federal funds. State and non-Federal funds that are being used to meet the maintenance of effort, match or other cost-sharing requirements for other Federal funding are <u>not</u> eligible to be claimed.

| TOTAL CLAIM | PREPARED BY: | | |
|-----------------|-------------------------|--------|--|
| | (Fiscal Agent) | (Date) | |
| \$ 1,587,948.00 | , | , , | |
| | SUBMITTED BY: | | |
| | (Lead Agency Authority) | (Date) | |

DIFFERENTIATING BETWEEN LEVERAGED AND MATCH FUNDS FOR PURPOSES OF THE CBCAP PROGRAM

Leveraged Funds are those funds that were received by the CBCAP lead agency from private, State, or other non-Federal sources during the prior Federal Fiscal Year (FFY), and obligated and spent by the CBCAP lead agency during that same time frame to provide the types of services and activities for which the actual CBCAP Federal funds may be used.

All funds leveraged by your State and claimed when submitting the CBCAP application must have been:

- **Leveraged** by your State from private, State, or other **non- Federal** sources during the prior Federal Fiscal Year.
- Directed through the CBCAP lead agency submitting the application. (Note: Leveraged funds must be controlled by the CBCAP lead agency submitting the application. If the State lead agency has changed and the current lead agency submitting the application is not the same lead agency through which the leveraged funds were directed and obligated or spent in the prior Federal Fiscal Year, the current lead agency cannot submit a leveraged funds claim. In that case, your total grant award would be the amount determined by population of children under 18 years of age).
- Budgeted and spent (spent, obligated, restricted) during the
 prior Federal Fiscal Year in supporting services and
 activities consistent with a network of community-based
 and prevention-focused programs and activities designed to
 strengthen and support families to prevent child abuse and
 neglect.
- Used (spent, drawn down) during the prior Federal Fiscal Year to support services and activities for which the actual CBCAP Federal grant funds may be used.

Only funds that have not been used to leverage additional Federal funds under any other program may be claimed as leveraged funds for this program. State and non-Federal funds that are being used to meet the maintenance of effort, match or other cost-sharing requirements for other Federal funding are <u>not</u> eligible to be claimed.

Match funds are those funds from non-Federal sources that are included in the current application budget to supplement the Federal portion of the grant and must amount to at least 20% (in cash, not in-kind) of the current application grant award for activities under this title.

All Funds included as match funds in the current application budget **must** be:

- Received by the CBCAP lead agency from private, State, or other <u>non-Federal</u> sources for use during the current Federal Fiscal Year in which the application is being submitted.
- Budgeted for the current Federal Fiscal Year in supporting a network of community-based and prevention-focused programs and activities designed to strengthen and support families to prevent child abuse and neglect.
- Used during the Federal Fiscal Year in which it was applied to supplement the Federal portion of the grant to support services and activities for which the CBCAP Federal grant funds may be used.
- **In cash, not in-kind,** and amount to at least 20% of the grant award. (**Note:** There is no requirement to include more than a 20% match of non-Federal funds in the budget. However, if the State has a sizeable leveraged funds claim that ensures their grant award will be greater than the population allocation, the State may wish to figure in a higher percentage for match so that they do not have to submit a budget amendment in October).

The State may claim the money that it used for match in Federal Fiscal Year 2007 as part of their leveraged funds claim for their Federal Fiscal Year 2008 application, as long as this money is not leveraged to claim for any other source of Federal funds and the lead agency has remained the same for FY 2007 and FY 2008.

State Grants Based on Population-Only Portion of the CBCAP Funds

TENTATIVE POPULATION ALLOCATION OF CBCAP FUNDS - FFY 2008

<u>IMPORTANT NOTE</u>: The following figures represent our best estimate of what each State, Puerto Rico, and the District of Columbia will receive for the population portion of their grant award allocation. These figures are based on a 70% formula figure, census figures available; and an assumption that each of the Territories will receive the base allowance of \$200,000. These figures could change if census figures are updated, if there are additional set-asides in the appropriation, or if State participation differs from what is predicted at this time. The amount of funds available and population fluctuations have impacted the population distribution amounts for most of the States over last year's estimated allocation.

NOTE: The base allowance has been increased as a result of the increase in the overall appropriation for the CBCAP Program in FY2005. Future years' base allowances will be subject to the availability of funds.

