Study of Coordination of Tribal TANF and Child Welfare Services: Final Report

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Overview

This report details the experiences of 14 tribes and tribal organizations that received grants in October 2011 for Coordination of Tribal Temporary Assistance to Needy Families (TANF) and Child Welfare Services to Tribal Families at Risk of Child Abuse or Neglect (TT-CW) from the Office of Family Assistance, Administration for Children and Families (ACF). It is the last of three reports of the Study of TT-CW, which was sponsored by the Office of Planning, Research and Evaluation in collaboration with the Office of Family Assistance, ACF.

The purpose of the TT-CW grants was to encourage contextually relevant approaches to service coordination between Tribal Temporary Assistance for Needy Families (TANF) and child welfare (CW) systems. The grantees were expected to provide one or more of the following services: (1) improved case management, (2) supportive services to tribal children in out-of-home placements, and (3) prevention services to tribal families at risk of child abuse or neglect. Grantees had flexibility to implement programs that fit each community’s context, culture, and needs. Accordingly, their coordination approaches and services were diverse. The grantees’ overall vision was to address child abuse and neglect by strengthening tribal families.

The purpose of the 4-year descriptive study was to inform practitioners, policymakers, and ACF about how the grantees coordinated and provided services for clients involved in both Tribal TANF and CW programs. The study goals were to document grantees’ service coordination, direct services provided, challenges and facilitators that influenced project implementation, and the extent to which grantees met their goals.

Key findings included the following:

**Coordination of services involved Tribal TANF and CW** working as primary partners to serve at-risk tribal families. Many grantees also collaborated with other tribal and nontribal agencies to provide services through referrals. Collaborative decision making was grounded in tribal traditions of consensus building. The grant supported new relationships and coordinated resources.

**The services the grantees provided to strengthen families** commonly centered on parenting education and family violence prevention. Many grantees initially focused on crisis management and then moved toward prevention to decrease the incidence of child abuse and neglect. Services reflected the importance of cultural and community connections to strengthen tribal families.

**Implementation facilitators and challenges evolved over time.** Facilitators included committed leaders, staff, and partners; coordination processes and policies; and grant flexibility. Early challenges related to hiring staff and establishing interagency collaboration. Later challenges reflected the complex needs of families and the limited community resources to address those needs.

**Steps toward sustainability** included exploring additional funding sources and other strategies. By the end of the grant, a few grantees had integrated elements of their projects into other tribal programs, co-located staff, established policies and procedures to sustain practices, and established partnerships with other agencies to maintain key services. However, many grantees continued to rely on grant funding and did not have formal structures in place to sustain their projects.
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1. Introduction

Background

The Personal Responsibility and Work Opportunity Act of 1996 created Temporary Assistance to Needy Families (TANF) to promote self-sufficiency and stability among needy families. The Tribal TANF program provides similar assistance to federally recognized American Indian and Alaska Native tribes. Each Tribal TANF grantee has the authority to independently design, administer, and operate its TANF program according to the tribal community’s needs.

Families who qualify for TANF—whether state or Tribal TANF—are generally at greater risk for child maltreatment than other families. For example, children whose families live in poverty are three times more likely to have been reported as abused and seven times more likely to have been reported as neglected than children from more advantaged families (Sedlak et al., 2010). Specifically, family conditions associated with poverty (e.g., inadequate housing and homelessness, unmet basic needs, parental stress, inadequate supervision, substance abuse, and domestic violence) can pose risks to child safety (Duva & Metzger, 2010).

Child welfare (CW) agencies (i.e., child protective services) were established in response to the Child Abuse Prevention and Treatment Act of 1974, which mandated that all states establish procedures to investigate suspected incidents of child maltreatment. Partly funded by the federal government, state and tribal CW agencies administer programs to promote positive outcomes for children and families involved in CW. Since many families are involved with both the welfare (TANF) and CW systems, effective coordination of services between systems may improve services and outcomes for families. As TANF is intended not only to encourage parents to improve their socioeconomic status but also to provide stable homes, TANF and CW agencies seem ideal partners to coordinate efforts to provide services to address family risks and ensure that children’s basic needs are met.

An underlying premise of service coordination is that the needs of families, rather than funding streams or organizational structures, should drive the provision of services. Through effective interagency coordination, organizations can pool scarce human and material resources, share expertise among staff, expand services, reduce duplication of efforts, and exchange information. By coordinating services, programs may better anticipate families’ needs and prevent situations of abuse or neglect.

In 2011, the Office of Family Assistance (OFA), Administration for Children and Families (ACF), awarded demonstration grants for Coordination of Tribal TANF and CW Services to Tribal Families at Risk of Child Abuse or Neglect (TT-CW) to 14 tribes and tribal organizations that operate Tribal TANF programs. Grant awards varied but were capped at $150,000 per year for the 4-year grant period that began October 2011 and ended October 2015. The purposes of the grants were to identify promising approaches to improve service delivery to TANF-recipient tribal families at risk of child abuse or neglect and to learn about ways to implement culturally relevant programs for low-income tribal families.
In accordance with grant guidelines, each funded project focused on providing one or more of the following services: (1) improved case management for families eligible for assistance from a Tribal TANF program; (2) supportive services and assistance to tribal children in out-of-home placements and the tribal families caring for these children, including adoptive families; and (3) prevention services and assistance to tribal families at risk of child abuse and neglect. Grant requirements allowed for substantial flexibility for interagency collaboration to provide these services to at-risk families.

**Study Purpose and Goals**

The purpose of the 4-year descriptive study, sponsored by the Office of Planning, Research and Evaluation, in collaboration with the Office of Family Assistance, ACF, was to provide information to practitioners, policymakers at various levels, and ACF about how the TT-CW grantees coordinated and provided services for clients involved in both programs.

The study goals were to document grantees’ service coordination, direct services provided, challenges and facilitators that influenced project implementation, and the extent to which grantees met their goals. The study also aimed to identify lessons learned about coordination of Tribal TANF and other social services in tribal settings to inform future initiatives.

**Methods and Data Sources**

The study team used a culturally responsive, relation-based research approach. The approach included initial grantee engagement; ongoing dialogue and interaction; avenues for grantee networking and sharing through webinars, workshops at annual meetings, and a common resource portal; assistance to grantees to enhance their data collection and project tracking capacity; and sharing of findings to inform the grantees’ projects.

The study team used qualitative research methods to collect data that reflect perceptions of a range of grantee staff and stakeholders. Key respondents included TT-CW project staff, Tribal TANF and CW staff and supervisors, project partners, tribal elders, and tribal leadership. Much of the data were collected via semi-structured discussions during three rounds of site visits to the grantee communities. The site visits included field observations of grantee activities, such as multidisciplinary team (MDT) meetings and Positive Indian Parenting workshops. The team also analyzed grantees’ applications, performance progress reports, and program and dissemination materials. The team supplemented site visit data with ongoing update calls with grantees to keep abreast of project implementation over the course of the grant period. Finally, the team developed comprehensive grantee profiles and updated them at least annually. These profiles provided current descriptions throughout the study of each grantee’s community context, project characteristics, and implementation progress.

The study goals guided data analyses. The team analyzed the qualitative data collected from the 14 grantees and the grantee profiles in several steps that included identifying, coding, and categorizing key information. To facilitate analysis, the team used the ATLAS.ti qualitative software program with a three-level coding process to organize data for each site and
investigate emerging themes. This approach allowed the team to identify commonalities, variations, relationships, and themes across grantees.

