The RPG program focuses on building system-level capacity and enhancing safety, permanency, and well-being outcomes for children and their families who are affected by substance use disorders. The grants support interagency collaboration and the integration of programs, services, and activities. Historically, child welfare services and substance use disorder treatment have been fragmented, making it difficult for families to navigate the dependency court process and meet the requirements of both systems. The RPG program provides an opportunity to address these issues through partnerships, coordinated care, and collaboration. It also seeks to expand the evidence base of programs and practices in the fields of child welfare and substance use disorder treatment by requiring grantees to:

- Identify and use appropriate practices that are indicated by evidence to be well-supported, supported, promising, or emerging practices
- Adapt these practices for the children, parents, and families they serve, where appropriate
- Implement and participate in local and cross-site evaluation of the grant program to expand the evidence base of services for families involved in the child welfare and substance abuse treatment systems

PAST AND CURRENT GRANTEES
Fewer removals from the home occurred, and there was increased permanency and reunification among children who experienced removal.

There was an increase in substance use disorder treatment enrollment and completion, and a decrease in high severity substance use, following RPG program entry.

2007-2019: The RPG Program has served:
- 34,693 Children
- 25,131 Adults
- 20,310 Families

RPG History: The Child and Family Services Improvement Act of 2006 reauthorized the Preserving Safe and Stable Families (PSSF) program. This legislation provided funding to implement a targeted grant program to regional partnerships to improve permanency outcomes for children affected by methamphetamine and/or substance abuse. This legislation was a direct response to the evidence that parental substance use is a key factor underlying the abuse or neglect experienced by many children in the child welfare system. Since the Children’s Bureau awarded the initial 53 grantees in 2007 and following the 2011 reauthorization of the Child and Family Services Improvement and Innovation Act, four more rounds of grants were funded. In 2018, the Bipartisan Budget Act of 2018 reauthorized the RPG program through 2021. An additional eight new grantees were awarded in October 2019, for a total of 109 funded projects in 38 states. The 2018 reauthorization of the RPG program now requires a planning phase prior to grantees’ implementation of their project and includes a change in mandatory partners.

Regional Partnership Grant Program over Time:
- 109 Total Grantees
- 6 Rounds
- 38 States
- 391 Counties

Regional Partnership Grant Program over Time:
- 9 Grantees
  - have served or are serving primarily American Indian/Alaska Native families

Child safety as measured by substantiated maltreatment, abuse, and neglect, significantly improved following RPG involvement.

Fewer removals from the home occurred, and there was increased permanency and reunification among children who experienced removal.

Child well-being across two measures improved: reduced behavior problems, and improved socialization. Executive functioning remained stable.

There was an increase in substance use disorder treatment enrollment and completion, and a decrease in high severity substance use, following RPG program entry.

Upon exit, opioid use decreased from 16% to 4% for prescription opioids and from 4% to 2% for heroin.

Source: Emerging Findings from the 2012-2017 National Cross-Site Evaluation of the Regional Partnership Grant (RPG) Program
**Strengthening Collaborative Capacity**
Grantees establish committed and coordinated collaborative practices across systems and organizations. RPGs show that by investing time, resources, and effort into broad-based interagency partnerships, integrated services can be developed that result in positive child, parent, and family outcomes.

**Family-Centered Substance Use Disorder Treatment**
Grantees focus on providing comprehensive family-centered treatment to address the biopsychosocial nature of substance use disorders as they affect the entire family. They implement strategies to make it easier to identify and engage parents in the child welfare system with substance use disorders. Strategies are also designed to integrate parent-child evidence-based interventions with substance use disorder treatment.

**Medication-Assisted Treatment**
Grantees address the growing opioid crisis by integrating medication-assisted treatment into their service delivery. They create a coordinated, multisystemic approach grounded in early identification and interventions that ensure families gain access to the range of services they need.

**Parenting and Family Strengthening Programs**
Grantees implement evidence-based interventions to help families improve parenting skills and increase child skills. Interventions include the Nurturing Parenting Program, Celebrating Families!, Parent-Child Interaction Therapy.

**Training and Staff Development**
Grantees provide cross-training to a broad range of professionals, including partners and community providers on evidence-based and evidence-informed interventions and practices.