For purposes of submitting the application, each State may use this amount when calculating its budget and determining the 20% matching funds obligation as set forth in section III-G-1 of the Program Instruction. Since this amount is only tentative, each State must submit a revised budget to OCAN, to complete the application, not later than October 31, 2008. The revised budget must be based on the actual amount awarded to the State, as verified in the Grant Award letter. For those States providing matching funds in excess of 20%, if the excess amount meets the 20% requirement of the final grant award, such States do not need to submit budget amendments.

| \$ | 389,671 | MONTANA | \$ | 200,000 |
|-----|----------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| \$ | 200,000 | NEBRASKA | \$ | 200,000 |
| \$ | 200,000 | NEVADA | \$ | 222,120 |
| \$ | 565,127 | NEW HAMPSHIRE | \$ | 200,000 |
| \$ | 241,587 | NEW JERSEY | \$ | 773,010 |
| | \$3,469,162 | NEW MEXICO | | \$ 200,000 |
| | \$ 422,129 | NEW YORK | | \$1,625,503 |
| \$ | 298,579 | NORTH CAROLINA | \$ | 765,587 |
| \$ | 200,000 | NORTH DAKOTA | \$ | 200,000 |
| | \$ 200,000 | N. MARIANA ISLA | NI | OS \$ 200,000 |
| \$1 | ,454,579 | OHIO | \$ | 986,595 |
| \$ | 844,855 | OKLAHOMA | \$ | 305,133 |
| \$ | 200,000 | OREGON | \$ | 303,920 |
| \$ | 200,000 | PENNSYLVANIA | \$ | 1,007,201 |
| \$ | 200,000 | PUERTO RICO | \$ | 369,057 |
| \$1 | ,158,921 | RHODE ISLAND | \$ | 200,000 |
| \$ | 573,141 | SOUTH CAROLINA | \$ | 367,304 |
| \$ | 239,863 | SOUTH DAKOTA | \$ | 200,000 |
| \$ | 241,109 | TENNESSEE | \$ | 497,219 |
| \$ | 350,483 | TEXAS | \$2 | 2,262,134 |
| \$ | 410,374 | UTAH | \$ | 265,521 |
| \$ | 200,000 | VERMONT | | \$ 200,000 |
| | \$ 501,666 | VIRGINIA | | \$ 652,423 |
| \$ | 521,360 | VIRGIN ISLANDS | \$ | 200,000 |
| \$ | 902,622 | WASHINGTON | \$ | 530,775 |
| | \$ 439,669 | WEST VIRGINIA | | \$ 200,000 |
| \$ | 267,662 | WISCONSIN | \$ | 463,418 |
| | \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | \$ 200,000 \$ 200,000 \$ 565,127 \$ 241,587 \$ 3,469,162 \$ 422,129 \$ 298,579 \$ 200,000 \$ 200,000 \$ 200,000 \$ 200,000 \$ 200,000 \$ 200,000 \$ 200,000 \$ 239,863 \$ 241,109 \$ 350,483 \$ 410,374 \$ 200,000 \$ 501,666 \$ 521,360 \$ 902,622 \$ 439,669 | \$ 200,000 NEBRASKA \$ 200,000 NEVADA \$ 565,127 NEW HAMPSHIRE \$ 241,587 NEW JERSEY \$ \$3,469,162 NEW MEXICO \$ 422,129 NEW YORK \$ 298,579 NORTH CAROLINA \$ 200,000 NORTH DAKOTA \$ 200,000 NORTH DAKOTA \$ 200,000 PENNSYLVANIA \$ 200,000 PENNSYLVANIA \$ 200,000 PENNSYLVANIA \$ 200,000 PERTO RICO \$1,158,921 RHODE ISLAND \$ 573,141 SOUTH CAROLINA \$ 239,863 SOUTH DAKOTA \$ 241,109 TENNESSEE \$ 350,483 TEXAS \$ 410,374 UTAH \$ 200,000 VERMONT \$ 501,666 VIRGINIA \$ 521,360 VIRGIN ISLANDS \$ 902,622 WASHINGTON \$ 439,669 WEST VIRGINIA | \$ 200,000 NEBRASKA \$ \$ 200,000 NEVADA \$ \$ 565,127 NEW HAMPSHIRE \$ \$ 241,587 NEW JERSEY \$ \$ \$ 3,469,162 NEW MEXICO NEW YORK \$ 298,579 NORTH CAROLINA \$ \$ 200,000 NORTH DAKOTA \$ \$ 200,000 NORTH DAKOTA \$ \$ 200,000 OREGON \$ 844,855 OKLAHOMA \$ \$ 200,000 PENNSYLVANIA \$ \$ 200,000 PENNSYLVANIA \$ \$ 200,000 PENNSYLVANIA \$ \$ 200,000 PUERTO RICO \$ \$ 1,158,921 RHODE ISLAND \$ \$ 573,141 SOUTH CAROLINA \$ \$ 239,863 SOUTH DAKOTA \$ \$ 241,109 TENNESSEE \$ \$ 350,483 TEXAS \$ 241,109 TENNESSEE \$ \$ 350,483 TEXAS \$ 2410,374 UTAH \$ \$ 200,000 VERMONT \$ 501,666 VIRGINIA \$ \$ 521,360 VIRGIN ISLANDS \$ \$ 902,622 WASHINGTON \$ \$ \$ 902,622 WASHINGTON \$ \$ \$ \$ 439,669 WEST VIRGINIA |