**Final Report**

This report details grantees’ implementation of grant-funded service coordination efforts across Tribal TANF and CW. It describes the grantees, explores the paths they took on their journey to strengthen tribal families, identifies project facilitators and challenges, and shares lessons learned.
2. Grantee Background: Beginning the Journey

This chapter describes the 14 TT-CW grantees as they set out to coordinate Tribal TANF and CW services, including project context, goals, and organizational structures. The grantees applied for a modest grant opportunity that supported activities aimed at preventing child abuse and neglect by strengthening tribal families. However, each grantee was on a unique journey. The grantees proposed a range of activities that reflected the diverse concerns and service gaps in their communities.

Context

Ten of the 14 grantees had previous grant-funded projects to enhance service coordination between Tribal TANF and child welfare; nine had been awarded the Coordination of Tribal TANF and Child Welfare Services to Tribal Families at Risk of Child Abuse or Neglect grant by OFA and one had a grant from the Children’s Bureau for Collaboration Between TANF and Child Welfare to Improve Child Welfare Outcomes. The previous grants were awarded in 2006 and ended in 2011. These ten grantees were continuing or expanding coordination that began in 2006, while four were first-time grantees.

Most grantees were located in the northwest and Alaska. There were four in Washington State, four in Alaska, two in Montana, and one each in Oregon, California, Idaho, and Wisconsin (see exhibit 1). Grantees’ service areas ranged from a few square miles to nearly 300,000 square miles. Most were in rural areas serving remote communities and native villages; a few were in or near urban areas. Service area populations varied from a few thousand to tens of thousands.

2011 Tribal TANF-Child Welfare Grantees:
- Association of Village Council Presidents*
- Central Council of the Tlingit and Haida Indian Tribes of Alaska
- Cook Inlet Tribal Council
- Tanana Chiefs Conference
- Nooksack Tribe*
- Port Gamble S'Klallam Tribe
- Quileute Tribe
- South Puget Intertribal Planning Agency
- Chippewa Cree Tribe of the Rocky Boy’s Reservation*
- Confederated Salish and Kootenai Tribes
- Confederated Tribes of Siletz Indians
- Hoopa Valley Tribe
- Coeur d’Alene Tribe*
- Forest County Potawatomi Community
*First-time grantee
The grantees’ target populations were families who were receiving or eligible for TANF and were at risk of child abuse or neglect. Many residents in the grantee service areas were living at or below federal poverty levels, particularly those in remote villages and rural areas. Common challenges included a lack of affordable housing, limited or seasonal employment opportunities, lack of transportation, substance abuse and mental health issues, intimate partner violence, teen pregnancy, and homelessness.

Grantees had few resources to address these complex needs. They noted that Tribal CW programs generally have limited funding, staff, and infrastructure for providing culturally relevant services that are critical for addressing co-occurring needs and the effects of historical and intergenerational trauma. Tribal families are referred to state CW systems at higher rates than nontribal families, with a large percentage referred for neglect (Cross, 2011). Neglect may stem from “structural risks,” such as poverty, lack of access to services, and untreated depression. Grantees noted that addressing structural risks was of particular importance in their communities and propelled them to apply for the grant.

**Goals**

Grant guidelines were flexible. OFA encouraged the grantees to expand coordination beyond Tribal TANF and CW to areas such as family violence prevention, health, substance abuse, employment-related services, and home visiting and other child development services. Child- and family-serving agencies were expected to work together and to feature culturally relevant
systems of care that included wraparound\(^1\) services and supports, effective communication and collaboration, and linkages and partnerships across agencies and programs.

All grantees aimed to strengthen tribal families and keep children safe in their homes and communities. In their applications, most grantees’ goals aimed to improve or enhance systems- and organizational-level Tribal TANF and CW practices and many also had individual- or family-level goals. Examples of grant goals are shown in exhibit 2.\(^2\)

**Exhibit 2. Examples of Tribal TANF-Child Welfare Grantee Goals**

<table>
<thead>
<tr>
<th>Systems-Level Goals</th>
<th>Organizational-Level Goals</th>
<th>Individual- or Family-Level Goals</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increase coordination between Tribal TANF and CW</td>
<td>Enhance or improve current practices</td>
<td>Increase self-sufficiency</td>
</tr>
<tr>
<td>Coordinate case management</td>
<td>Use preventive approaches to serve families</td>
<td>Strengthen family units</td>
</tr>
<tr>
<td>Develop common intake and risk assessment forms for Tribal TANF and CW</td>
<td>Provide education and training to families</td>
<td>Stabilize families</td>
</tr>
<tr>
<td>Establish coordinated wraparound program across partnering agencies</td>
<td>Implement new supportive services</td>
<td>Decrease incidence of child abuse and neglect</td>
</tr>
</tbody>
</table>

Source: TT-CW Grant Applications

Most grantees modified their original project plan or design. Modifications during the first year included changes in project scope (e.g., expanding the target population); adjustments to planned activities due to reduced grant funding (e.g., reducing the number of tribal sites served or the number of youth events); and changes in data collection activities or instruments.

**Tribal Organizational Structures**

Three grant projects resided in Tribal TANF programs and six resided in CW programs. The grant provided an opportunity for those projects to build bridges and establish protocols for working together across programs that had previously worked independently in silos. Four projects resided in tribes’ centralized social/family services departments; they already had co-located

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\(^1\) The wraparound model aligns with the primary goals of the grant. Wraparound can be defined broadly as a team-driven process involving the family, child, natural supports, agencies, and community services working together to develop, implement, and evaluate individualized plans. The planning process is child- and family-centered, strengths based, community based (using a balance of formal and informal supports), culturally relevant, flexible, coordinated across agencies, and outcome driven, and it provides unconditional care.

\(^2\) Overall, grant applications included detailed descriptions of the intended goals rather than logic models.
staff and existing opportunities for communication. One grantee’s tribal organization served as the coordinating entity for three tribes. Most of the grantee tribes operated their own tribal CW programs. One CW department of a tribal organization worked with 25 tribes in its service area. Another grantee operated as an intertribal consortium and managed the TANF program for three tribal subgrantees. The different organizational structures had implications for grantees’ proposed collaborations and the ease by which they were formed.
3. Service Coordination: Collaborating on the Journey

Over the course of the grant, grantees made considerable progress toward increased service coordination and interagency communication and collaboration. Collaboration between partner agencies was mostly informal and depended on the quality and stability of staff and the relationships between Tribal TANF and CW. These relationships were reciprocal; both programs provided and received referrals (e.g., TANF staff referred clients to CW caseworkers for supportive services; CW staff referred eligible clients to TANF for resources). Most grantees also worked with several other partners to share information and referrals, including previously untapped tribal and nontribal resources.

Partners provided guidance on project development and implementation, offered opportunities to develop and improve relationships with local entities, and facilitated the restructuring of the tribes’ human service delivery system. Many grantees worked to implement wraparound models or multi-disciplinary teams (MDT), which was consistent with a holistic, relational worldview.

Overall, partner relationships and attitudes toward collaboration and coordination seemed to improve over the grant period. As one TT-CW grantee observed, “Through one little grant many bridges have been built.”

Partners

Primary partners. All grantees featured Tribal TANF and CW as primary partners. Half of the grantees also included other tribal, state, county, and community-based or private agencies as primary partners. A few grantees coordinated almost exclusively with tribal programs.

Across all grantees, primary partners coordinated their efforts to serve at-risk families through joint case planning, staffing, or case management. This represented a significant change in practice that linked efforts to foster family self-sufficiency with child protection. Six grantees implemented MDT meetings to promote greater involvement and accountability for families. Primary partners also provided direct services and family strengthening programs, such as Positive Indian Parenting trainings.

