

# Military Families and Veterans Prevention Program

**Program Outcomes Report** 

December 1, 2019

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#### Introduction

In 2015, the 84th Texas Legislature required the creation of a pilot program for child abuse prevention for military families and veterans (HB 19). This legislation directed the Department of Family and Protective Services (DFPS) to develop and implement a prevention program to serve military and veteran families, who have committed, have experienced, or who are at a high risk of: family violence and/or child abuse and neglect. Named the Military Families and Veterans Prevention Program (MFVPP), this DFPS pilot program requires the delivery of prevention services with an early intervention component in targeted military and veteran communities in Texas.

As part of the pilot program, an outcomes evaluation was published in October 2017 and annual outcomes are reported through the DFPS Prevention and Early Intervention (PEI) Outcomes Report required by the 2018-2019 General Appropriations Act, Senate Bill 1, 85th Legislature, Regular Session, 2017 (Article II, Health and Human Services Commission, Rider 28), or through stand-alone report for years that the PEI Outcomes Report is not required. This report serves as the outcomes report required by Human Resources Code 53.002(d).

#### **Selection of Program Sites**

With 15 active military installations, Texas has the second highest active duty military population in the United States. Approximately 10 percent of all active duty forces in the U.S. reside in Texas. In addition, nearly 1.6 million Veterans live in Texas (second highest number of veterans of any state in the U.S.). Veterans are younger than in years prior and are less likely to be employed, with an unemployment rate that is three times higher than their civilian counterparts.

DFPS focused this prevention initiative in the three largest military communities in Texas. This program was designed for military and veteran families with children 0-17 years of age who are at risk of family violence or abuse and neglect.

| Table 1 - Militar | y and Veteran | Families in | Targeted Co | unties |
|-------------------|---------------|-------------|-------------|--------|
|-------------------|---------------|-------------|-------------|--------|

| County  | Active Duty Members* | Dependents* | Veterans** |
|---------|----------------------|-------------|------------|
| Bell    | 46,114               | 74,831      | 36,965     |
| Bexar   | 34,912               | 41,881      | 158,710    |
| El Paso | 28,465               | 46,437      | 47,936     |

<sup>\*</sup> Source: DoD Strategic Plan, 2013

Texas National Guard members, Ready Reservist, discharged service members, and the local military retiree population are not listed in Table 1 as these citizen soldiers and retirees are embedded into the general population within each targeted military community, but they are still eligible for prevention services provided under the pilot program.

<sup>\*\*</sup> Source: Texas Veterans Commission Report, "Veterans In Texas, A Demographic Report" Dec 2013

### **Purpose of Military Families and Veterans Prevention Program**

PEI worked with military communities and stakeholders to craft the Military Families and Veterans Prevention Program (MFVPP) to fulfill the requirements of HB 19. Research has shown that five protective factors are closely linked to a decreased likelihood of child abuse and neglect:

- Family functioning/resiliency;
- Social support;
- Knowledge of parenting/child development;
- Concrete support; and
- Nurturing and attachment.

Providers had flexibility to concentrate their resources to best fit the specific needs in their area. Each provider developed a comprehensive plan to build and support military families' protective factors, resulting in stronger, safer families and improved military communities. Required services include:

- evidence-based or promising practice programs to support military families;
- performance measures that gauge program effectiveness;
- programs with a focus on children ages 0-17; and
- an approach focused on the needs of military and veteran families, and the military culture and environment they live in.

Providers were also required to develop an official working relationship with the local Family Advocacy Program (a Department of Defense sponsored program for child and domestic abuse prevention and intervention) and provide ancillary services targeted toward needs identified in their Community Needs Assessment, as required in the request for applications.

Table 2 – Service Providers by County

| County  | Associated Military | Primary Contractor             | Subcontractor (if applicable)              |
|---------|---------------------|--------------------------------|--|
|         | Instillation        |                                |  |
| Bell    | Fort Hood           | STRONG STAR - University of    | Poet for Hire;                             |
|         |                     | Texas Health Science Center    | Restorative Hope Sanctuary;                |
|         |                     | San Antonio;                   | Texas A&M                                  |
|         |                     | The Boys and Girls Clubs of    |  |
|         |                     | Central Texas                  |  |
| Bexar   | Joint Base San      | United Way of San Antonio and  | Family Endeavors;                          |
|         | Antonio             | Bexar County (UWSA)            | Family Service Association of San Antonio; |
|         |                     |                                | Children's Shelter;                        |
|         |                     |                                | Big Brothers Big Sisters of South Texas;   |
|         |                     |                                | Any Baby Can;                              |
|         |                     |                                | Voices for Children                        |
| El Paso | Fort Bliss          | Child Crisis Center of El Paso | Big Brothers Big Sisters                   |