CERTIFICATIONS

Information and required forms for the certifications listed below are available at: http://www.acf.hhs.gov/programs/ofs/forms.htm#c

Certification Regarding Lobbying

Disclosure of Lobbying Activities

Certification Regarding Environmental Tobacco Smoke

Regional Offices Contact List

REGIONAL OFFICE CHILD ABUSE AND NEGLECT CONTACTS FOR CBCAP

REGION I

Bob Cavanaugh Connecticut DHHS/ACF Maine

Administration for Children and Families

Department of Health and Human Services

JFK Federal Building; Room 2000

Boston, MA 02203

Massachusetts

New Hampshire

Rhode Island

Vermont

Phone: 617-565-2449 Fax: 617-565-2493

Email: bob.cavanaugh@acf.hhs.gov

REGION II

Junius Scott, Program Manager
Youth and Family Services Division
Administration for Children and Families
New York
Department of Health and Human Services
Puerto Rico
Virgin Islands

New York, NY 10278

Phone: 212-264-2890 ext 145 Fax: 212-264-0013

Email: junius.scott@acf.hhs.gov

REGION III

Christine Craig
DHHS/ACF/Child Welfare
Administration for Children and Families
Department of Health and Human Services
Virginia
150 S. Independence Mall West; Suite 864
Washington, DC

West Virginia

Philadelphia, PA 19106

Phone: 215-861-4065 Fax: 215-861-4070

Email: christine.craig@acf.hhs.gov

REGION IV Alabama Florida

Ruth Walker Georgia
DHHS/ Administration for Children & Families Kentucky
Atlanta Federal Center Mississippi
61 Forsyth Street, SW - Suite 4M60 North Carolina
Atlanta, GA 30303-8909 South Carolina

Phone: 404-562-2901 Fax: 404-562-2983 Tennessee

Email: ruth.walker@acf.hhs.gov

REGION V

Carolyn Wilson-Hurey

Administration for Children and Families

Department of Health and Human Services

Michigan

Michigan

Minnesota

Chicago, IL 60601-5519

Ohio

Email: carolyn.wilson-hurey@acf.hhs.gov

REGION VI

June Lloyd, Amy Grissom
OSTP/Child Welfare
Administration for Children and Families
Department of Health and Human Services
Oklahoma
1301 Young Street, Room 945, ACF – 3
Texas

Dallas, TX 75202-5433

Phone: 214-767-4156 Fax: 214-767-8890 Email: jlloyd@acf.hhs.gov or agrissom@acf.hhs.gov

REGION VII

Rosslyn Wilson Iowa
Office of State & Tribal Operations Kansas
Administration for Children and Families Missouri
Department of Health and Human Services Nebraska

601 E. 12th Street; Room 276 Kansas City, MO 64106

Phone: 816-426-2262 Fax: 816-426-2888

Email: rwilson@acf.hhs.gov

REGION VIII

Marilyn Kennerson

Administration for Children and Families

Federal Office Building

N. Dakota
1961 Stout St. Room 975

Denver, CO 80294-3538

Phone: 303-844-1163

Fax: 303-844-3642

Wyoming

Email: marilyn.kennerson@acf.hhs.gov

REGION IX

Sally Flanzer Administration for Children and Families Department of Health and Human Services Room 9-370

90 - 7th Street

San Francisco,CA 94103 Phone: 415-437-8425 Fax: 415-437-8436

E-mail: sally.flanzer@acf.hhs.gov

REGION X

Tina Minor Administration for Children and Families Department of Health and Human Services Blanchard Plaza

2201 Sixth Avenue; Suite 600 Seattle, WA 98121-1827

Phone: 206-615-3657 Fax: 206-615-2575

Email: tina.minor@acf.hhs.gov

Arizona California Hawaii Nevada

Alaska Idaho Oregon Washington