Secondary partners. Secondary partners expanded the scope and reach of service delivery. Each grantee established protocols for referring families to secondary partners for services. In a few cases, secondary partners also provided referrals to the TT-CW project or provided guidance to implement new practices or tools. They also shared information, which facilitated client intake, assessments, and outcomes. The number and role of secondary partners varied. Secondary
partners included family violence prevention, education, law enforcement, courts, substance abuse treatment, employment services, and health services.

Linkages and integration with state and county social services or child protective services evolved over time. For example, one grantee invited county CW and social services staff to participate in wraparound meetings and participated in county family decision meetings to support wraparound clients. Through its MDT, another grantee worked closely with county child and family services, provided intensive case management for at-risk families identified by the county, and supervised visitation for differential response cases. Tribal coordination with state child protective services was most pronounced in Alaska. By necessity, all four Alaska grantees worked closely with the State Office of Children’s Services as either a primary or secondary partner to address family preservation or reunification.

One grantee formed two unique partnerships. The first was with a group of tribal elders to provide cultural knowledge, advice, and direct mediation for families and to make recommendations regarding families referred by the tribal court. The second was with a tribal executive organization that helped ensure the integration of interagency collaboration into the tribe’s strategic plan.

Increased Coordination

All grantees reported increased coordination throughout the grant and positive changes within their tribal social service system. Coordination helped strengthen existing practices and introduce new practices, thus changing the landscape for service delivery in the communities served. Grantees had support and cooperation from tribal and nontribal partners who were open to new ideas and approaches. Service coordination efforts built upon tribal practices and teachings, thus “honor[ing] their cultures with services that seek to intervene, assess, and attempt to help” families (Cross, 1997).

While over half of the grantees already had many processes in place for coordinating with other tribal departments, the grant provided momentum and resources for more purposeful collaboration, such as joint case planning. Grantees also perceived increased awareness of program services and increased communication about the families served. As one project staff member noted, these innovative approaches helped change the way tribal programs work together: “Knowledge and awareness of who to go to for what specific services now resides in the community and there is a common expectation of collaboration across services.”

The most important factor in increasing coordination, as explained by grantees, was dedicated project staff and leadership. Half of the grantees had staff whose defined roles were to facilitate service coordination or provide direct prevention and intervention services. One grantee had a unit that served as an intermediary between CW and TANF. Another had a leader from an umbrella social service program who championed service coordination and created a collaborative environment across programs.
While all grantees reported greater coordination and progressed in similar directions, most of the grantees also described similar areas targeted by the coordination efforts. Common areas of coordination between Tribal TANF and CW are shown in Exhibit 3 and discussed below.

Exhibit 3. Areas of Coordination Between Tribal TANF and Child Welfare

- Increased formal communication
- Increased sharing of ideas
- Confidentiality agreements & ROIs in place
- Cross-training on confidentiality procedures
- Joint case planning by TANF & ICW staff
- Cross-training on child maltreatment
- Developed targeted prevention activities
- Had regularly scheduled meetings
- Supported family engagement
- Provided onsite supportive services
- Linkages to community support networks
- Merged resources


**Increased communication and idea sharing.** Developing and maintaining personal relationships and trust across TANF and CW staff was essential. Relationships fostered interdepartmental and cross-program coordination, including informally sharing ideas to support families and provide resources and formally sharing sensitive information through confidentiality agreements.

**Merged resources and linkages to community support networks.** Coordination opened formal and informal linkages to networks, including tribal initiatives such as home visiting. Partners merged resources such as funds, space, staff, and food for workshops. They also participated in strategic planning and visioning initiatives that broadened their reach and influence.

**Joint case planning.** More than half of the grantees established procedures with partner agencies that streamlined or coordinated case planning, case management, and referrals for dual-involved families. For example, a grantee established a protocol to report on school truancy and poor attendance. While this information provided grounds for withholding funds from TANF-enrolled parents, it also alerted CW staff of a potential problem at home. Memorandums of understanding (MOUs) facilitated information sharing and prompt responses to red flags. A few grantees did not engage in joint staffing, either by design or due to limited coordination.

One grantee described the benefits of wraparound sessions: “Engagement, reflection, responsibility, accountability, teamwork, strengthening relationships, and collaborative problem solving. It holds us accountable!”
Many grantees implemented MDTs and wraparound approaches. This increased staff understanding of family strengths and circumstances, served as a door to services for families, and increased coordination with nontribal partners. One grantee said its MDT provided an opportunity for “tribal programs to better support the client in progressing toward their goals, identify available resources, coordinate services, and offer solutions to overcome barriers…A benefit of the MDT is having more people at the table with access to resources, information, and supports, as well as using a holistic approach. It is a better use of time and fosters good communication. Everyone has a little bit of dialogue and exchange. The MDT helps build collegiality.” Another grantee’s MDT included tribal elders who served on the community’s “Peacemakers’ Circle.”

Many grantees implemented assessments of child safety, family self-sufficiency, or risk and protective factors. The assessments enabled early identification of risks and timely intervention and prevention. They also provided tribes with data to inform practice and track client outcomes. For example, one grantee trained staff to conduct assessments using the Structured Decision Making model to increase consistency in decision making and to target limited resources to families at highest risk for child maltreatment. Grantees implemented standardized assessments, such as the Casey Life Skills Assessment, as well as home-grown tools to assess safety and risk factors, youth capacity, and independent living outcomes.

**Cross-training.** Several grantees provided joint training with CW and TANF to improve service coordination. Cross-training on child maltreatment and confidentiality procedures helped staff and partners share information about common cases and feel more secure in doing so. An important lesson learned from a grantee’s Healthy Families Program was the importance of providing ongoing joint training to TANF, CW, and community partners on topics relevant to all agencies, such as wraparound training, child sexual abuse prevention training, and mandatory reporting. Project staff saw cross-training as an opportunity to strengthen informal working relationships among partners, which further supported service coordination.
4. Direct Services: Supporting Tribal Families

The TT-CW grants intended for families’ needs, rather than funding streams or organizational structures, to drive services. Some grantees were more successful than others in breaking down silos among social service programs related to funding sources, staffing, physical proximity, and political environments. However, services generally presented fewer early challenges than coordination activities, and grantees established many direct services early.

Grantees’ emphasis shifted over time from case management to prevention. Most grantees said they chose to target core prevention issues linked to risk of child abuse and neglect. The most common services were parenting education and family violence prevention.

Grantees offered supportive services to families as they worked toward self-sufficiency and family well-being goals; these included early childhood services and childcare, transportation services, and family and household resources. Grantees recognized the importance of cultural and community connections to heal families and guide youth. They offered mentoring and had tribal elders provide counseling and share teachings in native languages.

Activity Areas

Grant guidelines directed grantees to target their services toward three authorized activity areas: prevention services to families at risk of child abuse and neglect, case management services for families eligible for or receiving Tribal TANF assistance, and services for tribal children in out-of-home placements and tribal families caring for the children. The grantees proposed services in these areas in their grant applications, and they consistently implemented those services throughout the grant. All grantees provided prevention services, almost all provided case management, and nearly three-quarters provided services to children and families in out-of-home placements (see exhibit 4). Overall, grantees’ emphasis shifted from crisis case management to prevention activities over time.

Exhibit 4. Percentage of Tribal TANF-Child Welfare Grantees That Addressed Authorized Activity Areas

<table>
<thead>
<tr>
<th>Service Area</th>
<th>Percentage</th>
<th>(n)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prevention services</td>
<td>100%</td>
<td>(n=14)</td>
</tr>
<tr>
<td>Case management</td>
<td>93%</td>
<td>(n=13)</td>
</tr>
<tr>
<td>Children/families in out of home placements</td>
<td>71%</td>
<td>(n=10)</td>
</tr>
</tbody>
</table>

Service Types and Levels

Nearly half of the grantees introduced new direct services to the agencies’ service array, including empowerment and support groups for children and families, parenting classes, and life skills programs. These services, which were either funded by the grant or supported (in full or in part) by partner agencies, were seen as critical enhancements to support child and family well-being.