#### Services Offered by Community

#### Bell County – STRONG STAR and Boys and Girls Clubs of Central Texas

STRONG STAR includes three separate programs for military families along the deployment cycle, including prior to deployment, deployment, and return home. This includes parent education, counseling, skills and mentoring services for youth, and innovative programing such as STEM curricula and poetry classes to engage families in building resiliency. Boys and Girls Clubs of Central Texas provides individual and group mentoring services to youth and families in the program.

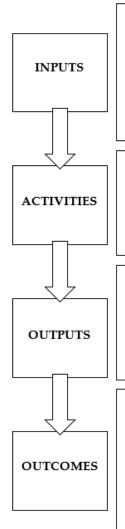
#### Bexar County - United Way of San Antonio and Bexar County (UWSA)

UWSA participates in the Mission United program to provide military information and referrals for families. Additionally, several evidence-based parent education and youth engagement models are offered directly and through subcontractors, such as: Parents as Teachers, Stewards of Children, Nurturing Parenting Program, Big Brothers Big Sisters, and Nurturing Parenting. Counseling, including Parent-Child Interaction Therapy, is available. UWSA also contracts to provide basic needs, case management, and group connections. Additionally, training and resources are made available to early childcare providers to prevent and identify abuse and neglect.

#### El Paso County - Child Crisis Center of El Paso (CCCEP)

CCCEP provides the STEP parenting curriculum in a group setting for military and veteran families, along with case management and support using the WRAP model. They can also provide emergency shelter for up to 31 children, age newborn through 13 years, for families experiencing a crisis. CCCEP also has specific services for fathers and father figures. Big Brothers Big Sisters provides youth mentoring and parent and volunteer workshops.

## **Program Logic Model**



- · PEI funds three sites in Bell, Bexar, and El Paso Counties.
- Evidence-based or evidence-informed program curricula (e.g. Parents as Teachers, Stewards of Children, Common Sense Parenting, Systematic Training for Effective Parenting).
- Sites develop programs, hire, and train staff.
- Programs identify the unique needs of military and veteran families.
- Programs recruit and enroll military families and veterans.
- Programs provide services, trainings, and referrals targeted toward military families and veterans.
- Services provided to the designated number of families each month.
- Services provided to the designated number of families by the end of the fiscal year.
- Pre-service and post-service Protective Factors Survey questionnaires are completed by the primary caregivers served.
- Program-specific effects (e.g., Parents as Teachers).
- Absolute increase in the score for at least one protective factor (nurturing/attachment, knowledge of child development, parental resilience, social connections, concrete supports).
- Children remain safe (primary caregivers are not designated perpetrator for an incident of child abuse or neglect occurring while registered in and receive services through program).

### **Programmatic Findings**

PEI published a <u>program evaluation</u> for the Military Families and Veterans Prevention Program (MFVPP) in 2017 and continues to monitor the progress made in serving current service members, veterans, and military families. While each provider tailored services to the specific and diverse needs of the military population in their area, several overarching themes appear in all three communities:

- Families perceive seeking help as having potential negative consequences should their command structure become aware of the family engaging in services. Military connections were essential to recruitment. Buy-in from military and base staff eased challenges to recruitment and reduced perceived stigma from engaging in services.
- Families needed more assistance in meeting basic needs (such as housing and food) than anticipated, especially those that are active-duty members.
- Families often struggled with transportation, child care, and for enlisted members, not having the flexibility to take off a few hours every week for several weeks to complete an evidence-based program or engage in counseling. While providers made modifications to the program to meet family needs, it became difficult to maintain program fidelity.
- Military spouses demonstrated different needs from military-connected youth, and different from that of the active-duty member or veteran. Many services were more accessible for military-connected family members, including spouses or children, rather than the enlisted member, because family members were often the most available for services. This includes challenges related to work and training schedules of active-duty service members, deployments, and frequent moves within the community to maintain affordable housing.

#### **Programmatic Outcomes**



## Serving more than 2,700 Families

More than 2,700 families have benefited from direct services and connections to other supports in the community. Providers have also engaged more than 30,000 individuals through community events, referral links, and trainings.



