

Name of Lead Agency	Children’s Friend and Service
Location	Providence, RI
Title of Project	Project Connect
Program Option	RPG 5-Year Grant; \$500,000 annually
Geographic Area and Congressional District Served	Rhode Island Congressional Districts 1 & 2
Brief Program Description	<p>Project Connect worked with high-risk families affected by problems of parental substance abuse and involved in the child welfare system. Project Connect served families in all of Rhode Island’s 39 communities. Staff offered home-based counseling, nursing services and service linkage to services such as substance abuse treatment, safe and affordable housing and adequate health care for parents and their children. The program worked collaboratively with other providers, notably the Rhode Island Department of Children, Youth and Families (DCYF), to coordinate services for families and to advocate for improvements in service delivery. The program staff was co-located in each of DCYF’s regional offices, facilitating referrals and increasing child welfare worker’s access to expertise on substance abuse.</p>
Target Population	<p><b>Project Connect worked with:</b></p> <ul style="list-style-type: none"> <li>• High-risk families affected by problems of parental substance abuse and involved in the child welfare system</li> </ul>
Participants Served	<p>Children: 821 Adults: 589 Families: 390</p>
Major Goals	<p><b>Major program goals included:</b></p> <ul style="list-style-type: none"> <li>• Expanding statewide a proven, evidence-based comprehensive community-based program for substance-affected families involved in the child welfare system</li> <li>• Establishing a coordinated, system-wide response and training program for child welfare and community providers regarding children and families affected by a parent’s use of methamphetamine and/or other substances</li> </ul>

	<ul style="list-style-type: none"> <li>Increasing service coordination throughout Rhode Island between DCYF, substance abuse treatment providers, the medical community, the court and community-based agencies</li> </ul>
<p><b>Key Major Program Services</b></p>	<p><b>Case Management and In-Home Services</b></p> <ul style="list-style-type: none"> <li>Intensive Case Management</li> <li>Wraparound/Intensive In-Home Comprehensive Services</li> </ul> <p><b>Mental Health and Trauma Services for Adults</b></p> <ul style="list-style-type: none"> <li>Mental Health Services</li> <li>Trauma-Informed Services</li> </ul> <p><b>Specialized Outreach, Engagement and Retention</b></p> <ul style="list-style-type: none"> <li>Co-location of Staff</li> </ul> <p><b>Screening and Assessment – Child Welfare and Other Children’s Issues</b></p> <ul style="list-style-type: none"> <li>Screening and Assessment for Child Welfare Issues</li> <li>Specialized Child Screening and Assessment – Developmental</li> </ul> <p><b>Screening/Assessment – Substance Use and Other Adult Issues</b></p> <ul style="list-style-type: none"> <li>Screening and Assessment for Substance Use Disorders</li> <li>Specialized Screening and Assessment – Family Functioning</li> </ul>
<p><b>Partner Agencies and Organizations</b></p>	<p><b>Child Welfare</b></p> <ul style="list-style-type: none"> <li>Department on Child, Youth and Families</li> </ul> <p><b>Substance Abuse</b></p> <ul style="list-style-type: none"> <li>Institute for Addiction Recovery at the Rhode Island College and the Women in Recovery Task Force</li> </ul> <p><b>Courts</b></p> <ul style="list-style-type: none"> <li>Family Treatment Drug Court (FTDC)</li> </ul> <p><b>Tribal</b></p> <ul style="list-style-type: none"> <li>Criminal Justice, Law enforcement, Legal and Related Organizations</li> </ul> <p><b>Mental Health</b></p> <ul style="list-style-type: none"> <li>Department of Behavioral Healthcare, Developmental Disabilities and Hospitals</li> </ul>
<p><b>Evaluation Design and Comparison Group Type</b></p>	<p>Quasi-experimental</p> <p>Same-time, Matched Population-Level</p>

<p><b>Performance Indicators</b></p>	<p><b>Safety</b></p> <p><u>Recurrence of Maltreatment:</u> A total of 357 families were tracked over the five years to identify the extent to which families participating in the program were re-indicated for abuse or neglect. The six-month recurrence rate for Project Connect children was 2.1 percent. The national standard established by the Children’s Bureau calls for a six-month rate no higher than 5.4 percent and in 2010, Rhode Island reported a six-month recurrence rate of 9.8 percent.</p> <p><b>Permanency</b></p> <p><u>Reunification:</u> Among those children who were removed from the home after their initial contact with Project Connect, 77.0 percent were reunified with their parents.</p> <p><b>Adult and Child Well-Being</b></p> <p><u>Substance Exposed Newborn:</u> Babies born to Project Connect parents were typically born substance-free; 91.0 percent of the children born while their parents were receiving services tested negative for illicit substances at their birth.</p> <p><u>Mental Health and Parenting:</u> Seventy-six percent of the parents who were highly involved in services showed improvements in their mental health; 72.0 percent showed improvements in their parenting abilities.</p> <p><b>Recovery</b></p> <p><u>Completion of Substance Abuse Treatment:</u> Sixty-three percent of the parents receiving substance abuse treatment successfully completed treatment. Parents who were highly involved in Project Connect services were the most likely to complete treatment.</p>
<p><b>Sustainability Status</b></p>	<p>The Project Connect contract for all the foundational services developed and provided over the past 20 years will continue via a direct contract with the state through DCYF. Services will continue to be billed directly to Medicaid. Children’s Friend and Services has also committed to keeping the program services statewide and the staff members co-located in the DCYF regional offices.</p> <p>Children’s Friend and Services was awarded a four-year demonstration grant through the National Abandoned Infants Assistance (AIA) Resource Center. The grant allows agency programs to work collaboratively on: 1) increasing protective factors; 2) strengthening families; and, 3) improving overall well-being for children of families affected by substance abuse, HIV/AIDs or other significant health issues.</p>