Many services included two-generation approaches (see exhibit 6), which aim to break the cycle of poverty and promote economic self-sufficiency for low-income families by providing services and supports for children and parents simultaneously (Annie E. Casey Foundation, 2014). They included home visiting, parenting skills training, early education and playtime opportunities involving parents, and other modes of assistance (e.g., medical, transportation, childcare, and housing) to strengthen child welfare and family stability. The services holistically supported tribal children and parents individually, within their family units, and within their larger communities.

Direct services changed over time but aligned with grant priorities. As grantees implemented their projects and developed a stronger understanding of the needs of families in their communities, they modified their strategies to reach project goals. Adaptations included further defining target populations, adopting evidence-based tools for coordinated screening and assessment, and extending the duration of services for families. Other program refinements included using the expertise of tribal elders as service providers, exploring trauma-informed approaches, and expanding family engagement efforts with a stronger emphasis on fathers.
Exhibit 5 summarizes the direct services grantees provided to children and families. Many provided services in more than one category.

**Exhibit 5. Types of Direct Services Tribal TANF-Child Welfare Grantees Provided**

<table>
<thead>
<tr>
<th>Category</th>
<th>Type</th>
<th>Number of Grantees</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family strengthening</td>
<td>Parenting and life skills training/education</td>
<td>10</td>
</tr>
<tr>
<td></td>
<td>Family case planning/decision making</td>
<td>9</td>
</tr>
<tr>
<td></td>
<td>Family strengths assessments</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>Counseling/support groups</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>Supervised visitation</td>
<td>2</td>
</tr>
<tr>
<td>Youth-focused activities</td>
<td>Teen/youth groups</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>Academic support</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>Parent advisory committee</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>College trips</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>Teen pregnancy prevention</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>Transitional housing/shelter</td>
<td>1</td>
</tr>
<tr>
<td>Economic support</td>
<td>Assistance (medical, transportation, childcare, housing)</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>Support for parent self-sufficiency (i.e., employment)</td>
<td>5</td>
</tr>
<tr>
<td>Health/safety services</td>
<td>Risk screening/needs assessments</td>
<td>9</td>
</tr>
<tr>
<td></td>
<td>Home visiting</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>Developing health/safety resources</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>Substance abuse screening/treatment</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>Mental health treatment</td>
<td>1</td>
</tr>
<tr>
<td>Social service navigation</td>
<td>Joint case meetings</td>
<td>10</td>
</tr>
<tr>
<td></td>
<td>Referrals to resources/awareness of resources</td>
<td>10</td>
</tr>
<tr>
<td></td>
<td>Interdepartmental service plans/wraparound services</td>
<td>10</td>
</tr>
<tr>
<td></td>
<td>Advocacy for clients</td>
<td>7</td>
</tr>
<tr>
<td></td>
<td>Appointment scheduling and attending meetings with clients</td>
<td>5</td>
</tr>
</tbody>
</table>


Multiple levels of the social environment play a role in individuals’ development, behavior, and well-being. To provide holistic support to tribal families, grantee services spanned several levels.

**Individual level.** Grantee services that supported individual family members included resume development, counseling and support groups, youth groups and academic services, and parenting and life skills training.

**Family level.** Services for families included home visiting, group events (e.g., Family Fun Night, Mom’s lunch), trainings (e.g., Healthy Families training, workshops, information fairs), family
goal setting and case planning, family resource centers, parent committees, case management services, and financial services.

**Organizational level.** Services at the organization level included joint trainings for TANF, CW, and other partner staff (e.g., parent education, child abuse and neglect prevention, wraparound, out-of-home placement, mandatory reporting).

**Systems level.** Services at the systems level included grantee-facilitated community events, trainings, and committees. Examples included holding joint TANF and CW information fairs and opening staff or parent trainings to the broader community.

### Service Descriptions

Exhibit 6 summarizes each grantee’s direct services.