#### | | 23% of caregivers were prior perpetrators of child abuse or neglect

Meeting High Risk Needs: 23 percent of caregivers had prior involvement in the child welfare system as a perpetrator of child abuse or neglect. Studies have identified other risk factors prevalent families with military connection such as marital conflict, domestic violence, depression, anxiety, and "secondary traumatization" that interferes with effective parenting as well as increased risk for emotional and behavioral problems among children.<sup>1</sup>



## 99.2% of primary caregivers served do not come to the attention of child welfare

The vast majority of primary caregivers served in this program were not identified as a designated perpetrator during or after their participation in the program (99.2%).



## 90% Increase in Protective Factors

More than 90% of families served in the program increased at least one protective factor as measured by the Protective Factors Survey.

<sup>&</sup>lt;sup>1</sup> Saltzman WR, Lester P, Beardslee WR, Layne CM, Woodward K, Nash WP. Mechanisms of risk and resilience in military families: theoretical and empirical basis of a family-focused resilience enhancement program. Clin Child Fam Psychol Rev. 2011;14(3):213–230. doi:10.1007/s10567-011-0096-1. Retrieved from: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3162635/

#### What Families Are Saying

Qualitative feedback continues to drive referrals to the program and give families the supportive boost from services:

"When my wife was diagnosed with a terminal condition, I knew it would be a struggle for our family. The ability to maintain my Active Duty job, be a parent of two kids, and a fulltime caregiver became very stressful for me. The program offered in home counseling sessions that made it easier on me as an Active Duty Military member and parent filling both roles. My kids were able to talk to the counselor and build the trust they needed with her. The program invited us to local events where we were able to meet other military families in similar situations. This gave the kids and us as a family to see that we weren't the only ones struggling. Our counselor helped our family through this difficult time by counseling myself and taking the time to visit and follow up with the children when they had a difficult time including periods of self-harm and contemplating suicide. Overall there are not enough words to describe how important our counselor was to our family and how this program provided not only the help our family needed but the strength to move forward."

"My husband is currently in the military and I recently have separated from the Army. After our twins were born a year ago, I realized that not only was I dealing with post-partum depression but also PTSD from prior deployments. We were introduced to the program's Wraparound Case Management services. With my husband deploying in three months, we were able to take parenting classes together and get the assistance needed for while he was deployed. The classes helped me talk through things and relate to others. I felt reassured through the process."

"Since joining the Military Family and Veterans Prevention Program, we have received many services which have helped tremendously to support our family: things like counseling, parent education, and basic needs. Being in a family with a wounded warrior is difficult, especially being a disabled vet myself. It presents financial struggles, as well as social and family issues. This program has helped us meet other families in similar situations by providing outings, like going to the San Antonio Zoo or a meet and greet where we were able spend time as a family that otherwise we couldn't afford. Our counselor worked one-on-one with us to address our specific situation and even helped surprise our son with a new donated bike after he broke his. From the help we've received financially, through therapy and advice about work and life, we appreciate this program more than we can express. It has truly eased my mind and my heart as we work through the stress and trials of our lives."

#### **Future of Program**

With the number of veterans and active service members living in Texas on the rise, there is a great need for prevention services in both military communities and across the state to alleviate the challenges and stressors associated with frequent moves, deployments, separations, and other risk factors. In State Fiscal Year 2020, Military Families and Veterans Prevention Program (MFVPP) pilot program will transition with the release of a Request for Application (RFA) to expand the program beyond the pilot. Based on the findings and outcomes from the current pilot program, DFPS Prevention and Early Intervention anticipates including additional effective strategies in the new RFA, such as:

- supporting services specifically for children, including short-term and extended case
  management for children with developmental delays or disabilities, mentoring, and out
  of school time programming;
- requiring short-term parenting education programs, and programming that supports families across the deployment cycle;
- ensuring that providers develop relationships with local military installations,
  particularly with smaller units such as squadrons and battalions, and working directly
  with relevant departments instead of only pursuing a formal Memorandum of
  Understanding (MOU) with the installation's Family Advocacy Program (FAP); and
- encouraging service provider staff to demonstrate military connectedness as a
  prerequisite to serving military families either through serving military families
  previously, serving in the military, being military connected or being military competent
  (demonstrating knowledge of military culture and norms). The programs have been
  better received when staff had a military connection, either personal or professional.