



Within Our Reach

In October 2019, the U.S. Department of Justice, Office of Justice Programs, Office for Victims of Crime launched [Child Safety Forward](#) (CSF), a three-year demonstration initiative to develop multidisciplinary strategies and responses to address serious or near-death injuries resulting from child abuse or neglect and to reduce the number of child fatalities.<sup>1</sup> The efforts were intended to produce models and practices that are responsive to a 21st-Century Child Welfare System as envisioned by the federal [Commission to Eliminate Child Abuse and Neglect Fatalities](#).

Five demonstration sites participated in CSF, with technical assistance led by Social Current. The five participation sites in this initiative are:

- St. Francis Hospital in Hartford, Connecticut
- Cook County Health in Illinois
- Indiana Department of Health
- Michigan Department of Health and Human Services
- California's Child Abuse Prevention Council of Sacramento County

As part of the final implementation study, each site identified a practice or policy change advanced through their work with CSF for a dialogue on how to impact systems change. The dialogue was facilitated by a team of two to three external evaluators with approximately five to seven local partners involved in the implementation of the policy or practice. This brief delves into the design of the site's policy or practice and suggests recommendations for similar initiatives based on the site's [experiences and lessons learned](#).

## Shifting Power to Families in Child Welfare

### Background

Hartford, Connecticut's Child Safety Forward initiative was led by St. Francis Hospital and Medical Center. The Hartford and Sacramento sites were unique among the five sites for not having a government agency as the grantee. Challenges with accessing data from state agencies early in the initiative led the team to focus on community-level data using publicly available data sets on fatalities, interviews, and focus groups with child protective agencies, law enforcement, educators, community members, impacted parents, and youth. This decision led to a major shift in practice and approach from one that was grass-tops to one that was grassroots.

Once Hartford moved away from system-owned data and system-led decision-making, they gained greater clarity on their primary goal: *To build parent and community power and capacity to address child well-being in the city of Hartford*. They also ended up broadening the leadership of CSF to include a Parent Engagement Work Group which led the data collection and decision-making efforts.

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<sup>1</sup> Four of the five Child Safety Forward demonstration sites applied for and received a no-cost extension for the initiative into a fourth year.

Hartford's data collection focused on learning about risks of child maltreatment, cultural strengths, and protective factors in underserved populations, as well as parent and community perceptions of both Child Protective Services (CPS) and available parenting education materials. The data revealed several issues with current practices:

- Parents in underserved communities do not trust providers, especially CPS, and are unlikely to adopt unfamiliar practices recommended by CPS.
- Child safety systems rarely acknowledge protective factors in underserved communities.
- Cultural practices in the community (In Hartford: Jamaican, Dominican, Puerto Rican and African American cultures) often reflect global perspectives on child-rearing that differ from American practices.
- Support, like parenting classes, and necessities like car seats are often not available. When they are made available, it is often after a parent has received a violation and/or are too narrowly focused to address underlying needs and contributing factors.
- Data isn't made available to the community. For example, in Hartford, parents were not aware that Black children are dying at twice the rate of white children in the surrounding suburbs. Without that data, the parents are unable to inform solutions in support of protective factors.
- Parents felt that the issue of child safety was too narrowly focused on incidences where parents were seen as "perpetrators." They felt it was important to learn about how to prevent all manners of preventable child death, not just those associated with abuse and neglect.

## Practice Change Solution

Hartford's Parent Engagement Work Group, informed by the data, led the development of a new parent curriculum, one that was grounded in the community and the realities that parents face. [From Pain to Parenting](#) is a proactive guide that covers safe sleep and maltreatment by addressing many of the issues discovered through community-led data collection. The curriculum redefines child safety to include community priorities. Intended to be delivered by parents to the community, it engages parents, grandparents, and extended family members who are deeply involved in child-rearing. Written by the work group, it reflects their voices and their cultures.

The curriculum is part of Hartford's initiative to create a neighborhood- and parent-driven approach to child and family well-being, where the community makes decisions on what issues to address, and how to address them. [From Pain to Parenting](#) includes lessons on safe sleep and child maltreatment, as well as domestic violence, mental health, injury prevention, firearm safety, and disability. The safety solution in Hartford does not just rely on the curriculum itself but on the practice of organizing to strengthen child and family well-being systems where parents and organizations share responsibility for child safety.

## Supportive Practices

While the curriculum is the solution, the process of developing the curriculum highlights the importance of how co-leading efforts with parents, including the design, research, drafting, and dissemination of education curriculum, rebalances power and sustains collaboration to address child safety. To support their work, the St. Francis Hospital team employed strategies from community organizing, parent empowerment, and working with trusted community assets.

**Community Organizing.** The Hartford team used a [community organizing](#) approach to guide their work. Community organizing emphasizes building power at the community level so that people who are closest to the problem have a direct role in defining the challenge and recommending solutions. This approach is commonly used in many fields, [including public health, over the last decade](#). However, it is less well known in child safety and hospital systems where there tends to be a power differential between systems and users of the system. Community organizing is not the same as parent engagement. The Hartford team had expertise in this approach. Team leaders had strong

skillsets for facilitating conversations, were intentional and direct in their reflection on power, and had longstanding personal and professional relationships in the community.