**Trauma-Focused Services**
Grantees recognize that individuals with substance use disorders and their children often have histories of trauma and respond by providing evidence-based trauma services to meet the needs of participants that improve overall treatment outcomes. Examples include: Trauma-Focused Cognitive Behavior Therapy (TF-CBT), Seeking Safety, Helping Women Recover.

**Services to Pregnant and Postpartum Women and Their Families**
Grantees address the specific needs of pregnant and postpartum women with substance use disorders by creating a collaborative approach between medical providers, child welfare, substance use treatment providers, and early childhood services providers to help coordinate services and address the needs of the mother, infant, and family. Examples of these services include the Attachment and Bio Behavioral Catch Up, Pregnancy and Parenting Partners program.

**In-Home Parenting and Child Safety Support for Families**
Grantees provide services to parents whose children have been removed or are at risk of removal by partnering with service providers in their communities to provide in-home parenting and support to families. Home visiting programs may include: Child-Parent Psychotherapy, Promoting First Relationships, Healthy Families America.
RPG grantees provide services and supports to children, parents, and families through interagency collaboration and community partnerships. Successful grantees have established collaborative infrastructures capable of building on the region’s capacity to meet a broad range of needs of families involved with child welfare, substance use disorder treatment, dependency courts, mental health children’s services, housing, primary health care, education, early childhood, local evaluation, in-home services, universities, and resource centers. Together, these partners work to coordinate and integrate their efforts to produce improved outcomes for children, parents, and families.

**THE IMPORTANCE OF LEADERSHIP:** Effective leadership is critical to successfully plan, implement, sustain, and replicate proven RPG practices beyond the grant period. As such, the lead agency and its partners help ensure the long-term sustainability of these projects. A state agency lead, for example, may be effective in driving larger policy and practice changes and in understanding how to align and integrate RPG efforts with other large scale systems reform.

**ESTABLISHING CLEAR SCREENING AND REFERRAL PROCESSES PRIOR TO FULL PROGRAM IMPLEMENTATION:** Most grantees have experienced some degree of challenge in obtaining an adequate number of participant referrals to the program. Grantees have addressed this challenge by creating detailed and sound plans for the referral process and establishing enrollment criteria. They have engaged in systems walkthroughs that seek to address barriers in enrollment and service provision.

**DATA-DRIVEN DECISION-MAKING AND DATA SHARING:** Grantees obtain data on child welfare and substance use disorder treatment to assist their local evaluations, measure and monitor outcomes and to use for the national cross-site evaluation. Grantees work with their local, regional and state partners to access this data, which requires establishing relationships. Grantees and their partners integrate program implementation and evaluation activities, and use tools such as data dashboards to support these relationships and assist with program policy setting.

**RPG PROGRAMMATIC TECHNICAL ASSISTANCE:** RPG projects receive technical assistance to assure robust implementation and operation of their projects. The Center for Children and Family Futures was awarded the National Center on Substance Abuse and Child Welfare (NCSACW) contract to provide this assistance. The NCSACW, is an initiative co-funded by the Children’s Bureau in the Administration on Children, Youth and Families, and the Substance Abuse and Mental Health Services Administration’s Center for Substance Abuse Treatment. Technical assistance to grantees focuses on collaborative practice and policy; trauma-informed services; evidence-based and evidence-informed services, treatment and recovery support services; family-centered intervention and support; and program sustainability.

**RPG NATIONAL CROSS-SITE EVALUATION AND EVALUATION-RELATED TECHNICAL ASSISTANCE:** RPG projects participate in evaluation activities at the local and national cross-site level. Mathematica was awarded the contract to provide evaluation-focused technical assistance and conduct a national cross-site evaluation of current projects. For this project, Mathematica (1) reviews proposed RPG programs, partnerships, and local evaluations; (2) provides evaluation technical assistance to strengthen grantees’ local evaluations and support their participation in the national cross-site evaluation; (3) collects performance measures from grantees and develops a report to Congress on their progress; and (4) conducts a cross-site evaluation of the implementation, outcomes, and effectiveness of RPG programs.

**FOR MORE INFORMATION ABOUT THE RPG PROGRAM PLEASE CONTACT:**

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NCSACW RPG website: [ncsacw.samhsa.gov](http://ncsacw.samhsa.gov)  Mathematica: [mathematica.org](http://mathematica.org)

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