BRIEF PROGRAM DESCRIPTION

The Oklahoma Partnership Child Well-Being Initiative Phase-3 (OPI-3) is a multifaceted approach to address the presence of alcohol and other drug abuse (AOD) within the context of Oklahoma’s child welfare system. The OPI-3 will build on Oklahoma’s collaborative infrastructure to meet the needs of families involved with both substance use disorder treatment and the child welfare systems. The project will implement the Attachment and Biobehavioral Catch-Up (ABC) intervention and disseminate best and evidence-based practices on the identification of newborns with prenatal substance exposure and Fetal Alcohol Spectrum Disorder to various child serving community stakeholders.

The OPI-3 is anchored in the four objectives listed below, and they will impact participants at distinct points in the life of the child welfare case. The OPI-3 project objectives are as follows:

- Increase the well-being of children and families affected by substance use
- Improve permanency outcomes for children affected by parental substance use disorders
- Ensure safety of children within families affected by substance use; and
- Strengthen state’s capacity to deliver collaborative and integrated services.

TARGET POPULATION AND PROJECTED NUMBERS SERVED

The target population for the ABC intervention are families affected by substance use with children ages 0-5 in Oklahoma’s two largest counties, who are screened as needing the ABC intervention. The target population for workforce development training will be statewide child welfare, health care professionals, and certified substance use disorder treatment providers.

The project will serve 630 families with the ABC intervention. The project estimates that 1,500 child welfare, substance use disorder treatment providers, and health care professional will participate in substance-exposed newborn and Fetal Alcohol Spectrum Disorder training annually, for a total of 7,500 professionals trained during the five-year grant period.
MAJOR PROGRAM GOALS

GOAL: The purpose of the project is to increase the well-being of and improve the permanency outcomes for children affected by substance use.

KEY MAJOR PROGRAM SERVICES

The major program services that OPI-3 project will implement are:

- **In-Home Services**
  - Attachment and Biobehavioral Catch-Up (ABC)

- **Parenting/Family Strengthening**
  - Parenting Skills Training/Education

- **Cross-Systems/Interagency Collaboration**
  - Training on substance exposed newborns and Fetal Alcohol Spectrum Disorder

- **Evidence-Based Practices**
  - Attachment and Biobehavioral Catch-up (ABC)

PARTNER AGENCIES AND ORGANIZATIONS

- Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS)
- Oklahoma Department of Human Services (OKDHS)
- University of Oklahoma Health Sciences Center on Child Abuse and Neglect (OUHSC)
- University of Delaware Infant Caregiver Project
- University of Kansas Center for Research, Inc., University of Kansas, School of Social Welfare

EVALUATION DESIGN

OUTCOME STUDY DESIGN: RANDOMIZED CONTROLLED TRIAL (RCT)

EVALUABILITY ASSESSMENT

The overall evaluation of the Oklahoma Partnership Initiative-3 (OPI-3) has been designed and will be led by researchers at the University of Kansas, School of Social Welfare. The administration of clinical services and on-site data collection will occur through a subcontract with the University of Oklahoma Health Sciences Center. The local evaluation has an impact study and a process study. OPI-3 is also participating in the RPG cross-site evaluation studies of family and child outcomes, program implementation, and collaboration among RPG grantees and partners.

Impact study design

OPI-3 will use a randomized controlled trial to examine the impact of its RPG services. Members of the program group will receive Attachment Biobehavioral Catch-Up (ABC), a home
visiting program designed to address caregiver-child attachment and regulatory problems in young children over 10 sessions. Members of the comparison group will receive business-as-usual services from community partners and child welfare agencies. The impact study will include 630 families, with 315 in the program group and 315 in the comparison group. The grantee will examine impacts in the following domains: permanency, safety, child well-being, family functioning, and recovery.

Data sources include administrative data and information gathered by data collectors using standardized instruments. Staff from the University of Oklahoma Health Sciences Center will conduct data collection with standardized instruments for both the program and comparison groups. Program effects data will be collected at two time points for each family: (1) when families begin services; and (2) at the end of services. Administrative data will be collected on both groups for the duration of RPG funding (through 2022).

**Process study design**

In the process study, the grantee will examine fidelity to program implementation plans and standards, the types of modifications made to the intervention, variation in how the intervention is implemented, and the level of coordination between services. The grantee will also evaluate the extent to which OPI-3 achieves targeted proximal outcomes (for example, the dosage of services for families) and assess local and system-wide strengths of or barriers to implementation. The process study will track the establishment of partnership agreements and staff training or coaching. Data sources include program documents, reflections from the steering committee, administrative data, fidelity data, staff interviews, video monitoring of sessions, and onsite observations.

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**SUSTAINABILITY STRATEGIES AND ACTIVITIES**

The OPI-3 activities will enhance data-driven infrastructures and ensure protocols and processes are in place to continue when grant funding has expired. The partners have researched state Medicaid billing options and have confirmed treatment provider’s ability to bill Medicaid for evidence-based interventions. Enrollment in the planned intervention and sufficient sample sizes have been calculated in order to generate program results by the end of year 3 of the funding, which will allow project leadership and sites ample time to plan for training of trainers, fiscal sustainability infrastructure, dissemination of findings, and garnering community support. The project evaluator’s outcome evaluation will specifically provide a helpful cost-benefit analysis. The ODMHSAS will utilize the most current/applicable model to analyze the cost-effectiveness of the OPI-3 project when compared to substance abuse treatment as usual.

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