**Building Power with Parents.** Parent engagement is a commonly cited best practice in child safety. The Children’s Bureau defines [family engagement](#) as “a family-centered and strengths-based approach to making decisions, setting goals, and achieving desired outcomes for children and families.” Parent empowerment, a community organizing practice, takes the concept a bit deeper. Building power with parents is about positioning parents with shared responsibility and equal levels of power within the child safety system to inform outcomes. The Hartford team implemented several practices that helped parents to increase their confidence when talking with practitioners. They also provided ongoing training in skills related to facilitation, training, and advocacy.

Practices for rebalancing power include:

- Give parents roles typically reserved for staff, especially roles that include review or oversight over practitioners.
- Reserve time within each meeting for parents to help shape the agenda and educate stakeholders on their perspectives.
- Ensure parents make up more than 50 percent of the stakeholder group.
- Provide training in facilitation and other related skills.
- Offer appropriate financial reimbursement.
- Remind parents that institutional leaders are parents too.
- Engage parents separately to build their relationships with each other.

While the emphasis here is on building power with parents, it is important to note that this process also educates practitioners and issue experts about the realities that parents in the community face, including disparities related to racism and poverty. Power building strategies create two-way communication that brings to the attention of parents’ systems-level barriers, that if addressed, could protect against child maltreatment and fatalities. While parents were building power, the Hartford team worked to position the Parent Working Group as experts. Key institutional players were not absent from these discussions, but rather were part of them.

**Build on Community Assets.** Short-term, grant-funded projects often include strategies to engage communities but fail to produce lasting results. This leads to a lack of trust between community members and institutions. This challenge is compounded in the child safety sector by a deep trust deficit between parents and the institutions that have the power to determine whether a child is deemed safe. The Hartford team intentionally and patiently sought to build trust and demonstrate their long-term commitment. This meant follow-through with parents to help them overcome barriers to engagement, including transportation and child care, and but also other challenges the community was facing. They showed up for the parents involved and the results demonstrate this.

The Hartford team also recognized there were assets outside of their institution that are already known and trusted resources in the community. They invited [Hartford Communities that Care](#), [Hartford Parent University](#), [Voices of Women of Color](#), and the [Institute for Community Research](#) to be partners in this process. These partners understood the challenges that parents face and shared the project’s core values around parent power, racial equity, and respect for community knowledge, which allowed them to work more closely together over time. These partnerships become critical points for sustainability.

## Sustainable Implementation and Impact

Child Safety Forward identified elevated parent power as a core condition for a strengthened child and family well-being system because of what was being learned in Hartford. While the curriculum is an important product developed from the Child Safety Forward work, the key focus of sustainability efforts

was built on the practice of organizing parents around child safety. Sustainability in Hartford is the combination of stronger parent leadership and a shift in perspective at the organization level.

As parents increased their confidence and comfort, they began to take on leadership roles in the work group, both during and after the curriculum project. Parents planned and led meetings and community events, advocated for themselves in stakeholder meetings, and reviewed initiative documents to eliminate disparaging language about parents.

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*The parents took ownership of the project, so it can't just lie on the shelf. They have skin in the game, which leads to building leadership skills. – Initiative Partner*

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The team also noted changes in the mindsets of practitioners as they engaged with parents over time, shifting from a lack of understanding to respect for parent perspectives. Relationships were developed that the team has seen persist beyond the curriculum project, so that practitioners now have parents they can call for their opinions on issues related to child safety.

Beyond the shifts in status quo, the Hartford team was intentional in deciding where the curriculum would be housed. Hartford Parent University served as a parent-led, education-focused partner, and has a strong reputation in the community. It now houses the curriculum and is developing a group of facilitators to deliver it. The Parent Engagement Work Group is meeting with Hartford Public Schools to plan for using the curriculum with interested parents and intends to continue building on success to eventually reach parents across the city and beyond.

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*At the beginning, DCS wouldn't return my phone calls. Now they call me because they want a parent's perspective. – Parent*

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The Hartford team has continued its work since the end of the Child Safety Forward grant, with a goal of continuing to build parent and community capacity to impact policies that affect them directly. The parent working group and other parents began working on broader issues with Voices of Women of Color and successfully advocated against legislation, which would increase their food costs, before the Connecticut State Legislature in 2022. At the beginning of 2023, the initiative was transferred to the Institute for Community Research, and new funding has been secured from Casey Family Programs.

## Recommendations

While not all practice contexts are the same, there are core drivers of change that were identified in Child Safety Forward that apply across settings and communities to move toward a stronger child and family well-being system. The efforts in Hartford suggest that the following support power building:

- Don't be afraid to try different things. The Hartford team brought in well-established approaches grounded in racial equity and power shifting, showing they can be used successfully. This was not where their work started, but where the data took them.
- Engage people with expertise that aligns with the project's goal, even if it's unfamiliar or uncomfortable.
- Talk to the community and design solutions with them. Ask what they believe, what they value, and what would help them keep their children safe.
- Practice strategies that give parents the space and support necessary to build their confidence when working in unfamiliar settings.
- Get to know the community deeply and, where possible, use existing assets rather than building new ones.

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