**Exhibit 6. Descriptions of Direct Services Tribal TANF-Child Welfare Grantees Provided**

<table>
<thead>
<tr>
<th>Grantee</th>
<th>Description of Services</th>
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<tbody>
<tr>
<td><strong>Association of Village Council Presidents (AVCP)</strong> Bethel, AK</td>
<td>The <strong>TANF Healthy Families Project</strong>’s Yup’ik Way training is a culturally informed prevention and early intervention program for families involved in CW, individuals and families experiencing trauma, and child protection staff and caseworkers. AVCP uses the Structured Decision Making (SDM) tool; high-risk TANF families are referred to Healthy Families training and case management. Training is offered in Bethel each month over the course of 4 days; additional trainings are held in Anchorage and a village. The strengths-based, holistic Healthy Families curriculum is based on traditional Yup’ik parenting and child-rearing practices. It was developed by Yup’ik professionals under the guidance of elders, and training is facilitated by staff and elders.</td>
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<tr>
<td><strong>Central Council of the Tlingit and Haida Indian Tribes of Alaska</strong> Juneau, AK</td>
<td>Through the <strong>ICW/TANF Collaborative Case Management Initiative</strong>, Tribal TANF uses the SDM tool at intake to identify client risk factors and needs. Families at high risk for child maltreatment are referred to the ICW/TANF family caseworker, who provides intensive prevention services including regular home visits; client assessment reviews; case plan development; individual and culturally appropriate parenting education; referrals for appropriate services; appointment scheduling and meetings with clients; assistance with housing, childcare, and employment needs; and advocacy. Prevention services include additional case management and direct services to address priority needs, with a reevaluation at 90 days. The project has adopted a uniform intake process, a systems-of-care approach, and wraparound services.</td>
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<tr>
<td><strong>Cook Inlet Tribal Council</strong> Anchorage, AK</td>
<td>The <strong>Luqu Kenu—Everyone Is Family</strong> project coordinates TANF and CW services through an intensive case manager, who serves as a liaison between the departments. TANF caseworkers first screen families for risk of child abuse and neglect and substance abuse and use a Family Survey Form to determine service needs. They then refer families to the intensive case manager, who provides family assessments, service planning and followup services, linkages and advocacy with external resources, parent coaching, and in-home visitation. TANF and CW caseworkers jointly review case notes and participate in cross-trainings. Families are offered crossover services such as the Father’s Journey Program, which includes responsible parenting and economic development components.</td>
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<tr>
<td>Grantee</td>
<td>Description of Services</td>
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<tr>
<td>Tanana Chiefs Conference</td>
<td><strong>The Athabascan Family Support Project</strong> Navigator program supports families who are involved or at risk of involvement with child protection systems and families who are ready to pursue foster parent licensure. Navigators assist parents and relative caregivers in engaging with CW and TANF systems, identify needs, and facilitate services. The program tracks and cross-references TANF and Child Protection Program (CPP) clients monthly to identify eligible participants. It also facilitates monthly joint meetings with the participants, navigator, Athabascan Self-Sufficiency Assistance Program caseworker, CPP caseworker, and state social worker.</td>
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<tr>
<td>Fairbanks, AK</td>
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<tr>
<td>Nooksack Tribe Deming, WA</td>
<td><strong>The Healthy Families Program</strong> (Nooksack ICW caseworker) uses the Parents as Teachers curriculum to improve early detection of safety issues and family needs in the home for primary and placement families. Home visiting includes in-home assessments to identify needs and provide coordinated services and referrals. The program includes a wraparound health-centered services program with a cultural approach that includes a coordinated early childhood system for referrals and services, coordinated multidisciplinary case staffing, and family shared decision making. Additional services include transportation; parenting education on topics such as child development, financial management, and Positive Indian Parenting; and employment assistance.</td>
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<tr>
<td>Port Gamble S’Klallam Tribe</td>
<td><strong>The Advocating for Strong Kids</strong> project staff coordinate a wraparound model of service delivery with representatives of TANF, CW, and Family Preservation Services to develop individualized case plans, advocate for families during case planning, and facilitate monthly coordinated care team meetings. The project also provides community awareness and family activities; mentoring; school, work, and transition to adulthood support activities; emergency or crisis financial assistance; and numerous mental, physical, and emotional health services. Staff focus on transitional youth and have provided training for this group using the Casey Family Life Skills Curriculum. Additional services include transportation, Families Are Sacred curriculum, and academic coaching for middle and high school students.</td>
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<tr>
<td>Kingston, WA</td>
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<tr>
<td>Quileute Tribe La Push, WA</td>
<td><strong>The Youth and Family Intervention Program</strong> provides supportive services in the area of youth pregnancy prevention and teen parenting to break the cycle of generational poverty, teen and unplanned pregnancies, dependence on welfare, and involvement in the CW system. The program implements support groups, structured intervention activities (including biweekly Mom’s Luncheons and monthly Family Fun Nights), and youth education activities (including in-school youth support groups and college field trips). School support groups at two sites focus on empowering and educating youth to make safer and healthier decisions and to build trust and support. Additional community groups supported by the program include the Pregnancy Prevention Committee and the Parent Advisory Committee.</td>
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<tr>
<td>South Puget Intertribal</td>
<td><strong>The TANF and ICW Wraparound Collaborations Project</strong> implements a wraparound approach to integrated assessment, case planning, and service delivery for families who are involved in the TANF and CW programs or at risk of becoming involved in CW. Three family advocates, each at a tribal site, provide the core staffing. They conduct needs assessments and work with families to develop individual responsibility plans that build on identified strengths. Advocates use the assessment results to identify services needed, make referrals, and set goals. They collaborate with other staff to monitor families’ progress and share resources.</td>
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<tr>
<td>Planning Agency Shelton, WA</td>
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<tr>
<td>Grantee</td>
<td>Description of Services</td>
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<tr>
<td>Chippewa Cree Tribe of the Rocky Boy’s Reservation, Box Elder, MT</td>
<td>The Chippewa Cree TANF and CW Coordination Initiative uses an intensive case manager to provide direct services and help families navigate tribal and community systems. Multidisciplinary services include home visits, parenting classes, life skills and resume development, school attendance and grade tracking, transportation, substance abuse and mental health services, medical assistance, and an elders’ Peace Makers group. A systems-of-care approach is used with wraparound services and trauma-focused cognitive behavior therapy. Services are strengths based and infused with tradition. The project participates in interdepartmental releases of information; comprehensive family assessments; joint, multidisciplinary case staffing; coordinated service plans; and coordinated use of data collected across agencies.</td>
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<tr>
<td>Confederated Salish and Kootenai Tribes, Pablo, MT</td>
<td>The Families First Project uses a strengths-based empowerment model for intensive case management that includes development of individualized plans by an intervention/prevention caseworker. The grantee serves TANF-recipient or TANF-eligible families who are involved or at risk of involvement with child protective services. Families are monitored for 3–6 months to facilitate successful completion of services. The intervention worker provides intake and assessment, substance abuse screening, determination of eligibility for services, and referrals, as well as emergency assistance to families in crisis (e.g., child removal) to ensure that basic needs are met and the home is positive and safe for children. The intervention worker assists participants with goal setting, problem solving, advocacy, and transportation.</td>
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<tr>
<td>Confederated Tribes of Siletz Indians, Siletz, OR</td>
<td>The Healthy Family Healthy Child (HFHC) Project provides intensive individual support to participating families involved or at risk of involvement with CW and helps them achieve their goals. HFHC staff act as client advocates and intermediaries between clients and caseworkers. They coordinate and attend MDT meetings at which collaborative client-focused decisions are made regarding goals and services. HFHC staff hold wraparound service meetings with the client, social service representatives, and family, if desired. Staff also lead Positive Indian Parenting programs.</td>
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<tr>
<td>Hoopa Valley Tribe, Hoopa, CA</td>
<td>The Hoopa Family Resource Center implements multi-departmental action teams to improve coordination across tribal departments serving Tribal TANF eligible families. The project develops shared case management and visitation protocols for tribal and county human services and CW. It provides referrals and application assistance; computer and telephone access; a food bank and clothing closet; employment, budget, tax, and education assistance; support groups for grandparents and foster parents; Positive Indian Parenting, Fatherhood Is Sacred, and Motherhood Is Sacred classes; motivational speakers; grief/hospice support; and youth and family activities.</td>
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<tr>
<td>Coeur d’Alene Tribe, Plummer, ID</td>
<td>The goal of the ICW/TANF Cooperative Project’s Youth Shelter Program is to improve and maintain the emotional, spiritual, and physical health of tribal children, youth, and families under stress. Case managers provide financial, medical, and self-sufficiency support. Services include investigation of child abuse and neglect reports; home monitoring and studies; long-term and permanent placements; CW information and referrals to services such as drug and alcohol programs; food, transportation, living essentials (e.g., diapers), daycare, and education assistance; Individualized Education Programs; family decision making; and access to the shelter. A project coordinator/family preservation worker helps dual-system families navigate systems.</td>
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<tr>
<td>Forest County Potawatomi Community, Crandon, WI</td>
<td>The Family Resource Center provides recovery support; home visits; life skills classes; Positive Indian Parenting training; emergency planning; PlayShoppe/Music Garden for child development, social interaction, and literacy skills; Strengthening Relationships training for parents or partners; Nurturing Fatherhood program; weekly youth group (ages 10–12); weekly supervised visitation to promote family reunification; and holiday family events.</td>
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Culturally Informed Services

Throughout history, tribal communities have lost culture and language through events and policies that aimed to colonize, assimilate, and disrupt traditional native family life (Fisher & Ball, 2002). While these traumas have created challenges and disparities, tribes have continued to exhibit tremendous strengths, such as cultural identity and traditions; community ties and connectedness; intergenerational knowledge; and native languages, spiritual ceremonies, and traditional child rearing. All support the strengthening of tribal children, families, and communities (LaFromboise, Hoyt, Oliver, & Whitbeck, 2006; Torres Stone, Whitbeck, Chen, Johnson, & Olson, 2006; Krech, 2002). Culturally relevant health care, human services, and educational programs that are driven, designed, and controlled by native communities show the greatest promise in Indian Country (Besaw et al., 2004).

Most grantees embedded cultural practices, values, and beliefs into services and into their journey to strengthen and ensure the well-being of children and families. Many grantees reported that coming together as a community to serve community members is itself a traditional practice. Grantees defined “family well-being” in ways that corresponded with traditional values and beliefs. They recognized the importance of understanding tribal perspectives on family strengths, risks, needs, and CW. These perspectives informed their approaches, which included an emphasis on relationships and culture as healing mechanisms. Grantees hired staff who were tribal members, incorporated native languages into their programs, and encouraged participation in cultural activities by allowing participants to count these activities toward TANF work requirements (e.g., attending powwows and ceremonies, beading and crafting, hunting and fishing, caring for elders). They also used strengths-based assessments that emphasized tribal values.

Following are examples of how grantees incorporated culture into direct services:

- Involving tribal elders as part of the collaboration team and in wraparound sessions
- Promoting the welfare of children by emphasizing that child rearing is a sacred responsibility and that children should be treated with respect and consideration
- Including strengths-based and holistic messaging grounded in each tribal community’s culture to encourage families to overcome and avoid unhealthy behaviors
- Addressing historical trauma and delivering trauma-focused cognitive behavior therapy and cultural counseling to families
- Providing curricula such as Positive Indian Parenting that aim to strengthen families and parents by building on cultural strengths and protective factors for native children (e.g., connectedness, cultural identity, spirituality, ceremony, and language)
- Incorporating talking circles into group sessions
- Developing assessment tools for families that include tribal values and customs
- Including traditional spiritual practices and values into work with families

“...When we created our logic models we talked about how [tribal] values fit into our program design. They include hard work, humor, [and] care of elders.”

The amount of cultural tailoring varied across grantees. One grantee shared that although they did not formally incorporate tribal practices into their program and services, staff were guided by tribal values in their daily work with families.
5. Facilitators and Challenges: Building Solutions

Grantees experienced both facilitators and challenges in implementing their TT-CW projects. Factors that were instrumental to successful implementation included commitment from project leaders, staff, and partners; processes and policies for service coordination; information sharing; and flexibility to provide tailored, culturally relevant services.

Most grantees were working within a strained human service system. Early challenges focused on hiring and coordination, while later challenges focused on staff turnover, capacity, and complex family needs. Many grantees lacked data systems or training in data-driven decision making. The lack of a systematic approach for accessing technical assistance (TA) contributed to grantees’ challenges.

The grant did not include a formal planning phase. During the first year, grantees focused on startup activities (e.g., hiring and training staff, acquiring resources such as assessment tools and curricula). Grantees who had experience with a previous TT-CW coordination grant reported faster startup. A few first-time grantees required additional time to identify system needs and establish new relationships with key partners. By the middle of the grant, most projects were implementing most of their proposed key practices and services. By the end of data collection, all of the grantees were implementing system coordination and direct services to address the unique needs of children and families in their communities.

Facilitators

Qualitative data revealed common facilitators to successful implementation (see exhibit 7).

Staff characteristics. The commitment, skills, and backgrounds of project staff facilitated implementation. The grantees described staff as “give[ing] their all” to serve their communities, working closely with families, and putting in long hours on grant activities. Grantees recognized the benefit of staff with professional skills and knowledge of CW, TANF, and related social service programs. These staff smoothed transitions during staff turnover and kept the projects moving forward. Training, particularly cross-training of CW and TANF
staff, improved coordination and services. Grantees benefited from relationships with state and tribal colleges that offered trainings on social services delivery, trauma-informed approaches, and other therapeutic or service models.

As members of the tribal communities, staff were often familiar with the families they served. Grantees found that these connections, sometimes dating back several generations, helped build trust with families. One grantee said this created a perception of the project as a safe space. Trust helped maintain confidentiality in small, tightly knit communities. Grantees noted that staff respected their relationships with and knowledge of the families they served, which helped clients be more forthcoming earlier and more receptive to services. Strong interpersonal relationships among staff increased trust across service organizations and facilitated sharing of information and resources.

Grantees found the following types of trainings helpful:

- Indian Child Welfare basic training
- Child sexual abuse training (e.g., Darkness to Light)
- Parenting training (e.g., Nurturing Fathers, Positive Indian Parenting)
- TANF procedures
- Mandatory reporting
- Wraparound

Project leadership. Project leaders brought strong professional backgrounds and dedication to building relationships across agencies and fostering buy-in from community members and other stakeholders. Project champions included TT-CW project directors and managers, CW and TANF executives and directors, and leaders from other partner agencies.

Partners. Successful partnerships facilitated service coordination and, according to one grantee, contributed to the “many bridges [that] have been built.” In addition to the primary partnership (i.e., TANF-CW), most projects included secondary partners. These relationships increased communication across organizations that had previously operated as silos. They also helped grantees reduce barriers to services for families, such as long waitlists. Grantees’ networks extended outside their communities; a few identified their partnership with the state child protective services office as a strength. Grantees noted the benefits of sharing a vision or mission and resources, both financial and material (e.g., kitchen space, transportation).

“Working together on a [coordinated] TANF-CW service plan was novel when we started, but now it’s the expectation…. [We’re] not doubling services anymore.”

Coordination. Commitment from staff and stakeholders and the strength of early partnerships contributed to coordination among agencies, a key strength. Shared approaches, policies, and procedures eliminated duplication, streamlined services, supported accurate assessments of clients’ needs, and helped fill service gaps. As staff observed the benefits of coordination—for example, the ability to link underserved populations, such as youth and fathers, to services not accessed previously—they were motivated to coordinate further.
**Information sharing.** Co-location of staff or proximity of partners strengthened information sharing, both informally and formally. One grantee provided an example: “They (TANF) don’t hesitate to come over to see what CW plan is there (and vice versa). I (CW) may not see the family, but TANF sees them every, once a month. They (TANF) can send the family over to CW before they cut the TANF check.” The commitment and interpersonal relationships of staff noted earlier facilitated informal information sharing. Even more importantly, formal information sharing occurred through MOUs, releases of information (ROIs), and, for a few grantees, shared databases. This facilitated sharing of CW screening data, joint case planning, management, and responsiveness to families. A few grantees benefited from organizational structures in which the primary partners or all tribal social services operated under the same umbrella agency or division.

**Community support.** Community support contributed to successful grant implementation, according to grantees, particularly in terms of participant engagement. Grantees built awareness for services and events through newspapers, newsletters, brochures, and social media.

**Culturally relevant services.** Culturally relevant services (see chapter 4) facilitated family engagement. For example, grantees coordinated youth and elder activities, collaborated with tribal councils, and incorporated native languages into services. One grantee described the reintroduction of traditional values, teachings, and language into wraparound services as the most promising approach to helping dual-system families overcome substantial needs and service barriers. Another said it had long stressed the importance of culture with the state child protective services agency, but the agency was not responsive until the grant was implemented. Overall, the flexibility of the grant allowed grantees to “put families in [the] center” and to tailor programming to meet their needs.

**Involvement with the previous TT-CW grant.** Grantees who had participated in the previous grant said they built on that experience and lessons learned. Leadership that carried over, staff buy-in, approaches to sharing information, and coordination achieved under the previous grant supported coordination and systems-level changes during the subsequent grant. Many grantees said systems-level change required more than 4 years to achieve.

**Technical Assistance.** While the grant did not include a systematic procedure for receiving technical assistance (TA), the few grantees who noted that they had received TA from OFA, team members, or other entities said that it enhanced their ability to implement approaches such as wraparound, conduct evaluation activities and client assessments, and make data-driven decisions.
Challenges

As the grantees progressed in implementing key program activities, improving service coordination, and addressing the needs of children and families in their communities, patterns emerged in the types of challenges that grantees encountered during the 4-year grant (see exhibit 8).


- **Startup: Year 1**
  - Staffing delays
  - Grant award delays
  - Administrative/structural issues

- **Putting Into Action: Year 1**
  - Staff buy-in
  - Staff turnover
  - Coordination with primary partners

- **Early Implementation: Years 1 and 2**
  - Staff buy-in and staff turnover
  - Coordination with primary and secondary partners
  - Family engagement

- **Ongoing Implementation: Years 3 and 4**
  - Severity of families' needs
  - Coordination with secondary partners
  - Sustainability

**Startup delays and other early challenges.** Delayed grant award notice was among the earliest identified challenges. For a few grantees, it delayed hiring and thus delayed the timeline for implementing key practices and services. One grantee said tribal policies did not permit the hiring process to begin before grant funds were in place. In some cases, a lack of qualified applicants also caused extended hiring delays. Service silos and the different objectives of Tribal TANF and CW presented further early challenges in gaining staff buy-in and coordinating
services. Reduced funding led a few grantees to narrow the scope of their intended activities from the start.

**Staff turnover.** Grantees commonly experienced staff turnover in key project positions in the first year, and turnover continued throughout the grant for at least half of the grantees. Turnover added to issues of limited capacity and staff buy-in. Time intended for implementing coordinated services was lost to conducting hiring activities. The social services field recognizes high turnover among employees in human and social service agencies as a major challenge to effective service delivery (Barak, Nissly, & Levin, 2001). Staff turnover at partner agencies was also a challenge throughout the grant, periodically slowing momentum as staff covered for vacant positions, hired and trained new staff, and built relationships.

Turnover highlighted the need to improve training and training materials. By the final year of the grant, nearly half of grantees said they were planning or developing policies and manuals on interagency service coordination (see chapter 6). Informal approaches and interpersonal relationships helped grantees through periods of turnover, augmented for some by formal approaches such as interagency agreements or manuals.

**Limited capacity.** Capacity challenges related to both staffing (e.g., insufficient staffing, turnover, heavy caseloads) and resources (e.g., lack of funding, staff time, data systems, and space to implement key services). As the projects progressed, growing networks of resources and services eased challenges related to capacity and service gaps (e.g., nonexistent or limited resources for specific needs, waitlists). However, new partnerships presented other challenges related to different systems, lack of common intake procedures, and other administrative and staffing issues.

**Family engagement barriers.** By the third year, grantees increasingly noted barriers to engaging families. Lack of transportation and childcare options hindered program participation. Families were often difficult to reach because of limited phone or Internet access. They also feared stigma and were concerned about confidentiality.

**Complex needs.** Families faced substance abuse, mental health issues, poverty, housing instability, and historical and intergenerational trauma. Research in the field of human services indicates that these needs often have many causes and are resistant to immediate change (Gibson, Smyth, Nayowith, & Zaff, 2013). Over time, a few grantees described concerns about secondary trauma, compassion fatigue, and the physical safety of workers during home visits. Grantees recognized service gaps and engaged new partners to address complex needs.

**Data collection and tracking systems.** Challenges related to collecting data and tracking outcomes persisted throughout the grant. Many grantees lacked up-to-date data systems or the funding and staffing resources to develop and train staff on management information systems (MIS). Those with data systems sometimes struggled with technology, especially during staff
Incompatible databases between partners and concerns about confidentiality and information sharing across systems also influenced data collection efforts.

“Tribes are sovereign and choose their own laws, so when policies are put into place we have to work around them. But at the same time, we have federal grant requirements, so it’s difficult.”

**Other challenges.** Grantees noted other organizational and contextual challenges that were outside their control. For instance, it was challenging to coordinate staff schedules for services like wraparound across geographically large service areas. Support from tribal leadership was a project strength for many grantees, but a few grantees reported that their involvement in decision making regarding individuals and families slowed progress. Changes in tribal policies (e.g., disenrollment, funding limits, qualification for benefits) and organizational restructuring hindered coordination and service provision. State CW processes and regulations (e.g., time required for foster parenting licensing, capped caseloads for state-funded staff, reimbursement policies) affected staffing capacity, rates of referrals, and the focus of services. One grantee said the federal government shutdown in October 2013 resulted in Tribal TANF and CW staff furloughs, which directly affected TT-CW staff and services.
6. Sustainability: Paving the Way Forward

This chapter describes grantee achievements that supported sustainability of TT-CW project components and sets their sustainability planning efforts within a research-based framework. Most grantees planned to apply for additional grant funding while pursuing other strategies, such as establishing partnerships and community support to sustain key activities. A few grantees incorporated activities into existing tribal programs and set up protocols, policies, and procedures to coordinate services.

Grantee Achievements That Supported Sustainability

By the final grant year, grantees had made notable inroads toward changes at the systems, organizational, and individual/family levels. Grantees reported that successes at the systems and organizational levels enabled their programs to coordinate and deliver services, which in turn supported children and families (see exhibit 9). Together, these achievements created changes in thinking, practice, policies, and procedures within and across partner agencies. They also fostered support among service providers for increased coordination and services to improve the safety, permanency, and well-being of tribal children and families. The program sustainability literature suggests that “the continuation of an innovation must become a primary goal if evidence shows that it meets the needs of a targeted population” (Johnson, Hays, Center, & Daley, 2004).

Sustainability Planning

Toward the end of the grant, grantees described their plans to sustain project services and activities. A majority noted that they had begun planning for sustainability by year 4. They worked throughout the grant to build sustainability capacity, which has been defined as “the existence of structures and processes that allow a program to leverage resources to effectively implement and maintain evidence-based policies and activities” (Tabak et al., 2015).

The Program Sustainability Framework (Washington University, 2012) describes key organizational and contextual factors for sustaining a new service or practice (exhibit 10). These include organizational capacity, program adaptation, program evaluation, communications/dissemination, strategic planning, funding stability, political support, and partnerships. The factors align with many of the sustainability efforts described by TT-CW grantees during the final year, and they highlight the importance of leveraging organizational and community resources beyond grant funding to sustain a project. Following are examples of grantees’ efforts in each area of the framework.

Funding stability: establishing a reliable and sustainable financial resource. Most grantees planned to obtain additional funding to sustain their projects, mainly through the 2015 TT-CW grant opportunity or other flexible funding sources. However, such “soft” funding is not stable or ongoing. A more reliable way to sustain funding is to identify a variety of funding sources. Half of the grantees explored the use of existing tribal funds to support project staff and activities. They also explored dependable and flexible sources of funding such as TANF, Title IV-E, and child support reinforcement as potential funding sources.

Partnerships: fostering lasting connections with project stakeholders. The grant provided an opportunity for projects to adopt new ways of building lasting tribal partnerships to serve families. Nearly half of the grantees described plans to maintain strong connections with project stakeholders through—

- Participating in quarterly meetings with the state CW agency to increase caseworker coordination with tribal staff
• Involving both TANF and CW in conversations about how to sustain project work
• Maintaining personal and professional relationships between the tribe and the county or state CW agency
• Formalizing expectations for coordination across agencies
• Integrating project staff and activities into other tribal programs with similar target populations and goals

Organizational capacity: building the internal support and resources needed to manage services and activities beyond the life of the grant. Adequate staffing is critical to organizations' ability to continue providing services. Examples of how grantees planned to maintain qualified staff included mentoring former project participants or volunteers to deliver services in their communities and developing web-based training tools to train new TANF or CW case managers. Grantees sustained their capacity to coordinate with partners by developing formal protocols for information sharing through ROIs and MOUs. One grantee increased its organizational capacity for intertribal collaboration by co-locating TANF and CW staff and developing a shared MIS.

Program evaluation: documenting results to inform decision making and gain support. Evaluation data that show a project’s impact can make a strong case for sustainability. While most grantees had formal assessment tools in place to inform practice and evaluate outcomes, a majority had not yet analyzed data from these assessments by the final grant year. This may be due to evaluation capacity issues across the grantees. TT-CW funds did not support local program evaluation. A few grantees used CW and case record information (e.g., case notes, out-of-home placements, child protective services referrals) to document outcomes and reflect on program performance. Three grantees used other funding sources to work with external evaluators to collect and analyze data.

Program adaptation: tailoring services and activities to fit stakeholder needs. Several grantees described ways in which they planned to continue or further modify their service models to align with other tribal programs. Strategies included focusing on a targeted high-risk population, incorporating a trauma-focused approach to service delivery, introducing a “neutral” coordinator position between the TANF and CW programs, and focusing on fatherhood involvement.

Communications/dissemination: communicating information about TT-CW projects with stakeholders. Several grantees had strategies in place to market their projects and increase community awareness of TT-CW services. For instance, grantees discussed their projects with tribal councils to gain their support, shared information regarding the successes of their service models with other tribes to promote replication, and advocated for project services and activities with external partners (e.g., county and state CW agencies). A majority of grantees hosted and attended community events and developed pamphlets, flyers, and brochures to inform the community about their services. A few developed advisory groups and committees to
share information about project events with key partners and stakeholders. One grantee worked with a media consultant to produce a short digital video on the project’s benefits.

**Political/environmental support: building organizational and community support for the project.** Staff buy-in has been shown to be critical to implementing new social service initiatives (Fixsen, Blasé, Naom, & Dude, 2015; Ridzi, 2004). Without support from frontline workers, TT-CW coordination could not be fully implemented or sustained. Grantees garnered buy-in for project activities from CW and TANF directors and staff as well as key stakeholders such as tribal leaders. By years 3 and 4, most communities recognized the value of continuing or expanding TT-CW services. For one grantee, support from tribal leaders led to a promise to expand the resource center model in two towns so that more families could access family strengthening resources and programs within walking distance of their homes. For some grantees, interpersonal conflicts between TANF and CW leaders hindered buy-in.

**Strategic planning: establishing long-term plans for the project.** By the final year, half of the grantees had engaged in strategic or sustainability planning. Two grantees developed a formal agency strategic or sustainability plan that included components of the TT-CW work. Three grantees made plans to expand services into native villages, while other grantees developed policies mandating interagency service coordination and manualized their service models for future replication. For these grantees, the tribes took ownership of the projects and saw the value of integrating TT-CW practices into program operations.
7. Lessons Learned and Recommendations: Informing Future Directions

This final chapter presents lessons learned from the TT-CW grantees’ journey and recommendations for policy makers, funders, and the field.

Lessons Learned

Key lessons learned related to the importance of committed project leadership and staff, grantees’ need for programmatic guidance and TA, grantees’ data collection capacity, and the study’s relational approach.

Committed leadership, staff, and stakeholders were critical to project implementation. They contributed to the achievement of high levels of service coordination of services among project partners, a key result of the TT-CW projects. Dedicated leaders maintained project momentum. Leaders who had been involved in the previous coordination grant were committed to building on existing relationships with partners. Those who joined the project at the beginning of this grant or following turnover were also drivers of successful implementation.

“We could have used programmatic TA on implementation early on—it would have been very useful in the early months of the grant.”

“Programmatic TA on implementation science would have been useful—we did learn about that, but much later.”

Grantees realized that programmatic TA could be helpful, but only a few accessed it. Although the funding announcement noted that programmatic TA would be available, and several grantees later noted that they could have benefitted from it, they said it was unclear how to request TA. Those that did receive TA, such as training related to wraparound, found it beneficial.

Grantees’ challenges with data collection capacity hindered project tracking. Challenges related to data collection and tracking existed throughout the grant, although TA in this area was offered. Many grantees did not have solid data systems and lacked the resources to develop such systems or to train staff to collect data. While grantees were not required to systematically collect, monitor, or report service provision data (e.g., numbers of participants and families served), several grantees did collect data and were able to report unduplicated numbers of participants.

Some grantees used case record data to track clients’ progress toward goals, alcohol and drug assessment results, number of cases closed, and TANF and CW caseloads, although many relied more on personal narratives from clients and staff to describe progress and achievements. A

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3 The study team was available to provide TA for data collection and project tracking. While many grantees accessed such TA, participation was voluntary and sporadic.
few grantees further noted that what they viewed as positive and culturally relevant indicators of change were hard to articulate or quantify, and that data on the number of clients served was not necessarily the best indicator of the reach or impact of services.

While grantees’ data capacity made it challenging to assess project outcomes, grantees perceived that their projects helped their communities. While the grant funding was modest, it allowed for development and provision of culturally informed, targeted services to youth and families and dissemination of information about the services. Interagency collaboration increased and was solidified in many communities. Service coordination increased, particularly between Tribal TANF and CW programs. Grantees noted—

- “This has been huge—even with the challenges.”
- “The grant was small but it was really needed and has made a big difference.”
- “TANF and CW are an appropriate marriage!”

The study’s relational research approach was effective. The collaborative approach included initial grantee engagement, ongoing dialogue and interaction, assistance with data collection and tracking, and support for peer learning. It appeared to be beneficial and to facilitate trust and positive working relationships between the study team and the grantees. The following factors facilitated the relational approach:

- Negotiating and establishing the collaborative relationship early on
- Building mutual trust and respect
- Having a single point of contact, a grantee liaison, for each grantee
- Recognizing that researchers must aim to understand the history, culture, and circumstances of each tribe and tribal community
- Being flexible and open to changes in grantees’ circumstances, timeframes, and preferences

Recommendations

Following are recommendations for consideration by policy makers, funders, and the field.

Consider resource needs for up-to-date data systems. Few tribal CW programs have sophisticated data systems; some track data with pen and paper. This may limit their ability to track data (including participant data) for projects including grant-funded initiatives.

Incorporate funding for local evaluation in the grants. While several grantees noted that the descriptive study was useful and removed the pressure to find funding for local evaluation, other grantees would have preferred grant funding for local evaluation, perhaps in addition to
an external study. Local evaluation could provide grantees immediate feedback and resources to collect data for the external study.

**Establish planning years and longer grant projects to maximize potential for systems change.** Most grantees experienced early delays that shortened the time available for implementation of activities and services. For example, many could not begin hiring staff until funding was secured. Grantees may have had insufficient time to achieve observable, measurable outcomes. Several grantees noted that a formal planning phase would have been helpful, particularly for first-time TT-CW grantees who lacked existing infrastructure for service coordination and activities.

**Establish a clear, streamlined process for requesting programmatic TA.** While the funding announcement noted that programmatic TA would be available, many grantees did not request it and said it was unclear how to do so. Several said programmatic TA would have been particularly helpful early in the grant.

**Encourage peer learning and sharing.** Grantees uniformly reported that opportunities for peer learning and sharing of approaches, successes, and challenges with other grantees were very useful. Grantees tended to be strapped for time, particularly in CW programs where limited staff and resources were the norm. They provided positive feedback on organized opportunities for cross-grantee communication such as annual grantee meetings (in particular, networking or interactive activities) and webinars. The study team also periodically connected grantees with others who were implementing similar programming or had similar challenges.

**Conclusion**

The prevention of childhood maltreatment and preservation of AI/AN families has long been a priority for tribes and tribal organizations. Yet children from tribal communities are disproportionately likely to experience poverty and to experience adverse conditions like inadequate housing, substance abuse, and domestic violence that place children at risk for abuse and neglect. Recognizing the interrelatedness of economic opportunity and child and family wellbeing, the Office of Family Assistance funded 14 tribes and tribal to coordinate Tribal TANF and CW services. This descriptive study tracked grantees’ experiences coordinating and providing direct, culturally relevant services. Despite challenges, grantees demonstrated that through effective interagency coordination, organizations can pool scarce human and material resources, share expertise among staff, reduce duplication of efforts, expand services, and attend to the needs of families.

Future grant making around Tribal TANF and CW collaboration should continue to include flexibility for grantees to provide tailored, culturally relevant services. At the same time, systematic access to technical assistance around program planning, implementation, data-based decision making, and sustainability may help grantees to more quickly build capacity and to achieve systems level changes. These front-end investments may yield long-lasting benefits in

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4 The study team facilitated Community of Learning webinars on topics of interest to grantees, including sustainability planning, logic models, strategies for engaging partners, and collecting and using stories for reporting and sustainability.
terms of tribal communities’ abilities to prevent child abuse and neglect and to support the well-being of generations to come.
References


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